

STATE OF AGING IN CENTRAL INDIANA



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INTRODUCTION

Is Central Indiana a good place to grow old? Are the basic needs of older adults in Central Indiana being met? What are emerging trends and issues related to older adults in Central Indiana?

Older adults are the fastest growing demographic in Central Indiana, as approximately 24,000 adults turn 55 and 22,000 turn 60 each year.¹ By the year 2030, one in every five Hoosiers will be over the age of 65.² To enhance the ability of older adults to live and thrive in Central Indiana, it is important to understand the population trends, notable changes, and basic needs of this growing demographic.

It is also important to acknowledge that older adults in Central Indiana experience aging differently based on their race, ethnicity, income levels and other factors. Systemic inequity—which includes systemic racism and biases against gender, income, sexual orientation and others—exists across multiple systems.³ These behaviors are difficult to overcome without the support and influence of external entities to call out the negative efforts and identify solutions to address those issues.

The Central Indiana Senior Fund (CISF) in collaboration with The Polis Center at IUPUI (Polis), IU Center for Aging Research (IUCAR), and IU Public Policy Institute's (PPI) Center for Research on Inclusion and Social Policy developed a suite of information tools about the State of Aging in Central Indiana (SoA), including an annual report, issue briefs on emerging topics, and an interactive information portal (<https://centralindiana.stateofaging.org>).

These resources provide community leaders, decision-makers, older adult-serving entities, and philanthropic organizations with access to place-based information to help identify needed programs, funding, and policies. The aim is to inform discussion and prompt solutions that address the unique and diverse needs of older adults in Central Indiana. The ultimate goal is to help older adults in Central Indiana have equal opportunity for a healthy, dignified and enjoyable life.

This report uses quantitative and qualitative data and analysis to understand the characteristics of and issues facing older adults in Central Indiana. It reveals lived experiences and some of the assets and opportunities encountered by older adults in Central Indiana, using an equity framework to interpret challenges that some older adults face as a part of their daily lives.

EXECUTIVE SUMMARY

PURPOSE OF REPORT:

Funded by the Central Indiana Senior Fund, the State of Aging in Central Indiana Report was developed to act as the premiere source of data related to growing older in Central Indiana. This report, along with the accompanying interactive online portal and issue briefs, is intended to function as a tool to inform policy on state and local levels, influence the distribution of funds addressing older adult needs, and guide organizations as they work with older adults in their communities.

APPROACH:

The Polis Center at IUPUI compiled regional and local-level demographics data on older adults, as well as data related to their basic needs, continued living in their communities, and health and wellness. To supplement this work and validate the findings in the data, the IU Center on Aging Research and the IU Public Policy Institute Center for Research on Inclusion and Social Policy conducted key informant interviews of service providers and policy makers, as well as focus groups of older adults throughout Central Indiana. Throughout this report, we interpret equity issues related to age, race, ethnicity, gender identity, and other characteristics that result in some groups of older adults experiencing challenges that others do not. The ecological model of equity calls out these inequities beginning at the individual level and continuing all the way to the community and policy levels where decisions are made that impact older adults.

FINDINGS:

DEMOGRAPHICS

The older adult population (55 years and older) in Central Indiana is increasing in size at a rate six times greater than that of the younger population. The majority (83%) of older adults in Central Indiana are White, although as more adults grow older, the proportion of older adults of color will increase.

BASIC NEEDS

In recent years, the poverty rate among older adults has decreased, although poverty rates among older adults of color are disproportionately greater than those of White older adults. Despite this improvement, many older adults still face challenges affording basic needs, with housing and healthcare being the costliest. One in 10 older adults faces food insecurity, and many experience diminished access to transportation as they age, which limits access to other resources. Older adults are also at greater risk of fraud and scams than the younger population.

LIVING IN THE COMMUNITY

Older adults in Central Indiana reported that their communities are good places to grow older. However, some older adults reported facing challenges related to remaining in their own homes, and providers reported facing difficulties accessing some older adults who need assistance. Meanwhile, one in three older adults reports feelings of loneliness and isolation, despite more than half reporting knowledge of community activities in which to participate.

