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STATEMENT OF
MORTON E. HENIG
SENIOR ASSOCIATE DIRECTOR
HUMAN RESOURCES DIVISION
BEFORE THE
SELECT COMMITTEE ON AGING
UNITED STATES HOUSE OF REPRESENTATIVES
ON THE
[SCOPE, OBJECTIVES, AND METHODOLOGIES
By GAO
USED FOR ~~GAO'S~~ ONGOING
REVIEW OF AREA AGENCIES ON AGING]



Mr. Chairman and members of the Committee, we welcome the opportunity to discuss our ongoing review of area agencies on aging. My colleagues with me at the table are Mr. Rodney Espe, Team Leader, and Mr. Stephen Jue, Manager, Technical Assistance Group, Field Operations Division, Seattle Regional Office, Seattle, Washington.

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BACKGROUND

In the conference report on the 1978 amendments to the Comprehensive Older Americans Act, the conferees expressed interest in determining whether the many Federal programs providing assistance to older Americans are being effectively managed and coordinated. From this expressed interest, Senator Eagleton, as Chairman of the Senate Subcommittee on Aging, Committee on Human Resources, asked the GAO on March 7, 1979, to determine how well area agencies on aging have carried out their 1973 legislative mandate to develop a comprehensive coordinated system of services for the elderly. About a year later, on April 15, 1980, Senator Chiles, Chairman of the Senate Special Committee on Aging, requested that GAO assess the differing capacities of area agencies as an adjunct to the study underway in response to Senator Eagleton's request.

In 1965 the Congress enacted the Older Americans Act (Public Law 89-73) to support a State agency on aging in each State and to provide grants to these agencies to initiate community-based social service projects for older Americans. The act established the Administration on Aging within the Department of Health, Education, and Welfare to be the principal agency for carrying out the mandates of the act.

Recognizing the need for close coordination the Congress passed the 1973 amendments to the Older Americans Act establishing a nationwide network of agencies on aging. The amendments charged these agencies with planning, pooling resources, and coordinating programs in the most rational and effective manner. Each of the 50 States, the District of Columbia, and six

territories has a State unit on aging. Most of the States further divide themselves into planning and service areas and designate an area agency on aging to serve each area.

At the time we selected our area agency study sample, States had designated 577 area agencies on aging. Of these, 143 were counties, 179 were private, nonprofit organizations, 192 were councils of governments, 12 were cities, and 51 were a variety of other organizational types. Currently, the State units on aging have designated about 665 area agencies.

PURPOSE AND SCOPE

The purpose of this study was to determine the extent to which area agencies on aging have fulfilled their mandate to enter into new cooperative arrangements for

- establishing comprehensive, coordinated service delivery systems and

- initiating, expanding, or improving social services in the sub-State region under area agency jurisdiction.

GAO views the process by which each area agency intervenes on behalf of the elderly in its sub-State region, as a key factor in the development of a comprehensive, coordinated service delivery system. This intervention is designed to (1) initiate, expand, or improve service delivery by improving the way Federal, State, local and community funding sources interact with each other and with the elderly and (2) improve the way service organizations and other community associations, including the elderly and their families and friends, influence these funding sources for the benefit of the elderly.

We designed our study to see to what extent as of January 1, 1980, the area agencies have established arrangements with other organizations in the community to

- identify service gaps by assessing the elderly's needs for social services and evaluating whether service resources meet such needs;
- initiate, expand, or improve service delivery systems by integrating service organizations and resources; and
- initiate, expand, or improve service delivery systems by influencing others to increase resources allocated to services for the elderly.

STUDY APPROACH

Because a comprehensive, coordinated system of services to the elderly is not a concept with a generally recognized standard definition, we asked the National Association of State Units on Aging and the National Association of Area Agencies on Aging to establish an advisory committee to help us define the concept and develop ways to measure it and to work with us during our study.

The National Associations' executive directors responded by designating six members who could speak for their associations.

