



Buck Family  
Fund



# Older Adults, Healthy Eating Active Living Needs Assessment

April 19, 2016

# Guiding Questions

Who are the older adults in Marin County? What is their health status? What are their health needs?

What services and resources are available to older adults in Marin? What barriers exist to accessing those services? Who participates/utilizes services?

What do older adults in Marin need to eat healthy and stay active?

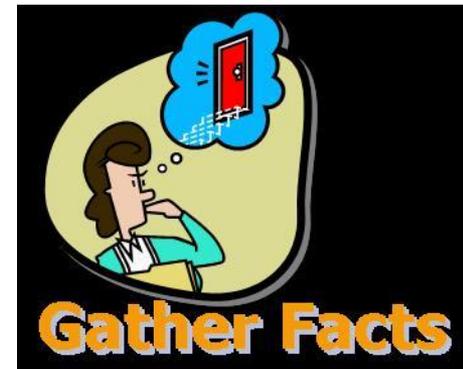
# Data for Action

**"Data by itself is useless.  
Data is only useful if  
you apply it."**

**Todd Park**  
InspirationBoost.com

# Data Sources

- American Community Survey (2010-2014)
- California Health Interview Survey (CHIS)
- Marin County Area Agency on Aging (AAA) Older Adults Needs Assessment (2015)
- Home Delivered and Congregate Meal Programs Data (2014-15)
- Cal Fresh (2015) Participation Data
- Focus Groups (2015)



# Focus Groups

1 group with providers

Four resident groups (West Marin, Marin City, and San Rafael [2])

58 residents participated in focus groups

1 group in Spanish and Vietnamese

31% Latino (compared to 4% of Marin's 60+ population)

16% African American (compared to 1.6 % of Marin's 60+ population)

11.6% Asian (compared to 4.5 % of Marin's 60+ population)

86% Women (compared to 55% of Marin's 60 + population)

# Data Limitations and Cautions

- ❑ Small sample sizes even when data is pooled limits stratification by age, geographic, ethnicity, income
- ❑ Lack of consistent year over year data collection
- ❑ AAA Older Adult Needs Assessment used a convenience sample limiting generalizability but this is mitigated by size of sample
- ❑ Recruitment strategy and self selection of focus group participants
- ❑ Missing income information on program participation data limits analysis by income groups.



# Ensuring Good Data

- ❑ Data stability key filter for inclusion of data in the needs assessment and references noted in appendix
- ❑ Data stratified by age and income where possible and statistically stable
- ❑ Triangulation with multiple data sources used where possible

# Key Findings

## Key Finding # 1: Demographics and Economics

- Nearly a quarter of Marin County residents are over age 60.
- Approximately 6% of older adults have incomes below the Federal Poverty Level
- 21 % of adults 65+ are economically insecure, falling into an eligibility gap above the federal poverty level but below the Elder Index.
- 44 % of **all** older adults in Marin County live alone
- 25% of adults 60+ rent
- 58% of renters spend 30% or more of their income on rent

**By 2030, 33% of Marin  
County's population will  
be 60+**

# Discussion of Key Finding # 1

## Implications

What are the implications of Key Finding #1 when considering strategies to address nutrition and physical activity for older adults?

# Key Findings

## Key Finding # 2: Services and Resources

- Community resources are a lifeline for healthy eating and active living; however, the affordability of programs is a concern and some programs have room to improve.
- Seniors acknowledged that not all of their peers are accessing services and offered suggestions for linking those seniors to services.

**Affordability is a consideration for many seniors that goes beyond program costs and is inclusive of the full cost of accessing a service such as transportation to and from a program or service.**

# Key Findings

## Key Finding # 3: Barriers to Healthy Eating & Active Living

Seniors in Marin County face a number of barriers to maintaining a healthy and active lifestyle, including personal barriers such as **physical limitations, financial constraints, and a lack of information about healthy food options**. Seniors also face **environmental barriers** such as limited transportation options and a lack of healthy food retail in parts of the county.



