The growth of the population age 65 and older is one of the most significant demographic trends in the history of the United States. Baby boomers—those born between 1946 and 1964—are turning 65 at a rate of 10,000 a day.¹ This generation, which numbered nearly 75 million in 2015, continues to make its mark on culture, healthcare, social services, caregiving and the economy. And now as they head into their senior years, this group is redefining what it means to age and is putting new pressures on a system of healthcare and social support services that isn’t fully meeting their needs as they grow older. They are not alone. Future generations of seniors are also concerned about their aging experience and whether their future will be better, the same or worse than their parents and grandparents.


Five Things You Should Know about support systems for aging from the West Health Institute/NORC Survey on Aging in America

1) More than 7 in 10 Americans age 30 and older say it’s important that seniors have access to health care services, dental care, healthy food, affordable housing and transportation, but fewer than half say their communities are doing a good job in these areas.

2) About one-third of adults in their 30s, 40s and 50s do not think government programs are meeting the needs of seniors, compared to 26 percent of people in their 60s and 14 percent of people 70 or older.

3) People age 70 and older are significantly more likely than any other age group to have a positive view of the healthcare system.

4) Over half of Americans age 30 and older say they have a very or somewhat strong relationship with their primary healthcare provider, and the likelihood of a strong relationship is greater as people grow older.

5) While most Americans say it’s very important for seniors to have access to dental care, only 29 percent think their local communities are doing a good job meeting oral health needs.
According to the West Health Institute/NORC Survey on Aging in America, you don’t have to be a baby boomer to believe the healthcare system, social services, government programs and local communities should be doing more to help older adults stay healthy and retain their independence. More than 7 in 10 Americans age 30 and older say it’s important that seniors in their neighborhoods have access to healthcare services, dental care, healthy food, affordable housing and transportation, but fewer than half say their communities are doing a good job in these areas.

The West Health Institute/NORC Survey on Aging in America highlights the similarities and differences in attitudes toward aging for five age groups (30 to 39 year-olds, 40 to 49 year-olds, 50 to 59 year-olds, 60 to 69 year-olds and 70 year-olds and older).

There are significant age differences in beliefs about whether government programs, including Social Security and Medicare, are sufficiently addressing the needs of seniors. About a third of adults in their 30s, 40s and 50s do not think such government programs are meeting the needs of seniors, compared to 26 percent of people in their 60s and 14 percent of people in their 70s or older. The results indicate adults who have less exposure to programs feel more negatively about them than people who use such programs. The survey also shows adults feel more positively about how religion and places of worship, as well as local community charity and senior support organizations, address the needs of seniors.

Nearly one-third of Americans over age 30 rate the healthcare system as poor or very poor (31 percent), and the youngest adults have the most negative views. Forty-one percent of those in their 30s have negative views of the healthcare system, compared with just 14 percent of adults age 70 and older.

However, when it comes to their own personal healthcare experience, Americans tend to feel better. More than 60 percent say they are somewhat to very satisfied with their own care, a belief that is greatest amongst older adults (42 percent of 30 to 39 year-olds, 55 percent of the 40 to 49 year-olds, 61 percent of the 50 to 59 year-olds, 71 percent of the 60 to 69 year-olds and 82 percent of those 70 and older).

The West Health Institute/NORC Survey on Aging in America shows how adults of differing stages in life feel about growing older, the things that are most important to them as they age, their biggest hopes and fears and the event or occurrence that they think marks their entry into “old age.” Most Americans in their 30s, 40s, 50s and 60s think the country is not prepared for the aging of America (70 percent), nor is it moving in the right direction (59 percent) when it comes to providing healthcare and social services for seniors (see companion report: Perceptions of Aging during Each Decade of Life after 30). Overall, the survey features a nationally representative sample of 3,026 adults age 30 and older.

This report reviews how each age group views our healthcare system, government programs including Medicare, social services, religious institutions, charities and local communities in serving seniors today and how well they think it will serve them in the future.

---

VIEWS OF THE CURRENT HEALTHCARE SYSTEM ARE POOR, BUT OLDER ADULTS ARE LESS NEGATIVE.