The membership comprises

National Association of
State Units on Aging

Charles Reed, Director
Bureau of Aging
Department of Social
and Health Services
Olympia, Washington

Douglas W. Nelson, Director
Bureau of Aging
Department of Health and
Social Services
Madison, Wisconsin

Patricia Riley, Director
Bureau of Maine's Elderly
Augusta, Maine

National Association of
Area Agencies on Aging

George Telisman
Southwest Washington AAA
Vancouver, Washington

Clifford Whitman
Erie County Department of
Senior Services
Buffalo, New York

Jean Bacon
Mid-America Regional
Council Aging Program
Kansas City, Missouri

With the committee's help, we have developed definitions and criteria to measure the extent of arrangements with other organizations. They helped us to develop a survey instrument-- a comprehensive questionnaire--which we used to obtain information from the area and State agencies. We will continue to work closely with them as we analyze the area agencies' and State units' responses to the survey instrument.

We also sought the advice of three consultants to help assure that the survey instrument was technically and conceptually complete. Our consultants were

Dr. Clara Pratt
Director, Program on Gerontology
Oregon State University
Corvallis, Oregon

Dr. Michael DeShane
Principal Investigator
Institute on Aging
Portland State University
Portland, Oregon

Dr. Raymond M. Steinberg
Project Director, Social Policy Laboratory
Ethel Percy Andrus Gerontology Center
Los Angeles, California

These consultants will continue to assist us in our analysis.

During key phases of the survey instrument's development, we kept AOA advised of our progress. Also, before administering the instrument to participating State and area agencies, we obtained comments on it from AOA Headquarters and Region X. Region X provided suggestions which were incorporated in the instrument. The Commissioner on Aging commented that the survey instrument was "quite comprehensive in scope and thorough in its coverage of selected service areas."

To develop the survey instrument, GAO analyzed the operation of two of the area agencies and one of the State units of our advisory committee. These analyses heavily influenced the survey design. With the data collected from each area agency and State unit and the discussions with advisory committee members and their staffs, we made the following major changes:

- We designed separate survey instruments for the State units and area agencies.
- We shifted the survey focus from all organizational arrangements to those for three specific services.
- We expanded the list of different types of arrangements in the survey instrument based upon those identified at the State and area agencies analyzed.

Although we recognized these changes would lengthen the survey instrument considerably, we agreed with our advisory committee's view that the changes would allow the participating agencies to more accurately portray their complete operations.

Because the survey instrument was lengthy and complex, our advisory committee and consultants told us that it would be best if we personally delivered it to the study participants, and at the same time be in a position to respond to any questions they might have. Thus, we established six regional meeting sites and sent requests to each participating area agency and State unit to attend one of the regional meetings. We called upon the National Associations, AOA, and the Senate Subcommittee on Aging for assistance in urging the study participants to attend the regional meetings. Both the National Association of State Units on Aging and the National Association of Area Agencies on Aging corresponded with their membership requesting that those selected participate. An AOA information memorandum urged selected State units and area agencies to participate in the study and advised that the cost of attending the regional meetings could be financed by either administrative or Title IV A training funds. Finally, Senator Eagleton sent a letter to selected study participants urging them to attend our regional meetings. He told them of the importance of completing the study for the Senate Subcommittee.

All selected State units and all area agencies, except two, sent representatives to the regional meetings. At five of the six meetings at least one advisory committee member was present to explain why they believed the study was necessary. We explained how to complete the survey instrument, why GAO needed to validate particular participant responses, and that we would hold all participant responses confidential. More than 96 percent of the

area agencies and 100 percent of the State units have returned their completed survey instruments.

METHODOLOGY AND DATA
BEING DEVELOPED

Although our findings will be based on a study of a simple random sample of 139 area agencies on aging, we believe the results can be projected to most of the population of the 577 agencies. These projections will show a national assessment of the status of most of the area agencies on aging. The exceptions refer to 63 area agencies (12 city governments, 12 single State area agencies, 10 educational institutions, 5 city/county agencies, and 24 miscellaneous type agencies) that we excluded from the sample because we judged them to be atypical. A complementary survey instrument was also completed by these area agencies' State units on aging. The findings for the State units on aging will be derived from the 35 parent States for the area agencies. Since we did not sample State units but selected them on the basis of being an area agency's parent State, we will not project any findings to the remaining States.

