Human Services Utilization by Older Hispanics in Nebraska

By David R. DiMartino

The original report on which this article is based resulted from research conducted by CAUR for the Nebraska Mexican American Commission with funding from the Nebraska Commission on Aging. Dr. DiMartino and Carole M. Davis were co-investigators for the project and co-authored the original report. The cooperation and assistance provided by so many members of the Hispanic communities in Lincoln, Omaha, and Scottsbluff made the study possible.

Introduction

OLDER AMERICANS make up an increasingly significant part of the total United States population. Older citizens comprised about 11 percent of the national population, and numbered approximately 24 million in 1978. More importantly, older Americans have increased as a proportion of the total population and have increased in number by 23 percent between 1970 and 1980. In Nebraska, an estimated 13 percent of the population are “elderly,” and only a few other states, mostly in the Midwest and Plains, can claim as great an proportion of elderly residents.

Many older citizens, often on fixed incomes, find themselves financially or otherwise ill-prepared to enjoy their so-called golden years. In fact, over 14 percent of the nation’s elderly are included among the nation’s “poor,” and 23 percent are considered “near poor,” particularly among the minorities.

Some older Americans are able to rely upon resources which they have accumulated over the years. Others may be able to call upon family or friends for financial or other assistance (the “informal” support network). However, many older citizens have not accumulated ample reserves for their retirement, nor are they always able to rely upon others for assistance.

As a reaction to the financial plight of many older Americans, American society has developed a system of human service programs (the “formal” support network) aimed at assisting the elderly and sustaining minimum levels of well-being. Currently 48 such federal programs have been created specifically for the elderly, and an additional 135 to 200 programs assist the elderly.

Human service programs do not always reach all those they are intended to assist. Potential users may be unaware of the programs, or direct and indirect barriers may exist which prevent participation. Those barriers may be attributable to a wide variety of cultural, spatial, economic, administrative, or structural factors. Minorities, in particular, suffer from such barriers. Agencies responsible for program administration and service delivery may be unaware of the existence or extent of such barriers or of the options available to overcome them. In any case, public programs that fail to reach identifiable groups in need cannot be considered successful. Therefore, the assessment of program participation is a primary requisite for rational program planning and development in the human service field.

The Study

The objective of this report is to assess the usage of human service programs by older Hispanics in Nebraska. The focus is to determine the degree to which older Hispanics are aware of and participate in established human service programs. The analysis also examines factors that may influence human services usage, including the study group’s demographic, residential, mobility, and attitudinal characteristics. Regularities are reported upon and are compared to the tendencies of other older Nebraskans.

The subjects of this study, Nebraska’s older Hispanics, were defined according to three characteristics—age, ethnicity, and location. The age characteristic was predefined to include only those persons 60 years of age or older. The group’s ethnic character was defined as Hispanic, comparable to the Census Bureau’s use of the label of “Spanish origins.” The term Hispanic was purposely used in order to avoid culturally and/or socio-politically biased terms and to allow for the inclusion of sub-ethnic groups (including Mexican-Americans, Cuban-Americans, etc.). Locationally, study subjects were limited to those persons residing within three communities in the State of Nebraska—the city of Omaha, the city of Lincoln, and the Scottsbluff area (including the cities of Scottsbluff and Gering, and several outlying towns).

Personal interviews were conducted with each respondent, and those interviews served as the primary data source for this report. Interviews were administered during the summer of 1979 in Omaha and during the winter of 1980 at the other locations. The questionnaire was translated into Spanish and was administered by bilingual interviewers in the language preferred by the respondent. Respondents were identified and located with the help of leaders in the respective Hispanic communities of the state. A total of 217 respondents was interviewed: 80 from Omaha, 40 from Lincoln, and 97 from the Scottsbluff area.

Age and Sex Distribution

In order to provide human services to a population, an understanding of the
States

Scottsbluff areas. These atypical patterns

may be due to the predominantly male
citizens with increasing age. A closer

study sites.

between the

each location demonstrated a

Ethnic Heritage

Hispanics identified themselves as

in

percent). In addition, Lincoln's older

(43 percent) and Scottsbluff

Scottsbluff, and 21 percent in Omaha).