HEALTH AND WELLNESS

Older adults face increasing health challenges as they grow older. Among adults age 55 to 84, cancer is the leading cause of death, while heart disease is the leading cause of death among adults 85 and older. While health care is generally accessible in Central Indiana, the rural areas suffer from a lack of providers with a geriatric specialty. Four in five older adults provide care for another person; two in five do so for another adult age 60 and older. One quarter of those who care for others report being burdened by those responsibilities.

EQUITY

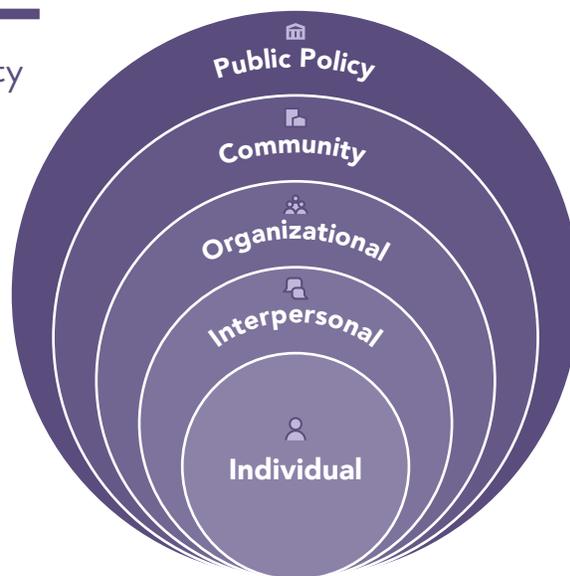
Older adults in Central Indiana experience aging differently based on their race, ethnicity, income levels and other factors. While this information is crucial for identifying trends and informing decisions, it is a preliminary step toward understanding the root causes of inequity.

Systemic or institutional racism includes racist activities that move beyond individual-level actions and are embedded into organizational or societal practices. We focus on systemic inequity, which includes systemic racism, as well as biases against gender, income, sexual orientation and others that exist across multiple systems. These practices are difficult to overcome without the support and influence of external entities, funds and attention to call out the negative efforts and identify solutions to address those issues. For example, lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ+) older adults in Central Indiana report experiencing discrimination in group housing that does not fully consider sexual orientation and gender identity.⁴ That situation is an example of systemic inequity when there is no systemic effort within or among these housing providers to recognize the identity of LGBTQ+ older adults in a way that makes them feel safe and that ensures their comfort.

The social ecological model is a common framework used to identify the influences on individuals' outcomes, and the fact that they occur at different levels of society. While this framework is commonly used in the public health arena, it is multidisciplinary in nature.^{5, 6, 7} For the purpose of this report, the social ecological model has been adapted as a framework for examining inequitable outcomes for different communities of older adults, and for capturing the systemic nature of the inequities they face.

Social Ecological Model of Inequity

Source: Adapted from the University of Washington School of Medicine⁸ and Heise et al.⁹



This diagram is an explanation of each level of the model and how it is contextualized within this report.

Inequitable Trends: These areas focus on general trends among each group that are influenced by systemic inequity, but largely reinforced at individual and group levels.

Individual: Most work focuses on this level. Specifically, this level can be discussed as the individual-level differences experienced within and compared to other groups. From an inequity perspective, these experiences include direct implicit bias or personal experiences. We discuss these issues by highlighting key trends across and within certain populations, as well as opportunities to acquire or practice skills, experiences or decisions that some groups of people may have access to while others do not.

Interpersonal: This level refers to the friends, family and social networks of older adults. Inequity may appear through interpersonal networks that present disproportionately complex decisions or experiences for certain populations (e.g., families of color are more likely to live in intergenerational households).

Systems: These levels engage gaps for which individuals or communities have substantially less agency, and where external support is crucial for creating meaningful, lasting change.

Organizational: Organizations, such as workplaces and service providers, can contribute to inequity by not providing services tailored to specific populations, especially if they are at risk of obtaining poor outcomes. When older adults rely on specific services or engagement with different organizations, these experiences can have negative effects that perpetuate inequitable outcomes.

