WORKING PAPER: November 23, 2004

Anticipating the Future

A Discussion of Trends in Fairfax County with a Focus on Seniors

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Introduction:

Guideline:

On May 24, 2004, as part of the Budget Guidelines, the Fairfax County Board of Supervisors directed staff to review currently occurring and forecasted changes to the county's demographics and the impact of these changes on county services delivery and costs. Growth in the number of seniors, residents with special needs, and our new immigrant populations will have an impact on the county's budget and the capacity of county government to provide services. Staff was further directed to share the findings with the school system.

The Board of Supervisors, in initiating this work, has taken the lead to encourage staff to begin a process of creative thinking and innovation in order to prepare Fairfax County for the future. The goal of this study is to increase knowledge and awareness of key trends impacting the county and to help provide a framework for discussion and public policy decisions.

Focus:

Although a wide variety of trends and implications are discussed, the primary focus of this study is on the trends most likely to influence and impact services for seniors – persons age 65 and older. Trends and their implications often reach beyond a single subset of the population; so much of the information in this study is relevant to other subpopulations. The trends discussed have been organized around nine topic headings:

- Rapid population growth and urbanization
- Transformation from a suburban bedroom community to a major employment center
- A population growing older
- Rapid cultural and ethnic diversification
- Housing trends
- Patterns of income and wealth
- Health care issues
- Rapid technological change
- Community engagement

Methodology:

An extensive review was conducted of existing public and private sector literature and data. From this review significant trends and data needs were identified. On the state and local government level, very

little information was found linking demographic trends to service implications beyond simple population growth linkages. In addition to the external literature review, Fairfax County specific data were analyzed from Census data sets and other surveys conducted by the county. Where Fairfax County specific data were unavailable, national data were used if it was felt it would add depth to the study.

To add perspective, to identify issues not captured and to identify implications, three two-hour focus group sessions were conducted with Fairfax County agency staff and school staff. Nearly 70 staff members from 26 county agencies and the Fairfax County Public Schools participated in the focus groups.

It also was felt that the perspective of an expert not associated with Fairfax County government would provide additional depth to the study. Dr. Stephen Fuller, Director of the Center for Regional Analysis of the George Mason University School of Public Policy, was brought on as an advisor and a participant.

Major Findings:

- Although the focus of this study was the county's growing population of senior residents, it was vital to include trends that are not specific to seniors because too narrow a focus would provide a misleading picture. The user of this information also must be careful not to isolate components out of context of other factors that when considered may change the outlook or interpretation.

- Through 2020, the number of children (persons younger than age 20) and the number of seniors (persons age 65 and older) will increase. However, children will decline slightly as a proportion of total population whereas seniors will increase as a proportion of total population. This will happen because the senior population will grow more rapidly than children. During the 2000 to 2010 decade, the projected change in the number of children (33,100) will exceed that of seniors (27,600). But during the 2010 to 2020 decade, more seniors will be added to the population than children – a projected increase of 34,200 persons age 65 and older but a projected increase of only 9,500 persons younger than age 20.

- Fairfax County Public Schools will need to accommodate a growing membership but at a slower pace than that experienced between 1990 and 2000. The most rapid future growth will occur prior to 2010.

- The growing influence of seniors as a proportion of total population is often associated with a lessening of support to fund education and youth services. However, there are mitigating factors that suggest that this may not become a major issue for the county through 2020. Persons with higher levels of educational attainment tend to be more supportive of educational spending than those with lower educational attainment. All indicators suggest that the county's future waves of seniors will be more educated than those that preceded them. In addition, although the proportion of the population age 65 and older is projected to increase from 7.9 percent in 2000 to 11.6 percent in 2020, seniors will still be a relatively small proportion of total population in comparison to other places. As of 2000, the proportion of the nation's population that was age 65 and older was 12.4 percent, exceeding that projected for the county in 2020.

- Initially the growth in demand for senior services offered by local government may not equal the population growth of that age group. The oldest baby boomers will become 65 in 2011. Data suggest that this generation will work slightly longer, accumulate more wealth, and will be physically healthier than the group now age 65 and older. The size and wealth of the baby boom generation makes them an attractive market. The private sector already has begun developing products and services to address many of the desires and needs of those who can afford to purchase services.

- The most rapid growth in the demand for senior services offered by local government is likely to occur between 2030 and 2050 because that is when the baby boomers will become 85 years and older, an age when many may need help with daily living. When the boomers reach this age, there will not be as many caregivers available as for previous generations. Baby boomers had fewer children and many remained

childless. In addition, the size of the working age population will be smaller in relation to the size of the population age 85 and older.

- Affordable housing issues will continue to challenge the county. The new housing units being added to the county are primarily high-end units. In 2003, new single-family homes were priced, on average, 58 percent higher than existing single-family homes, new townhouses 41 percent higher than existing townhouses, and new multifamily units 68 percent higher than existing units. In addition, the county enjoys low unemployment rates, job growth, and low housing vacancy rates which put upward pressure on housing prices and rental costs. An additional component pushing housing costs higher, at least temporarily, is speculation as housing became an investment market following the stock market crash in 2000.

- Fairfax County experienced a widening of the income gap between those with the most and the least income during the 1990 to 2000 decade. An analysis of family income distributions between the 1980, 1990, and 2000 Censuses showed that when adjusted for inflation the income gap between the lowest earning quartile and the highest earning quartile remained stable between 1980 and 1990. Between the 1990 and 2000 Censuses, however, the gap between the lowest earning quartile of families and the highest earning quartile widened by over 50 percent or about $25,000.

Next Steps:

- This study is a step toward increasing the knowledge and awareness of key demographic and economic factors that influence future program and services planning. In addition to tracking performance data, key demographic and economic indicators need to be identified and used as means of measuring community health.

- Policymakers and program planners need to engage in dialogues about shifting definitions around how need is defined. For example, as people have remained active and healthier at older ages there has been a shift in how the senior population is defined. Some programs have increased the age at which eligibility begins while others have not. Another example is how need or self-sufficiency is defined. The income level at which a family becomes self-sufficient in Fairfax County is at least 2.5 times above the federally defined poverty threshold. But in addition to income, a greater focus needs to be placed on wealth – especially for those programs serving seniors as some seniors are low income but have sufficient assets or wealth.

- County government must constantly nurture relationships between other levels of government, community based organizations, and its residents in an attempt to meet changing needs efficiently. Federal and state regulations sometimes hamper efforts to better target the populations most in need because they may not include wealth as a factor in determining need. The county needs to investigate ways to address these types of issues.

- County government needs to develop ways to catalyze and foster community engagement especially in emerging communities. An engaged community with a strong network of community based organizations will improve the quality of life for all Fairfax County residents. The value of the services performed by these volunteers and community based organizations currently is worth tens of millions of dollars per year.

