A Research Report on Aging, Health and Arizona's Capacity to Care

MAY 2002



The Coming of Age

Welcome to The Coming of Age

When a steamroller is coming down the road, you have three choices: Get out of the way, run to stay ahead of it, or lie down and get your clothes pressed.

The steamroller is age — old age — and it will remake our society in the first half of the 21st century. Everything from census numbers to personal experiences underscores the aging of our state and nation. The Coming of Age explores Arizona's capacity to handle this soon-to-be "gerontocracy" in positive ways.

Aging affects all dimensions of our society, but none so much as health care. Thus, St. Luke's Health Initiatives (SLHI) decided to dedicate part of its *Arizona Health Futures* program to exploring Arizona's capacity to meet the health care demands of an aging population. SLHI asked the Arizona State University School of Public Affairs and Morrison Institute for Public Policy to collaborate on The Coming of Age to inform Arizona's policy leaders and residents about these critical issues.

The Coming of Age engaged demographers, economists, public policy analysts, human service and medical professionals and citizens. Through its research, the team developed a realistic picture of Arizona's "capacity to care" for an elder population. The results of the research and the policy choices suggested by the findings are presented in this publication.

A companion piece, *The Coming of Age: Four Scenarios of Arizona's Future*, offers possible futures for the state that are based on the research. (See **www.slhi.org** or **www.morrisoninstitute.org**.) Other project products, available on these web sites, include team members' technical papers, an interdisciplinary reference guide and results of the project's public opinion research.

We hope that *The Coming of Age* sparks discussion among family members and in businesses and organizations as well as city halls and the legislature. Given the best thinking of all Arizonans, new ideas will emerge on how we can — and must — prepare for an older population. Whether or not today's information age gives way to the "age of wisdom," where longer lives mean better lives for individuals and a higher quality of life for everyone, may depend on those discussions and our decisions.

Roger Hughes, Ph.D. Executive Director

St. Luke's Health Initiatives

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Project Director

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Arizona State University

PATIENT HAME: Arizona Senior DATE: January 2013 GENERIC NAME: Health care for increasing numbers of alderly citizens. DOSAGE: As much as you can afford, or until LATIONS: To be used after a Period of Ith Combination With Indicate Combination With Increased health care costs. INDICATIONS: To be used after a period of water low personal sayings in combination w HOW TO USE THIS MEDICATION: After covering the public health insurance sult a retirement extensive research will result a retirement of the public health and the public health will result a retirement of the public health and in public health insurance coverage; mirement extensive research well beyond refr you age to afford raising all. POSSIBLE SIDE-EFFECTS: Strained family ent.

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Frequent.

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Project Director **John Stuart Hall** Professor, School of Public Affairs, Arizona State University

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Special acknowledgment is due to Roger Hughes and Jill Rissi for their intellectual contributions and insights into Arizona's future.



A Catalyst for Community Health

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The Coming of Age Project Products

The Coming of Age

Talking Points

Everyone ages. Each generation gives way to the next.

What's different today is that the next group of elders, namely the members of baby boom, is bigger than any other before it. The Coming of Age is one of the first projects in Arizona to look at the many issues presented by aging and our state and the community capacity to care for an older population.

Preparing for what will be dramatic changes calls for more than just cleaning our rose-colored glasses. The data and analyses in *The Coming of Age* are intended to help Arizonans and their leaders to understand the issues and the consequences of action and inaction.

The following points highlight the results of The Coming of Age research and some of their implications for Arizona.

