# fact sheet



**JUNE 2017** 

sightconnection.org

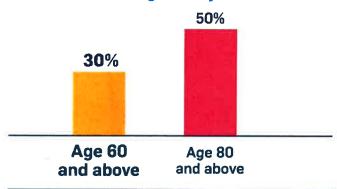
# **Visual Disabilities in King County**

One in three people aged 60 and older face a visual disability.

# One in two people aged 80 and older face a visual disability.

- Data from King County shows that more than 165,000 residents live with a visual disability.
- Residents with lower incomes and education are more likely to develop preventable diabetes retinopathy due to poor diet, lack of nutrition information and a reluctance to seek medical care.
- Visual disability can happen to anyone—from a fall, cancer treatments, stroke or a genetic predisposition.
- Medicaid only reimburses 37% of the cost of an essential low-vision exam.
- Medicare and Medicaid do not pay for the cost of adaptive aids or assistive technology.
- In next five years, King County will add another 115,000 residents with visual disabilities.
- Treating visual disabilities prevents paralyzing depression, social isolation, suicide ideation, unplanned unemployment, homelessness, addiction and special education.
- Treating visual disabilities saves the County dollars spent on preventable services
  - 1. Domestic Violence Treatment
  - 2. Mental Health Services
  - 3. Criminal Justice/Policing
  - 4. Emergency Shelter
  - 5. Foster Care
  - 6. ER visits

Number of individuals with visual disabilities in King County



- Veterans become visually disabled from PTSD, bomb blasts or shrapnel. More than 1,000,000 vets are visually disabled nationally.
- Based on national data, 60% of those with visually disabilities are unemployed.
- According to the Center for Disease Control and Prevention, "People with significant visual impairment benefit from vision rehabilitation, changes in their environment and assistive devices."
- Only 18% of the cost of providing independencedriven services for the visually disabled comes from the federal government with no support from cities, state or King County.

# What is a Visual Disability?

Visual disabilities are severe vision impairments such as glaucoma and macular generation that are not correctable by standard glasses, contact lenses, medicine, or surgery. The severity of vison loss interferes with a person's ability to perform everyday activities.

For more information please contact Emily Bader, ebader@sightconnection.org, 206-204-6158.

SUSAAN DOETER INTERIM CEO, SOUND GENERATIONS

# Testimony Submitted by Sound Generations to the King County Council on the Veterans, Seniors and Human Services Levy

## Budget and Fiscal Management Committee Regional Policy Committee

June 14, 2017

Sound Generations (formerly Senior Services) is one of the largest non-profit social services organization with a primary focus on serving the senior population of King County. We are proud to be celebrating our 50th Anniversary this year. We provide a broad range of health and social services to help keep older people living independently in their own homes. These include Information & Assistance, Meals on Wheels and community dining, senior centers, minor home repair, transportation, Senior Rights Assistance, Statewide Health Insurance Benefit Advisors, caregiver support, and nationally recognized health and wellness programs. In 2016 we served over 67,000 senior and disabled adults, 63% of whom were low income. We mobilized nearly 3,000 volunteers to help our 200 professional staff members deliver these critical services to our clients.

I am delighted to be here today to voice the strong support of Sound Generations for the Veterans, Seniors and Human Services Levy proposed by King County Executive Dow Constantine. We especially appreciate his decision to add the senior population as beneficiaries of levy funds. The challenge of addressing the needs of seniors is significant and growing. Consider:

- The "Silver Tsunami" has hit, but not yet crested. In 2005, those over age 60 were 15% of the King County population. By 2020, nearly 21% of King County residents will be over 60. Projections indicate that the senior population will reach 25% of the total population by 2035.
- The median household income of seniors is over 30% less than that of the general population. In 2013, half of all people on Medicare had incomes under \$23,500.
- Nearly 60% of renters age 60 and older pay more than 30% of their income for housing.
- Older adults face homelessness at a disproportionate rate; according to a King County analysis, 30% of those who used homeless services in 2015 were 50 or older.

- According to a recent National Council on Aging report, 48% of seniors living alone in Washington State lack the income they will need to remain retired, make ends meet and age in their homes.
- 38% of the elderly are disabled, compared with less than 10% of the general population. About two-thirds of older adults have two or more chronic health conditions.