Trend 1:

Rapid population growth and urbanization

Facts:

- Over the past three decades Fairfax County has been one of the most rapidly growing jurisdictions in the United States in terms of population growth – more than doubling the size of its population since 1970.[1]

- As of the 2000 decennial Census, Fairfax County ranked 36th in population size and 28th in density out of the 3,141 local jurisdictions nationwide.[1]

- The January 2004 population of Fairfax County is estimated to be 1,022,298 persons. The size of Fairfax County's population is larger than that of seven states – Alaska, Delaware, Montana, North Dakota, South Dakota, Vermont, and Wyoming.[2]

- The January 2004 density of Fairfax County is estimated to be 2,588 persons per square mile. As of 2000, Fairfax County was the 15th most dense Virginia jurisdiction with a greater density than that in the Virginia Cities of Chesapeake, Danville, Harrisonburg, Lynchburg, Petersburg, Roanoke, Suffolk and Virginia Beach.[2]

- Fairfax County Public Schools is the 12th largest school district in the nation with a projected fiscal year 2005 enrollment of 166,300 students.[3]

- Between 1980 and 1990, vacant land in Fairfax County diminished by over 30,000 acres. Between 1990 and 2000, vacant land diminished by an additional 15,500 acres. As of January 2004, Fairfax County had only 24,093 acres of zoned but vacant land.[4]

Future Trends:

- Population will grow rapidly through 2010, adding a projected 163,200 persons to the county during the decade between 2000 and 2010.[4]

- Between 2010 and 2020 population growth will slow dramatically as vacant residential land becomes scarce. The county is projected to add only 60,400 persons during the decade.[4]

	Estimates					Projections	
	1970	1980	1990	2000	2004	2010	2020
Total Population	454,275	596,901	818,584	969,749	1,022,298	1,133,000	1,193,400
Household Population	444,564	590,211	804,578	959,452	1,008,517	1,119,200	1,179,600
Persons per Square Mile	1,130.04	1,495.99	2,051.59	2,455.06	2,588.10	2,868.35	3,021.27
Public School Enrollment	133,362	126,860	128,288	154,523	164,667	175,985	
Acres of Vacant Land		75,550	45,042	29,529	24,093		

Sources: U.S. Census Bureau, Decennial Censuses (1970 – 2000 population, household population and persons per square mile); Fairfax County Department of Systems Management for Human Services (2004 – 2020 population, household population and persons per square mile, and all years of vacant acres); and Fairfax County Public Schools (public school enrollment).
Note: Population projections are preliminary 2004 projections by the Fairfax County Department of Systems Management for Human Services.

Implications:

- Rapid population growth strains local government's ability to build infrastructure to meet demand – public facilities, roads, sewers, etc.

- Residential growth creates some increase in tax revenues due to this growth; but as residential growth diminishes, tax revenue expansion due to residential growth will diminish for major tax sources such as real estate, retail sales, recordation, and deed of conveyance.

- As vacant residential land becomes scarce, there will be increasing pressure to redevelop existing neighborhoods. Although redevelopment is often associated with the loss of affordable housing, it may provide opportunities to make communities more accessible if accessibility for the disabled and public transportation accessibility are given prominence during the planning stages.

- Increased residential development will increase traffic congestion unless density becomes high enough to support public transportation alternatives that are convenient and frequent, making it attractive to use these alternatives instead of driving.

- Traffic congestion makes it more difficult to travel to services provided in central locations and may reduce the number of on-site visits a service provider can accommodate in a day if that provider must travel the same distances to provide services.

- Older as well as less experienced drivers may find navigating congested roadways difficult and frightening. "Older Virginians adapt to the effects of aging on their mobility by informal means, such as restricting the time of day when they drive... a*nd driving fewer miles*. Virginia drivers over the age of 60 traveled, on average, about 8,300 miles during 2001. Younger drivers traveled over… 14,800 miles, on average."[5] In addition, traffic congestion is likely to increase demand for services that can be brought into the home, services clustered in communities, and alternative transportation services such as 'Seniors on the Go.'

Trend 2:

Transformation from a suburban bedroom community to a major employment center

Facts:

- While population has doubled in size since 1970, the number of jobs located in Fairfax County has increased by 5½ times.[6]

- Fairfax County and the Cities of Fairfax and Falls Church accounted for 42 percent of the job growth in the Metropolitan Washington area between 1990 and 2000.[7] In 2003, Fairfax County had more jobs than the combined total of the Cities of Richmond, Norfolk, and Virginia Beach.[8]

- Between 1970 and 2000, the number of employed residents who worked at job locations in Fairfax County increased from 35.6 percent to 52.7 percent.[1]

- "With external markets driving the county's economic growth, the mix of jobs *has* changed. The retail sector had accounted for 18.2 percent of all the county's jobs in 1980 but by 2000 accounted for 13.5 percent. The service sector, where the majority of the federal contractors would be classified as well as most of the technology-intensive businesses, experienced a 308 percent increase in jobs and increased its share of the employment base from 28.4 percent to 46.9 percent over this 20-year period."[9]

- "*In* 1980, the salary structure of *the county's* residentially based economy was below average… the average salary in Fairfax County was only 88 percent of the metropolitan average…. In 2000, the average salary for all jobs in Fairfax County was $56,267, an inflation adjusted increase of 65.7 percent from 1980. During the same period, the metropolitan area's mean salary increased only 35.5 percent. Where the county's average salary was lower than the area average in 1980, by 2000 it had made up the gap and surpassed the area average."[9]

- Fairfax County's labor force also has grown faster than population growth. Some of that growth is due to the entrance of more women into the labor force. In 1970, 43.4 percent of women age 16 years and older were in the labor force and by 1990 the percent of women in the labor force increased to 70.7 percent. Since 1990, the percent of women in the labor force has dropped slightly to approximately 66 percent.[1]

- As Fairfax County has become a major employment center, its economy has diversified and county residents have become less likely to be employed by the Federal Government. In 1970, nearly a third of all employed residents were federal government employees; as of 2000, less than one out of seven residents was employed by the federal government.[1]

- "The economy that has emerged in Fairfax County is different from the District's economy that is built around the federal government and its national capital functions…. The county's economy in 1980 was small and immature. It reflected an employment base that either commuted out to higher value added, higher paying jobs, or one whose market was largely the county's resident population…. In 1980, Fairfax County's GCP *(gross county product)* totaled $16.5 billion (in 2004 dollars),…. By 2000, Fairfax County's economy was different. While the county's population had *grown* 60 percent,… its gross county product expanded by 291 percent (in inflation adjusted dollars)… a rate more than double the metropolitan gain….

Where Fairfax County accounted for 13.9 percent of the regional economy in 1980, by 2000 its share was 24 percent…."[9]

Future Trends:

- "*Fairfax County's* economic base is projected to continue evolving over the next 20 years but it will not experience a level of fundamental change similar to what it did during the previous 20 years. The county's economy in 2000 *will* be much more similar in structure to its projected economy in 2020 than to the 1980 economy. As a result, the rates of gain are projected to slow although these will still outpace the gains achieved at the metropolitan level and economic gains will also outpace population growth confirming the economy's external market orientation…. *Fairfax County's* gross county product is projected to grow to $128.4 billion (in 2004 dollars),… *accounting for* 27 percent of the region's output *in 2020*"[9]

- Fairfax County is expected to add approximately 120,000 additional jobs during the 2000-2010 decade and an additional 50,000 jobs during the 2010-2020 decade.[7] As Fairfax County adds jobs, its economic dependence on federal government employment will further decrease. "The service sector, with 56 percent of all county jobs by 2020 is the future…. The only other sector to grow faster than the average for all sectors will be transportation and communications…. Retail, which had accounted for 18 percent of the county's job base in 1980, will only account for 8.5 percent of total county jobs by 2020."[9]

- The growth in Fairfax County's labor force is not expected to keep pace with the growth of jobs during the next two decades. It also is unlikely that labor force expansion will be fueled by more women entering the labor force in the future as labor force participation rates of women have leveled off during the last decade.[1] "*These factors* will make the county's economy increasingly dependent on external sources of labor."[9]

	Estimates					Projections	
	1970	1980	1990	2000	2002	2010	2020
At-Place Employment	96,666	192,361	403,700	532,800		653,200	708,500
Private Sector Jobs as Percent of All Jobs		78.4%		87.6%			89.7%
Mean Salary, All Jobs (2004 dollars)		$ 33,947		$ 56,267			$ 70,122
Live and Work in Fairfax County	35.6%	38.3%	49.7%	52.7%	51.6%		
Labor Force	190,137	326,811	499,056	548,812	563,072		
Women in Labor Force	43.4%	61.7%	70.7%	66.1%	66.4%		
Men in Labor Force	85.7%	85.1%	85.2%	80.4%	80.8%		
Percent Federal Government Workers	30.4%	23.5%	17.4%	14.0%	14.6%		
Gross County Product (billions of 2004 dollars)		$ 16.519		$ 64.552			$ 128.376

Sources: Virginia Employment Commission, ES202 Nonagricultural Employment (1970 and 1980 at-place employment); Metropolitan Washington Council of Governments, Round 6.4 Employment Estimates (1990 through 2020 at-place employment); U.S. Census Bureau, Decennial Censuses and American Community Survey (live and work in Fairfax County, labor force, women in labor force, men in labor force, percent Federal Government workers); and George Mason Center for Regional Analysis (1980, 2000 and 2020 percent private sector jobs, mean salary and gross county product).

