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Aging in Scituate: An Assessment of Services and Programs for Our Community

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Aging in Scituate:

An Assessment of Services and Programs for Our Community

*Center for Social & Demographic Research on Aging
Gerontology Institute
John W. McCormack Graduate School of Policy & Global Studies
University of Massachusetts Boston*



COUNCIL ON AGING
TOWN OF SCITUATE, MASSACHUSETTS

February 2015

To the Citizens of Scituate:

The Town of Scituate, under the auspices of the Council on Aging, is pleased to present the findings of the Needs Assessment Study conducted by the Center for Social and Demographic Research on Aging at UMass Boston. This study was initiated by a group of seniors through a petition article at the April 2014 town meeting. With the support of the Board of Selectmen and Advisory Committee it was funded with \$25,000 of town funds. Following town meeting, the Selectmen immediately awarded a contract for the study and a working group was formed to advise on the process. This group consisted of members from the Council on Aging Board, Senior Center staff, and citizens from the Friends of Scituate Seniors.

The Town is grateful for the work the Center has performed on its behalf. Many hours were spent with the working group and key community members as well as pilot testers who assisted in developing effective questions for our survey and a focus group in order to gather the most comprehensive, insightful and useful data for this report.

The primary objective of the Needs Assessment Study was to examine the service and program needs of our 60 and older population as well as the Baby Boomer generation of 45 to 59. These age groups were determined to be important sources of information to help us best guide our future direction and insure we are providing the services and programs our residents and caregivers need. Special attention was given to areas in which needs are not adequately being met. The Council on Aging will use the results of this Study to support both short and long-term strategic planning in the areas of services, budgeting, staffing, volunteers, training, program development, events and activities and building space needs.

There was a more than 30% response rate to the 2,000 surveys mailed. This provides for a good sampling of current thoughts and opinions. Our Town and our seniors will be going through a lot of changes in the next few years and we are grateful for the support of this initiative so we can more completely understand and respond to the needs and challenges of our growing senior community.

Senior Centers want to offer comfort, connection, stimulation, assistance, information and activity for older adults whether they are being served or serving others. It is our hope that this study will assist the community in becoming more aware of the Senior Center, and to appreciate the importance of providing comprehensive services and appropriate facilities in serving older adults.

Sincerely,

Linda Presutti Hayes, Director
Scituate Council on Aging

Aging in Scituate: An Assessment of Services and Programs for Our Community

Commissioned by the Town of Scituate
Town of Scituate Council on Aging

February 2015

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Executive Summary

This report describes collaborative efforts undertaken by the Town of Scituate and its Council on Aging (COA), and the Center for Social and Demographic Research on Aging within the Gerontology Institute at the University of Massachusetts Boston. Beginning in Summer 2014, these organizations partnered to conduct a needs assessment study to investigate the needs, interests, preferences, and opinions of the Town’s older resident population, with respect to living and aging in Scituate. The focus of this report is on two cohorts of Scituate residents—those aged 45 to 59 (referred to as “Boomers”), and the cohort of individuals who are currently aged 60 and over (“Seniors”).

During this assessment, multiple research methods were utilized to create a multidimensional overview of the Town’s older residents that could be used to plan and implement current and future services for older adults in Scituate. We began the process by examining public data from the U.S. Census Bureau to describe basic demographic characteristics, as well as economic traits, disability status, and living situations of older people living in the community. Early in the project we met with the Town Administrator, the Director of the COA, and members of the Steering Committee of the COA developed for this project to discuss their concerns about current and future aging-related needs of the Town. We used information gathered through these conversations to develop the main research instrument—a resident survey, administered to a sample of residents from both age cohorts. We also conducted a focus group to obtain insight from stakeholders who work closely with populations who are at high risk of experiencing unmet need in the community. We conducted four key informant interviews to gain input from leaders in the community who have broad experience with Scituate residents, including older adults. Finally, we conducted a comparison of Senior Centers in five municipalities to assess how needs of older adults are met in other communities. Collectively, the contents of this report are intended to inform the Town of Scituate, its COA, other offices within the Town that have a stake in helping to secure the well-being of Scituate’s residents, and organizations that provide services to older people throughout the Town and region. Additionally, those who advocate for older residents and community members at large will find use for the information provided within this report.

Study Highlights

- A substantial increase in the number of older residents has occurred in recent decades. By 2030, one-third of the Scituate population is expected to be age 60 or older.
- A large share of the tax base in Scituate is made up of older residents. Currently, four out of 10 homeowners in Scituate are age 60 or older.
- Although most Scituate Boomers and Seniors have adequate incomes, 23% of Scituate households headed by an adult age 65 or older have incomes less than \$25,000 annually.

- Disability is common in later life: about one-third of older adults age 65 or older in Scituate have at least one disability.
- Scituate Boomers and Seniors are highly committed to the community. Three-quarters of Seniors indicate it is “very important” to them personally to live in Scituate as long as possible. More than 90% report a sense of belonging in the community, and over 90% feel safe in their neighborhoods.
- Some older residents perceive a poor fit with their current housing. One-quarter of Scituate homeowners age 80 or older report that their home requires modifications to improve their ability to live in it over the next 5 years; among these homeowners, two-thirds are unable to afford needed modifications. Some Scituate residents would like to downsize their current housing situation but do not see opportunities to do so without leaving Scituate. New housing units are being developed in Scituate, which may help alleviate some of the challenges for older adults to age in the community.
- The cost of living is a worry for many Scituate seniors. Expenses and property taxes are the most frequently cited concerns about living in Scituate as respondents grow older.
- Limited transportation options are a concern for many Scituate residents. Many older adults continue to drive well into later life, and some modify their driving behavior in ways that may improve safety, including avoiding night driving and expressway driving. Unfortunately, modifying driving behaviors may often restrict opportunities to participate and socialize. Few good alternatives to driving oneself in Scituate are perceived by Boomers and Seniors. Expanded public transportation options would be welcomed in the community.
- Unmet needs for assistance are evident. Segments of the community struggle with poor physical or mental health, economic insecurity, and social isolation. Many Boomers and Seniors provide care for relatives or friends who need long term assistance due to health problems or a disabling condition. Many caregivers find the demands associated with this activity difficult to manage.
- The Scituate Council on Aging provides a variety of services and programs, but many older Scituate residents do not take advantage of these opportunities. Lack of knowledge about COA offerings is common. Boomer and Senior residents place high value on the programs and services offered by the COA, and the quality of programs and staff is rated as high. The unappealing physical space and limited parking for the current Senior Center are disincentives to participation, according to many respondents.
- Survey respondent rankings of priorities for future programming suggest that expansion of programs would be welcomed. Boomers and younger Seniors may be especially receptive to workshops focusing on retirement planning, and programs designed to support caregivers. Residents are receptive to locating a Social Adult Day Care program in Scituate.

- Compared to communities of similar size and selected communities nearby, the size of the Scituate Senior Center is small. Restrictions on the number and variety of programs that can be offered due to physical space limitations serve as a disincentive for many residents to participate.
- Residents and town leaders agree that responding to the growing older population is important. Offices and organizations throughout Scituate are affected by the shifting demographic profile of the community. Working together across offices and organizations is seen as a priority in addressing increased demand for services. Establishing improved space for COA activities and services is recognized as a priority for the community.

Acknowledgements

The authors wish to acknowledge the Town of Scituate Council on Aging staff for their invaluable contributions to this study. We especially thank Director Linda P. Hayes for providing leadership as the scope of the project was being developed, and throughout as components of the study were carried through. Early guidance from Town Administrator Patricia Vinchesi was important in developing the project. Input from the Steering Committee established to help guide this study was essential in identifying research questions, developing survey and interview content, and bringing the project to a successful conclusion. Key informants (the Town Administrator, the Police Chief, the Fire Chief, and the COA Liaison from the Board of Selectmen) and participants of the focus group (representatives from the Town of Scituate COA outreach, Police Department, Fire Department, Veterans office, Housing Authority, Animal Control, and S.A.N.D.S.) provided valuable insights. We owe special gratitude to the many residents of Scituate who supported our data collection efforts by taking the time to complete surveys.

Scituate Council on Aging

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Dale Balog
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Laura Minier, Social Services Manager of COA
Joanne Ball, President of Friends of Scituate Seniors
Carol King, Member of Friends of Scituate Seniors

The authors also thank the following Directors of Councils on Aging in communities throughout Massachusetts, who shared information about their own programs and services: Barbara Farnsworth, Hingham; Carol Hamilton, Marshfield; Roseann Robillard, Newburyport; Peggy Bryan, Rockland; Jan Timmons, Sandwich.

The authors, Jan E. Mutchler, Hayley Gleason, Ceara R. Somerville, Maryam Khaniyan, and Bernard A. Steinman from the University of Massachusetts Boston, are responsible for the contents of this report; however, the research could not have been completed without the cooperation and efforts of all those mentioned above.

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Introduction

The population of the Town of Scituate is aging, with its proportion of residents age 60 and over expected to grow more rapidly than any other age group over the next two decades. The Scituate Council on Aging (hereafter, COA) is an important and valued resource, operating as a point of contact for older residents who seek services to promote independent, healthy, and fulfilling lives. As the demographics of Scituate shift toward a population that is older and living longer, demand for senior services will increase over time. Planning is necessary to assure that the Town is adequately prepared to meet the challenges and to capitalize on opportunities that an aging population will present. Thus, it is increasingly necessary for those who provide services and amenities in the Town to understand stakeholder perspectives with regard to the aging-related needs of Scituate residents. Additionally, given the high rates of public engagement among residents age 60 and older, policymakers who are proactive about addressing the needs of older adults will benefit from awareness of shifting demographic trends and their implications for policy.

This report presents research findings from a study conducted by the Center for Social and Demographic Research on Aging at the University of Massachusetts Boston (hereafter, UMass Boston), in collaboration with the Town of Scituate and its COA. The purpose of this study was to investigate and document current and future needs and preferences of Scituate's older residents. Toward this end, a resident survey was developed to identify concerns related to aging in Scituate, with an emphasis on services and amenities that facilitate aging in place, as well as qualities of the community that influence livability for residents of all ages. Survey results presented in this report are accompanied by data from other sources, including public demographic data from the U.S. Census, usage data provided by the COA, and insights developed from key informant interviews and a focus group.

Data collection focused on two resident cohorts—those age 60 and older (referred to in this report as “Seniors”) who are currently eligible to participate in programs and services provided by the COA; and a younger cohort, age 45 to 59 (referred to as “Boomers”) who will become eligible to participate in programs and services during the next decade¹. The contents of this report are intended to inform planning by the Town and the Scituate COA. In addition, contents may be of interest to community stakeholders in other Town offices, to public and private organizations that operate programs, provide services, and/or advocate for older adult residents in Scituate, and as a source of information for the community at large.

Background and Literature Review

The Town of Scituate, Massachusetts is a coastal community located on the South Shore of Massachusetts, approximately halfway between Boston and Plymouth. The community provides numerous amenities to its residents, including ready access to beaches and green

¹ In this report, we use the designations “Boomers” and “Seniors” to facilitate reporting of resident survey results by age groups that differ according to the respondents' current eligibility for Council on Aging

space, stable neighborhoods, and access to the commuter rail.² The Scituate COA is a department within the Town, with a defined purpose to “identify the unique needs and interests of (Scituate’s) senior citizens and implement programs that will enhance the quality of life, independence and physical and emotional well-being of a growing aging community.”³ The COA meets its mission by offering programs and services through its Senior Center on Brook Street and other sites, by cooperating with other town offices and organizations working in the area to meet the needs of seniors, and by providing leadership in the community around aging issues.

In 2010, 24% of Scituate’s 18,000 residents were age 60 or older. The number of seniors in Scituate is projected to grow substantially over the next 20 years, even as the population’s size overall remains relatively stable. By 2030, roughly 1 out of every 3 Scituate residents will be age 60 and older, representing nearly 6,000 individuals. The Town has experienced slow population growth in recent decades; thus, growth in the size of the older population is expected to be in large part a result of middle-aged residents “aging in place.”

The literature establishes an overwhelming preference among older adults to remain in their homes and communities as long as possible (AARP, 2005). Nevertheless, a number of common aging-related circumstances have been identified that often challenge the ability of individuals to age successfully in their homes, and strain community resources as they target services to their older residents. For instance, many older adults experience physical and social changes that can threaten their independence and wellbeing, especially if appropriate programs and services do not address those changes. In addition, older individuals who live on fixed incomes may experience new financial constraints that limit their choices and reduce their quality of life in retirement.

In communities that actively promote aging in place, older residents may be better able to retain their independence and maintain valued social relationships. Communities that provide support to address aging-related needs often retain a larger share of vital older residents, and in turn benefit from experiences and the local commitment and civic engagement that long-term residents may contribute. At the same time, promoting wellbeing and health through supportive services is likely to reduce demands on resources that are associated with dependence and frailty.

The contents of this report describe research conducted from Summer through Fall 2014 to assess the aging-related needs and concerns of current and future cohorts of older residents in Scituate. We employed a mixed-method approach to evaluate the perceptions of residents with respect to programs and services provided by or accessed through the Town’s COA, with an emphasis on currently eligible residents, and younger residents who will become eligible for services during the coming 15 years. Development of research items, including survey questions and interview/focus group protocols, were guided by research literature in gerontology, which describes ways in which communities can become more “livable.” According to Nelson and Guengerich (2009), livable communities

² Material drawn from “Scituate Economic Development Study: Current Conditions” a report completed for the Town of Scituate by the Metropolitan Area Planning Council (March, 2014).

³ Material drawn from the January/February 2015 Newsletter posted on the Town of Scituate Council on Aging website <http://www.scituatema.gov/council-on-aging>

have features that allow older adults to maintain their independence and quality of life as they age and retire. Key components of livability include accessible housing choices that older adults can afford on fixed incomes, as well as adequate and appropriate transportation options, and targeted community services that address specific needs of older people. These components are discussed in greater detail below.

Housing

The research literature makes clear that in order for older residents to age in place successfully, housing options must accommodate the changing physical, social, and financial circumstances that often accompany aging. For many older residents, the home may serve not only as a source of shelter and protection, but also as a platform for maintaining social networks and connecting residents to amenities in the neighborhoods where they live. Homes may also be the basis for valued personal memories that connect individuals with their past. Finally, homes may be an important source of financial security, as home equity is often a significant source of wealth held by many older people.

The attachment that many older people have to their homes is often substantial. Nevertheless, over time, the home may no longer be a good “fit” for the individual (Pynoos, Steinman, Nguyen, & Bresette, 2012). Changing family size and resources may result in homes that are too large for current needs or too cumbersome to maintain. Even when individuals are no longer paying mortgages, expenses associated with property taxes, insurance, and regular upkeep can easily exceed the resources that many older adults have available to them. Changes in physical functioning that result in disability can make it difficult or impossible for individuals to use certain attributes of their homes safely, such as stairs and bathroom fixtures, unless they are adapted. Home modifications including railings on stairs, grab bars in bath tubs and showers, no-step entryways or ramps leading into the home, as well as adequate lighting throughout the home may continue to support the safety and security of older people. Unfortunately, in many cases residents cannot afford the home modifications they need, and public resources available to pay for them are often limited.

Housing options that fit the budgets of older residents, especially those that include adaptive features such as home modifications or universal design elements, can make it possible for residents with physical limitations to remain independent in their homes and communities. In addition, housing that blends shelter and services, such as assisted living or continuing care retirement communities, may allow individuals to remain relatively independent and socially engaged with others, even if they are no longer able to stay in their homes. Community attributes, including safe, undamaged and uninterrupted sidewalks and pedestrian street-crossings that provide adequate time to cross busy intersections, can facilitate healthy aging and ensure security, safety, and independence among active older and younger residents alike.

Transportation

The research literature suggests that appropriate and adequate transportation options may also support aging in place by providing individuals with access to work or volunteer activities, social supports, needed goods, and amenities, and by promoting engagement with others in the community. For a majority of Americans, local and regional travel needs

are typically met using private transportation, including a large percentage of individuals who drive their own automobiles well into old age. Compared to older drivers, older adults who do not drive often report lower quality of life, reduced social involvement, and increased isolation (AARP, 2005). As a result, many continue to drive even when it may be impractical, unsafe, or when there are more appropriate alternatives available to them.

Public transportation is limited throughout Scituate. The MBTA commuter rail has two stations within the Town—Greenbush and North Scituate—which provide service to Boston with stops in nearby communities. Yet Scituate is not served by the MBTA subway (the “T”) and does not have bus service for local travel. Communities like Scituate may promote quality of life and social engagement among older people by supporting convenient, affordable, and reliable local transportation options for residents who are unable to drive safely or who prefer to travel using public transportation options or other alternatives.

Community Features & Services

Scituate’s residents are fortunate to have access to many local features, amenities, and services that support their evolving aging-related needs. Highly livable communities require adequate access to a variety of home and community based services, as well as public and commercial amenities. For instance, older adults who have mobility difficulties or who can no longer drive are likely to benefit from access to medical and social services that can be delivered directly to their homes. Similarly, programs that connect older residents with affordable assistance doing home and yard maintenance can help protect property values and improve neighborhoods where older people live. Safe and “walkable” commercial and entertainment districts are valued by all residents regardless of their age, but may be of particular importance to those who have transportation limitations. Finally, communities can also provide opportunities for social engagement and participation through support of volunteer programs, learning opportunities, exercise programs, and social activities that help community members remain active and engaged.

Within Scituate, many of the services that are available to older residents are administered through or referred by the Town’s COA. The Scituate COA is a municipal entity charged with advocating for Scituate’s older residents, their families, and caregivers, as well as providing programs and services to assist and enrich the lives of older adults in the Town. The Senior Center on Brook Street functions as one of several locations where older adults may access programs and services offered through the COA.

About the Scituate Council on Aging & Senior Center

In general, Councils on Aging strive to promote the wellbeing of older residents by offering activities that are appealing, interesting, and enjoyable, and that provide opportunities to maintain health, social engagement, and personal enrichment. Many of the services that COAs administer are designed to assist older residents and their families to maintain their physical and emotional wellness. When services are not provided directly by COAs, staff may connect older residents to existing programs and services by providing needed information and referrals. For example, staff may help older adults apply for income support programs or health insurance made available through the state or federal government. In Scituate, an outreach coordinator at the Senior Center is available to assist

older adults and their families in identifying and applying for programs and services for which they are eligible. Finally, Councils on Aging often provide leadership within communities around aging issues by serving on municipal boards, interacting with other town offices, and serving as resources to residents and organizations.

Specific programs that older residents may access either directly or through referrals by the Scituate Senior Center include:

- Health and Wellness Activities:

Regularly scheduled fitness classes (e.g. Zumba Gold, yoga, cardio, arthritis exercise, balance), sports (e.g. badminton and softball), health screenings, and SHINE

- Education: Café talks, Ask-a-Lawyer, financial planning

- Recreation: Cards, knitting, Garden Club, art classes, dance

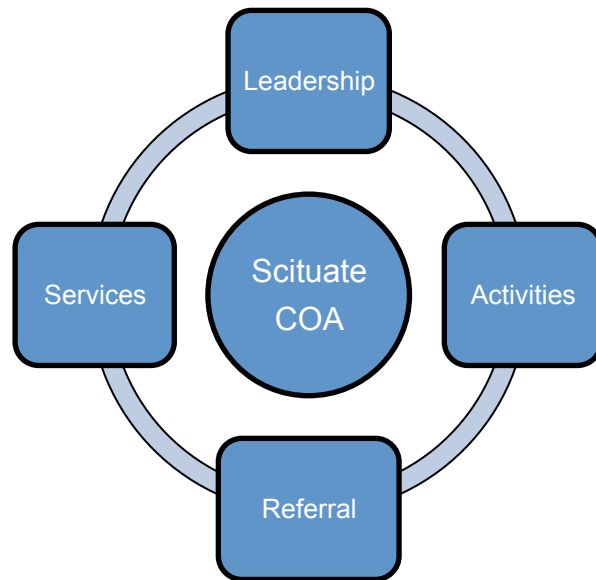
- Transportation: Local medical appointments, to the Senior Center and other program sites, LINK program for out of town medical appointments, Vision Support Group van

- Home Care Services: Information and referral to home care services, financial assistance programs, housing options, and handyman help

- Assistance: Information and referral for fuel assistance, Medicaid, Senior Pharmacy Program, Food Stamps, Senior Housing

- Support Services: Family/friend caregiver support group, Caregivers of mid-stage Alzheimer's support group, individual consultation for family caregivers

- Volunteer Opportunities: clerical and administrative work, kitchen preparation and serving, event help, pickleball facilitator



Many of the programs and services that are administered by the COA are offered at the Senior Center's Brook Street location. The Scituate Senior Center opened in the early 1990s at the site of a refurbished fire station. Programs offered at the Senior Center are often limited due to the space availability, which is restricted to one main activity space. Parking is also limited at the Brook Street location. To compensate, the COA offers programs at other sites in Scituate, including the old Pier 44 site. The Senior Center has 3 full time and 6 part time employees paid by the COA, including the director, a transportation coordinator, an administrative assistant, outreach coordinator, social worker, and van drivers. The COA also benefits from the work of a number of unpaid volunteers.

