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# Places We Call Home: An Exploration of What the Baby Boom Generation Knows About Housing with Services / Assisted Living

by

Jennifer J. Writz

#### A Thesis

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#### Abstract

The purpose of this study was to learn what the Baby Boom generation knows about Housing with Services/Assisted Living and if they are prepared for their future. Categories studied included knowledge on cost, services, definitions of Housing with Services/Assisted Living, resources and involvement in looking for Senior Housing. The participants were born between the years 1946 and 1964. This generation was chosen due to them being a large cohort that is aging.

The participants were given a survey with both structured and open ended questions. The hypothesis going into the study was that respondents lacked knowledge about housing options and were not planning for their own future needs. This was borne out in the findings. The findings will be useful when developing ways to improve the knowledge of this cohort, as well as to assist them prepare financially for their own future.

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#### **Chapter I: Introduction**

The population in the United States is aging and is experiencing a substantial growth of persons age 65 and older (Spitzer, Neauman & Holden, 2004). This change is taking place because the Baby Boom generation, a generation that is 77 million strong, is entering their older years (Wagner, 2000). This population transformation has greatly increased the significance of the development of senior housing and care for older adults (Spitzer et al., 2004).

Today, older adults have access to many different long-term care housing options that offer a variety of services. Those types of housing include: home care, assisted living/community based residential care, senior housing, nursing homes, and continuing care retirement communities (Yee-Melichar, Boyle & Flores, 2011).

Assisted living is the option that is becoming more popular and is one of the fastest growing types of senior housing in the United States (Spitzer et al., 2004). The growth of this type of senior housing was brought on by the demands of the Baby Boom generation (Raymond, 2000). They are primarily looking for housing for their parents that offer such services as housekeeping, transportation, and meals, but not the level of skilled nursing care that nursing homes provide (Raymond, 2000).

Assisted living is attracting consumers because of its combination of privacy, personal dignity, security, personal care services, and a less restrictive environment (Spitzer et al., 2004).

Although there are a variety of different housing choices for seniors, the question is whether or not people are planning for their futures, and if they are, how

educated are they about their options? In general, when it comes to planning for long-term care, there are more non-planners than there are planners. According to Friedemann, Newman, Seff, and Dunlop (2004), there are many factors that contribute to non-planning including: a belief that planning is of no use, the inability to picture oneself as dependent, expectations that life will get better, the belief that someone else will take care of them, wanting to live "one day at a time", it is unnecessary because the future is determined by external forces, and that planning is not useful if the right social resources or finances are not available (Friedemann et al., 2004).

Not only do people's beliefs affect their willingness to plan, but research has also shown that there is a relationship between long-term care planning and personal characteristics and demographic measures. According to Friedemann et al. (2004), those who are older and need help with activities of daily living are associated with more stable planning techniques, and that people who have more education are more likely to collect materials on long-term care and are more likely to think about planning for their possible needs in the future (Friedemann et al., 2004). It was also found that African American older adults are more likely than White American seniors to make long-term care plans (Friedemann et al., 2004).

The study conducted examined consumers born between the years 1946 and 1964 who live in Minnesota and what they knew about assisted living in Minnesota, which falls under the rubric of "housing with services". The Baby Boom generation was the focus because they are the next generation who will be, and in some

situations already are, the consumers in the senior housing industry. Also, they are an exceptionally large cohort.

Assisted living was chosen for this study because of its rising popularity in the senior housing industry. Also, the diversity among assisted living facilities raises many questions that consumers should know the answer to, including: What does the term assisted living mean? What does the term housing with services mean? Where do I find information on assisted living? How much does it cost? How can I pay for assisted living? What services do they provide?

As those who are a part of the Baby Boom generation start exploring assisted living as a viable option for their parents, family members, or themselves, not only is it important for them to plan, it is also important that they understand the concept of assisted living and what it all entails. What makes this difficult is that the industry itself does not have a universal definition. Although consumers may find this task difficult, it is important for them to have access to information in order to make informed choices among facilities that will maximize the services, environment, and outcomes that they desire (Hawes & Phillips, 2007). According to a study conducted by the National Investment Center, many consumers did not understand and could not identify with any of the terms used to describe senior housing establishments like assisted living (Raymond, 2000). To make choices when it comes to senior living, consumers need to understand the terms that are being used to describe housing options in general, and assisted living specifically.

Lack of a universal definition also affects how well consumers understand assisted living. With levels of care, services provided, and regulations varying from state to state, it is important that consumers know what assisted living offers in the area that they live or want to reside (Spitzer et al., 2004). Some states have renamed all of their residential care facilities as assisted living. Other states have allowed assisted living facilities to provide nursing care, while still others do not allow such services. On the other hand, lack of a universal definition could possibly be one of the benefits of residing in an assisted living facility. With fewer regulations on what assisted living "should" be, facilities are able to have a more "home-like" environment that is less restrictive, which is what many consumers are looking for today (Spitzer et al., 2004).

Another critical issue for consumers when exploring assisted living is cost.

Some concerns include confusion on how it is paid for, how much it costs, and whether or not they have been saving for long-term care. According to an AARP survey (2006) that examined the costs of long-term care and what Americans know about it, those age 45-plus know less about long-term care than they think they do.

They underestimate, or do not have any idea, what long-term care costs and assume that it will be covered by public programs (AARP Fact Sheet, 2006). Only 23% correctly estimated the monthly cost of a nursing home and of those 23%, one in four was just a guess (AARP Fact Sheet, 2006). Consumers need to be informed of the costs of senior housing facilities, such as assisted living, in order to make the most

informed decisions with/for their parents, as well as to plan ahead financially for their own futures.

#### **Operationalization of Terms**

For this study, the terms consumers and the Baby Boom generation were used interchangeably. The reason for this is because this specific cohort makes up a part of the population that are consumers in the senior housing arena, and this study is focusing solely on those persons who are members of the Baby Boom generation. Also, when the term assisted living is used, housing with services will be included in this category. In Minnesota, which is where the participants in this study reside, assisted living is referred to as housing with services.

This study explored how well the Baby Boom generation understands assisted living and whether or not they have been planning for their future long-term care needs. This is important for many reasons, the first one being that the older population in the United States is growing, in larger part due to the Baby Boom generation. Housing for older adults is going to continue to be a growing issue, with this generation either looking for themselves, or someone they know. According to the National Clearinghouse for Long-Term Care (2008), 70% of older adults over the age of 65 will need some type of long-term care at some point in their lives (Iwasaki, McCurry, Borson, & Jones, 2010).

Another reason this study is important is that Housing with Services/Assisted Living can be very expensive. It is crucial to know the Baby Boom generation's

understanding of Senior Housing and what costs are associated with it. It is also important that they know the available options for funding, how to access them.

