LIVED VOICES

Aging in Rural America

Cultivating a Thriving Community of Care
Aging in rural America offers the rich rewards that come with values such as a deep sense of community, personal resilience and a sustained independence. It also presents many challenges, whether staying connected with loved ones, going grocery shopping or obtaining often hard-to-find care. Navigating these realities means championing older adults' voices to ensure access to both reliable resources and familiar comforts.

This study conducted by ATI Advisory was commissioned by Lutheran Services in America to listen to expressions of both strengths and needs directly from older adults, caregivers, home- and community-based services partners and community leaders in rural America.

Focus groups, surveys and interviews in Flathead County, Montana, McLean County, North Dakota, and Traverse County, Minnesota, identified issues specific to each, and, equally important, revealed cross-cutting themes emblematic of aging in rural America. The study also includes potential community-focused strategies to keep older Americans connected and able to reach and receive care, fortify the vital roles of caregivers, respond to shifting economic and demographic landscapes, prepare for aging and combat the stresses of social isolation.

Lutheran Services in America is a network of 300 health and human services organizations, many with a long history of building community partnerships focused on listening – and responding in innovative ways – to the lived voices of older Americans in rural areas. The findings in this report represent an ongoing movement to support thriving communities of care in rural communities to empower older adults to live full and meaningful lives.

“I originally got connected to the community when helping my aging parents, and then decided to stay here because I liked it so much.”

- Lois, Older Adult Focus Group Participant, Flathead County, MT
Many older Americans have spent decades – or even generations – on the same land and express a firm commitment to staying in their homes. Others share that the freedom brought on by retirement motivated them to move to a more open, less congested part of America.

Yet amid the common desire for independence, the residents of these communities also shared stories of the incredible closeness between neighbors, and the dedication to community caregiving. As Paul, a community caregiver in McLean County, ND, noted, “We can sense when people are withdrawing from social life. We keep track of each other.”

At the same time, an increasing proportion of individuals 65 or over in many rural communities indicates the growing need for services and support for older adults. However, the diminishing proportion of younger residents to help perform these services means that more and more, older adults themselves are providing care to their elder family members, friends and neighbors. Even then, older adults often worry that if they accept help, their independence may erode.

“Their whole lives they’ve been the ones to offer help to others, and now when they need help, it’s an identity crisis.”

– Sylvia, Community Caregiver, McLean County, ND

Communities in Transition

The communities that older adults have been active in sometimes for their whole lives are changing, and navigating the new dynamics can be challenging. For some, this means family members have moved away and their social circle is dwindling; for others, emerging physical needs and increasing costs of living can catch them off-guard both emotionally and financially. One retired couple in Flathead County, MT, for example, realized that a changing real estate market meant if they were to sell their home, they would be priced out of their own community.
Accessing Resources

While resource scarcity is real, oftentimes resource accessibility is the more pressing issue. Where some communities may already offer services and programs to assist aging in place, older adults and caregivers don’t always know how or where to start taking advantage of that aid, or whom to ask for help in getting it.

And even with government-based services available, sometimes personnel to distribute and manage these resources are localized in more populated areas of the state. This can result in reduced levels of support for rural communities in need. As Patricia a caregiver in Flathead County, MT, highlighted, “there are very few resources for the older adults in our small town. If there are resources, the elders don’t know how to find them or can’t get to them.”

For many who deeply value their independence, even the act of asking for help may trigger feelings of loss. Evie, a community caregiver in Traverse County, MN, pointed to the success of solutions that are self-driven: “We used to have a program for ‘phone mates’ where people were assigned to call each other. It was a great service and didn’t feel like an intrusion.”

Across the board in rural communities, one thing is certain: what people striving to sustain familiar and fulfilling lives as they age and their would-be caregivers need most is increased and long-term access to home- and community-based services.

CAREGIVER SNAPSHOT

“Farm life in real life is all about independence. It really means you’re out there, taking care of yourself. North Dakota is very much a ‘you can’t tell me what to do place. We will do it ourselves.’ And farm life is part of that independence streak and it works into the aging factor too ... because you can’t tell me what to do. To start losing that independence means that you’re losing your identity and so we work with that with people. I mean it’s hard to make that transition.”