The remaining number of older Hispanics

rates, and even

Latin American countries (8 percent).

receiving some formal schooling, a

of older Hispanics living alone was also less than

social visits. Many older Hispanics

activities enjoyed by older Hispanics in

Older Hispanics were retired or

disabled (46 percent in Scottsbluff, and 45 percent in Lincoln), as

were older Nebraska (45 percent in Scottsbluff, and 13 percent in

compared to other older Nebraskans (21 percent),

The results of this survey dispel the

to participate in various desired

sizable minority of older Hispanics

Lincoln (25 percent in Omaha), and 73 percent in Scottsbluff),

and other older Nebraskans (88 percent). More than

of older Hispanics

Lincoln, as compared to other older Nebraskans (44 percent in

the highest level of activity enjoyed by older Hispanics in

most interactive. Compared to other

middle-aged and older Men

sizable minority of female older

Hispanics never worked outside their

income. 29 percent of older Hispanics,

employed predominantly as

"operatives" (74 percent), especially in

the meat packing industry but also as

"service workers" (39 percent),

"craftsmen" (11 percent). As compared to other older Nebraskans,

were markedly under-represented among

executive, managerial, and clerical

occupations. Compared to other older Nebraskans,

homemaker occupations (and in the

sizable minority of older Hispanics

living alone (73 percent in Scottsbluff, and 74 percent in Omaha),

Lincoln, but only 13 percent in

Omaha, 27 percent in

Nebraska's older Hispanics had received

least educated as a group were Scottsbluff's

older Hispanics, with 43 percent receiving no formal education and only

10 percent completing or going beyond

high school. Older Hispanics in Omaha

(better off, with 37 percent receiving no formal schooling and 13 percent

completed or going beyond high school. Surprisingly, among those older Hispanics who received some formal schooling, a

greater number in Scottsbluff received education in locations within the United States (70 percent) than did those from Omaha (65 percent) or Lincoln (58 percent).

(75 percent in Nebraska, 77 percent in Omaha, 61 percent in

Lincoln, and 51 percent in Scottsbluff).

Two-thirds was far more prevalent among

Nebraska's older Hispanics than

educational attainment alone would indicate.

Literacy rates did vary among older Hispanics by location (from 77 percent literate in Scottsbluff, to 89 percent in Lincoln), and 93 percent in Omaha). Respondents' ability to read was greater than indicated by formal education at all locations. In addition, a majority of literate older Hispanics were also bilingual, with

readability in both Spanish and

English (77 percent in Omaha, 61 percent in

Lincoln, and 51 percent in Scottsbluff).

Living Patterns

The marital status and living arrange-

ments of older Hispanics varied

from those of other older Nebraskans.

A smaller proportion of older Hispanics

were married (48 percent in Scottsbluff, 46 percent in Omaha, and 44 percent in Lincoln, as compared to other older Nebraskans (56 percent). Though rates of widowhood were comparable between older Hispanics (36 percent) and, in the older citizen group. While that number was greater among older Hispanics (14 percent in Lincoln, 8 percent in Omaha, and 7 percent in Scottsbluff) than among other Nebraskans (3 percent). Additionally, the proportion of older Hispanics who never married was significantly greater in Omaha (11 percent) than elsewhere or among other Nebraskans (8 percent). The proportion of older Hispanics who lived alone (33 percent in Scottsbluff, 28 percent in Lincoln and 27 percent in Omaha), though significant in number, was less than for other older Nebraskans (34 percent). The proportion of older Hispanics living alone was also less than might be expected, from the information