This study also focuses on whether or not the information available about assisted living in Minnesota is meeting the needs of its consumers. The findings from this study could allow an in-depth look at the information and find out if it is understandable to those not in the senior housing field, including looking at the language used, the definitions provided, the number of locations that provide the materials, and how accessible it is in their community. The following chapter contains a lit review discussing assisted living and the Baby Boom generation.

#### **Chapter II: Literature Review**

The population age 65 years or older numbered 47.8 million in 2015. They represented 14.9% of the U.S. population. The number of older Americans has increased by 30% since 2005, compared to an increase of 5.7% for the under-65 population (Profile of an Older American, 2016). These numbers show that the population is aging, and that Senior Housing for older adults is a growing issue, particularly for the Baby Boom generation. Housing with Services/Assisted Living is the option that is becoming more popular and is one of the fastest growing types of senior housing in the United States (Spitzer et al., 2004). It is important that the Baby Boom generation understand this type of housing and what it all entails. Below is a literature review providing an overview of Housing with Services/Assisted Living and the Baby Boom generation.

#### **Assisted Living-Overview**

In the United States, assisted living facilities have become an important form of community-based care for older adults (Cutchin, Chang & Owen, 2005). In a study conducted by Stevenson and Grabowski (2010), it was estimated that in the year 2007 there were approximately 11,276 assisted living communities throughout the nation, with that number continuing to grow (Stevenson & Grabowski, 2010). There are many reasons for the recent explosion of assisted living onto the long-term care scene. Some of these reasons include a growing aging population, healthier older persons, negative attitudes towards nursing homes, and the desire to "age in place". These reasons, as well as the public's desire for better and more cost-effective living

options for older adults, have created new options, such as assisted living, that are better able to meet the variety of needs of older adults (Mollica, 2008).

#### **Resident Profile**

According to research conducted by the Center for Disease Control on Residential Care Facilities (2010), 63% of residents were widowed, 13% were married, and 15% were never married or were separated from their partner. This study also found that 91% of all residents in Assisted Living were White/ Caucasian, Non-Hispanic, or Latino. Four percent were African American, 3% were Hispanic or Latino, 1% were Asian, and 1% responded with other (Center for Disease Control, 201). Over half of assisted living residents are admitted from their own homes, 16% from family members' homes, 14% from other types of senior housing, and 13% have come from nursing homes (Spitzer et al., 2004). According to a majority of the research conducted on the profile of residents living in an assisted living facility, the average assisted living resident is a female in her mid-eighties (Yee-Melichar et al., 2011).

The most common health conditions among assisted living residents include Alzheimer's disease or dementia (40%), diabetes (17%), depression (23%), and cardiovascular disorders (46%) (National Center for Assisted Living, 2017). Many assisted living residents also need help with activities of daily living. According to the National Center for Assisted Living (2009), the most common activities residents need help with are bathing (62%), followed by dressing (47%) (National Center for Assisted Living, 2017).

#### **Assisted Living Philosophy**

Although assisted living is becoming a popular choice for consumers, understanding what it entails is complicated due to the lack of a universal definition (Spitzer et al., 2004). There tends to be less agreement on the key assumptions of assisted living and the role of this type of facility among providers, regulators, policy makers, and consumers (Hawes & Phillips, 2007). Even though there is not complete agreement on the definition of assisted living, there seems to be some consensus about the philosophical principles (Hawes & Phillips, 2007). Some of those principles include maximizing dignity and independence, creating a home-like environment, accommodating the changing needs and preferences of residents, and involvement of family and the community (Cutchin et al., 2005). The Assisted Living Quality Coalition, which is made up of provider groups including the Assisted Living Federation of America and the American Association for Retired Persons (AARP), came up with a definition that addresses those philosophical principles. This coalition defines assisted living as:

A congregate residential setting that provides or coordinates personal services, 24-hour supervision and assistance (scheduled and unscheduled), activities, and health related services; designed to accommodate individual residents' changing needs and preferences, designed to maximize residents' dignity, autonomy, privacy, independence, and safety; and designed to encourage family and community involvement. (Hawes & Phillips, 2007, p. 42)

While this is a generally accepted definition, there are many others. Assisted living varies from state to state and site to site when it comes to housing structure, admission, staffing, payment, and resident retention (Cutchin et al., 2005).

#### **Assisted Living–Cost**

In general, long-term care is expensive. According to a survey from the MetLife Mature Market Institute (2006), the annual cost for a nursing home in the United States was about \$67,000 for a shared room and \$75,000 for a private room. The average cost for a home health aide was about \$19.00 an hour, and assisted living costs were approximately \$35,600 per year (Yee-Melichar et al., 2011). The costs vary from state to state and can change depending on the services offered, staffing availability, accommodations, and amenities (Yee-Melichar et al., 2011).

The costs of assisted living are high, and although public programs such as Medicaid have gradually been increasing coverage, most assisted living residents pay out-of-pocket. In other words, they pay for assisted living with their own funds (Yee-Melchar et al., 2011). According to a survey conducted by the National Investment Center (2000), many assisted living residents have assets ranging from \$100,000 to \$300,000, and assisted living costs can deplete these sources and require them to find supplemental financial resources (Spitzer et al., 2004). Some have invested in long-term care insurance, and others receive financial support from family members (Yee-Melichar et al., 2011).

According to A Profile of Older Americans (Administration on Aging, 2016), the average income of older adults within the United States during the year 2015 was \$31,372 for males and \$18,250 for females. Over 4.2 million older adults were below the poverty level in 2015 and another 2.4 million were considered "near-poor". It was also found that 6.6% of White older adults were poor, compared to 18.4% of older

African Americans, 17.5% of older Hispanics, and 11.8% of older Asians (Administration on Aging, 2016). Assisted living is expensive and there is a lack of public subsidies, so many of those older adults who have low to moderate incomes are not able to afford this senior housing option (Yee-Melichar et al., 2011).

Although assisted living is very costly, it does have many advantages, including providing a more home-like atmosphere than most nursing homes, with supportive services available 24-hours a day, activities, and personal care (Timmermann, 2006). Also, with the expected increase of Alzheimer's disease and other dementia diagnoses, many assisted living facilities are adding specialized dementia care units (National Institute on Aging/U.S. Department of Health and Human Services, 2009). On the other hand, because assisted living does not provide 24-hour skilled nursing care, those who require greater levels of care may have to move to a more appropriate setting, which often can leave families scrambling to find another facility in a short period of time. In addition, the lack of a universal definition and comprehensive regulations, trying to compare the quality of care from facility to facility can be extremely difficult (Timmermann, 2006). The next section focuses on assisted living in Minnesota.