The Coming of Age: Age Will Remake Society

- Approximately one in four Arizonans is a baby boomer. The eldest boomers will turn 62 in just 6 years (read eligible for Social Security) and be 70 years old in less than 15 years. By 2031 every baby boomer is over 65, and the oldest are 85.
- With longer and longer life spans, it is no wonder that the number of those 85 years old or more increased 82 percent between 1990 and 2000 and represent Arizona's fastest growing age group. More and more of the "oldest old" will mean mushrooming costs for elder care.
- Baby boomers have half as many children to depend on in old age as today's seniors. Are Arizona's communities ready for a new wave of elders? Where will help come from if family members are few, while Social Security and Medicare are strained or drained by the size of the boomer generation?
- The good news is that technology offers new options for better health. The bad news is that increasing health care costs may widen the gap between Arizona's "haves" and "have nots."
- Arizona's public, private and personal capacity to care for more elders is just beginning to be explored. As age-related needs for care increase, capacity to care may be at risk.

The Fundamental Facts: Arizona Cannot Escape Aging

- Arizona's 60+ population will triple in size from approximately 875,000 today to just under 3 million by 2050.
- In 2000, the over-60 set accounted for 17 percent of the state's population. Look for 24 percent in 2020 and 26 percent in 2050.
- The Arizonans over 65 years of age will be roughly comparable to the number of children under 17 in less than 30 years. Fewer and fewer Arizona workers will pay taxes to support the young and the old.

Mixed Messages About The Coming of Age from Professionals and the Public

- Professionals in aging fields voiced concern that inadequate attention from top leaders, besides insufficient dollars and fragmented programs, has put Arizona on a collision course with aging.
- In a statewide survey of Arizonans 40-59 years old for The Coming of Age, only 18 percent said the aging of the population was a serious problem for the state, but it does present some personal anxieties to three out of four of those interviewed.

- Approximately 75 percent of those surveyed voiced some concern about their ability to care for an elder parent or relative, and 70 percent feared for their own financial futures. Arizonans with low incomes today expected to be the "have nots" of tomorrow.
- One-third of those in the survey cares for an elder now, and families are the most important source of care. Government (federal first, then state and local) has a part to play too, especially for those who are poor. Medicare, unfortunately, was seen as "iffy" for baby boomers. Many Arizonans worry that public programs for elders are of dubious quality.
- Despite concerns, 79 percent of the baby boomers surveyed felt optimistic about getting older.

Aging Issues are Intricate Issues

Health Care Systems and Services for Arizona

- People are healthier than ever before. Eight out of ten elders today take care of themselves — an all-time high.
- Thanks to population growth, the number of elder Arizonans in poor health will
 increase to the detriment of the state's and personal pocketbooks. In 2000, long-term
 care for low-income elder and disabled residents cost the State of Arizona more than
 \$400 million. Nationally, ill elder and disabled members of Medicare HMOs spent nearly
 50 percent more of their own money for medical care in 2001 than three years before.
- Health care spending topped \$15 billion in Arizona in 2000, and the price tags keep getting bigger. The percentage of personal health care dollars Arizonans spent on prescription drugs doubled between 1980 and 1998.

People to Care for an Older Arizona

- In 1960, 5.1 workers supported each Social Security recipient. In 2000, there were just 3.4. By 2040, 2.1 workers will be counted for each Social Security beneficiary.
- Health care workers are in short supply. Arizona has fewer physicians and registered nurses than the national average.
- Family members provide approximately 70 percent of noninstitutional elder care. On average, caregivers may sacrifice as much as \$600,000 in income and opportunity to care for elders.

Healthy Aging for People and Communities

- Aging does not have to be a disaster. Florida and other states and cities offer models for making communities "elder ready" and, thus, better for all ages.
- Elder-friendly places treat older adults as resources and offer the housing, culture, safety, volunteer options, and health care that make sense. The communities boomers want feature culture, jobs and amenities, whether they have lived there for a month or a lifetime.
- Easy mobility for elders is key to better health and quality of life. Arizona's love affair with the auto will have to end to allow for more options.

It's Time: Arizona Needs to Talk and Choose

Arizona needs to gather round and discuss the issues and choices of aging. The big issues on the table should be:

- Leadership
- Infrastructure
- Dedicated funding
- Elder independence
- Individual financial preparation

Arizona's communities should prepare now by building their capacity to be elder friendly.

