

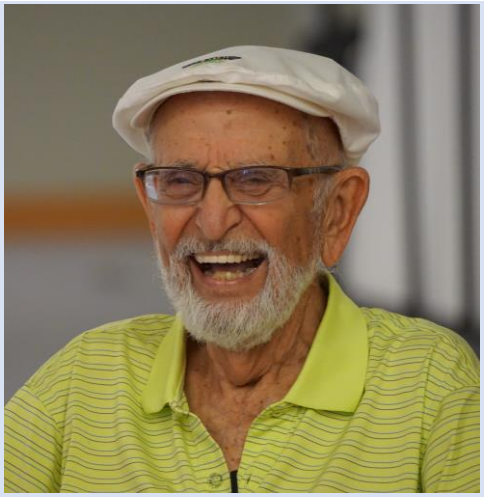

NEEDHAM HEALTHY AGING ASSESSMENT

May 2023




Town of Needham Incorporated 1711

Needham Public Health
Prevent. Promote. Protect.

COUNCIL ON AGING
Needham

NEEDHAM COMMUNITY COUNCIL

Acknowledgements

The Needham Public Health Division would like to acknowledge organizations and individuals who supported this effort and provided guidance and insights on all aspects of this assessment, including survey and focus group participants along with key informants who shared their perspectives about aging in Needham.

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<tr><td colspan="2">Focus group participants (Needham residents and staff)
Key informants (Town officials, organizational leaders, residents; see Appendix D)
Survey respondents (residents)</td></tr>
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Executive Summary

During summer 2022, the Needham Public Health Division, in collaboration with the Needham Aging Services Division, conducted a Healthy Aging in Needham Assessment focused on residents ages 60 and older. The purpose of this assessment was to gather information on factors supporting and impacting seniors living in Needham. Focus groups and key informant interviews with residents, and town and organizational leaders supplemented anonymous survey data to provide insights into challenges faced by seniors as they age in the community. The data also highlight community assets that make Needham a desirable place to live.

The average age of the 738 survey respondents was 73 years (range: 60 years to 99 years). Most respondents (92%) felt that their health was good, very good, or excellent in comparison to their peers. Many enjoy programs available to them through the Aging Services Division and the Needham Community Council and have long-term connections in the community. In general, respondents were laudatory of existing community services for seniors, provided recommendations for community services they would like to see added, expressed desire for more transportation options for seniors (including free or reduced cost options), are concerned about housing availability and affordability (particularly for those wishing to downsize or stay in place as they age), advocated for tax exemptions for seniors (including property taxes), and made recommendations for senior-friendly community infrastructure modifications.

Most of the dominant worries and recommendations were also present in a similar assessment in 2016. This most recent assessment also highlights additional challenges faced by seniors including some degree of difficulty with different aspects of food security; decreased access to health care due to the COVID-19 pandemic; provider availability and long wait times for appointments. Use of technology was high among survey respondents; however, it is important to note that 24% of those who completed the survey on paper, rather than online, reported that they never go online, suggesting that the survey may over-estimate internet use among residents 60 years and older in Needham.

Although social connections generally are strong, the pandemic has had an impact. Over a quarter of survey respondents reported feeling less connected to the community, since the outset of the COVID-19 pandemic, and over a third (37%) reported feeling more isolated or lonely since the outset of the pandemic. A smaller group of respondents reported feeling isolated or lonely often. Although participation in in-person or online social activities was high among respondents, a subset of respondents (10%) indicated feeling unable to participate in certain activities because they are only offered online. Not knowing how to use the technology was the most common reason.

The most seemingly intractable challenge faced by older residents is how to continue living in Needham with housing as limited and expensive as it is. While other bodies have been wrestling with this complex dilemma as it affects all Needham residents and prospective buyers, the responses gathered through this assessment should be considered going forward. At the same time, policy and program developers can review this assessment and find ways to address other concerns raised by older adults.

Background

In August 2016, the Needham Public Health Department and the Aging Services Division published the *Assessment of Housing and Transit Options for Needham Seniors*, which was based on information collected with a survey, focus groups, and interviews. The focus of the 2016 project was selected after staff members had heard many older adults express concerns about the lack of options for housing and transportation.

Survey and focus group participants in 2016 were consistent in their eagerness to continue living in Needham, and they identified many community elements that make Needham desirable, including the commuter rail and the MBTA bus as assets allowing connections to Boston. Participants in 2016 also described a range of senior living communities and condominiums that allow older adults to live in Needham.

On the other hand, the dominant worries expressed during the 2016 assessment were about not being able to stay in Needham as they age due to unaffordable and limited small housing stock; difficulty making their homes "age-friendly"; lack of local transportation options for those without cars or who no longer drive; and pedestrian safety.

Some of the concerns have been partially addressed since 2016 through policy and program changes.

- Accessory dwelling units (ADUs) were permitted by Town Meeting through passage of a by-law on October 28, 2019. The conditions under which the by-law allows ADUs are: one unit must be owner occupied (either the main dwelling or the ADU); the second unit must be occupied by family of the owner or by a caregiver of owner; the ADU must be attached to, or part of, the primary dwelling; it must be subordinate in size to the main dwelling, and no more than 850 square feet. In 2021, a group of Needham residents submitted a proposal to loosen some of those restrictions. And most recently, on May 3, 2023, Town Meeting members approved a new Planning Board proposal to expand the size to 900 square feet, allow ADUs to be rented, expand the allowable occupants, and allow rentals as short as 6 months.

- The Aging Services Division expanded its transportation service with the addition of a new vehicle and a grant-funded, time-limited partnership with JFK Taxi to provide meal delivery and rides to medical appointments (December 2020 through March 2021).

Because it had been six years since the *Assessment of Housing and Transit Options for Needham Seniors*, the Needham Public Health Division, in collaboration with the Needham Aging Services Division, implemented a new assessment to examine current issues faced by older adults in Needham.

Anecdotal evidence has continued to indicate that housing and transportation remain as barriers to older residents aging in place. Beyond those issues, staff who work with older adults have been concerned about elders' well-being. While isolation and depression have always affected older adults, staff have been more concerned that social, emotional, and mental health issues may have intensified during the COVID-19 pandemic. Thus, the 2022 assessment included those issues along with use of technology, food security, cost of living, access to health care, as well as transportation and housing.

Methods

An advisory committee oversaw the Senior Assessment and included leaders from the Aging Services Division (Director LaTanya Steele and Assistant Directors Aicha Kelley and Jessica Moss), the Needham Community Council (Sandra Robinson, Director), Beth Israel Lahey Hospital (Alyssa Kence, Director of Community and Strategic Initiatives), and staff from the Public Health Division (Julie McCarthy, Epidemiologist; Cindi Melanson and Lynn Schoeff, Senior Public Health Associates). The advisory committee had been concerned that residents, perhaps feeling survey fatigue due to numerous surveys in recent years, would not engage in the assessment. To ensure adequate participation in the survey, organizers conducted extensive outreach.

Survey

The Survey on Healthy Aging in Needham consisted of 69 questions in nine broad domains: demographics; living situation; food and cost of living; health care access; use of technology; social connections; errands and social activities in the community; home modifications to facilitate healthy aging; and transportation methods (see Appendix B). The survey data were collected and analyzed by Scott Formica, PhD, a highly experienced research scientist with a long history in public health, who also wrote the technical report (see Appendix A).

The survey was available in paper and electronic formats.

- There were nine collection points for paper surveys, each with surveys and a collection box: Needham Community Council, Center at the Heights, Needham Free Public Library, the Treasurer and Town Clerk offices at Town Hall, Linden-Chambers housing development, the YMCA, Rosemary Recreation Center, and the Public Services Administration Building.
- The survey was translated into Mandarin and Russian, and copies were provided to the Needham Housing Authority (three surveys in each language were completed).
- Paper surveys were distributed with meal deliveries to home-bound elders by the Public Health Division and Aging Services Division.
- The Needham Community Council gave paper copies to food pantry participants.
- Notices were posted on four Facebook pages and three webpages and in several newsletters.
- Postcards were mailed to every resident aged 60 and older.
- The survey was also a hands-on activity at the Needham Community Council's Tech and Tutors program.

Survey participation was considerably higher in 2022 (738) than in 2016 (650). The participation rate among residents 60 and older is estimated at 9.4% (see Appendix A, Table 1). More people completed the 2022 survey online as compared with the earlier assessment. In 2016, 30% filled out paper surveys while fewer (16%) used the paper option in 2022. The earlier survey had a wider age range and included people who were 55 years and older, while the 2022 age range began at 60. (Note: during the pandemic, electronic notebooks and technical support were provided to many older adults. This may partially account for the increase in online participation in the subsequent survey.)

Focus Groups

Members of the advisory committee facilitated four focus groups with a total of 32 participants. The groups included members of the Needham Commission on Disabilities, residents in Needham Housing Authority developments, and participants in morning activities at the Center at the Heights. Discussions focused on what makes Needham a good place in which to live and age, and the challenges one encounters as an older person; age-friendly housing; social connections; technology; and access to healthy meals (see Appendix C, Focus Group Guide).

Key Informant Interviews

Twenty-three people were interviewed for the assessment. Those interviewed included Town employees and residents; local and state political representatives; and clergy and community-based service providers (see Appendix D, Interview List and Appendix E, Interview Guide).

Findings

The overarching sentiments of this assessment are that Needham is a desirable place to live as one ages, while many senior residents face barriers as they strive to continue living in the Town. The section below describes notable strengths of the Town and its services, as well as current challenges senior residents face in their daily lives.

Strengths of aging in Needham

Participants in focus groups, surveys, and interviews shared positive feedback about many aspects of Needham that make it a desirable town in which to age.

Services

Focus group participants praised several municipal departments for providing very good services and opportunities for socializing. The Library and the Center at the Heights were identified as such in all the focus groups. A few residents who also participate in senior centers in neighboring communities said that Needham's is the best senior center in the area. The Community Council was lauded for its medical equipment loan program and for its volunteer opportunities. The Public Health Division was praised for its vaccination program. Participants also reported favorably about transportation services provided by Aging Services and the Community Council, including their Lyft program. Focus groups highlighted meal delivery by Aging Services and Traveling Meals (a program of the Public Health Division). Consistent with the focus groups, transportation services provided by Aging Services and Needham Community Council were commended in nearly all the interviews.

Focus group participants also identified some positive surprises from the pandemic. Many folks developed new technology skills and found *increased*, rather than decreased, accessibility to community programs and church services due to the use of Zoom.

> *Learning to zoom has opened up so many possibilities!!*

The Aging Services Division was consistently named for providing high quality programing. Several interviewees praised the addition of virtual programing for reaching more people.

- *Virtual programming is reaching well beyond Needham to other parts of Massachusetts, even other states.*

- *I loved that my church had online and then hybrid services in the beginning. The hybrid services have really expanded access to the church. Old ladies are now connected to church, and people are attending from all over.*

Similarly, survey respondents provided additional comments and praised existing community services for older adults.

- *I am extremely impressed with the services and support that the senior center and the Community Council offer. They ... offer a wealth of support and information… I also commend the senior center for their extraordinary support and services during the pandemic… We are lucky seniors to live in such a supportive and helpful community! A huge thanks to all who help to make this town a wonderful place to live!*

- *I am grateful for the services being offered by the Center at the Heights as well as the Needham Community Council. All sorts of folks work hard to serve the older population … and they do an excellent job.*

- *The programming offered by the Needham COA Center has been outstanding. Without the Zoom classes I would have been very isolated. I know from numerous friends that the Needham COA programming is the local Gold Standard for Senior programming.*

Collaboration and commitment

Key informants also recognized dedicated and committed Town staff, as well as the collaborations among departments and community organizations that serve elders, as assets in all the interviews. There was a great deal of praise for volunteers, who were described as passionate in their commitment to serve Needham residents.

Challenges to aging in Needham

As in 2016, concerns related to housing were paramount for participants in all data gathering modes. Housing was followed closely by the cost of living in Needham and the lack of transportation options.

Housing

Until recently, Needham's housing stock has consisted largely of modest single-family homes built in the early and mid-twentieth century to accommodate middle-class migration to the suburbs. In recent years, the median price and the nature of housing has changed as described by the Planning and Community Development Department.

> The Town of Needham has approximately 11,800 total housing units with a median single-family house price of $1.29 million in September 2021 ($885,500 for condominium units), up from $1,065,000 (+22.1%) and $805,000 (+10%), respectively, as of the end of 2019. Housing prices are high and rising, up to $1.45 million and $850,000 for single-family homes and condos, respectively, as of September 2022. Further evidence of tight market conditions includes vacancy rates for rental and homeownership units of only 2.6% and 1.0% respectively. Few homes in the private housing stock are affordable to low- and moderate-income residents. These conditions are exacerbated by substantial teardown activity where contractors replace modest older homes with larger very expensive ones, further driving up housing prices and eroding housing options.[1]

Participants in focus groups, surveys, and interviews cited the soaring cost of housing, along with limited supply of homes suitable for an aging population, as the greatest challenge older adults face in Needham. They reported that the few senior communities in and around Needham have long wait lists; condominiums are very costly; and modest ranch and cape-style homes are being torn down and replaced by houses that are too big and expensive.

Many people who have lived in Needham for decades feel compelled to stay in homes that are too large and may be unsafe for those with disabilities or who anticipate mobility problems.

- *Many older adults are over-housed, living in larger homes they can't afford to leave*. Interview

- *My husband and I are in a house that is too big for us, but we can't afford to downsize*. Focus group

- *My house is completely inaccessible*. Focus group

- *Needham is unaffordable to those who wish to age in place. Small homes are becoming scarcer. Seniors don't need or want huge, expensive homes.* Survey

Most survey respondents (79%) reported that they currently live in single-family homes, with three-quarters (74%) unable to make home modifications due to cost, the architecture of the home, or other barriers (see Appendix A, Table 22). Half (49%) have modified their homes with safety features such as bathroom changes, better lighting, or improved accessibility into and through their homes.

Only six survey respondents said they had added an accessory dwelling unit to their home. There were several comments citing the bylaw's lack of flexibility as an impediment to doing so.

- *The revised building code for building an in-law suite on to the home was a great step. How about that add on being available to another who is looking for a living situation to rent and possibly find the human contact needed that one might feel and that has no local family.* Survey

Cost of living

[1] Housing and Zoning Analysis, Town of Needham Planning and Community Development Department, February 2021; Revised January 2022

In addition to the cost of housing, participants reported financial difficulty due to the high cost of living in Needham, with real estate taxes and food most often identified.

Half of survey respondents reported that they were worried about the cost of living (35% were *somewhat* worried and 14% were *very or extremely* worried). Concern about cost of living is inversely correlated with household income. Twenty-three percent of those with annual income under $100,000 reported being very or extremely worried about cost of living, and that increases to 39% of respondents with household income under $50,000 (see Appendix A, Figure 1).

Many comments in focus groups and on the survey were about property taxes rising beyond affordability for seniors.

- *Taxes and cost of living in Needham will make it difficult to retire and stay in town.* Survey

- *Affordability – the property taxes are so high. High cost of transportation is another problem.* Focus group

- *The continued increase of local taxes and living expenses (heating, food, medical, services, etc.) make it very difficult for seniors (and those on fixed incomes) to live in Needham.* Survey

- *The cost of living in Needham has risen substantially. I cannot afford to make repairs to my home. I wish Needham would re-evaluate and find a way to help seniors be able to live out their lives in the town they grew up in and have fond memories of. It seems we are priced out of town which is sad.* Survey

Survey responses also mentioned the cost of trash collection as a challenge.

- *Provide free services for trash pick-up and disposal (hardship for elderly to take trash to the dump who can't afford to pay someone!). If nothing else, the town should give us free trash bags please!* Survey

- *Other towns have trash collection service. Needham residents are expected to do all their own trash and garbage services…A large number of folks end up paying for private trash pickup services weekly on top of ever increasing property taxes.* Survey

Food security

The high cost of food in Needham was another common theme.