#### **Assisted Living–Minnesota**

In Minnesota, assisted living facilities are often referred to as housing with services establishments. Minnesota views assisted living as a service concept instead of a type of facility (Aging Services of Minnesota, 2008). The term "housing with services establishments" was chosen to describe assisted living in Minnesota

with the idea that it would lessen the confusion of what assisted living is because there are numerous definitions that vary from state to state. This term was also chosen because it is general and covers a wide array of settings and services (Aging Services of Minnesota, 2008).

Minnesota's Housing with Services Contract Act. Minnesota's Housing with Services Contract Act was passed in 1995 and was created because of the need for senior housing that would not replicate the institutional, nursing home-like atmosphere already in place in many existing facilities. The success of assisted living facilities among consumers comes from the assisted living philosophy that supports independence, flexibility with services, and choice. The Housing with Services

Contract Act allows providers in Minnesota to create contracts with their consumers.

During the creation of these contracts, consumers are given accurate information that will help them make an informed decision about where they would like to live and what services they would like to receive. These contracts must address 17 specific topics including a description of the services, how the contract can be modified, the cost of services, and how the contract can be terminated (Aging Services of Minnesota, 2008).

Many different types of residential settings can fall under the category of housing with services establishments. Some of these settings include apartment buildings, licensed adult foster care homes, and licensed boarding care homes. For these settings to be called assisted living, they are required by Minnesota law to register with the Minnesota Department of Health (MDH), complete a contract with all

residents, and acquire the correct home care license if the establishment will be providing direct health-related services. They must also offer services to their residents. Since they are not required to follow a specific, mandated service plan, providers in Minnesota are able to develop their own service packages that they think their target population will want (Aging Services of Minnesota, 2008).

These services can come in packages ranging from light care to around-the-clock assistance. The services offered in these packages include housekeeping and laundry, assistance with activities of daily living (ADLs), two meals per day, medication administration, help with handling funds, home health aide tasks performed by unlicensed staff, and assistance with arranging transportation to and from appointments. Although there are many services available to the residents, they do not need to use all of them and can choose which services will be right for them. Minnesota's housing with services model is based on consumer choice, focusing on what the resident wants and needs (Aging Services of Minnesota, 2008).

Housing with services—cost. The cost of living in housing with services establishments varies depending on the facility and the service contract. According to the Genworth Financial website (2016) that compares the costs of assisted living facilities across the United States, the Minnesota median cost for assisted living establishments per month is \$3,628 (Genworth Financial, Inc., 2017). A minority of residents residing in an assisted living facility pay for all of the services offered out-of-pocket. For those who do not have the personal funds to do that, Minnesota has two programs: Elderly Waiver and Alternative Care. These two programs pay for different

packages of assisted living services. The amount that they will cover is decided by County Human Services Agencies. The rate can vary depending on the health care needs of the resident, their type of service package, and the geographic location of the facility (Chun, 2001).

Even though Minnesota's assisted living is not regulated to the same extent as nursing homes, the Minnesota Department of Health does regulate housing with services establishments to a certain degree and has the power to take action if a facility is not meeting the requirements of the Housing with Service Contract Act. The Contract Act guidelines are in place to ensure the safety and well-being of residents, as well as to promote a consumer-driven model that allows consumers the right to be educated and informed, make their own choices whether they are perceived as bad or good, and the ability to maintain independence as long as possible (Aging Services of Minnesota, 2008). The following paragraphs will discuss the characteristics of the Baby Boom generation, services they will want in assisted living, and whether or not the majority of this cohort plans for long-term care.

#### **Baby Boom Generation Population**

The Baby Boom generation was born between the years 1946 and 1964, where an 18-year growth in the nation's birthrate created a generation 77 million strong (Wagner, 2000). This unique generation represents the largest birth cohort in the United States (Fitzpatrick & McCabe, 2008). Their early years consisted of a 20-year span that included the Beatles, civil rights, Vietnam, landing on the moon, New Age spirituality, and disco (Coile, 2003). Throughout their lives, the Baby Boom

generation has had an effect on every institution they came into contact with, including marriage and family, education, and work (Wagner, 2000). As the first members of this birth cohort reached their 60s in 2006, it has already been demonstrated that they will also have a profound impact on aging and retirement, how society treats older adults, and long-term care (Wagner, 2000; Wilson, 2002). These consumers, whether they are looking for themselves or their parents, will have higher expectations for quality and service when it comes to long term care than other generations before them (Wagner, 2000).

Those who are entering their older years now are generally healthier and better educated than those before them; they are the first generation where 80% are working and more than 20% went to college (Coile, 2003). Many lead more active lifestyles, are more fit, have higher incomes, and plan on staying up to date on current trends and becoming more involved as they age than their parents or grandparents (Coile, 2003). Members of the Baby Boom generation are looking for ways to push back the aging process, whether it is through preventive health and screenings, plastic surgery, hair dye, or reinventing themselves (Coile, 2003). Many desire personal growth and new challenges that will change the traditional pattern of education, career, retirement and relaxation. In their 50s, it will not be unusual for them to go back to school and for those in their 70s to start a new career (Lipschultz, Hilt & Reilly, 2007).

According to a survey conducted by Merrill Lynch (2005) 81% of the Baby Boom generation members planned to work past the age of sixty-five. They want to

stay involved, not "sit on the sidelines" (Lipschultz et al., 2007, p. 765). They can be worldly, and when it comes to long-term care the consumers of today are focused on how it can maximize independence and overall quality of life (Moore, 2003). While they might not yet be looking at long-term care for themselves, it is possible that they may be looking for their parents and may possibly be the decision makers in this process (Moore, 2003). Women of the Baby Boom generation are especially having an impact on long-term care and are feeling pressured to not only care for their children, but their aging parents as well. They are considered to be a part of the "Sandwich Generation", where they assume responsibility for the generation before them and after them (Moody, 2010, p. 196). The next section will discuss what types of services consumers are looking for in assisted living.

#### **Services Consumers are Looking For**

When exploring the many different options for long-term care, whether for themselves or their parents, there are many services that consumers will be looking for, such as a senior living community where high technology is available, especially with the internet. They will want their parents, or themselves, to be able to e-mail, surf the web, and possibly have audio/visual communication with their relatives and friends (Moore, 2003). These consumers will also be looking for services that represent their active lifestyle and independence that they have grown accustomed to (Wagner, 2000). They may expect private rooms and baths, restaurant-style dining areas, better transportation access, better access to physicians, and more holistic treatment protocols (Wagner, 2000). They may want aromatherapy, massage

therapy, "spirituality rooms" and other services that will meet their interests (Wagner, 2000).

These services, as well as others that might interest the Baby Boom generation, are being incorporated into assisted living establishments across the United States, thus making it a popular choice whether looking for their parents or themselves. Assisted living establishments are starting to offer morning exercises such as Yoga and Tai Chi. Others are focusing on designs that look more like homes than facilities. Another long-term care company called Summerville Senior Living, designed their assisted living establishment like a college campus with the purpose of trying to remind this aging generation of their college days (Coile, 2003). Still others are focusing on the desire for a small town community atmosphere that some consumers wish for and are building stores and shops conveniently located near the facility (Timmerman, 2006). With all these different options of assisted living, it is important for consumers to be informed and potentially advocate for services, amenities and activities that are not offered but are what they want.