Successful aging means the ability to maintain three key behaviors or characteristics:

- Low risk of disease
- High mental and physical function
- Active engagement with life

Successful Aging: The MacArthur Foundation Study.

Capacity means the public, private, community and personal resources that could be brought to bear on an issue or situation and the interrelationships among them.

Picture Yourself: Understanding an Aging Arizona

Picture yourself today with 99 other Arizonans. Together you comprise a group that is representative of Arizona's age. Now, fast forward to 2030. Age rules.

Less than 5 years old:

Roughly of school age (5-19):

Either starting careers or in the prime of their working lives (20-59):

60+ years of age:

2030: فَافْرَافُرُ فَرَافُرُ فَالْمَافُرُ فَالْمَافُرُ فَالْمَافُرُ فَالْمَافُرُ فَالْمُؤْمِّ فَالْمَافُرُ فَالْمُؤْمِّ فَالْمَافُرُ فَالْمُؤْمِّ فَالْمُؤْمِنِ فَالْمُؤْمِنِ فَاللَّهُ فَاللَّهِ فَاللَّهُ فَاللّلِي وَاللَّهُ فَاللَّهُ فَاللّ

Source: Arizona Department of Economic Security.

The Coming of Age: Age Will Remake Society

Aging: If It's Not Your Issue Now...It Will Be.1

This bit of bumper-sticker wisdom makes a good point. *Everyone ages. Each generation gives way to the next.*

What's different today is that the next group of elders, namely the members of baby boom, is bigger than any other before it. Every state in the nation is anticipating the aging of its population. The Coming of Age is one of the first projects in Arizona to look at the many issues presented by aging and our state and community capacity to care for an older population.

The Coming of Age is about today — The experiences among approximately 875,000 Arizonans who are over age 60 now and what 1.24 million middle-aged residents think about getting older.

The Coming of Age is also about tomorrow — What will it mean for our state, in about 2020, when every fourth person you meet on the street is 60 years old or more? What about when roughly the same number of Arizonans are over age 65 as are under 17?

The issues are complex, even intricate. Choices have to be made that will affect nearly everyone's quality of life. Preparing for these dramatic changes calls for more than just cleaning our rose-colored glasses. The data and analyses in *The Coming of Age* are intended to help Arizonans and their leaders to understand the issues and the consequences of action and inaction.

Boomers Join a Complex Ensemble

As the 77 million members of the baby boom (born from 1946–1964) have moved through each life stage, they have remade U.S. institutions and expectations. Higher education mushroomed as baby boomers went to college. They expanded the labor force as millions of women began to work outside the home. They brought new energy to the arts and community organizations. They spawned innovation after innovation and trend after trend. Today, baby boomers are the nation's most visible leaders in nearly every field. With the 20th century's largest generation reaching retirement age around 2008, "elderhood" is their next stop.

However, unlike their domination of schools for example, baby boomers as elders will share the spotlight with others. They are now part of a complex ensemble in which many types and ages of people play substantial roles. What's more, boomers themselves are diverse and nowhere near unanimous about their desires.

Arizona's 60+ population will triple in size by 2050 and constitute more than a quarter of all residents. The number of persons over age 60 in Arizona will grow from approximately 875,000 in 2000 (about 17%) to 1.8 million in 2020 (24%) to almost 3 million (26%) in 2050.² Between 2000 and 2025, Arizona will rank ninth nationally in the growth of the 65+ population.³ There are many things about the next 20 years that cannot yet be discerned, but significant change in the age structure of our state and nation is a given. We now must strive to understand the major societal process of the first half of the 21st century: the coming of age.

Today's 40-year-old is tomorrow's 60-year-old. In Arizona, the next generation of elders is big enough to color the state gray.