on numbers married. The differences could be accounted for by the relatively large proportion of older Hispanics who lived with other than their spouses (26 percent in Omaha, and 25 percent in Lincoln, but 9 percent in Scottsbluff, as compared to other older Nebraskans living with others (10 percent). With respect to living arrangements, it was found that older Hispanics live their children, other relatives, and friends, and their living arrangements are significantly more familial bonds and informal support structure available to older Hispanics. Nebraska's older Hispanics live predominantly in individual, private homes (89 percent in Omaha, 86 percent in Lincoln, and 83 percent in Scottsbluff), as compared to other older Nebraskans (81 percent). More than half of older Hispanics also lived among older Hispanics (74 percent in Scottsbluff, and 65 percent in Lincoln), and 52 percent in Scottsbluff). However, older Hispanics in Scottsbluff, owned by far fewer than for other older Nebraskans (27 percent). The differences in rates of homeownership reside primarily with older Hispanics, 20 percent of older Hispanics in Scottsbluff, 16 percent of Omaha's older Hispanics, but only 4 percent of other older Nebraskans.

Aside from those older Hispanics who continue to work in their current residences over relatively long periods of time. Those living in their present residences 20 or more years tended to have lived there for retirement funds (pensions) as sources of income, but the proportion receiving pension income was smaller than for their previous employment, which in this case varied by location (45 percent in Omaha, 20 percent in Lincoln, and 22 percent in Scottsbluff). Older older Hispanics received some income from public health insurance (16 percent in Lincoln, and 3 percent in Omaha). Very few were able to rely upon savings or call upon others. While that income was less than for other older Nebraskans, older Hispanics received a little less frequently with relatives and neighbors than by social visits. Many older Hispanics reported receiving income from other older Hispanics in Scottsbluff were generally less interactive while those in Omaha (38 percent) and Lincoln (36 percent) got little help from relatives or friends as sources of income. In spite of the sources of income discussed above, the incomes of older Hispanics were relatively low. The incomes of Nebraska's older Hispanics were significantly lower than those of other older Nebraskans. Nearly all older Hispanic household incomes reported fell below the "poverty income" level set by HUD to determine eligibility for housing assistance.

 mobility and Interaction

Older Americans are sometimes stereo-

typed as an isolated population who

without mobility, or that lack of inclination or ability, and that lack of mobility is often attributed to problems of mental or physical health. The results of this survey dispel the stereotype of social and physical isolation. While a significant minority of older Hispanics lived in isolation, most older Hispanics reported getting around (43 percent in Lincoln, 33 percent in Omaha, and 25 percent in Scottsbluff), as did most other older Nebraskans (33 percent). Some older Hispanics walked to get around (26 percent in Omaha, 18 percent in Lincoln, and 12 percent in Scottsbluff, but the most frequently used way to get around was to be driven to get around (43 percent in Lincoln, 39 percent in Omaha, and 32 percent of older Hispanics surveyed continued to work--many between 60 and 65 years of age. Many older Hispanics worked part-time or full-time at the same time. They

"no"

The majority of older Hispanics

the Census Bureau). The best way for older Hispanics to get around (43 percent in

Scottsbluff, but 70 percent of other older Nebraskans). Thus, most older Hispanics drove their own cars to get around (45 percent in Lincoln, 33 percent in Omaha, and 29 percent in Scottsbluff, but 70 percent of other older Nebraskans). Other desired activities included sports, visiting, and reading.

and "no"

also visited more frequently in their own homes with both relatives and friends than they did away from their homes. Older Hispanics in Scottsbluff were generally less interactive while those in Omaha (38 percent) and Lincoln (36 percent) got little help from relatives or friends as sources of income. In spite of the sources of income discussed above, the incomes of older Hispanics were relatively low. The incomes of Nebraska's older Hispanics were significantly lower than those of other older Nebraskans. Nearly all older Hispanic household incomes reported fell below the "poverty income" level set by HUD to determine eligibility for housing assistance.

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Cleariy, the Scottsbluff area contained the greatest proportion of disatisfied older Hispanics at all three locations. Less satisfied with their levels of activity were older Hispanics at all three locations. The lesser proportion of older Hispanics in Scottsbluff consulting private doctors might be, in part, attributed to their smaller incomes and abilities to utilize medical services.