#### **Recognizing Aging and Changes**

Although the Baby Boom generation tends to be healthier than previous generations and they are expected to live longer than older cohorts, they may face challenges as they age. Decreased vision, cognitive impairment and decreased mobility remain ongoing concerns for this population (Fitzpatrick & McCabe, 2008). They may also experience disadvantages that today's elders, those 65 and older did not go through. These disadvantages include getting divorced more often and having

fewer children, which could lead to living alone in later life. Also, they are expected to live longer, which places the Baby Boom cohort at risk of outliving their savings (Nadizt, 2003). The combination of these cohort traits shows that this generation may no longer be following traditional patterns of large families and an extended network of children and friends. These are factors that allow older adults to age within their home and community (Nadizt, 2003). These changes may play a factor in the need for this generation to turn to long-term care, specifically assisted living, to combat these disadvantages (Nadizt, 2003).

The Baby Boom generation is just beginning to contemplate aging and long-term care, but many of them have not yet recognized the potential need for senior housing unless they have started looking for older family members. A survey conducted by the Joint Center for Housing Studies at Harvard University found that today's middle-aged adults are not concerned about their future housing (Coile, 2003). It is important that this generation, for themselves and for their older family members, start thinking about long-term care and what they would like to see in these facilities. For those consumers who have been looking for themselves or others, their expectations and demands have helped generate the growth of assisted living that has been happening around the United States (Wagner, 2000).

Assisted living establishments may offer what these consumers want, which is not to place their parents in an institutional setting (Wagner, 2000). It also attempts to meet the concerns that the members of the Baby Boom generation has for themselves in a long-term care setting. Some of those concerns are living

independently, staying engaged in the community, participating in learning opportunities, and remaining mentally and physically active (Fitzpatrick & McCabe, 2008). Assisted living establishments have developed into long-term care options that may possibly meet those needs for certain individuals, and it is important that the consumers understand what assisted living all entails and what it means.

#### The Baby Boom Generation and Financing for Long-Term Care

Unlike the previous generation of older adults who grew up during the depression, the Baby Boom generation grew up often making more money than their parents (Naditz, 2003). In general, this particular cohort has enjoyed higher earnings and greater economic prosperity than those before them. Women also became more involved in the paid workforce and have been able to contribute to household earnings more than their mothers did (Keister & Deeb-Sossa, 2001). Together, these changes have given many the resources to invest and save for their retirement years, but unfortunately have also contributed to a pattern of saving less, spending more and buying the latest and greatest (Keister & Deeb-Sossa, 2011; Naditz, 2003).

Members of the Baby Boom generation are not only spending more money, but they are saving less for retirement, and most of the time not even thinking about when they will retire (Naditz, 2003). According to Blancato and Associates, Inc. (1995) (a firm that integrates public relations, government affairs, and advocacy services), members of the Baby Boom generation have acquired a "three D syndrome". They delay in saving for retirement, they deny that they are aging, and they are demanding, expecting action when they want something (Wilson, 2002).

The Baby Boom generation is facing growing insecurity around retirement income and the cost of health care coverage. Many are not prepared for this new stage of life. With decreased pensions, lack of savings, and rising health care costs, retirement is becoming increasingly unaffordable for this generation (Freedman, 2007). According to Freedman (2007), a majority of those over 55 have acquired less than \$50,000 in retirement savings. At the same time, one of their major assets, their home, is eroding in value (Neufeld, 2008). These factors, as well as possible financial obligations to both their children and aging parents, have caused considerable concern for the financial future of the Baby Boom generation and how they will pay for future long-term care needs, including assisted living (Neufeld, 2008).

To properly prepare for assisted living costs, as well as understand what public programs do and do not pay for assisted living, this aging cohort must be educated. One reason, according to a survey conducted by Hart Research Associates (2004), is that the Baby Boom generation often avoids planning financially for assisted living or other types of long-term care because they do not believe that they or their spouse will ever need this type of care. In case they did need it, one-third of the participants said that their long-term care insurance would pay for it, while nearly three in ten would use their personal savings. Another fraction stated that they would rely on a government program if they need long-term care services, while 6% said that they did not know how they would pay for it (Hart, 2005). It is important that the Baby Boom generation becomes more informed about the costs, options, funding

sources, and community resources available and plan for the future so that they can make the right choices for themselves or family members (AARP Fact Sheet, 2006).

Through previous research and surveys, it has been found that the Baby

Boom generation needs to become more informed about assisted living. There are
many reasons for this, including one very important one: the ability to make, or help a
family member or friend make, informed decisions about their long-term care.

The following section will discuss the procedure, instrument, and methods used to further explore this topic. The main focus is what people born between the years 1946 and 1964 know about assisted living and how prepared they are for possible future long-term care needs.

#### **Chapter III: Methods**

To gain a better understanding of what the members of the Baby Boom generation in Minnesota know or do not know about assisted living in Minnesota, a mixed-method research approach using a questionnaire was employed. A questionnaire was developed specifically for this study and included both open and close-ended questions intended to determine this cohort's knowledge of assisted living in Minnesota, their experience with assisted living, if they have been planning for long-term care, and their recommendations on how to make it easier for the consumer to learn more about this type of senior housing (Appendix A).

#### Procedure

Using Survey Monkey, questionnaires were made available to faculty and staff at a University in central Minnesota. This sample is a convenience sample and the researcher of this study was a student at the University. The questionnaires were made available through a forwarded e-mailed announcement from the researcher's advisor containing an explanation of the study and link to the questionnaire for those that fit the criteria. This e-mail also included a letter of informed consent (Appendix B). After sending out the announcement, we received 103 responses.

#### **Participants**

Participants for this study were required to be born between the years of 1946 and 1964, a resident of Minnesota, and an employee of the designated sample University. The participants completed a questionnaire, which is shown in the next section. It contained questions about the different aspects of assisted living

establishments in Minnesota, and focused on the demographics of the participant filling it out.

Overall, the sample consisted of 103 participants. Of the 103 participants, 84 were female and 19 were males. Their ages ranged from 53 to 70. The majority (97.06%) of participants' self-identified as white/Caucasian.

#### **Analysis**

Demographics and other descriptive quantitative data from the close ended survey questions were collected by the researcher conducting this study and a grounded research method was used. First, common themes were explored for the qualitative data and a coding system was put into place. For demographics, simple statistics was used. Survey Monkey was used to create the questionnaire and collect the data. Once the surveys were sent out and completed, Survey Monkey compiled the information into a series of charts and graphs, allowing the researcher to see the quantitative data in an organized fashion. Answers to questions that were left openended were also organized by Survey Monkey. The participants' answers were ordered by question and respondent.