Community: This level refers to how communities are designed, how older adults feel about their physical access to community spaces, facilities and resources, and older adult physical connectedness within their neighborhood, city or region. Older adults may experience systemic inequity here because they often lack individual control over the ability to access transportation, safe sidewalks or food, and which may vary by the racial/ethnic or income composition of one's community. These community-level experiences are often reinforced by organizational-level inequities and by public policies that actively or passively reinforce inequitable conditions in communities.

Public Policy: This final level frequently influences the others, as it refers to U.S., state, and local policies and laws that can guide community structures, organizational resources and individual and group-level experiences.

Each section in this report highlights quantitative and qualitative data trends that indicate not just inequities in outcomes for older adults, but inequities and gaps in services, policy decisions and community-wide resources. The goal of this framework is to inform opportunities for investment advocacy, and greater engagement with groups that may benefit from support to close gaps to more equitably serve older adults.

Where different, relevant levels of the model are highlighted within each chapter, a designation will be provided to easily identify the level of the model being discussed. We hope that this structure will not only illuminate the inequitable gaps in our systems, but also highlight opportunities to address and improve the experiences of older adults in more equitable ways.

KEY FINDINGS



This annual report is divided into 11 stand-alone sections that taken together provide a snapshot of the state of aging in Central Indiana. Each section summarizes the notable trends and issues for a different topic related to aging. The contents and key findings of each section are outlined below.

SECTION 1: DEMOGRAPHICS

A growing population of nearly half a million older adults (age 55 and older) live in Central Indiana. This section of the report emphasizes population trends and household characteristics, including socioeconomic indicators.

Key Findings:

- The older adult population in Central Indiana is increasing at six times the rate of the younger population.
- People of color comprise one in six older adults. A more diverse younger population will result in an increasingly diverse older adult population in the future.
- Four in ten older adults live alone.
- The poverty rate is three times higher among older adults of color.



BASIC NEEDS

SECTION 2: FINANCIAL STABILITY

Financial stability is crucial for older adults to maintain a decent quality of life, age in place and access key resources. Whether or not an older adult is financially stable is influenced by life experiences and other key characteristics. This section of the report assesses financial stability, including poverty levels, household income, basic expenses and the experiences of older adults in Central Indiana.

Key Findings:

- All three older adult age groups (young-old, middle-old and oldest-old) experienced significant increases in income between 2014 and 2019.
- Overall, one in 12 older adults experiences poverty, with the oldest-old age group experiencing higher poverty rates than the other age groups.
- Older adults experience both racial and gender disproportionalities with respect to poverty, as Black and Latinx older adults are more likely to experience poverty than White older adults, and older women are more likely to experience poverty than older men.
- Nearly one fifth of adults of traditional retirement age continue to work outside the home.
- Older adults face barriers attaining and maintaining a job, such as the ability to effectively use technology.
- Healthcare and housing are the costliest expenses of older adults in Central Indiana.
- One in three older adults reported recently experiencing at least some difficulty affording daily expenses or finding affordable health insurance.
- **Equity Highlight:** Black adults experience lower wages and less access to wealth-building opportunities throughout their lifetimes, which impacts their financial stability as older adults.

SECTION 3: FOOD INSECURITY

Food insecurity is a challenge for many older adults with low incomes. Nationally, one in 10 households is food insecure, and the rate is even higher in Indiana. This section of the report discusses the breadth of food insecurity among Central Indiana’s older adults, including food access and barriers to food security.

Key Findings:

- One out of 10 adults age 50 and older in Indianapolis are food insecure.
- Indiana’s overall food insecurity rate is significantly higher than the national rate and has continued to increase over the past decade.
- According to older adults and service providers, the chief barriers to food access and security are transportation and money.





- The Federal Supplemental Nutrition Assistance Program (SNAP) provides necessary benefits to older adults experiencing poverty, yet only half of those age 60 or older experiencing poverty participate in the program.
- **Equity Highlight:** Neighborhoods with higher concentrations of people of color experiencing poverty are most likely to have low food access.

SECTION 4: HOUSING

Housing is an important issue among older adults, as housing costs comprise a significant proportion of household expenses and can cause financial stress for those adults about to experience or already experiencing a decline in income. This section of the report discusses housing affordability, homeownership, housing instability and barriers to obtaining housing in Central Indiana.

