Chapter 9
Aging and the Elderly:
Growing Old in Northwest Arkansas
Aging and the Elderly in Northwest Arkansas

Community life touches everyone from infants to senior citizens. The elderly represent a subgroup that is particularly sensitive to community circumstances; limited mobility makes them highly susceptible to contextual changes/shifts in the social and economic landscape. Ranging from physical and mental well-being to services access/use, understanding how this group is impacted by community is important to assessing the overall quality-of-life in Northwest Arkansas.

★ The gender composition of the elderly (percent female) in Northwest Arkansas and the state has changed slightly since 1980.

★ Madison County is the only county in the region to experience significant growth in the percentage of women over 65 since 1990.

★ The percentage of elderly persons living alone has remained relatively constant in Arkansas since 1980--shifting less than 1 percent over the last 26 years.

★ Benton County had fewer than one-quarter of its elderly residents living by themselves.

★ The remainder of Northwest Arkansas counties experienced modest shifts in the percent elderly living alone since 1980.

★ Washington County experienced a jump of nearly 6 percent in elderly living alone between 2000-2006.
Making a Living

Figure 9.3
Elderly Persons Employed, 1980-2006

A dramatic upturn in the percentage of persons 65 years of age and over who are currently employed has taken place in Northwest Arkansas counties since 1990.

Benton and Madison County saw their working elderly percentages nearly double between 1990-2000.

All of the counties in Northwest Arkansas have higher percentages of elderly employed compared to the rest of the state.

Those working in the state were 13.5 percent in 2006 compared to Washington and Benton Counties which were near 17 percent in 2006.

Figure 9.4
Elderly Persons Living In Poverty, 1980-2006

Potentially related to one another, Figures 9.3 and 9.4 suggest that employment among persons 65 years of age and over helped shift the percentage of elderly living in poverty in Arkansas and Northwest Arkansas counties.

Madison County exhibited the largest percentage decline of elderly living in poverty since 1980 dropping from a high of nearly 40 to almost 16 percent in twenty years.

Northwest Arkansas counties have mirrored the state’s downturn of elderly living in poverty with dramatic shifts between 1980 and 2000. The current percent of elderly living in poverty in Arkansas is 12 percent.
The food stamp program in the United States since the post-depression era, was designed to assist low-income individuals and families with obtaining food items in an effort to improve their diet and nutrition. Elderly persons represent a small percentage of the total persons on food stamps (less than 20%), yet as a group often need the assistance but are not enrolled. The majority of elderly who do receive food stamp benefits, live alone, receive less than $100.00 a month, and are often unable to obtain adequate nutrition on their own.

Since 2000, the percentage change of elderly receiving food stamps in Northwest Arkansas has fluctuated with no clear pattern to the present.

Benton County after two years of decline, recorded four years of continuous increases with nearly a 9 percent increase in elderly receiving food stamp support 2005-2006; the Washington county pattern was very similar.

Carroll County recorded small increases throughout the period since 2000, but marked a dramatic decrease in elderly receiving food stamps in the 2006-2007 period by nearly 10 percent.

Madison County recorded the greatest percentages declines over this period, losing more than 10 percent in two separate years.
Indicator in the Spotlight: Senior Citizens in Northwest Arkansas

By 2030, it is estimated that there will be nearly 70 million elderly living in the United States accounting for roughly 20 percent of the U.S. population. With America’s largest single baby boom generation entering into old age, the nation will need to prepare for that demographic shift both programatically and institutionally as more elderly require long-term care and hospitalization.

★ In 1980, the percent of persons over 65 in the state of Arkansas was approximately 12 percent. The percentage of persons over 65 living in the state has steadily increased reaching nearly 15 percent in 2006.

★ Northwest Arkansas counties had larger percentages of elderly compared to the state on average in the period of 1980-1990 (except for Washington County).

★ By 2000, Madison and Carroll Counties still had slightly larger percentages of elderly than the rest of the region.

★ Northwest Arkansas counties have consistently declined in the percent of elderly; none of the counties appear to be on a projected increase relative to the state.

★ In the 2000 map shown in Figure 9.7, relative to the rest of the state, the concentration of elderly in Northwest Arkansas was moderate; only Carroll County had a concentration greater than 15 percent.

★ Partly due to the large concentration of University of Arkansas students, Washington County was one of three other counties to have the lowest percentage of elderly (< 10%). The other two counties with small concentrations of elderly were Conway and Crittenden Counties.

“When grace is joined with wrinkles, it is adorable. There is an unspeakable dawn in happy old age.”

Victor Hugo, Author
As a primary source of health care for low-income families, children, and the elderly, Medicaid enrollment continues to increase in both the state of Arkansas and Washington and Benton Counties.

Both Washington and Benton Counties increased in the number of Medicaid eligibles between 2004-2007 by nearly 32 percent.

Carroll and Madison County had nearly flat Medicaid enrollments between 2004-2007.

While Medicaid eligibles increased in the state and parts of Northwest Arkansas, since 2004, the percent of Medicaid recipients age 65 and over declined.

With declines in the percent of Medicaid recipients 65 years of age and over in all the Northwest Arkansas counties and the state between 2004-2005, Washington and Benton Counties continued on a similar downturn in the percent of Medicaid recipients—with the lowest percentage of those receiving aid at 3.5 percent in 2007.