The data coded by Survey Monkey and analyzed by the researcher are discussed in the next chapter. Findings from the data gathered are provided, including demographics of participants, what they think Housing with Services / Assisted Living is, and how much they think it will cost. The chapter concludes with looking at the data gathered on services this cohort is looking for, and accessibility of

information when looking for Housing with Services / Assisted Living and what they have to offer.

#### **Chapter IV: Findings**

This exploratory study used a convenience sample of Baby Boomers from an academic institution in Minnesota to begin to understand what members of the Baby Boom generation know about Housing with Services / Assisted Living, as well as if and how they are planning for their residential future. This study was also conducted to find out whether or not information on these types of senior housing options is available and informative to this cohort. Topics covered in the survey included financing, services, planning, and knowledge of Housing with Services / Assisted Living.

#### **Demographics**

One hundred and three participants responded to the survey. The participants varied in age range, and were born between the years 1946 and 1964. Of the 103 participants, 18.4% were males (19) and 81.55% (84) were female. The majority of the respondents were White/Caucasian (Chart 1). The participants chosen for this survey were a convenience sample because they all are employees of a University where the researcher attended. Respondents had high levels of education and middle to high incomes (Chart 2 and Chart 3).

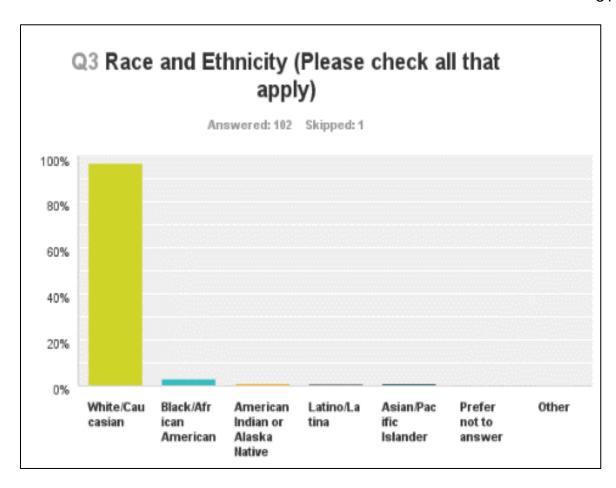


Chart 1: Q3, Race and ethnicity.

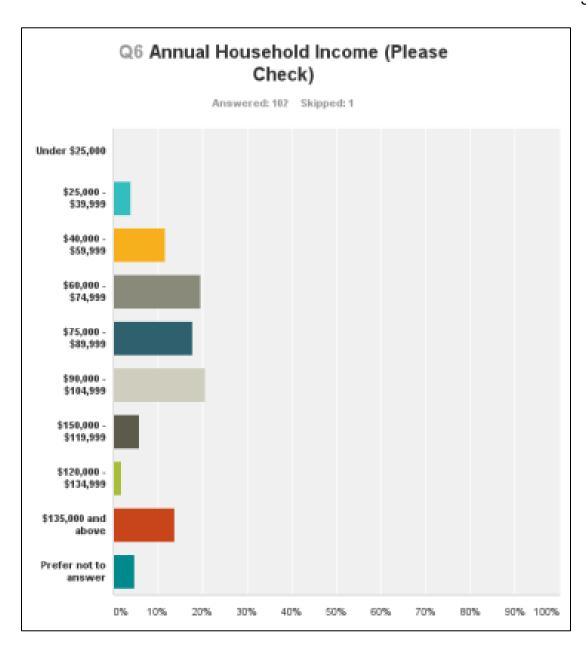


Chart 2: Q6, Annual household income.

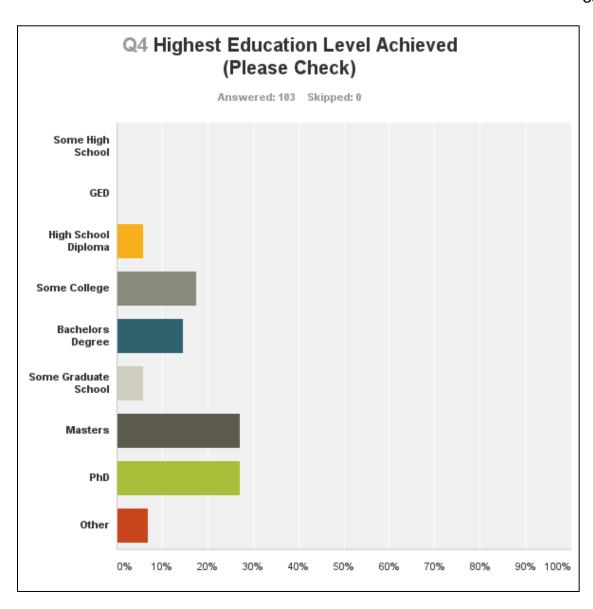


Chart 3: Q4, Highest educational level achieved.

#### **Knowledge of Housing with Services / Assisted Living Terms**

Out of the 103 participants in this study, 34.9% had heard of the term Housing with Services, while 65.1% had not. Most of those 34.9% defined Housing with Services as a place where seniors go and can live independently, with the option to purchase services as needs increase. The few who did not answer this way,

described Housing with Services as the option to stay in your home and have services come to you.

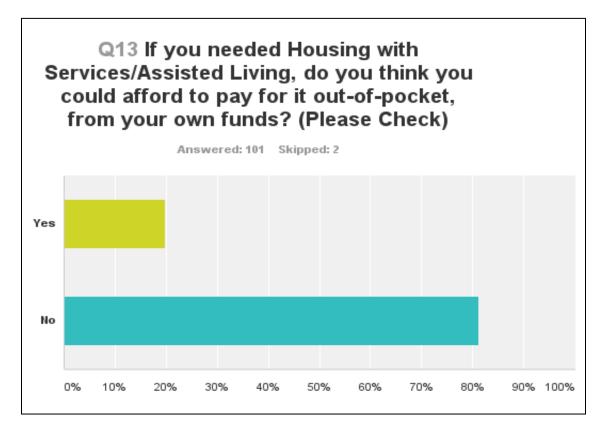
When participants were asked if they had heard the term Assisted Living, 100% answered yes, they have heard of this term. When describing Assisted Living, all answers followed the same direction: a place where seniors live in an apartment/room and receive services (meals, health care, activities, etc.) because they can no longer completely care for themselves. Five respondents stated that Assisted Living is similar, if not the same, as Housing with Services.

#### Costs

When participants were asked whether or not they were concerned with being able to afford Housing with Services / Assisted Living, the majority (70.59%) answered that yes, they were concerned. One hundred and one of the participants answered the question of how much do they think Housing with Services / Assisted Living would cost annually. They were asked to put in their own dollar figure. The answers ranged from \$7,200.00 to \$150,000 annually.