The Town of Scituate COA is funded through public sources at the local, state, and federal levels, and by private contributions from individuals, corporations, and foundations. In Fiscal Year (FY) 2014, the budget from town funds was \$299,000.

Purpose of Study

The research described in this report was conducted in late 2014 to assess the specific aging-related needs of older adult residents in Scituate. We have assembled information from a number of sources to describe unique service needs, preferences, and concerns of stakeholders. Results of this study are intended to provide a basis for planning by Scituate COA and other offices and organizations within the community.

Methods

Formal community needs assessments often play an important role in identifying deficiencies in services and programs provided by organizations that target older adults (Nolin, Wilburn, Wilburn, & Weaver, 2006). Collecting data from multiple sources is a good strategy for converging on accurate and multifaceted representations of community needs from the perspective of multiple stakeholders (Royse, Thyer, & Padgett, 2010). In the current project, we compiled data from several sources, including publicly available information obtained through the U.S. Census Bureau, quantitative and qualitative data collected directly from residents of Scituate, and administrative data from Councils on Aging in comparison communities. All research methods and instruments used in this project were approved by the University's Institutional Review Board, which is charged with protecting the rights and welfare of human subjects who take part in research conducted at UMass Boston.

We custom-developed our data collection strategies to address specific concerns identified in pre-assessment planning meetings with the Town Administrator, the Director of the Scituate COA, and the Steering Committee of selected stakeholders from the community with interests in the well-being of Scituate's older residents. We also spoke with staff at the Scituate COA Senior Center to hear first-hand about the programs and services offered. Our goal in these early meetings was to assist key stakeholders in prioritizing their concerns and identifying research questions, which when approached systematically could shed light on the support needs of the older population, and identify services that are most valued by Scituate's residents.

These assessment goals align with efforts by the COA to facilitate "aging in place" by older adults in the community, and are consistent with efforts to identify ways in which communities may become more "livable" by supporting the independence and quality of life of older people as they age and retire (Nelson & Guengerich, 2009). In the following sections, we describe methods used in this needs assessment, including development of appropriate instruments, selection and recruitment of study participants, and a brief section on data analyses.

Scituate Demographic Profile

As an initial step toward understanding characteristics of Scituate’s older population through quantitative data, we generated a demographic profile of the Town using data from the 2010 U.S. Census and from the American Community Survey (ACS)—a large, annual survey of the population, conducted by the U.S. Census Bureau. For purposes of this assessment, we used information drawn from the 5-year ACS file (2008-2012), along with U.S. Census data for the Town of Scituate, to summarize demographic characteristics including growth of the older population, shifts in the age distribution, gender and education distributions, householder status, living arrangements, household income, and disability status.

Scituate Resident Survey

A key component of our data collection effort was a resident survey instrument developed by the research team at UMass Boston, in consultation with members of the Steering Committee assembled to guide this study. The eight-page survey instrument included quantitative and open-ended questions chosen to address specific planning needs of the Town, with respect to its aging population. In addition to a paper/pencil version of the instrument, the survey was made available to be completed and submitted online via the Internet.

The full resident survey (reproduced in **Appendix A**) was composed of questions relating to the following areas of interest:

- Housing & Living Situation
- Health & Caregiving
- Social & Emotional Well-being
- Demographic information
- Transportation
- Current Senior Center Services
- Future Senior Center Planning

Resident Survey Sampling and Response

The Town Clerk provided a list of prospective study participants based on municipal census records that included names, addresses, and dates of birth for non-institutionalized residents of Scituate. We selected a sample of 2,000 residents who were age 45 and older⁴. We mailed a personally addressed postcard to residents who were selected for the sample, in order to alert them that they would receive a survey in the mail. Approximately one week after the postcard mailing we distributed the survey, along with a postage-paid return envelope, and a cover letter signed by the director of the Scituate COA. The cover letter outlined the purpose of the questionnaire and the measures taken to protect the rights and privacy of participants. All materials in this mailing clearly identified UMass Boston and the Scituate COA as research partners in the project.

During the three-week data collection period in November 2014, a total of 632 completed surveys were returned, resulting in an overall response rate of 32% (**Table 1**). Among

⁴ The sample was chosen with the goal of obtaining a sufficient number of responses in each age cohort to support analysis. As a result, the initial sample as well as the responding sample is not random with respect to age. In this report, all results are weighted to take into account the extent to which the sample differs in distribution by age from the sampling frame.

these, 21 (3%) responses were submitted online. The response rate for Boomers (16%) was lower than that of Seniors age 60 to 79 (38%), and Seniors age 80 and over (38%). Given that the survey was oriented toward later life experiences and expectations, the over-representation of Seniors among the returned surveys is not surprising (Fowler, 2014). In this report, tabulations are weighted to adjust for the differential sample size and response rates across age groups.

Table 1. Scituate resident survey sample description and response rates

	Total Age 45+	Boomers Age 45 to 59	Seniors Age 60 to 79	Seniors Age 80+
Sampling frame (non-institutionalized residents age 45+)	9,212	4,519	3,814	879
Sample size	2,000	600	800	600
Valid responses	632*	98	303	226
Response rate	32%	16%	38%	38%

**Includes five individuals who did not provide an age.*

The short timeline of this project did not allow researchers to re-contact those who initially did not respond. We compiled a database containing the confidential responses of all survey participants, which was subsequently analyzed and securely maintained by the research team at UMass Boston.

Focus Group

From the outset, a stated goal of this study was to learn about older adults in the community at large, as well as vulnerable older residents who experience disability, illness, financial shortfalls or other limiting conditions. These circumstances place seniors at risk of further declines; moreover, part of the mission of the COA is to ensure that these individuals have access to services for which they are eligible. To learn in more depth about this segment of the Scituate population a focus group was assembled including representatives from the police department, the fire department, the housing authority, emergency preparedness, and the veterans’ agent as well as a representative of the COA’s outreach staff. The focus group was conducted in December 2014.

Key Informant Interviews

One-on-one in-person interviews were conducted with four key informants. Key informants included the Town Administrator, a representative of the Board of Selectmen, the Fire Chief, and the Police Chief. The purpose of conducting key informant interviews was to gain perspective on ways in which Scituate is being affected by the aging of its population, unmet needs among the older population in Scituate, and distinctive features of Scituate with respect to aging in place.

Peer Community Overview

We gathered information from Councils on Aging/Senior Center Directors in five “peer” communities, including Hingham, Marshfield, Newburyport, Rockland, and Sandwich. Communities were selected based primarily on population size, and number of older residents, in addition to socioeconomic characteristics of residents, such as income and educational attainment. Participants were asked about features of the senior centers they administered, including programming and staffing. Requests for information were issued by email, and follow-up interviews were conducted by telephone. Additional information was retrieved from websites and other publicly available documents. The peer community overview focused exclusively on features of Scituate’s COA/Senior Center relative to similar towns/cities; community comparison of housing or other community features is beyond the scope of the current report.

Data Analysis

Data collected for the resident survey were analyzed using simple descriptive statistics, including frequencies and crosstabs, and are reported in tables contained throughout the results section of this report. [Full presentation of tables from the survey is available in an **Appendix** available online]. Some responses elicited through open-ended questions were extracted and cited verbatim within this report (e.g., responses to Question 18: "What are your greatest concerns about living in Scituate as you grow older?"). Notes from interviews and from the focus group were reviewed by project staff and used to characterize and categorize salient ways in which aging issues are impacting the Town broadly speaking. Information collected from COA directors in peer communities were compared side-by-side with information collected from Scituate’s COA Director. We used information from all sources of data to develop recommendations reported in the final section of this report.

Results

Demographic Profile of Scituate

The 2010 U.S. Census included 18,133 residents living in Scituate. About half of all residents were age 45 and older (**Table 2**), including 3,424 residents age 60 to 79 (19% of the Town's population) and 910 residents age 80 and older (5%). Those age 45 to 59 numbered 4,758 (26%). Currently, roughly half of the Town's population is composed of residents who are under age 45 (U.S. Census Bureau, 2010).

Table 2. Number and percentage distribution of Scituate's population by age category, 2010

	Number	Percentage
Under age 18	4,560	25%
Age 18-44	4,481	25%
Age 45-59	4,758	26%
Age 60-79	3,424	19%
Age 80 and older	910	5%
Total	18,133	100%

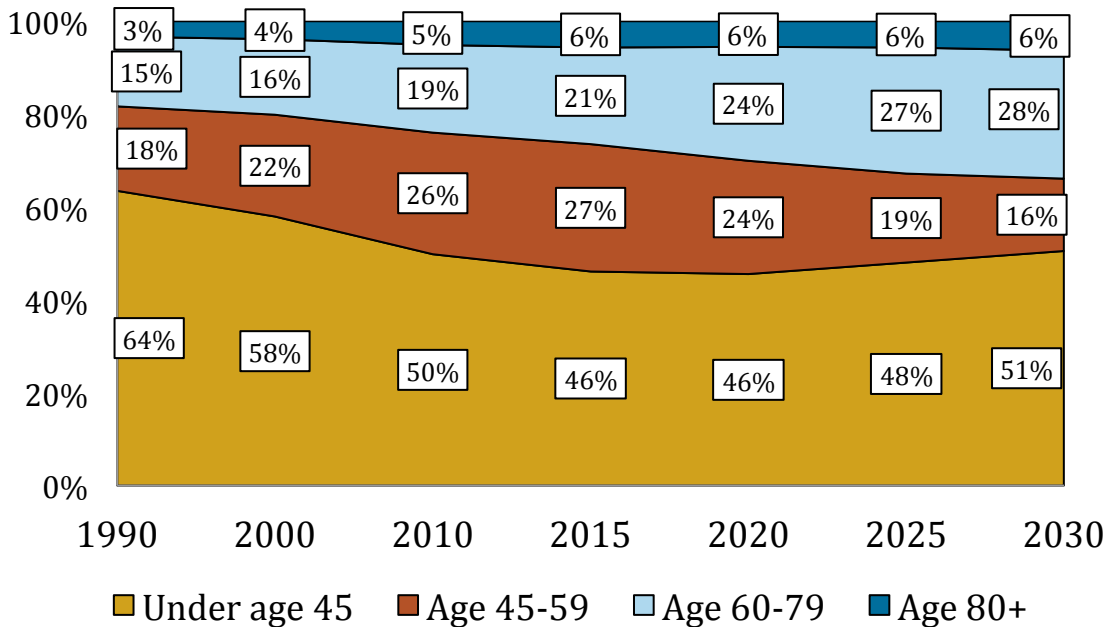
Source: U.S. Census Bureau, 2010 Census. Summary File 1, Table QT-P1.

Figure 1 shows the age distribution of Scituate's population from 1990 to 2010 with population projections to 2030⁵. Residents who were age 60 and older in 1990 comprised 18% of the Town's total population. The percentage of residents in this older age group increased to 24% in 2010.

According to projections produced by the Donahue Institute, the trend toward an older population will continue in the future. About 34% of Scituate residents will be age 60 or older by the year 2030, including 28% who will be between 60 and 79 years old, and 6% who will be age 80 or older.

⁵ Population projections are shaped by assumptions about birth rates and death rates, as well as domestic and international in-migration and out-migration. The Donahue Institute projections used here also account for population change associated with aging of the population, which is a strong predictor of future growth and decline of population levels. For more information on the methods used to create Donahue Institute projections, see Renski, Koshgarian, & Strate (November 2013).

Figure 1. Recent and future age distribution of Scituate, 1990 to 2030

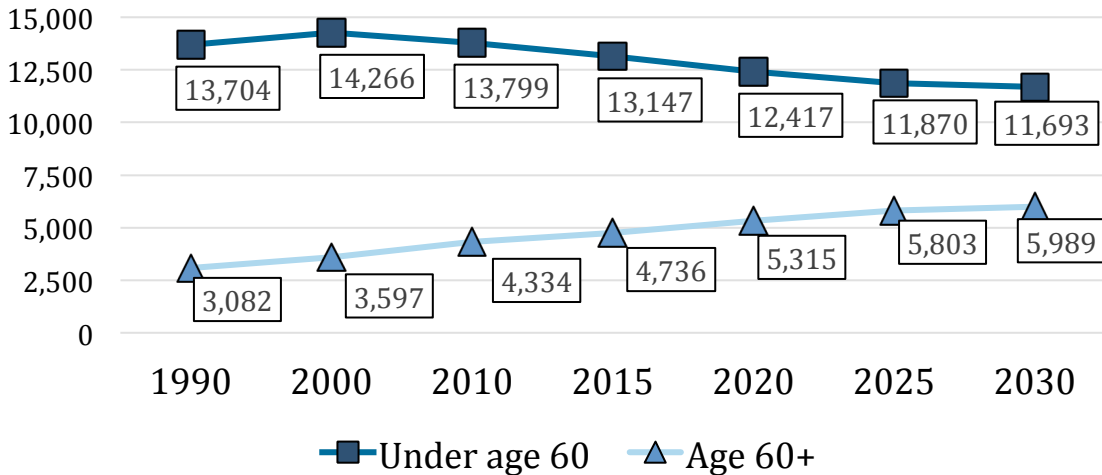


Source: U.S. Census Bureau, Census of Population for 1990 through 2010.

* Figures for 2015 through 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

Although the segment of the population that is under the age of 60 has declined since 2000, growth in the number of residents who are age 60 and older has expanded steadily between 1990 and 2010, with continued growth expected over the next 15 years. **Figure 2** shows the total number of Scituate residents under age 60 and residents 60 and older from 1990 to 2010, in addition to population projections to 2030 for both age groups. Scituate's population under age 60 remained relatively stable between 1990 and 2010, while the population age 60 and older increased by 41%. By 2030, the population under age 60 is expected to decrease by about 15% relative to its size in 1990, while the senior population will have nearly doubled.

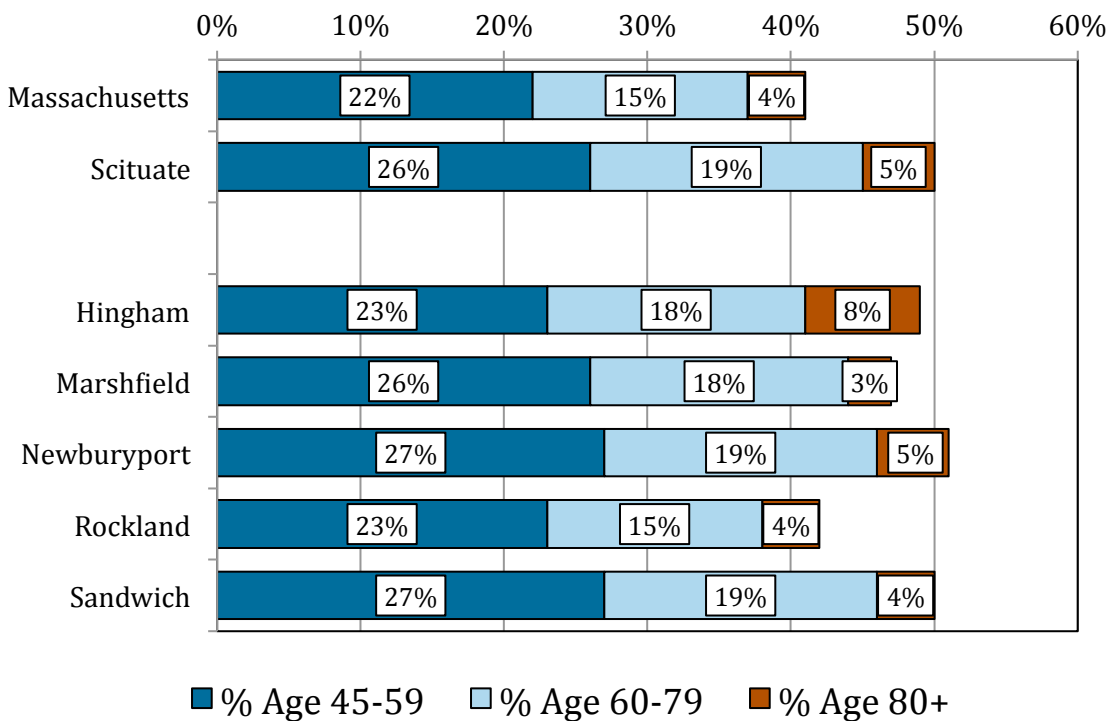
Figure 2. Number of Scituate residents by age group, 1990 to 2030*



Source: Population figures for 1990-2010 are from the U.S. Census, 1990 through 2010.

* Figures for 2015 through 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

Figure 3. Age distribution in Scituate and comparison areas



Source: U.S. Census Bureau. 2010 Census, Summary File 1, Table QT-P1 and 2000 Census, Summary File 1, Table QT-P1

Compared to the state of Massachusetts, Scituate has a larger share of residents who are age 45 or older (**Figure 3**). In 2010, 50% of the population of Scituate belonged to this age group while about 41% of the overall state population was 45 or older. Scituate's older

population is comparable to, or slightly greater than, that of comparison communities. Newburyport, Hingham, and Sandwich have similar shares of their populations falling into these older age groups (51%, 49%, and 50% respectively) compared to Scituate, while Rockland (42%) and Marshfield (47%) have slightly smaller shares. Twenty four percent of Scituate’s population was 60 or older in 2010, including 5% aged 80 or older. In comparison, only 19% of the overall Massachusetts population was 60 or older in 2010, which includes 4% who are age 80 or older.

Much of the population growth in both Massachusetts and Scituate has occurred among older age groups over the last decade. Across all ages, both Scituate and Massachusetts had small overall growth in the population (2% and 3% respectively). The absolute number of older adults increased substantially, however, across this same time period (**Table 3**). The senior population in Scituate grew 20% over the past decade compared to 16% across the state. The older population, in general, has grown across communities. In Hingham, for example, the senior population grew by 55% between 2000 and 2010. Such rapid growth in the number of older adults living in a community commonly results from the construction of new senior housing developments, such as Linden Ponds in Hingham.