Key Findings:

- More than half of older adults in Central Indiana who rent their homes spend at least 30% of their income on housing costs, a number that has not changed over the previous five years.
- One in five older adult homeowners spends at least 30% of their income on housing costs.
- The proportion of older adult homeowners who report not having sufficient income to pay property taxes declined from 2013 to 2017, though local focus group participants said that maintenance costs and gentrification were barriers to housing affordability.
- Three in four older adults are homeowners, one in three owns a home that they have paid for in full, and one in four rents a home.
- Adults age 62 and older experienced an increase in homelessness of one third between 2019 and 2020.
- **Equity Highlight:** In the United States, older adult veterans are three times more likely to experience homelessness compared to older adult non-veterans, due to a variety of systemic factors.



SECTION 5: SAFETY AND ABUSE

Perceived personal safety may be crucial for older adults to age in place with a positive outlook; however, safety varies

based on location and the resources available to maintain social supports and effective caregiving. This section of the report emphasizes elder abuse and crime, including perceptions and experiences affecting the physical safety of older adults.

Key Findings:

- Nationally and in Indiana, one in 10 adults age 65 and older experiences abuse each year, a statistic that is likely underreported.
- Indiana’s Adult Protective Services has historically lacked sufficient resources and structure to provide social service-related support for endangered older adults in the state.
- Older adults report increases in fraud and scams, which make them feel less safe.
- Perceptions of community safety among older adults in Central Indiana have increased but vary among older adults living in high-crime neighborhoods.
- **Equity Highlight:** Older adults may be more vulnerable to being victims of fraud due to factors such as cognitive decline, financial illiteracy, social isolation and unclear avenues for fraud reporting.

SECTION 6: TRANSPORTATION

Access to transportation is important because it empowers older adults to maintain their independence. Transportation opportunities for older adults may take different forms, including driving, public transportation, ride share services or shuttle buses. This section of the report discusses public transportation access and transportation barriers.

Key Findings:

- In Indianapolis, 7,800 older adults use public transportation for working, shopping and social trips.
- Only one in four older adults in Central Indiana positively rates the ease with which they can use public transportation in their communities.
- In Indianapolis, one in three older adults lives in neighborhoods with minimal or no public transportation service.



- Public transportation improvements in 2019 led to 15,000 more Central Indiana older adults living in neighborhoods with high level of transportation service.
- **Equity Highlight:** Older adults in rural areas have less access to transportation options, due to lack of resources for rural transportation systems, changing demography resulting from movement from rural to urban areas and limited Medicare support for transportation to medical appointments.



LIVING IN THE COMMUNITY

SECTION 7: AGING IN PLACE

Many people wish to grow older in their own homes rather than in an institutional setting. To accomplish this, it is important for older adults to have the means to maintain a home, perform activities of daily living and feel comfortable in their communities. This section of the report discusses aging in place in both homes and communities.

Key Findings:

- Three in five older adults report difficulty maintaining their homes, both inside and out.
- Two-thirds of older adults report not knowing about necessary services to assist them with remaining in their homes and communities as they age.
- Many older Hoosiers who receive publicly-funded services to assist them in their daily lives report that these services meet their needs and goals.
- Most older adults in Central Indiana believe their communities are a good place to live, and four in five intend to remain in them throughout retirement.
- **Equity Highlight:** Black and other older adults of color experience greater barriers to aging in place than do their White peers. This occurs because of higher prevalence in disabilities among people of color, greater likelihood of living with extended family, lower homeownership rates and lower resource availability in neighborhoods in which the majority of residents are Black.

SECTION 8: SOCIAL WELL-BEING

The social well-being of older adults is dependent on positive, durable relationships and sustained access to community roles and social institutions. This section of the report discusses social inclusion and purposeful living.