–Paul, Community Caregiver, McLean County, ND

“There are very few resources for the older adults in our small town... the elders don’t know how to find them or can’t get to them.”

–Patricia, Caregiver, Flathead County, MT
Based on surveys, focus groups and interviews with community leaders, service providers, caregivers and older adults themselves, this report identifies six key challenges to aging in rural America, as well as how they are manifested in the counties studied. This report also offers potential community-focused solutions to emergent and ongoing challenges, buoyed by tight-knit bonds and the values of coming together and looking out for one another.

**Key Challenges to Aging in Rural America**

1. **Who can provide necessary care?**
2. **How can older adults reach services?**
3. **How can caregivers reach older adults?**
4. **When services exist, how do people learn about them?**
5. **Where will caregivers, and older adults, live?**
6. **How can we encourage older adults to prepare for aging?**
In Traverse County, MN, 100% of professionals report that caregiving is their passion. 80% of professionals work in the field because they believe their community needs the support.

**CORE ISSUES IDENTIFIED**

- **Decreasing pool of caregivers.**
  Rural communities often suffer from a rapidly decreasing number of volunteer and professional caregivers alike, including critical and routine needs, such as home care service and help with yardwork. This, in turn, has led to a loss of services; in Traverse County, MN, a program to prevent falls in older adults had to close because there were not enough volunteers to staff it.

- **Lack of professional supports.**
  There tends to be a lack of basic supports for caregivers, including mentorship, support networks or training opportunities to retain workers; services to support caregivers’ personal needs, such as child care; and attention to recruitment of potential caregivers within the community. In addition to making it difficult to bring people into the profession, these factors can also lead to burnout.

- **Over-reliance on small networks.**
  Communities often have to rely upon a core group of volunteers as caregivers, or even one key volunteer. These volunteers are often older adults themselves who may be looking to retire soon, and are concerned about what will happen when they can no longer help – or need assistance themselves.

**POTENTIAL COMMUNITY-FOCUSED SOLUTIONS**

- **Offer Non-Pay-Based Benefits.**
  When higher compensation is not an option, consider lower-cost benefits to demonstrate caregiver value such as flexible scheduling, childcare or access to training.

- **Mentor and buddy programs.**
  Develop mentor and buddy programs to help train and support caregivers in the challenging early days of their jobs to decrease turnover. Offer other supports to demonstrate the value of caregivers, including networking opportunities, support groups and opportunities to engage with industry leaders.

- **Showcase existing caregivers.**
  Tap into existing volunteer and community networks to showcase the voices of current caregivers on career panels, at schools with students interested in medicine and in churches targeting former family caregivers to recruit new talent.
"Driving is key. Once you can no longer drive, it shuts you off from the world."

- Shelley, Older Adult Focus Group Participant, McLean County, ND

How can older adults reach services?

**CORE ISSUES IDENTIFIED**

**Lack of transportation options.**
There is a lack of available transportation options – including limited public transportation – to medical appointments, social activities and other necessary places such as grocery stores. In many rural communities, delivery services common in metropolitan areas simply do not exist.

**No longer driving.**
For residents who no longer drive, options can be scarce. Neighbors or volunteers may not be available to help, and ride-sharing services are often prohibitively expensive or just not available.

**Limited mobility.**
For those who can drive themselves, factors such as long distances and poor weather conditions can still limit mobility, especially in the winter months.

**POTENTIAL COMMUNITY-FOCUSED SOLUTIONS**

**Community-based care.**
Launch programs to provide community-based care out of centralized locations that are more accessible and that older adults frequent such as churches, libraries or senior centers.

**Expand networks.**
Expand or create new transportation networks, especially to serve older adults during off-hours and to non-medical appointments.

**Companionship programs.**
Organize carpooling opportunities and/or senior-to-senior transportation-based companionship programs.
“Spontaneity or daily life cannot happen in our county without a car. Lack of transportation options include a lack of funding, lack of paid drivers and a diminishing list of volunteers.”

