

# **Availability of Senior Services in the City of Chicago**

## **--GIS Research Report**

Haoxing Ma

MPA, MSG

ID: 6949940026

### **INTRODUCTION**

#### **Background**

The City of Chicago has long been dedicated to the promotion of senior services. Chicago Department of Family and Support Services ("DFSS") is the major organization that provides various social, educational and recreational programs and activities for the senior communities within the City of Chicago area. The department's Senior Services Area Agency on Aging operates many programs designed to meet the diverse needs of older Chicago citizens, from those who are healthy and active, to those who are frail and homebound.<sup>1</sup> It has established 18 senior service centers in its 18 different communities till now including 6 Regional Senior Centers that act as community focal points for information and assessment, and provide senior services in health and fitness, education and recreation and 10 satellite senior centers operated by non-profit partners.

#### **Research Question**

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<sup>1</sup> Senior Services-Area Agency on Aging: <http://www.cityofchicago.org/city/en/depts/fss/provdrs/senior.html>

By gaining information from the City of Chicago's governmental website, I am actually seeing a more comprehensive picture of how are the senior centers scattered. Therefore, by comparing the locations of the senior centers with other socioeconomic factors such as proportion of old-age population and proportion of households that are under the poverty line, I am able to figure out whether the senior service in a certain area is enough to cover the local needs or not, and more importantly, how to improve the current situation.

## **DATA SOURCE**

In order to decide whether the senior service at a local community is enough or not, I need to obtain data on the percentage of senior population in each community and see if the communities with most dense senior population are served first. Thus I downloaded shapefiles and excel files from the following three different sources:

### I. The United States Census Bureau

- 2010 TIGER/Line Shapefiles - Illinois State Shapefiles

### II. The Senior Services-Area Agency on Aging

- DFSS Senior Centers List in Excel

### III. City of Chicago Data Portal

- Boundary Data - Community Areas Shapefile
- Health Centers Shapefile
- 2010 Census Data Table in Excel - Table DP-1 Profile of General Demographic Characteristics (Percent Aged over 60)

## **DATA PROCESSING**

Based on the Illinois State Shapefile that includes the map of the City of Chicago, I added the City of Chicago Community Areas Shapefile. Then I joined the 2010 Census Data Table in Excel that includes information on percent aged over 60, percent household under the poverty line into the Community Areas shapefile by manually typing in a new field in the shapefile. The joined files were linked through the new field I added named Area Numbers (type: double). The new shapefile was then saved as two new map layers for further edits. After I downloaded lists of senior centers and health centers in the City of Chicago, I geocoded them into the map layers I created in the last step respectively and generated four new maps.

## **MAP ANALYSIS**

### **Outcomes**

First of all, I evaluated the overall income level by examining the Per Capita Income from the 2010 Census Data Table in Excel (See Graph 1). As the graph shows, most of the households' incomes are below 30,000 dollars and very few households have incomes over 50,000 dollars. When I used gradual colors in each map to indicate the different percentages, the darker color indicates a higher percentage while the lighter color indicates a lower percentage. Map 1 and Map 2 are created to show different percentage of elder population and poor households. The comparison displayed that the least well-off communities with the highest proportion of elder population such as Riverdale Community, East Garfield Community and West Garfield Community do not have either senior center or health center (See Map 3, Map 4, Map 5 and Map 6). On the contrary, several most well-off communities with the lowest proportion of elder

population have both senior centers and health centers located. This does not necessarily indicate that the City of Chicago failed its attempt to serve the right group of people. However, it does warn the city that more efforts should be made to make sure that the most vulnerable population are being served.

### **Challenges**

I am aware that this report might not be very accurate because I only considered few factors in deciding where should a senior center/health center should be built. Other factors such as geographical environment, average health condition, the availability of other types of senior services and the existence of other private senior centers should also be taken into consideration. If I have access to the above data and am able to incorporate them all into the maps, I believe my research report would be more convincing.