- *I think that the price of groceries in Needham for people living on a fixed income is ridiculous. Need more options.* Survey

Participants spoke of very limited transportation options to get to lower-priced grocery stores outside Needham such as Market Basket in Waltham and Stop and Shop in Newton.
Among survey respondents, 16% reported some degree of difficulty with access to food, including difficulty finding the kind of food they wanted, getting transportation to grocery stores, or getting groceries delivered (see Appendix 1, Table 11). Six percent reported that they couldn't afford to eat

balanced meals or that they were worried about food running out. A focus group member reported that they "*rely on meals from the senior center for better balanced meals*."

Feeling devalued

Focus group and survey participants reported feeling that Needham has become unwelcoming of older adults. They said that policies, both explicit and by default, are forcing seniors out of the town. Increasing property taxes and lack of affordable homes were most identified.

- *Needham lacks affordable housing options for those who would like to downsize. Anxious to promote two-million-dollar McMansions and desirous of only a very high-income population with deep pockets to pay town taxes. It creates a rich monoculture, lacking the richness of diversity and humanity. Needham ends up with very unfriendly policies for seniors and gives a sense that seniors are not valued, should just move out, not wanted.* Survey

- *We, older people, have been a big part of this town and now we are being phased out. Start taking care of the older people on fixed incomes.* Survey

- *Elderly people move out of town against their wills* [sic] *because they can't get their needs answered here. But their lives and friends are here.* Survey (excerpt from comment about need for more retail shops).

- One survey respondent expressed the feeling that Needham has *"very unfriendly policies re Seniors and gives a sense that Seniors are not valued, should just move out of Needham, not wanted."*

Transportation and driving

Lack of local transportation continues to be a problem for older adults in Needham. While this was frequently mentioned by many respondents, it had greater implications for people who live in remote areas within Needham, such as Seabeds Way and Charles River Street. The Seabeds Needham Housing Authority development is in the northeast corner of town, where access to services is impeded by geography (nearly two miles from Needham Center) as well as by a long hill the residents must climb to get to the only public bus. As in the 2016 assessment, several participants spoke of the need for a local bus (a circulator) or a shuttle from Needham Heights to Needham Junction.

Since 2016, ride-sharing services (Lyft and Uber) have become better used by the older population and were cited as a transportation option. However, some focus group and survey participants said that the cost of these services is a barrier.

- *I am disabled. Often I don't go anywhere because all I can afford is a $2 fee for the van provided by the Senior Center.* Survey

Insufficient transportation to supermarkets within and outside Needham was a common problem identified in focus groups and in the survey, with 5.4% of respondents (37 individuals) reporting difficulty getting transportation to grocery stores.

Another theme was difficulty getting to medical appointments outside of Needham, with concerns about driving to Boston or about lack of transportation services.

- *I must take my husband to Boston for his medical appointments. Driving into the city and parking is extremely difficult and stressful for me and taxis or Uber is so expensive and technologically challenging. A town sponsored taxi like we had a few years ago would be so appreciated.* Survey

- *Wish I had transportation to doctor appointments outside Needham into Boston.* Survey

In focus groups and surveys, participants expressed concerns about driving in Needham. Some identified aggressive drivers. Others expressed concerns in anticipation of the time when they can no longer drive.

In the survey and in focus groups, residents identified parking in Needham as a challenge. One survey respondent noted the number and location of parking spots as a barrier. A focus group participant zeroed in on accessible parking spots – both their lack and the abuse of them – as a problem.

There appeared to be some confusion about what transportation programs are available.

Connections and isolation

Isolation and depression have always been concerns in the older adult population, however the losses and limitations associated with the pandemic have exacerbated these issues. Staff have been worried that social, emotional, and mental health issues may have intensified during the COVID-19 pandemic. For this reason, questions about isolation and personal connections were included in the survey.

While three-quarters of survey respondents reported feeling connected or very connected to the community, almost a quarter (24%) said they were *not very* or *not at all* connected (see Appendix A, Figure 2). Over a quarter (29%) reported feeling *less connected* to the community, than before the pandemic.

Most respondents (71%) reported *never* or *rarely* feeling isolated or lonely, 24% felt isolated or lonely *sometimes*, and 5% felt isolated or lonely *often*. It should be noted that this means that 167 people felt isolated or lonely *sometimes*, and 34 individuals reported feeling isolated or lonely *often*. People living alone were more likely than those who lived with others to report feeling isolated or lonely. Over a third (37%) reported feeling *more isolated or lonely* since the outset of the pandemic.

- *Fear of infection kept us very isolated. Even within the household once the children went back to school.* Focus group

- *My husband is immunosuppressed, so we had to isolate completely.* Focus group

- *There was judgement and stigma for people who chose to be very cautious.* Focus group

- *In the early days, people made an effort to stay in touch. But that changed after a while and now they are not making the extra effort.* Focus group

- During COVID, "*Connections disappeared. Unable to access community rooms. Senior center closed."* Focus group

- Social connections changed, "*drastically because I am hearing impaired. Masks impaired lip reading.*" Focus group

- *The lonely elderly need help when they live along* (sic)*, can't get out, can't get to the Senior Center. Some are very lonely, lacking human interaction, medical attention, not eating (or shopping) adequately and are depressed.* Survey

Almost all respondents reported at least weekly contact with other individuals in person (94%) or by phone (93%), however, about one quarter (23%) reported speaking with people less frequently than before the pandemic.

Communication technology

Although communication technology use was more prevalent among older adults in 2022 than it was in 2016, and although some focus group participants said that they had developed new technology skills during the pandemic, other people still have trouble using technology or do not find it useful. The following comments were written on the survey.

- *Difficulty logging on* (three people wrote this)
- *Difficult to participate for long periods*
- *I miss seeing the people who are participating. I cannot make new friends/ acquaintances during such a structured interaction.*
- *Often these webinars are not communicative. More of a one way.*
- *Too much screen and sitting time – on Zoom for work all day.*
-

Programs geared toward the "older" seniors

Remarks on the survey and in interviews suggest that some people think programing at the Center at the Heights is geared toward the "elderly" and may not meet the needs of people in their 60s. One key informant said that service providers "need to look at the continuum of aging; there are distinct groups with distinct needs, and we miss opportunities to know and serve all the needs."

- *I wish your services were not directed toward the older who are elderly, nothing seems to be directed at the young old.* Survey

- *I was hoping this survey addressed if our local senior center is meeting the needs of the seniors in their 60's. Most of us feel it is not.* Survey

Accommodating pedestrians

Although pedestrian safety was not identified as a concern in the 2022 Healthy Aging Assessment, the need for more benches around town came up in the survey and in some focus groups. Most notably, in the focus group at the Seabeds Needham Housing Authority property, several people identified the

long hill leading from the development as an impediment to getting to other parts of the town. Comments on the survey also suggested that more benches would be helpful for walkers.

- *More benches to sit on in town.* Survey

- *I walk from home for exercise. My back sometimes acts up, but benches seem rare.* Survey

Limitations of this assessment

Diversity and representation

In recent years, many organizations in Needham, including Town administration and departments, have examined, or have committed to addressing the lack of diversity in town and the experiences of those who are not in the majority. Unfortunately, the Survey on Healthy Aging in Needham did not include questions directly related to diversity, equity, and inclusion, even though the Department of Health and Human Services understands racism as a public health issue. Given that racism and discrimination have profound implications for isolation, loneliness, and mental health, any future assessments must include this perspective.

The survey was translated into Mandarin and Russian (the predominant languages among Needham residents who do not speak English), and three surveys were completed in each of those languages. However, there were no focus groups for other language speakers. In an interview with Needham Housing Authority staff members, one person remarked, "Language barriers lead to isolation".

Black, Hispanic, and Asian people were largely under-represented among survey respondents, while White residents were over-represented. Needham's racial makeup in 2021[2] was 86.1% White, 2.8% Black, .1% Native, 8.7% Asian, 2.6% Hispanic. However, less than 1% of respondents were Black, 2.8% were Asian, and less than 1% were Hispanic, while 91.9% were White. Five percent of survey respondents identified some other way or preferred not to answer. Racial identities of focus group participants and key informants are unavailable.

In addition to the possible limitations noted above, it is important to point out that due to time constraints of the data collection period, there were some community groups or possible key informants who may not be included. Individual and group scheduling challenges, as well as a finite amount of staff time, prohibited data collection from being truly exhaustive.

Summary

As in 2016, Needham remains a place where older people want to live. Many enjoy programs available to them through the Aging Services Division and the Community Council and have long-term connections in the community.

[2] U.S. Census

However, most of the dominant worries in 2016 (being able to stay in Needham despite unaffordability, limited small housing stock, difficulty making homes age-friendly, lack of transportation, and pedestrian safety) were identified as concerns in 2022 as well.

There is also a worrisome subset of older residents who report not being connected, feeling isolated or lonely, or having infrequent or rare interaction with others. Some older adults indicate that their social world has not rebounded to pre-pandemic connections.

As described in the survey data report in Appendix A (Findings – Additional Comments, and Table 25), comments could be grouped into several categories. These groupings – community services and programs; transportation; housing; taxes; and community infrastructure and retail – were also found in focus groups and interviews, along with cost of living.

The most consistent themes among all three data gathering modes were:

- Housing (limited options for downsizing, lack of affordable housing, limited availability, desired changes to accessory dwelling unit bylaw)
- Transportation (need for more options, free or reduced cost ridesharing, rides to medical appointments, general lack of transportation options)
- Cost of living (housing, food, real estate taxes)
- Community services & programs (positive reports about existing services, desire for other programing, need for better communication regarding existing services; need help finding and contracting with private services)

Next steps

Many of these issues can only be adequately addressed with system-wide strategies. The most seemingly intractable challenge faced by older residents is how to continue living in Needham with housing as limited and expensive as it is. While other bodies have been wrestling with this complex dilemma as it affects all Needham residents and prospective buyers, the responses gathered through this assessment should be considered going forward.

At the same time, policy and program developers can review this assessment and find ways to address other concerns raised by older adults. Some approaches might include:

- Publicize the tax abatement program to address rising real estate taxes.
- Publicize existing transportation programs available to older adults in Needham.
- Encourage older adults to conduct or request safety audits of their homes to identify possible improvements for accessibility and safe aging at home.
- Change the accessory dwelling unit by-law to allow more flexibility in residency requirements.
- Review existing bench locations throughout Needham and identify sites where additional benches would benefit residents.
- Seek input from adults at the lower end of the senior age spectrum (adults in their 60s and 70s) to learn what additional programing would meet their needs.
- Employ creative outreach to identify and reach out to isolated seniors.

Issues to pursue in the future

1. Any future discussions about isolation or loneliness among older adults in Needham must include identity issues that may contribute to those feelings. In this predominantly White and affluent community, experiences of racial identity, sexual orientation, gender identity, socioeconomic status, and religion must be considered.

2. Approximately one-third of respondents reported that they have provided care for another adult living in their household – 29% did so in the past and 6% were currently providing care. The impact of such responsibility on the health and well-being of the caregiver can be extraordinary. The Needham Aging Services Division offers a monthly support group for such caregivers. Whether that service is reaching all who would benefit, or if there are or could be other programs to serve the needs of caregivers, should be considered.

3. Several aspects of getting health care were identified as problems by many respondents. They included transportation; inaccessible office buildings; delaying care due to worry about exposure; lack of provider availability; and lack of mental health providers. It would be useful to further explore these health care access issues and address the causes.

4. Survey responses indicate that there are older adults in Needham experiencing food insecurity (16% reported difficulty getting access to food, 6% reported that they couldn't afford healthy food, and some described relying on Town services for balanced meals). Food insecurity can exacerbate or lead to serious health problems. It should be a priority to review research about food insecurity among older adults as it pertains to physical and economic access to healthy food and to identify promising approaches to address this concern.

SURVEY ON HEALTHY AGING IN NEEDHAM

Technical Report
October 2022

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SUMMARY OF FINDINGS

The Needham Department of Health and Human Services conducted a survey of Needham residents ages 60 and older to gather information on factors associated with healthy aging. This report presents findings from 738 Needham seniors who took part in the survey during summer 2022.

Respondent Characteristics (Page 6)
Survey respondents predominantly identified as *female* (68%) and *male* (31%). An additional 0.5% identified as a member of the transgender community, non-binary, or gender non-conforming; and 0.7% preferred not to report how they identify their gender. On average, respondents were 73 years of age (range: 60 years to 99 years). The largest proportion of respondents identified as *White* (92%) or *Asian* (3%). Most respondents (92%) felt that their health was *good*, *very good*, or *excellent* in comparison to their peers. Roughly half of respondents (52%) reported that their 2022 pre-tax household income was *less than $100,000* and half (48%) indicated that it was *$100,000 or greater*. Approximately one-third of respondents (35%) reported that they have provided care for another adult living in their household – 29% did so in the past and 6% are currently providing care.

Residence in Needham (Page 9)
Almost all respondents (92%) reported that they are currently living in a *private residence* with close to eight of every ten respondents (79%) reporting that they are currently living in a *single-family home*. Seventy percent of respondents (70%) reported living in a multi-person household, with over half living in a two-person household (55%).

Food and Cost of Living (Page 10)
Overall, 16% of respondents reported some degree of difficulty with different aspects of *food access* in the 12 months prior to the survey such as finding the kind of food they wanted, 8% reported that they were *not able to prepare or cook food* due to health problems, and 6% reported some degree of difficulty with different aspects of food security such as not being able to afford to eat balanced meals. Half of respondents (49%) expressed some degree of worry about cost of living (food, gas, heating oil, electric, housing) and its impact on their financial security this year. Worry about cost of living and its impact on financial security was inversely related to annual household income, particularly among those with annual household income under $50,000.

Accessing Health Care (Page 12)
One quarter of respondents (25%) indicated that they delayed seeking heath care during the past 6 months. The most common reason for delaying health care was *worry about exposure to the COVID-19 virus* (16% of all respondents). Twenty percent (20%) of respondents reported difficulty accessing health care during the past 6 months due to lack of provider availability or long wait times. Additional open-ended comments identified *limited provider availability* and *difficulty scheduling appointments* as posing barriers to accessing health care.

Technology (Page 13)
Almost all respondents (96%) indicated that they use the internet for things like email, getting information, paying bills, or purchasing, with an equal proportion (96%) reporting that they have internet access at home, and 90% reporting that they use the internet *daily*. Internet use was associated with age of the respondent. All respondents within the 60-64 year old age group reported at

least monthly internet use, while 14% of individuals 85 years of age and older reported that they never go online. Rates of internet access at home were highest among respondents 60-64 years of age (99%) and lowest among respondents 85 years of age and older (90%).

Almost all respondents reported that they use a *smart phone or mobile phone* (93%), followed by a *laptop computer* (66%), *tablet* (56%), *desktop computer* (49%), and *electronic reader* (32%). On average, respondents reported that they currently use 2.95 different types of technology. In general, use of different types of technology varied by the age of the respondent. This difference was most pronounced for use of laptop computers – which were used by 88% of respondents 60-64 years of age and 36% of respondents 85 years of age and older.

The most common sources of technical support were *friends or family* (70%), followed by *online search or chat groups* (38%), and a *store or service* (26%). Additional open-ended comments identified using a *private service or consultant* or obtaining technical support through their *workplace*. The proportion of respondents who reported that they access technical support through *online search or chat groups* was inversely related to age, ranging from 48% of respondents in the 60-64 year old age group to 19% of respondents 85 years of age or older. There was little variation by age in reports of accessing other types of technical support.

It is important to note that 84% of the responses to this survey were received online – which may introduce upward bias in estimates of internet use. One quarter (24%) of those who completed the survey on paper reported that they *never go online*, suggesting that the survey likely over-estimates internet use among residents 60 years and older in Needham.

Social Connections (Page 16)

Approximately half of respondents indicated that they felt *somewhat* connected to the community (48%) with remaining respondents split between feeling *not very/not at all* connected (24%) and *very/extremely* connected (27%). Over a quarter (29%) reported feeling *less connected* to the community, since the outset of the COVID-19 pandemic.

Most respondents (71%) reported *never/rarely* feeling isolated or lonely (lacking companionship, feel left out, isolated from others), 24% felt this way *sometimes*, and only 5% felt isolated or lonely *often*. Individuals who lived in a single-person household were more likely than those who lived in a multi-person household to report feeling isolated or lonely. Over a third (37%) reported feeling *more isolated or lonely* since the outset of the COVID-19 pandemic.