Implications:

- "While still outperforming its population base, the Fairfax County economy will have achieved some maturity (in size and structure) relative to some of the younger and smaller economies in the area's third tier counties. It will not capture a disproportional share of the best new jobs as the county did during the

1980s and 1990s. As a result, while its mean salary will increase to $70,120 (in 2004 dollars), up 25 percent, the mean salary gain within the Washington area will be larger (30 percent) although its dollar value will still lag *behind* Fairfax County."[9]

- Expansion of Fairfax County's business sector may shift some tax burden from residents to businesses, enabling the lowering of real estate tax rates.

- Rapid job expansion puts inflationary pressure on the price of housing as households compete for housing near employment centers.

- As federal government employment becomes a smaller share of the market employing Fairfax County residents, the county's economy becomes more likely to be affected by business cycles.

- "As *Fairfax County's* economy matures in the out years…, its future *economic* performance will become increasingly dependent on its ability to attract nonresident workers to satisfy its growing workforce requirements."[9] Employment of nonresident workers within the county will further increase traffic congestion.

Trend 3:

A population growing older

Facts:

- Fairfax County's population is growing older as is that of the nation – with a boomer turning 50 every seven seconds.[10] In 1970, the median age of the county's population was 25.2 years; by 2000, median age had risen more than 10 years to 35.9 years.[1]

- Part of the aging of the population is due to the aging of the baby boom generation and part is due to increases in life expectancy. Life expectancy at birth in the United States was 70.8 years in 1970; by 2000, life expectancy had risen more than six years to 77.0 years.[11]

- In 1970 when the baby boomers ranged in age from 6 to 24 years, persons 19 years and younger comprised 42.2 percent of Fairfax County's total population; as of 2003, this age group comprised only 27.8 percent of total population. The most dramatic shift in the proportion of children to adults occurred between 1970 and 1990. While the county's total population grew by more than 364,300 persons between 1970 and 1990, persons 19 years and younger increased by less than 29,000 persons. Since 1990, children have remained a relatively constant proportion of total population.[1]

- Between 1970 and 2003, the senior population increased steadily in both number and in size relative to total population. The number of Fairfax County residents 65 years and older increased six fold, from 13,674 persons (3.0 percent of total population) in 1970 to 82,996 persons (8.4 percent of total population) in 2003.[1]

Future Trends:

- Fairfax County's median age is expected to increase. Based on an extension of past trends, median age will increase to about 39 years by 2010.[4]

- Under the middle population growth assumption for the United States, the U.S. Census Bureau projects life expectancy at birth to increase between one and two years per decade through 2020.

- Persons 19 years and younger are projected to decline as a proportion of Fairfax County's total population but continue to increase in number. By 2010, it is expected that there will be 299,300 persons 19 years and younger living in the county, comprising 26.4 percent of total population. In 2020, this age group will decline to 25.9 percent of total population but will represent 308,800 persons.[4]

- Persons 65 years and older are projected to increase in number and as a proportion of Fairfax County's total population. By 2010, this age group will be 9.2 percent of the county's total population, increasing to 104,400 persons. The oldest baby boomers will reach age 65 after 2010 increasing the rate of growth of this age group between 2010 and 2020. By 2020 it is projected that there will be 138,600 persons age 65 and older living in Fairfax County and they will be 11.6 percent of the total population.[4]

	Estimates					Projections	
	1970	1980	1990	2000	2003	2010	2020
Total Population	454,275	596,901	818,584	969,749	1,012,090	1,133,000	1,193,400
Population 19 Years and Younger	191,951	193,323	220,909	266,163	275,813	299,300	308,800
	42.2%	32.4%	27.0%	27.4%	27.8%	26.4%	25.9%
Population 65+ Years	13,674	26,989	53,544	76,818	82,996	104,400	138,600
	3.0%	4.5%	6.5%	7.9%	8.4%	9.2%	11.6%
Population 85+ Years			3,798	6,922	6,654	9,604	9,876
			0.5%	0.7%	0.7%	0.8%	0.8%
Median Age	25.2	30.1	33.1	35.9	37.9	39.0	

Sources: U.S. Census Bureau, Decennial Censuses (1970 – 2000 population and 1970 – 2003 population by age and median age) and Fairfax County Department of Systems Management for Human Services (2003 – 2020 population and 2010 – 2020 projections).
Note: Population projections are preliminary 2004 projections by the Fairfax County Department of Systems Management for Human Services. 2003 population characteristics are based on household population only.

Implications:

- Fairfax County will need to expand the capacity of its school system through 2020 to accommodate a growing number of school age children. The most rapid growth in school age children will occur prior to 2010.

- A growing senior population may shift priorities as seniors are seen as an increasingly influential "market." More public and private support services may be developed specifically for this emerging market. But despite the projected rapid growth of the senior population, in 2020 persons age 65 and older are projected to be only 11.6 percent of Fairfax County's total population[4] – a proportion that is lower than that for the nation in 2000. Persons age 65 and older were 12.4 percent of the nation's total population in 2000.[1]

- The growing influence of seniors as a proportion of total population is often associated with a lessening of support to fund education and youth services. This may not become an important issue in Fairfax County because of high and rising education levels among the county's senior population (well educated persons of all age groups tend to be more supportive of educational funding) and because seniors will still be a relatively small proportion of total population in 2020.

- Programs serving persons 65 years and older will be impacted by strong growth in the target population. The proportions of seniors with disabilities increases dramatically with age – in 2000, 11.7 percent of persons age 65 to 74 had at least one disabling condition, 22.8 percent of those age 75 to 84 had at least one disabling condition, and 45.7 percent of those age 85 and older had at least one disabling condition.[1] Examples of existing adult and aging programs that will be affected include transportation, geriatric mental health, adult day care, senior recreation, senior center programs, medication assistance, etc. Because the oldest baby boomers will turn 75 in 2021, the need for services in these types of programs will accelerate after 2020 and the most rapid growth of the 85 years and older population will occur between 2030 and 2050.

- The growth in demand for senior services, however, may initially be slower than the overall growth of the senior population as data suggest that baby boomers may work longer, accumulate more wealth, and be more physically active and healthy than the generations that preceded them.

- With children remaining approximately the same proportion of total population and seniors increasing as a proportion, the proportion of working-age population will shrink. With increasing life expectancies, more of the working-age population may find themselves a part of the "sandwich" generation – those caring for both children and elders. These caregivers also may find themselves caring for their elders for a longer period of time. In addition, the baby boomers had fewer children than their parents and many remained

childless so there will be fewer family caregivers available to care for this generation. These factors may impact on productivity and the ability of some family caregivers to stay in the labor market. Thus, growth in the demand for programs that provide support and respite for caregivers and care for those without family caregivers will increase.

