Comprehensive Aging Survey Executive Summary

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Introduction

The Minnesota Department of Human Services Aging and Adult Services Division (DHS AASD), and the Minnesota Board on Aging (MBA) contracted with Vital Research, LLC (Vital) to develop and conduct a statewide survey of Minnesotans age 60 and older — the Comprehensive Aging Survey (CAS) — and review data from other sources to help inform Minnesota's next State Plan on Aging, Area Agencies on Aging (AAA) regional plans, and the ongoing work of Age-Friendly Minnesota (AFMN) and Minnesota Long-Range Planning–Healthy Aging (Healthy Aging).

This executive summary provides a brief project overview and then presents the four key takeaways. Please refer to the full report for comprehensive findings from the CAS and other project activities and detailed information about how Vital conducted the CAS.

Project overview

Vital developed a statewide survey based on recent reports, assessments, and surveys related to older Minnesotans and feedback from the project steering committee. The final version of the survey covered older adults' health and health care access, daily needs, caregiving, social connection, housing, transportation, services, technology, financial security, retirement and long-term care planning, safety, emergency preparedness, and everyday experiences.

Vital conducted the survey between May and July 2026 and met all statewide and regional survey completion targets. Respondents' age, and race and ethnicity, closely mirrored the state's population for people 60 years or older. Vital included 5,921 survey responses in the final survey analysis.

In addition to CAS results, Vital analyzed recent data from vulnerable adult maltreatment reports and the National Core Indicators – Aging and Disabilities (NCI-AD™) survey.[1]

The findings in this executive summary are all descriptive. This means they simply summarize how people answered the surveys and the vulnerable adult maltreatment reports that people made. When looking at descriptive findings, some differences may be due to chance. Readers should also consider information from other sources to inform any policies or actions related to older Minnesotans.

[1] National Core Indicators – Aging and Disabilities (NCI-AD™), ADvancing States and Human Services Research Institute. https://nci-ad.org/

Key takeaways

Four takeaways emerged through Vital's analysis of the CAS, vulnerable adult maltreatment reports, and NCI-AD™ data. This section presents each major theme, followed by statewide CAS findings. It then highlights notable differences by region, age group, and race and ethnicity to show how some older Minnesotans' perspectives and experiences vary on each major theme. For CAS findings, parentheses indicate the total number of respondents (or n) for individual survey questions. Finally, this section shares findings from vulnerable adult maltreatment reports and NCI-AD™.

1. Many older Minnesotans are having a healthy, positive experience of aging.

Statewide Comprehensive Aging Survey results

85% of older Minnesotans shared that they are in "Good," "Very good," or "Excellent" health

- 85% shared that they are in "Good," "Very good," or "Excellent" health (*n*=5,897).
- 96% can access primary care (*n*=5,846), and 93% can access specialty care when needed (*n*=5,379).
- 93% of respondents who receive a service or support said they are helping them meet some or all their needs and goals (*n*=2,431).
- 87% shared that they are "Satisfied" or "Very satisfied" with the amount of contact they have with family, friends, and neighbors (*n*=5,670).
- 96% said they feel "Safe" or "Very safe" in their home (*n*=5,646), and 92% feel "Safe" or "Very safe" in their community (*n*=5,618).
- 97% have internet access in their home (*n*=5,528), and 92% said they feel "Comfortable or "Very comfortable" using the internet (*n*=5,403).

Notable differences by race and ethnicity

- 76% of Black respondents (*n*=157) and 69% of Native American respondents (*n*=92) reported "Good," "Very good," or "Excellent" health, compared to 85% for the state overall.
- 95% of Black respondents (*n*=146) and 82% of Latino and Native American respondents (*n*=87 and 89) reported satisfaction with the amount of contact they have with family, friends, and neighbors, compared to 87% for the state overall.
- 79% of Asian respondents (*n*=105) and 81% of Black respondents (*n*=146) reported feeling "Safe" or "Very safe" in their community, compared to 92% for the state overall.
- 89% of Native American respondents reported having internet at home (*n*=87), compared to 97% for the state overall.

NCI-AD™ survey results

- In both 2023-24 and 2025-26, more than 90% of respondents said their paid caregivers treated them with respect, and nearly all felt safe around the people paid to help them.
- Again in both time periods, about 80% said paid caregivers provided help in the way they wanted, while more than 90% said their services and supports respected their culture.
- In both years, 91% could get transportation to medical appointments when needed. Most respondents also reported consistent access to meals and healthy food.

Vulnerable adult maltreatment data

- Although most Comprehensive Aging Survey respondents reported feeling safe, between May 2025 and April 2026, Minnesota received 56,554 reports of suspected abuse, neglect, self-neglect, or financial exploitation of vulnerable adults age 60 or older, a 4% increase compared to the previous 12 months.

2. Some older Minnesotans are not sure where to turn or what to do if they have needs, concerns, or emergencies.

Statewide Comprehensive Aging Survey results

- 40% of survey respondents said they were unsure or did not know where to call to connect with services and supports (*n*=5,552).
- 45% shared they were unsure or did not know who to talk to if they were mistreated, hurt, disrespected, or neglected by others (*n*=5,276).
- 52% reported that they do not have an emergency plan to respond to a natural disaster, disease outbreak, or another wide-scale emergency (*n*=5,350).
- 34% said they were unsure or did not have someone who is willing and able to take care of them if they are sick or disabled (*n*=5,071).