Table 3. Population growth between 2000 and 2010: Massachusetts, Scituate, and comparison communities

	All Ages			Age 60+		
	2010	2000	% Change	2010	2000	% Change
Massachusetts	6,547,629	6,349,097	3%	1,273,271	1,096,567	16%
Scituate	18,133	17,863	2%	4,334	3,597	20%
Hingham	22,157	19,882	11%	5,735	3,700	55%
Marshfield	25,132	24,324	3%	5,143	3,248	58%
Newburyport	17,416	17,189	1%	4,261	3,129	36%
Rockland	17,489	17,670	-1%	3,408	2,958	15%
Sandwich	20,675	20,136	3%	4,692	3,534	33%

Source: U.S. Census Bureau. 2010 Census, Summary File 1, Table QT-P1; and 2000 Census, Summary File 1, Table QT-P1

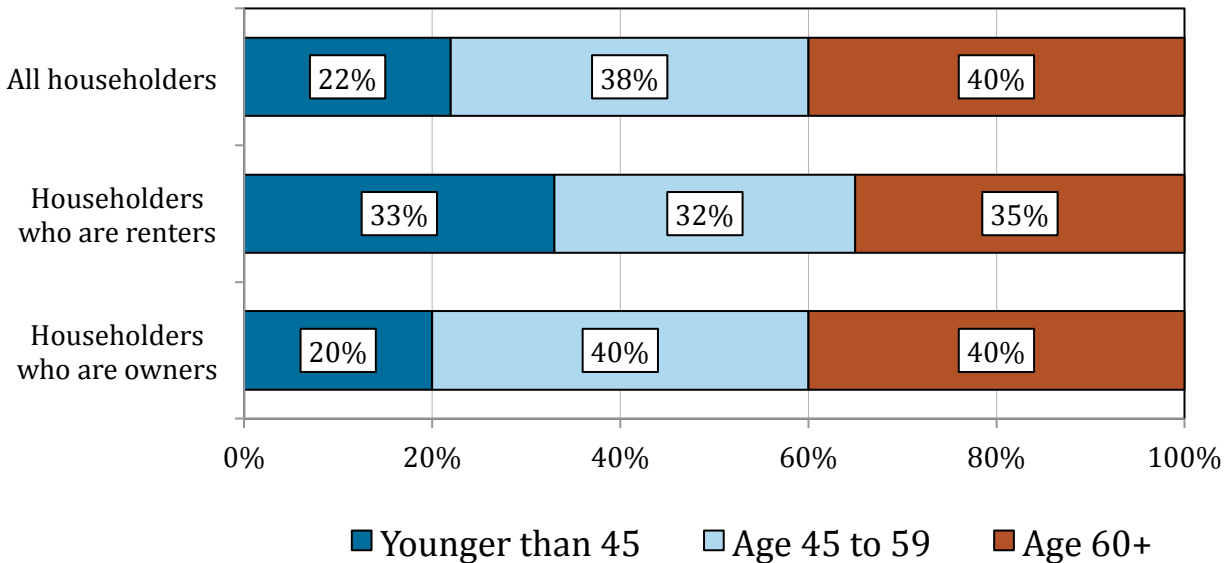
Demographic Composition of Scituate’s Older Population

The majority of older adult residents in Scituate are women, similar to the proportion across the state (56% and 57%, respectively). In general, women have longer life expectancies than men, a demographic disparity that is observed in many populations globally. Most Scituate older adults are White and not Hispanic; and most speak only English (97%), though 3% speak other Indo-European languages (e.g. Russian, German).

The U.S. Census (2010) counted 6,859 households in Scituate, many of which (78%) are headed by householders who are middle-aged or older (**Figure 4**). A “householder” is the person reported to be the head of household, and is typically the individual in whose name

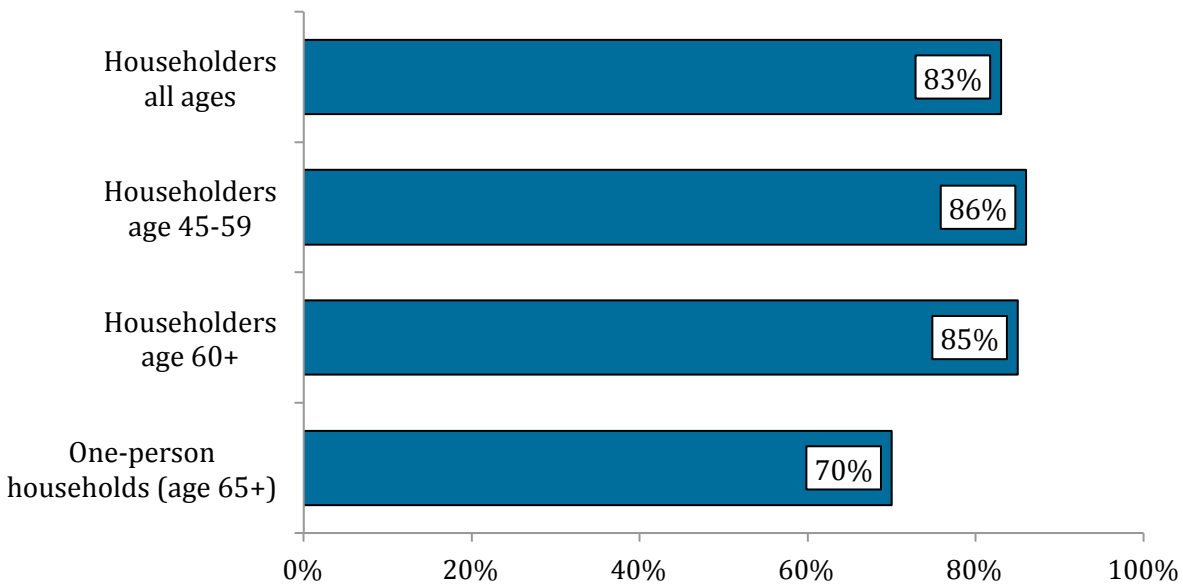
the unit is owned or rented. Householders younger than age 45 represent a large share of renters in Scituate (33%). By contrast, about 80% of Scituate's owner-occupied housing units are headed by residents who are age 45 or older, including 40% headed by someone age 60 or older.

Figure 4. Age distribution of householders, Scituate 2010



Source: U.S. Census Bureau. 2010 Census, Summary File 1, Table H17

Figure 5. Percent of Scituate householders who are homeowners, by age category



Source: U.S. Census Bureau. 2010 Census, Summary File 1, Tables H17 and H18.

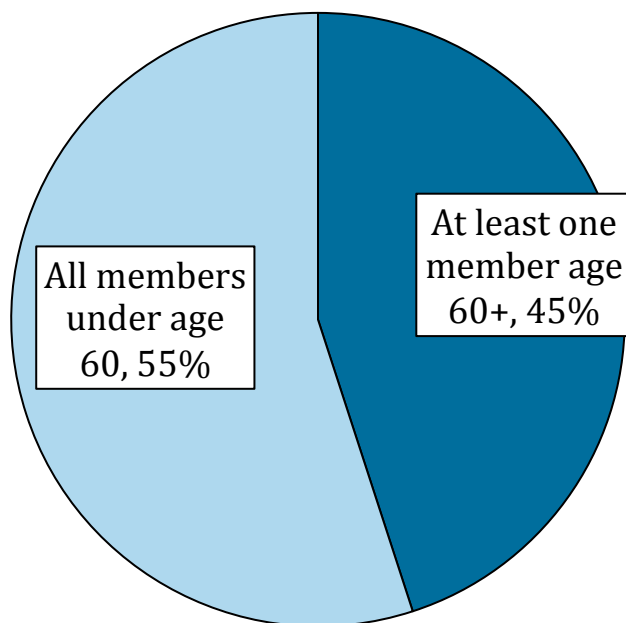
Homeownership is very common in Scituate. In fact, 83% of householders across all ages live in homes that they own (see **Figure 5**), including 86% of householders aged 45 to 59 and 85% of householders age 60 and older. Even among senior residents (age 65+) who

live alone, homeownership is the norm, with 70% owning their homes. In order to continue to live comfortably and safely in their homes, some of these older adults may need help with home maintenance and other supports.

A recent report developed by the Metropolitan Area Planning Council (MAPC) confirmed that housing units in Scituate are predominately owner-occupied. Whereas the share of owner-occupied housing in the town is similar to surrounding communities, it is higher than the state average. Additionally, housing values in Scituate are also high. In 2011, the median home value was \$492,100, for all age groups. Though high housing values are not uncommon in the region, Scituate's home values are greater than the median for Plymouth County and Massachusetts as a whole.

The MAPC report cited limited housing availability designated specifically for seniors (e.g., senior housing or assisted living). Given the expected growth of the older adult population, expansion of the housing stock composed of rental housing, condos and townhomes—options often preferred by older people looking to downsize— may be supported.

Figure 6. Households in Scituate that include at least one member age 60 or older

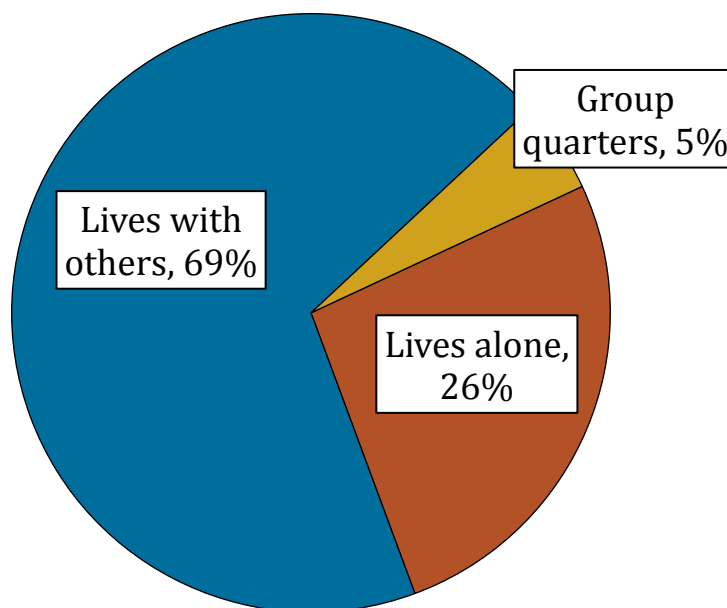


Source: American Community Survey, 2008-2012, Table B11006

As shown in **Figure 6**, nearly half (45%) of Scituate households include at least one individual who is age 60 or older. This large proportion is likely to grow in the future, as the number of older residents increases. Thus, residents of all ages will likely be impacted by the Town's changing demographic profile, as the need for programs and services that address aging-related concerns, including health needs, safe home environments, caregiving needs, and transportation options continues to expand.

More than one-quarter of Scituate residents who are age 60 and older live alone (**Figure 7**). Among those who live alone, 74% are female (not shown). A majority of older residents (69%) live with other people in the same household, including spouses, parents, children, or grandchildren. Only 5% of older Scituate residents live in group quarters such as nursing homes.

Figure 7. Living arrangements of Scituate residents age 60 and older



Source: U.S. Census Bureau; 2010 Summary File 1, Table P34.

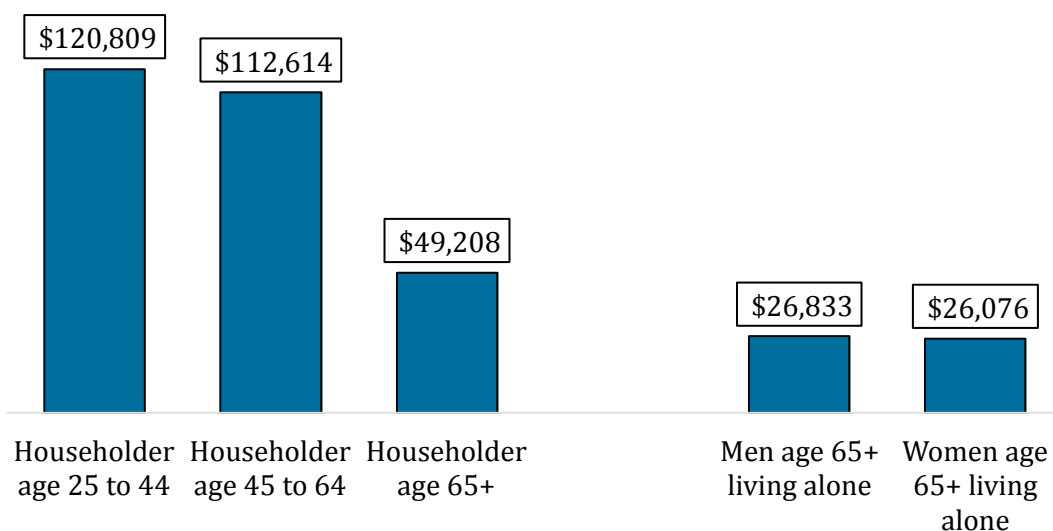
On average, Scituate residents are well educated. Census Bureau statistics indicate that 41% of residents age 65 and older have an associate's degree or higher (10% greater than the state percentage for that age group) (*ACS, 2008-2012, Table B15001*). Only 4% of Scituate residents who are 65 or older did not complete high school, compared to 20% for the state. The highly livable character of Scituate partly depends on the educational profile of older adult residents, as community engagement such as volunteering, and late-life learning are often valued in highly educated communities (Fitzgerald & Caro, 2014).

Many older Scituate adults are current or recent participants of the paid workforce; 36% of residents between ages 65 and 74, and 9% of those age 75 and older have worked within the past 12 months (*ACS, 2008-2012, Table B23004*). Almost three quarters (70%) of Scituate men who are 65 and older report having served in the armed forces (*ACS, 2008-2012, Table B21001*). These men may be eligible for benefits and services based on their service, along with many surviving widows in this same age group.⁶

⁶ Although women constitute an important segment of the military, too few women in this age group are identified in the data for Scituate to be reported.

Overall, Scituate householders have relatively high incomes. Yet some disadvantage with respect to household income is observed (**Figure 8**). Households headed by individuals age 25 to 44 have the highest median income at \$120,809, followed closely by the households headed by adults age 45 to 59 (\$112,614). These typical income values are substantially greater than the statewide median for the same age groups (\$75,418 and \$82,374, respectively). The median income of households headed by individuals who are age 65 and older (\$49,208) is considerably lower than that for younger households, although it is greater than the statewide median for households headed by individuals in that age group (\$37,427). Older men and women in Scituate who live alone have the lowest median incomes, at \$26,833 and \$26,076, respectively. Given that about a quarter of Scituate seniors live alone, these figures suggest that many residents may be at risk of economic insecurity.

Figure 8. Median household income in Scituate by age and living situation of householder (in 2012 inflation adjusted dollars)

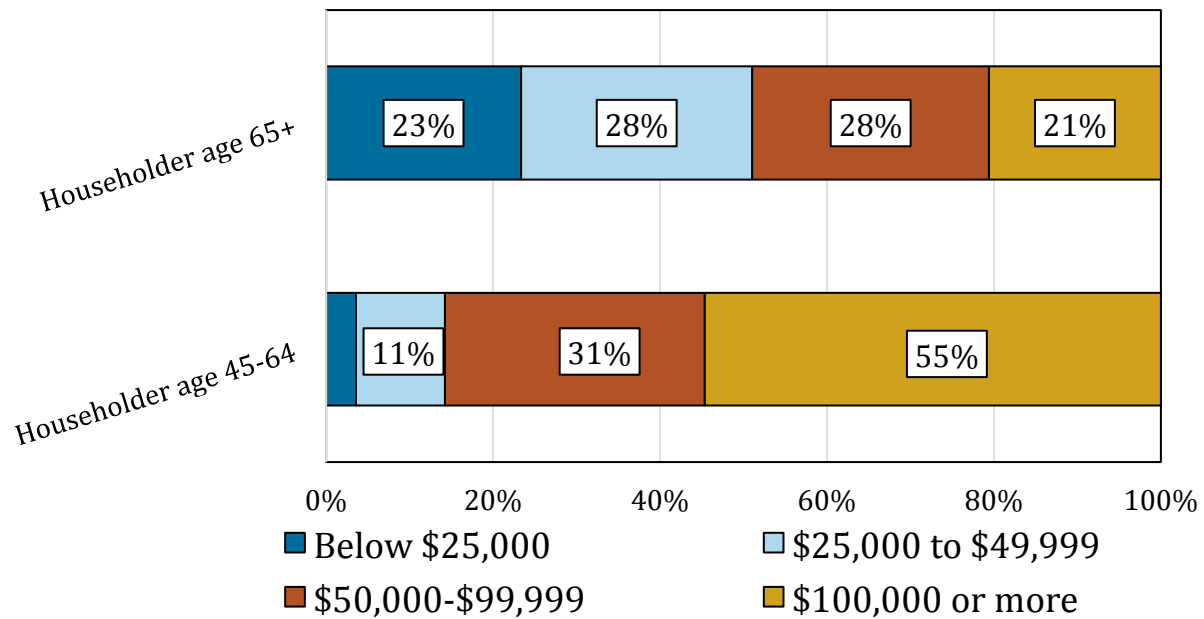


Source: U.S. Census Bureau; American Community Survey, 2008-2012, Tables B19049 and B19215.

Note: Includes only community households, not group quarters such as nursing homes.

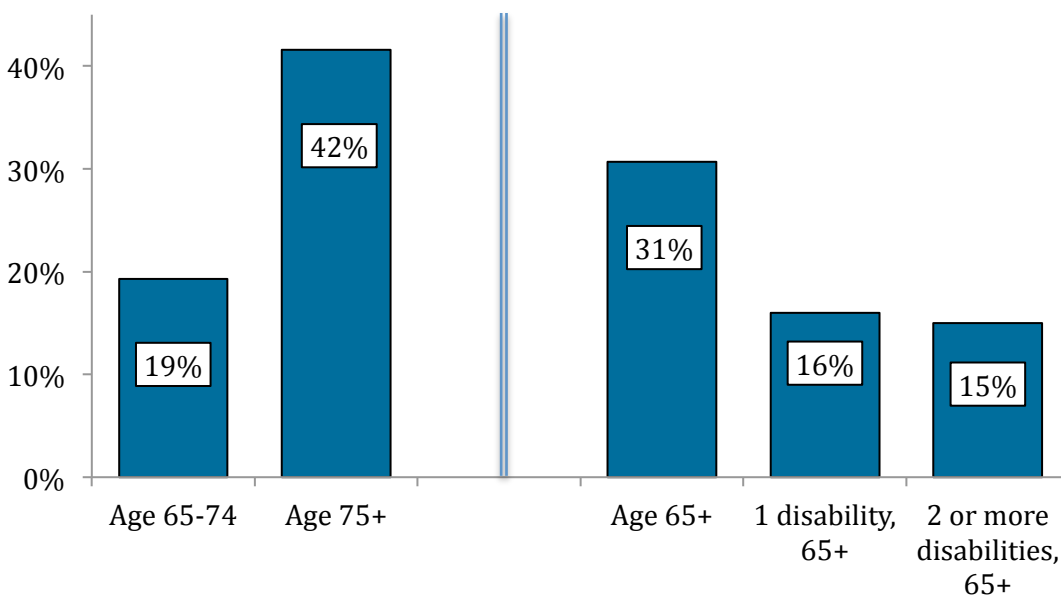
Figure 9 further illustrates the economic profile of the older population in Scituate. A large number of older residents are quite affluent. About 55% of households headed by residents who are age 45 to 64, and 21% of those headed by someone age 65 and older report household incomes of \$100,000 or greater. Yet almost a quarter of households headed by someone 65 or older report a household income less than \$25,000 compared to only 4% of households headed by younger residents. As such, a considerable portion of Scituate's older population could experience economic insecurity.

Figure 9. Household income distribution in Scituate by age of householder (in 2012 inflation-adjusted dollars)



Source: U.S. Census Bureau; American Community Survey, 2008-2012, Table B19037.
 Note: Includes only community households, not group quarters such as nursing homes.

Figure 10. Percentage of Scituate residents reporting disability by age group



Source: U.S. Census Bureau; American Community Survey, 2010-2012, Tables B18101 and C18108

The risk of acquiring disability commonly increases with age. **Figure 10** shows the proportion of older Scituate residents who report having disability. Nearly one in five (19%) Scituate adults aged 65 to 74 have at least one disability, a figure that increases to

42% among residents 75 and older. These proportions are slightly lower than those estimated for the state of Massachusetts; at least one disability is reported by 22% of Massachusetts residents age 65 to 74, and 47% of state residents 75 and older (not shown). Taking the two age groups together, 16% of Scituate residents age 65 and older reports one disability, and an additional 15% report two or more; thus nearly one-third (31%) of Scituate residents age 65 and older have at least one disability.

The ACS assesses different types of disability. The most commonly reported disability for Scituate residents 65 and older is hearing difficulty (20%), followed by ambulatory difficulty (difficulty walking or climbing stairs; 16%). Other disabilities experienced by older Scituate residents include independent living difficulty (difficulty doing errands alone such as shopping or visiting the doctor; 12%), cognitive difficulty (7%), self-care difficulty (7%), and vision difficulty (7%; *ACS, 2008-2012, Table B18102*). People with disabilities often experience greater difficulty accessing transportation and public facilities and amenities, which could limit their ability to fully participate in the community and to meet their everyday needs.