- Longer life expectancies also may result in a growing number of "young" elderly caring for the very old. These caregivers may need a different menu of support services than younger caregivers.

- The lens used to define what a "senior" is may shift depending on the ability of different age groups to maintain their independence and their expectations. In 1970, age 55 was commonly used as the age at which individuals became eligible for senior programs. Today age 60 or 65 is more commonly associated with program eligibility for seniors. There also has been a shift toward associating different levels of need with different levels of old.

Trend 4:

Rapid cultural and ethnic diversification

Facts:

- Fairfax County's racial and ethnic minorities have grown rapidly over the past several decades, increasing from 6.8 percent of population in 1970 to 38.2 percent in 2003.[1]

- In a recent study, counties were ranked on diversity by determining the probability that two randomly selected persons would be of a different race or ethnicity. Among the 524 counties nationwide with a population of 100,000 persons or more, Fairfax County was ranked 20th for its increase in diversity between 1990 and 2000.[12]

- Foreign-born residents of Fairfax County have increased dramatically since 1970. In 1970, only 3.5 percent or 16,139 residents were foreign born. By 2003, Fairfax County had 280,817 foreign-born residents; this represents more than one out of every four residents. In contrast, the foreign born are only 12 percent of the U.S. population. During the 1990 – 2000 decade, the increase in Fairfax County's foreign born residents made up 73 percent of the net increase in total population.[1]

- Fairfax County's foreign-born population comes from a large number of different countries with no one group forming a predominant majority. In 2000, the largest group of foreign born residents came from El Salvador but they only represented 10.3 percent of all foreign born persons and only 2.5 percent of total population.[1]

- As with the foreign-born population, Fairfax County residents age 5 and older speaking a language other than English at home have increased rapidly in number. In 1980, 59,895 persons (10.7 percent of the population age 5 and older) spoke a language other than English at home. As of 2003, an estimated 320,039 persons or more than one out of every three residents spoke a language other than English at home.[1]

- The U.S. Census Bureau defines a household as linguistically isolated if no member of the household age 14 or older speaks English "very well." Among county residents age 5 and older who speak a language other than English at home, 54.3 percent indicated they also spoke English "very well" and an additional 22.5 percent spoke English "well" (2003). In 2000, 7.3 percent of Fairfax County residents age 5 and older lived in a linguistically isolated household. This is nearly a quarter of those residents who speak a language other than English at home.[1]

- The senior population in Fairfax County, although not as diverse as the general population, has become much more diverse over the last several decades. In 1980, 6.4 percent of persons age 65 and older were racial minorities but by 2000 that proportion had more than doubled to 15.3 percent.[1]

- In 1980, 13.6 percent or 7,182 persons age 65 or older spoke a language other than English at home; in 2000 the number of seniors speaking another language at home had more than doubled to 15,492 persons.[1]

- Among persons age 65 and older speaking a language other than English at home, over a quarter lived in households that were linguistically isolated (2000). By language spoken at home, 23.6 percent of seniors living in Spanish speaking households were linguistically isolated, 15.2 percent of seniors living in households speaking Indo-European languages were linguistically isolated, 39.5 percent of seniors living in

households speaking an Asian or Pacific Islander language were linguistically isolated, and 22.3 percent of seniors living in households speaking other languages were linguistically isolated. [1]

	Estimates					
	1970	**1980**	**1990**	**2000**	**2002**	**2003**
Percent Minority	6.8%	13.8%	22.6%	35.6%	37.8%	38.2%
Language Other Than English Spoken at Home						
Persons 5+ Years		59,895	143,418	270,421	302,327	320,039
Pct. of Total Population		10.7%	18.8%	30.0%	32.9%	34.6%
Persons 65+ Years			7,182	15,492	18,253	23,052
Pct. of Total Population			13.6%	20.4%	22.4%	27.8%
Linguistic Isolation (no person age 14 or older in household speaks English "very well")						
Persons 5+ Years			32,683	65,523	79,024	
Pct. of Total Population			4.3%	7.3%	8.6%	
Persons 65+ Years			1,677	4,023		
Pct. of Total Population			3.2%	5.3%		
Foreign Born	16,139	54,109	127,506	237,677	260,936	280,817
Pct. of Total Population	3.5%	9.1%	15.6%	24.5%	26.3%	28.3%

Sources: U.S. Census Bureau, Decennial Censuses (1970 – 2000) and American Community Surveys (2002 – 2003).

Future Trends:

- Fairfax County is likely to continue to diversify over the next two decades. It is very difficult to predict how rapidly diversification will occur because of unknowns such as federal immigration policy. However if the same trends and rates that occurred between 1990 and 2000 continue through 2010, approximately 45 percent of Fairfax County's total population may be racial and ethnic minorities and 39 percent may speak a language other than English at home.

Implications:

- Fairfax County has no predominant minority culture. Local government will find it challenging to accommodate the wide breadth of language and cultural diversity. Fairfax County Public Schools indicate that over 100 languages currently are spoken by families with children enrolled in the schools.[3] Other than English, Spanish is the most frequently spoken language in the county. Data from the 2000 Census indicated that 36 percent of those who spoke a language other than English at home spoke Spanish. However, the next largest language category, Korean, was spoken by only 9 percent of those who spoke another language at home.[1]

- Outreach to these diverse groups is difficult, especially for those without identified leaders and those that are relatively small in number.

- More influential cultural groups may demand specialized services tailored to the needs of their group, creating competing demands for limited financial resources that are not adequate for tailoring programs for all groups. This may create equity challenges for Fairfax County Government.

- Program planners and service providers must be careful not to generalize regarding expectations and needs based on race, ethnicity, language, or culture.

- Fairfax County is likely to see shifts in what are considered the "cultural norms" of the county as different cultural groups become more influential and integrated into the fabric of the county.

- ESOL programs in the schools will continue to grow, as well as the need for language interpretation services in other programs. Persons immigrating to the United States as seniors often find it more difficult to learn English than younger immigrants and those who cannot speak English often feel very isolated.

- Anecdotally, service providers indicate that it takes substantially more time to serve a customer who speaks a language other than English when the service provider is not fluent in the customer's language.

- As the senior population diversifies, programs such as home-based and congregate meals may need to undergo changes to reflect this diversity as seniors may not want to enroll in programs that only offer unfamiliar foods.

Trend 5:

Housing trends

Facts:

- The mix of housing by type has changed since 1970. In 1970, nearly 70 percent of the housing in Fairfax County was single-family detached units, 24.4 percent was multifamily units and only 5.9 percent was single family-attached or townhouse units. As of 2003, single-family detached units had declined as a proportion of total housing units to 49.7 percent and townhouses had increased to 24.6 percent.[2]

- Most new housing currently being built in the county is being built at the high end of the market. In 2003, the median sales price for new single-family homes was 58 percent higher or $240,000 above that for existing homes; for townhouses, the median sales price was 41 percent higher or $110,000 above that for existing townhouses; and for multifamily units, the median price of new units was 68 percent higher or $122,000 above that for existing units.[13]

- The median market value of owner occupied housing has increased considerably since 1970. In 1970, the median value of a housing unit was $35,400. By 2003, the median housing value had increased nearly nine times to $307,600.[4] In comparison, median household income increased by 5½ times its level in 1970.[1]

- However, housing affordability is not just the ratio of income to housing cost but is also determined by loan costs (interest rates). One way of looking at housing affordability is to look at the proportion of households spending more than 30 percent of income on housing. Due to a combination of low interest rates and low price inflation between 1990 and 2000, the proportion of Fairfax County homeowners spending more than 30 percent of income on housing shrank from 26 percent to 19.6 percent of owner-occupied households. But since 2000 this trend has reversed as housing prices have risen dramatically, and the proportion of homeowners spending more than 30 percent of income on housing increased back to 26 percent as of 2003.[1]