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Notable differences by region, age, and race and ethnicity

- 29% of people age 85 and older were unsure or did not know where to call to connect with services and supports (*n*=271), compared to 40% statewide. 33% of Native American respondents (*n*=88) and 57% of Asian respondents (*n*=100) were unsure or did not know where to call.
- 80% of Native American respondents (*n*=81) and 61% of Black respondents (*n*=134) knew who to talk to if they or someone they knew was mistreated, hurt, disrespected, or neglected by

others, compared to 55% statewide. 59% of Asian respondents (*n*=96) were unsure or did not know who to call.

- Respondents in central (26%, *n*=746), northwest (29%, *n*=1,020), and southwest Minnesota (30%, *n*=714) were unsure or did not know if they have someone who is willing and able to take care of them if they are sick or disabled, as compared to 34% statewide.

NCI-AD™ survey results

- The percentage of respondents receiving service information in their preferred language fell from 81% in 2024 to 65% in 2026.
- Respondents were less likely to learn about service options from a case manager or service coordinator in 2026 than in 2024, declining from 37% to 22%.
- Although the percentage with an emergency plan increased from 73% to 76%, the percentage who believed they could quickly get to safety during an emergency declined from 87% to 83%.

Vulnerable adult maltreatment data

- Self-neglect and caregiver neglect were the two largest allegation categories, making up 56% of all maltreatment reports across the two-year period.
- Reports of suspected self-neglect increased by 9% between May 2024 and April 2026.

3. Connections with family, friends, and neighbors are an important part of a positive aging experience, but some older Minnesotans have too few of these important connections.

Statewide Comprehensive Aging Survey results

- 32% shared that their basic need for social connection, like seeing friends and neighbors, went unmet at least "Sometimes" (*n*=4,093).
- 40% said they feel lonely at least "Sometimes," with 7% saying they are lonely "Usually" or "Almost always" (*n*=5,682).
- 44% of those who feel lonely said too few connections with family, friends, and neighbors was the main reason (*n*=2,557).

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Connections with family, friends, or neighbors become even more important as people need information and support.

- 70% shared that they would reach out to family, friends, or neighbors if they needed information about services – more than any other source (*n*=5,480).

- 52% of people who receive help with activities of daily living receive help from a spouse or partner; 35% receive support from a child or child-in-law; and 13% from a friend or neighbor (*n*=588).

Notable differences by region, and race and ethnicity

- About one-third (35%) of Twin Cities metro area respondents (*n*=1,012) reported “Sometimes” lacking basic need of social connection, which was slightly above the statewide average (32%) and highest among all other regions: 30% in the northeast region (*n*=341), 28% in the southwest and central regions (*n*=582 and 583), and 26% in the northwest and southeast regions (*n*=828 and 696).
- Reported unmet social connection needs, at least “Sometimes," varied across racial and ethnic groups, including 58% of respondents who identified as Native American (*n*=50), 51% as Asian (*n*=65), 49% as Latino (*n*=62), and 41% as Black (*n*=100), compared with 29% of respondents who identified as White (*n*=3,754), the largest group represented in the survey.

NCI-AD™ survey results

- Feelings of loneliness improved somewhat between 2024 and 2026. The percentage who were “Never” or “Almost never” lonely increased from 43% to 49%, while the percentage who were “Often” lonely declined from 23% to 20%.
- Transportation to social activities, errands, and other non-medical activities became less reliable. The percentage who could always get transportation fell from 73% to 63%.

4. Older Minnesotans named access to affordable, accessible housing and access to health care and mental health services as their top two priorities for aging.

Statewide Comprehensive Aging Survey results

While older Minnesotans have mixed perspectives on what they would do if they could no longer live independently in their current home, they agreed that the most significant barrier to a possible move is cost.

- 65% said other housing options cost too much, and 33% said moving expenses cost too much (*n*=2,393).

Older Minnesotans generally reported good access to primary care and specialty care. However, they expressed concerns about accessing affordable dental care and their ability to access and pay for health care in the future.

20% of older Minnesotans said they "Disagree" or "Strongly disagree" that they can access affordable dental health care

- 20% said they "Disagree" or "Strongly disagree" that they can access affordable dental health care when they need to (*n*=5,767).
- 55% reported worries about cuts to what their health care plan might cover in the future; and 46% said they were worried about paying for future care they may need (*n*=4,778).

Notable differences by race and ethnicity

- About one-third of respondents who identified as Native American (37%, *n*=87), Black (30%, *n*=148), and Latino (29%, *n*=87) "Disagreed" that they can access affordable dental health care.
- 59% of Black respondents (*n*=70) reported concerns about the cost of moving expenses compared to the state overall (33%).

Conclusion

The CAS results and additional data analyses completed by Vital surfaced a wide array of findings about older Minnesotans' experiences of aging across the state, highlighting both the strengths that support a healthy, positive experience of aging and the needs that require continued attention.

Notable differences by region, age group, and race and ethnicity, along with additional context from vulnerable adult maltreatment data and National Core Indicators–Aging and Disabilities survey results, show that older adults' experiences vary across communities and that some needs are more pronounced for specific groups.

Considered together with other information and data, these findings can help inform Minnesota's next State Plan on Aging, Area Agencies on Aging regional plans, and the ongoing work of Age-Friendly Minnesota and Minnesota Long-Range Planning–Healthy Aging, supporting policies and actions to help older Minnesotans age well now and in the future.