In summary, seniors face the same challenges as the general population does, but they are more likely to be chronically ill or disabled and more often dealing with serious housing affordability issues or even homelessness. Yet, the public perception—perhaps based on TV commercials—is that of well-to-do retirees who spend their time golfing or traveling, without a care in the world. While that may be the reality for some seniors, many older adults age their way into poverty.

This trend is likely to continue because future cohorts will be less likely to have pensions to help fund their retirements, and many more people will have little to no retirement savings to make up the difference. Others suffered serious harm during the Great Recession, which disproportionately hurt workers over age 50: they were more likely to become unemployed and suffer longer periods of joblessness, and less likely to find new positions at comparable wages. Many joined the ranks of discouraged workers who dropped out of the workforce entirely. By the time they are eligible for a reduced social security benefit, any savings they may have had will be drained.

Unfortunately, shifting funding priorities have had a detrimental impact on the resources available to address the issues described above. Federal, state, local, and charitable dollars earmarked for social services to the older population are not only not keeping pace with population growth, they have actually declined. For example, per capita Older Americans Act spending in 1980 was \$6.55; by 2010, it was \$2.72, or a decrease of nearly 60%.

Locally, the story is similar. Over the last five years, Aging and Disability Services (this is the Area Agency on Aging serving King County) lost nearly \$3,000,000 in funding. However, demand for services has escalated, and 12,000 additional individuals were served. King County allocated about \$800,000 in funds to serve older adults prior to 2001, but by 2016, only \$140,000 was available.

Declining funding threatens one of Washington State's proudest achievements: the ability to avoid unnecessary, costly, disruptive institutionalization of our elderly. We have led the nation in keeping people out of nursing homes by providing community-based services. As a result, Washington has the second lowest rate in the nation of institutionalization for older adults.

That community-based support system is now in peril. Sound Generations has been greatly impacted by United Way's decision to redirect funding to the homeless and early childhood services. This resulted in a reduction of nearly \$1 million over the last two years, or about 7% of our budget. Senior centers and many other services have been adversely affected due to the need to make cuts. In addition, we have been forced to borrow money from our modest endowment as well as ramp up fundraising efforts, but these actions are not a long term solution to our dilemma.

While we absolutely understand and support the need to address homelessness and early childhood programs, the aging population cuts across all of the social issues and concerns that are uppermost in the public's mind today. Seniors are homeless or on the brink of losing their homes; they suffer from mental illness and other chronic conditions; they are veterans in need of support; and, 7,500 seniors in King County are caring for their grandchildren! Helping seniors helps strengthen the community as a whole. Please support the Veterans, Seniors and Human Services Levy as proposed by the County Executive.

Thank you for your time and attention.



# OUR IMPACT BY THE NUMBERS

Sound Generations provides vital resources for more than 67,000 seniors and adults with disabilities, 63% of which are low-income. In 2016, our caring staff joined forces with nearly 3,000 volunteers to provide the following resources to those we serve:



STATEWIDE HEALTH INSURANCE BENEFITS ADVISORS

Helped 8,286 people understand their healthcare options.

**SENIOR RIGHTS ASSISTANCE**Provided legal advice in 553 cases.

**HEALTH & WELLNESS** 

Helped 23,627 seniors stay fit and healthy.

MINOR HOME REPAIR

Kept seniors safe and in their homes by completing 2,249 repair jobs.

In 2017, the number of aging adults in King County who need our services continues to grow. Your support allows us to respond to this demand, and to continue helping some of the most vulnerable members of our communities get the care and help they need.

# Case Examples Provided by Sound Generations Staff

Every day, our professional staff and volunteers touch the lives of many elders in our community and help them obtain the services they need to remain independent. Below are brief descriptions of actual case histories provided by the many devoted and caring individuals who help meet the needs of seniors in King County.

## Meals on Wheels:

From our Bellevue Coordinator: "Today went very well until I delivered a rush order to a new client. After knocking at her door three times and calling her twice, I called her sister in Arizona. She had me talk to the neighbor next door, who told me that she not seen nor heard from her since yesterday. This was very disconcerting to her sister since she had a dial-a-ride coming for her at 1:00 to take her to a Dr. appointment.

I gave my numbers to the sister and brought the food to my home to be delivered later when we reached the client. About two hours later, the sister called to let me know that she had called the police. They broke the client's door down to get into her condo and found her on the bathroom floor where she had been since the day before. She had become very ill after a triple chemo treatment, fallen to the floor, and was unable to get up or call for help.