Almost all respondents reported at least weekly contact with other individuals *in person* (94%) or on a *telephone or cell phone* (93%). Respondents reported participating in video calls less often. Across the three different modalities of communication, almost all respondents (98%) reported some form of either *daily* (86%) or *weekly* (12%) interaction with other people. Roughly one quarter (23%) reported speaking with people *less than before the pandemic.*

Errands and Social Activities (Page 20)
Approximately three-quarters of respondents (76%) indicated that they felt *very* or *extremely comfortable* leaving their home to run errands, go to doctor appointments, get groceries, or participate in social activities. Over a third (38%) reported feeling *less comfortable* running errands since the COVID-19 pandemic.

Two-thirds of respondents reported participating in social activities *in person* at least once a month (66%) and over half (54%) reported participating in social activities *online* at least once a month. Across the two different modalities, over three-quarters of respondents (77%) reported participating in social activities *in person* and/or *online* at least once a month and 24% reported participating in social activities less than once a month or never. Over half of respondents expressed a preference to participate in programs *in person* (59%). The remaining 41% of respondents were split between having *no preference* (25%) and preferring to participate *online* (17%). A subset of respondents (10%) indicated feeling unable to participate in certain activities because they are online. *Not knowing how to use the technology* (5% of all respondents) was the most common reason.

Home Modifications (Page 23)
Almost half of all respondents (49%) reported that they made one or more modifications to their home to enable them to stay there as they age. The largest proportion reported that they made modifications to their *bathroom* (37%) or *improved lighting* (20%). Across the respondent sample, 26% indicated that they were not able to make the modifications that they wanted to make. The most common reasons were the *cost of the modification* (16%) and *architecture of the home* (11%).

Transportation (Page 25)
Respondents were most likely to report that they sometimes or very often need transportation outside of Needham for *medical appointments* (42%), *visiting friends or relatives* (37%), *shopping* (36%), and *non-medical appointments* (31%). Regarding modes of transportation, respondents were most likely to report they sometimes or often *drive themselves* (89%), *walk* (57%), or *have others drive them* (30%).

Additional Comments (Page 26)
Respondents were invited to provide additional comments. Qualitative thematic analysis extracted five discrete themes related to community services and programs, transportation, housing, taxes, and community infrastructure and retail. In general, respondents were laudatory of existing community services for seniors, provided recommendations for community services they would like to see added, expressed desire for more transportation options for seniors (including free or reduced cost options), are concerned about housing availability and affordability (particularly for those wishing to downsize or stay in place as they age), advocated for tax exemptions for seniors (including property taxes), and made recommendations for senior-friendly community infrastructure modifications.

BACKGROUND AND METHODS

The Needham Department of Health and Human Services conducted a survey of Needham residents ages 60 and older to gather information on factors associated with healthy aging. The survey asked questions in nine broad domains: (1) demographics, (2) living situation, (3) food and cost of living, (4) health care access, (5) technology utilization, (6) social connections, (7) errands and social activities in the community, (8) home modifications to facilitate healthy aging, and (9) transportation methods.

The anonymous survey, which consisted of 69 discrete questions, was administered as both a paper-based and online questionnaire during the nine-week period between June 29 and August 31, 2022. Respondents were given the option to complete the survey online or to complete and return the paper-based version to the Rosemary Recreation Complex, the Needham Community Council, the Center at the Heights, or at Town Hall. This was the first time the Survey on Healthy Aging in Needham was conducted.

Survey Development

The survey instrument was designed by representatives from the Needham Department of Health and Human Services in collaboration with an Advisory Group. Many of the questions in the survey were either taken verbatim or adapted from items in existing surveys such as the AARP Community Survey Questionnaire and the Massachusetts Department of Public Health's COVID-19 Community Impact Survey. [1,2] The survey instrument was available in English and was also professionally translated into Mandarin and Russian.

Data Accuracy

One of the challenges associated with survey research is the potential for error in the dataset. This can stem from multiple sources such as the same respondent submitting multiple surveys, poor question wording, lack of appropriate response options that accurately reflect the experiences of all potential respondents, frivolity, and misinterpretation of the underlying meaning of a question. Several steps were taken to minimize error and increase confidence in the results.

1. Use of clear and unambiguous language in the instructions – prominently indicating who the intended audience was and indicating what the questions were about.
2. Data screening – visual and statistical screening to identify and remove cases in which the respondent provided obviously frivolous or erroneous responses.
3. Identical case analysis – statistical identification of duplicate records to minimize the chances that the same person submitted multiple surveys and/or the chances that the survey was accidently submitted multiple times.

While these are not failsafe methods, they do help to ensure a clean dataset that minimizes the chances that there are gross errors present in the final set of data.

[1] http://www.aarp.org/livable-communities/info-2014/aarp-community-survey-questionnaire.html
[2] https://www.mass.gov/resource/covid-19-community-impact-survey

Analysis Plan

Descriptive statistics are presented for each question in the survey (i.e., the number and percentage of all respondents that answered each response option for each item in the questionnaire). Some of the questions in the survey allowed respondents to write-in (or type-in) a response. These items were thematically coded to extract major themes.

Analytical Sample

A total of 766 individuals initiated the survey – 644 participated online and 122 submitted a paper-based version. Twenty-eight surveys (4%) were removed from the final analytical sample – 19 surveys were removed because the respondent only answered the first series of demographic questions without going any further and 9 surveys were removed because the respondent reported that they were under 60 years of age. The final analytical sample consisted of 738 individuals.

Generalizability

Results are generalizable only to those Needham residents ages 60 and older who took part in the survey and may not reflect the experiences and needs of other seniors in the community. The 2020 American Community Survey (ACS) estimates that there are 7,884 residents ages 60 and older living in Needham. Based on these estimates, the Survey on Healthy Aging in Needham reached approximately 9.4% of this population. See Table 1.

Table 1: Estimated Sample Size and Response Rate

	ACS 2020 Population Estimate	Needham Survey on Healthy Aging	Estimated Percentage
60-64 years	1,816	104	5.7%
65-74 years	3,170	320	10.1%
75-84 years	1,579	246	15.6%
85 years and over	1,319	68	5.2%
Total	**7,884**	**738**	**9.4%**

FINDINGS – RESPONDENT CHARACTERISTICS

Six questions in the survey asked about different respondent characteristics. These questions included the respondent's gender identity, age, racial/ethnic identity, perceived health status, pre-tax household income in calendar year 2022, and whether they are a care provider for another adult.

Gender Identity

Respondents were asked how they identify their gender on a scale that included response options for female, male, transgender female, transgender male, non-binary or gender non-conforming, some other way, and prefer not to answer.

Approximately two-thirds of respondents (68%) identified their gender as *female* and 31% identified as *male*. An additional 0.5% identified as a member of the transgender community, non-binary, or gender non-conforming; and 0.7% preferred not to report how they identify their gender. See Table 2.

Table 2: Gender Identity (n=738)

	Number	Percentage
Female	502	68.0%
Male	227	30.8%
Transgender Female	1	0.1%
Transgender Male	2	0.3%
Non-binary or gender non-conforming	1	0.1%
Some other way	0	0.0%
Prefer not to answer	5	0.7%

Respondent Age

Respondents were asked to indicate their exact age. During the analysis phase, responses were collapsed into five-year intervals. Respondents ranged in age from 60 years of age to 99 years of age. The average age of respondents was 73 years. Separated into five-year increments, the largest proportion of respondents (24%) were between 71 and 75 years of age. See Table 3.

Table 3: Years of Age (n=738)

	Number	Percentage
60-65 years	137	18.6%
66-70 years	149	20.2%
71-75 years	177	24.0%
76-80 years	145	19.6%
81-85 years	72	9.8%
86-90 years	43	5.8%
91-95 years	8	1.1%
96-100 years	7	.9%

Racial/Ethnic Identity

Respondents were asked to indicate how they identify their race/ethnicity according to the categories from the U.S. Census. Respondents could choose more than one category (including the option to identify in some other way or to opt out of answering the question).

The largest proportion of respondents identified as *White* (92%) or *Asian* (3%). Fewer than 1% identified as *Black or African American* (0.3%), *Hispanic or Latino(a)* (0.3%), or *Native American or Alaska Native* (0.4%). An additional 2.4% of respondents indicated that they identify in *some other way* than the categories listed and 2.6% preferred not to report how they identify their race/ethnicity.

Based on estimates from the 2020 American Community Survey (ACS), 95% of Needham residents over 60 years of age identify as *White*, 3.0% as *Asian*, 1.6% as *Black or African American*, and 0.4% as *Hispanic or Latino(a)*. Although not a perfect comparison, this suggests that the findings in this survey may slightly over-represent the views of White residents over 60 and under-represent the views of Black of African American residents over 60 living in Needham. See Table 4.

Table 4: Racial/Ethnic Identity (n=738)

	Number	Percentage[(a)]
Black or African American	2	0.3%
Asian	21	2.8%
Hispanic or Latino(a)	2	0.3%
Native American or Alaska Native	3	0.4%
White	678	91.9%
Native Hawaiian or Pacific Islander	0	0.0%
Some other way	18	2.4%
Prefer not to answer	19	2.6%

[(a)] Respondents could choose more than one option so percentages may sum to more than 100%.

Perceived Health Status

Respondents were asked to indicate how they would rate their health (in general) in comparison to other people their age on a five-point scale ranging from Poor to Excellent. Most respondents (92%) felt that their health was *good*, *very good*, or *excellent* in comparison to their peers. Eight percent (8%) of respondents reported that their health was *fair* (7%) or *poor* (1%) when compared to other individuals in their age cohort. See Table 5.

Table 5: Perceived Health Status (n=730)

	Number	Percentage
Poor	10	1.4%
Fair	51	7.0%
Good	161	22.1%
Very Good	310	42.5%
Excellent	198	27.1%
Missing	8	-

Household Pre-Tax Income in Calendar Year 2022

Respondents were asked to estimate their household's pre-tax income level during the current federal tax year (calendar year 2022). Respondents were evenly distributed across household income levels. Roughly half of respondents (52%) reported that their 2022 pre-tax household income was less than $100,000 and half (48%) indicated that it was $100,000 or greater. The largest group (21%) reported that their 2022 pre-tax household income was between $100,000 and $149,000. See Table 6.

Table 6: Household Pre-Tax Income in Calendar Year 2022 (n=651)

	Number	Percentage
Less than $25,000	63	9.7%
$25,000 to $49,999	63	9.7%
$50,000 to $74,999	97	14.9%
$75,000 to $99,999	117	18.0%
$100,000 to $149,999	137	21.0%
$150,000 to $199,999	80	12.3%
$200,000 to $249,999	45	6.9%
$250,000 or more	49	7.5%
Missing	87	-

Care Provider for Another Adult

Respondents were asked to indicate whether they have ever provided care for another adult living in their household who needed assistance with everyday tasks. Approximately one-third of respondents (35%) reported that they have provided care for another adult living in their household – 29% did so in the past and 6% are currently providing care. See Table 7.

Table 7: Care Provider for Another Adult (n=719)

	Number	Percentage
No	469	65.2%
In the past, but not currently	205	28.5%
Yes, I am currently providing care	45	6.3%
Missing	19	-

FINDINGS – RESIDENCE IN NEEDHAM

Three questions in the survey assessed the setting in which respondents currently live, the type of residence in which they live, and the number of individuals living in the household.

Residence Setting

Respondents were asked to identify the setting in which they currently live according to five categories. Almost all respondents (92%) reported that they are currently living in a *private residence*. Four percent (4%) are currently living in a *Needham Housing Authority property*, 2% in *senior housing*, 2% in *affordable housing (Chapter 40B)*, and 0.3% in a *long-term care facility*. See Table 8.

Table 8: Residence Setting (n=729)

	Number	Percentage
Private residence	670	91.9%
Affordable housing (Chapter 40B)	14	1.9%
Needham Housing Authority Property	26	3.6%
Senior housing	17	2.3%
Long-term care facility	2	0.3%
Missing	9	-

Type of Residence

In addition to identifying the setting in which they currently live, respondents were asked to indicate the type of home in which they currently live. Close to eight of every ten respondents (79%) reported that they are currently living in a *single-family home*. Fourteen percent (14%) of respondents are currently living in an *apartment*, 4% in a *condominium*, 3% in a *town home or duplex*, and 0.3% in an *accessory dwelling unit*. See Table 9.

Table 9: Type of Residence (n=733)

	Number	Percentage
Single family home	579	79.0%
Town home or duplex	21	2.9%
Apartment	99	13.5%
Condominium	32	4.4%
Accessory dwelling unit (attached apartment)	2	0.3%
Missing	5	-

Number of Persons in Household

Respondents were asked to indicate how many individuals live in their household. Responses ranged from 1 individual to 9 individuals. Seventy percent of respondents (70%) reported living in a multi-person household, with over half living in a two-person household (55%). See Table 10.

Table 10: Number of Persons in Household (n=733)

	1 person	2 people	3 people	4 people	5 or more
Persons in Household	30.4%	55.3%	9.0%	3.4%	1.9%

There were 5 missing responses.

FINDINGS – FOOD AND COST OF LIVING

Seven questions in the survey assessed areas related to food and cost of living. Respondents were asked whether they had experienced any issues accessing, preparing, or affording food in the past 12 months and to indicate how worried they are about cost of living.

Food Access, Preparation, and Security

Sixteen percent of respondents (16%) reported some degree of difficulty with different aspects of food access in the 12 months prior to the survey – 12% reported difficulty *finding the kind of food they wanted*, 5% reported difficulty *getting transportation to the grocery store*, and 5% reported difficulty *having groceries delivered*.

Eight percent of respondents (8%) reported that they were *not able to prepare or cook food* during the past 12 months because of health problems.

Six percent (6%) reported some degree of difficulty with different aspects of food security during the 12 months prior to the survey – 5% reported feeling that they *could not afford to eat balanced meals* and 4% reported *worrying that their food would run out* before they could get more. See Table 11.

Table 11: Food Access, Food Preparation, Food Security (n=686)

Food Access	Number	Percentage
You had difficulty finding the kind of food that you wanted	84	12.2%
You had difficulty getting transportation to the grocery store	37	5.4%
You had difficulty having groceries delivered	34	5.0%
Food Preparation	**Number**	**Percentage**
You were not able to prepare or cook food because of health problems	52	7.6%
Food Security	**Number**	**Percentage**
You felt that you couldn't afford to eat balanced meals	31	4.5%
You worried that your food would run out before you could get more	26	3.8%

Each row was asked as a Yes/No question. Percentages represent "Yes" responses. There were 52 missing responses.

Cost of Living

Respondents were asked to indicate how worried they are about cost of living (food, gas, heating oil, electric, housing) and its impact on their financial security this year on a 5-point scale ranging from not at all worried to extremely worried. Half of respondents (51%) reported that they were either *not at all worried* or *not very worried* about the impact of cost of living on their financial security. The largest proportion reported that they were *somewhat worried* (35%). Only 14% reported that they were *very worried* or *extremely worried*. See Figure 1.

In general, worry about cost of living and its impact on financial security was inversely related to annual household income. Only 6% of respondents with annual household income over $100,000 reported being *very* or *extremely* worried about cost of living. Among those with annual household income under $100,000, almost one-quarter (23%) reported being *very* or *extremely* worried about cost of living. Among those with annual household income under $50,000, a full 39% reported being *very* or *extremely* worried about cost of living.