Anyway, the establishment of a new senior center in the needed areas is beneficial to the surrounding community as it provides comprehensive services listed as below:

- Information and employment assistance
- Mental health counseling
- Meal and nutrition programs
- Transportation assistance
- Fitness and wellness programs
- Educational and recreational activities

It is significant for the local elderly to stay active and socially involved after retirement. By attending various activities held at senior centers, joining educational classes in language, sports and arts, the local seniors are able to stay emotionally and physically active and healthy.

## **CONCLUSION**

Based on all the maps I created to evaluate the availability of senior service in the City of Chicago, my conclusion here is that the City of Chicago needs to build more senior centers and health centers to address the needs of the poor. Senior centers and health centers at local communities are the most convenient places for the elder adults and their family members to seek help. Elder homeless could be prevented if the city government takes initiative to provide care and service at earlier stages. Poor areas with more elder people should be paid the most attention.

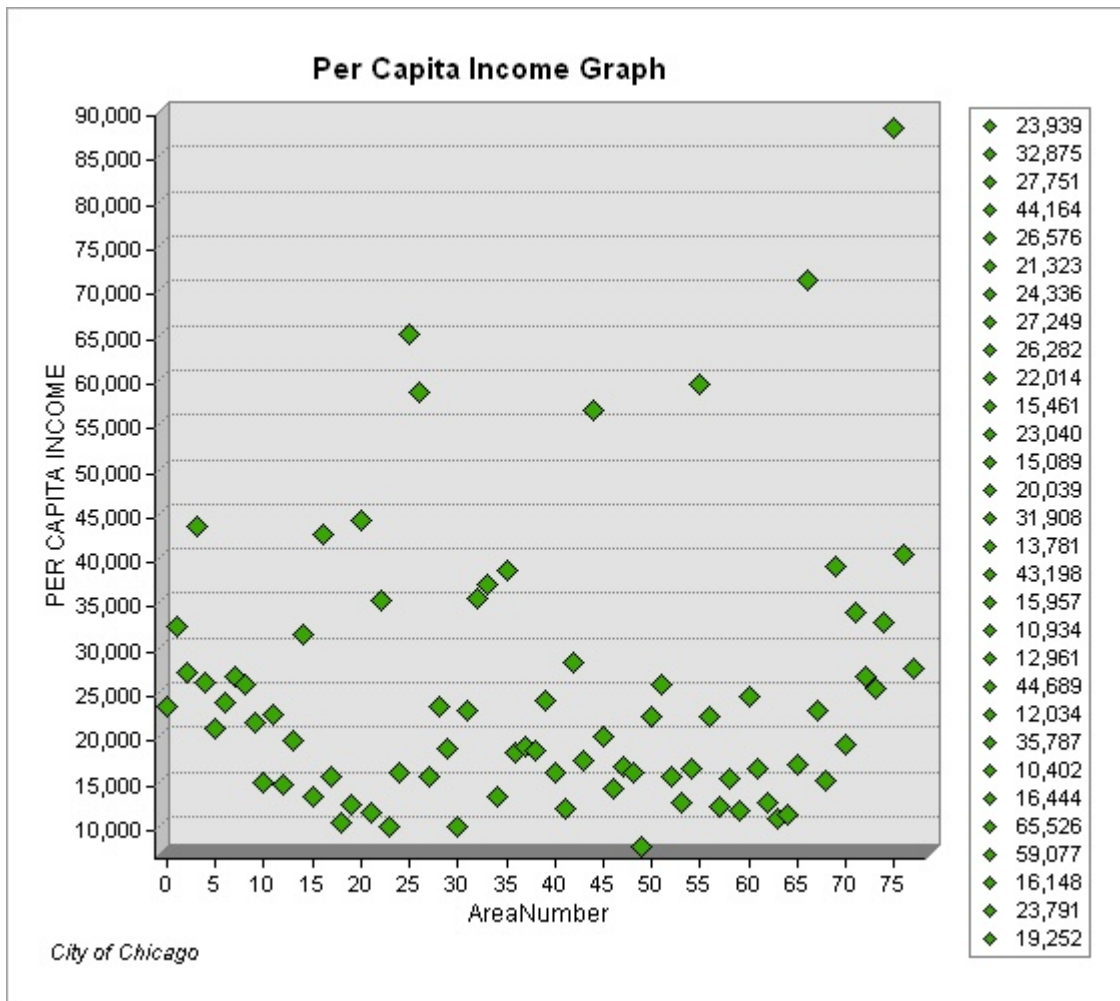
## **REFERENCE**

<http://www.cityofchicago.org/city/en/ofinterest/res/senior.html>

[http://www.cityofchicago.org/content/dam/city/depts/doi/general/GIS/GIS\\_Data/2000\\_Census\\_Data\\_Tables](http://www.cityofchicago.org/content/dam/city/depts/doi/general/GIS/GIS_Data/2000_Census_Data_Tables)