# Overall Health & Access to Care

39% of residents with incomes between 100-300% of FPL report being in **excellent or very good health** compared to 71% of residents with incomes above 300% FPL (CHIS, 2011-2014)

27% of residents with incomes between 100-300% FPL have **delayed or did not get medical care** they felt they needed compared to 8% of residents with incomes above 300% FPL (CHIS, 2007 & 2009)

# Healthy Eating

47% of older adults with incomes between 100 and 300% FPL report **consuming 5 or more servings of fruits and vegetables per day** compared to 58% of older adults with incomes above 300% FPL (CHIS, 2005).

46% of respondents below the Elder Index report **running out of money for food each month** compared to 7% of older adults above the Elder Index (Marin County AAA Older Adult Needs Assessment, (2015).

Respondents below the Elder Index are 2.2 times more likely to **report eating alone most of the time** than those above the Elder Index (Marin County AAA Older Adult Needs Assessment, 2015)



# Healthy Eating

## Focus Group Findings

Physical limitations are a barrier to cooking and being able to easily access healthy food. *Key problem for those living alone*

High cost of healthy food is a challenge for maintaining a healthy diet. *Challenge is pronounced in West Marin where retail options are limited and tend to be specialty oriented and Marin City where a full service grocery store is not available*

Transportation is a substantial barrier to healthy eating. *Grocery stores and pantry sites are not in close proximity to homes and carrying groceries even short distances is a challenge. For older adults who drive or have access to a car, cost of gas is a barrier.*

Nutrition information is lacking and dietary recommendations are often confusing

# Discussion Questions

## Reflection about Data

What did you learn from this data that you didn't already know?

How does the data presented validate your experience?

Where does the data conflict with your experience?

What's the most important takeaway?

# Physical Activity

39% of older adults report that they **exercise at least 20 minutes per day 3-4 times per week**, 43% report exercising at least 20 minutes per day every day *(Marin County AAA Older Adult Needs Assessment, 2015)*

2009 estimate indicates that 36% of all older adults 60+ are **sedentary or do not engage in physical activity** *(CHIS, 2009)*

# Physical Activity

## Focus Group Findings

Physical limitations prevent many seniors from accessing active living resources and maintaining an active lifestyle

Financial constraints prohibit some older adults from accessing active living resources in their communities. *No and low cost options such as walking and hiking were acknowledged and concerns were raised about no and low cost programs that rely on volunteers leading to irregular schedules.*

Transportation is a significant barrier for older adults seeking to participate in active living programs outside of their homes.

Older adults face environmental barriers such as adequate street lighting, availability of sidewalks etc. to accessing active living resources.

# Community Resources

## Focus Group Findings

Community resources are a lifeline for healthy eating and active living.  
*Opportunities for improvement were noted.*

Affordability of programs is a concern. Nominal fees can be prohibitive when factoring in the cost of gas or transportation.

Language and cultural barriers might keep some seniors from accessing services. *For providers engaging with conversations with clients/participants about food choices, culturally responsive menus at congregate meal sites and for residents accessing healthy food resources including grocery shopping.*

Traditional media was identified as the best way to reach peers who are disconnected from services and participants identified advocates and peers to serve as conduits for information.

Conversations with health care providers about diet and activity are occurring but not consistently



# Community Resources

## Program Utilization- Cal Fresh

Statewide, only 12% of older adults eligible for Cal Fresh are utilizing the program (California Food Policy Council, 2012)

As of September 2015 1, 471 Marin adults 60+ were enrolled in Cal Fresh

# Recommendations

- More robust local data
- Elder Economic Security Index for policy and program development
- Policies that address root causes of inequalities
- Voices of seniors should be central
- Foster multi-sector collaborative funding efforts to create healthier communities
- Collaborate and share information about programs and data
- Infuse an equity lens
- Address changes to the built environment
- Address transportation