- Persons age 65 to 84 are more likely to be homeowners in Fairfax County than younger adults. In 2000, 69.2 percent of householders younger than age 65 were homeowners whereas 87.2 percent of householders age 65 to 74 were homeowners and 80.7 percent of householders age 75 to 84 were homeowners. After age 85, homeownership in Fairfax County drops dramatically to 57.2 percent.[1]

- Among homeowners age 65 to 74, the majority (56.1 percent) were paying mortgages in 2000. For those homeowners age 75 and older less than a third had mortgages.[1]

- Older homeowners, age 65 and older, were more likely to have lived in their homes for a longer period of time than younger homeowners. In 2000, 10.3 percent of all homeowners had lived in their homes for 21 to 30 years and 7.0 percent had lived in their homes more than 30 years. In contrast, 23.1 percent of homeowners age 65 and older had lived in their homes 21 to 30 years and 39.8 percent had lived in their homes over 30 years.[1]

- In 1990, the proportion of homeowners age 65 and older spending more than 30 percent of income on housing was half that of all Fairfax County homeowners, 13.2 percent compared to 26.0 percent of all homeowners. Since 1990, the proportion of homeowners age 65 and older spending 30 percent or more of

income on housing has risen to nearly the same level as that for all homeowners. In 2002 the percent of older homeowners paying 30 percent or more of income for housing costs was 21.2 percent.[1]

- Privately owned rental housing complex units as a proportion of total housing units declined between 1980 and 2000, from over 20 percent to less than 16 percent of housing stock. Between 2000 and 2003, privately owned rental complex units as a proportion of total housing units increased slightly to 16.4 percent of the housing stock.[4]

- The average monthly cost of a rental complex unit has increased more rapidly than median household income since 1980. Average monthly rent increased from $334 in 1980 to $1,168 in 2003.[4]

- The percentage of renter households spending more than 30 percent of income on rental costs has followed a similar trend pattern as that for homeowners, but renters are more likely than homeowners to spend 30 percent or more of income on rent. In 2000, one out of five county homeowners spent 30 percent of income or more on housing whereas one out three renters did. Since 2000, the percent of renters spending 30 percent or more of income on housing has risen to 44.5 percent.[1]

- Renters age 65 and older are more likely than homeowners or younger renters to be paying more than 30 percent of their income on housing costs. In 1990, three out of five renters age 65 and older paid more than 30 percent of their income for housing costs. In 2000, this proportion had decreased; however, by 2002 it had increased almost to the 1990 levels.[1]

	Estimates					
	1970	**1980**	**1990**	**2000**	**2002**	**2003**
Single Family Units	69.7%	59.3%	53.9%	50.6%	49.7%	49.7%
Townhouse Units	5.9%	14.6%	22.3%	24.3%	24.4%	24.6%
Multifamily Units	24.4%	26.1%	23.8%	25.1%	25.9%	25.7%
Average Rental Complex Unit Rent		$334	$734	$989	$1,157	$1,168
Renters spending 30% or more of income on housing						
All renters		31.9%	38.6%	31.9%	39.1%	44.5%
Renters 65+ years			59.0%	53.0%	56.0%	
Median Market Value of Owner Occupied Housing Units	$ 35,400	$ 87,200	$ 194,700	$ 226,800	$ 265,600	$ 307,600
Owners spending 30% or more of income on housing						
All owners		20.6%	26.0%	19.6%	22.1%	26.0%
Owners 65+ years			13.2%	17.6%	21.2%	

Sources: U.S. Census Bureau, Decennial Censuses (1970 proportion of housing units by type and median market value; 1970 – 2000 renter and owner proportion of income spent on housing) and American Community Surveys (2002 – 2003 renter and owner proportion of income spent on housing) and Fairfax County Department of Systems Management for Human Services (1980 – 2003 proportion of housing units by type, average rental complex rent and median market value).

Future Trends:

- Fairfax County's Comprehensive Plan suggests that single family detached homes will remain approximately half of the county's housing stock in the future, while townhouses and multifamily homes will each represent about a quarter of the housing stock.

- Analysts who track the real estate market feel that speculation has been driving home prices up in the Metropolitan Washington area since the stock market crash in 2000. As gaps between homes values, personal income, and rental rates increase, the likelihood of a price adjustment in home values increases.

Based on a comparison between income and home prices, The Local Market Monitor suggests that home prices in the Washington Metropolitan area are overpriced by 17 percent.[14] Despite price adjustments that may occur due to speculation in the near future, the long-term picture favors increasing housing prices.

- Job growth coupled with low vacancy rates will apply upward pressure on housing values and rents during the next two decades. How this will affect housing affordability depends on income growth. A recent study conducted by the Virginia Tech Center for Housing Research for the Fairfax County Housing Authority concludes that the gross deficit in affordable housing units is over 17,000 units and predicts that this deficit is likely to worsen in the future.[15]

Implications:

- Because most of the new housing stock is being built at the high end, the county's housing stock is becoming less diverse economically.

- Most of the accessible apartments and condominiums located in Fairfax County are newly constructed due to recent changes in law. Because these units are newer units, they tend to be much more expensive.

- In general, the owned housing stock in Fairfax County is not accessible or "visit-able" for someone with a mobility impairment. Much of the county's housing stock is very vertical in nature and often requires occupants and visitors to navigate steps just to enter the structure. As the proportion of seniors increases relative to total population, the proportion of persons with mobility impairments is likely to rise. Some impacts of this lack of accessibility are a greater reliance on rehab facilities when residents are released from the hospital, greater isolation for those who age in place, and major rehab/construction costs for those who age in place or bring elderly relatives to live with them.

- To afford more costly housing, some residents are turning to money saving strategies. Between 1990 and 2000, the percentage of housing units considered severely overcrowded (those with more than 1.5 persons per room) increased from 1.5 percent of all housing units to 2.8 percent of all housing units. Among renter-occupied housing units, the percent of severely overcrowded units increased from 3.9 percent to 7.4 percent.[1]

- A recently appearing private market strategy to help homeowners afford more expensive homes is the interest only mortgage. Interest only loans allow borrowers to pay only the interest for a set period of time. A disadvantage to this type of loan is that it shifts additional risk to the homebuyer who is gambling on price inflation. It is estimated that 10 to 15 percent of the national mortgage market in 2004 are interest only loans; several years ago interest only loans made up less than 2 percent of the national loan market.[16] If home prices do not continue to rise, foreclosure rates may increase as homeowners are unable to meet their financial obligations.

- Senior homeowners who have aged in place are often occupying older housing units. Homes 15 to 30 years old frequently need major items such as roofs, heating and cooling systems, and kitchens and bathrooms replaced or renovated. Persons age 65 and older have lower incomes due to retirement and are sometimes less able to afford these repairs. In addition, physical limitations may prevent some seniors from doing repairs they may have been able to do themselves when younger.

- Senior homeowners who no longer have a mortgage can tap into reverse mortgage programs to provide themselves with income. Because these types of programs are relatively new, seniors considering these options may need consumer information and protection.