Figure 1: Worry About Cost of Living (n=688)

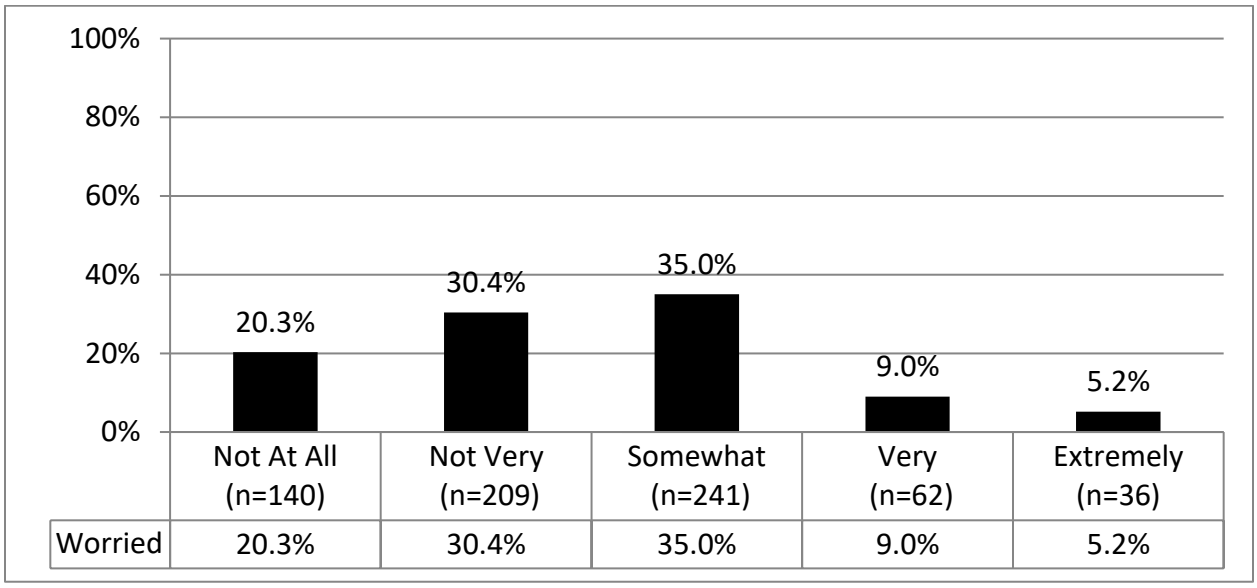


Figure Notes: A total of 688 individuals answered this question (50 missing). Mean = 2.48 out of 5.00.

FINDINGS – ACCESSING HEALTH CARE

Three questions in the survey asked respondents about delays accessing health care and difficulties accessing health care during the six months prior to the survey.

Delays Accessing Health Care

Respondents were asked to indicate which factors, if any, caused them to delay seeking health care during the six months prior to the survey. As shown in Table 12, most respondents (76%) reported that they either did not need health care during the past 6 months (8%) or had not delayed seeking care in that time (67%). One quarter (25%) indicated that they delayed seeking heath care during the past 6 months. The most common reason for delaying health care was *worry about exposure to the COVID-19 virus* (16% of all respondents).

Table 12: Delays Accessing Health Care in the Past 6 Months (n=687)

Health Care in the Past 6 Months	Number	Percentage
Did not need health care	58	8.4%
Did not delay seeking health care	461	67.1%
Delayed seeking health care	168	24.5%
Missing	51	-
Reasons for Delaying Health Care in Past 6 Months	**Number**	**Percentage** [(a)]
Did not have transportation	23	3.3%
Worried about exposure to COVID-19	110	16.0%
Did not have anyone to go with	15	2.2%
Some other reason	37	5.4%

[(a)] Respondents could choose more than one option so percentages may sum to more than 100%.

The 37 respondents who selected some other reason for delaying accessing health care were most likely to identify *limited provider availability* and *difficulty scheduling appointments* as the reason. The complete list of verbatim comments and themes appears in **Appendix A**.

Difficulty Accessing Health Care

Respondents were asked whether they had difficulty accessing health care during the past six months due to lack of provider availability or long wait times. Twenty percent (20%) of respondents reported difficulty accessing health care due to lack of provider availability or long wait times. See Table 13.

Table 13: Difficulty Accessing Health Care in Past 6 Months (n=666)

	Number	Percentage
Did not need health care	58	8.7%
No difficulty accessing health care	478	71.8%
Had trouble accessing health care	130	19.5%
Missing	72	-

FINDINGS – TECHNOLOGY

Nine questions in the survey asked respondents how often they typically use the internet, whether they have internet access at home, the types of technology they use, and sources of technical support.

Internet Use

Respondents were asked to indicate how often they typically use the internet for things like email, getting information, paying bills, or purchasing – including access from home, work, a mobile device, or someplace else. Almost all respondents (96%) indicated that they use the internet, with 90% reporting that they use the internet *daily*. Typical internet use was associated with age of the respondent. All respondents within the 60-64 year old age group reported at least monthly internet use, while 14% of individuals 85 years of age and older reported that they never go online.

Table 14: Typical Internet Use (n=671)

Use the Internet	Daily	Every Week	Twice a Month	Once a Month	Less than Once a Month	Never go Online
All Respondents (671)	89.7%	3.3%	0.9%	1.0%	1.0%	4.0%
60-64 years old (90)	95.6%	2.2%	1.1%	1.1%	0.0%	0.0%
65-74 years old (289)	93.1%	3.1%	1.4%	0.3%	0.3%	1.7%
75-84 years old (228)	85.5%	4.4%	0.4%	1.8%	2.2%	5.7%
85 years or older (64)	81.3%	1.6%	0.0%	1.6%	1.6%	14.1%

There were 67 missing responses.

It is important to note that 84% of the responses to this survey were received online. This may bias the results of this question and extent to which it is representative of all individuals 60 years of age and older in Needham. Almost all individuals who completed the survey online reported *daily* internet use (95%) compared to only 65% of those who completed it on paper. One quarter (24%) of those who completed the survey on paper reported that they *never go online*. This suggests that this question may greatly over-estimate typical Internet use among Needham residents 60 years of age and older.

Internet Access at Home

Respondents were asked to indicate whether they have internet at home (including internet access through a smartphone). Rates of internet access at home were highest among respondents 60-64 years of age (99%) and lowest among respondents 85 years of age and older (90%). Almost all respondents (96%) indicated that they have internet access at home. Among all respondents, *not having anyone to help them set it up or use it* (1.7%), *cost* (1.5%), and *lack of interest in having internet at home* (1.1%) were the primary factors preventing internet access at home. See Table 15.

Table 15: Internet Access at Home (n=664)

Internet Access at Home	Number	Percentage
Yes	639	96.2%
No	25	3.8%
Missing	74	-
Factors Preventing Internet Access at Home	**Number**	**Percentage** [(a)]
I am not interested in having internet at home	7	1.1%
It costs too much money	10	1.5%
I don't have anyone to help me set it up or use it	11	1.7%
Some other reason	0	0.0%

[(a)] Respondents could choose more than one option so percentages may sum to more than 100%.

Type(s) of Technology Used

Respondents were asked whether they currently use five different types of technology. Almost all respondents reported that they use a *smart phone or mobile phone* (93%), followed by a *laptop computer* (66%), *tablet* (56%), *desktop computer* (49%), and *electronic reader* (32%). On average, respondents reported that they currently use 2.95 different types of technology. A small proportion of individuals (1.7%) reported that they do not use any of these types of technology. See Table 16.

Table 16: Type(s) of Technology Used (n=662)

	Number	Percentage
Smart phone or mobile phone	614	92.7%
Desktop computer	325	49.1%
Laptop computer	437	66.0%
Tablet (such as iPad, Samsung, Fire)	368	55.6%
Electronic reader (such as Kindle)	212	32.0%
None	11	1.7%

Each row was asked as a Yes/No question. Percentages represent "Yes" responses. 76 missing.

In general, use of different types of technology varied by the age of the respondent. This difference was most pronounced for use of laptop computers – which were used by 88% of respondents 60-64 years of age and 36% of respondents 85 years of age and older.

Technology Used	Mobile Phone	Desktop Computer	Laptop Computer	Tablet	Electronic Reader	None
All Respondents (662)	92.7%	49.1%	66.0%	55.6%	32.0%	1.7%
60-64 years old (90)	100.0%	48.9%	87.5%	54.5%	30.7%	0.0%
65-74 years old (289)	96.2%	47.2%	72.9%	59.7%	33.0%	0.3%
75-84 years old (228)	90.7%	51.6%	56.9%	53.8%	35.1%	3.1%
85 years or older (64)	73.8%	49.2%	36.1%	44.3%	18.0%	4.7%

Technical Supports

Respondents were asked where they access technical support when they need it. Many respondents reported informal sources of support such as *friends or family* (70%), followed by *online search or chat groups* (38%), a *store or service* (26%), at the *library* (5%), at the *Center for the Heights* (4%), and at the *Needham Community Council* (1%). An additional 7% of respondents identified a different source of support. On average, respondents reported accessing 1.5 different sources of technical support. A small proportion of individuals (4.7%) did not identify any sources of technical support. See Table 17.

Table 17: Technical Supports (n=682)

	Number	Percentage [(a)]
Online search or chat groups	259	38.0%
A store or service (Best Buy, Apple Store)	179	26.2%
From family or friends	480	70.4%
At the library	33	4.8%
At the Center at the Heights (Senior Center)	25	3.7%
Needham Community Council	8	1.2%
Other source of support	46	6.7%
None	32	4.7%

[(a)] Respondents could choose more than one option so percentages may sum to more than 100%. 56 missing.

The proportion of respondents who reported that they access technical support through *online search or chat groups* was inversely related to age, ranging from 48% of respondents in the 60-64 year old age group to 19% of respondents 85 years of age or older. There was little variation by age in reports of accessing other types of technical support.

Technical Supports	60-64 years	65-74 years	75-84 years	85 years or older
Online search or chat groups	47.8%	45.4%	30.3%	18.5%
A store or service (Best Buy, Apple Store)	15.2%	28.9%	28.6%	21.5%
From family or friends	68.5%	72.9%	68.4%	69.2%
At the library	3.3%	3.8%	6.4%	6.2%
At the Center at the Heights (Senior Center)	1.1%	2.4%	5.6%	6.2%
Needham Community Council	1.1%	1.4%	1.3%	0.0%
Other source of support	6.5%	5.2%	8.5%	7.7%
None	6.5%	2.4%	6.0%	7.7%

The 46 respondents who selected another source of support were most likely to identify using a *private service or consultant* or obtaining technical support through their *workplace*. The complete list of verbatim comments and themes appears in **Appendix B**.

A series of eight items in the survey asked respondents about their perceived level of connection to the community, feelings of isolation and loneliness, and level of interaction with other individuals.

Connection to the Community

Respondents were asked to indicate how connected they feel to the Needham community on a 5-point scale ranging from not at all connected to extremely connected. Approximately half of respondents indicated that they felt *somewhat* connected to the community (48%) with remaining respondents split between feeling *not very/not at all* connected (24%) and *very/extremely* connected (27%). Most respondents fell in the middle range of the scale with few respondents at the two anchor points: *not at all* connected (3%) and *extremely* connected (6%). See Figure 2.

Figure 2: Connection to the Community (n=694)

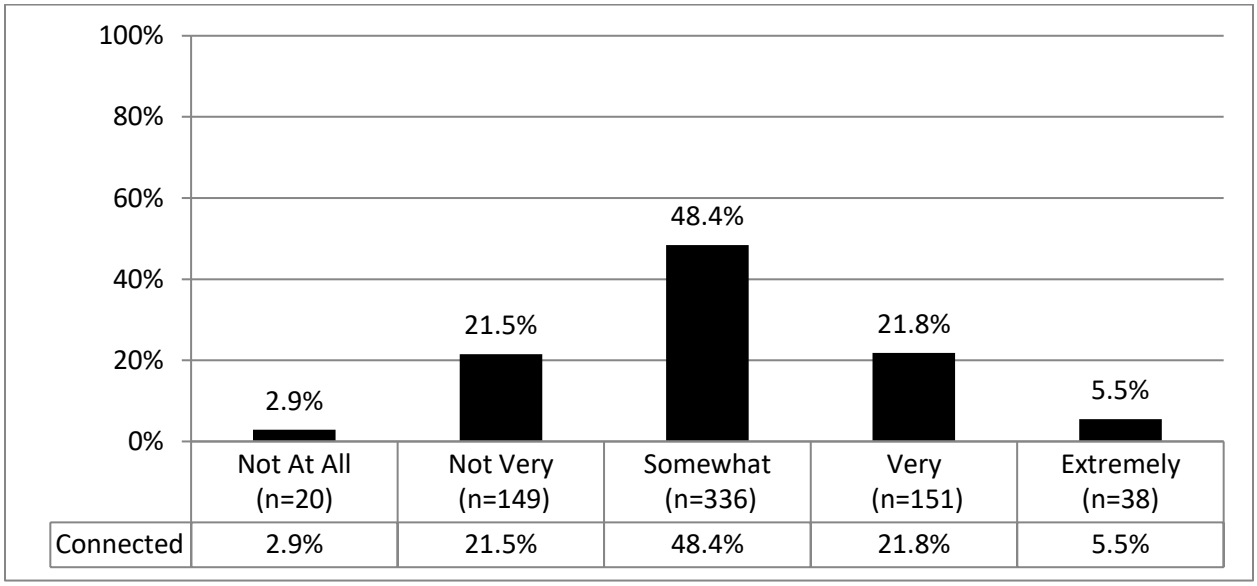
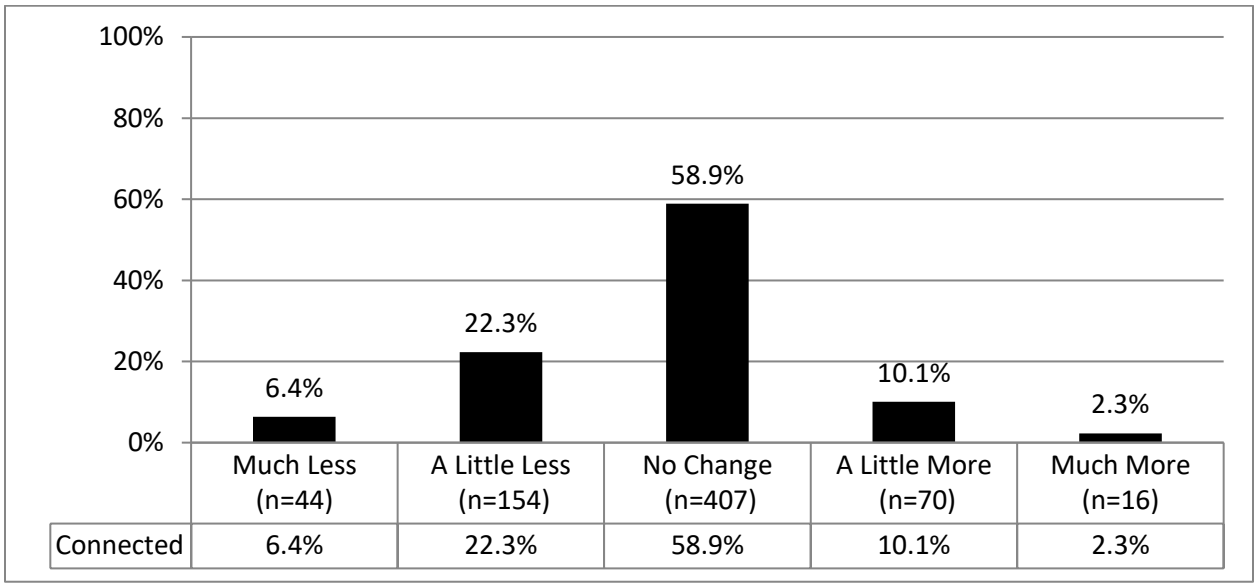


Figure Notes: A total of 694 individuals answered this question (44 missing). Mean = 3.05 out of 5.00.

Respondents were also asked to indicate how connected they feel to the Needham community now in comparison to their level of connection to the community before the COVID-19 pandemic. Ratings were provided on a 5-point scale ranging from much less connected now to much more connected now with a mid-point of no change. Most respondents reported *no change* (59%) in the level of connection they feel now in comparison to before the pandemic, 29% reported feeling less connected to the community, and 12% reported feeling more connected to the community. See Figure 3.