TALKING POINTS

- Approximately one in four Arizonans is a baby boomer.
 The eldest boomers will turn
 62 in just 6 years (read eligible for Social Security) and be 70 years old in less than 15 years.
 By 2031 every baby boomer is over 65, and the oldest are 85.
- With longer and longer life spans, it is no wonder that the number of those 85 years old or more increased 82 percent between 1990 and 2000 and represent Arizona's fastest growing age group. More and more of the "oldest old" will mean mushrooming costs for elder care.
- Baby boomers have half as many children to depend on in old age as today's seniors.
 Are Arizona's communities ready for a new wave of elders?
 Where will help come from if family members are few, while
 Social Security and Medicare are strained or drained by the size of the boomer generation?
- The good news is that technology offers new options for better health. The bad news is that increasing health care costs may widen the gap between Arizona's "haves" and "have nots."
- Arizona's public, private and personal capacity to care for more elders is just beginning to be explored. As age-related needs for care increase, capacity to care may be at risk.

Long Lives Are a Reality

U.S. Life Expectancy, 1900 and 1997

In 1900, an American could expect to live for an average of 49 years.

In 1997, the average life span was 77 years.

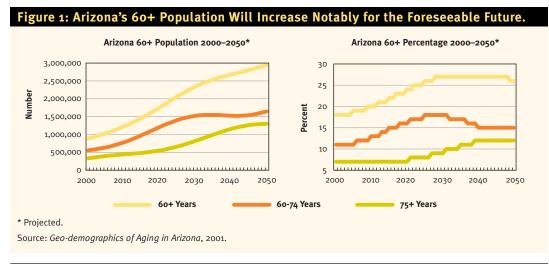
Women live longer than men.

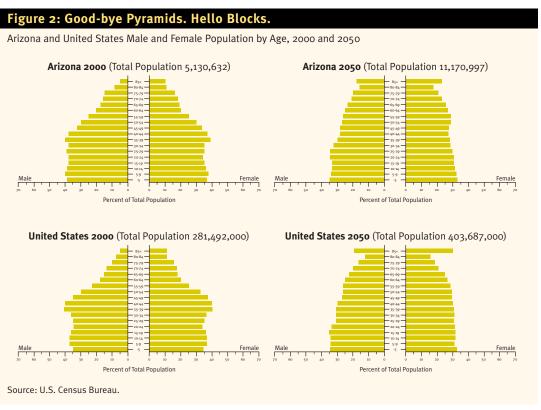
At age 65, in 1997,
women could expect another
19 years of life and men
an additional 16 years.

At age 85, women have an average of 7 years of life, while men have about 6.

Long lives are now the rule, rather than the exception.

Source: National Vital Statistics System.





When choosing images or models, remember that everyone sees himself as 10 to 15 years younger than his true age.

Joanna L. Krotz, Microsoft bCentral.

Still Ambivalent About Old Age

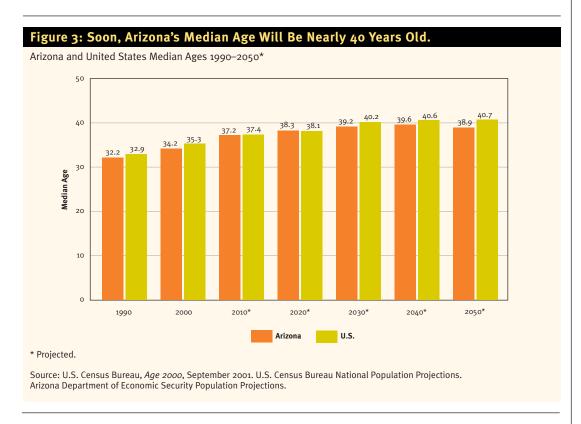
"We are bombarded with contradictory information about what it means to grow old. News reports of people living longer than ever are juxtaposed with horror stories of life in nursing homes and elders wishing for death. Inspiring anecdotes of energetic 85-year-old marathon runners or CEOs or composers who seem as young as ever are followed on the nightly news by stories on the barrenness of life in gated retirement communities filled with decrepit old people who feel superfluous."