The study results will be based on our analysis of the survey instrument, completed by area agency directors and their staffs. In responding to our survey instrument, the area agency directors and their staffs described the complex factors that can impact on area agency effectiveness. We validated their statements by comparing them with specific documentation indicating the kinds of arrangements they have with service providers for initiating, expanding, and improving delivery systems in their planning and service areas.

While the study design permitted a quantitative assessment of the wide range of conditions in which the area agencies operate, the study emphasized the arrangements that the area agencies have established to initiate, expand or improve client services. We hope to identify those factors such as organizational stability and strength, local community context, and the degree of State level support which seem to be most important to an area agency's ability to make effective arrangements with organizations with whom it should be working. Such organizations are those that area agencies should work with in the community to intervene on behalf of the elderly to initiate, expand, or improve service delivery systems. The study will not assess the impact that established arrangements have had on provided services.

While the experimental design is a simple, one-point-in-time assessment, the measurements which must be made are complex. To assess the status of the agencies' operating conditions and at the same time determine the effects of operating conditions on the arrangements made by the agencies, we had to measure several hundred factors or variables. We are providing the attachment for the record because it is a more detailed description of these measures; however, I will briefly summarize them for you now.

Hypotheses and variables

While the range of variables under investigation is extensive, the reason they were selected is readily apparent when they are categorized and considered with respect to the study objectives. First, we will quantify the strategies that the area agencies adopted to initiate, expand, or improve services to their client

population. Second, we will determine the extent to which the area agencies have established arrangements with others to (1) integrate service organizations and resources, (2) increase resources allocated to services for the elderly, and (3) identify service gaps by assessing the elderly's needs and evaluating community resource use. Finally, we will determine the major operating factors associated with the presence or absence of these arrangements.

Area agency's strategy

A major hypothesis of this study is that the primary strategy adopted by an area agency to initiate, expand, or improve service delivery is a principal determinant of the extent to which it establishes arrangements with other organizations. These strategies include working through its own employees, working through grants and contracts, or influencing others--acting as a catalyst--to initiate, expand or improve services. An area agency's degree of emphasis on each of these strategies is determined by measuring the proportion of staff time spent in the following activities:

- Providing direct service.
- Managing direct service.
- Purchasing services.
- Monitoring grants and contracts.
- Integrating organizations/resources.
- Influencing others to increase resource allocations.
- Planning.

Extent of arrangements
with others

To determine the effectiveness--and this is assumed effectiveness--of the area agency's arrangements with others we will measure the arrangements in two ways. First, we measure the importance of funding sources for the community organizations with which an area agency has arrangements and, second, we measure the consequences of its involvement with these community organizations.

We will measure the extent of organizational arrangements involving funding sources in each of three major services--access, in-home, and transportation. Using the function of "integrating organizations and resources" as an example, we categorized funding sources, or organizations that have these funding sources, according to how important our advisors considered it to be for the area agency to be interrelated with the organization in order to "contribute to an integrated, non-duplicated service delivery system." The organization was rated "high" if our advisors judged it very important, "medium" if judged moderately important, and "low" if judged somewhat important.

Second, we measured the extent of involvements with these same organizations. Each integrating involvement that an area agency may enter into was categorized according to "the amount of impact it would allow an area agency to have on the design and operation of the parts of the service system that were not AOA funded." The

involvement was rated "high" when our advisors judged it to allow a high amount of impact, "medium" when it was judged to allow a moderate impact, and "low" when it was judged to allow a low impact by the area agency. A similar approach, described in detail in the attachment, was used for the other two area agency functions-- increasing resources others allocate to services for the elderly and assessing needs and resource use.

Conditions under which
an area agency operates

We will measure many factors relating to the area agencies' operations to determine the influence these factors have on both the presence or absence of the arrangements made with others and the strategy adopted by the agencies. For the sake of identification, we have placed these factors into four categories (1) area agencies' organizational stability and strength, (2) degree of State agency organizational support, (3) service or client emphasis, and (4) community context. We selected these factors because our advisors suggested that these factors would most likely affect the strategies adopted by the area agencies as well as the extent to which area agencies have established arrangements with others. Following are some examples of these four categories.