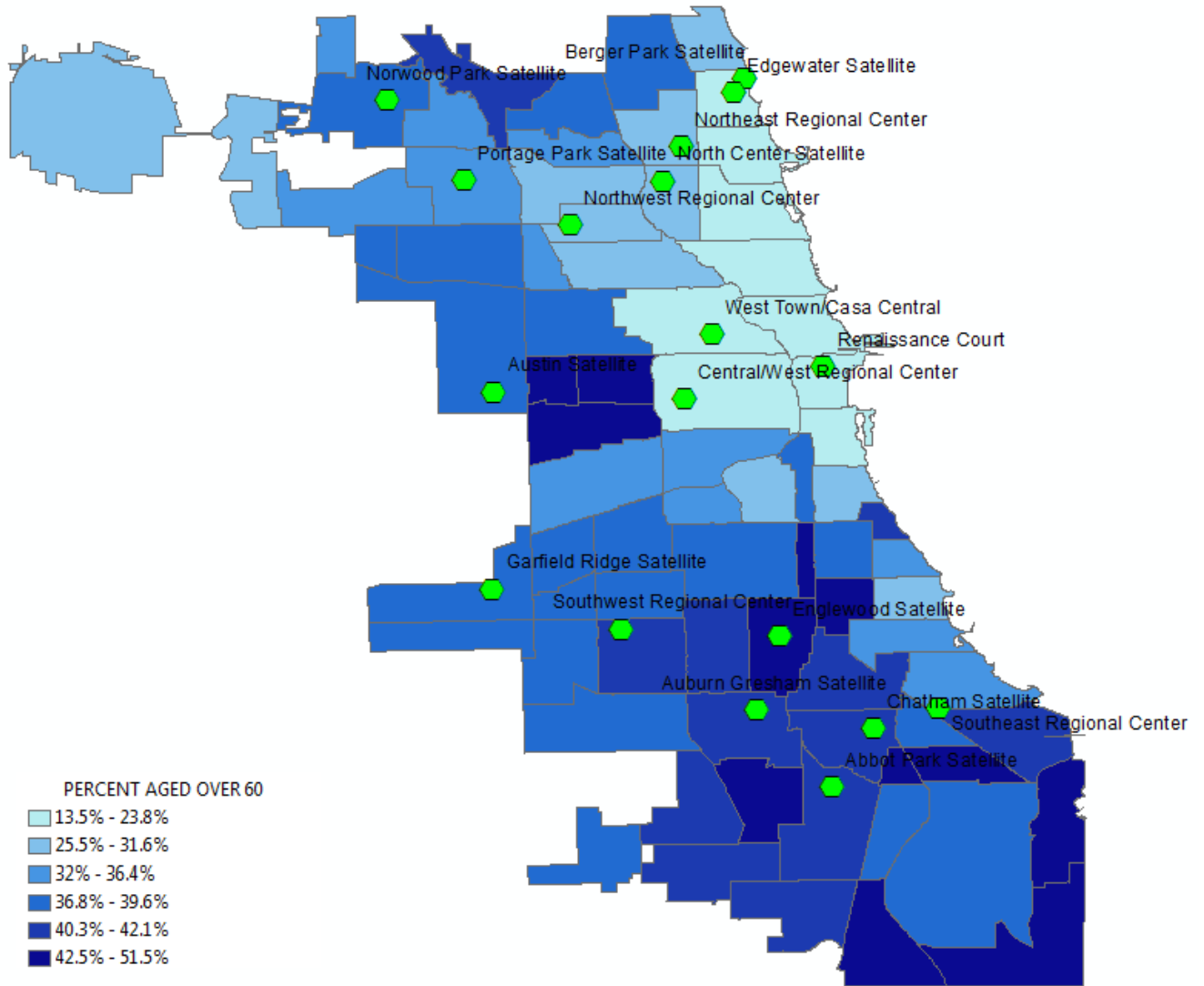
## Appendix

Graph 1



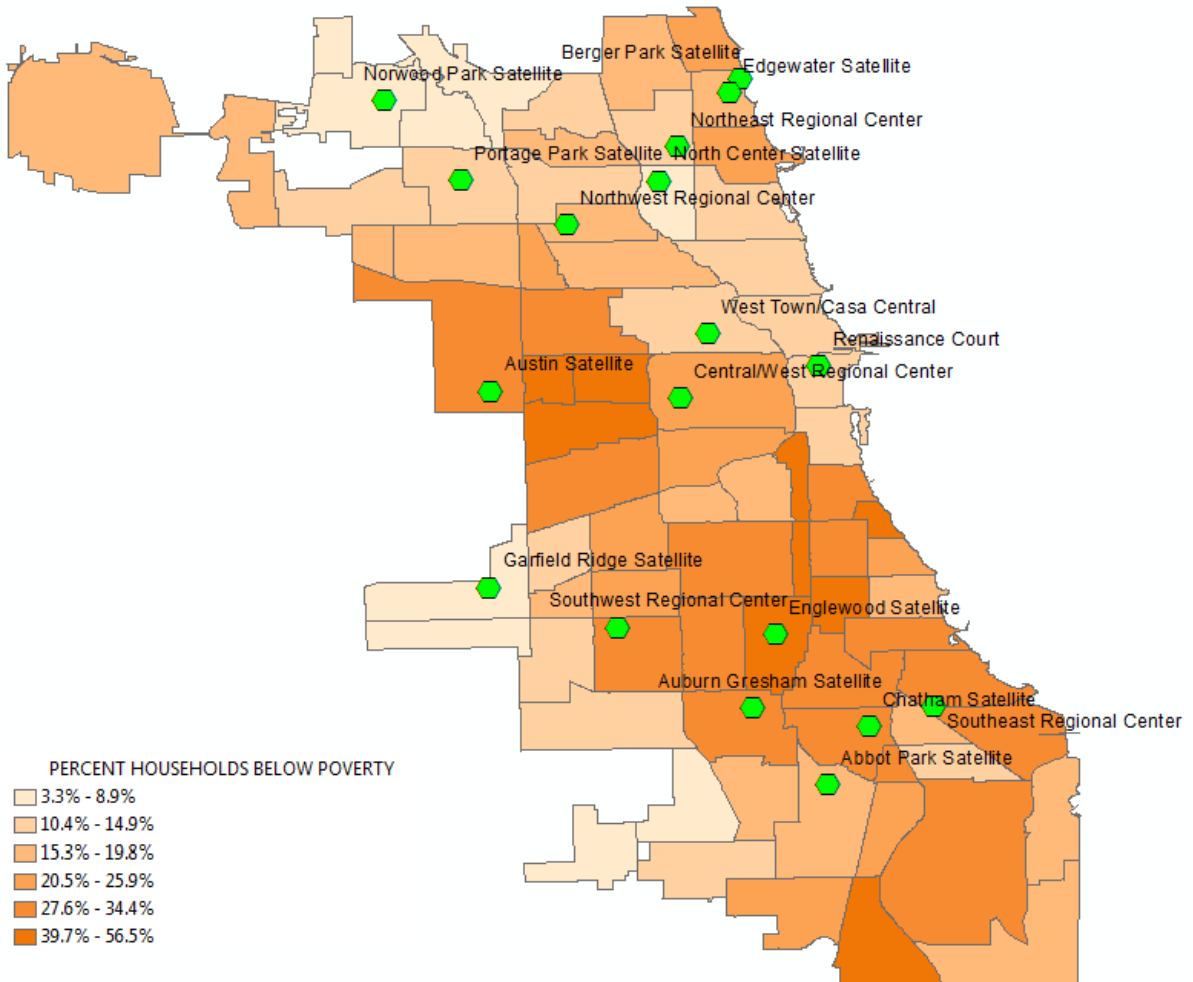