- Unless tax rates are lowered, increases in home prices place additional tax burdens on residents – especially seniors with fixed incomes. Nationally, total real estate tax burdens have grown to 87 percent of what homeowners spent on mortgage interest payments in 2003.[14]

- How much a household spends on housing in relation to income has a direct impact on the household's ability to be self sufficient. As the percent of income spent on housing increases, households become much more likely to run out of money for basic needs such as housing, utilities, food, and medicine. Among households spending less than 20 percent of income on housing, only 7.6 percent ran out of money for basic needs one or more times during a year. But among households spending 50 percent or more of income on housing, 40.5 percent ran out of money for basic needs one or more times during the year.[17]

Trend 6:

Patterns of income and wealth

Facts:

- Median household income in Fairfax County grew rapidly between the 1970 and 2000 Censuses, from $14,854 to $81,050. Since the 2000 Census, the American Community Survey estimated that median household income grew to $85,310 in 2002 and then declined to $80,753 in 2003. But despite the 2003 decline, Fairfax County has one of the highest median household incomes in the nation.[1]

- Because many persons are retired at age 65 and older, median household income for householders age 65 and older is lower than that for all householders. In 2002, householders age 65 and older had a median household income of $59,249 compared to $85,310 for all households.[1]

- Increases in median household income for Fairfax County householders age 65 and older have not kept pace with those for all households. In 1980, the median household income of householders age 65 and older was 85 percent of that for all households; in 2002, it was less than 70 percent.[1]

- Since 1970, poverty rates in Fairfax County have been well below national rates, fluctuating between 3.5 percent and 4.5 percent. Although Fairfax County's poverty rates are very low, there were an estimated 44,012 persons below poverty in 2002.[1] The number of persons below poverty in Fairfax County is larger than the 2002 population in 98 of the 134 local jurisdictions in Virginia.[18]

- The poverty level does not reflect the income level needed for self sufficiency in Fairfax County. According to a recent study, a single adult living in Fairfax County in 2002 would need an hourly income of $10.63 or an annual income of $22,441 to meet basic needs for self sufficiency.[19] This is more than 2.5 times the federal poverty guideline for 2002.[20] A family containing two adults, a preschooler and a school-age child would need a combined hourly wage of $24.84 or an annual income of $52,468 to meet basic needs.[19] The income needed for this family of four is nearly 2.9 times the federal poverty guideline for a family of four.[20]

	Estimates					
	1970	1980	1990	2000	2002	2003
Median Household Income						
All households	$ 14,854	$ 30,011	$ 59,284	$ 81,050	$ 85,310	$ 80,753
Householders 65+ years		$ 25,496			$ 59,249	
Persons Below Poverty Level	18,619 4.2%	23,092 3.9%	28,210 3.5%	43,396 4.5%	44,012 4.5%	41,165 4.2%

Sources: U.S. Census Bureau, Decennial Censuses (1970 – 2000) and American Community Surveys (2002 – 2003).

- Fairfax County experienced a widening of the income gap between those with the most and the least income during the 1990 to 2000 decade. An analysis of family income distributions between the 1980, 1990, and 2000 Censuses showed that when adjusted for inflation the income gap between the lowest earning quartile and the highest earning quartile remained stable between 1980 and 1990. Between the 1990 and 2000 Censuses, however, the gap between the lowest earning quartile of families and the highest earning quartile widened by over 50 percent or about $25,000.[2]

- Over the past two decades, major changes have occurred in the nation's retirement programs and how retirement is financed. In 1981, 80 percent of retirement programs nationwide were defined benefit plans or pension plans. Since the 1980s, many retirement programs were converted to defined contribution plans such as 401K plans. In 2000, only 40 percent of retirement programs remained defined benefit plans.[21]

- National data on the sources of income show that there has been a shift to more reliance on wage and salary income among persons 65 years and older since 1984 while the reliance on interest income, dividends, rental income, and other property income have shrunk. In 1984, wages and salaries contributed 26.8 percent of total income for persons 65 to 74 years and contributed 9.3 percent of total income for persons age 75 and older. In 2002, wages and salaries contributed 37.4 percent of total income for those 65 to 74 years and 12.2 percent for those 75 years and older.[22]

- Interest income, dividends, rental income, and other property income contributed 10.8 percent of total income for those 65 to 74 years and 17.3 percent of total income for those 75 years and older in 1984. Interest income, dividends, rental income, and other property income declined dramatically as contributors to total income in 2002 – 4.1 percent for those 65 to 74 years and 8.3 percent for those 75 years and older.[22]

- An analysis conducted by Dr. Stephen Fuller concluded that home equity comprises a major portion of wealth – approximately half the total assets held by Fairfax County homeowners age 65 and older. Dr. Fuller estimated that senior homeowners with incomes below $75,000, on average, had total assets of less than $500,000 (including the equity in their homes).[23]

	Estimates of Sources of Income					
	1984		1990		2002	
Sources of Income before taxes - Persons 65 to 74 years						
Wages and salaries	$ 4,212	26.8%	$ 5,439	25.3%	$ 13,134	37.4%
Self-employment	$ 712	4.5%	$ 973	4.5%	$ 1,451	4.1%
Social Security and retirement	$ 8,670	55.2%	$ 12,176	56.6%	$ 18,276	52.0%
Interest, dividends, rental income, etc.	$ 1,701	10.8%	$ 2,400	11.2%	$ 1,438	4.1%
Other	$ 426	2.7%	$ 515	2.4%	$ 819	2.3%
Sources of Income before taxes - Persons 74 years and older						
Wages and salaries	$ 1,092	9.3%	$ 1,133	7.3%	$ 2,925	12.2%
Self-employment	$ 692	5.9%	$ 215	1.4%	$ 803	3.4%
Social Security and retirement	$ 7,480	63.9%	$ 10,976	71.1%	$ 17,327	72.5%
Interest, dividends, rental income, etc.	$ 2,026	17.3%	$ 2,716	17.6%	$ 1,990	8.3%
Other	$ 422	3.6%	$ 394	2.6%	$ 844	3.5%

Sources: U.S. Department of Labor, Bureau of Labor Statistics, 1984, 1990 and 2002 Consumer Expenditure Survey.

Future Trends:

- Median household income levels in Fairfax County are likely to remain one of the highest in the nation because of the area's low unemployment rates, high levels of educational attainment, and the types of jobs available to residents.

- Over the next two decades the average age of retirement is likely to increase by a couple of years as the eligibility age for Social Security Income increases. Typically age at retirement has been closely aligned to the age at which employees become eligible for Social Security Income.[21]

- The educational attainment levels of persons 45 to 64 years are higher than those for persons 65 years and older, especially among women in Fairfax County. Among women, the percent with at least a four year college degree is 50.1 percent for those 45 to 64 years and 26.2 percent for those 65 years and older; the rates for males are 68.0 percent and 57.2 percent, respectively.[1]

- Employers are expected to continue to convert retirement plans to defined compensation retirement plans.

- The widening gap between the rich and poor may become amplified in the future due to intergenerational transfer of wealth.

Implications:

- Typically higher educational attainment levels are associated with higher earning power. Thus it is likely that at retirement the better educated adults who are currently 45 to 64 years will have higher incomes than the less well-educated generation that preceded them in Fairfax County. Better educated and more likely to have been in the labor force than earlier generations, women especially may have more financial resources when they retire than earlier generations.

- Between 2010 and 2020 the first of the baby boom generation will reach age 65, the age typically associated with retirement. A 2003 Congressional Budget Office (CBO) study took a comprehensive look at a wide range of studies on the financial preparedness of the baby boomers for retirement. These are the conclusions from the CBO study:

    - "As a general rule, the more types of wealth that such studies account for, the larger the share of the baby-boom generation that appears prepared for retirement…."

    - "Fewer boomers are likely to live in poverty than is the case with current retirees…."