Area agency stability and strength--We grouped together several organizational characteristics of an area agency's internal stability and strength to test for possible effects on the area agencies. The organizational characteristics we selected are agency auspice and age, director turnover and qualifications, staff size, and budget diversity and size. Our advisors believe that an area agency's stability and strength, as measured by

these internal organizational characteristics, may affect not only the strategy adopted by the agency but also the extent to which it establishes the arrangements needed to initiate, expand, or improve service delivery.

Area agency State level support--The extent that State agencies have established arrangements to support an area agency's ability to initiate, expand, or improve of service delivery will be measured. The level of support an area agency receives from its State unit can significantly influence area agency effectiveness. For example, social services are funded under title XX of the Social Security Act. Our advisors agree that an area agency has less chance of integrating or increasing title XX social services for the elderly without substantial interaction and strong leadership at the State level from the State unit on aging.

Area agency service or client emphasis--An area agency may choose to emphasize one or more of four service and/or client groups. The service/client emphasis alternatives are access or entry services, chronic long-term care services, well-elderly clients, and poor-elderly clients. We will test to see whether an area agency that emphasizes a specific service or client group, or even a balanced mix of services and client groups, is influenced to adopt a strategy that inhibits or encourages establishing arrangements with others.

Area agency community context--We grouped together six characteristics of an area agency's community for testing. The community context characteristics we selected are: services in place when the area agency was designated, urban and rural demographics, number of elderly available to serve, income level,

effectiveness of aging organizations other than the area agency's advisory council, and total population. The area agency's community context, as measured by these community characteristics, may affect not only the strategy adopted by the area agency, but also the extent to which it establishes arrangements with others.

OTHER STUDY BENEFITS

Survey participants as well as other nonparticipating experts in the human services field have identified the survey instrument itself as a good self-evaluation and learning tool. One Government official and former educator, who recently authored an article on the integration of local human service delivery systems, stated that he could not imagine any agency completing the survey instrument without developing new ideas and approaches. Further, due to the instructive nature of the instrument, he expected service gains to be made even before we publish any findings.

A State unit director stated that many innovative and beneficial elements are in the design and content of the survey instrument. In addition, she said these elements will have immediate and long-range applicability for understanding and improving the functions of the aging services network. The director planned to share the contents of the instrument's appendices on Federal funding sources with others throughout the State's aging services network as a reference for interagency coordination.

One area agency director found the survey instrument to be a useful tool in summarizing his agency's activities; he felt the instrument would be very helpful in future planning efforts. Another area agency director said that the instrument made him aware of his responsibility to pursue and influence other sources

of funding for the elderly.

Due to responses such as these, we plan to send a copy of the survey instrument to all area agencies and State units on aging outside our study sample for their use as a self-evaluative and learning tool.

Another benefit from this study is the possible use of the data generated as a base from which future State unit and area agency performance can be measured. We have already assured AOA that when the study is complete, we will make the data and the results (without specific agency identifiers) available to the network and interested researchers. Assuming our hypotheses prove to be valid, this information could be a useful benchmark for measuring the future progress the network might make in carrying out its legislative mandate to enter into cooperative arrangements with other organizations within their planning and service areas.

U.S. GENERAL ACCOUNTING OFFICE
REVIEW OF AREA AGENCIES ON AGING

DETAILED DESCRIPTION
OF
STUDY DESIGN, HYPOTHESES, AND VARIABLES

STUDY DESIGN

Since the legislative mandate of 1973, numerous studies and assessments have been made of area agency activities. These studies have concentrated on either specific issues or on problems in a specific service. In response to the broad question raised by Senator Eagleton in his request for this study, GAO's study is a broad, overall assessment of how area agencies on aging (AAAs) have established themselves as organizations mandated to intervene in the community on behalf of the elderly, giving consideration to a variety of internal and external conditions that could affect their organizational establishment.

We designed the study to quantify many input and process variables (community context, agency size, principal modes of operation, etc.) thought to correspond to the major outcome measure--the extent to which generally expected institutional linkages have been established between the area agencies and appropriate State, local, and private organizations. In addition, this study directly relates State unit on aging (SUA) support to AAA performance; further, we designed the study to project its results to the area agencies outside of our study sample universe.