The client is now in the hospital until she is well enough to go home. The police repaired her door well enough to secure her place until the maintenance crew can get there to replace it. Her sister is so very thankful that we were there and let her know that we could not reach her. Our job is a critical contact for some of our clients and we must not forget that.

From an assessor's log: The apple tree in the front yard was bursting with fruit and the mailbox was bursting with pastel colored envelopes. "Elisabeth's" birthday was in a couple of days and it was all I could do not to burst into song myself: Elisabeth would be 103 years old Friday, and expected a mild but pleasant celebration with her niece and family. I brought her mail in at her request, and sat nearby, not because Eiisabeth had a hearing problem, but because I do.

Elisabeth related that she had been a social worker all her working life, obtaining her degree in 1932 at a time when social work was just becoming an important part of our social safety net. She was assigned to the Ozarks during the Great Depression, and witnessed firsthand the devastating effects of poverty and neglect.

having surgery or radiation therapy. He met with the Ballard Swedish Oncologist to get a second opinion. He is concerned because he lives alone, so the social worker talked to him about long-term care insurance which he reported he has but needs to get information about his policy. The social worker found a Prostate Cancer Support Group at Ballard Swedish. He called the man who coordinates it and plans to attend. Stephen is having a consultation with a Cherry Hill Swedish Surgeon on June 20.

"Al" is a 64-year old licensed RN who has been out of work since 2014. He has done contract work through an agency, but really wants to work at the VA. The social worker provided him with information on free meals, food pantries, Ballard Food Bank and gave him an application for Senior Farmers Market Nutrition Program on his first short visit. On his second visit the social worker provided the following assistance: completed DSHS application for cash and food; provided Work Source location; Rotecare Free Clinic for dental; King County ORCA Lift card; VA RN Recruiter name and contact number; VA job description for RN.

"Marilyn" is a 70-year old retired social worker who relocated to Seattle to be close to family. She reported that she fell on the sidewalk in Wallingford the beginning of March and hurt her knee. She had been waiting to see a PT on a referral from her DO at UW Medicine Ballard. In the meantime, the social worker encouraged her to attend the Center's Balance and Fall Prevention Class; provided handouts from NY Times and Group Health; provided a list of PT Clinics in Seattle that focus on balance and fall prevention. She plans to call the PT Clinics to inquire if they accept her insurance and then have her DO change the referral.

"Trudy" is a 75-year old woman who reported that she was born in Germany in 1942. She was the oldest child and is the only remaining family member. She questions why she survived. She was introduced to Center by a neighbor and is taking part in many of the offerings as a result. Her PCP put her on medication for high cholesterol after she suffered a TIA. She is hopeful that she does not have a re-occurrence. Her healthcare provider is Kaiser Permanente. She is getting hearing aids 06/01/2017 through Costco instead of Kaiser. Her Kaiser therapist is booked the entire month of June because they are short-staffed, so she asked if she could come to see the social worker during the month of June to be able to talk. She is aware that Center does not offer "therapy."

"Jeffrey" is a 71-year old man who has been homeless following eviction in 2013 from Ballard subsidized building. He lives in his Jeep. He does some volunteer work at the center and comes five days a week to eat lunch. He has been an artist since he was a teenager growing up in San Francisco, California. After working with the Boston, MA agency Art Lifting for three months, some of Jeffrey's prints are for sale online. He has sold two to date. The focus of Arts Lifting is on artists who are homeless and/or disabled.

The social worker assisted Jeffrey to go online to SHA's Save My Spot once a month; he also applied for the KCHA Section 8 wait list (unfortunately his application was not picked in the drawing). She helped Jeffrey to call the SHA Counselor regarding his application and assisted him to gather supporting information and prepare an appeal letter for SHA review. He applied for Senior Farmer's Market Nutrition Program. Finally, she provided time, supplies and space for Jeffrey to create art by appointment.

Jeffrey visits SW on a regular basis, most recently after a fall during the night resulted in abrasions and swelling on his elbow and knee. He finally agreed to have it checked by Bastyr NDs who visit Center two half days a week.

I became aware of a woman who is from one of the African countries and lives in the south end. She is going blind, needs medical help, and will probably lose her job as a maintenance person because she can't see. It is very likely that she will be homeless by the end of the month. I referred her to South East Seattle Senior Center social worker who has taken over the case and is doing great things for the woman. This is an example of how centers work together to help people.