Hospitals were the second most frequently utilized health service, although they were far lesser than private doctors. Older Hispanics used medical clinics infrequently for the most part. Hospital school facilities were not utilized at all by older Hispanics in any of the locations. The non-use of medical school facilities by Omaha’s older Hispanics was surprising in view of the presence of two medical colleges in Omaha, Creighton used at the University of Nebraska. A minority of older Hispanics consulted dentists at all three locations.

The only one of the demographic characteristics of older Hispanics that demonstrated a statistical association with the frequency of medical service usage was income. Unfortunately, this suggested that treatment was dependent upon income rather than need and that those persons with lesser incomes utilized medical services less.

The comparison of medical services utilized by older Hispanics with usage by older Nebraskans yielded several findings. (See Table 1.) Generally, older Hispanics used private doctors and dentists less than did older Nebraskans; older Scottsbluff Hispanics used doctors and dentists markedly less. Hospitals were utilized slightly more by older Hispanics in Omaha and Lincoln but less by Scottsbluff Hispanics than they were by other older Nebraskans.

These differences in health services usage between older Hispanics and other older Nebraskans, though not generally great, might be due to some combination of differences in age, levels of health, attitudes toward medical services, number and availability of services, and, of course, the incomes of potential users.

The willingness of potential patients to utilize health services and the frequency with which they did so was influenced by the problems they encountered in attempting to acquire the services. A relatively small proportion of older Hispanics claimed to have had problems in acquiring health services, though that proportion was greater, for the most part, than the small proportion of older Nebraskans who also cited problems associated with health service acquisition. Cost, transportation, unavailability of Spanish-speaking personnel, long waits (culturally unacceptable), and unavailability of services were, in order of frequency, the problems most often cited by older Hispanics.

Legal Services
Older Hispanics were asked whether they had encountered legal problems during the previous twelve-month period. Lincoln’s older Hispanics experienced the greatest proportion of legal problems; older Hispanics in Scottsbluff had no legal problems at all. In addition, Lincoln was an exception to those older Hispanics who experienced legal problems, in that they did not seek legal services; the other Hispanic groups sought counsel as often as Omaha or more often than Scottsbluff. Older Hispanics in Omaha, Lincoln, and 59 percent in Scottsbluff did not participate in the Social Security program; and some had more problems with the cost of the program (8 percent in Omaha, 8 percent in Lincoln, and 6 percent in Scottsbluff).

The extent of the usage of human services by older Hispanics was further analyzed by comparing their usage rates to those of other older Nebraskans. (Compare Tables 2 and 3.) Generally, the proportionately greater number of older Hispanics receiving relatively lower incomes would be expected to utilize human service programs (particularly those involving financial aid) to a greater extent than would older Nebraskans in general. (Some of the differences in participation between groups might also be influenced by the existence of the program in one location but not in all locations across the state.)

The concern is not with the absolute number of available hospitals, nor is it with the spatial distribution of services (for example, the location of private physicians’ offices), although these factors are important. This analysis focused on relative proportions of older Hispanics in the Scottsbluff area, Lincoln, and Omaha who are aware of established services and the frequencies of their participation in these services.

Among the most important services used by the general population and the general population are medical/health services.

The basic question related to the use of these services is whether or not the potential user has had a need for such services. Therefore, older Hispanic respondents were asked whether or not they had any problems that had been ill during the previous twelve-month period. Among the three locations, 40 percent, 67 percent, and 60 percent of older Hispanics in Scottsbluff, Lincoln, and Omaha, respectively, stated that they had experienced problems during the previous year. (See Table 1.) Thus, the incidence of illness was greatest among older Nebraskans, those in the Omaha area having had the least amount among Omaha’s Older Hispanics.

The proportion of older Hispanics receiving annual health checkups varied greatly among the three locations—73 percent in Omaha, 60 percent in Lincoln, and 40 percent in Scottsbluff. Older Hispanics in Scottsbluff reported the lowest incidence of checkups and the highest incidence of illnesses. and Omaha’s Older Hispanics had the highest rates of checkups and the lowest incidence of reported illnesses.