Medicare is the primary health care support program designed to assist persons over the age of 65. Eighteen percent of all Arkansas eligible recipients received some Medicare benefits in 2005.

With over 40 million U.S. elderly receiving some Medicare benefits, the projected estimate is that number will increase to 77 million by 2030.

The two fastest growing counties in the Northwest Arkansas region (Benton and Washington Counties) are showing signs of steady increases over the last several years of persons enrolling in Medicare.
Since 1990, the percentage of elderly with some type of disability in the state of Arkansas and Northwest Arkansas has been increasing. Nearly 50 percent of persons over 65 years of age in Arkansas had some form of disability in 2006.

In 1990, Washington and Madison Counties had disability percentages higher than the state average of 41 percent. By 2006, none of the Northwest Arkansas counties had percentages of elderly disabled higher than the state average.

Figure 9.11
Elderly With Disabilities, 2000-2006

Elderly Care

Long-term care for the elderly represents a large portion of the total health care expenditures each year in the United States. In 2000, an estimated 10 million persons were using long-term care of which nearly 75 percent were over the age of 65.

By 2002, nearly 1.5 million elderly were in some long-term care facility. Estimates suggest that the number in long-term care will double by 2013 as the baby-boomer population begins to experience increasing disability and disease.

Figure 9.12
Number of Certified Nursing Homes, 2008

Based on population size, growth, and the growth in services, the number of nursing home facilities is much larger in Benton and Washington Counties compared to Carroll and Madison.

Currently there are over 200 long-term care/nursing facilities in the state of Arkansas.

While nursing facilities vary considerably in size and in services, the projected growth over the next several decades will likely be significant both in the state and the Northwest Arkansas region.
The number of nursing home beds was highest in Washington County with nearly 1200 certified beds.

With a limited number of facilities, Carroll and Madison Counties had fewer than 400 total nursing beds available to the elderly/disabled population in those counties.

The nursing home residency rate for Arkansas was over 91 persons per 10,000 residents but dropped to 80 persons in 2000.

The residency rates for the Northwest Arkansas counties was lower than the state average in both 1990 and 2000.

Residency rates increased in all the Northwest Arkansas counties between 1990 and 2000 except for Benton County.
Elderly Health

In 2002, heart disease, cancer, and stroke were the leading causes of death among persons 65 years of age and over. They continue to rank as leading causes of death across all age groups yet they are preventable. Smoking, lack of exercise, and diet/poor nutrition are significant risk factors for all of these causes and the elderly are often at heightened risk because of their limited mobility and sedentary lifestyles. Arkansas generally ranks in the bottom half of states meeting or exceeding federal stated goals for healthy behaviors; Arkansas ranked at or near the bottom in women’s preventative health behaviors (mammograms, cancer screenings, and general preventative services).

Figure 9.15
Percent Population 65 & Over: No Flu Shot, Past Year

In 2004, fewer elderly Arkansans were not getting flu shots compared to the average elderly U.S. citizen.

In 2005, the number of Arkansans not getting their flu shot had risen above the national average.

All of the counties in Northwest Arkansas registered significantly lower percentages than the U.S. and the state with regards to elderly not getting their flu shot.

By 2006, the percent of elderly residents in Northwest Arkansas not receiving their flu shots had increased significantly and was above both the state and national averages.

The age-adjusted mortality rate for influenza and pneumonia in the state of Arkansas has decreased from a high of 40 deaths per 10,000 to 29 deaths since 1990.

Carroll and Benton Counties had the highest age-adjusted mortality rates for influenza and pneumonia in Northwest Arkansas until 1999.

By 2004, only Carroll County had influenza and pneumonia death rates higher than the state.

By 2004, all the Northwest Arkansas counties (except Carroll) had influenza and pneumonia mortality rates at or less than 20 deaths per 10,000 persons.

Figure 9.16
Age Adjusted Mortality Rate: Influenza & Pneumonia
What’s It All Mean?

Thanks to advances in medicine and health care, more people are living longer than ever before in the United States. With well over three million persons 85 years and above living in the United States, the challenge of care and services will continue to be a critical issue that needs to be addressed. The picture of elderly in Northwest Arkansas is somewhat unclear. While the percentage of persons 65 years of age and over has slowly increased in the state, the percentage of elderly in Northwest Arkansas counties has not. The percentage of elderly living in poverty has declined considerably in Northwest Arkansas since the 1980’s, while the percent of elderly who are working has increased dramatically. The economics of Northwest Arkansas may be forcing more elderly back to work or delaying retirement for others in order to make ends meet. Food stamps, Medicaid, and other forms of support seem to be declining—either fewer are qualified or more who are eligible just are not receiving the benefits they are qualified to receive.

Like all aging Americans and Northwest Arkansans as well, health issues will continue to be at the forefront of planning and strategic development in communities to meet the growing demand of this aging population. With the doubling of the 65 and over population by 2030 and a tripling of the percent 85 years of age and over, infrastructure will need to begin to change to accommodate this demographic shift. Rising energy, food, and transportation costs will begin to impact this subgroup quickly; rural elderly are at greatest risk to have limited access to health care, affordable housing, long-term care, and social services. While Washington and Benton Counties appear to be poised to serve this changing demographic, Madison and Carroll Counties may need to carefully examine the impending growth in the retiring baby boomer generation and how that will impact their supportive infrastructures.