Another part of the questionnaire focused on finances and whether or not the participants thought they could pay for Housing with Services / Assisted Living out of pocket, from their own funds. The response was yes for 82 of the participants (79.6%), with the other 20 who answered this question saying no (one participant did not respond to this question) (Chart 4). When asked what type of sources of they thought could help them pay for this care, Long Term Care Insurance was chosen by most participants at 67.05%, followed closely by Social Security at 63.64%. Other

responses included Medicare (59.09%), Health Insurance (40.91%), Medicaid (30.68%), and Elderly Waiver (18.18%). An "Other" category was also offered as an answer to this question, with 10.23% of the participants choosing this as their answer (Chart 5. A comment section was available after this choice, with many saying they would pay for Housing with Services/ Assisted Living with pensions and VA benefits. Still others wrote that they could not choose a financial source because they did not know the differences between the ones already provided.



**Chart 4:** Q13, if you need housing with services / assisted living, do you think you could afford to pay for it out-of-pocket, from your own funds?

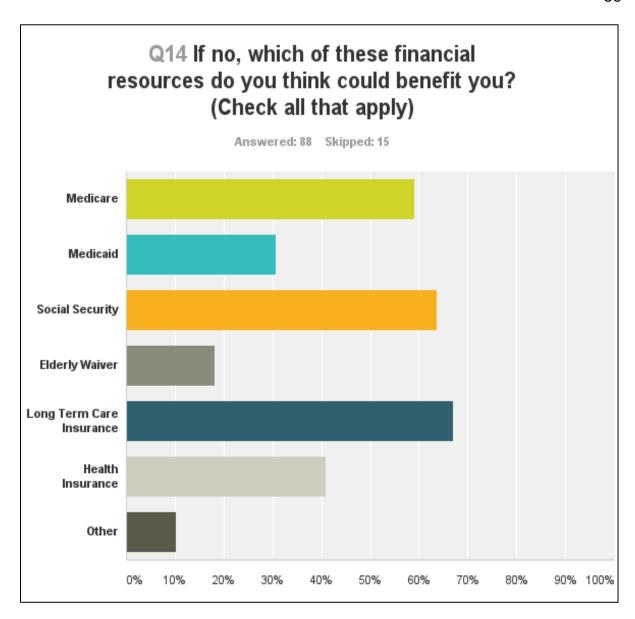


Chart 5: Q14, If no, which of these resources do you think could benefit you?

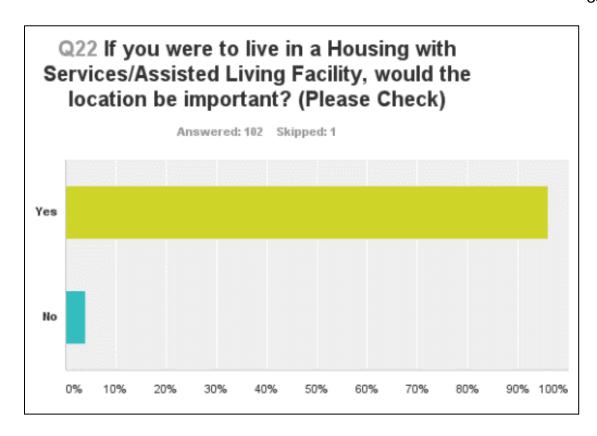
## **Services and Amenities / Location**

One of the questions in the survey asked participants what services and amenities they wanted available to them when looking for senior housing. Ninety-nine (96%) of the participants answered this question, with 80.81% choosing meals and transportation as the most important, followed by housekeeping (74.75%) and

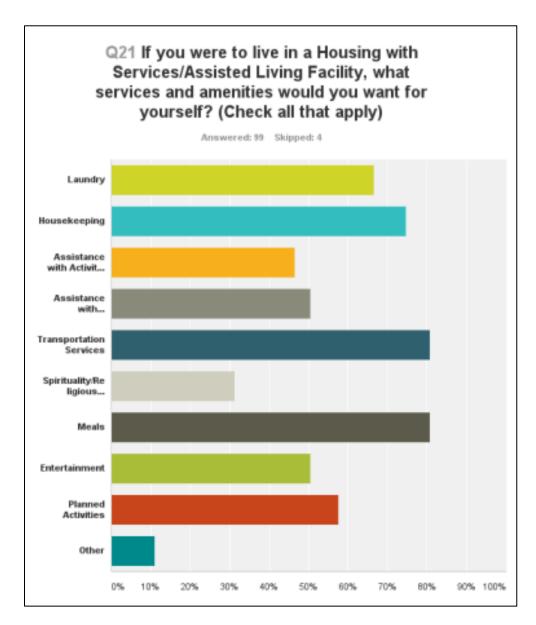
laundry (66.67%). Eleven percent of the participants selected other, and 19 participants left comments suggesting other services not asked in the question, or explained they had a hard time choosing services because they did not know what their care levels would be as they age and did not need any help at this time.

Location was also an important factor when looking at Housing with Services /
Assisted Living for themselves. Of the 102 participants that answered this question,
98 stated that location would be important (Chart 6). The participants were asked to leave comments stating why location is important, with many (68) of those comments stating that they wanted to be close to family and friends.

The survey also asked participants if they had ever helped someone they know locate a Housing with Services / Assisted Living facility. Out of the 102 that answered this question, 48 responded that they had helped someone. These participants were then asked to share what services and amenities were important to the person they were helping. Many responded with meals, activities, help with cares, medications, cleaning, and a safe environment (Chart 7).



**Chart 6:** Q22, If you were to live in a housing with services / assisted living facility, would the location be important?



**Chart 7:** Q21, if you were to live in a housing with services / assisted living facility, wWhat services and amenities would you want for yourself?

## Available Information / Source of Information

One hundred and two participants said that they have helped someone look for senior housing. Only 48 of those who said that they have helped someone answered if and how they were able to find information on senior housing. The most common source (58.33%) was from brochures for individual facilities. The second

most common source among the participants was word of mouth (56.25%), followed by the internet and their health care facility, tied at 54.17%. Of the comments that were left by participants, two stated that the information they found was very general and hard to access.

When asked what recommendations they had to make the search for senior housing easier, 22 out of the 48 who answered the initial question of if and how they were able to find information, responded with suggestions. Those suggestions included having a centralized data base for housing, allowing a lot of time to do research, being able to call communities and visit at any time, and have more specific information online and in brochures. Respondents also suggested that holding classes on senior housing would be helpful, as well as more information on cost and payment.

The following chapter focuses on an analysis of the data and conclusions. Recommendations on how to help the Baby Boom generation better understand Housing with Services / Assisted Living and the costs associated with this type of housing are made. In addition, recommendations for professionals are also given, including how to make information more readily available, and how to avoid limitations if another study was conducted.