## **Sno-Valley Senior Center:**

Two homeless men who live in the woods come for lunch everyday and get pet food too. We give them a spot to get nutrition and socialization.

In rural areas transportation is a critical need. There is no Metro bus in Carnation, and the only available service goes from North Bend to Duvall but doesn't provide transport to the eastside, where many seniors go for medical care.

## **EnhanceWellness:**

I have a client who was previously homeless and struggling with many issues, including diabetes, high blood pressure, back pain from an accident and PTSD from the

trauma of being homeless. In the few years she has been working with me, she has gained much insight on how to better cope with the many crises that occur in her life. She has learned to change her eating behavior and food intake so that she has been able to lose weight. In addition, she has maintained some form of physical activity since her accident two years ago, which set her back in a HUGE way. Two months ago, my social worker colleague and I were able to prevent this client from being evicted from her apartment through advocacy and support She has become more self-reliant, confident, and less depressed.

### **Information & Assistance:**

I have a visit planned on Thursday to meet with a 70 year old Marine, Mr. W., who has been homeless (living in a camper) in Seattle ever since he was released from prison and the halfway house he was in. He has Alzheimer's and only gets SSI. We are working on signing up for housing wait lists but it could be easily 3 or more years before he gets in anywhere. By that time he may need assisted living, which also is a difficult option because few facilities take Medicaid.

I'm also helping Ms. T, an 87 y/o African American woman whose rent is going up. She is running out of savings and she can no longer can make it to the laundry room or bathe without assistance. Medicaid denied her application for assisted living, in part because she doesn't understand all the details of the process. With our assistance, I am hoping she will be re-assessed, accepted and the timing will be such that she can make this move before there is a crisis. I helped explain the process & challenges to both her and her daughter.

Mrs. S is a 47 year old married woman on SSI (though that was recently cut off) who is caring for her mother on oxygen and a feeding tube. Mrs. S. also has a young daughter and is living with her brother's family; six people share a house. But they had trouble with their garbage not being collected and high utility bills. They had difficulty navigating the process with the City to get utility assistance. In 2016 I helped them work with the City to get these issues straightened out. Now again, they need assistance again as they were taken off the utility discount and have had difficulty reapplying.



June 14, 2017

King County Council and Regional Policy Committee,

Thank you for your service to the citizens of Martin Luther King Jr. County. On behalf of the 250,000 members, participants, and staff of the YMCA of Greater Seattle, we thank you for being champions for children, youth, families, the mentally ill, homeless neighbors, veterans, and senior citizens.

The YMCA is proud to partner with King County to provide vital and needed services to youth and families. Through prevention, intervention, and restoration-focused service strategies – ranging from early learning to active senior programming – the YMCA is committed to building healthy, resilient citizens and communities. Grant support from King County allows the YMCA to provide programs and services to children, youth, and families who most need services.

The Y's board, staff, members, and participants appreciate the leadership shown by the King County Council's approval of Best Starts for Kids, the MIDD, and earlier Veterans and Human Services levies. The Council's willingness to give voters the chance to support a safety net of funding for the most vulnerable by providing a "continuum of care" model from infants to seniors, is both innovative and exemplary. Recent voter support is a great testimony to our region's will to take care of the most vulnerable and disenfranchised. Thank you to the Council for continuing to build hope and opportunity for all.

We commend the County's recognition of the needs of veterans and seniors, and encourage the full increase and a fair split of funds between Human Services, Veterans, and Seniors as proposed. The YMCA is committed to partner with nonprofits and service providers to continue research-informed social services that work. Over the past ten years the Y and others have worked to achieve the desired results.

The VHS Levy sunsets on December 31, 2017. Many believe that federal funds to the state and county are at risk, placing critical services for King County citizens at risk. The children, youth, and families served by the YMCA and other agencies and funded by the Veterans and Human Services Levy depend on these critical services. Using philanthropy and government grants, each year the YMCA serves over 75,000 people throughout King County who need services the most. The annual increases in population continue to grow the needs.

We urge you to approve Executive Dow Constantine's proposed Veterans, Seniors, and Human Services levy for the November ballot and give voters the opportunity once again to show their support and commitment to the health, prosperity, and well-being of all citizens.

Sincerely,

Robert B. Gilbertson, Jr.

President/CEO

YMCA of Greater Seattle

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