Figure 3: Connection to the Community Versus Before Pandemic (n=691)



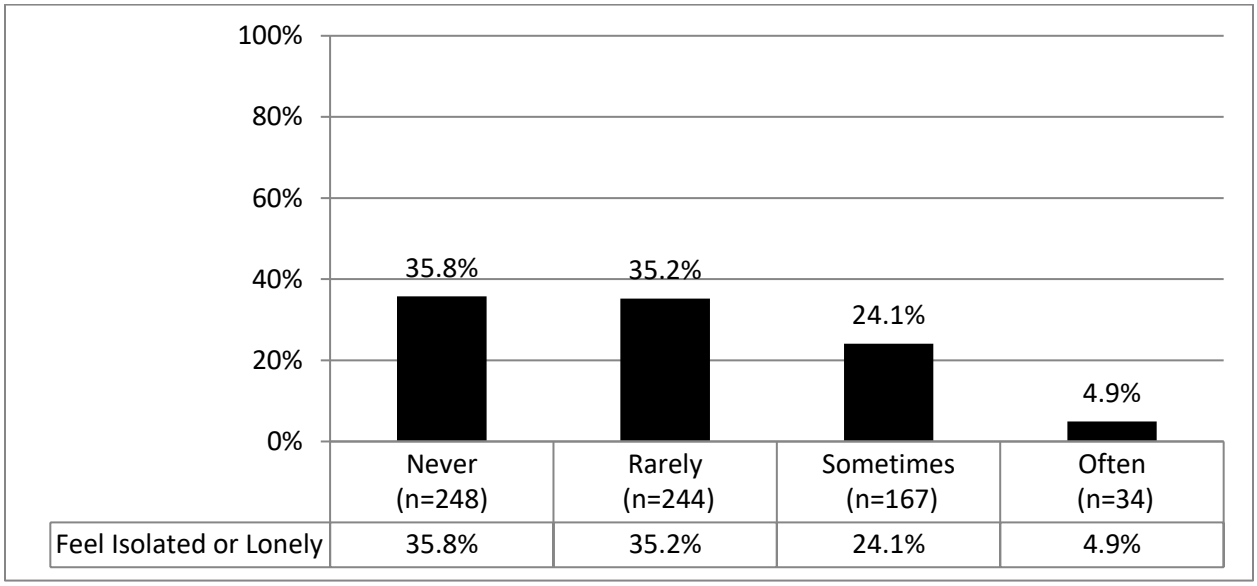
	Much Less (n=44)	A Little Less (n=154)	No Change (n=407)	A Little More (n=70)	Much More (n=16)
Connected	6.4%	22.3%	58.9%	10.1%	2.3%

Figure Notes: A total of 691 individuals answered this question (47 missing). Mean = 2.80 out of 5.00.

Feel Isolated or Lonely

Respondents were asked to indicate how often they feel isolated or lonely (lacking companionship, feel left out, isolated from others) on a 4-point scale ranging from never through often. Most respondents (71%) reported *never/rarely* feeling isolated or lonely, 24% felt this way *sometimes*, and only 5% felt isolated or lonely *often*. See Figure 4. Individuals who lived in a single-person household were more likely than those who lived in a multi-person household to report feeling isolated or lonely (*sometimes*: 34% single-person vs. 20% multi-person; *often*: 12% single-person vs. 2% multi-person).

Figure 4: Feel Isolated or Lonely (n=693)



	Never (n=248)	Rarely (n=244)	Sometimes (n=167)	Often (n=34)
Feel Isolated or Lonely	35.8%	35.2%	24.1%	4.9%

Figure Notes: A total of 693 individuals answered this question (45 missing). Mean = 1.98 out of 4.00.

Respondents were also asked to indicate how isolated or lonely they feel now in comparison to before the COVID-19 pandemic. Ratings were provided on a 5-point scale ranging from much less isolated or lonely now to much more isolated or lonely now with a mid-point of no change. Half of respondents reported *no change* (50%) in isolation or loneliness in comparison to before the pandemic, 37% reported feeling more isolated or lonely, and 13% reported feeling less isolated or lonely. See Figure 5.

Figure 5: Feel Isolated or Lonely in Comparison to Before COVID-19 Pandemic (n=693)

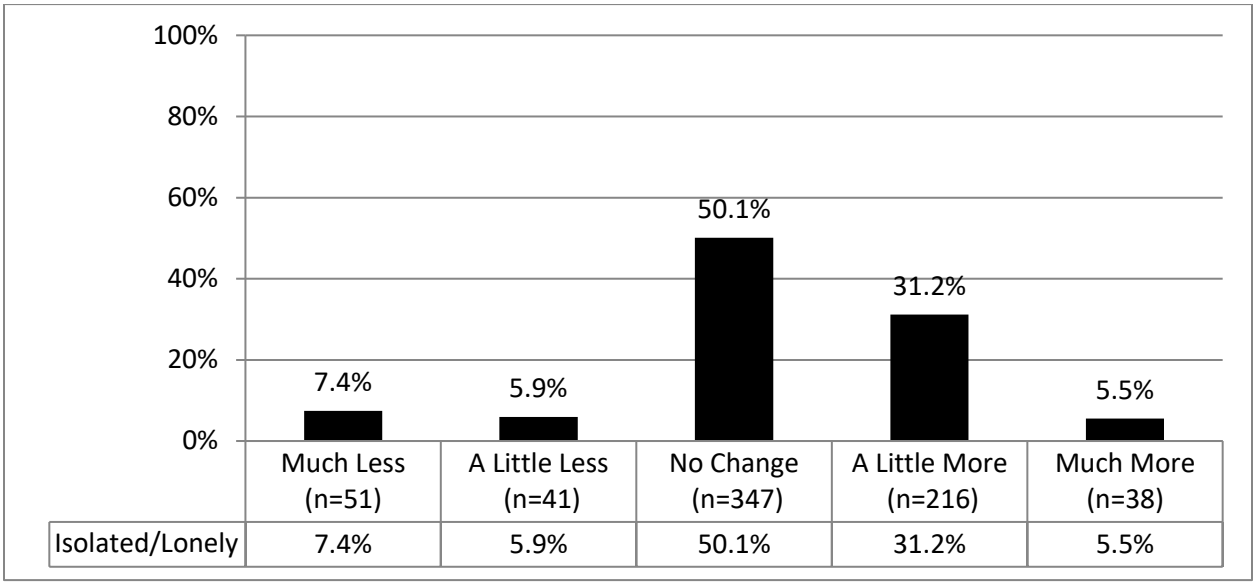


Figure Notes: A total of 693 individuals answered this question (45 missing). Mean = 3.22 out of 5.00.

Interaction with Other Individuals

Respondents were asked to indicate how often they usually speak with other people in person, on a telephone or cell phone, and on a video call such as Zoom or Facetime. As shown in Table 18, almost all respondents reported at least weekly contact with other individuals *in person* (94%) or on a *telephone or cell phone* (93%). Respondents reported participating in video calls less often.

Across the three different modalities of communication, almost all respondents (98%) reported some form of either *daily* (86%) or *weekly* (12%) interaction with other people.

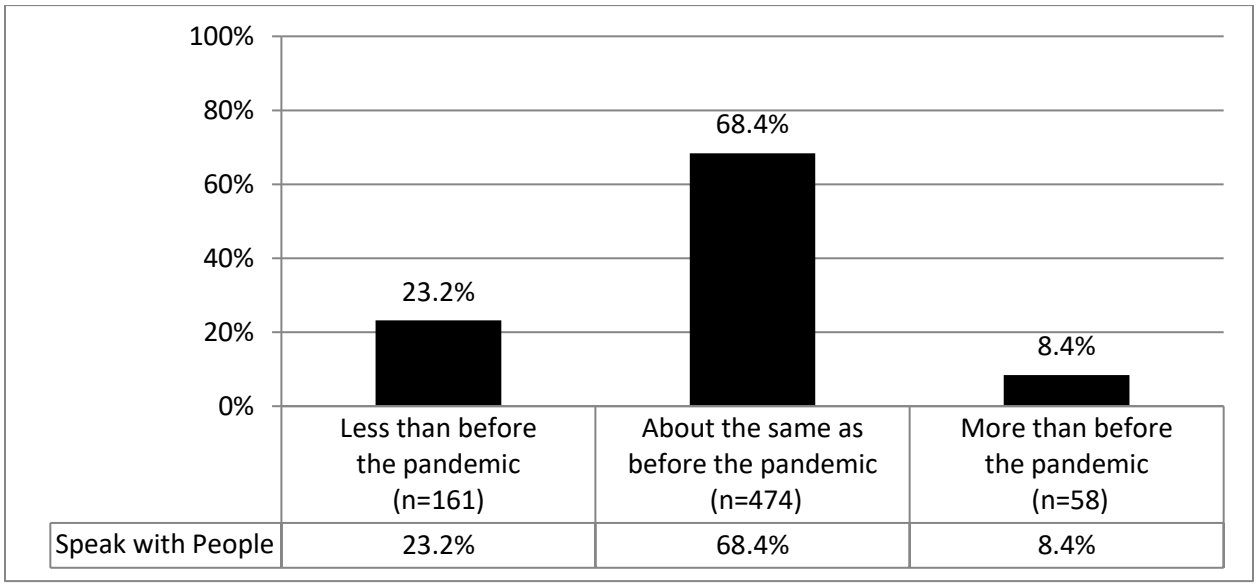
Table 18: Interaction with Other Individuals (n=694)

	Daily	Every Week	Twice a Month	Once a Month	Less than Once a Month	Hardly Ever or Never
In person	71.8%	22.5%	3.0%	0.3%	0.7%	1.7%
Telephone or cell phone	65.9%	27.1%	3.2%	1.2%	1.0%	1.7%
Video call (Zoom, Facetime)	9.7%	31.4%	12.4%	8.1%	9.4%	29.1%
Any Method	86.3%	11.7%	1.2%	0.4%	0.3%	0.1%

There were 44 missing responses.

Respondents were also asked to indicate how frequently they are speaking with people now in comparison to before the COVID-19 pandemic. The largest proportion of respondents reported *no change* (68%) in their frequency of communication with others now in comparison to before the pandemic, 23% reported speaking with people *less than before the pandemic*, and 8% reported speaking with people *more than before the pandemic*. See Figure 6.

Figure 6: Interaction with Other Individuals Versus Before Pandemic (n=693)



	Less than before the pandemic (n=161)	About the same as before the pandemic (n=474)	More than before the pandemic (n=58)
Speak with People	23.2%	68.4%	8.4%

Figure Notes: A total of 693 individuals answered this question (45 missing).

FINDINGS – ERRANDS AND SOCIAL ACTIVITIES

Seven questions in the survey asked respondents about their comfort running errands and the extent to which they participate in social activities in the community.

Comfort Running Errands

Respondents were asked to indicate how comfortable they are leaving their home to run errands, go to doctor appointments, get groceries, or participate in social activities on a 5-point scale ranging from not at all comfortable to extremely comfortable. Approximately three-quarters of respondents (76%) indicated that they felt *very* (33%) or *extremely comfortable* (43%) running errands. Additional respondents were *somewhat* (18%), *not very* (5%), and *not at all comfortable* (1%). See Figure 7.

Figure 7: Comfort Running Errands (n=678)

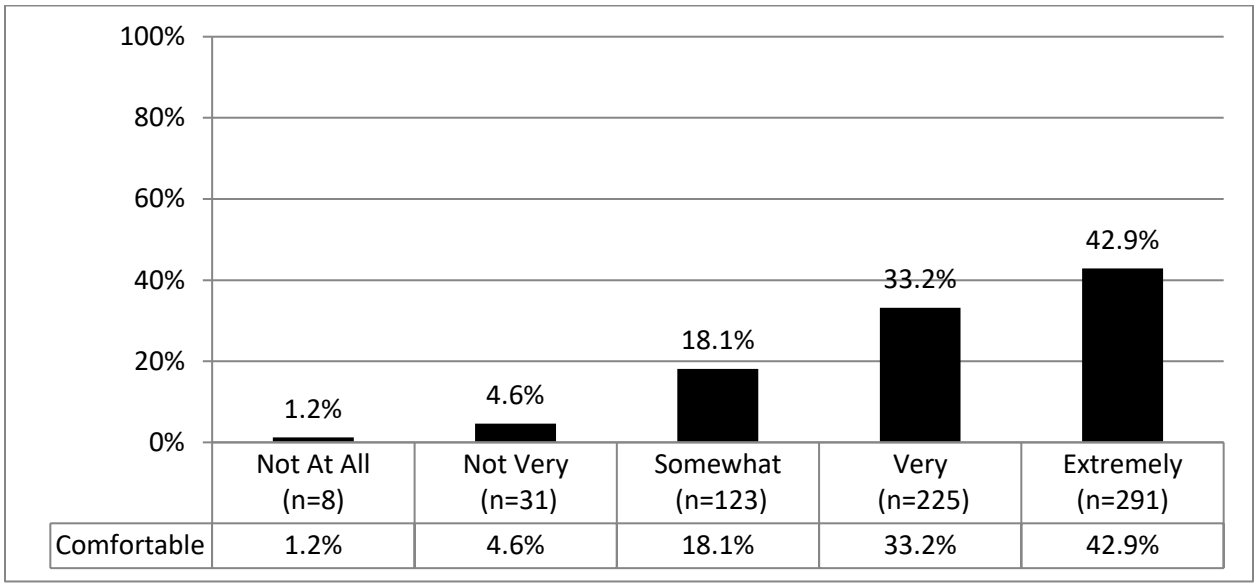


Figure Notes: A total of 678 individuals answered this question (60 missing). Mean = 4.12 out of 5.00.

Respondents were also asked to indicate how comfortable they are leaving their home to run errands, go to doctor appointments, get groceries, or participate in social activities now in comparison to before the COVID-19 pandemic. Ratings were provided on a 5-point scale ranging from much less comfortable now to much more comfortable now with a mid-point of no change. Half of respondents reported *no change* (49%) in their comfort level in comparison to before the pandemic, 38% reported feeling less comfortable, and 13% reported feeling more comfortable. See Figure 8.

Figure 8: Comfort Running Errands in Comparison to Before COVID-19 Pandemic (n=667)

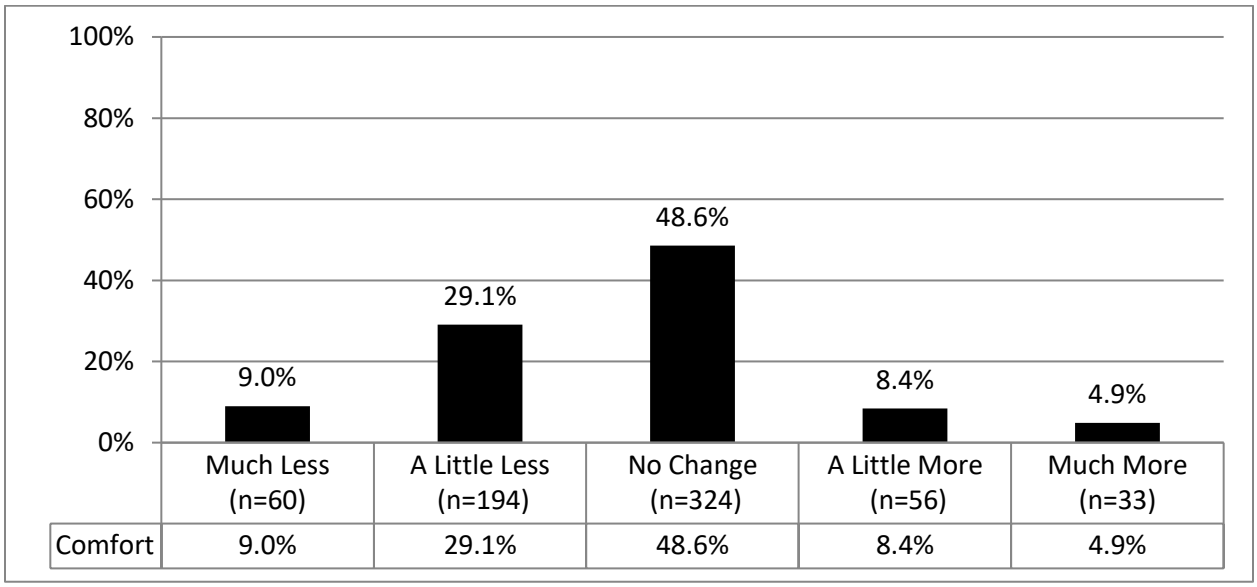


Figure Notes: A total of 667 individuals answered this question (71 missing). Mean = 2.71 out of 5.00.