Key Findings:

- Approximately three in five Central Indiana households with older adults report access to community activities, but fewer than one in five reports participation in community activities, suggesting low inclusion.
- About one in three older adults in Central Indiana reports feelings of loneliness or social isolation, and this is likely more prevalent among older adults experiencing poverty.
- In Indiana, disability is one of the biggest contributors to isolation in older adults.
- It is difficult for providers to find or reach isolated older adults.
- Older adults may not receive the resources they need because of a deficit in bridging social capital, which connects them to people who have access to these resources.
- **Equity Highlight:** Older adults who experience poverty are more likely to experience social isolation, because of poor health that limits their mobility, fear of victimization, loss of or lack of a partner and limited social opportunities and resources in lower-income communities.



HEALTH AND WELLNESS

SECTION 9: HEALTH OUTCOMES

Increasing age brings a higher risk of chronic disease and deteriorating health. This section gives detail on the health status of the older population in Central Indiana with data and discussion on mortality rates and trends, rates of diseases, notable changes and disparities in their health outcomes.

Key Findings:

- Age-adjusted mortality rates for older adults have decreased significantly since 1999, but they have



stabilized since the mid-2000s. Mortality rates for Indiana and Central Indiana remain significantly higher than national rates. Mortality rates are significantly higher for Black than White older adults in Central Indiana.

- Cancer remains the leading cause of death for the younger- and middle-old. Heart disease is the leading cause of death for the oldest-old.
- Alzheimer’s disease has become the third leading cause of death of those 85 years and older.
- Ambulatory disability is the leading type of disability for older adults.
- Deaths from falls, drug overdose and suicide have increased in older adults over time, matching state and national trends.
- Compared to older women, older men are disproportionately affected by deaths from falls and suicide. Black older adults are disproportionately affected by deaths from drug overdose including those due to opioids, compared to White older adults.
- **Equity Highlight:** Black individuals and other people of color have higher rates of infection and serious illness due to COVID-19 compared to White people. Underlying disparities such as higher rates of health conditions, barriers to accessing health care, and lower incomes and financial challenges contribute to increased COVID-19 risk. For information about the relative COVID-19 rates in Indiana, see the State of Aging in Central Indiana COVID-19 Research Brief.



Read more about the impact of COVID-19 on older adults in this [research brief](#), or scan the QR code.



SECTION 10: HEALTH CARE

Availability of specialized geriatric health care is of utmost importance for the well-being and good health of older adults. This section discusses the availability and use of health care and community-based services for older adults and the accessibility of these resources.

Key Findings:

- Older adults in Central Indiana feel health care is broadly available, but one in four has trouble affording or obtaining the health care they need.

- Providers identify falls and the fear of falling, mental health and emotional issues, dementia and fragmented care as issues that need more resources and attention.
- Six healthcare systems in Central Indiana have been recognized by the Institute for Healthcare Improvement as Age-Friendly Health Systems.
- Rural areas lack specialized geriatric healthcare services.
- Recipients of home- and community-based services report positive outcomes for hospital discharges and chronic conditions, but some who could benefit are unaware of or ineligible for those services.
- Low-income and other vulnerable Medicare recipients in Central Indiana visit hospitals and emergency rooms more frequently than other Medicare recipients
- **Equity Highlight:** The older LGBTQ+ population is disproportionately affected by the lack of healthcare access due to many factors.

SECTION 11: CAREGIVING

This section of the report discusses caregiving by and for older adults, including its benefits and risks and associated resources.

Key findings:

- One in four older adults in Central Indiana is physically, emotionally or financially burdened by caregiving responsibilities, and most adults do not believe support services are available for caregivers.
- Four out of five older adults in Central Indiana provide care to a friend or loved one, and two in five provide care to someone over the age of 60.
- **Equity Highlight:** Latinx older adults are more likely to provide care for an older loved one. The lack of culturally and linguistically sensitive caregiving resources results in Latinx older adults and their caregivers being disproportionately affected by the challenges of caregiving.



ENDNOTES

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- 4 Nine focus groups with older adults were conducted during 2019 and 2020 to collect input on issues facing the older adult population in Central Indiana. The focus groups composed of older adults were assembled with the identification and recruitment assistance of community service providers. These focus groups were conducted by researchers, in person prior to the COVID-19 pandemic, and by Zoom after the pandemic began. The questions asked of the focus group participants were discussed and agreed upon by research faculty and staff.
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