Scholars, pundits and poets have considered whether the aging glass is half full or half empty for centuries. Robert Browning's positive perspective, "Grow old with me! The best is yet to be." contrasts with Shakespeare's contention that old age "is second childishness and mere oblivion, sans teeth, sans eyes, sans everything." Novelist Tom Wolfe goes to the heart of a contemporary view, "In the late nineteenth and early twentieth centuries, old people in America had prayed, 'Please God, don't let me look poor.' In the year 2000 they prayed, 'Please, God, don't let me look old."

In Arizona, the push and pull of attitudes about aging is just as prevalent. Complaints about "snowbird" drivers appear as often as heartwarming stories about Green Valley volunteers. Among Arizonans who participated in research for The Coming of Age, the image and experience of old age have improved markedly. Simply put, life today is not as hard as it used to be, so later years can be more enjoyable and productive. However, many of these same people acknowledged their fears of old age.

Acknowledging Demographic Destiny

The facts are clear: Arizona will be home to a significantly larger number of people within the near future, and this population will be older than it is today. What is unclear is whether Arizona's people and institutions are ready for the new demographics. The Coming of Age provides a window through which to view this "capacity" question. What is the tug and pull of supply and demand? Can the societal fabric of public and private institutions, professional organizations, faith-based and community and family arrangements stretch across the growing needs? Do we have the will to invest our resources wisely?



The facts are clear: Arizona will be home to a significantly larger number of people within the near future, and this population will be older than it is today.

Such dramatic changes as are projected for Arizona are bound to have multiple, interactive consequences. Numerous studies acknowledge the positive and negative effects of population growth. Relatively few, however, look at the systemic public policy consequences of growth combined with aging. What will the social, economic and political impacts of this "double whammy" be? What plans and investments need to be made to face the future realistically? These questions defy easy answers. What seems remarkable is the relative absence of study of, and efforts to prepare for, this change.

Or, is the apparent lack of attention unremarkable given what we know about human behavior and public policy? *You Can't Enlarge the Pie*, a recent book about the forces that often distort public decision-making, explains the tendency of residents and their elected representatives to "live for the moment," and engage in "wishful thinking." Authors detail how short-term outlooks result in "discounting the future."

Capacity means the public, private, community and personal resources that could be brought to bear on an issue or situation and the interrelationships among them.

Some Arizona public policy veterans might explain the seeming disinterest in the coming "age wave" as consistent with Arizona's traditional outlook on economic growth. To these observers, substantial, sustained growth of the retirement-age population is a blessing. Still other spectators contend that the 1990s state tax cuts, competition for public funds and today's chancy health care economics reduce capacity to provide services to the state's elders when rising demands are obvious. Recent HMO actions limiting prescription drugs or dropping coverage entirely for many of Arizona's rural seniors (some of whom recently moved to small towns to enjoy their version of the good life) exemplify the problems that will only worsen with time. On one hand, there is continuing confidence in the power of market solutions: "the graying of America...is a guaranteed opportunity for someone." On the other is a "capacity crisis" in health and care.

The certainty and size of the age issue suggest that policy makers and the public need to look at this 21st century process differently. Demographics are destiny, and Arizona's future well-being is at stake.

Aging in the Arizona Context

Because of the global certainty of aging, every industrialized nation grapples with similar challenges and the growing demand for health and care services. The issues take on special meaning in Arizona in part because the state has experience with elder in-migration and is expected, to some extent, to continue to be an attractive retirement destination.

The demographic shift to an older population will filter through all of the state's systems, ranging from the economy to the making of public policy. The effects will show up not just in health care services, but also in education and training, patterns of advocacy and the behavior of families and communities around elder care. Predictably, self-interest will rule the day. But it need not carry the day. The state will need all of the arts of effective communication and collaboration if it is to succeed in managing this shift.