Results of Scituate Resident Survey of Boomers and Seniors

Sample Demographics

Overall, 632 sampled residents returned surveys with usable data, representing a response rate of 32% (see **Table 1** above). Participants included 98 Boomers, 529 Seniors⁷, and 5 respondents who did not indicate their age.⁸ The selected sample was stratified in order to obtain sufficient numbers of older adults to support analyses of these groups. As well, response rates for older adults were substantially higher than the response rate for younger residents, with the result being that a large majority of the sample is composed of residents who are age 60 and older. To account for the overrepresentation of Seniors in the survey data, we present results that are weighted by age groups so that the presented statistics are not skewed by the age distribution of the sample. Key findings are presented and discussed below. A complete set of data results are presented in tables by age group in **Appendix B**, available electronically.

The majority of respondents to the Scituate resident survey were women, including 62% of Boomer respondents and 61% of Senior respondents. By comparison, data from the 2010 U.S. Census indicate that 52% of Scituate residents age 45 to 59 are women; and 56% of those age 60 and older are women, suggesting that our sample has a greater representation of women than the population. Readers are urged to bear this discrepancy between the sample and the population in mind as they read and interpret the remaining results.

A sizable majority (96%) of respondents to the Scituate survey reported their race as White. This sample percentage is comparable to that reported for the population in the 2010 Census (97%).

⁷ In referring to survey results, we use the terms “ Boomers ” and “ Seniors ” to refer specifically to study cohorts. Three age categories (i.e., 45 to 59; 60 to 79; and 80 and older) are sub-categories of these cohort designations.

⁸ Quantitative results and figures presented by age below include only respondents who provided their age on the resident survey; tables and figures that depict “ all ages ” include all survey respondents.

Although a share of Scituate’s housing stock is seasonal—a report developed by the Metropolitan area Planning Council reports this share as nearly 10%—a large majority of the respondents to this survey live in Scituate year-round. Just five percent of the respondents indicated that they live in Scituate only part of the year.

Living in the Community

One outcome of communities being highly livable is that once residents are established, they tend to place high priority on staying in their communities. A noteworthy characteristic of survey respondents is the length of time that most have resided in Scituate. **Figures 11** and **12** indicate that a large share of Boomer respondents (42%) have been residents for 25 years or longer, as have 72% of Seniors. Included among these long-term residents are 12% of Boomers and 10% of Seniors who reported that they are Scituate natives. Just 16% of Senior respondents are relative “newcomers,” indicating that they have lived in Scituate for fewer than 15 years.

Figure 11. Years residing in Scituate: Boomers

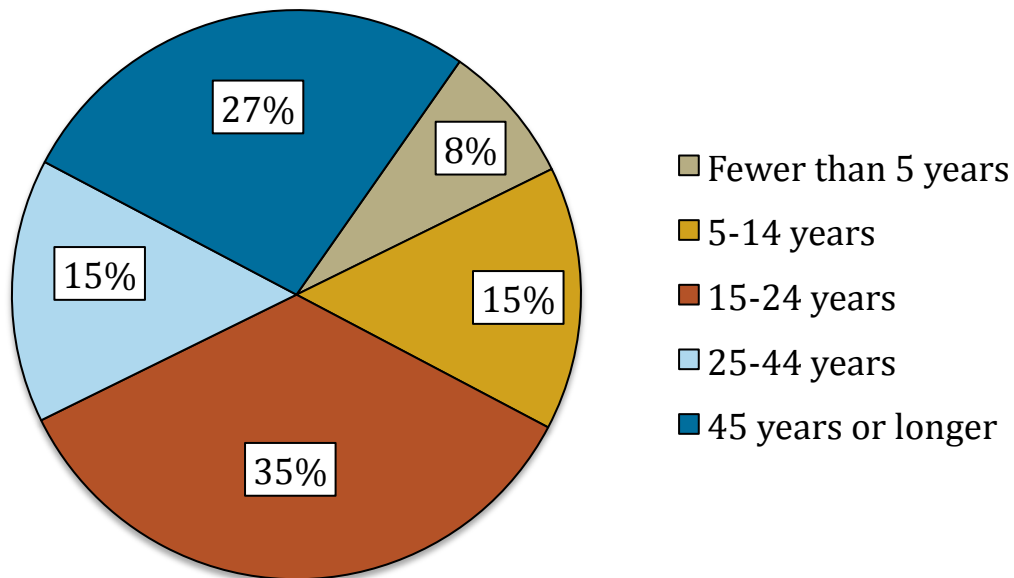


Figure 12. Years residing in Scituate: Seniors

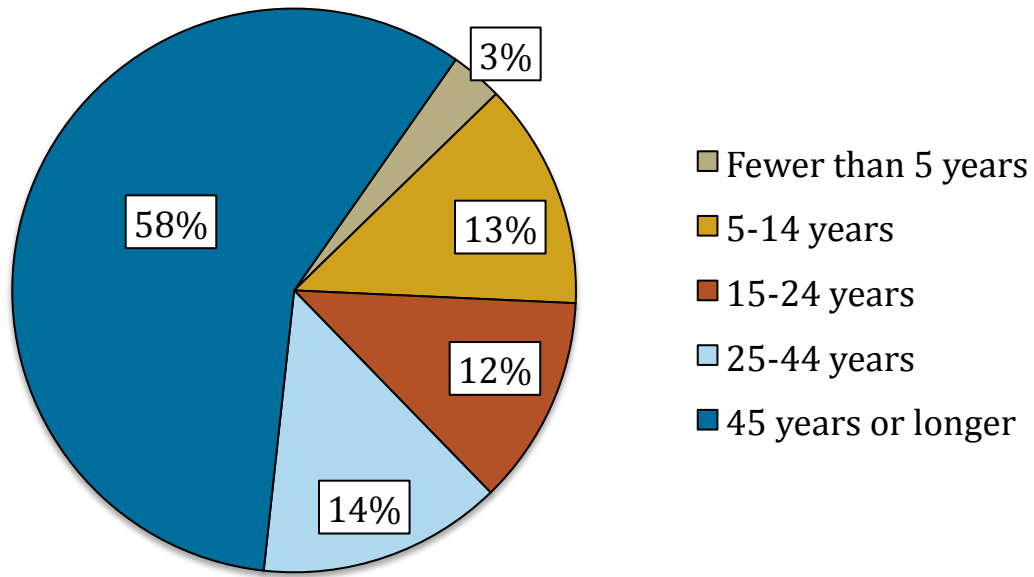
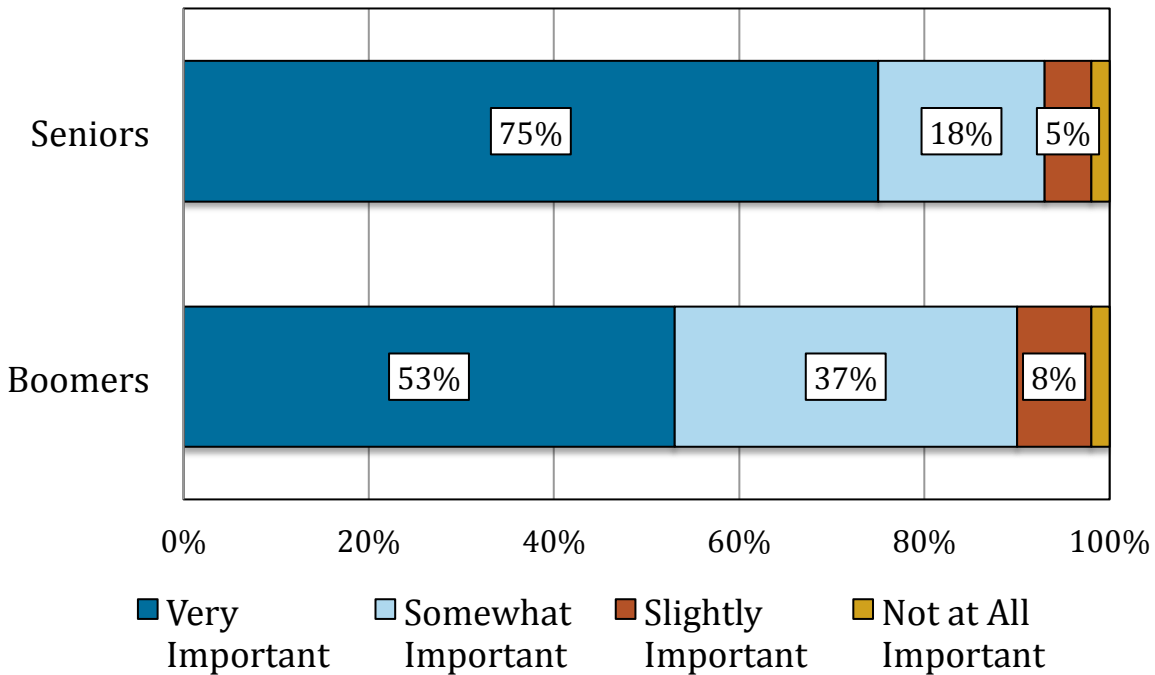


Figure 13. Importance of living in Scituate as long as possible by age cohort



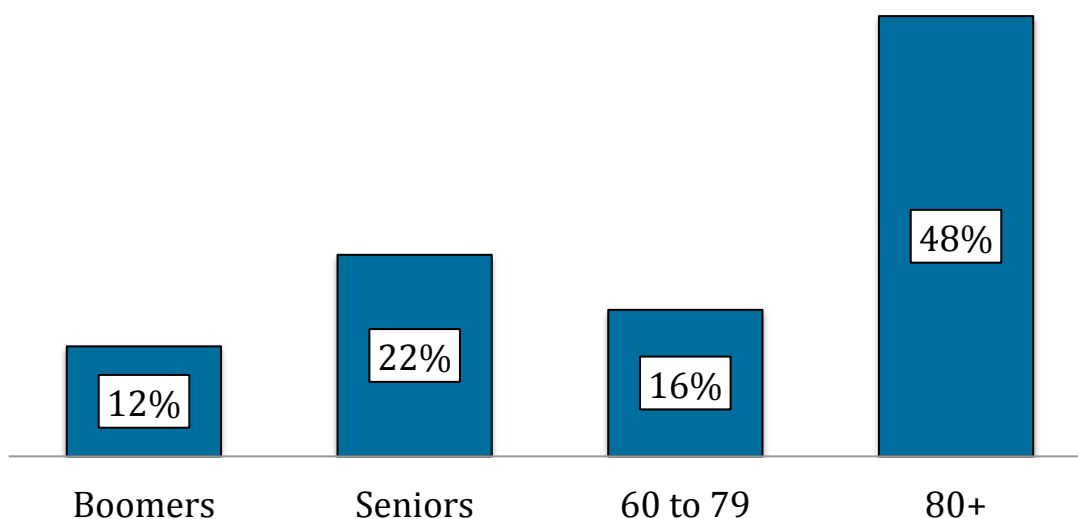
Given the long tenure of many older residents in Scituate, it is not surprising that a large majority of Boomers (90%) and Seniors (93%) indicate that it is “very important” or “somewhat important” to them to remain living in Scituate as long as possible in the future

(Figure 13). The proportion of Scituate residents who desire to age in place is reflected in the oldest age group as well, with 96% of those age 80 and older reporting it is “very important” or “somewhat important” to them to stay in Scituate (not shown).

One result of a strong commitment to aging in place is that some residents may remain in their homes even after it is no longer safe or practical to do so. Adequate programs and services delivered to the home can help older adults remain safely at home; as well, supported housing options available nearby can help older adults remain in familiar communities, when they are no longer able to stay in their homes.

Below, Figure 14 displays the percentage of survey respondents who live alone by age group. Compared to 12% of Boomers who indicate that they live alone, nearly a quarter of Seniors (22%) live alone. Among the respondents age 80 and older, 48% live alone. In general, older adults who live by themselves are more likely to experience health conditions and impairments that make travel into the community more difficult, and are at increased risk for isolation and economic insecurity (White, Philogene, Fine & Sinha, 2009). These individuals will likely have greater need for support services (such as transportation and/or targeted outreach) that facilitate their continued involvement with friends and family in the community.

Figure 14. Percent of Scituate residents living alone by age group



A noticeable characteristic of Scituate is the number of single-family homes among the Town residences. According to the U.S. Census Bureau, a large majority (89%) of Scituate housing units are single-family attached or detached homes (*ACS Table DP04, 2009-2013*). A similarly large share of survey respondents reported living in single-family homes (92% of Boomers, and 84% of Seniors). Among those aged 80+, 72% live in a single-family home, while 1% live in a condominium or townhouse, 4% live in a multi-family home, and 8% live in an apartment complex. Six percent report living in another type of residence, such as

living with an adult child, living in an apartment within a house, or living in an in-law apartment.

For many older residents, owning a single-family home may become a greater burden with age, as home maintenance becomes more challenging and keeping up with expenses becomes more difficult on fixed incomes during retirement. Living in single-family homes may also become less practical, as family situations change. Thus, the process of aging in community may require difficult decisions about whether to leave one’s residence for housing alternatives that are a better fit with current and future health and social situations. The availability of housing options other than single-family homes is often critical in allowing older residents to age in place in the community. The extent to which older people in Scituate live in single-family homes because there are limited alternatives, such as apartments, is not known.

An owned home is seen as a valued economic asset among older adults, and more than 90% of Boomers and Seniors responding to the survey are homeowners. Nevertheless, some structural features (especially in older homes and homes that are poorly designed) may make it difficult for older adults to remain in their residences as they age. An older home can be very expensive to maintain, and making structural changes such as installing a ramp or a first-floor bathroom to improve livability for those with mobility restrictions may be prohibitive.

About one in five Senior homeowners responding to the survey (20% of those age 60-79, and 25% of residents age 80+) indicated that their homes require modifications to facilitate their ability to age in place, with a smaller share (13%) of Boomers reporting this need (Table 4). Most individuals, regardless of age, could likely improve functionality and safety of their homes by way of home hazard assessments and installation of home modifications. Nevertheless, resources to address needed changes are often limited. Among owners whose homes need modification, 53% of those aged 60 to 79, and 66% of those age 80 and older report not being able to afford to make needed modifications. Significantly, we note that one out of four Scituate homeowners age 80 and older need to modify their homes, but the majority do not have sufficient resources to do so.

Table 4. Percent of Scituate homeowners who need home modifications, and percent unable to afford them

	Home needs modifications	Unable to afford modifications*
Homeowners		
Boomers	13%	64%
60 to 79	20%	53%
80+	25%	66%

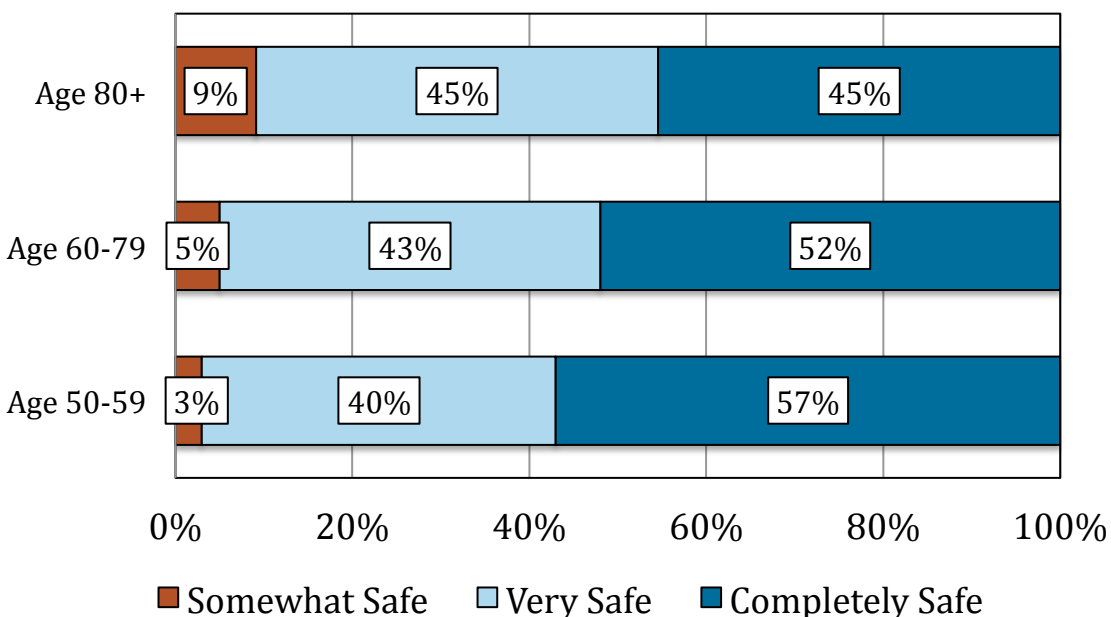
*Among those reporting that modifications are needed

The sense of belonging that respondents feel in their community is likely a fundamental contributor to the quality of life of the Town’s older residents. Feelings of belonging to a

community reflect the shared commitment that residents have to their neighborhoods and to each other. The degree to which individuals feel a sense of belonging in their community is believed to be influenced by many factors, including the perception that residents share some commonality with their neighbors, feelings of interdependence on others in the community, and security in knowing that social and psychological needs can be met, at least in part, through resources that communities have available to residents (McMillan & Chavis, 1986). Survey respondents were asked whether they felt a sense of belonging in the neighborhoods where they live. Overall, positive feelings of belonging were reported widely and comparably by participants in both cohorts—95% of Boomers and 91% of Seniors (including 93% of respondents age 80 and older) indicate they feel a sense of belonging in their community.

The sense of safety and security that individuals perceive in their neighborhoods is another important factor associated with quality of life and the livability of one’s community. Overall, survey results suggest that Scituate is perceived as a safe and secure environment in which to age. A large majority of each age group considered in this study reports feeling “completely safe” or “very safe” in their neighborhoods (**Figure 15**). Only 3% of Boomers, 5% of Seniors age 60 to 79, and 9% of Seniors 80 and older report feeling “somewhat safe” and no respondents report feeling “slightly safe” or “not at all safe” in their neighborhood.

Figure 15. Ratings of perceived safety in neighborhood, by age category

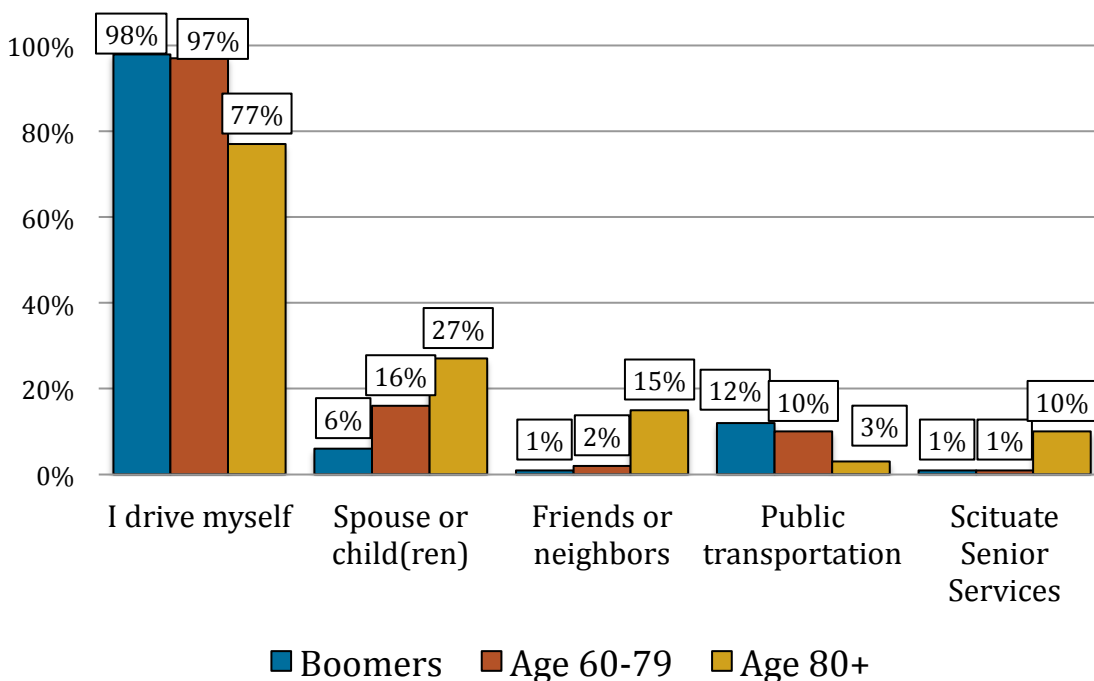


Transportation

Transportation is a fundamental need for people of all ages who strive to lead independent, meaningful, and socially engaged lives. Lack of adequate and appropriate transportation can complicate the efforts of older adults to meet material and social needs and make it difficult to remain active participants in their communities. **Figure 16** shows modes of transportation used by Scituate survey respondents by age category. Across all age categories, Scituate residents depend heavily on driving themselves to meet their

transportation needs, though the percentage declines somewhat after age 80. Among respondents age 80 and older, 77% currently drive, whereas 27% rely on spouses or children, 15% rely on friends and neighbors, and only 3% rely on public transportation. Ten percent report meeting their transportation needs at least partially by using transportation provided by the Scituate COA. Adult residents in Scituate do not rely heavily on public transportation in general. For the oldest respondents, COA transportation is an important resource. In additional calculations (not shown), we note that many older drivers report helping others with transportation; more than one-third of Boomers and nearly half of Seniors who drive report assisting older adults by providing them with transportation. The limited public transportation options available in Scituate were noted by numerous respondents as a frustration, and as a barrier to aging in place.