Social Activities

Respondents were asked to indicate how often they currently participate in social groups, classes, recreation, or cultural events in person and online (such as Zoom). As shown in Table 19, two-thirds of respondents reported participating in social activities *in person* at least once a month (66%) and over half (54%) reported participating in social activities *online* at least once a month.

Across the two different modalities, over three-quarters of respondents (77%) reported participating in social activities *in person* and/or *online* at least once a month, while 24% reported that they participate in social activities less than once a month or never.

Table 19: Participation in Social Activities (n=665)

	Daily	Every Week	Twice a Month	Once a Month	Less than Once a Month	Never
In person	9.9%	36.8%	10.7%	8.3%	16.8%	17.4%
Online (such as Zoom)	5.1%	28.5%	12.3%	8.3%	17.2%	28.6%
Any Method	13.5%	46.3%	9.3%	7.5%	12.3%	11.2%

There were 73 missing responses.

Social Activities – Preferred Way to Participate

Respondents were also asked to indicate how they prefer to participate in programs (workshops, classes, cultural events, discussion groups, fitness). Response options were in person, online, no preference. As shown in Figure 9, over half of respondents expressed a preference to participate in programs *in person* (59%). The remaining 41% of respondents were split between having *no preference* (25%) and preferring to participate *online* (17%).

Figure 9: Preferred Way to Participate in Social Activities (n=666)

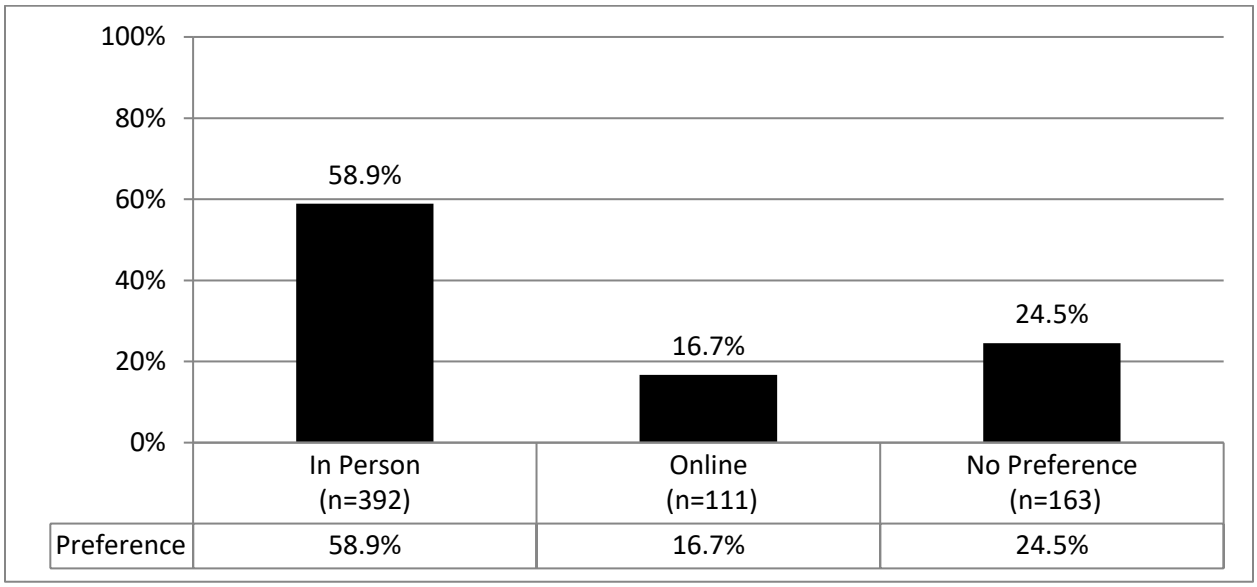


Figure Notes: A total of 666 individuals answered this question (72 missing).

Social Activities – Barriers to Participating in Online Activities

Respondents were asked whether they ever feel like they are unable to participate in certain activities because they are online – 10% of respondents reported feeling this way. Among all respondents, *not knowing how to use the technology* (5%) was the most common reason provided. See Table 20.

Table 20: Participating in Online Activities (n=666)

Feel Unable to Participate in Online Activities	Number	Percentage
No	597	89.6%
Yes	69	10.4%
Missing	72	-
Factors Preventing Participation in Online Activities	**Number**	**Percentage** [(a)]
No barriers	466	70.0%
No interest in participating in online activities	132	19.8%
Can't afford a computer or internet	6	0.9%
Don't know how to use the technology	33	5.0%
Don't have a good enough internet connection	5	0.8%
Don't have the right equipment (camera, microphone)	14	2.1%
Some other reason	22	3.3%

[(a)] Respondents could choose more than one option so percentages may sum to more than 100%.

The 22 respondents who selected another reason were most likely to identify *health or physical factors* that prevent them from participating in online activities, *software or computing challenges*, or *schedule conflicts*. The complete list of verbatim comments and themes appears in **Appendix C**.

FINDINGS – HOME MODIFICATIONS

A series of 12 items in the survey asked respondents whether they had made modifications to their home to enable them to stay there as they age, whether they wanted to make modifications but were not able to, and barriers to making desired home improvements.

Existing Home Modifications

Almost half of all respondents (49%) reported that they made one or more modifications to their home to enable them to stay there as they age. The largest proportion reported that they made modifications to their *bathroom* (37%), followed by *improved lighting* (20%); *added a ramp or made other modifications to allow easier access* into or within their home (7%); *installed a medical emergency response system* (7%); *added a bedroom, bathroom, or kitchen on the first floor* (5%); and/or added an *accessory dwelling unit* (1%). See Table 21.

Table 21: Existing Home Modifications (n=662)

Made any modifications to home to enable them to stay there as they age	**Number**	**Percentage**
No	341	51.5%
Yes	321	48.5%
Missing	76	-
Have you made any of the following modifications to your home?	**Number**	**Percentage** [(a)]
Bathroom modifications (grab bars, handrails, higher toilet, non-slip tiles)	245	37.0%
Improved lighting	131	19.8%
A ramp, wider doorways, chairlift, or elevator to allow easier access	47	7.1%
Medical emergency response system that notifies others in an emergency	44	6.6%
Added a bedroom, bathroom, and/or kitchen on the first floor	33	5.0%
Added an accessory dwelling unit (an attached apartment)	6	0.9%
Other modification	13	2.0%
Missing	76	-

[(a)] Each row was asked as a Yes/No question. Percentages represent "Yes" responses.

The 13 respondents who selected another type of modification were most likely to identify making *accessibility improvements* such as moving laundry equipment to the first floor, *assistive technology* to facilitate contacting emergency medical services, and *energy efficiency improvements* such as installing new windows. The complete list of verbatim comments and themes appears in **Appendix D**.

Barriers to Making Home Modifications

Respondents were asked whether they wanted to make modifications to their home that they have not been able to make. Across the respondent sample, 26% indicated that they were not able to make the modifications that they wanted to make. The most common reasons were the *cost of the modification* (16%) and *architecture of the home* (11%). See Table 22. Comments from the 4 respondents who selected another type of barrier appear in **Appendix D**.

Table 22: Making Home Modifications (n=667)

Prevented from Make Desired Modifications to Home	**Number**	**Percentage**
No	494	74.1%
Yes	173	25.9%
Missing	71	-
Barriers to Making Home Modifications	**Number**	**Percentage** [(a)]
No barriers	494	74.1%
Don't own property and not allowed to modify	16	2.4%
Cost of the modification	113	16.9%
Architecture of the home	72	10.8%
Building or zoning codes	23	3.4%
Finding a contractor	57	8.5%
Another barrier	4	0.6%

[(a)] Each row was asked as a Yes/No question. Percentages represent "Yes" responses.

FINDINGS – TRANSPORTATION

Respondents were asked to indicate how often they need transportation outside of Needham and how often they currently utilize different modes of transportation to get around Needham.

Transportation Needs

Respondents were asked to indicate how often they need transportation outside of Needham for five different reasons such as work, shopping, and medical appointments. Scale categories ranged from Never (1) to Very Often (4). Respondents were most likely to report that they sometimes or very often need transportation outside of Needham for *medical appointments* (42%), *visiting friends or relatives* (37%), *shopping* (36%), and *non-medical appointments* (31%). See Table 23.

Table 23: Transportation Needs (n=645)

	Never	Rarely	Sometimes	Very Often	Mean[1-4]
Medical appointments	48.7%	9.0%	26.7%	15.7%	2.09
Visiting friends or relatives	56.6%	6.0%	22.6%	14.7%	1.96
Shopping	58.0%	6.2%	19.2%	16.6%	1.94
Non-medical appointments	57.4%	11.6%	21.4%	9.6%	1.83
Work	82.6%	3.9%	5.4%	8.1%	1.39

There were 93 missing responses.

Current Transportation Methods

Respondents were asked to indicate how often they currently use eight different modes of transportation to get around Needham for trips like shopping, visiting the doctor, visiting friends, and running errands. Scale categories ranged from Never to Very Often. Respondents were most likely to report they sometimes or often *drive themselves* (89%), *walk* (57%), or *have others drive them* (30%).

Table 24: Transportation Methods (n=655)

	Never	Rarely	Sometimes	Very Often	Mean[1-4]
Drive self	10.2%	1.2%	4.6%	84.0%	3.62
Walk	26.6%	16.9%	33.3%	23.2%	2.53
Have others drive	45.2%	24.6%	20.6%	9.6%	1.95
Use ride-sharing service like Uber or Lyft	69.3%	18.3%	9.2%	3.2%	1.46
Ride a bike	78.6%	10.1%	8.1%	3.2%	1.36
Use public bus or shuttle	82.1%	12.5%	4.7%	0.6%	1.24
Take a taxi or cab	82.9%	12.7%	3.8%	0.6%	1.22
Special transportation service	93.4%	3.2%	2.4%	0.9%	1.11

There were 83 missing responses.

Ten respondents identified an additional mode of transportation such as the *commuter rail or train*. The complete list of verbatim comments and themes appears in **Appendix E**.

FINDINGS – ADDITIONAL COMMENTS

Respondents were invited to provide additional comments – 74 respondents provided at least one comment. Qualitative thematic analysis extracted five discrete themes related to community services and programs, transportation, housing, taxes, and community infrastructure and retail. See Table 25. The complete list of verbatim comments, themes, and sub-themes appears in **Appendix F**.

Table 25: Additional Comment Themes and Sub-Themes

Community Services and Programs
• *Services seniors desire in the community*
• *Comments about existing community services for seniors*
• *Need for enhanced communication and education related to services and other areas*
• *Need for assistance finding and contracting with private services*
Transportation
• *Need for enhanced transportation options within Needham*
• *Free or reduced cost ridesharing programs*
• *Need for transportation to medical appointments*
• *General lack of transportation options in the area*
Housing
• *Limited housing options for seniors wishing to downsize*
• *Lack of affordable housing for seniors*
• *Limited availability of housing for seniors*
• *Desired changes to accessory dwelling unit rules*
Taxes
• *Tax exemptions for seniors*
Community Infrastructure and Retail
• *Community infrastructure and physical plant recommendations*
• *Business and retail recommendations*

APPENDIX A: DELAYS IN ACCESSING HEALTH CARE – OTHER RESPONSES

Delays in Accessing Healthcare (37 comments)

Delays in Accessing Health Care – Limited availability	
- Appointment limitations at doctor offices. - Availability of care. - Couldn't get appointment. - Dental and eye care have been less available. - Dentist scheduling issues. - Difficult getting doctor's appointments within 6-months. - Difficulties getting an appointment. - Difficulty in getting an appointment. - Doctors were not available. - Getting appointment. - Health care providers too busy or not available mostly due to support staff shortages. - In June, appointments were not able to be booked until January 2023. Unacceptable.	- Limited appointment times for tests / doctor availability. - Long wait times to get doctor appointments. - Long waits. - My doctor is retiring. A new doctor can't see me for 4 months. - My PCP retired and I must wait to see my new one. - Provider not as available. - Provider not available. - Recently moved to state. Having trouble moving my records. - The delay was due to the healthcare provider. - The provider delayed the procedure. - Trying to get appointments has been difficult. - Wait time for appointment was long.
Delays in Accessing Health Care – No provider	
- Lack of available physicians – not taking new patients. - Need new PCP.	- No therapists available. - Physician no longer handling primary patients. Need new one.
Delays in Accessing Health Care – Cost/Coverage	
- Expense. - Insurance issues.	- Lack health coverage such as eyeglasses & dental crowns. - Loss of Medicaid insurance due to spouse's death.
Delays in Accessing Health Care – Competing demands	
- Caring for my terminally ill husband – no time for me to seek health care for myself. - Life circumstances.	- Too busy with work.
Delays in Accessing Health Care – Health Issues	
- Due to shoulder injury, delayed some appointments	- Poor health

APPENDIX B: SOURCES OF TECHNICAL SUPPORT – OTHER RESPONSES

Sources of Technical Support (46 comments)

Sources of Technical Support – Private service/consultant	
- A private contractor. - Computer consultant in the area. - Computer consultant. - Computer technician. - Consultant. - Have Techie come to my home if there is trouble with my computer. - I have access to an IT person. - IT specialist consultants. - Local computer consultant organization. - Long-time Needham service provider.	- My personal computer technician. - Outside private help. - Paid consultant. - Paid technologist. - Pay an expert. - Pay for help if necessary. - Private company. - Professional. - Purchase tech support. - Use technology specialist.
Sources of Technical Support – Workplace support	
- At work. - I am still employed so I use my IT people at work. - I'm still working. - IT workplace support. - Office. - Office.	- Our IT person at work, remotely during the pandemic. - Through work. - We use a hired support for our business. - Work IT department. - Workplace.
Sources of Technical Support – Self-support	
- Can fix things myself. - I am a techie – I do it myself. - I can support myself. - I do it myself.	- I figure it out sometimes. - Myself. I'm a software engineer. - Read the documentation. - Self.
Sources of Technical Support – Community organization	
- In CCRC residence. - Tech support at North Hill. - The Carroll Center for the Blind in Newton.	- The Carroll Center for the Blind. - Wellesley library has classes and appt to discuss tech. - Wellesley library.
Sources of Technical Support – None	
- None. I don't know where to get it or how to describe what I even need.	

APPENDIX C: BARRIERS TO PARTICIPATING IN ONLINE ACTIVITIES – OTHER RESPONSES

Barriers to Participating in Online Activities (22 comments)

Barriers to Participating in Online Activities – Health and physical factors

- Age problems and privacy issues.
- Caring for spouse.
- Chronic fatigue syndrome. Too tired.
- Difficult to participate for long periods.
- I am blind and use JAWS reader on my computer and iPhone. Some information is inaccessible and prevents me from participating.
- I'm blind so some technology is inaccessible.
- Less able to participate in life activities due to age.
- Too much screen and sitting time – on Zoom for work all day.

Barriers to Participating in Online Activities – Software and computing challenges

- Difficulty logging on.
- Difficulty logging on.
- I have a computer (gift) – need help to start.
- I have difficulty logging on.
- I sometimes have difficulty logging on.

Barriers to Participating in Online Activities – Scheduling

- Schedule conflicts.
- Sometimes they're at times when my religion keeps me offline – for religious reasons.
- They're often at times/days I can't use internet for religious reasons.
- Too busy – often meetings and Zooms are overlapping, or conflict with my work schedule.

Barriers to Participating in Online Activities – Other comments

- Ability to use the space where the computer is located.
- Costs of online classes and events.
- I miss seeing the people who are participating. I cannot make new friends/acquaintances during such a structured interaction.
- Often these webinars are not communicative. More of a one way.
- Quickly I get bored or the technology on Zoom presenter's end doesn't work.

APPENDIX D: HOME MODIFICATIONS – OTHER RESPONSES

Home Modifications (13 comments)

Home Modifications – Accessibility improvement

- Brought laundry appliances up to the living level.
- Considering attaching an apartment when size of house becomes undesirable.
- Grab bars were installed for my father, and I use them.
- Had rails put in on outside steps.
- Modified primary bath to a walk-in shower.
- Relocated laundry from basement to enlarged bathroom on 1st floor.
- Two handrails for stairs.