# **Chapter V: Discussion**

The purpose of this exploratory study was to examine the Baby Boom generation's knowledge of assisted living in Minnesota. This study looked at many different areas to determine this cohort's planning for long-term care, knowledge, needs, and availability of information about Housing with Services / Assisted Living.

# Knowledge of Housing with Services / Assisted Living Terms

Participants of this study were asked whether or not they had heard of the terms Housing with Services and Assisted Living. Very few had heard of Housing with Services, while 100% of the participants had heard the term Assisted Living. In Minnesota, assisted living facilities are often referred to as housing with services establishments. Minnesota views assisted living as a service concept instead of a type of facility (Aging Services of Minnesota, 2008). The term "housing with services establishments" was chosen to describe assisted living in Minnesota with the idea that it would lessen the confusion of what assisted living is because there are numerous definitions that vary from state to state. This term was also chosen because it is general and covers a wide array of settings and services (Aging Services of Minnesota, 2008).

For this study, the definition used to describe Housing with Services / Assisted Living was created by the Assisted Living Quality Coalition. This coalition defines it as:

A congregate residential setting that provides or coordinates personal services, 24-hour supervision and assistance (scheduled and unscheduled), activities, and health related services; designed to accommodate individual residents' changing needs and preferences, designed to maximize residents'

dignity, autonomy, privacy, independence, and safety; and designed to encourage family and community involvement. (Hawes & Phillips, 2007, p. 42)

For those participants who had heard of the terms, some described it as a community that someone moves to receive services as they need them. Others defined these terms as staying in your own home and having services come to you. The mixed answers to these questions show that what is considered Assisted Living/Housing with Services is not the same for everyone who is either currently a consumer, or will become one in the future. It would be less confusing for consumers if there was a more universal term in the field when it comes to Assisted Living/Housing with Services in Minnesota. It is also important that this definition makes sense to the consumer, written in a way that someone outside of this field can understand.

# **Planning for Assisted Living / Housing with Services**

Planning for Assisted Living/Housing with Services is a concern for the aging Baby Boom generation. Today's middle-aged adults are not concerned about their future housing (Coile, 2003). They are spending more money and are saving less for retirement (Naditz, 2003). According to Wilson (2002), members of the Baby Boom generation delay in saving for retirement and deny that they are aging.

The research from this current study supports a pattern that has been found in other research. Planning for Housing with Services / Assisted Living for themselves is lacking, especially when related to costs. The participants in this study were asked to put in their own amount of what they think Housing with Services / Assisted Living would cost on an annual basis. The numbers ranged between \$7,200.00 and \$150,000.00. The Genworth Financial website (2012) that compares the costs of

assisted living facilities across the United States, shows the Minnesota median cost for assisted living establishments per month is \$3,136, or \$37,632 annually (Genworth Financial Inc., 2017).

Participants in this study were also asked how they would pay for Housing with Services / Assisted Living. The majority (79.6%) said that they would be able to pay for it out of pocket, with their own funds. Long Term Care Insurance was the next most chosen answer, followed by Social Security, Medicare, Health Insurance, and Elderly Waiver. Some participants chose other as an answer, and put that they could not choose because they did not know the definitions of the sources already provided. According to previous research, a minority of residents residing in an assisted living facility pay for all of the services offered out-of-pocket. In Minnesota, there are two programs that can help: Elderly Waiver and Alternative Care (Chun, 2001). There is a misconception of what programs can help pay for services. These findings show the immediate need for education on cost, as well as financial planning, in order for the Baby Boom generation to be able to afford care for their future.

Cost is one issue when examining the Baby Boom generation's planning for Housing with Services / Assisted Living, but this study also found that participants found it difficult to think about their living situation because they were unable to picture themselves as seniors needing this type of housing. When the participants were asked what services they would want, some responded in the comment section that they could not say because they currently did not need services and did not

know what they would need in the future. One respondent answered that the services would depend on if and when they needed them. These comments show a pattern of thoughts on how they could not plan for what services they need because they are not currently ready for Housing with Services / Assisted Living, and that they think they may not even need these services in the future. This is an interesting find because many of the participants did not have difficulty saying what services they would look for when helping someone else search, not themselves.

## **Available Information / Source of Information**

Finding available information and resources when looking for Housing with Services / Assisted Living was one of the topics addressed in the study. All but one of the participants said they had helped someone look for this type housing, showing that this is definitely an experience that most people will go through in their lifetime. Brochures for individual facilities, along with word mouth, were the two most common ways that the participants gathered their information on this type of housing. The Internet and health care facilities followed closely behind.

Recommendations made by participants included having a centralized data base. They stated that the information they found was very general, and not so easily accessible. The research shows participants are interested in finding a "one stop shop" where they can get all the information they need. In Minnesota, there are some centralized places, including the Senior Linkage Line and the Care Options Network website. These resources are full of information on this type of Housing, as well as equipped with staff who can answer questions. The problem however, is that

awareness of centralized places like these are not well known to the public. It would be a great benefit for those involved in these programs to focus on public educational opportunities, as well as other marketing strategies (brochures, flyers, commercials) to spread the word.

Education on costs, payment options, and time needed to look was another theme found from this study regarding availability of resources and information. The data showed varying answers on how much Housing with Services / Assisted Living cost, and how they were going to pay for it. Many of the answers were incorrect, showing that more education needs to be provided on this topic. Suggestions made by the participants included holding classes in the community to better educate people, allowing them to ask questions and to get specific questions answered. Educational opportunities like this, where questions can be asked and answered, would benefit not only the participants in this study, but all other consumers in Minnesota.

Another issue with locating costs and information on this topic was lack of detailed information. Some participants stated that when looking online and at brochures, the information was very general. The information given did not provide costs, and gave a very broad overview of services. So not only would it be beneficial for classes to be held in the community on costs and payment options, but providers (specifically the Housing with Services / Assisted Living communities) should offer classes/open houses at their specific community.

The topic of time when it comes to looking for options in Housing with Services / Assisted Living was also brought forward when looking at the data from this study. Participants suggested that Housing with Services / Assisted Living is a quick option in an emergency, and were frustrated with having difficulty finding an available apartment. Unfortunately, Housing with Services / Assisted Living communities are not set up for emergency admissions. Many communities have long waiting lists. It is important that families, potential residents, social workers, doctors, and discharge planners are all on the same page when it comes to availability of apartments, waiting lists and quick admissions. Communities should be educating consumers and professionals that preparing ahead of time is key. Getting themselves or their loved ones on a waiting list is important so that they are ready before an emergency happens. It also allows future residents to have a say in where they would like to live, which is important for a successful transition and happiness in their new home.