The study thus becomes the first national assessment of the status of area agencies on aging since the 1973 amendments to the Older Americans Act of 1965 authorized them.

The 1973 legislative mandate caused the area agencies to be put into place. Except for a few demonstration units, no pre-mandate group exists; thus, no control group is available for study. Consequently, our study design is a basic, one-shot, or one group, posttest only design. While this design has many limitations, it will describe area agency operating conditions and institutional linkages as of January 1, 1980, for AAAs with 2 or more years' operating experience. Although the design cannot prove causality, it can be used to verify the presence or absence of associations between operating conditions likely to be causal to agency system strategies and institutional linkages.

HYPOTHESES AND VARIABLES

While the range of variables being investigated is extensive, our rationale for selecting the variables is readily apparent when they are categorized and considered with respect to the study objectives. First, we will quantify the primary system strategies (process variables) the various area agencies adopted to initiate, expand, or improve services to their client population. Second, we will determine the extent to which the area agencies have established institutional linkages (output variables) to (1) integrate service organizations and resources, (2) influence others to increase resources allocated to services for the elderly, and

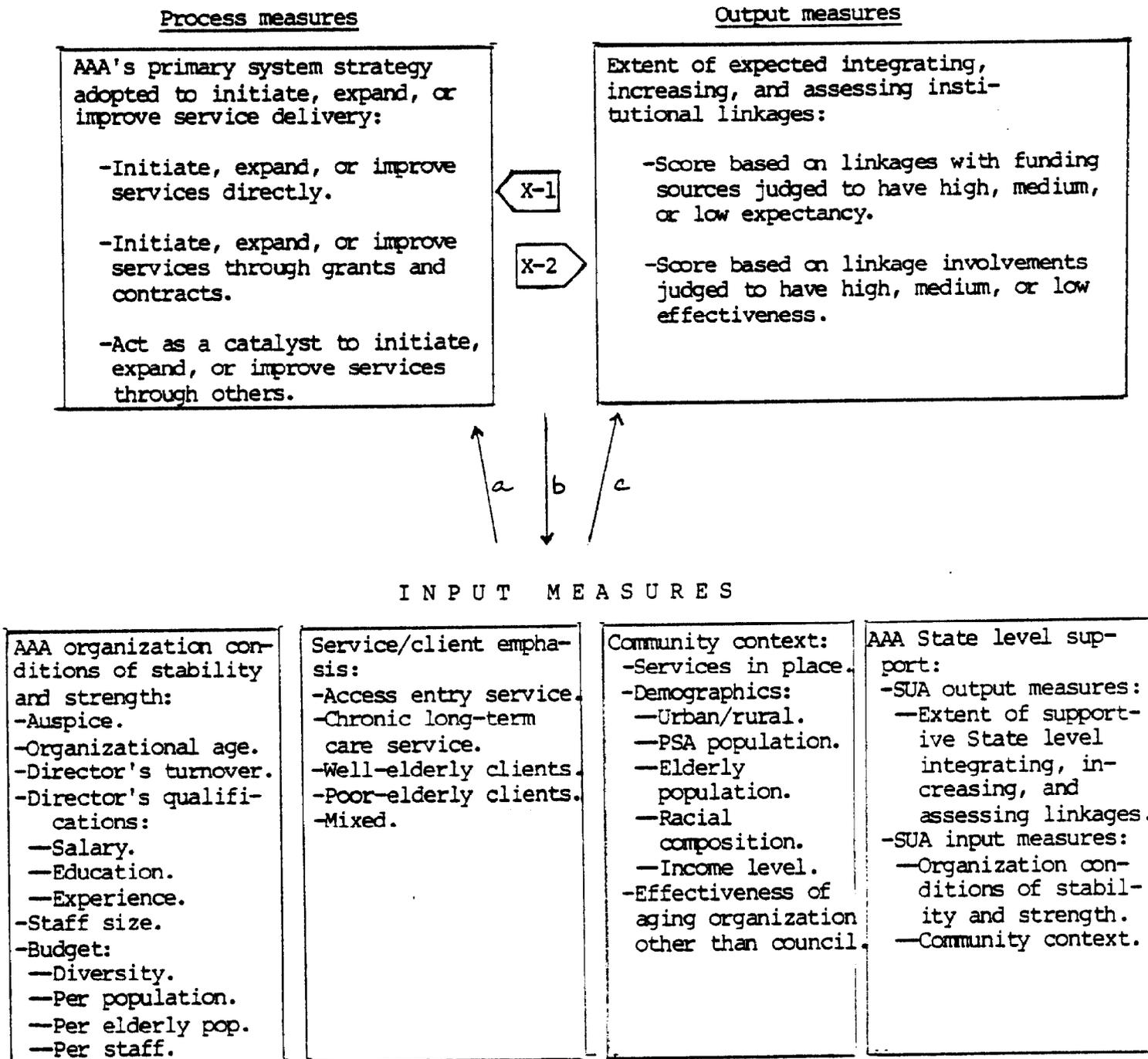
(3) identify service gaps by assessing the elderly's needs and evaluating community resource use. Finally, we will determine the major operating conditions (input variables) that are associated with the presence or absence of integrating, increasing, and assessing institutional linkages.