The proportion of older Hispanics receiving medical services and frequency of usage varied according to type of medical service. (See Table 1.) Private doctors were the most frequently used health service, followed in order of frequency by hospital usage and type of medical service. It is important to note that there were three locations. The lesser proportion of older Hispanics in Scottsbluff consulting private doctors might be, in part, attributed to their smaller incomes and abilities to utilize medical services.
Table 2

<table>
<thead>
<tr>
<th>Type and Name of Program</th>
<th>Number of Respondents</th>
<th>Heart of and Participated in Program (Percent)</th>
<th>Heart of Did Not Participate in Program (Percent)</th>
<th>Had Not Heart of Program</th>
<th>Number and Percent of Program Participants Encountering Spanish-Speaking Personnel</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Financial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Security</td>
<td>95</td>
<td>59*</td>
<td>35</td>
<td>6</td>
<td>39 (of 56) - 59%</td>
</tr>
<tr>
<td>Supplemental Security Income</td>
<td>84</td>
<td>33*</td>
<td>25</td>
<td>2</td>
<td>1 (of 30) - 4%</td>
</tr>
<tr>
<td>Senior Citizen Discount</td>
<td>85</td>
<td>9*</td>
<td>66</td>
<td>3</td>
<td>2 (of 22) - 9%</td>
</tr>
<tr>
<td>Senior Citizen Housing Rehabilitation Assistance</td>
<td>79</td>
<td>35</td>
<td>65</td>
<td>8</td>
<td>4 (of 11) - 36%</td>
</tr>
<tr>
<td>Health/Nutrition</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Stamps</td>
<td>91</td>
<td>35</td>
<td>44</td>
<td>21</td>
<td>8 (of 22) - 36%</td>
</tr>
<tr>
<td>Meals on Wheels</td>
<td>91</td>
<td>9*</td>
<td>54</td>
<td>37</td>
<td>5 (of 81) - 63%</td>
</tr>
<tr>
<td>Home Health Care</td>
<td>87</td>
<td>13*</td>
<td>20</td>
<td>65</td>
<td>4 (of 87) - 100%</td>
</tr>
<tr>
<td>Residential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Handyman Repair Service</td>
<td>82</td>
<td>14*</td>
<td>36</td>
<td>3</td>
<td>3 (of 70) - 43%</td>
</tr>
<tr>
<td>Homemaker/Chores</td>
<td>90</td>
<td>24*</td>
<td>40</td>
<td>36</td>
<td>1 (of 82) - 12%</td>
</tr>
<tr>
<td>Winterize and Insulate</td>
<td>91</td>
<td>20*</td>
<td>70</td>
<td>8</td>
<td>2 (of 52) - 29%</td>
</tr>
<tr>
<td>Senior Housing Rehabilitation Assistance</td>
<td>79</td>
<td>35</td>
<td>65</td>
<td>8</td>
<td>2 (of 1) - 100%</td>
</tr>
<tr>
<td>Interaction</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior Citizen Center</td>
<td>95</td>
<td>18*</td>
<td>61</td>
<td>21</td>
<td>12 (of 71) - 71%</td>
</tr>
<tr>
<td>Friendly Visitors</td>
<td>85</td>
<td>9*</td>
<td>12</td>
<td>79*</td>
<td>4 (of 81) - 50%</td>
</tr>
<tr>
<td>Telephone Reassurance</td>
<td>85</td>
<td>1*</td>
<td>9</td>
<td>91*</td>
<td>0 (of 1) - 0%</td>
</tr>
<tr>
<td>Retired Senior Volunteers (RSVP)</td>
<td>84</td>
<td>1*</td>
<td>25</td>
<td>79*</td>
<td>0 (of 1) - 0%</td>
</tr>
<tr>
<td>Handibus Transportation</td>
<td>90</td>
<td>20*</td>
<td>51</td>
<td>23</td>
<td>5 (of 84) - 64%</td>
</tr>
</tbody>
</table>

Lincoln and Scottsbluff, and other older Nebraskans used the Telephone Reassurance service to a greater extent, than did Omaha and Scottsbluff older Hispanics.