Map 1

Senior Centers and Senior Population Percentage



## Map 2

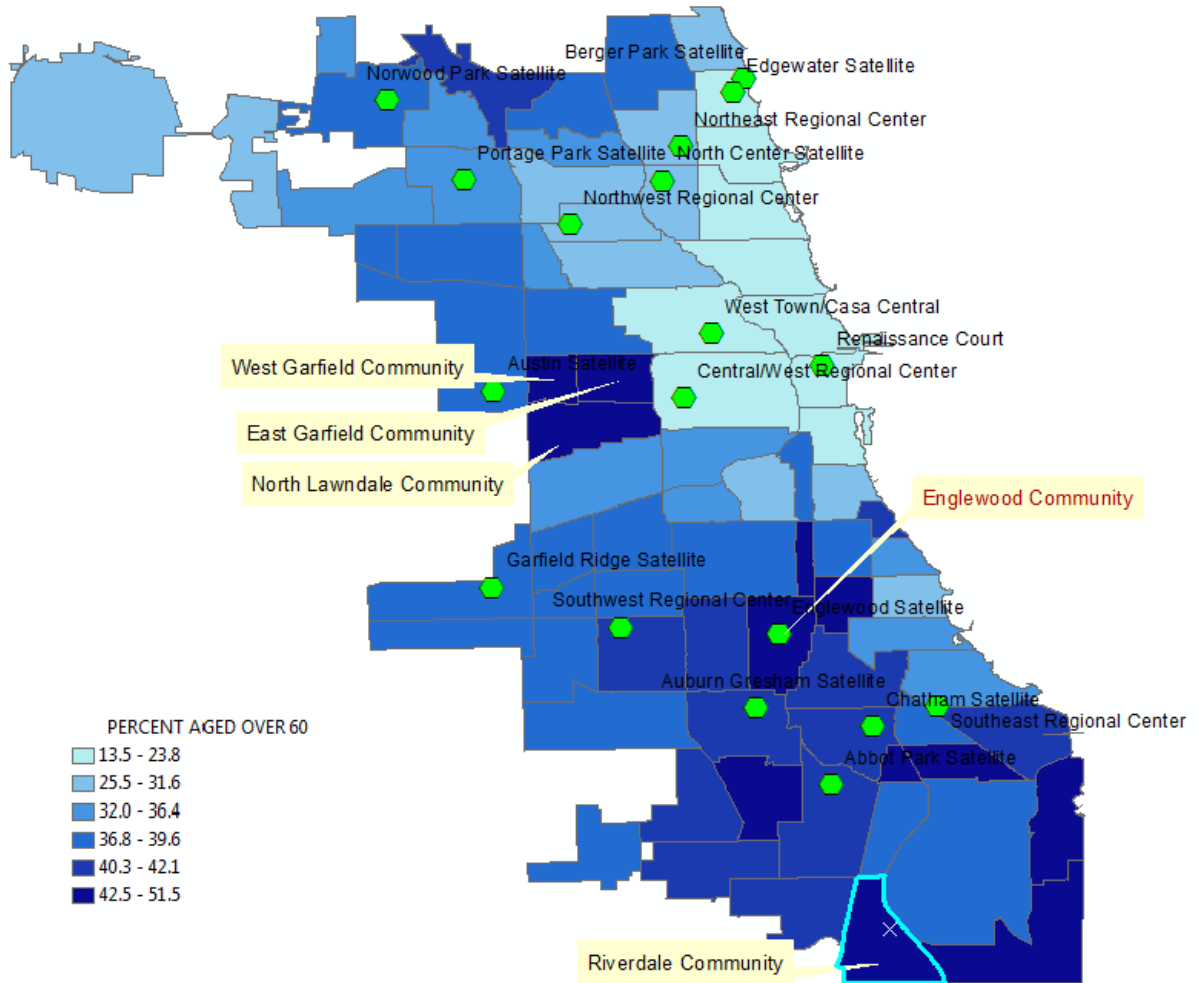
### Senior Centers and Households Below Poverty Line Percentage