Figure 1 (see p. 4) is a way of diagramming the major variable relationships that are of interest. The "X-1/X-2" arrows denote the hypothesized relationship between the major process, or independent variables (primary system strategy adopted to initiate, expand, or improve service delivery) and the major output, or dependent variable (the extent to which integrating, increasing, or assessing institutional linkages have been established). Arrows "a," "b," and "c" show the relationship between the input measures and the process and output measures.

The logic of the hypothesized relationship as it is diagrammed in figure 1 indicates the need for four different tests.

Figure 1

Diagram of Principal Variable Relationships



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We must test to show that the primary system strategy adopted could affect the extent of established institutional linkages (as indicated by arrows "X-1/X-2" in figure 1). We must test to determine whether certain input conditions could influence the system strategy adopted by the area agencies (as denoted by the arrow "a" in figure 1) and thereby influence the extent of established institutional linkages. Then we must test to see if the reverse is true; that is, to see if it is the system strategy which influences the input variable to affect the institutional linkages (as denoted by arrow "b"). Finally, we should test to see if certain input conditions and not the system strategy could account for differences in the extent of established institutional linkages among the area agencies (as denoted by arrow "c" in figure 1). Most of these input conditions, which we must later rule out or account for, are modeled in figure 1 as four groups of input variables. Technically, we must test to determine whether each of these variables could be considered conjoint, intervening, antecedent, extraneous, suppressive, distorting, or otherwise affecting the outcome measure.

For example, the AAA's organizational condition, as determined by the variables in that grouping, could independently affect the outcome or extent of established institutional linkages, irrespective of whether the agency is catalytic. Such a variable would be considered conjoint. On the other hand, an area agency

with adequate budget and staff, low turnover, and a strong supportive sponsor could work in conjunction with the agency's primary system strategy to establish integrating, increasing, and assessing institutional linkages. Such a variable would be considered antecedent. Just to identify and account for the variables that have an effect is not enough. We must understand how that effect works, because these variables can work independently or they can interact in such a way as to suppress, hide, enhance, or distort the original relationship under study.

OUTCOME MEASURES: EXTENT OF
EXPECTED INSTITUTIONAL LINKAGES

This outcome measure, the study's major dependent variable, is hypothesized to be an additive index of other measures. First, the study independently measures the extent of institutional linkages with funding sources that experts consider necessary to carry out an area agency's mandate in each of three major services--access, in-home, transportation--and for two of the area agency's three primary functions. Second, the study independently measures the extent of better or more effective involvements in these same linkages.

Integrating institutional linkages

Expected funding sources

We categorized the funding sources, or organizations that have these funding sources, according to how important experts considered it to be for the area agency to interrelate

with in order to "contribute to an integrated, nonduplicated service delivery system." The organization linked to was rated "high" if experts judged it very important, "medium" if experts judged it moderately important, and "low" if experts judged it somewhat important.