- Stephanie, Aging Program Developer, Traverse County, MN

CORE ISSUES IDENTIFIED

Reimbursement.
Caregivers, both professional and volunteer, may not be reimbursed for travel time across long distances.

Remote locations.
Professional and volunteer caregivers struggle to provide care to remote locations, especially in difficult driving conditions.

POTENTIAL COMMUNITY-FOCUSED SOLUTIONS

Compensation.
Compensate caregivers for driving time.

Repurpose existing resources.
Leverage existing resources by repurposing nearby senior living community fleets of vans to provide transportation for caregivers to recipients.

“Most people want face to face interaction. It would be great if someone could cover the drive time to offer support in the broader community to meet the needs of the older adults.”

- Nancy, Director of Aging Services, McLean County, ND
We need more supportive services, and we need more awareness of what’s available.”

- Vicki, Older Adult Focus Group Participant, McLean County, ND

CORE ISSUES IDENTIFIED

Lack of awareness.
Older adults and caregivers – particularly volunteers – are not always aware of available services, social activities and other resources they can leverage, and do not always know where to look or how to find them.

Little coordination.
There is little coordination or collaboration across service organizations, which can make it difficult to know who's providing which service.

Difficult to reach.
In rural areas, it is difficult to reach older adults and volunteer caregivers in the community to share information and resources.

POTENTIAL COMMUNITY-FOCUSED SOLUTIONS

Information on aging.
Gather, synthesize and disseminate information on aging resources available, such as meal delivery, transportation options, clubs and social gatherings.

Formalized partnerships.
Facilitate a sustainable, formal partnership among service providers and organizations by creating a standardized network for regular communication, such as an email listserv and regular conferences or video calls.

Build on deep community connections.
Building upon the deep community connections that exist in many rural counties, empower and equip older adults who do participate in programs to bring services awareness and “living well” education resources back to their communities.
More than 1 in 10 households in Flathead County, MT, spend 50% or more of their income on housing.

**CORE ISSUES IDENTIFIED**

Although affordable housing is an issue in many places, in this study it was most acute in Flathead County, MT.

**Lack of affordable housing.**
Recent new development has led to displacement and lack of affordable housing across the county. It has become virtually impossible to find housing for older adults, or caregivers that fits their income.

**Living on the outskirts.**
Due to cost, caregivers and older adults both have limited opportunities to live closer to town. By living on the outskirts, they are further away from one another, and commutes to care recipient homes can be longer and more challenging.

**Wage pressures.**
It can be difficult to attract caregivers to the profession in the first place given the competition with tourism-focused jobs, which often are able to offer perks such as signing bonuses.

**POTENTIAL COMMUNITY-FOCUSED SOLUTIONS**

**Make investments.**
Invest in affordable senior housing and consider offering stipends for caregivers seeking housing.

**Recruit those who already have housing.**
Open possibilities for people who are not in the workforce and already have housing in the community to work as caregivers.

**Tax breaks.**
Work toward creating tax break incentives for developers and/or landlords to expand housing options for caregivers and older adults.
How can we encourage older adults to prepare for aging?

“There’s a lot of diversity in how people age, and a lot of the times they don’t seem to be in control. They aren’t trying to dictate the outcomes as much as I hoped they would.”

- Jennifer, Owner of A Home Care Agency Servicing Flathead County, MN

CORE ISSUES IDENTIFIED

“Crashing” into aging.
While some older adults understand about saving for aging or retirement and considerations to take into account in selecting where they live, most people tend to lack a comprehensive aging plan and understanding of factors that will allow them to remain at home.

Resisting support.
Older adults may resist accepting aging support services for reasons such as a belief that other older adults need the services more, or out of a general resistance to confronting their different needs as they age. In addition, they can be reluctant to spend on services they were once able to do by themselves.

Becoming the cared for.
Older adults can find it difficult to accept support or services after they have spent so much of their lives offering that support to others.

POTENTIAL COMMUNITY-FOCUSED SOLUTIONS

Provide proactive guidance.
Create informational materials outlining key considerations to prepare for aging, the resources available and how to access them.

Reach seniors where they are.
Distribute materials through senior centers, disease support groups, caregiving support groups, area agencies on aging, doctors’ offices, churches, local media and other channels that reach older adults.