Few Americans rate the country’s healthcare system highly, but older adults are most likely to say the system is doing well. Overall, 29 percent of Americans age 30 and older say the healthcare system is good or excellent, 40 percent say it is fair and 31 percent say it is poor or very poor. People age 70 and older are significantly more likely than any other age group to have a positive view of the healthcare system.

Older Americans are more likely to say the healthcare system in the United States is good or excellent.

Question: How would you rate the healthcare system in America today?

While opinions of the overall system aren’t high, a majority are at least somewhat satisfied with their personal healthcare, and older adults are more likely to be satisfied. Sixty-one percent of Americans age 30 and over say they are very or somewhat satisfied with their personal healthcare experience, 16 percent are neither satisfied nor dissatisfied and 22 percent are very or somewhat dissatisfied. Satisfaction is related to age; people age 30-39 report having the lowest level of satisfaction, while those age 70 and older report the highest level.

Older Americans are more likely to be satisfied with their personal healthcare.

Question: Overall, how satisfied are you with your personal healthcare experience?
When it comes to what is important to their personal healthcare experience, 60 percent of Americans age 30 and older say having a long-term relationship with their doctor is extremely or very important, and 41 percent say having a professional whose job it is to coordinate all aspects of their care is extremely or very important. Older adults are much more likely than younger adults to value long-term provider relationships (74 percent of those age 60 and older vs. 53 percent of those age 30-60), and they are slightly more likely to value having a care coordinator (44 percent of those age 60 and older vs. 38 percent of those age 30-60).

Just over half of Americans age 30 and older (53 percent) say they have a very or somewhat strong relationship with their primary healthcare provider. The survey finds the relationship with a primary care doctor is related to age. Just over 30 percent of people in their 30s say they have a very or somewhat strong relationship with their primary care health provider, compared with 46 percent of people in their 40s, 52 percent of people in their 50s, 63 percent of people in their 60s and 81 percent of people in their 70s or older.

Older Americans are more likely to have a strong relationship with their primary healthcare provider.

Question: How would you describe your relationship with your primary healthcare provider?

**MANY AMERICANS SAY IT IS EASY TO GET MEDICATIONS OR SEE THEIR PRIMARY HEALTHCARE PROVIDER, BUT FEW SAY IT IS EASY TO GET HEALTHCARE AND SUPPORTIVE SERVICES AT HOME.**

Majorities of Americans say it is very or somewhat easy to get medications (72 percent), emergency care (68 percent), see their primary care doctor (64 percent) and get dental services (62 percent), when needed. Far fewer say it is very or somewhat easy to get mental healthcare or behavioral health services (29 percent) and healthcare and supportive services at home (24 percent).

Older Americans, who are more likely than younger Americans to say they have gone to the doctor recently (92 percent of those age 60 and older vs. 76 percent of those age 30-60), are more likely than younger adults to say it is easy to access such care.
Older Americans are more likely to find it easy to access medical care than younger Americans.

Question: When it comes to your personal healthcare experience, how easy or difficult is it to...?

**AMERICANS PLACE HIGH VALUE ON COMMUNITY SUPPORT SERVICES, BUT MANY WORRY THEIR COMMUNITY IS NOT DOING A GOOD JOB.**

Many Americans value local services for seniors. More than 7 in 10 people over age 30 say it is important that seniors in their area have access to healthcare services (80 percent), healthy food (75 percent), affordable housing (73 percent) and transportation (71 percent). However, fewer than 3 in 10 say their area is doing a good job meeting seniors’ needs for affordable housing (29 percent) and mental healthcare (27 percent), and fewer than half say their area is doing a good job of meeting seniors’ needs for transportation (43 percent), healthy food (43 percent) and healthcare services (43 percent).

Americans age 60 and older are more likely than those age 30-60 to believe their area is doing a good job of meeting seniors’ needs for transportation (52 percent vs. 40 percent), healthy food (54 percent vs. 38 percent), affordable housing (35 percent vs. 28 percent) and healthcare (58 percent vs. 39 percent).