Most effective involvement

We categorized the variety of integrating involvements that an area agency may enter into when it links itself to other organizations according to "the amount of impact it would allow an area agency to have on the design and operation of the parts of the service system that were not AOA funded." The involvement was rated "high" when it allowed a high amount of impact, "medium" when it was judged to allow a moderate impact and "low" when it was judged to allow a low impact by the area agency.

Increasing institutional linkages

Expected funding sources

We categorized funding sources that were unique to each major service area as high (those you would expect a good area agency to be linked to), medium (those an area agency would be expected to link to in certain circumstances), and low (those an area agency would be expected to link to only in unusual circumstances).

Most effective involvement

We categorized the variety of involvements that an area agency may enter into when it links itself to other organizations for

the purpose of increasing the resources those organizations allocate to the elderly according to the probability that the involvement would allow the area agency to affect the other organizations' decisions to increase substantially the resources available for the particular service area. The involvement was rated "high" when the probability was judged high "medium" when the probability was judged to be moderate and "low" when the probability was judged to be low.

Assessing institutional linkages

Expected funding sources

We collected no funding source data for this function.

Most effective involvements

We categorized the variety of involvements into which an area agency may enter to link itself to other organizations for the purpose of assessing needs and resource uses according to how much the involvement "contributes to efficiency, comprehensiveness and validity of the area agency's assessments of needs and resource use in each particular service area." The involvement was rated "high" when the contribution was judged to be great, "medium" when the contribution was judged to be moderate, and "low" when the contribution was judged minimal.

We counted each related funding source and involvement for each institution linkage. We gave high ratings a score of three, medium ratings two, and low ratings one. For each of the three

services we get a separate and combined score for integrating, increasing, and assessing linkages. The single score for the combined total for all three services represents the output measure, or major dependent variable. If the hypothesis is correct, the aggregate index should reflect the extent to which an area agency has effectively linked itself to those it is generally expected to be linked with in order to intervene in the community on behalf of the elderly to initiate, expand, or improve the service delivery system.

PROCESS MEASURES:

AAA'S PRIMARY SYSTEM STRATEGY

A major hypothesis of this study is that the primary system strategy adopted by an area agency is a principal determinant of the extent that it establishes institutional linkages. We plan to measure the extent that area agencies have adopted the following three system strategies to initiate, expand, or improve service delivery. Area agencies (1) provide services directly with their own employees, (2) issue purchase grants and contracts with others in the community, or (3) act as a catalyst to other agencies in the community. For the purpose of variable identification, we have classified our measures of these three system strategies as direct service, grants/contracts and catalytic, respectively. These process measures are the study's major independent variables. We determined an area agency's degree of

emphasis on each of these system strategies by measuring the proportion of staff time spent in related activities as follows:

<u>Categories in which agencies specified that their staff time was spent</u>	<u>Primary system strategy</u>
Providing direct service	Direct
Managing direct service	Direct
Purchasing services	Grants/contracts
Monitoring grants/contracts	Grants/contracts
Integrating organizations/resources	Catalytic
Increasing resource allocations	Catalytic
Planning	Prorated among the above six categories

INPUT MEASURES:
CONDITIONS UNDER WHICH
THE AAA OPERATES

Operating conditions (input variables) exist that may influence the process variables, the output variables, or both. For the sake of identification we have placed these input variables into four categories: (1) AAA's organizational stability and strength, (2) degree of SUA organizational support, (3) service/client emphasis, and (4) community context. We selected these input measures because experts believe that they would most likely affect the primary system strategy adopted by the area agencies as well as the extent to which area agencies have established institutional linkages. The following subsections further describe the four categories of input measures.

AAA stability and strength

We grouped together several organizational characteristics of an area agency's internal stability and strength to test for possible effects on the process and output measures (see p. 4). The selected organizational characteristics are agency auspice and age, director turnover and qualifications, staff size, and budget diversity and size. Experts believe that an area agency's stability and strength, as measured by these internal organizational characteristics, may affect not only the system strategy adopted by the agency, but also the extent to which it establishes institutional linkages needed to initiate, expand, or improve service delivery.