Home Modifications – Assistive technology improvements

- I wear a Life Alert button to get help in case of an emergency.
- iWatch/iPhone with Emergency Medical ID.
- Phone with 911 button capability.

Home Modifications – Energy efficiency improvements

- New windows.
- Sunroom.
- Windows.

Barriers to Making Home Modifications (4 comments)

Barriers to Making Home Modifications – Additional comments

- Don’t how or where to start.
- Finding a competent handyman for small household jobs.
- Lack of adult dwelling unit flexibility.
- Pandemic. Contractors were problematic with masks and public safety overall.

APPENDIX E: TRANSPORTATION METHODS – OTHER RESPONSES

Transportation Methods (10 comments)

Transportation Methods – Commuter Rail / Train / Subway
- Commuter rail. - Commuter rail. - Commuter rail. - Commuter rail and subway (D line). - Commuter rail for trips to Boston. - Train. - Train. - Train. - Use commuter rail (train).

Transportation Methods – Additional comments
- Private car service.

APPENDIX F: ADDITIONAL COMMENTS

Community Services and Programs (29 comments)

Community Services and Programs – Services seniors desire in the community

- Bring back the program for installation of fire alarms by the fire department.
- Can Needham please support having Pickleball courts for us to use. It is a great community exercise option. I have been using the tennis court that has been taped up for Pickleball at Mills Field in Needham. It has allowed me to meet a great number of residents, allowing for exercise, chit chat with new friends, and just a lot of fun. It is a growing sport in retirement communities.
- I have mobility issues. Would appreciate it if a library return box could be created so that I wouldn't have to get out of the car.
- I wish your services were not directed toward the older who are elderly, nothing seems to be directed at the young-old.
- Lifelong Needham Seniors should get free admission to Rosemary Pool.
- Many seniors need help and financial assistance helping seniors pay bills, utilities, rent, food, transportation, help around the house, appointments, errands, home care, and home cleaning. It's an awful situation growing older, living alone, without financial security and being too embarrassed or at a loss in getting help. Maybe free food gift cards for emergency times when we can't make ends meet (and we're not approved for the food bank… which is an embarrassment to go to anyway!)
- Needham residents are expected to do all their own trash and garbage services. We are required to pay for yellow bags for trash collection and all our own transportation costs. Many folks end up paying for private trash pickup services weekly on top of ever-increasing property taxes.
- Needham's people are the best. Our children have been given much in homes, in religious institutions, in education, in sports, in the library, and in medical facilities. The town volunteer ethic is awesome!
- Provide free services for trash pick-up and disposal (hardship for elderly to take trash to the dump who can't afford to pay someone!). If nothing else, the town should give us free trash bags please!
- The dump nickels and dimes people to throw away items. It should be free.
- Would encourage Parks and Rec to line tennis courts for pickleball/multi-use. I have enjoyed meeting others this way of all ages.

Community Services and Programs – Comments about existing community services for seniors

- Fortunately, the Town has services (especially the Senior Center) that are of great benefit for us.
- I am extremely impressed with the services and support that the senior center and the Community Council offer. They are available and offer a wealth of support and information. I attend the senior center for bridge and other activities and have met many wonderful people there. I also commend the senior center for their extraordinary support and services during the pandemic. I often speak to others about how amazing they are. We are lucky seniors to live in such a supportive and helpful community! A huge thanks to all who help to make this town a wonderful place to live!
- I am grateful for the services being offered by the Center at the Heights as well as the Needham Community Council. All sorts of folks work hard to serve the older population which makes up around 25% of Needham residents and they do an excellent job.
- I hope that the senior center could buy or obtain donation to upgrade the gym.
- I was hoping this survey addressed if our local senior center is meeting the needs of the seniors in their 60's. Most of us feel it is not.
- Making friends in a new community at this age very difficult - I go to CATH and that helps.
- Needham is a good town for seniors. Excellent Senior Center and help if needed.
- The Center does a wonderful job meeting many of our needs; their transportation services have been a godsend!
- The programming offered by the Needham COA Center has been outstanding. Without the Zoom classes I would have been very isolated. I know from numerous friends that the Needham COA programming is the local Gold Standard for Senior programming.
- Though I don't often use services at CATH and Community Council, I really appreciate them and know I'll use them in the future. Thank you!

Community Services and Programs – Need for enhanced communication and education related to community services and other areas

- I am blind, I depend on my ability to do a lot online, but websites and apps need to be accessible for me to navigate and interact with them effectively.
- I would like to see more publicly available information on town government policies and practices, both from local initiatives and state and/or federal mandates. Currently available information is generally not user friendly or concise enough to be (reasonably) easily accessed/understood.
- My husband assists me with internet, technology, zoom, ride share set up. I would benefit from education in all these areas as I do rely heavily on him.
- We need better advertising now that we do not have our own town paper which is a serious loss (letters to the editor, political, religious, town issues, town history, articles about special citizens, deaths, marriages).
- Wish there were better avenues in communication. We only get the Hometown Weekly mailed to us each week. Used to receive Needham Times on front lawn once a week. Miss that communication.

Community Services and Programs – Need for assistance finding and contracting with private services

- Could use a list of qualified handymen that are used to working with seniors. Individuals, not a company.
- It would be great if the town would have a list of reliable contractors for people who need services: painters, lawn services, winter plowing services, electricians, plumbers, construction contractors for small and big projects. These contractors could be vetted and be monitored to be sure they complete work to the satisfaction of the elderly residents.
- We could use help with minor tasks, changing high light bulbs, storm windows, moving Passover dishes from the attic. What a great idea for multi-generational interaction!

Transportation (23 comments)

Transportation – Need for enhanced transportation options within Needham

- Has a town shuttle from the Heights to the Junction between 10am and 2 pm Monday through Friday ever been considered?
- I do not drive so need help getting to town for shopping.
- Living off Charles River Street, having a car is a must – there are no sidewalks, minimal/no shoulder along road, heavy traffic, blind spots, minimal lighting at night. Walking/biking for pleasure is very dangerous. There are no conveniences to walk to, and no public transportation is available.
- Need transportation like MetroWest Ride that includes Seabeds Way, senior and disabled, residents, in its route. This service should be 24/7. Sundays for church and farmers market, town square, and Trader Joe's.
- Public transportation has long been an issue with seniors. It has been discussed many times in focus groups. The new housing office is on Highland Ave. with quite a way to walk from the nearest bus stop – big mistake! They could have moved to Reservoir St. or even downtown Needham.
- Seabeds is not conveniently located. It is nearly two miles out of Needham Center.
- The lonely elderly need help when they live alone, can't get out, can't get to the Senior Center. Some are very lonely, lacking human interaction, medical attention, not eating adequately, and are depressed. The elderly need to be noticed and accounted for. Our religious institutions should track their members and assess their needs and where they can help or use each other to make a unified cooperative front to answer these needs in the best environment possible. Vans to get them there. Van rides to town for anyone would be fabulous. I want my town to be inviting, friendly, accessible, alive, needing me like I want to need it.
- We are very far from town at Seabeds. The complex is down a long hill with a steep incline. We a way to get out more frequently.

Transportation – Free or reduced cost ridesharing programs
- I think we should have ride shares at reduced rates for seniors to visit friends, etc. - I use the Lyft program from the Needham Community Council. It is dependable and tracked. - I use the Needham Community Council Lyft program when I need a ride. It has been excellent. They track the ride. - I use the Needham Community Council Lyft service as it is very dependable, and it is tracked. - Using Lyft rides courtesy of Commonwealth Care Alliance as part of my privileges. Praise God for CTS.

Transportation – Need for transportation to medical appointments
- I must take my husband to Boston for his medical appointments. Driving into the city and parking is extremely difficult and stressful for me and taxis or Uber is so expensive and technologically challenging. A town sponsored taxi like we had a few years ago would be so appreciated. - Ride to doctor in Boston. Service was available (I used it twice, and it was great). Apparently, it was abused; please consider having it for elderly people. - Wish I had transportation to doctor appointments outside Needham into Boston. - The elderly need rides to appointments.

Transportation – General lack of transportation options in the area
- I am very concerned that when I cannot drive, transportation is very limited. - There are no local cabs or shuttles in Needham. - There are no options I know of to get transportation other than Uber or Lyft.

Transportation – Additional comments
- As I get older and driving becomes a problem, I will make more use of transport services of various kinds, as I hope to continue living in my house. - I am disabled. Often, I don't go anywhere because all I can afford is a $2 fee for the van provided by the Senior Center. - I would use transportation for seniors if I couldn't drive.

Housing (18 comments)

Housing – Limited housing options for seniors wishing to downsize

- I would like to be able to downsize and move to a smaller place, perhaps a condo. I don't feel there are many affordable options in Needham to do this with all the tear downs and rebuild of $2 million dollar homes. This is an issue for the health and wellbeing of seniors. Needham is going to price itself out of the market for older residents. What will this community be like in 10 more years. Wealthy non-community minded people. It's scary to me.
- My main comment is I love Needham but feel there are very few if any options when one decides that one wants to downsize. I watch the number of condos being developed and while they are one level and not very large, they are very expensive. I live near some and they are over a million dollars, which is unbelievable. It would be nice to see more one level condos or apartments that were less expensive.
- Needham lacks affordable housing options for those who would like to downsize. Anxious to promote two-million-dollar McMansions and desirous of only a very high-income population with deep pockets to pay town taxes. It creates a rich monoculture, lacking the richness of diversity and humanity. Needham ends up with very unfriendly policies for seniors and gives a sense that seniors are not valued, should just move out, not wanted.
- The apathy and lack of progress that town leadership has shown toward addressing real affordability means that we can't afford to live here after I retire and downsize in a few years. All I hear is why Needham can't create more 'middle' or truly affordable housing while towns around us are getting it done with more flexible accessory dwelling unit provisions, zoning reforms, and progressive planning. I feel like we are frogs in boiling water.
- We need apartments for seniors who are not low-income and want to downsize but not pay $2500 per month for a 1-bedroom apartment.

Housing – Lack of affordable housing for seniors

- Housing costs and the increasingly unaffordability of such. I am very worried about where I can afford to go.
- I like living here very much but I could never afford to rent an apartment or buy a house on my own.
- The elderly need financially available housing (modest, clean, well-cared for, walkable, elevators, supervisory help, common rooms, etc.). Current low-income housing is not properly cared for or attractive and welcoming to come home to. I doubt many know where it is hiding.
- Why is the town spending unnecessary money on the town green rather than on more affordable housing.

Housing – Limited availability of housing for seniors
- I have Parkinson's and plan to move to a one level home/condo over the next year – limited availability in Needham. - I couldn't find any senior complexes to rent - not available or rent too high. Took me three months to finally find an apartment (not senior living). - I would like to remain in Needham, but there is no housing available. - Our living arrangement is perfect for me and my husband in our late 70's - a walk-to-everything condominium unit in a large professionally managed building with friendly neighbors, providing the financial stability owning our own unit. There should be more such buildings in Needham.

Housing – Desired changes to accessory dwelling unit rules
- Ease of building an accessory dwelling unit would be most helpful. Providing extra space for caregivers and additional income for seniors on fixed income that may want age gracefully in familiar and comfortable Needham. - I am particularly interested in having accessory dwelling units available in town. Many seniors could stay here and be relatively independent with this kind of support (and many families would benefit, also). - The revised code for building an in-law suite was a great step. How about that add-on being available to another who is looking for a living situation to rent and possibly find the human contact needed that one might feel and that has no local family.

Housing – Additional comments
- Needham is unaffordable to those who wish to age in place. Small homes are becoming scarcer. Seniors don't need or want huge, expensive homes. - The cost of living in Needham has risen substantially. I cannot afford to make repairs to my home. I wish Needham would re-evaluate and find a way to help seniors be able to live out their lives in the town they grew up in and have fond memories of. It seems we are priced out of town which is sad.

Taxes (12 comments)

Taxes – Tax exemptions for seniors

- A reduced real estate tax for seniors might be a nice feature. With constantly increasing taxes and cost of living it might become not affordable.
- As a retired senior, continued increases in local taxes are a major concern and very problematic.
- High real estate taxes.
- If you are interested in helping seniors, I recommend that you speak to those who keep raising our property taxes.
- Needham is not a senior friendly town. Other towns show their honor and respect for the senior populations by giving them a tax break and having them pay only half of their tax with certain conditions and stipulations.
- Reduction of property taxes.
- Taxes. I wish that the town powers would stop competing with neighboring towns. They build a new school...we build a new school. They build a new fire house...we build two new fire houses. They have brick intersections...we have brick intersections.
- Taxes and cost of living in Needham will make it difficult to retire and stay in town.
- The continued increase of local taxes and living expenses (heating, food, medical, services, etc.) make it very difficult for seniors (and those on fixed incomes) to live in Needham.
- There are no property tax breaks offered, particularly for seniors who save the town money by not having children in the school system. Needham has little consideration for the fixed budgets of its seniors. Increased fees are ongoing.
- You could give seniors a real estate tax break so they can stay in their homes. With all the big houses getting built, you should have enough tax money!

Taxes – Additional comments

- The tax bill should indicate where our tax money goes. How much goes to schools, waste management, police, fire, etc.? There is no transparency with town government regarding where our tax money goes. I have lived in Needham for over 50 years and now I have soured because of what I feel in unnecessary spending. I feel Needham is trying to keep up with other. We, older people, have been a big part of this town and now we are being phased out. Start taking care of the older people on fixed incomes.

Community Infrastructure and Retail (10 comments)

Community Infrastructure and Retail – Community infrastructure and physical plant recommendations

- I might go out more often if suitable parking is available at the places I need to attend. Available parking is an issue.
- I walk from home for exercise. My back sometimes acts up, but benches seem rare.
- Instead of destroying the bridge that connected Needham to Newton, this bridge should have become rails to trails connection and beyond for longer walks or bicycling off road.
- It is difficult to get into buildings and doctor's offices. They often have no push button to open automatically when I bring friends for appointments - they use walkers, so it is hard for them.
- Making the town and streets more bike friendly is important.
- More benches to sit on around town.

Community Infrastructure and Retail – Business and retail recommendations

- A town of 30,000 should have competition to select for food shopping.
- I think that the price of groceries in Needham for people living on a fixed income is ridiculous. Need more options.
- Needham should allow the sale of recreational cannabis, discounts at the dispensary and cannabis delivery.
- The elderly need retail shops to answer basic needs. The elderly need restaurants like a diner, ice cream shop to meet and sit with a cup of coffee, breakfast, sandwich, to talk with friends and can afford it. It happens now to some extent as McDonalds. More drug stores, cleaners, etc. to pick-up and deliver (reduced charges). Elderly people move out of town against their own wills because they can't get their needs answered here. But their lives and friends are here.

SURVEY ON HEALTHY AGING IN NEEDHAM

Directions

The Needham Department of Health & Human Services is conducting this survey of Needham residents who are 60 years of age and older to gather their opinions and assess their needs. The results will be used to help program and service planning for Town departments and community-based organizations.

This survey should take approximately 15 minutes to complete.

Completed surveys can be dropped off at the Rosemary Recreation Complex, the Needham Community Council, the Center at the Heights, or at Town Hall with the Clerk or Treasurer.

If you would prefer to mail back the survey, you can place it in an envelope and mail it to:

Lynn Schoeff
Needham Department of Public Health
178 Rosemary Street
Needham, MA 02494

This survey is also available online. To take part in the survey online, just type the following website address into an internet browser such as Google Chrome, Internet Explorer, or Safari. The survey can be accessed both on a computer and on an iPad or other tablet device.

Website Address: https://survey.alchemer.com/s3/6895076/needham-healthy-aging

Thank you very much for your time.