When it comes to addressing the needs of seniors, Americans age 30 and older give high marks to religion and places of worship and mixed marks to government programs, healthcare providers, local community charities and businesses that provide services to seniors. Only about 1 in 4 believes local charities (26 percent), healthcare providers (25 percent) and government programs (23 percent) are doing very well addressing the needs of seniors.
Religious organizations top the list when it comes to Americans’ thoughts about who is serving our seniors well.

<table>
<thead>
<tr>
<th></th>
<th>Extremely or very well</th>
<th>Moderately well</th>
<th>Not too or not at all well</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion and places of worship</td>
<td>46</td>
<td>30</td>
<td>10</td>
</tr>
<tr>
<td>Local community charity and senior support organizations</td>
<td>26</td>
<td>43</td>
<td>18</td>
</tr>
<tr>
<td>Healthcare providers</td>
<td>25</td>
<td>43</td>
<td>22</td>
</tr>
<tr>
<td>Government programs like Social Security and Medicare</td>
<td>23</td>
<td>40</td>
<td>30</td>
</tr>
<tr>
<td>Businesses that provide services to seniors</td>
<td>19</td>
<td>41</td>
<td>24</td>
</tr>
<tr>
<td>Dental care providers</td>
<td>17</td>
<td>34</td>
<td>31</td>
</tr>
</tbody>
</table>

Question: In America today, how well does each of the following address the needs of seniors?

Adults age 60 and older are more likely than those age 30 to 60 to say government programs (38 percent vs. 18 percent), healthcare providers (34 percent vs. 23 percent) and local community charities (33 percent vs. 24 percent) are addressing the needs of seniors. Likewise, adults age 60 and older are also over twice as likely as those age 30-60 to say Medicare is working well for seniors (55 percent vs. 22 percent), despite the mixed reviews the program receives from all adults.

Sixty-two percent of Americans age 30 and older lack confidence that Medicare will continue to provide at least the same level of benefits in the future that it provides to seniors today.

Older adults in their 60s and above are more likely to say government programs, local charities and healthcare providers do a good job addressing the needs of seniors.

Question: In America today, how well does each of the following address the needs of seniors?
MOST SAY DENTAL CARE IS VERY IMPORTANT FOR SENIORS, BUT LESS THAN ONE-THIRD BELIEVE THEIR AREA IS DOING A GOOD JOB PROVIDING IT.

About 7 in 10 adults say it is very important that dental care is available to seniors in their area, but only about 3 in 10 say their area is doing a good job of meeting seniors’ dental care needs. Indeed, independent research shows that although oral health is important for overall well-being, few older Americans receive needed care.3

While most Americans say it’s very important for seniors to have access to dental care, only 30 percent think their local communities are doing a good job meeting oral health needs.

Women are more likely than men to say it is important for dental care to be available to seniors in their areas (75 percent vs. 62 percent). Seventy-nine percent of African Americans believe having dental care available in their area is important, compared with 76 percent of Hispanics and 66 percent of whites.

Those with multiple chronic conditions are more likely than others to say dental care for seniors in their area is important (71 percent vs. 67 percent). Likewise, those with long-term care experience are also more likely than those without it to value dental care (71 percent vs. 66 percent).

Americans are less satisfied with the quality of dental care in their area compared to other services that meet seniors’ needs. Fewer people think their area provides good dental care (29 percent) than say the same about healthcare (43 percent), transportation (43 percent) and healthy food (43 percent).

A majority of Americans see a dentist regularly, though a significant proportion do not. Nearly 2 in 3 adults say they have been to the dentist in the last year, while 13 percent have not been in the last five years.

People age 60 and older are more likely to have visited a dentist in the past year than younger adults (67 percent vs. 60 percent). Likewise, frequency of dental visits is related to socioeconomic status. People with higher incomes (74 percent of those with incomes of $50,000 or more per year vs. 49 percent of those making less than $50,000) and more education (76 percent of those with a college degree vs. 52 percent of those with a high school education or less) are more likely to have visited a dentist recently.

**IN-HOME SERVICES AND HEALTHCARE THAT SUPPORTS INDEPENDENT LIVING ARE EXTREMELY IMPORTANT TO LARGE MAJORITIES.**

When Americans think about what it means to be old, loss of independence tops the list, and this survey finds that Americans put a high value on healthcare services and housing solutions that allow them to continue living independently longer.