For example, our sample includes three area agency auspices-- Councils of Government (COG), counties, and private nonprofit organizations--each of which could impact on the stability and strength of the AAA and offer a unique advantage to achieving area agency institutional linkages. For instance, COGs may have several multijurisdictional linkages already established for the area agency to build upon. Counties may provide a long-established and accepted political base for the area agency to operate from. Private nonprofit organizations may provide the flexibility and political detachment needed to function more effectively as an area agency.

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The possible effect of an area agency's age is also a stability and strength consideration, because all organizations require a certain period to become established. Similarly, director turnover and qualifications are a stability and strength consideration, because effective leadership is a prerequisite to any organization's success. Finally, staff size and budget diversity and size are stability and strength characteristics, because all organizations require some minimum level of resources to be effective. While experts may agree that a minimum resource level is necessary, they do not agree on the minimum required. For example, some say an area agency with limited resources can effectively work "behind the scenes" to intervene on behalf of the elderly. Others believe that the most effective area agencies are those with enough funding to openly and aggressively become the "big boy on the block."

AAA State level support

To test for possible effects on the process and output measures, we will quantify the extent to which SUAs have established institutional linkages needed to support an area agency's initiation, expansion, or improvement of service delivery (see p. 4). Area agency effectiveness can be significantly influenced by the level of support an area agency receives from its State unit on aging. For example, social services are funded under title XX of the Social Security Act. Experts agree that an area agency has less chance of integrating or increasing title XX social

services for the elderly without substantial interaction and strong leadership at the State level from the State unit on aging.

AAA service/client emphasis

Four service and/or client groups may receive area agency emphasis and must be tested for possible effects on the process and output measures (see p. 4). The service/client emphasis alternatives are access or entry services, chronic long-term care services, well-elderly clients, and poor-elderly clients. An area agency that emphasizes a specific service or client group--or even a balanced mix of services and client groups--may be influenced to adopt a primary system strategy that either inhibits or encourages establishing institutional linkages.

AAA's community context

To test for possible effects on the process and output measures, we grouped together several characteristics of an area agency's community (see p. 4). The community context characteristics selected are: services in place when the area agency was designated, urban/rural demographics, number of elderly available to serve, income level, effectiveness of aging organizations other than the area agency's advisory council, and total population. The area agency's community context, as measured by these community characteristics, may affect not only the system strategy adopted by the agency, but also the extent to which it establishes integrating, increasing, and assessing institutional linkages to initiate, expand, or improve service delivery.

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For example, largely rural areas tend to have transportation problems due to isolation not found in urban areas. These problems may influence AAA system strategy as well as the extent of expected linkages the AAA will establish. As a result, urban/rural demographics are a logical community context consideration. The general size of the population is also an appropriate community context consideration, because it may influence the community resources available to the area agency. Also, the size and economic health of the elderly population have an obvious influence on the total demand for area agency activities. This may influence the strategy an area agency adopts and the linkages it decides are appropriate. Finally, the possible effect of the services in place when an area agency was designated is a community context consideration, because the primary thrust of area agency activity will be directed to those service areas for which high demand but low supply exist.

ADDITIONAL CONSTRUCTS AND VALIDATION

Certain measures were taken because they provided another indication of the dependent variable or they were correlated with the major dependent variable. A covariance between these measures and the hypothesized independent/dependent variables relationship would add further support to the test. We would expect those who have adopted a grant/contract strategy to have a high budget/staff ratio and a relatively small number of staff, while the reverse would be true for area agencies who have adopted

a direct provider strategy. Catalytic types would have a low budget/staff ratio and a small staff. Both grant/contract and direct provider strategies would use more volunteers than those who adopt the catalytic strategy. Catalytic performers would also have higher involvement in planning the allocation of funds for more programs than the other strategies. Furthermore, we would expect them to provide more advocacy training and technical assistance and have more effective advisory councils.

We have also used a number of attitude and opinion questions as to the extent the area agency has developed a particular service or level of involvement. While we expect the actual values of the estimates to be biased, perhaps within each case these estimates could yield information of the relative emphasis placed on types of services and programs. This will help authenticate the three services we selected for the study.

We have asked for specific examples of major achievements and major problems, barriers, and obstacles as well as the significance of the hindrances. Patterns developed from these examples may be used to explain unforeseen input or process conditions that have unexpected distorting or suppressive effects.