It is not, however, as if no one in Arizona has ever thought about aging. Thousands of experts, planners and advocates spend their professional and personal time studying the issues, helping individuals and planning for the state. The Governor's Advisory Council on Aging, the Arizona Long-Term Care System (a part of the state's Arizona Health Care Cost Containment System), the Arizona Department of Economic Security's Aging and Adult Administration and its Home and Community-Based Care Initiative, the Arizona Department of Health Services' Healthy Arizona 2010 effort and many other programs, the legislature's Long-term Care Coordinating Committee, the Attorney General's Senior Service Center, the Pima Council on Aging's Commission on the Future, the Arizona Center on Aging at the University of Arizona and the Maricopa Association of Government's Elder Mobility Task Force are just some of the many significant efforts underway to serve and anticipate the needs of today's and tomorrow's elders. Arizona also counts numerous nonprofit organizations and educational institutions among its resources, from the Alzheimer's Association to the Gerontology Association to Yavapai College's Center on Aging.

The health care industry in Arizona includes such world-renowned facilities as Barrows Neurological Center and Mayo Clinic. Expansions of full-service hospitals and regional medical centers are underway in Prescott, Flagstaff and Safford. Arizona can draw on approximately:

The demographic shift to an older population will filter through all of the state's systems, ranging from the economy to the making of public policy. The effects will show up not just in health care services, but also in education and training, patterns of advocacy and the behavior of families and communities around elder care.

- 1,200 licensed assisted living facilities
- 91 home health care agencies
- 143 nursing homes
- 61 hospitals
- Over 11,000 practicing doctors
- More than 33,000 nurses with approximately one more licensed practical nurse or certified nursing assistant for every registered nurse

In addition, Arizona residents are not afraid to act on issues of great concern to the state. Voters' choices have marked large portions of the Arizona state budget for specific purposes. In recent statewide elections, for example, state voters approved a sales tax increase for education, a plan to increase health care coverage for the working poor and a system for "clean elections." The effects of voter-approved "growing smarter" requirements are beginning to be seen in local planning as are recent transit levies.

Clearly, Arizona has public, private, community and individual capacity. The question is whether Arizona has enough of, and the best mix of, the right stuff. The programs and organizations in place today developed when the state's population was younger than the nation's, and elders were viewed as just another interest group or market segment.

Now "the times, they are a-changin'...."

Facing the Big Issue

The devilishly complex topics of aging, health and capacity called for multidisciplinary, multi-method research. Studying just aging, or health, or community capacity would not be enough. This is a "systems" problem. Thus, this research starts at the intersection of the rough-and-tumble business of health care and of community capacity, lifestyle incentives and public decisions about resources.

To better understand this "systems problem," an interdisciplinary team of scholars from Arizona State University, the University of Arizona, and other universities and consulting firms conducted interviews and other research on demographics, economics, public policy, aging and health. The Coming of Age also conducted in-depth discussions with professionals and the public throughout Arizona as well as a statewide, representative public opinion survey of those who are now between 40 and 59 years of age. In addition, The Coming of Age created *Four Scenarios of Arizona's Future*, describing plausible futures for the state and consequences of various choices.

The report is organized around:

- The Fundamental Facts: Arizona Cannot Escape Aging
- Mixed Messages About the Coming of Age from the Public and Professionals
- Aging Issues are Intricate Issues:

Health Care Systems and Services for Arizona People to Care for an Older Arizona Healthy Aging for People and Communities

• It's Time: Arizona Needs to Talk and Choose

The ideas, facts and choices will help leaders and residents to come to grips with the choices inherent in the coming of age.

Life expectancy at the time of the Roman Empire was about twentyeight years...from the birth of Christ to 1900, each year of history saw an average gain of three days in life expectancy.

Each year since 1900, however, has seen a gain of 110 days in average life expectancy.

Successful Aging:
The MacArthur Foundation Study.

Clearly, Arizona has public, private, community and individual capacity. The question is whether Arizona has enough of, and the best mix of, the right stuff. The programs and organizations in place today developed when elders were viewed as just another interest group or market segment.