#### Limitations

This exploratory study had several limitations. For example, the sample of participants was limited to faculty and staff at a central Minnesota University who all had higher levels of education. The questionnaire was created through Survey Monkey and sent out through e-mails, so only those who had access to computers were able to participate. Also, there is homogeneity among the participants, leaving little room for diversity or variation.

When the data was analyzed, it was found that there are some limitations when conducting a study based on qualitative data. For example, participants were

asked what they thought Housing with Services / Assisted Living cost, some of the answers were difficult to determine if they meant per year or per month, which could possibly skew the data. It would be beneficial to conduct another study using a focus group and/or interviews that focused more on qualitative data, so that any doubts of answers provided can be addressed.

## Conclusion

With the older adult population increasing, the topic of preparation for Housing with Services / Assisted Living within the Baby Boom generation needs greater focus. The data from this study shows that although many of the participants had heard of at least one of the terms Housing with Services or Assisted Living, they had misconceptions about cost, payment options and definition of this type of housing. Lack of planning was also a theme found throughout the data.

Planning financially for the future when it comes to Housing with Services / Assisted Living for the Baby Boom generation is something that needs greater focus. Participants in the survey had misconceptions about cost, as well as about the programs available that would help pay for this type of housing. They were asked what they thought the annual cost of Housing with Services / Assisted Living, and their answers showed that there is not a universal understanding of this. The answers were \$7,200 to \$150,000, which is a very large range.

When asked if they had concerns about being able to afford this type of housing, 70.59%, which is the majority, said yes. However, that still leaves 29.41% who are not concerned, which is a fairly large number. To add to that, 81.19% of the

participants stated that do not think they could pay for it out of pocket, while 19.80% said that they could. A question to ask is how many of the 19.8% participants were on target of what Housing with Services / Assisted Living actually costs per year. For example, one of the respondents said they were not worried about paying for Housing with Services / Assisted Living. They wrote that the average cost of this type of housing is between \$20,000 and \$25,000. They also said that Medicare, Social Security, Long Term Care Insurance, and Health Insurance would help them pay for Housing with Services / Assisted Living. Unfortunately for this participant, their guess of the annual cost was low, the annual average actually being \$35,600 (Yee-Melichar et al., 2011). Out of the four programs the respondent listed as programs that will help pay for this type of housing, only one (Long Term Care Insurance) is an actual option. This is just one of the examples that shows how vital it is to get the correct financial information out there to the Baby Boom generation. We want consumers to be able to plan for their future and be as knowledgeable as possible.

Not only was lack of financial planning a theme found in the analysis of this study, but it also showed a difficulty for the Baby Boom generation to prepare for their possible need of Housing with Services / Assisted Living. The participants could acknowledge that their parents would make use of Assisted Living / Housing with Services, but they had difficulty imagining it themselves. In comments, may respondents found it challenging to imagine themselves in an alternative living situation. One participant stated, "It would totally depend on my condition. I'd prefer to

need none of these services". Another participant wrote, "Hard to answer at this time because I do not need assistance".

Overall, the concept of Housing with Services / Assisted Living is a topic that needs attention, especially as the number of older adults continues to rise. One hundred and three people answered this survey, which is a large response rate. This number allowed enough data to be collected to find misconceptions on this topic, as well as what this generation is understanding. Future research must be done in order to explore each theme in more detail. For example, conducting a Qualitative Study/Focus Group would allow future researchers to dig deeper into answers, permitting them to get more information, as well as avoid some misconceptions of answers. It is vital that researchers and professionals in this field work together to improve the knowledge of and education on the Housing with Services / Assisted Living concept in order to prepare the Baby Boom generation for their future.

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# Appendix A: Questionnaire

1.	What year were you born?
2.	Gender (Please Check) Female Male
3.	Race and Ethnicity (Please Check all that Apply)  White/Caucasian Black/African American American Indian or Alaska Native Prefer not to answer  Latino/Latina Asian/Pacific Islander Other (Please Specify) Prefer not to answer
4.	Highest Education Level Achieved (Please Check)  Some High School High School Diploma Some College Bachelor's Degree Some Graduate School PhD Other (Please Specify)
5.	Relationship Status (Please Check)  Married or Partnered  Single or Never Married  Other (Please Specify)  Divorced or Separated  Widowed
6.	Annual Household Income (Please Check)  Under \$25,000 \$25,000 - \$39,999 \$40,000 - \$59,000 \$60,000 - \$74,999 \$75,000 - \$89,999 \$90,000 - \$104,999 \$105,000 - \$119,999 \$120,000 - \$134,999 \$135,000 and above Prefer not to answer
7.	Have you heard of the term Housing with Services? (Please Check)  Yes No
	If yes, please describe what this term means to you.

8.	Have you heard of the term Assisted Living? (Please Check)
	Yes No
	If yes, please describe what this term means to you.
	What do you think the approal cost to live on in accieted living facility would
9.	What do you think the annual cost to live an in assisted living facility would be?
10	If you needed Housing with Services/Assisted Living, do you think you
	could afford to pay out-of-pocket, from your own funds? (Please Check)
	Yes No
lf r	no, which of these financial resources do you think could benefit you?
(C	heck all that apply)
	Medicare Medicaid Social Security
	Elderly Waiver LTC Insurance Health Insurance
	Other (Please Specify)
11	Do you have any concerns about being able to afford Housing with
	Services/Assisted Living? (Please Check)
[	Yes No
	If yes, what are they?

Services/Assisted Living facility, what
want for yourself? (Check all that Apply)
Transportation Services
Spirituality/Religious Services
Meals
Entertainment
Special snacks and treats
g with Services/Assisted Living facility, t? (Please Check)

# **Appendix B: Consent Form**

You are invited to participate in a study of what the baby boom generation knows about assisted living in Minnesota. This study is being conducted by Jennifer Writz, a Gerontology Master's student at St. Cloud State University. I hope to learn about this generation's understanding of assisted living in Minnesota. You meet the criteria for participation in this study because you are a resident of Minnesota, a faculty or staff member of a central Minnesota University, and were born between the years 1946 and 1964.

By clicking on the link to enter the questionnaire, you are agreeing to participate in this study. You will be asked a series of questions about assisted living in Minnesota. Also, you will be asked questions about your demographic information. These questions will take approximately 15 minutes to answer.

Your identity will remain confidential and your participation in this questionnaire is voluntary. If you decide to participate, you are free to discontinue participation at any time. If you have any questions, please feel free to contact me, Jennifer Writz at <a href="wrie1001@stcloudstate.edu">wrie1001@stcloudstate.edu</a> or my advisor Dr. Phyllis Greenberg at <a href="pagreenberg@stcloudstate.edu">pagreenberg@stcloudstate.edu</a> from the Gerontology Program at St. Cloud State University.

I very much appreciate your time and assistance with this current study.