    - "Most … studies suggest that about half of boomer households are on track to accumulate enough retirement wealth to maintain their working-age standard of living after they retire…. The other half of households are likely to face a drop in their living standard at retirement, especially if they retire when they now intend to. In many cases, the shortfall will be modest and can be made up through a few additional years of work. However, … net worth among families whose earners did not graduate from high school appears to have declined … many of those baby boomers are likely … to find themselves largely dependent on government benefits."[24]

- With more residents retiring under defined compensation plans, retirement income and wealth become more tied to fluctuations and risks in the investment markets. A pronounced downturn in financial markets may result in pronounced increases in residents' demand for financial support services at a time when the county's financial assets are least able to respond to the need.

- In determining program eligibility, more attention may need to be paid to wealth and its liquidity in addition to income. However, the costs of implementing eligibility criteria that take into account wealth will need to be weighed against total program costs and policy goals.

Trend 7:

Health care issues

Facts:

- "The United States spends a larger share of its gross domestic product (GDP) on health care than any other major industrialized country. Expenditures for health care represent nearly one-seventh of the Nation's GDP, and they continue to be one of the fastest growing components of the Federal Budget. In 1960, for example, health care expenditures accounted for about 5 percent of GDP; by 2000, that figure had gown to more than 13 percent."[25]

- Nationally, the median per person medical expense rose from $567 in 1996 to $856 in 2001, a 51 percent increase. For persons under age 65, the median medical expense rose 49.7 percent during the five-year period; and, for persons age 65 and older, it rose 55.2 percent. Additionally, the 2001 median cost for a person age 65 and older was over four times higher than that for a younger person, $3,049 compared to $690. Nearly 20 percent of these expenses were paid out of pocket.[26]

- As with overall medical costs, prescription costs are higher for persons age 65 and older than younger persons. Nationally, the median per person prescription expense more than doubled between 1996 and 2001, rising from $114 in 1996 to $240 in 2001. Prescription costs for both age groups rose at about the same rate, but persons age 65 and over spend fives times more on prescriptions than younger persons, a median of $918 in 2001 compared to $176 for those who are younger. Persons younger than age 65 paid only 38 percent of prescription costs out of pocket in 2001 whereas persons age 65 and older paid nearly 56 percent of their prescription costs out of pocket.[26]

- During the past several decades, Fairfax County has experienced strong growth among Asians and Hispanics. These two groups are much more likely to lack health insurance than other races or ethnicities. Asian and Pacific Islanders have grown from 23,184 persons in 1980 to 148,496 persons in 2002. During the same time period, Hispanics increased from 19,983 persons to 122,013 persons.[1] In 2000, 18.7 percent of Asians and Pacific Islanders living in Fairfax County lacked health insurance compared to 18 percent nationally. Among Hispanics, a quarter of those who were residents of Fairfax County lacked health insurance compared to 32 percent nationally.[17]

- The foreign born population in Fairfax County has increased by five times since 1980.[1] The diversity of this population has introduced new health issues into the county. For example, tuberculosis has been a concern in Virginia with the number of cases increasing from 292 in 2000 to 332 in 2003. The Fairfax Health District has accounted for over 28 percent of all Virginia tuberculosis cases since 2000. In 2003, the majority of Virginia's tuberculosis cases (62.3 percent) involved persons born outside of the United States.[27]

- Fairfax County has experienced a sharp increase in persons age 65 and older without health insurance coverage. A survey conducted in 1996 found that only 2.1 percent of seniors age 65 and older lacked health insurance coverage, but in 2000 this rate had increased to 7.1 percent of seniors. Further analysis of these data revealed that the majority of seniors without health insurance spoke English "not well" or "not at all," suggesting that many of them may be recent immigrants who do not qualify for programs such as Medicare.[17]

- The likelihood of having one or more disabilities increases dramatically with age. As shown by 2000 Census data, only 7.1 percent of persons 5 to 20 years have one or more disabilities. In sharp contrast among non-institutionalized persons 65 to 74 years, over 22 percent have one or more disabilities; among 75 to 84 year olds, 41.4 percent have one or more disabilities; and among persons 85 years and older, nearly three quarters have at least one disability. Of those persons 85 years and older, a third have a self-care disability and more than half have a disability that limits their ability to go outside their home.[1]

- Life expectancy at birth for residents of the United States has increased consistently. Persons born in 1940 had a life expectancy at birth of 62.9 years whereas persons born in 2001 have a life expectancy of 77.2 years.[28] Medical science has done a very good job of finding cures for diseases and techniques for prolonging life. Today, two big factors influencing a person's quality of health are weight and physical activity levels. The prevalence of obesity among Virginia adults has increased from 10.1 percent in 1991 to 20.0 percent in 2001.[29] Obesity contributes to a large number of health problems, and lack of physical activity is one of the major causes of obesity. "Industry data indicates that overweight and obese individuals cost the payers of health services 37 percent more than for those of normal weight….. *and* only 16 percent of the *nation's* population met the goal of 30 minutes of moderate activity five or more days per week. Among those 75 and over, only 12 percent meet the goal of 30 minutes five or more days a week."[30]

	2000 Census Estimates					
	65 to 74 Years		75 to 84 Years		85 Years and Older	
	Number	Percent	Number	Percent	Number	Percent
Non-institutional population	44,502	100.0%	26,212	100.0%	8,082	100.0%
No disabilities	34,617	77.8%	15,355	58.6%	2,217	27.4%
One or more disabilities	9,885	22.2%	10,857	41.4%	5,865	72.6%
Sensory disability	2,368	5.3%	3,595	13.7%	2,477	30.6%
Physical disability	6,535	14.7%	7,579	28.9%	4,243	52.5%
Mental disability	2,112	4.7%	3,522	13.4%	2,622	32.4%
Self-care disability	1,711	3.8%	3,269	12.5%	2,622	32.4%
Go-outside-home disability	4,124	9.3%	5,368	20.5%	4,182	51.7%

Source: U.S. Census Bureau, 2000 Decennial Census, PUMS. A sensory disability is defined as blindness, deafness, or a severe vision or hearing impairment. Physical disability is defined as a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. A mental disability is defined as a learning, remembering, or concentrating condition lasting six months or more. A self-care disability is defined as a dressing, bathing, or getting around the inside of the home condition lasting six months or more. A going outside the home disability is defined as a condition lasting six months or more that makes it difficult to go alone to shop or visit a doctor's office.

- A 2002 report from the Fairfax County Long-Term Care Task Force identified critical issues impacting the care of persons needing assistance with daily living. Among county programs for seniors who need assistance with daily living, many are currently filled to capacity. For example:

    - The Adult Day Health Care program currently serves 110 clients and has a waiting list of 96 persons.

    - The Home Repair for the Elderly program repairs about 80 homes per year and has a waiting list of 40 homes.

    - At the time of a study conducted in 2000, there were no affordable assisted living beds available in the county.[31]

- Anecdotal information suggests that there are shortages of geriatric specialists, in-home providers, and nursing home staff. "Thirty-eight states have established minimum nurse staffing standards *for nursing*

homes. Virginia does not…. Virginia ranks 48th in per capita health care spending for the elderly, poor, and persons with disabilities…. 'Shortage of staff' is the most frequent nursing home complaint received by Virginia's Long-Term Care Ombudsman Program."[32]

Future Trends:

- Hispanics and Asians and Pacific Islanders are expected to continue to be two of Fairfax County's fastest growing population segments.

- The proportion of Fairfax County's population that is foreign born is expected to continue to grow rapidly over the next decade unless federal policies on immigration change dramatically.

- Under the middle population growth assumption for the United States, the U.S. Census Bureau expects that life expectancy at birth will increase by slightly more than half a year every five years through 2020.