Figure 16. Modes of transportation used, by age category



Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Among those who depend on driving to meet their transportation needs, physical challenges associated with aging, such as poor vision, sometimes require that individuals modify their driving to increase ease and safety of travelling in the community. **Table 5** shows that modifications are more likely to be reported among older age groups, with 45% of Seniors age 60 to 79 reporting that they modify their driving, and 60% of respondents age 80 and older using modifications. The most common modifications used by all age groups are avoiding driving at night, reported by 45% of those 80 and older, and avoiding driving in bad weather (41%). Other common modifications include avoiding driving far distances, used by 29% of those 80 and older, driving in unfamiliar areas (25%), and driving on the expressway (16%). Many of the oldest respondents reported multiple or all of these modifications, indicating highly restricted driving behavior. For older adults who

substantially modify their driving, the availability of alternative forms of transportation may be critical in maintaining community involvement.

Table 5. Driving behavior by age category

	Boomers	Age 60-79	Age 80+
Non-driver	8%	5%	21%
Drive with modifications	21%	45%	60%
Drive without modifications	71%	50%	19%

Survey respondents were asked about the difficulties they experienced travelling in and around Scituate. Although two-thirds of all respondents indicate that they had experienced no difficulties (**Table 6**), many residents reported challenges meeting their transportation needs. The most common issues reported are public transportation routes that were inconvenient or not available (mentioned by 21% of Boomers and younger Seniors, and 16% of Seniors age 80 and older), and “walkability” issues such as poorly maintained sidewalks and interrupted or non-existent walkways (reported by 22% of Boomers and 11% to 14% of Seniors). Thirteen percent of respondents age 80 and older indicated that physical or other limitations pose a challenge when traveling locally.

Table 6. Difficulties experienced when traveling locally by age category

Challenges with transportation	Boomers	Age 60-79	Age 80+
None	66%	69%	66%
Public transportation is inconvenient or not available where I want to go	21%	21%	16%
There is no one I can depend on for help	1%	3%	3%
Physical or other limitations	4%	3%	13%
No door-to-door assistance	1%	2%	3%
Walkability issues (e.g., lack of or interrupted sidewalks)	22%	11%	14%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Table 7 reports challenges mentioned by those who do not drive and by those who drive with modifications. Among those who drive with modifications, the most frequently cited challenges are the limitations of public transportation (reported by 29%) and walkability issues (reported by 21%). For those who do not drive at all, limitations of public

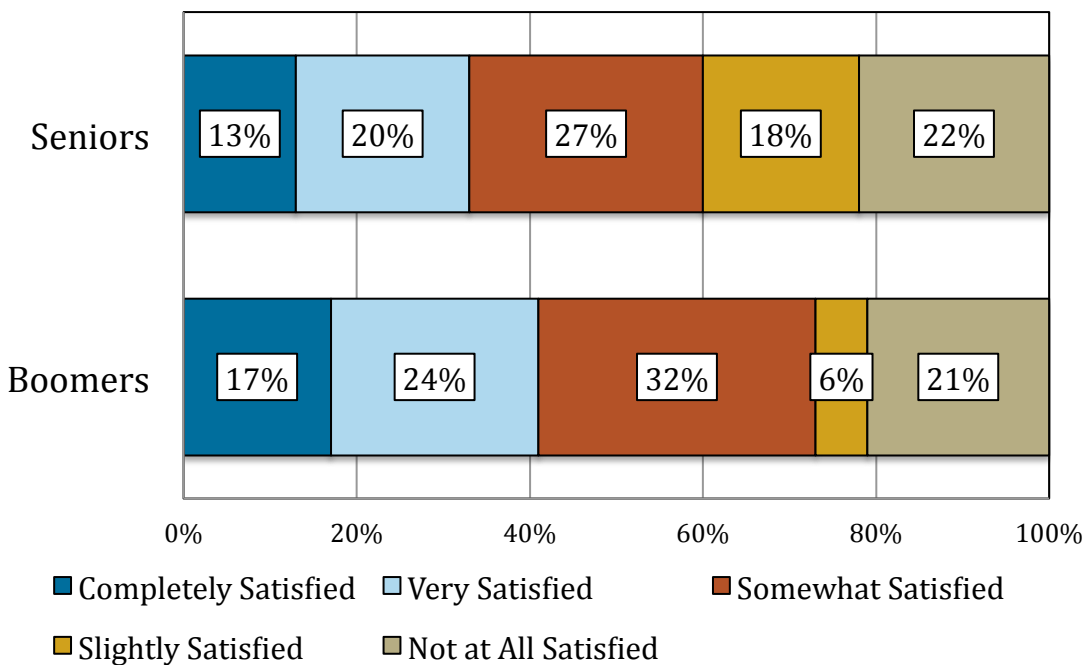
transportation are also frequently reported (30%) as well as walkability issues (25%) and physical or other limitations (19%).

Table 7. Difficulties experienced when traveling locally by driving status

Challenges with transportation	Do not drive	Drive with modifications
Public transportation is inconvenient or not available where I want to go	30%	29%
There is no one I can depend on for help	10%	3%
Physical or other limitations	19%	7%
No door-to-door assistance	3%	4%
Walkability issues (e.g., lack of or interrupted sidewalks)	25%	21%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Figure 17. Satisfaction with transportation options in Scituate by age cohort



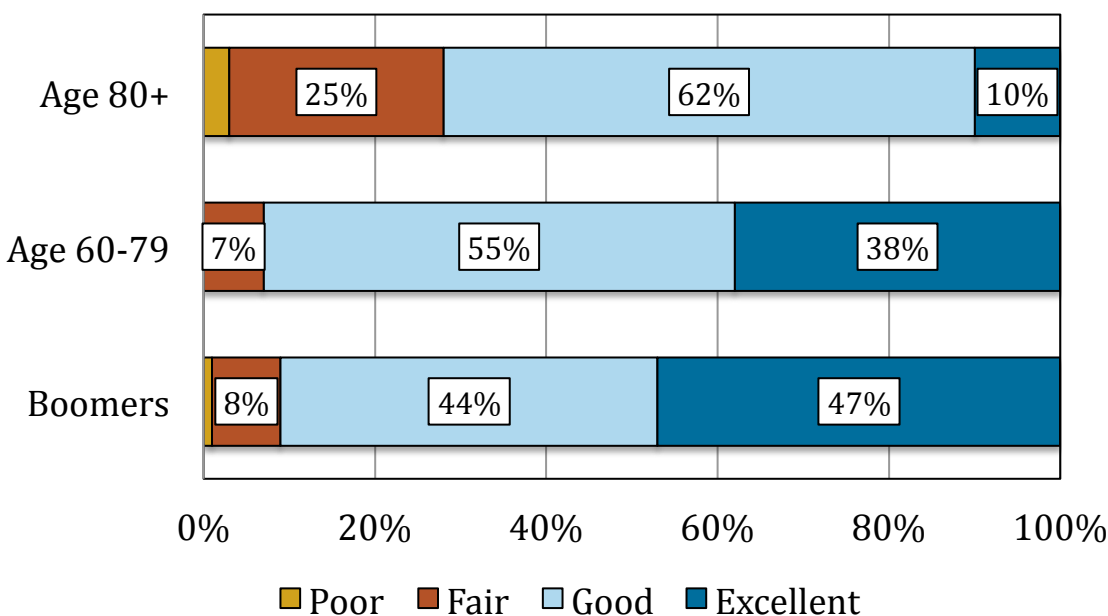
Despite transportation challenges reported by many older Scituate residents, 41% of the Boomers and 33% of the Seniors reported that they are “completely satisfied” or “very satisfied” with the transportation options they have available in Scituate (**Figure 17**). However, roughly one out of five respondents in both cohorts indicated that they are “not at all satisfied” with transportation options in Scituate, highlighting transportation as a

source of concern for Scituate residents. Based on results cited above, it is inferred that limitations in public transportation options are a primary source of dissatisfaction in Scituate.

Health

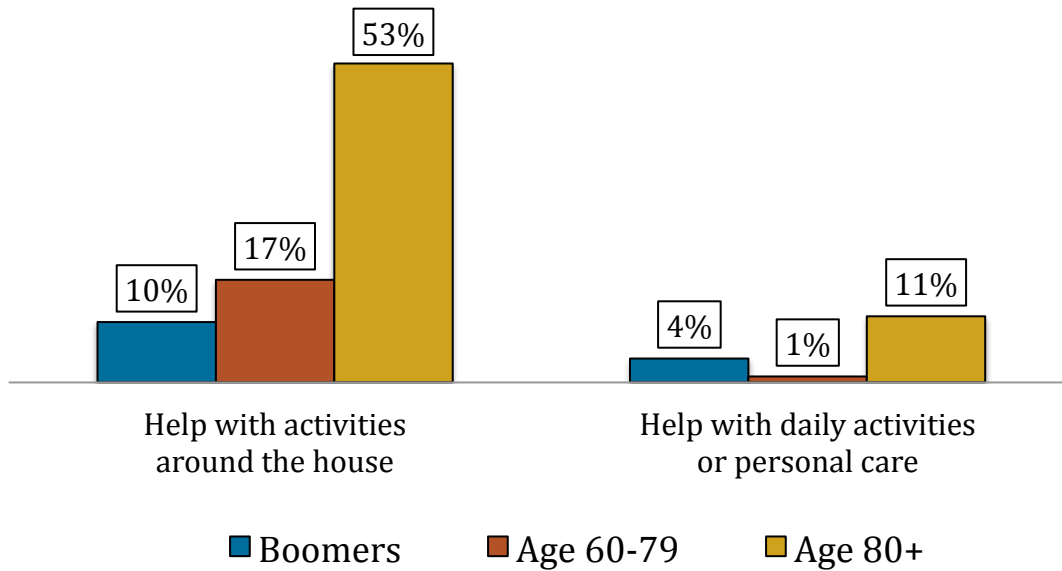
Large shares of Scituate residents who participated in the survey report good physical health. Self-ratings of physical health by age category are shown in **Figure 18**. Over 90% of Boomers and younger Seniors report “excellent” or “good” physical health. Among respondents age 80 and older, 72% said their physical health was “excellent” or “good,” while 25% report “fair” health, and just 3% report that their health is “poor.” This suggests that most of Scituate’s older residents remain in good health into later life, though segments of the older population, especially the oldest old, experience some declines in their health.

Figure 18. Self-ratings of physical health by age category



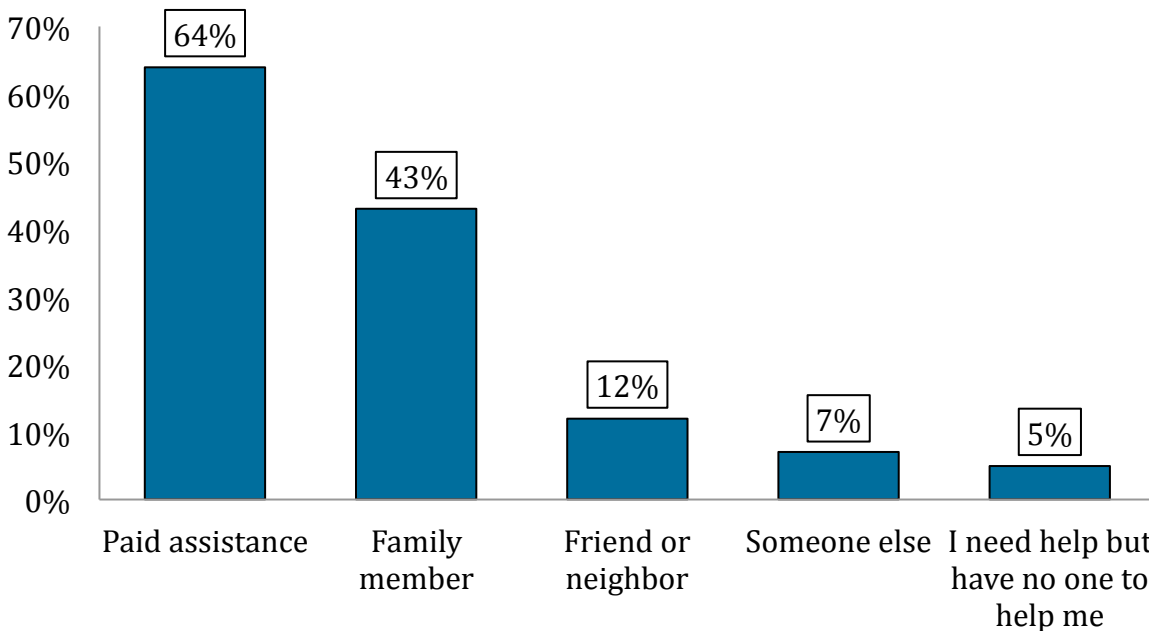
Beyond reflecting the potential need for medical care, self-ratings of physical health may also be indicative of the need for additional assistance with various activities in and around the home. Below, **Figure 19** shows percentages of respondents in each age category that indicated that a health issue required them to seek help with *household activities* (such as doing routine chores like cleaning or yard work), or with *daily activities or personal care* (such as taking medications or taking a shower). Needing help with these activities is much more common among the oldest Scituate residents. More than half (53%) in the oldest age category require assistance with activities around the house; 11% need help with daily activities or personal care.

Figure 19. Percent who need assistance due to a health issue, by age category



Older Scituate residents draw upon a number of sources of assistance when extra help is needed (see **Figure 20**). Among those who reported needing help, the most common source of assistance used is paid help, reported by 64% of Scituate residents age 45 and older who require assistance due to a health issue. The second most common source of assistance is family members, reported by 43%. A relatively small share— just 5%—report needing assistance but having no one to help.

Figure 20. Source of assistance with activities, Scituate residents age 45 and older who require assistance due to a health issue



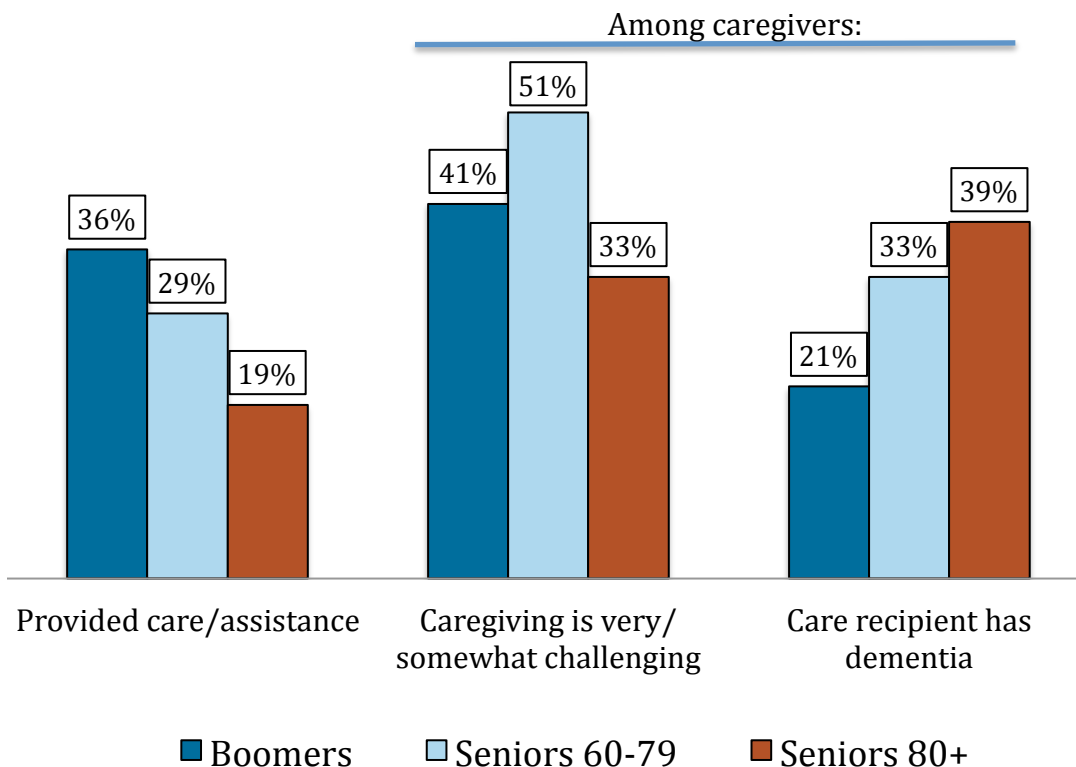
Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

One of the more common problems facing older adults who need assistance is locating appropriate services that may be available to supplement informal care provided by family and friends. Commonly cited issues expressed by many older people regarding their difficulty in gaining access to available services include not knowing where or who to contact for help and being unaware of what services exist. An important function of Scituate’s COA is to connect people to needed resources for caregiver support and home services, among other types of assistance.

Caregiving

In many cases, older Scituate residents provide informal care and assistance to individuals who are frail or disabled while managing other aspects of their lives such as family and work. Indeed, numerous survey respondents said that they provided unpaid care or assistance to a relative or friend who is disabled or frail within the past year, including 36% of Boomers, 29% of Seniors age 60-79, and 19% of Seniors age 80 and older (**Figure 21**). Many caregivers found it “very challenging” or “somewhat challenging” to provide care and to meet their other responsibilities with family and/or work, including 41% of caregiving Boomers. Caregiving can be especially complicated when the care recipient has Alzheimer’s disease or another dementia. In the Scituate sample, 21% of the Boomer caregivers were providing care to someone with dementia, as were a third or more of the Senior caregivers.