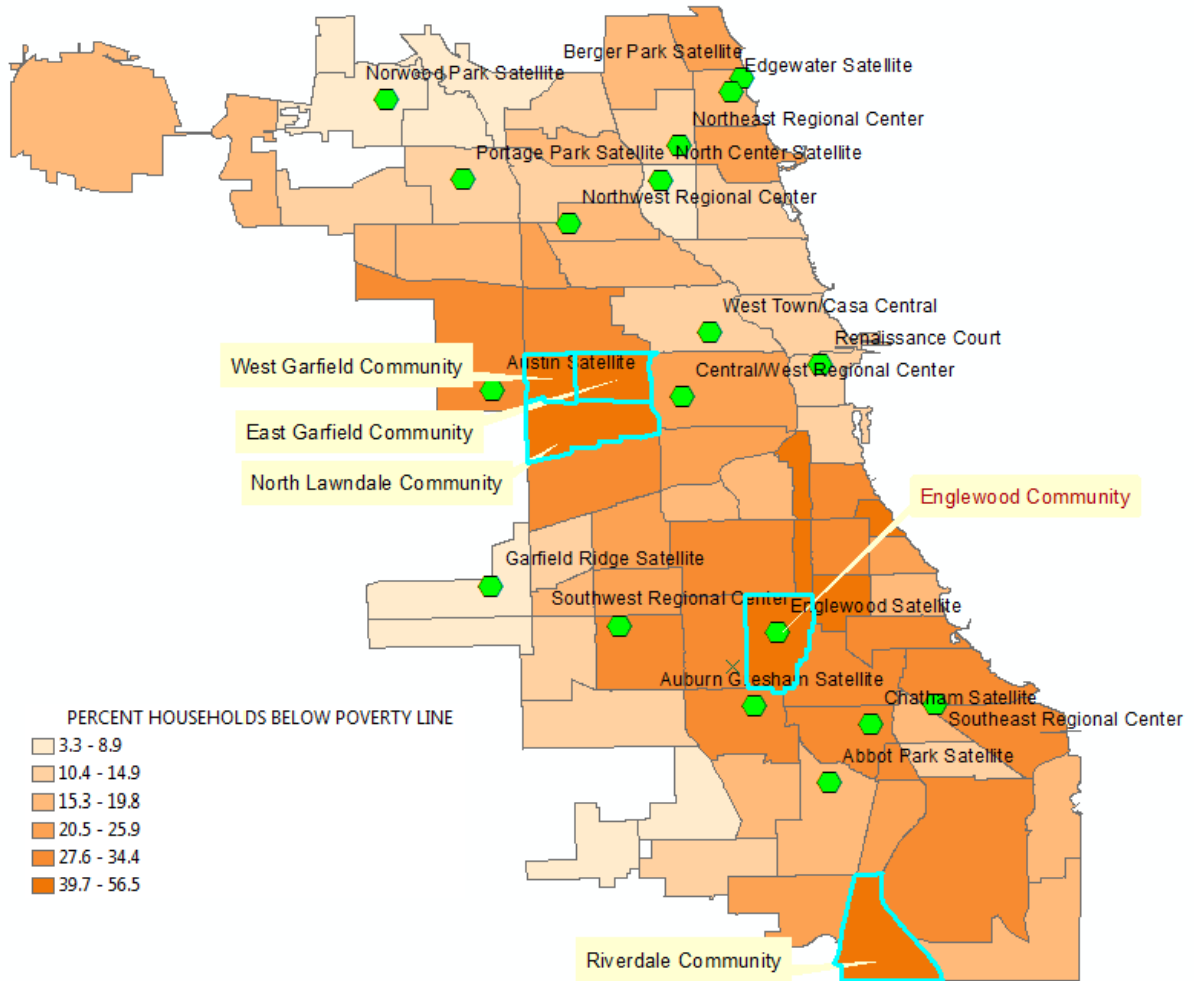
### Map 3

#### Senior Centers and Senior Population Percentage



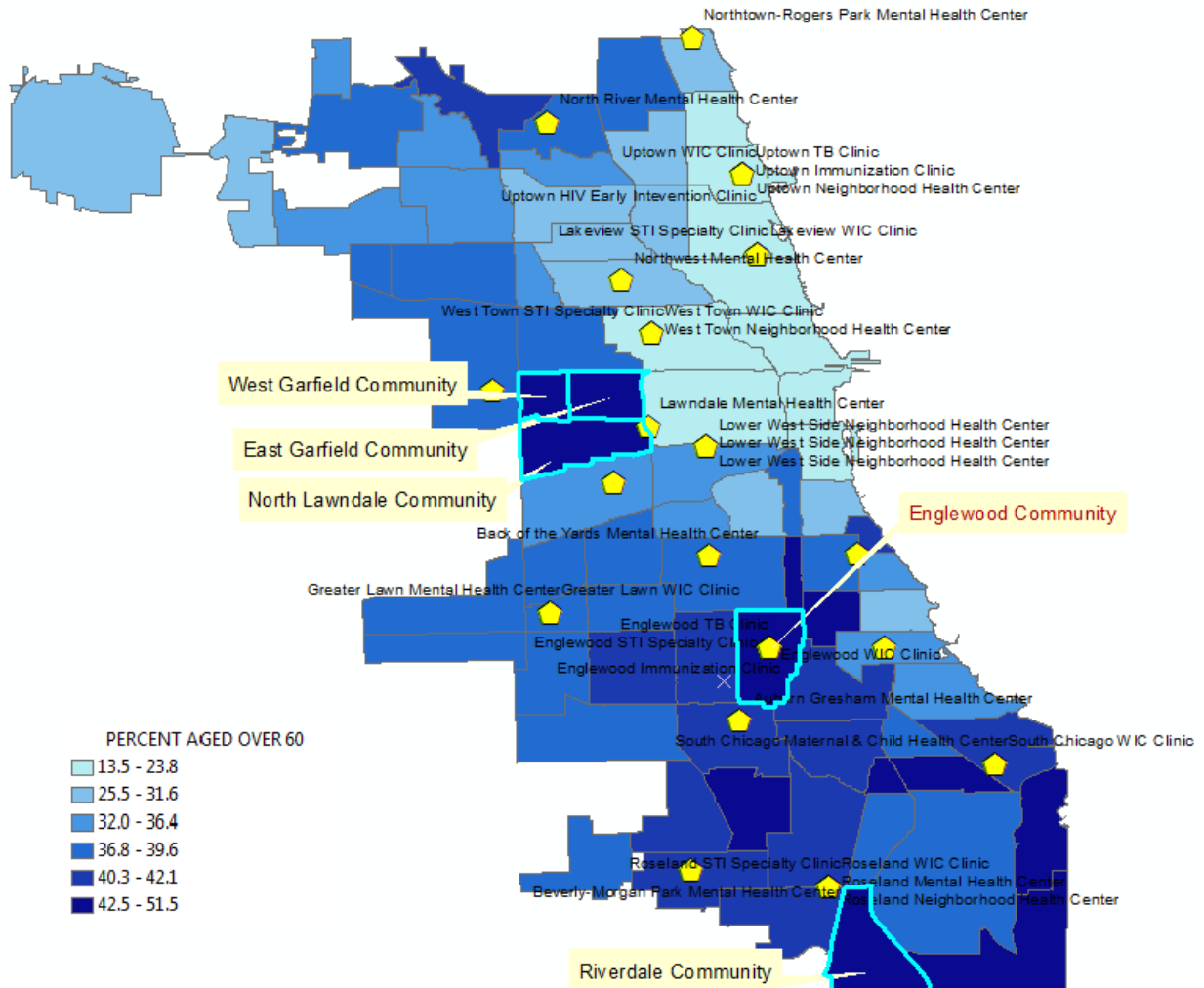
Map 4

Senior Centers and Households Below Poverty Line Percentage



### Map 5

## Health Centers and Senior Population Percentage



### Map 6

## Health Centers and Households Below Poverty Line Percentage