Network of support.
Engage caregivers and community organizations to create a network of support through existing services and to identify gaps in those services.
While there are many commonalities across communities and cultures at every life stage, it is critical to appreciate that experiences of aging vary from place to place and person to person. This report takes a closer look at some of the factors influencing quality of life for older adults in the three rural Midwestern counties studied.

**FLATHEAD COUNTY**  
**MONTANA**
- 51% rural  
- About 17 residents per square mile  
- 1 in 5 residents is 65 or older

*Of note:* Home to part of Glacier National Park and other federally protected areas, Flathead County is a very desirable location for anyone who loves being outdoors, including retirees, younger remote workers and tourists. However, these very attractions have created significant development pressures and an associated rise in housing prices and cost of living.

**MCLEAN COUNTY**  
**NORTH DAKOTA**
- 100% rural  
- About 5 residents per square mile  
- 1 in 4 residents is 65 or older

*Of note:* More than four in five homes in McLean County are owned, compared to just one in three nationally. Coupled with the fact that caregivers report older adults frequently live alone, this suggests a commitment to independent living. However, it also speaks to potential issues related to transportation challenges, the need for home modifications and social isolation.

**TRAVERSE COUNTY**  
**MINNESOTA**
- 100% rural  
- About 6 residents per square mile  
- 1 in 4 residents is 65 or older

*Of note:* There are nearly three times as many residents per primary care physician in Traverse County as compared to the state. This is indicative of the county's rapidly decreasing pool of caregivers and service providers of all types. Due to its rural nature and distance from large cities, one Area Agency on Aging identified Traverse County as among the most difficult to penetrate in Minnesota.
From April to August 2021, ATI Advisory worked with Lutheran Services in America members in Montana, Minnesota and North Dakota to identify older adults, providers/caregivers and community leaders in focus rural counties. Local members and focus counties are outlined below.

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<th>LOCAL PARTNER</th>
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<tr>
<td>Immanuel Lutheran Communities</td>
<td>Flathead County</td>
<td>Montana</td>
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<tr>
<td>Lutheran Social Service of Minnesota</td>
<td>Traverse County</td>
<td>Minnesota</td>
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<td>Missouri Slope</td>
<td>McLean County</td>
<td>North Dakota</td>
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Local members were responsible for identifying their respective focus counties; they did so by selecting a county in close proximity to the area(s) in which they already provide services, and where they could feasibly expand to provide home-based services to older adults. In most instances, the local partners had long-standing relationships with certain community leaders, organization members, healthcare providers or older adults in their focus counties, which they relied upon to make introductions for purposes of this research.

ATI surveyed professional, volunteer and unpaid/family caregivers living in or near and providing services in or near each of the focus counties. Seventy-four respondents ultimately participated in the survey – thirty eight from McLean County, nineteen from Flathead County and fourteen from Traverse County. ATI also hosted two sets of focus groups – one with older adults and one with caregivers – in McLean and Flathead Counties. ATI hosted one focus group with older adults in Traverse County. It was unable to identify participants for a caregiver focus group in Traverse County. To recruit and/or increase participation, ATI distributed flyers to older adults through Meals on Wheels deliveries in Traverse County.

Finally, ATI interviewed at least three community leaders and healthcare executives in each county, ranging from high-level representatives from Commissions on Aging or Area Agencies on Aging, owners of local private caregiving agencies, hospital executives, to other local home- and community-based service providers. ATI also supplemented focus groups with a limited number of older adult and caregiver interviews when individuals were unable to participate in the time allotted for the focus group. ATI accepted written responses to questions from caregivers in Traverse County in lieu of a focus group.
Lutheran Services in America is a national network of 300 Lutheran health and human services organizations that works with one in 50 people in America each year. Recognized by *The Chronicle of Philanthropy* and *Forbes* as one of the nation’s top nonprofit organizations, the Lutheran Services in America network operates with more than $22 billion in combined annual revenue. Headquartered in Washington, DC, Lutheran Services in America leads innovative collaborations with partners in philanthropy, academia, healthcare and others to address the most critical challenges in our communities and empower people to lead their best lives.

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