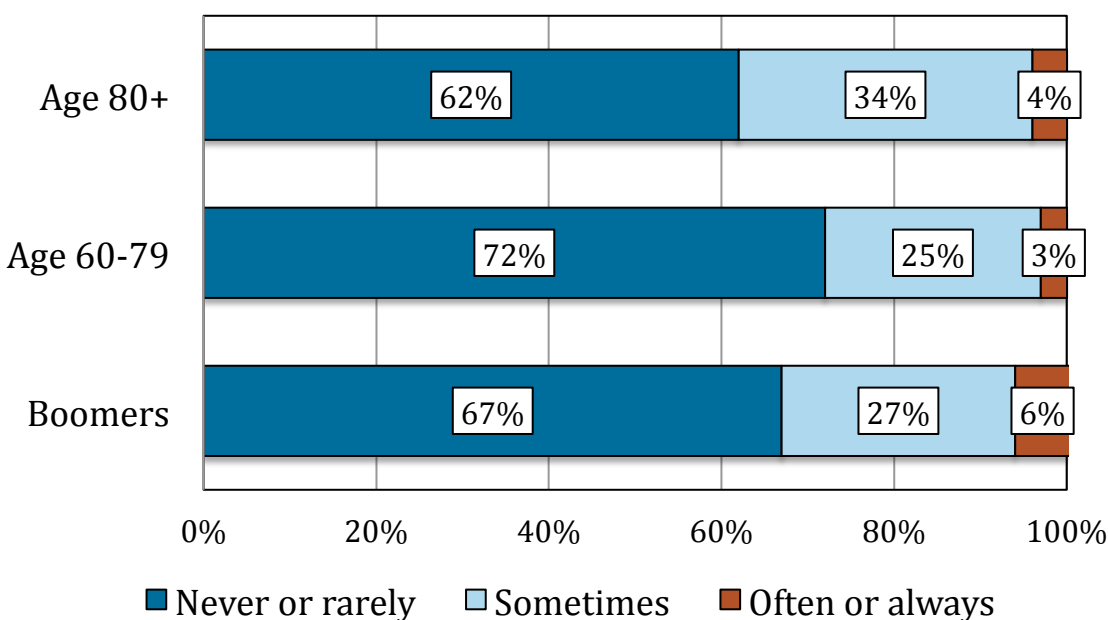
Figure 21. Caregiving experience in the past year, and degree of challenge by age cohort



Emotional, Social and Financial Wellbeing

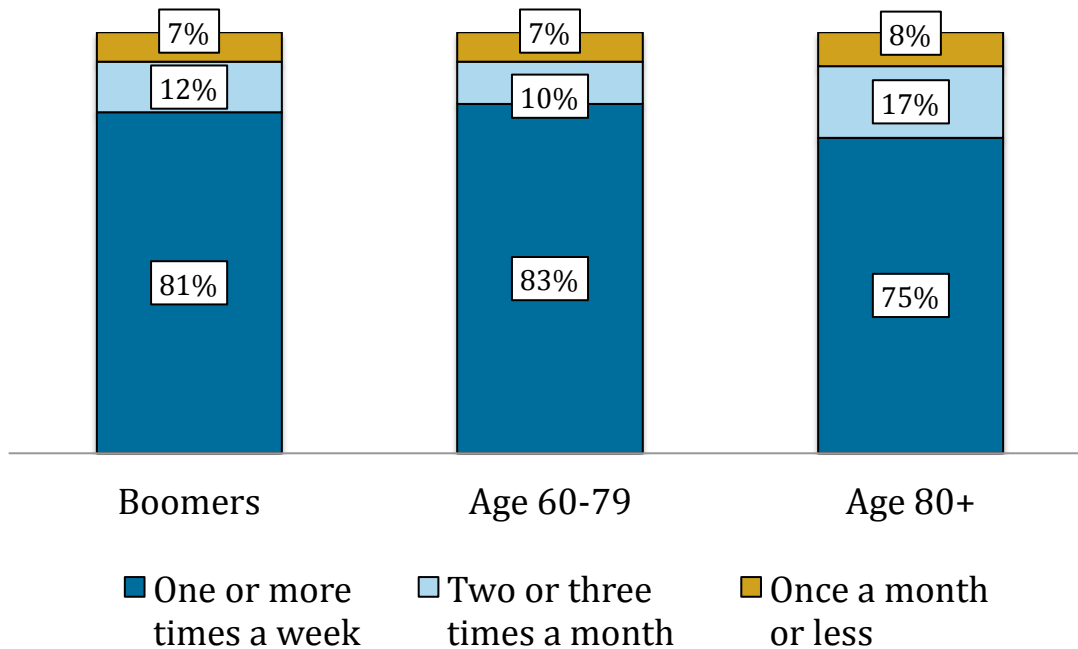
Although survey respondents reported high levels of wellbeing on average, survey findings make clear that smaller segments experience poor emotional health, social isolation, and financial struggles. Emotional health is captured here by responses to this question: “Over the last month, how often did you feel sad, depressed, or ‘down in the dumps’?” Occasional experiences of sadness are not uncommon; but feeling sad often or always is cause for concern. As shown in **Figure 22**, relatively small shares of each age cohort report feeling sad often or always (6% of Boomers and 3% to 4% of Seniors), but sadness experienced “sometimes” is common in all age groups.

Figure 22. Frequency feeling sad, depressed, or “down in the dumps” by age category



The degree of connectedness that individuals experience within their social networks of family and friends is important for everyone. Older adults are at risk of social isolation if their health and social networks break down and accessible services and transportation are not readily available to them as a means for maintaining contact with the world outside their homes. For the most part, older residents of Scituate are well connected via relationships with family, friends, and relatives, according to survey results. For example, a large majority of Boomers (81%) report talking on the phone, emailing, or getting together with family, friends, or relatives once or more a week, as do 75% of those age 80 and older (**Figure 23**). At potential risk of social isolation are the 7% to 8% of respondents who communicate with friends or family once a month or less. Although small, this proportion represents an important group to target for efforts aimed at reducing isolation and, more generally, improving social/emotional well-being of Scituate’s more vulnerable older residents.

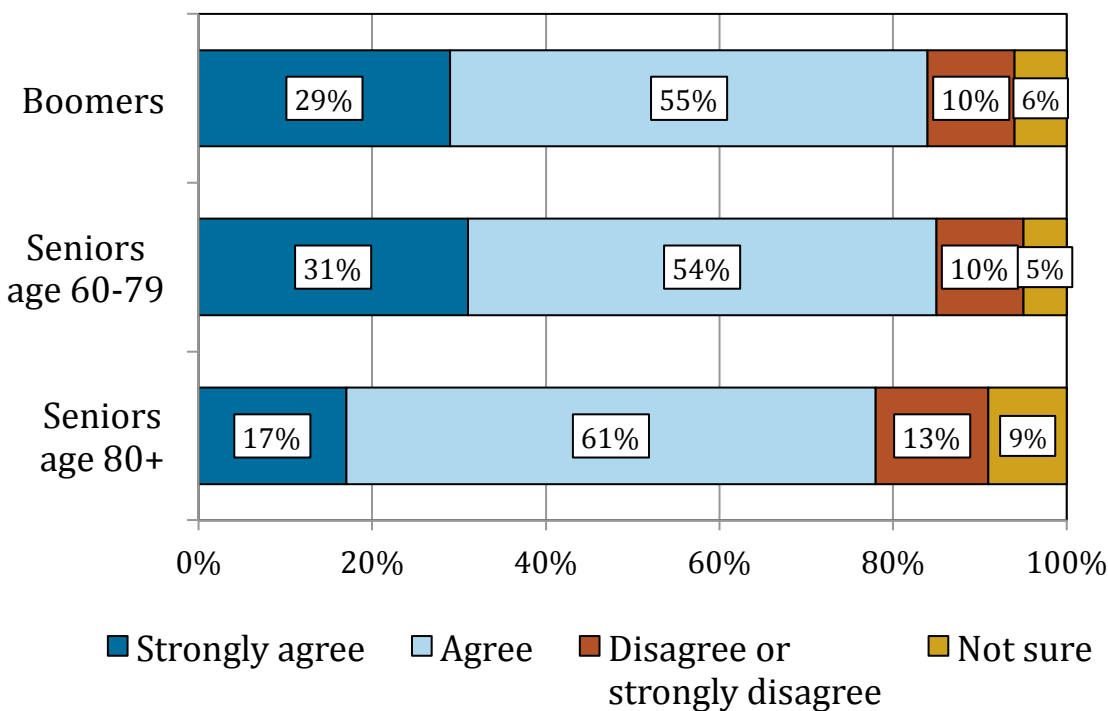
Figure 23. Frequency of contact with family, friends, or relatives



Involvement in community activities is an additional source of connectedness for older adults. More than 80% of Boomers and Seniors age 60-79, and 74% of respondents who are age 80 and older, indicate that they are involved in local programs or activities outside of the Senior Center. Those mentioned most frequently include recreational, exercise and health programs (40% of Boomers and 39% of Seniors); social activities (35% of Boomers and 37% of Seniors); and volunteer programs (25% of Boomers and 27% of Seniors). Faith-based activities are also commonly mentioned, being named by 30% of Boomers, 26% of Seniors 60-79 and 32% of Seniors age 80 and older.

As an additional element of wellbeing, survey respondents were asked to evaluate their financial well-being by indicating their level of agreement with this statement: “I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses.” **Figure 24** indicates that most respondents “agree” or “strongly agree” with this statement, suggesting a strong level of financial well-being. However, 13% of respondents who are age 80 and older, and 10% of Boomers and those age 60-79 report that they “disagree” or “strongly disagree”, indicating a segment of older adults in Scituate who are struggling financially. Moreover, 5 to 9% of respondents indicate that they are “not sure,” suggesting a sense of uncertainty or insecurity about their ability to make ends meet. These results serve as an important reminder that even in a relatively affluent community such as Scituate, some residents may be struggling economically.

Figure 24. Financial well-being: “I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses.”



Finally, in an open-ended question, survey participants were asked to reflect on their greatest concerns about their ability to continue living in Scituate as they grow older. **Table 8** shows themes raised by respondents, as well as verbatim examples of each theme. The most commonly cited theme relates to the affordability of living in Scituate on a fixed income. Many respondents are concerned about keeping up with everyday expenses, including food, fuel, and other bills. Respondents also indicated concern about being able to afford property taxes, as the values of their homes increase. The second most frequently cited theme refers to frustration with the lack of transportation options; especially in light of the need to leave the immediate area in order to obtain some goods and services. A few respondents acknowledge that their current homes are not well suited to aging in place, but they express concern that appropriate and affordable alternatives are not available in Scituate. Additional concerns focus on the need for interesting and appropriate supports, services, and programs for older residents—many respondents specifically mentioned the Senior Center as an area where improvement would be welcomed. Additional comments relate to worries about the ability to maintain health and independence into later life; implications of the winter climate in Scituate; and concerns about the “fit” between the respondent’s goals and needs, and the culture of the community.

Table 8. Most prevalent concerns about ability to age in place in Scituate

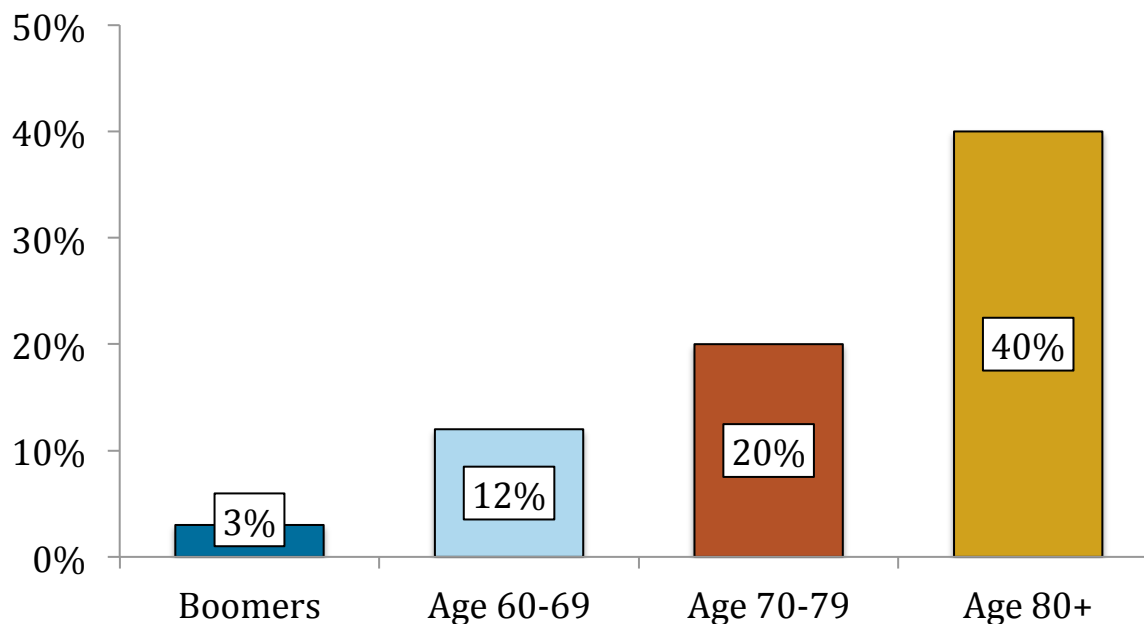
Issue Mentioned
<p>Affordability, cost of living, taxes</p> <p><i>"Taxes will become too high for us to afford to live here."</i></p> <p><i>"Outlandish property taxes: how do people on social security pay property taxes of \$5,000?"</i></p>
<p>Transportation concerns</p> <p><i>"The lack of public transportation. If I lost the ability to drive, I would be isolated."</i></p> <p><i>"If I cannot drive, I would not want to live here."</i></p> <p><i>"Transportation to various appointments (eye doctor, etc.). Taxi services seem to be minimal and not in the town. At the moment, I'm not sure if I'm ready for the Senior Van but I would be in favor of paying for a service to take me to an appointment, door-to-door if needed."</i></p>
<p>Access to and quality of services (medical and other)</p> <p><i>"Access to medical care--all doctors are Boston-based."</i></p> <p><i>"I have to travel out of town to do shopping for clothing, gifts, household necessities, food. The stores downtown are too expensive, don't offer the items I need."</i></p>
<p>Ability to stay in home, maintain home, or downsize</p> <p><i>"Our current home is not well suited as a residence for an elderly person."</i></p> <p><i>"Not able to afford to live in Scituate. The expense of hiring out home maintenance (lawn care, snow removal)--and Scituate condos are SO expensive they may not be an option. Independent living facilities are out of town and inconvenient to Scituate-based medical/dental care and our children."</i></p>
<p>Availability of appropriate activities, services, and supports</p> <p><i>"(I am concerned about) the opportunity to keep stimulated mentally."</i></p> <p><i>"Convenient access to activities to keep me engaged both intellectually and physically."</i></p> <p><i>"Being able to find help when I need it."</i></p>
<p>Culture of the community</p> <p><i>"My greatest concern is that Scituate will grow too big population/building-wise--I like the 'small town' charm."</i></p> <p><i>"Lack of feeling part of the community. I moved here after retirement and have not been able to really connect with townspeople."</i></p> <p><i>"Concern that the town does not understand or address the needs of families, elders, and those that may be at risk by providing the support and programs needed to 'Age in Place'."</i></p>
<p>Maintain good health, remain independent, needing assistance</p> <p><i>"If we eventually are unable to drive, we'll lose our independence, do not want to rely on our grown up children, who no longer live close by."</i></p> <p><i>"As I grow older, I expect to reach a point where it will be unsafe to continue to live alone."</i></p>
<p>Weather and environmental concerns</p> <p><i>"Lack of plans for catastrophic events like last year's blizzard... Having plans in place 'just in case' would make me feel more secure."</i></p> <p><i>"Road plowing in winter and some maintenance of the road in summer."</i></p>

Scituate Council on Aging and Senior Center

The Scituate Council on Aging is an important resource for many older residents striving to age in place in their homes and communities. Part of the COA’s mission is to optimize quality of life for older adults and their families through welcoming, respectful, and meaningful opportunities that engage older people. Toward these worthy ends, the COA has developed a broad range of programs and services that target a diverse population of older Scituate residents, including services for information and referrals to other community agencies, outreach, health services, transportation, education and recreation programs and activities. These programs and services promote healthy aging and enhance quality of life for seniors and their supporting family members.

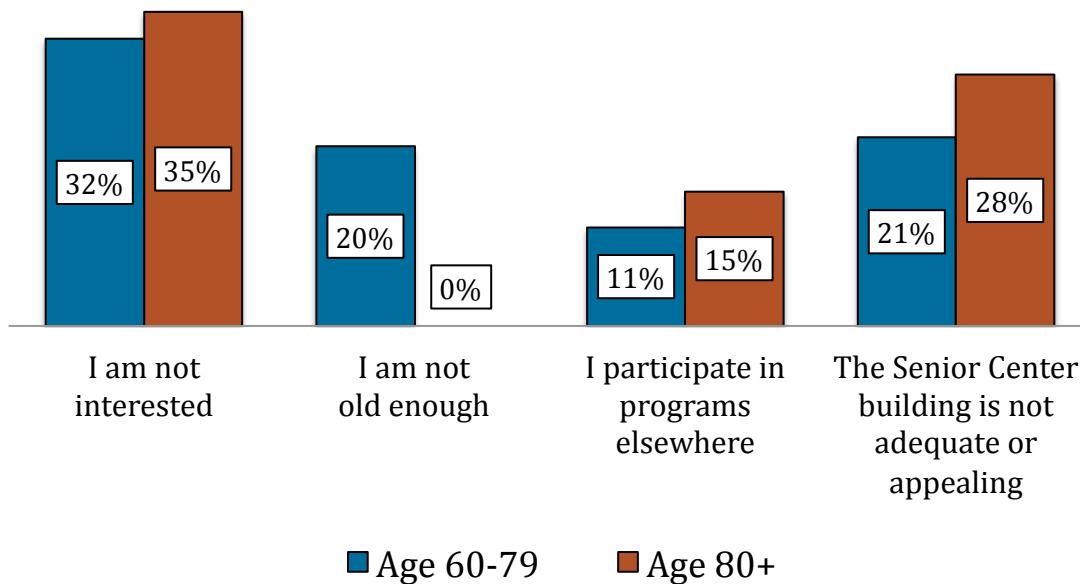
Despite the benefits that many older Scituate residents could potentially realize by participating in programs and services provided by the COA, a relatively small percentage of survey respondents said that they currently use these resources (**Figure 25**). Yet participation rates increase substantially with age. Twelve percent of Seniors age 60 to 69 report participating in COA activities, as do 20% of Seniors age 70 to 79. A larger proportion of respondents age 80 and older (40%) use programs and services. Generally, respondents in the Boomer category are not yet eligible for services provided by the COA—just 3% of the Boomer respondents report participation.

Figure 25. Percent of respondents who currently use programs and services offered by Scituate Council on Aging (including the Senior Center), by age



Among Seniors who said that they do not currently participate in programs and services offered by the COA, about one-third state that they are “not interested” (**Figure 26**). One out of five Seniors age 60 to 79 state that they are “not old enough” to participate.

Figure 26. Reasons for not currently using programs or services offered by the Scituate Council on Aging, by age category



Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

More than 20% of younger Seniors, and 28% of those who are age 80 and older, indicated that they do not participate because the Senior Center building is not adequate or appealing. A share of non-participants indicated that they do not participate in Senior Center activities because they participate in programs elsewhere. These alternative locations likely included facilities not established primarily for older adults, such as gyms; however, nearly one out of five respondents (including 24% of those age 80 and older) indicate that they have traveled to senior centers in other towns in order to participate in their programs. Indeed, one out of ten Senior respondents indicate that they do not participate in the Scituate Senior Center, but they do participate in a senior center located in another community. Responses to this item may point to misperceptions about what services are provided by the COA. For instance, many residents may feel that services are targeted only to the Town’s oldest and most frail residents, and that they themselves are too “young” to participate. In other cases, it appears that not participating in the Scituate Senior Center reflects a lack of satisfaction with the physical space or other aspects of this resource.

All survey participants were asked to identify problems they or someone they know experienced when accessing the Senior Center or its programs and services. The largest proportion of respondents in all age groups cited as a problem that the Senior Center building is not adequate (cited by 19% of Boomers, 37% of Seniors age 60 to 79 and 43% of Seniors age 80 and older) (**Table 9**). The second most commonly cited problem is the lack of sufficient parking at the Senior Center. All other problems were cited by far lower shares of respondents. For seniors age 60 to 79, insufficient numbers of openings to participate in some activities (12%), lack of knowledge about what was available (12%), inconvenient

location of the Senior Center (11%), and lack of interest in programming (11%) were cited by more than ten percent of respondents. For the oldest respondents, those age 80 and older, inconvenient location of the Senior Center (17%), insufficient numbers of openings to participate in some activities (12%), and lack of interest (13%) were cited by more than ten percent. Ten percent also cited transportation provided by the COA as being unavailable when needed or difficult to use as a problem encountered when accessing the Senior Center.