These first questions are about you

1. How do you identify your gender? (*choose <u>one</u>*)
- 1 ☐ Female
- 2 ☐ Male
- 3 ☐ Transgender Female
- 4 ☐ Transgender Male
- 5 ☐ Non-binary or gender non-conforming
- 6 ☐ Some other way
- 7 ☐ Prefer not to answer

2. How do you identify your race or ethnicity? (*choose <u>all</u> that apply*)
- 1 ☐ Black or African American
- 1 ☐ Asian
- 1 ☐ Hispanic or Latino(a)
- 1 ☐ Native American or Alaska Native
- 1 ☐ White
- 1 ☐ Native Hawaiian or Pacific Islander
- 1 ☐ Some other way
- 1 ☐ Prefer not to answer

3. What is your age? (age in years)**: _____**

4. How many people, including yourself, live in your household?
(number of people)**: _____**

5. What type of home do you currently live in? (*choose <u>one</u>*)
- 1 ☐ Single family home
- 2 ☐ Town home or duplex
- 3 ☐ Apartment
- 4 ☐ Condominium
- 5 ☐ Accessory dwelling unit (attached apartment)
- 6 ☐ Other, please specify below:

6. Which of the following best describes the setting in which you currently live? (*choose <u>one</u>*)
- 1 ☐ Private residence
- 2 ☐ Affordable housing (Chapter 40B)
- 3 ☐ Needham Housing Authority property
- 4 ☐ Senior housing
- 5 ☐ Long-term care facility
- 6 ☐ Other, please specify below:

7. In general, when compared to most people your age, how would you rate your health? (*choose <u>one</u>*)
- 1 ☐ Excellent
- 2 ☐ Very Good
- 3 ☐ Good
- 4 ☐ Fair
- 5 ☐ Poor

8. Have you ever provided care for another adult living in your household who needed assistance with everyday tasks? (*choose <u>one</u>*)
- 1 ☐ Yes, I am currently providing care
- 2 ☐ In the past, but not currently
- 3 ☐ No

9. Please estimate your annual household income before taxes in 2022. (*choose <u>one</u>*)
- 1 ☐ Less than $25,000
- 2 ☐ $25,000 to $49,999
- 3 ☐ $50,000 to $74,999
- 4 ☐ $75,000 to $99,999
- 5 ☐ $100,000 to $149,999
- 6 ☐ $150,000 to $199,999
- 7 ☐ $200,000 to $249,999
- 8 ☐ $250,000 or more

These questions are about social connections

10. How often do you feel isolated or lonely (lacking companionship, feel left out, isolated from others)? (*choose <u>one</u>*)
- 1 ☐ Never
- 2 ☐ Rarely
- 3 ☐ Sometimes
- 4 ☐ Often

11. In comparison to before COVID-19, how isolated or lonely do you feel <u>now</u>? (*choose <u>one</u>*)
- 1 ☐ Much less isolated or lonely now
- 2 ☐ A little less isolated or lonely now
- 3 ☐ No change
- 4 ☐ A little more isolated or lonely now
- 5 ☐ Much more isolated or lonely now

12. How connected do you feel to your community? (*choose <u>one</u>*)
- 1 ☐ Extremely connected
- 2 ☐ Very connected
- 3 ☐ Somewhat connected
- 4 ☐ Not very connected
- 5 ☐ Not at all connected

13. In comparison to before COVID-19, how connected to your community do you feel <u>now</u>? (*choose <u>one</u>*)
- 1 ☐ Much more connected now
- 2 ☐ A little more connected now
- 3 ☐ No change
- 4 ☐ A little less connected now
- 5 ☐ Much less connected now

14. How often do you usually speak with people in the following ways? (*choose one per row*)

	Daily	*Every week*	*Twice a month*	*Once a month*	*Less than once a month*	*Hardly Ever*
a) In person	1☐	2☐	3☐	4☐	5☐	6☐
b) Telephone or cell phone	1☐	2☐	3☐	4☐	5☐	6☐
c) Video call (Zoom, Facetime)	1☐	2☐	3☐	4☐	5☐	6☐

15. In comparison to before COVID-19, how frequently are you speaking with people now? (*choose one*)

1☐ I speak with people more than I did before the pandemic
2☐ I speak with people about the same as I did before the pandemic
3☐ I speak with people less than I did before the pandemic

These questions are about food and cost of living

16. Did any of the following things happen to you during the past 12 months? (*choose one per row*)

	No	*Yes*
a) You were not able to prepare or cook food because of health problems	1☐	2☐
b) You had difficulty finding the kind of food that you wanted	1☐	2☐
c) You felt that you couldn't afford to eat balanced meals	1☐	2☐
d) You worried that your food would run out before you could get more	1☐	2☐
e) You had difficulty getting transportation to the grocery store	1☐	2☐
f) You had difficulty having groceries delivered	1☐	2☐

17. How worried are you about the cost of living (food, gas, heating oil, electric, housing) and its impact on your financial security this year? (*choose one*)

1☐ Not at all worried
2☐ Not very worried
3☐ Somewhat worried
4☐ Very worried
5☐ Extremely worried

These questions are about errands and activities

18. How comfortable are you leaving your home to run errands, go to doctor appointments, get groceries, or participate in social activities? (*choose one*)

1☐ Extremely comfortable
2☐ Very comfortable
3☐ Somewhat comfortable
4☐ Not very comfortable
5☐ Not at all comfortable

19. In comparison to before COVID-19, how comfortable are you leaving your home to run errands, attend appointments, or participate in social activities now? (*choose one*)

1☐ Much more comfortable now
2☐ A little more comfortable now
3☐ No change
4☐ A little less comfortable now
5☐ Much less comfortable now

20. How often do you currently participate in social groups, classes, recreation, or cultural events in person? (*choose one*)

1☐ Daily
2☐ Every week
3☐ Twice a month
4☐ Once a month
5☐ Less than once a month
6☐ Never

21. How often do you currently participate in social groups, classes, recreation, or cultural events online (such as Zoom)? (*choose one*)

1☐ Daily
2☐ Every week
3☐ Twice a month
4☐ Once a month
5☐ Less than once a month
6☐ Never

22. During the past 6 months, have you had difficulty accessing health care due to lack of provider availability or long wait times? (*choose one*)

1 ☐ I have not needed health care in the past 6 months
2 ☐ No
3 ☐ Yes

23. During the past 6 months, have you delayed seeking health care (appointments, tests, procedures) due to concerns about the COVID-19 pandemic? (*choose one*)

1 ☐ I have not needed health care in the past 6 months
2 ☐ No
3 ☐ Yes

24. Which of the following factors, if any, caused you to delay seeking health care during the past 6 months? (*choose all that apply*)

1 ☐ Not applicable – I did not delay seeking health care or did not need care during the past 6 months
1 ☐ I did not have transportation
1 ☐ I was worried about exposure to COVID-19
1 ☐ I did not have anyone to go with me
1 ☐ Some other reason, please describe below:

These questions are about technology

25. How often do you typically use the internet for things like email, getting information, paying bills, or purchasing? This includes access from home, work, a mobile device, or someplace else. (*choose one*)

1 ☐ Daily
2 ☐ Every week
3 ☐ Twice a month
4 ☐ Once a month
5 ☐ Less than once a month
6 ☐ Never go online

26. Do you have internet at home (including internet access through a smartphone)? (*choose one*)

1 ☐ Yes
2 ☐ No

27. Which of the following factors, if any, prevent you from having internet at home? (*choose all that apply*)

1 ☐ Not applicable – I have internet at home
1 ☐ I am not interested in having internet at home
1 ☐ It costs too much money
1 ☐ I don't have anyone to help me set it up or use it
1 ☐ Some other reason, please describe below:

28. Do you currently use any of the following types of technology? (*choose one*)

	Yes	*No*
a) Smart phone or mobile phone	1 ☐	2 ☐
b) Desktop computer	1 ☐	2 ☐
c) Laptop computer	1 ☐	2 ☐
d) Tablet (such as iPad, Samsung, Fire)	1 ☐	2 ☐
e) Electronic reader (such as Kindle)	1 ☐	2 ☐

29. Do you prefer participating in programs (workshops, classes, cultural events, discussion groups, fitness) in person or online? (*choose one*)

1 ☐ In person
2 ☐ Online
3 ☐ I have no preference

30. Do you ever feel like you can't participate in certain activities because they are online? (*choose one*)

1 ☐ No
2 ☐ Yes

31. Which of the following factors, if any, prevent you from participating in online activities? (*choose all that apply*)

1 ☐ Not applicable – I have no interest in participating in online activities
1 ☐ None – I am able to participate when I want
1 ☐ I can't afford a computer or internet
1 ☐ I don't know how to use the technology
1 ☐ I don't have a good enough internet connection
1 ☐ I don't have the right equipment (video camera, microphone)
1 ☐ Some other reason, please describe below:

32. Where do you get technology support when you need it? (*choose all that apply*)

1 ☐ Online search, chat groups
1 ☐ A store or service (Best Buy, Apple Store)
1 ☐ From family or friends
1 ☐ At the library
1 ☐ At the Center at the Heights (senior center)
1 ☐ Community Council
1 ☐ Other, please describe below:

The next questions are about modifications to your home

33. Have you made any of the following modifications to your home to enable you to stay there as you age? (*choose <u>one</u> per row*)

	Yes	*No*	*Not Sure*
a) A ramp, wider doorways, chairlift, or elevator to allow easier access into or within your home	1☐	2☐	3☐
b) Bathroom modifications such as grab bars, handrails, a higher toilet, or non-slip tiles	1☐	2☐	3☐
c) Added a bedroom, bathroom, and/or kitchen on the first floor	1☐	2☐	3☐
d) Improved lighting	1☐	2☐	3☐
e) Installed a medical emergency response system that notifies others in case of an emergency	1☐	2☐	3☐
f) Added an accessory dwelling unit (an attached apartment)	1☐	2☐	3☐
g) Other, please specify:	1☐	2☐	3☐

34. Have you wanted to make modifications to your home, but were not able to? (*choose <u>one</u>*)

1☐Yes 2☐No

35. If you were not able to make modifications to your home, what has prevented you from making these changes? (*choose <u>one</u> per row*)

	Yes	*No*	*Not Sure*
a) I don't own the property and am not allowed to make modifications	1☐	2☐	3☐
b) Cost of the modification	1☐	2☐	3☐
c) Architecture of the home	1☐	2☐	3☐
d) Building or zoning codes	1☐	2☐	3☐
e) Finding a contractor	1☐	2☐	3☐
f) Other, please specify:	1☐	2☐	3☐

The next questions are about community infrastructure and transportation

36. How often do you need transportation outside Needham for the following? (*choose <u>one</u> per row*)

	Very Often	*Sometimes*	*Rarely*	*Never*
a) Work	1☐	2☐	3☐	4☐
b) Non-medical appointments	1☐	2☐	3☐	4☐
c) Shopping	1☐	2☐	3☐	4☐
d) Visiting friends or relatives	1☐	2☐	3☐	4☐
e) Medical appointments	1☐	2☐	3☐	4☐

37. How often do you currently use the following ways to get yourself around Needham for trips like shopping, visiting the doctor, visiting friends, and running errands? (*choose <u>one</u> per row*)

	Very Often	*Sometimes*	*Rarely*	*Never*
a) Drive yourself	1☐	2☐	3☐	4☐
b) Have others drive you	1☐	2☐	3☐	4☐
c) Walk	1☐	2☐	3☐	4☐
d) Ride a bike	1☐	2☐	3☐	4☐
e) Use public bus or shuttle	1☐	2☐	3☐	4☐
f) Take a taxi or cab	1☐	2☐	3☐	4☐
g) Use ride-sharing service like Uber or Lyft	1☐	2☐	3☐	4☐
h) Use a special transportation service, such as one for seniors or persons with disabilities	1☐	2☐	3☐	4☐
i) Other, please specify:	1☐	2☐	3☐	4☐

38. Please share any additional comments on the next page.

Senior Assessment 2022
Focus Group Discussion Guide

Introduction:
Facilitators introduce themselves and thank participants. Then read or paraphrase the following.

Background:
The Needham Department of Health & Human Services is gathering information about older adults and their experiences in Needham. The purpose of this community assessment is to help Town departments and community service organizations develop the right programs and to assess ongoing issues caused by the Covid pandemic.

The last senior assessment was conducted in 2016. The information helped direct program planning, support successful grant applications, and, more concretely, led to the passage of the accessory dwelling unit bylaw.

A piece of this assessment process is speaking with directly with Needham residents to learn your thoughts about Needham as a place to age, about benefits and challenges of living here, and about how the Covid pandemic has affected your daily lives. We are also conducting a survey (we will talk about that later), and interviewing leaders in town.

Themes that emerge from this and other group discussions will be summarized and compiled into a report to be shared with the public.

Group basics:
1. Please share your thoughts, opinions and reflections and ask that you speak with each other rather than to me.
2. There are no wrong answers! You are the experts, and we look forward to learning from you.
3. We want to hear from everyone, so as a facilitator, I may ask for different participant thoughts on a particular topic or question, especially if I haven't heard from you yet.
4. We will be taking notes to most accurately reflect the information you share with us.
5. You can decide to no longer participate at any time.
6. The group discussion is planned to last an hour total.
7. Are there any questions for us before we begin?

Opening questions:

1. Let's go around and introduce ourselves. Please also say something about the features of Needham that make it a good place to live as you age.

2. What problems do you encounter in Needham as an older person?

3. What is missing from Needham that would enhance your health, social participation, and security?

Making a home in Needham:

4. Is your home laid out to be age-friendly? That is, can everything you need (bedroom, bathroom, kitchen, laundry) be on one floor?

5. Have you made any structural changes to make your home easier to live in as you age?

Social connections:

6. How did your social connections change during the pandemic?

7. Have those changes continued?

8. Did you participate in any activities during the pandemic that you would not have otherwise tried?

9. Were you, or people you know, troubled by isolation during the pandemic?

Using technology:

10. Has your use of technology changed since the beginning of the pandemic? If so, how?

11. Were you, or people you know, cut off from activities because of a lack of (or difficulty with) technology?

12. Did you use telehealth during the pandemic?
    a. What did you think of it?
    b. Will you continue using telehealth after the pandemic danger is over?

Access to healthy meals:

13. Please talk about your access to healthy meals and healthy ingredients.
    a. Do you get prepared meals? Do you cook your own meals? Is it easy to get to grocery stores?

Alcohol and other drugs:

14. When you think about alcohol, marijuana, and other drug use (including prescription drugs) among older adults in Needham, what immediately comes to mind? Are there specific things that you are concerned about?

15. What attitudes or behaviors among older adults related to alcohol, marijuana, or other drug use do you think should change?

(Note: Karen would like to know what contributes to older adults' substance use in Needham. If you can finesse that into the discussion, she would appreciate it.)

Thank you all,

As I said at the beginning, we are also conducting a survey that touch on these topics and a few others. It is available in paper form and online. Please take some time to fill out the survey. And please encourage your friends to do so as well.

Copies of the survey are at the Needham Community Council, the Center at the Heights, Rosemary Recreation Center, and Town Hall.

Assessment of Healthy Aging in Needham
Key Informant Interview List

Maureen Callahan	District Legislative Aide to Representative Denise Garlick
Marianne Cooley	Chair, Needham Select Board
Edward Cosgrove	Chair, Needham Board of Health; Board Member, Council on Aging
Blair Fetzer	Housing Manager, Needham Housing Authority
Kate Fitzpatrick	Needham Town Manager
Rep. Denise Garlick	Massachusetts State Representative
Tara Gurge	Assistant Director, Needham Public Health Division
Rebecca Hall	Needham Traveling Meals Program
Moe Handel	Needham Exchange Club
Paula Jacobson	Director, YMCA Charles River Branch
Aicha Kelley	Assistant Director, Aging Services Division
Katie King	Needham Assistant Town Manager
Demetri Kyriakis	Assistant Director, Needham Public Library
Rev. Ryan Marshall	Co-chair, Needham Interfaith Clergy Association
Timothy Muir McDonald	Director, Needham Department of Health and Human Services
Jeanne McKnight	Vice Chair, Needham Planning Board
Jessica Moss	Assistant Director, Aging Services Division
Stacey Mulroy	Director, Needham Park and Recreation Department
Sandra Robinson	Director, Needham Community Council
Curtis Rush	Housing Manager, Needham Housing Authority
Nayda Sanchez	Leasing Director, Needham Housing Authority
LaTanya Steele	Director, Needham Aging Services Division
Tiffany Zike	Assistant Director, Needham Public Health Division