Program Evaluation Results

Executive Summary
After completing the program, participants were significantly more likely to correctly define long-term care, and say they have given a lot of thought about whether their community offers the types of services they will need, or want, over the course of their life. They were also significantly more likely to say they have planned for the type of long-term care they want, if they need it following the program. Program participants are significantly more likely to say they have taken the following actions within a few weeks of completing the program: checked how much they will receive from Social Security when they retire, investigated whether they could benefit from purchasing long-term care insurance, checked their own home to identify safety risks, checked the home of a family member to identify safety risks, completed a health care power of attorney, and exercised five times a week doing such things as walking briskly, or mowing the lawn.

PARTICIPANTS IMPROVED SOME KNOWLEDGE ABOUT LONG-TERM CARE
Program participants were significantly more likely to correctly define long-term care following the sessions than before the sessions (89% vs. 71% respectively).\(^1\)

Program participants were significantly more likely to correctly estimate the national average cost per month/year for a one-bedroom unit in an assisted living facility following the sessions than before the sessions (54% vs. 37% respectively). Their ability to correctly estimate the national average cost per hours for a home health aide approached significance. Their ability to correctly estimate the national average cost for a private room in a nursing home did not change. Nonetheless, large majorities continued to correctly identify the payee who is the person who needs care.

PROGRAM STIMULATED THINKING AND PLANNING FOR LONG-TERM CARE
Program participants were significantly more likely to say they have given “a lot of thought” about whether the community they live in has the types of services they will need, or want, over the course of their life (27% vs. 43%).

Program participants were significantly more likely to say they have planned for the type of long-term care they want if they need it (36% vs. 57%).

PROGRAM CALL TO ACTION INCREASED DESIRED BEHAVIORS
Program participants are significantly more likely to have taken actions on half of the dimensions we asked about and approach significant changes on three additional items. There was no change among control group members’ behaviors. Program participants are significantly more likely to:

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\(^1\) Reported differences at significant at the 95% level of confidence, and differences reported as approaching significance, were significant at the 90% level of confidence. The margin of error pre-test group measure is +/-6.20%, the post-test group measure is +/-9.95%, the pre-control group measure is +/- 9.56%, and the post-control group measure is +/-10.82%. An annotated questionnaire is attached.
Know how much they will receive from Social Security when they retire (79% vs. 93%)
Have investigated whether they could benefit from purchasing long-term care insurance (58% vs. 79%)
Checked their own home to identify safety risks (51% vs. 68%)
Have checked the home of a family member to identify safety risks (46% vs. 64%)
Explored services in their community to help them live at home independently if they have difficulty getting around (25% vs. 39%).
Have completed a health care power of attorney (51% vs. 68%)
Exercised five times a week doing such things as walking briskly, or mowing the lawn (51% vs. 68%)

Although the results were not statistically significant, program participants’ behaviors change in the desired direction on:

- Having estimated how much their expenses and income will be after they retire (71% vs. 81%)
- Having a living will (54% vs. 69%)
- Having told at least one other person who their health care power of attorney is (55% vs. 70%)

Session facilitators agreed that the sessions were well received. Nine out of ten participants said the facilitator was knowledgeable (98%), easy to understand (97%), helpful (90%), and easy to relate to (90%).

They also rated the materials highly: easy to understand (99%), informative about the topic (99%), easy to relate to (97%), and helpful (92%). Almost nine in ten (89%) say they would share the materials they received with a friend.

Decide.Create.Share.® is a national campaign dedicated to increasing awareness of, and planning behaviors among, boomer women (ages 45-64) about long-term care planning. During April, 2010 facilitators were trained to offer a four-session program, or intervention, in their local communities. These facilitators were recruited from three women’s organizations: American Association of University Women (AAUW), a National Latina Organization called MANA, and the National Council of Negro Women (NCNW). A few sessions were implemented using a webinar technique. 2 Follow-up data were collected from this group as well as from a comparable control group which did not participate in the four facilitated sessions.

www.aarp.org/decidefacts

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2 Before each session a paper survey was administered by the session facilitator. A few weeks after the final seminar session, those who completed a pre-seminar survey and agreed to be re-contacted received a postcard notifying them about the survey. A week later they received a survey packet similar to the one completed prior to the sessions. The data were collected from these groups between July 16, 2010 and February 2, 2011. In addition, a control group composed of boomer women from the Business and Professional Women (BPW) was conducted using a similar survey and mailing methodology as the test group. The surveys were mailed in late October 2010 and early February 2011.