- The Virginia Employment Commission predicts that physicians and surgeons; registered nurses; and nursing aides, orderlies, and attendants will be among the state's fastest growing occupations between 2002 and 2012. During this time period, there will be an average of 6,470 job openings per year for physicians and surgeons in Virginia, 2,060 job openings per year for nurses, and 1,020 job openings per year for nursing aides, orderlies, and attendants.[33]

- "The incidence of disabilities among the elderly – everything from arthritis to Alzheimer's – doubles every five years after age 65."[10] The need for programs to serve the frail elderly who need assistance with daily living, mental health services for age-related problems, and treatment for chronic or acute illnesses will increase as the senior population increases.

- Most analysts expect health care and prescription medicine costs to continue to increase faster, on average, than other items.

Implications:

- If purchasing patterns for health insurance do not change among Hispanics and Asians, Fairfax County can expect to have a growing proportion of uninsured residents.

- As more foreign-born seniors enter Fairfax County, it is likely that the proportion of persons 65 years and older without health insurance will increase because these immigrants often do not qualify for Medicare.

- As life expectancy increases, the proportion of seniors age 85 and older is likely to increase. Based on 2000 data, nearly three quarters of seniors age 85 and older in Fairfax County had one or more disabilities.[1] How able these older residents will be to care for themselves independently in the future depends greatly on steps they take to keep physically active and to maintain their health.

- The county and its health care businesses may find it increasingly difficult to fill vacant positions. The lower paying health occupations in particular may become increasingly difficult to fill (i.e., home health aides and nursing home/assisted living facility staff).

- As most programs currently serving the frail elderly are at or near capacity, demand for these services is likely to grow more quickly than the current programs can accommodate.

Trend 8:

Rapid technological change

Facts:

- The residents of Fairfax County have been rapid adopters of new technology. Because of high education levels, high income levels and the county's occupational mix, many of the county's residents feel comfortable experimenting with and using new technologies. One example of how rapidly Fairfax County residents embraced a new technology is the experience of home computer ownership and Internet use. 1990 is considered the starting point of the World Wide Web. Ten years later, 78.7 percent of Fairfax-Falls Church households had Internet access at home compared to 41.5 percent of households nationwide. Among households with persons age 65 and older, 58.1 percent had home Internet access. Even at low income levels (below $25,000), 35.4 percent of Fairfax-Fall Church households had Internet access at home.[17]

Future Trends:

- Fairfax County residents are likely to continue to be rapid adopters of new technologies in the future due to high education and income levels.

- "Researchers and marketers are developing everything from simple gadgets to complex computer systems to ease *the baby boomers* into old age…. Some solutions are already here… kitchen accessories with thicker handles for arthritic hands… door levers instead of doorknobs…. More ambitious products are in the works…. Research by Boston University biomedical engineer Jim Collins found that older people have better balance if the nerves in their feet are stimulated by vibrations. That led to a design for vibrating shoes that can help wearers avoid falls…. Automakers and university researchers are testing and refining sensors, monitors and other devices to compensate for the coming decline in the reaction time and awareness of boomers *who continue to drive*…. Researchers also are tackling health care for the elderly. The leading idea: systems that monitor a person's health from home."[10]

Implications:

- Already many residents register for classes and pay tax bills through the county's Web site. As new technologies become available, service providers may be able to experiment with new and creative ways to deliver services. For example, Fairfax County needs to develop and nurture programs that find ways of using technology to replace some of the services currently provided by in-home providers who are in very short supply.

- Increased use of technology may modify current patterns of work and leisure and affect transportation system demands and patterns. For example, teleworking has just begun to influence where and how work is done.

Trend 9:

Community engagement

Facts:

- One measure of how engaged citizens are in their communities is voter registration and turnout. Fairfax County enjoys higher than average rates for both these measures. In November 2004, 633,034 persons were registered to vote and 73.8 percent or 467,044 persons voted in the general election.[34]

- Fairfax County's newest residents, immigrants and refugees, feel a strong connection to this community and consider Fairfax their home. In a study of eight immigrant and refugee communities with children in Fairfax County Public Schools, it was found that 48 percent owned homes in Fairfax County, 91 percent reported feeling that Fairfax County is home, 83 percent said their neighbors made their families feel welcome, and 80 percent indicated that they would be willing to volunteer some of their time to improve the neighborhood in which they live.[35]

- A national study (2003) on volunteerism shows that there is a direct correlation between educational attainment and volunteerism. College graduates were more than twice as likely to volunteer as persons with only a high school degree. In addition, those with college educations were more likely to volunteer more time, a median of 60 hours per year compared to 48 hours. [36]

- The age group that was most likely to volunteer was persons 35 to 44 years – nearly 35 percent of this age group volunteered time through an organization in 2003. The second highest participation rate (33 percent) was among persons 45 to 54 years. The median number of hours volunteered by these age groups was 50 and 52 hours per year, respectively.[36] It is very likely that the higher rates of participation among these age group are due to, in part, the fact that many have children and they are volunteering at schools and organizations that serve their children.

- Although only 24 percent of persons age 65 and older volunteered, those who did volunteer worked a median of 88 hours per year, more than 70 percent higher than the median hours of 35 to 54 year olds.[36]

- Non-Hispanic Whites are more likely to be volunteers than other racial/ethnic groups.[36]

- Over 60 percent of those who volunteered did so through a faith-based organization, an educational organization or a youth-services organization.[36]

- Fairfax County government has participated in the national trend to nurture citizen and community engagement. The Fairfax County Consolidated Community Funding Pool is an example of how seed money is provided to community based organizations to nurture programs that provide human services to county residents. In addition, Fairfax County government has sponsored programs such as Neighborhood Colleges, Citizen Police Academies, and the Citizens Corps – programs that develop leadership skills among the county's residents.

- Fairfax County has an active and strong network of community based organizations. In March of 2003, 64 community based organizations that provide services to Fairfax County residents answered a survey on type of human services provided and the sources of their funding. The total value of services provided by these 64 organizations exceeded $48.6 million, and they represent only a portion of all the community based organizations that provide services to county residents.[37]

Future Trends:

- County residents have shown an extremely strong interest in the county sponsored leadership programs, filling spots more rapidly than originally anticipated and creating waiting lists for some programs.

- Anecdotally, some of the county's community based organizations have expressed concerns about the aging of their volunteer staff and the difficulties faced with recruiting volunteers willing to work longer blocks of time and to take on the jobs that require higher levels of commitment and responsibility. In addition, some community based organizations struggle with management and organizational issues such as paying adequate wages to recruit staff, sustainability of programs after the loss of key employees, and having the resources necessary to secure funding.

- It is not clear whether the county will reap more or less volunteer hours as the county's senior population expands. It is not yet clear whether the baby boomers will choose to work after they reach "Social Security" age. In addition, persons 65 years and older volunteer at lower rates but those who do volunteer are likely to work more hours.

Implications:

- Although national studies suggest a lower rate of volunteerism among racial and ethnic minorities, county data suggest these groups are very interested in their communities and would be willing to volunteer time to improve their neighborhoods. There will be a growing need to use non-traditional methods of engaging residents from the multi-ethnic and non-English speaking communities.

- Volunteers and community based organizations can make a huge impact on the quality of life for residents in a community. Local government is reluctant to meet needs in areas that are not mandated for publicly funded services. By encouraging community based organizations to assist, the quality of life for residents can be improved greatly. For example, in fiscal year 2003, for every dollar of seed money provided by Fairfax County Government to the Consolidated Community Funding Pool, "another $4.72 in cash, donated goods, services, and volunteer time was leveraged by community based organizations…."[38]

- Too much dependence on community based organizations and volunteers may result in an imbalance of services. For example, there may be a lack of manpower where the need is greatest as volunteers may be less willing to travel to where the most need for services resides and organizations may limit the type of clientele and geographical area served.

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