Table 9. Percent indicating problems encountered when accessing the Senior Center, by age category

	Boomers	Age 60-79	Age 80+
The Senior Center building is not adequate	19%	37%	43%
Lack of sufficient parking	14%	33%	39%
Not enough available openings to participate in some activities and events	4%	12%	12%
Not knowing what programs/services are offered	9%	12%	7%
Location of Senior Center is inconvenient	4%	11%	17%
Programs don't interest me	2%	11%	13%
Not knowing how to access programs and services	4%	7%	2%
I don't think I would fit in there	2%	6%	4%
Hours of Senior Center are inconvenient	3%	5%	2%
Senior Center-provided transportation not available when needed or difficult to use	2%	5%	10%
Lack of transportation	5%	4%	8%
Appointment based services are not available when needed	0%	3%	7%
I am concerned about protecting my privacy	1%	2%	3%

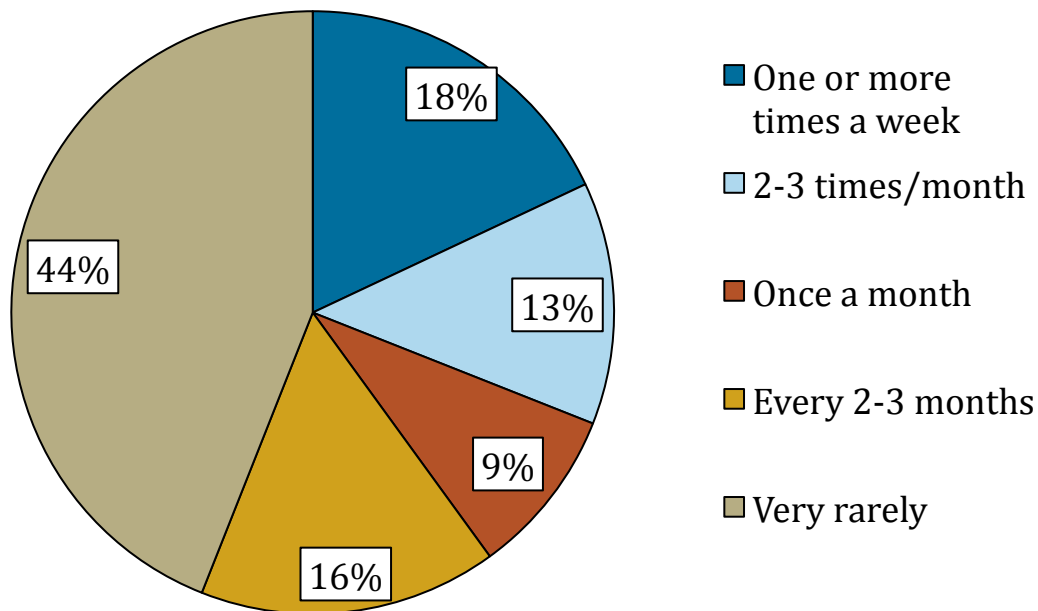
Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Additional analysis focused just on respondents who participated in the Senior Center (results not shown). For this group, 70% cited the Senior Center building as being not adequate, and 67% cited a lack of sufficient parking as a problem. For those most familiar

with the Senior Center and its programs, the physical facility and its features represent substantial obstacles to participation.

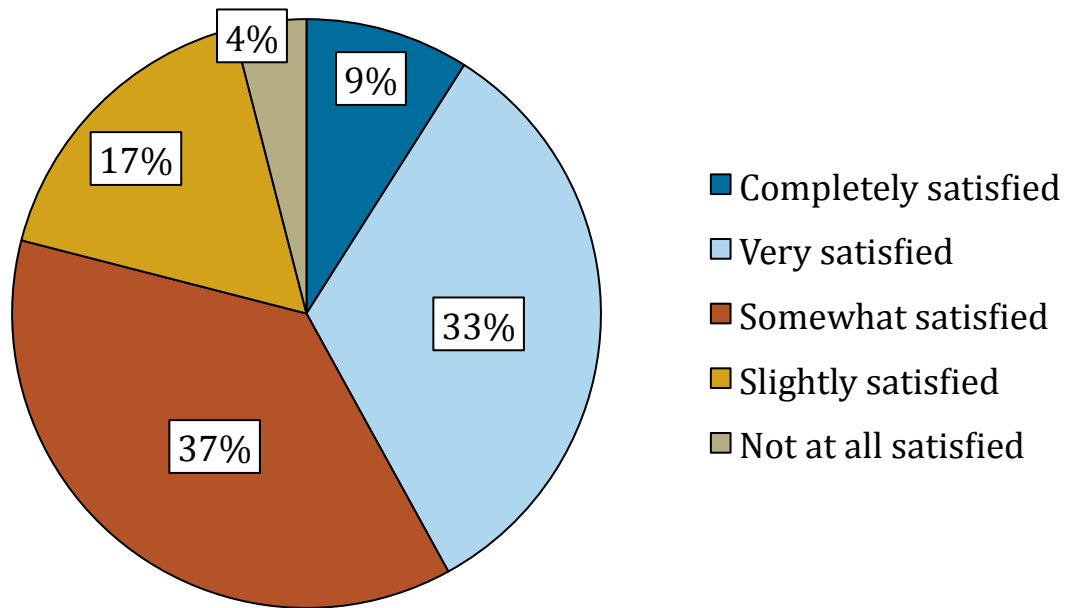
The frequency of participation among those who use the Senior Center is relatively low. **Figure 27** shows that, among respondents who say that they currently use programs or services offered at the Scituate COA Senior Center, 31% participate more frequently than once a month, but 44% participate very rarely (e.g., only for special events).

Figure 27: Frequency of Senior Center participation among respondents age 60+ who have participated



Moreover, satisfaction with programs and services among the Seniors who say that they currently use programs or services offered at the Scituate COA Senior Center is mixed (**Figure 28**). Forty-two percent of these respondents report that they are “completely satisfied” or “very satisfied” with the programs and services, but 17% report being only “slightly satisfied,” and 4% say they are “not at all satisfied.” These results suggest room for improvement for the Scituate COA Senior Center. Taken within the context of other results focusing on the Senior Center, it may be inferred that dissatisfaction with the physical facility may account for some of this general level of dissatisfaction with programs and services provided by the COA Senior Center.

Figure 28. Satisfaction with programs and services among respondents age 60+ who participate in the Senior Center



An important goal of the Scituate resident survey was to assess the value and importance of programs and services that are currently offered through the COA to older adults and their families in Scituate. This was accomplished by asking respondents to assess the importance to the community of 16 program/service categories, on a five-point scale ranging from “very important” to “very unimportant.” **Table 10** shows the percentage of survey respondents who rated programs and services as “very important” to the community. Large proportions of respondents of all ages reported that the listed programs and services are very important.

Among the categories assessed, all but six were reported as “very important” by at least half of respondents age 60 and older. Transportation services were ranked most highly, with Senior Center van service cited as “very important” by 80% of Seniors and medical transportation services cited as “very important” by 79%. The other services ranked mostly highly by Seniors included the SHINE program (help with health insurance and prescription needs), and health and wellness programs (e.g., blood pressure and glucose screening, fall prevention programs).

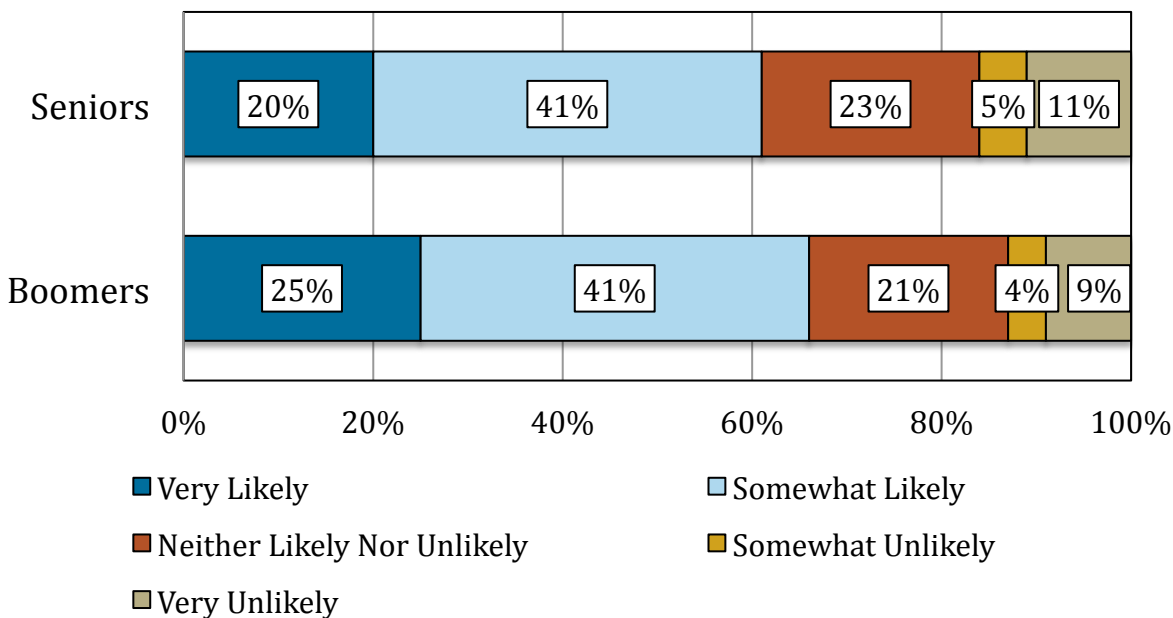
Table 10. Percent rating programs and services as “very important” to the community

	Boomers	Seniors age 60+	Age 60-79	Age 80+
Scituate Senior Center Van for local transportation	82%	80%	81%	74%
Senior Center Transportation for out-of-town medical appointments	72%	79%	80%	74%
SHINE Program—help with health insurance & prescription needs	58%	63%	66%	51%
Health and wellness programs (blood pressure & glucose screening, fall prevention, etc.)	67%	62%	64%	52%
Assistance applying for local or state programs (fuel assistance or food stamps)	54%	59%	61%	50%
Support groups	51%	55%	56%	46%
Information & referral services to local resources & care providers	46%	54%	56%	45%
In-home outreach services (friendly visitor, minor home repairs, case management)	62%	54%	56%	45%
Fitness activities (exercise, dance, yoga, Tai Chi, etc.)	58%	53%	56%	39%
Programs on coping with chronic conditions (e.g., diabetes, arthritis)	50%	52%	53%	45%
Professional services (tax preparation, financial advisor, & legal services)	46%	49%	50%	44%
Social activities (lunch groups, book club, quilting, board & card games, etc.)	60%	48%	50%	39%
Learning opportunities & educational seminars	42%	46%	48%	32%
Volunteer opportunities	45%	45%	46%	36%
Social functions (entertainment, sponsored lunches, etc.)	51%	45%	46%	39%
Bus trips and outings (to theaters, museums, & destination tours)	39%	45%	47%	37%

Adding in the share of respondents who rated the services as “somewhat important” (the next highest rating, after “very important”), we found that all sixteen services were rated as either “very important” or “somewhat important” by at least 79% of the respondents across all age groups (results not shown). These results suggest a very high level of support for these programs being available in the Scituate community. In additional analyses (not shown) we determined that compared to non-participants, respondents who had participated in Senior Center activities were more positive about the importance of programs and services—but only by a few percentage points. In short, survey results indicate strong support for programs and services offered by the Scituate COA among all age groups considered here, and among those who use the COA programs and services as well as those who do not.

Many of Scituate’s residents are receptive to participating in programs and services offered by the COA. Survey respondents were asked to assess how likely they are to participate in programs and services in the future. **Figure 29** focuses on those who do not currently participate, and indicates that two-thirds of Boomers and 61% of Seniors who do not currently participate are “very likely” or “somewhat likely” to use programs and services in the future. This response indicates a high level of receptivity to participation, and suggests that increases in demand for COA services and programs are likely.

Figure 29. Likelihood of participating in programs and services in the future (among those who do not currently participate)



In a follow-up question, respondents were asked what would encourage them to participate in programs and services offered by the Scituate COA. Responses to this question are reflected in **Table 11**, tabulated for those who do not currently participate. According to these results, the most substantial boost to participation would result from better alignment of programs and services with needs and interests. This speaks to the

importance of diverse programming in securing participation among residents; a resident who is not interested in current programs might become involved if there were an expansion of offerings. Half of Seniors who do not participate in programs and services at the Senior Center reported that they would consider participating if services that they need were offered. For these individuals, an expansion in types of available services may result in greater participation; as well, changing life circumstances (such as taking on caregiving responsibilities or experiencing a new need for fuel assistance) could prompt them to seek out services at the Senior Center. Improved communications would also be helpful—45% of Boomers and 31% of Seniors indicate that they would be encouraged to participate if they knew about the programs and services available. About one-third of both age categories indicated that a new facility or a different location would be an incentive to participation. These and other results from the survey suggest that for some residents, the physical space is a disincentive to participation. Four out of ten Boomers, and 27% of Seniors, would be encouraged to participate if they had friends, family or neighbors who attended, speaking to the importance of participation being a more “normalized” activity for older Scituate residents. For a small share, access to transportation would be an incentive.

Table 11. Conditions that would encourage participation in the Senior Center (among those who do not currently participate)

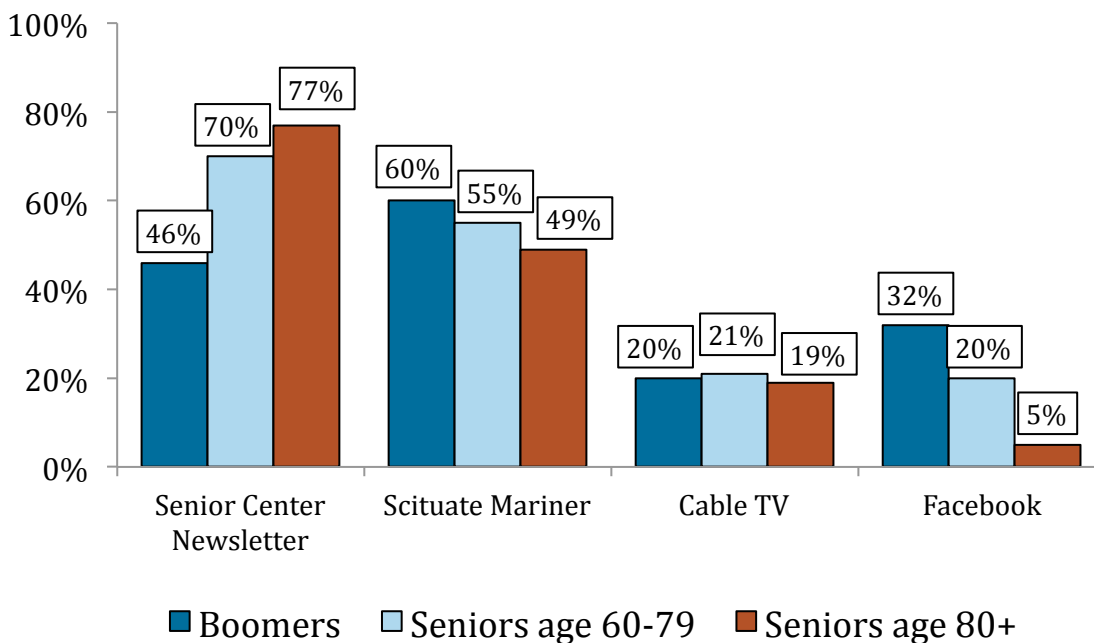
	Boomers	Seniors
They offered programs that interest me	74%	66%
They offered services I need	60%	51%
I knew about the programs and services offered	45%	31%
A new facility or different location	32%	36%
My friends, family or neighbors attended	41%	27%
I had transportation to get there	15%	9%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Given the importance of communications—ensuring that older adults throughout Scituate know about the programs and services available through the COA, and know how to access them—respondents were asked how they would like to learn about the COA programs and services. As shown in **Figure 30**, the COA newsletter is the preferred source of information for more than 70% of the Seniors, but only 46% of the Boomers. The top-ranked source of information for Boomers was the *Scituate Mariner*, which was also viewed favorably as a source of information about the COA by more than half of the Seniors. Cable TV was indicated as a desired source of information by about 20% of respondents, and social media outlets, such as Facebook, were cited by more than 30% of Boomers, but only 5% of Seniors age 80 and older. Other sources mentioned by multiple respondents included mailers, email, and an improved website. A few respondents suggested “robo-calls”, posting

flyers at the transfer station and in church bulletins, and notices in the *Patriot Ledger*. These results highlight age differences in preferred mode of communications, especially age gaps in preference for electronic versus printed outreach. To broadly reach adults in the community who may benefit from services and programs available through the COA, multiple forms of media will likely need to be used in communications.

Figure 30. Preferred source of information about the Senior Center



Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Respondents were asked to prioritize areas for new programs and services at the Scituate COA Senior Center, within the context of their own possible future needs and interests. Results of this reflection are shown in **Table 12**. Entries in this table are listed in the order of ranking among Seniors age 60 to 79. For these Seniors, lifelong learning and education programs were selected as a priority by 57%, followed by strength training/aerobic exercise programs (54%) and technology and computer classes (45%). The oldest Seniors—those age 80 and older—also named life-long learning programs as a priority (31%), along with social programs (30%) and assistance with finding or obtaining home care or assisted living resources (32%).

The programs prioritized by Boomers suggest that looking ahead, this cohort will be drawn to a broad range of activities, many of which are consistent with those prioritized by today’s Seniors. The priority rankings from Boomers do highlight two areas where the COA may be able to impact wellbeing for this younger group. Support groups for caregivers who provide care to individuals with dementia was marked as a priority by 39% of Boomers, far higher than the share of Seniors identifying this as a priority. As well, 47% of Boomers indicated that workshops on preparing for retirement are a priority for future programs, substantially higher than the share of Seniors identifying this area as a priority. As Baby

Boomers age, many gerontologists believe they will transform programs and services by operating as proactive consumers who are less likely to accept services passively, or without registering their preferences (Pruchno, 2012). Therefore, it remains important for agencies that serve older people to maintain an open, proactive approach to planning and development to assure that programs and services remain appropriate and desired by current and evolving cohorts.

Table 12: Areas to prioritize for new Council on Aging Senior Center programs and services

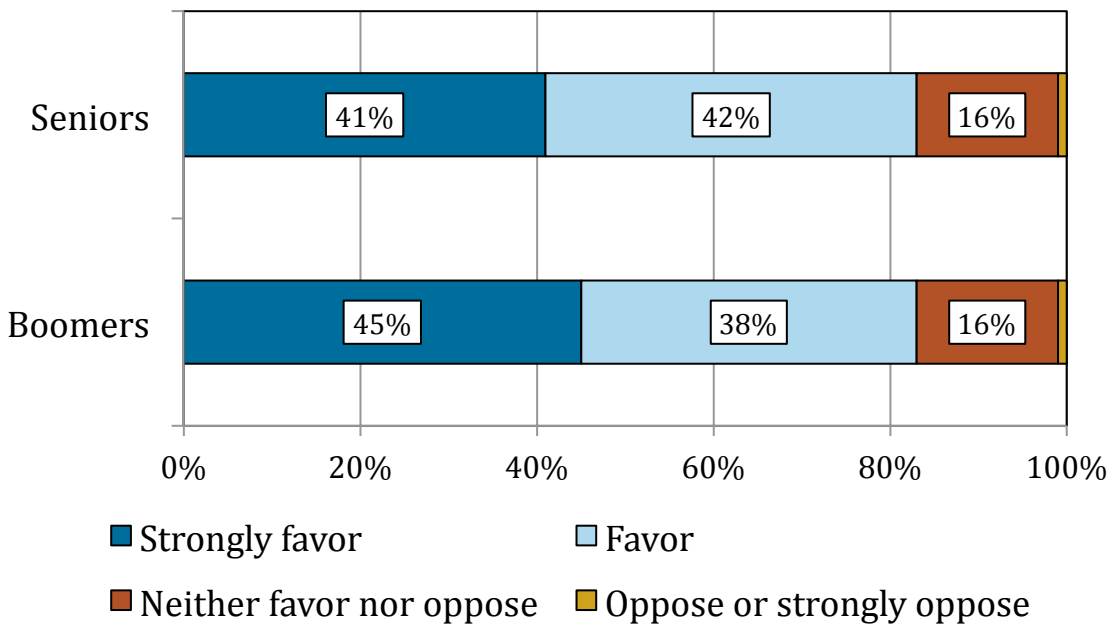
	Boomers	Seniors age 60-79	Seniors age 80+
Lifelong learning and education programs	53%	57%	31%
Strength training/aerobic exercise programs	56%	54%	28%
Technology & computer classes	46%	45%	27%
Performances/presentations	37%	42%	29%
Hiking/walking club	47%	37%	11%
Social programs	48%	37%	30%
Assistance with finding or obtaining home care	44%	36%	32%
Arts & crafts	43%	32%	22%
On-site senior lunch program	38%	25%	29%
Support groups for caregivers-dementia	39%	24%	15%
Intergenerational programs	26%	20%	11%
Programs for veterans	27%	20%	28%
Workshops on preparing for retirement	47%	16%	8%
Quiet sitting/reading area	16%	14%	13%

Note: Participants could choose multiple options, therefore totals by age category do not equal 100%.