By individual locations, older Nebraskans participated more than did Scottsbluff’s older Hispanics in four of the 15 comparable human service programs examined. The four human service programs with greater participation from older Nebraskans included the Social Citizen Discount, Social Security, Telephone Reassurance, and Retired Senior Volunteer Programs. For Lincoln, older Nebraskans participated more than older Hispanics in four programs. These included the Social Security, Senior Citizen Discount, Senior Citizens’ Center, and Handibus programs. Finally, older Nebraskans participated to a greater extent than did Omaha’s older Hispanics in all six of the selected public programs examined. The six included Social Security, Supplemental Security Income, Senior Citizen Discounts, Homemaker/Chores, Senior Citizens’ Centers, and Telephone Reassurance.

The greater participation of older Nebraskans, as compared to older Hispanics, in several financial programs was the opposite of what would be expected, based upon the lower incomes of the older Hispanic group. Likewise, the greater participation of older Nebraskans in the programs oriented toward improved interaction was rather surprising in view of the somewhat lesser overall interaction of older Hispanics with relatives and, especially, friends. Thus, older Hispanics appeared to be less interested in participating disproportionately less than did older Nebraskans in several of the human service programs examined.

For the need for human service programs to reach a greater proportion of older Hispanics was further substantiated by the comparison of program awareness between older Hispanics and older Nebraskans. Older Hispanics were less aware of four programs, Scottsbluff’s older Hispanics of nine, and older Hispanics in Omaha of ten.

Table 3

<table>
<thead>
<tr>
<th>Type and Name of Program</th>
<th>Awareness Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial</td>
<td>Social Security</td>
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<td></td>
<td>Handibus Transportation</td>
</tr>
</tbody>
</table>

Conclusions

Analysis of the responses of those surveyed for this report demonstrated several areas of need among the older Hispanic population. Comparisons of the 15 selected public programs with the needs of other older Nebraskans reinforced the fact that relatively greater needs were incurred among Hispanics as compared to the general population.

The most significant of the documented needs for older Hispanics were financial. The very large proportion of older Hispanics subsisting below low income level demonstrated the extent and severity of the financial problems faced by the group. In addition, almost all other aspects of living, including activities and services that involve payment, were impacted by the financial status of the older Hispanic population.

The older Hispanic population, though relatively active, included members who were in need of assistance in specific activities and services. The need for those activities and services might be attributed to various conditions, including problems of health, income, transportation, and communication (language). Findings, such as the fact that from 23 to 22 percent of older Hispanics dined alone and that only 22 to 24 percent visited regularly or often with friends, demonstrated the need for greater interaction and activities.

It is important for the purposes of this report, older Hispanics had a demonstrated need for available human service
programs. Their participation in programs was less than should be expected. Moreover, compared to other older Nebraskans, the majority of older Hispanics were less aware of up to 10 out of 15 programs and participated less in from four to six of the programs. Ironically, the financial and residential programs for which older Hispanics had the greatest need were those very programs least utilized.

The need for greater knowledge of and participation in human service programs by older Hispanics suggests the necessity for better dissemination of information on those programs. That information should be available in Spanish as well as English, so that those who have difficulty with English may also receive first-hand information. In addition, the financial needs of older Hispanics suggest the necessity for greater efforts at locating and encouraging older Hispanics to make use of those public programs for which they qualify.

FOOTNOTES

1 (There is no magical age at which people become “elderly.” In fact, several human service programs become available to “older” Americans prior to their 65th birthday, the age traditionally used to distinguish the “old” from the “pre-old.” There is also a common distinction made between the “young old” (younger than 75 years of age) and the “old old” (greater than 75 years of age).


4 Saldo, op cit., p. 13.

5 Saldo, op cit., p. 21.

6 Saldo, op cit., p. 31.