Access to in-home health services is important to many Americans. Sixty-nine percent of Americans age 30 and older say having a way for seniors to receive healthcare services in their own homes is extremely or very important, 24 percent say it is moderately important and only 7 percent say it is not too or not important at all.

In-home services are very or extremely important for 67 percent of those in their 30s, 74 percent of 40 to 49-year-olds, 70 percent of those in their 50s, 70 percent of those in their 60s and 60 percent of those 70 and older.

Availability and access to dental care and transportation are also viewed as very or extremely important to about 7 in 10 Americans over age 30. Likewise, may adults view healthcare and preventive services (80 percent), healthy food and nutrition (75 percent) and affordable housing (73 percent) as very or extremely important.

About 3 in 4 adults age 30 and older say it would be helpful to have services that deliver medications to their homes and web portals where one could log in online to communicate with their doctor and view their health records. Likewise, roughly 2 in 3 believe “house calls,” where a healthcare provider makes an in-home visit, and telemedicine, where people can receive care from their provider by telephone, Skype or other electronic medium, would be at least moderately helpful. Although valued by many, research shows that access to in-home services and dental care is often lacking in the U.S. healthcare system for those who need it.

---


A majority of adults age 30 and older say access to in-home healthcare services would be helpful.

<table>
<thead>
<tr>
<th>Service</th>
<th>Extremely or very helpful</th>
<th>Moderately helpful</th>
<th>A little or not helpful at all</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication deliveries</td>
<td>50</td>
<td>22</td>
<td>21</td>
<td>7</td>
</tr>
<tr>
<td>Web portals</td>
<td>48</td>
<td>24</td>
<td>20</td>
<td>7</td>
</tr>
<tr>
<td>Telemedicine</td>
<td>41</td>
<td>24</td>
<td>23</td>
<td>12</td>
</tr>
<tr>
<td>House calls</td>
<td>40</td>
<td>23</td>
<td>25</td>
<td>12</td>
</tr>
</tbody>
</table>

Question: In addition to receiving healthcare at doctor’s offices, clinics and hospitals, how helpful would having access to each of the following services be to you?

About 7 in 10 Americans age 30 and older say it is very or extremely important that in-home services that support independent living are available to seniors in their area, 24 percent say it is moderately important and 7 percent say it is not too or not at all important.

However, just 2 in 5 adults age 30 and older say their area is doing a good job of providing such in-home services. Yet, among adults with experience getting in-home healthcare and supportive services, half say it was easy to get them.

There are significant differences in attitudes about in-home services based on age, race, socioeconomic status, long-term care experience and health condition.

Older adults place more importance on in-home services than younger adults and have had more positive experiences with them. Forty-four percent of those who are age 60 and older say receiving in-home healthcare services is important, compared with 34 percent of those under 60 years old. Those age 60 and older are also more likely to say their area is doing a good job with in-home services (50 percent vs. 37 percent) and report it has been easy to get these healthcare services at home (69 percent vs. 41 percent).

In-home services are especially important for people who have experience either providing or receiving long-term care. Those with long-term care experience are more likely than those without such experience to say these types of services are important (43 percent vs. 31 percent) and that access to house calls would be very helpful (46 percent vs. 34 percent). However, people with long-term care experience are more likely than those with no such experience to say it has been difficult to get these healthcare services at home (28 percent vs. 19 percent).

In-home services are more important to people with lower incomes. People with incomes under $50,000 a year are more likely than those with higher incomes to say receiving healthcare services is important (45 percent vs. 30 percent) and house calls would be very helpful (45 percent vs. 36 percent).
Attitudes toward in-home health services and experiences with such care also vary by race. African Americans and Hispanics are more likely than whites to say receiving in-home healthcare services is important (54 percent, 46 percent and 32 percent, respectively). In terms of their area providing in-home services, 51 percent of African Americans say their area is doing a good job, compared with 40 percent of whites and 32 percent of Hispanics.

**MANY AMERICANS WHO PROVIDE LONG-TERM CARE DON’T FEEL WELL SUPPORTED AND THINK CAREGIVERS NEED MORE HELP.**

As the senior population grows, many Americans expect they will require some type of long-term care, such as help with cooking, bathing or taking medicine. Nearly half of Americans age 30 and older have already provided this type of support to a loved one, but many did not feel like they had the support they needed as a caregiver.

When it comes to providing long-term care, 46 percent of adults age 30 and older have provided ongoing living assistance directly to an older family member or close friend, and a majority (55 percent) say they have had a close relationship with an older family member or friend who was receiving ongoing living assistance. Adults age 60 and older (58 percent) are much more likely than younger adults (39 percent) to have had experience providing ongoing living assistance to an older family member or friend.

Many Americans struggle with providing care and lack the necessary resources. Just 43 percent of those providing long-term care say they had all the support they needed. The lowest percentages can be found in the 40-49 and 50-59 age groups (about 39 percent). Most Americans (73 percent) value programs that provide information, resources and training to family members who provide care.

People with long-term care experience report having more difficulty accessing various types of care. For example, people with long-term care experience are more likely than those without such experience to say it is difficult to get dental services when needed (23 percent vs. 16 percent) and healthcare services at home (15 percent vs. 8 percent).

**Adults who received/provided long-term care say it’s more difficult to get a number of healthcare services.**

<table>
<thead>
<tr>
<th>Service</th>
<th>With Experience</th>
<th>Without Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get dental services when you need them</td>
<td>16%</td>
<td>16%</td>
</tr>
<tr>
<td>Get mental health care or behavioral</td>
<td>17%</td>
<td>13%</td>
</tr>
<tr>
<td>health services when you need them</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Get healthcare and supportive services at home</td>
<td>8%</td>
<td>15%</td>
</tr>
<tr>
<td>Get medications if you need them</td>
<td>14%</td>
<td>10%</td>
</tr>
</tbody>
</table>

**Question:** When it comes to your personal healthcare experience, how easy or difficult is it to...?
ABOUT THE STUDY

Survey Methodology

This survey was conducted by NORC at the University of Chicago with funding from the West Health Institute. Data were collected using AmeriSpeak®, which is a probability-based panel designed to be representative of the U.S. household population. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone and field interviewers (face-to-face).

Interviews for this survey were conducted between September 19 and October 21, 2016, with adults age 30 and over representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak®, and 3,026 completed the survey—2,303 via the web and 723 via telephone. Interviews were conducted in English and Spanish. The final stage completion rate is 45.4 percent, the weighted household panel response rate is 21.3 percent and the weighted household panel retention rate is 94.4 percent, for a cumulative response rate of 9.1 percent. The overall margin of sampling error is +/- 2.2 percentage points at the 95 percent confidence level, including the design effect. The margin of sampling error may be higher for subgroups.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a poststratification process is used to adjust for any survey nonresponse as well as any noncoverage or under- and oversampling resulting from the study-specific sample design. Poststratification variables included age, gender, census division, race/ethnicity and household phone status. The weighted data, which reflect the U.S. population of adults age 30 and over, were used for all analyses.

About the West Health Institute and West Health

Solely funded by philanthropists Gary and Mary West, West Health includes the nonprofit and nonpartisan Gary and Mary West Health Institute and Gary and Mary West Foundation in San Diego and the Gary and Mary West Health Policy Center in Washington, DC. These organizations are working together toward a shared mission dedicated to enabling seniors to successfully age in place with access to high-quality, affordable health and support services that preserve and protect their dignity, quality of life and independence. For more information, visit westhealth.org and follow @westhealth.

About NORC at the University of Chicago

NORC at the University of Chicago is an independent research institution that delivers reliable data and rigorous analysis to guide critical programmatic, business and policy decisions. Since 1941, NORC has conducted groundbreaking studies, created and applied innovative methods and tools and advanced principles of scientific integrity and collaboration. Today, government, corporate and nonprofit clients around the world partner with NORC to transform increasingly complex information into useful knowledge.

NORC conducts research in five main areas: Economics, Markets, and the Workforce; Education, Training and Learning; Global Development; Health and Well-Being; and Society, Media and Public Affairs.

www.norc.org