In many communities, the COA offers a Social Adult Day Care program, which provides fee-based daytime supervision and care for adults, often individuals with dementia, in a small group setting. These programs are frequently helpful in providing respite for caregivers. Respondents were asked specifically about this service using the following question: “To what degree do you favor or oppose offering a Social Adult Day Care program in Scituate?” Results suggest a high level of support for making available a Social Adult Day Care program in the Town (**Figure 31**). More than 40% of Boomers and Seniors indicate that they “strongly favor” offering a program in Scituate, and more than 80% indicate that they

either “favor” or “strongly favor” offering such a program. Combining this finding with the relatively large number of caregivers in the community (as noted earlier in this report) suggests that caregiver support in the form of support programs and/or social adult day care programs may be favorably received.

Figure 31. Favorability of offering a Social Adult Day Care program in Scituate



Finally, survey participants were given the opportunity to offer open-ended comments about the Scituate COA Senior Center. **Table 13** shows common themes raised by respondents, as well as verbatim examples. A typical comment refers simultaneously to the *great contributions* made by a *dedicated and enthusiastic staff*, despite being housed in an *inadequate facility*. As an example, one respondent writes, “The staff and volunteers are wonderful. The building is sadly inadequate for the needs of Scituate seniors.” A high level of satisfaction with staff and programming is evident in these write-in responses. Interest in expanded programming is also expressed, especially in response to shifting needs and interests of the older population. Yet respondents acknowledge that the existing facility does not provide room for expansion. Ideas for intergenerational programming were offered by respondents and some suggested that the Town should be thinking about meeting the service and activity needs of the community more broadly, rather than focusing just on older residents. The importance of outreach and publicity was cited as a means of ensuring that everyone in the community who may benefit from the programs and services offered through the COA is reached—including homebound as well as active seniors, older adults as well as younger adults planning for their later years.

Table 13. Most frequently mentioned comments about the Scituate Council on Aging Senior Center

Issues Mentioned
<p>Building is too small, not attractive, and difficult to access</p> <p><i>“The present senior center is absolutely inadequate for a community like Scituate- There is inadequate space- there are not separate spaces for various activities. There is not enough space for meals, etc.”</i></p> <p><i>“The current building is a disgrace. There is little separation between working office and classroom. Outside vendors walk in on class. Very poor parking and signage.”</i></p> <p><i>“Scituate does not have a senior center! What it has is a crumbling building that is a disgrace and an embarrassment.”</i></p>
<p>Satisfied with programs and/or staff</p> <p><i>“I think the center and staff are doing a very good job considering lack of space and facilities and especially lack of support from the town and town government.”</i></p> <p><i>“They are polite, courteous and understanding of any problems. I have always been very grateful for their assistance.”</i></p> <p><i>“Programs are offered all over town, in churches, etc. (They are) doing amazing things with so little.”</i></p>
<p>Need more programs</p> <p><i>“I foresee a much greater need/desire for services as the Baby Boomer generation ages.”</i></p> <p><i>“I would like to see more educational programs, lecture series, history, ecology.”</i></p> <p><i>“I think the challenge of senior centers is to keep priority services yet break the stereotype viewed by new seniors that it is just transportation and lunch; the programs offered should bear in mind that new seniors may be more active and have different interests.”</i></p>
<p>Include other ages and wider community</p> <p><i>“Would like to team high school students with seniors to help with electronics—they could earn community service points.”</i></p> <p><i>“I think the center could be an age integrated center offering services to families with toddlers (also an under-served isolated population).”</i></p> <p><i>“I would like to see a facility that would be a multigenerational, quality facility that works well for all in the town, not a cheap stop-gap facility; a facility that would help tie the town together, not segregate old people.”</i></p>
<p>More information, outreach, advertising</p> <p><i>“Desperately need updated senior center in this town, plus a lot more publicity and advertising on its offered programs and activities.”</i></p> <p><i>“Might be useful to have an on-line page listing all volunteer activities available for retirees. With everything consolidated in one location, might be easier to select activities of interest.”</i></p> <p><i>“More aggressive effort to identify and service the homebound.”</i></p>

Summary from the Focus Group

A focus group was held to develop a deeper understanding of the needs of older Scituate residents who are most at risk of being underserved, and who experience challenges to successful aging in place. The group included representatives from the police department, the fire department, the housing authority, emergency preparedness, and the veterans' agent as well as the COA's outreach staff. Discussion focused on the unmet needs of the older population of Scituate, challenges experienced by the organizations represented at the focus group in responding to the shifting age composition of the population, and discussion of how organizations in Scituate could work together more effectively in support of the older population. A representative from South Shore Elder Services was unable to attend, but submitted comments by email on these topics.

The discussion on unmet needs generated a number of shared concerns among members of the group. One key theme emerging from the discussion related to *economic security challenges*. Participants noted that economic need is present in the community, but not well recognized. The cost of living in Scituate is high, especially with respect to housing costs. As a result, not only those older residents with very low income, but also those with lower- and middle-income levels struggle financially. Both the outreach coordinator and the veterans' agent reported levels of financial need in the community far beyond what is commonly recognized. Many older residents in Scituate are not eligible for financial support because they do not meet income requirements; yet they cannot afford to cover their expenses. Participants report inadequate fuel assistance resources, and long waitlists for housing that is affordable. One of the expenses discussed was home maintenance; participants recognized that some older residents could not afford to pay for *home repairs* that they needed, while others worry about finding trustworthy repairmen. This observation aligns with results from the resident survey, which cited needs for home modifications but difficulty affording them.

The *limited housing options* available in Scituate reflect another unmet need. As noted in the survey results, older adults want to stay in Scituate as they grow older; yet many live in homes that are large, expensive, and difficult to maintain. Older residents who need in-home supports, or those who could benefit from living in housing with services, such as assisted living residences, have insufficient options in the Town. For these individuals, moving to a more suitable home may require leaving Scituate. *Transportation gaps* were also widely recognized as an unmet need, although the services provided through the COA are helpful. Several people in the room knew of cases where *caregivers* lacked sufficient support and were at risk of burnout—an area of considerable need in many communities. Participants noted that many older adults in Scituate provide essential financial and other support to their adult children and grandchildren, often taking on substantial care responsibilities that are under-recognized and ill-supported. And virtually every participant agreed that Scituate lacks sufficient *mental health services*, not just for older adults but residents of all ages in the community. Mental illness, including hoarding, affects many families and organizations working in Scituate. According to focus group participants, the need is especially great for mental health providers who accept Medicare, and who will go to people's homes to provide treatment. Finally, it was noted that *elder abuse* exists in the community, but is underreported. Capacity for identifying and supporting victims of elder abuse is limited.

Participants of the focus group agreed that the aging population is impacting the Town widely. All participants represented organizations that interact with seniors, and all members reported *growing demand for services* from that segment of the community. For instance, a representative of the fire department discussed the increasing demand for services, especially on the EMS. A representative of the police department described the growing number of calls from older residents and/or their families about financial abuse, scams, and fraud. For these and for other organizations in Scituate, the large number of *older individuals living alone and with no family members living nearby* poses a challenge. When older adults experience health-related or other types of crises, organizations represented by this group are often called for help. Ideally, a family member would be notified for longer-term support and planning assistance—yet sometimes those extended family members are unknown or live far away.

The organizations represented by members of the focus group shared some special challenges to serving older adults in the community adequately. A significant challenge is *locating the people who could most benefit* from services available through the COA or through other local organizations. Often, older residents who are at high risk are also isolated or have physical or mental health conditions that make them difficult to reach. This difficulty in making contact with those in need is exacerbated when family members are not nearby. Often, vulnerability and needs only surface when a crisis occurs and emergency responders are contacted. All participants agreed that the recently established Social Services Coordinator position has had a sizable impact in addressing this problem; however, the continued importance and challenges associated with being proactive in reaching residents in need of support were noted. Also amplifying this issue is the *reluctance of individuals to ask for help*. Focus group participants felt that some older residents would not consider asking for help, despite their obvious need. *Stronger outreach* and minimizing the stigma of seeking assistance is needed to overcome this challenge.

Complicating their efforts are some unique features of Scituate. One problem highlighted among focus group discussants was the *high cost of living* in the Town; this common issue poses a challenge to all residents, but especially to older adults who may live on limited and fixed incomes. High living expenses may also decrease availability of support from adult children who live in the area, as many younger families may be unable to afford to remain in Scituate or nearby communities. Scituate's *coastal location* is another factor that could influence whether older people feel safe and secure in the community. During inclement weather conditions, homes in Scituate are at high risk of losing power, and greater demands are placed on emergency services at these times. Focus group participants acknowledged the recent installation of generators in the community rooms of senior housing developments as a positive response to this problem. Nevertheless, additional creative responses will be required in order to safeguard the wellbeing of all community members during weather emergencies.

Finally, the group discussed ways in which Town organizations could work more effectively together around issues relevant to its aging population. The group agreed that *continued strong communication* and sharing of information is key to moving forward. Participants in the focus group were able to identify many ways in which communication and information sharing is working well across town organizations, and they cited strong commitment to this activity. The group noted the need for town offices to *work more*

effectively with nonprofits and other organizations that provide services to older residents. In some cases, town offices could require assistance in accessing appropriate resources—currently, options that are available to meet this need are limited. Developing *better connections with members of the clergy* was cited as a goal, as was *better communication with community members* who may benefit from available services. Focus group participants highlighted that Scituate has been proactive and committed to addressing the unmet needs of older residents, especially in recent years. As one discussant explained, the community of Scituate is “owning” the challenges associated with responding to its aging population—not avoiding or trying to hide them, but rather seeking to communicate, plan, and address unmet needs in the community.

Summary of Key Informant Interviews

We conducted key informant interviews with the Town Administrator, the Police Chief, the Fire Chief, and a member of the Board of Selectmen who serves as liaison to the COA (Marty O’Toole). Key informants were asked to reflect on ways in which the Town has been impacted by the aging of its population; concerns, challenges, and opportunities associated with this shifting demographic profile; ways in which town offices are working well to address aging-related issues, and strategies to improve coordination and communication between town entities.

Reflecting on comments by key informants, it is clear that leaders in the Town are well informed about the central issues identified through the community survey and the focus group. All respondents are aware of growth in the older population, and all have thought deeply about how demographic trends are impacting Scituate and their own offices. Key informants viewed older residents as an asset to the community, representing a wealth of experience and knowledge, and contributing extensively through civic engagement and volunteerism. Key informants also recognized that responding to growth and change in the older population is needed by the Town in order to adequately serve the community. Key informants are committed to participating in this change, and to working collaboratively to improve the livability of Scituate for residents who strive to age in place.

All, or nearly all, key informants noted several common issues. For example, many respondents cited ways in which the growing older population has resulted in increased demand for services, including those provided by and through the COA, as well as other departments in the Town. Growth in demand for EMT services; shifts in number and types of calls to public safety; and the special vulnerability of frail and isolated elders during weather emergencies were cited as areas where the demands associated with the growing older population are most evident.

Multiple key informants noted concerns about social isolation among some older residents. One key informant acknowledged the important role of the COA and other departments, in mediating or offsetting the negative consequences that isolation can cause, through outreach. Representatives from the police and fire departments reported special concern about older residents who are isolated, and who have no nearby family members who can provide them with support. Emergency responders in the Town are frequently contacted by adult children of older residents, requesting a check on their parents’ safety—these calls are especially common during weather emergencies. The police and fire departments are often the first point of contact when a medical or other emergency occurs, and through

these responses they periodically learn of older residents who appear to be living in unsafe situations. In the past, these departments referred residents to appropriate offices, including the COA, though no formal mechanism for follow-up existed. The new Social Services Coordinator serves as an important point of connection linking the COA with various departments in the Town.

Key informants identified the very old housing stock, which is characteristic of Scituate, and its high cost as creating challenges for older residents wishing to age in place. Few options for downsizing are available in Scituate, although the Town Administrator noted that emerging housing developments could be helpful in addressing some of these issues. Similarly, limited public transportation options in Scituate pose a challenge for aging in place. Transportation services offered through the COA are acknowledged as especially important for this reason.

Interviewees cited other progress in the Town's response to changing demographic profile. For instance, the Fire Chief cited his department's constant efforts to retrain personnel in response to evolving demands of the community, including improving knowledge about medications and conditions commonly experienced among older people. This retraining has been accompanied by the Fire Department having a greater medical role locally, with more calls resulting in treatment on-site. The Police Chief cited a productive relationship recently cultivated between the Social Services Coordinator and the Police Department that relies on constant and effective communication to address cases in which both departments have significant stake. The Town Administrator noted that cross-departmental coordination around senior issues has expanded in recent years, and expressed the town-wide commitment to continue on this trajectory.

Key informants welcomed the Town's growing attention to aging-related issues. The Town Administrator noted progress, building on an effective and committed staff at the Senior Center. She and other interview participants cited the Director as an asset to the community, and positively commented on the recent hiring of a Social Services Coordinator. Multiple individuals noted the positive impact this addition has had in the community. The member of the Board of Selectmen noted that the Board has confidence in the staff and leadership of the COA, and is interested in capitalizing on the energy and enthusiasm that has been generated by these individuals. Key informants recognized the current programs and services as being of high quality and adding value to the community. According to the Town Administrator, Town funding of the COA has increased, reflecting strong support for senior services in the Town. She also notes that many more residents could benefit from services through the COA, citing the need for increased awareness and access throughout the community. The Town Administrator and Selectman O'Toole agree that the current Senior Center is inadequate for the needs of the community.

Results of Peer Community Comparison

Municipal Councils on Aging provide older residents access to important amenities that facilitate their aging in place, prolong their independence, and improve their quality of life. Indeed, in many cases Councils on Aging represent the "point of contact" for older residents seeking programs and services in communities across Massachusetts. In this respect, Councils on Aging, including Scituate's COA serve an increasingly important role in communities, especially those with large and growing numbers of older people. There are

many factors that influence the level of activity in a given community, foremost among them being the amount of resources that are dedicated to the providing services to older residents. The level of funding received by Councils on Aging from various state and local sources depends on the number and proportion of residents in the town that are age 60 and older. For example, outside of local level municipal funding, a major source of the budgets of many COAs comes from the state's Executive Office of Elder Affairs (EOEA) through a Formula Grant, which offers municipalities \$8.00 per senior residing in the city or town. Socioeconomic factors, including household income levels, often differ widely in communities throughout Massachusetts, and the resources that towns make available to serve older people can vary drastically depending on what other needs are present in the community. Generally though, towns with larger shares of older residents must dedicate relatively greater resources to assure that seniors are able to remain safe, healthy, and independent in their homes and communities. In many communities, affiliated nonprofits, such as "Friends of the Senior Center" groups, engage in fundraising on behalf of COA activities. Currently, the Scituate COA does not benefit from financial support from a Friends group.

We conducted peer comparisons between Scituate and five similar towns to assess the adequacy of resources available to the Scituate COA relative to comparable COAs. The focus of these comparisons was exclusively on the COA/Senior Center, and not the broader community issues discussed elsewhere in this report (e.g., housing issues). Communities were selected based primarily on demographic similarities of their older populations, and their proximity to Scituate. The communities selected were: The Towns of Hingham, Marshfield, Rockland, and Sandwich; and the City of Newburyport. The Towns of Hingham and Marshfield are nearby communities that have been used in other recent studies completed on behalf of Scituate (e.g., the 2014 Scituate Economic Development Study). Sandwich, Rockland and Newburyport are similar in total population size and their number of older adult residents. Data were collected by phone interviews with Directors of the COAs/Senior Centers in each community. Questions focused on areas that are key to administering programs and services within a senior center, including staffing, availability of physical space, programming, and marketing.

Including Scituate, the six municipalities range in population size, the number and percentage of the population that is age 60 and older, median household incomes, and percent of residents with college degrees (**Table 14**). Among the six municipalities, Scituate has an overall population that is in the middle of the distribution; Rockland (17,489) and Newburyport (17,416) have slightly smaller overall populations, while the largest overall population is in Marshfield (25,132). The percentage of the population age 60 and older is similar among all communities; the smallest percentage of older adults occurs in Rockland (19%), which is five percentage points less than Scituate. The median household income in all communities is higher than the state average (\$66,658), with the exception of Rockland (\$64,386). Even among the selected communities, Scituate's median household income is high, the second highest after Hingham. There is considerable variability in the percentage of the residents with a bachelor's degree or higher between the six municipalities. Hingham has the highest percentage (60%), while Rockland has the lowest percentage with a college degree (23%). Scituate (53%) is similar to Marshfield (51%) with respect to percent with a college degree.

Table 14. Demographic features of Scituate and comparison communities

City/Town	Population All Ages	Population Age 60+	% Age 60+	Median Household Income	% with College Degrees
Scituate	18,133	4,334	24%	\$92,287	53%
Hingham	22,157	5,735	26%	\$101,268	60%
Marshfield	25,132	5,143	20%	\$90,989	51%
Newburyport	17,416	4,261	24%	\$83,509	56%
Rockland	17,489	3,408	19%	\$64,386	23%
Sandwich	20,675	4,692	23%	\$82,917	46%

Source: U.S. Census Bureau, 2010 Census. Summary file 1, Table QT-P1; and American Community Survey, 2008-2012, Tables B19013 and DP02.

Size and Staffing of Peer Comparison Senior Centers

Among the communities considered, the age of senior centers and their sizes vary considerably (**Table 15**). The largest space is planned for Newburyport's new senior center (16,000 sq. ft.), expected to open in August 2015. Currently, the Newburyport COA does not have a senior center; it shares office space in the local Salvation Army building, and offers limited programs in other community locations such as churches, the hospital, and the library. Scituate has the smallest dedicated space, at about 1,000 square feet, located in a refurbished fire station, consisting of one large room and some semi-private office space.

Table 15. Comparison community senior center characteristics

City/Town	Year Opened	Square Feet	Sq ft/ senior	Adequate Space?	Tax Work Off Positions	Staff FT/ PT	Volunteers
Scituate	1990	1,000	0.2	No	7	3/6	70
Hingham	1998	5,000	0.9	No	60	3/6	150
Marshfield	2003	12,600	2.4	Yes	40	5/5	285
Newburyport	Expected 2015	16,000	3.8	Yes	Unlimited	4/1	75
Rockland	2014	9,200	2.7	No	10	2/3	60
Sandwich	1987	2,700	0.6	No	20	3/2	104

Note: FT = Full time; PT= Part time

Only Marshfield reported having adequate space to meet current programming and service needs. Newburyport expects to meet their space needs with the completion of their stand-alone center. Unmet space needs cited in all other communities included lack of office

space, limited parking, and insufficient or poorly configured space to meet the community's growing interest in programs and services. Generally, space constraints in senior centers are expected to become more problematic as older populations in communities continue to grow.

No set standards exist regarding how much space is required for a senior center to perform adequately and meet the needs of the community. Surely the quality of the programs and services, and the commitment of the staff, are key in determining performance of a COA, and Scituate performs well in those respects. Yet in both absolute and comparative terms, the dedicated space available to the Scituate COA is limiting. Senior centers commonly consider space needs in terms of square feet of dedicated space per senior resident. This value is included in Table 15 above, and shows that in Scituate, the senior center has just 0.2 square feet per resident. In comparison communities, this calculation is substantially higher, ranging from 0.6 in Sandwich to 3.8 in the Newburyport center currently being completed. One benchmark commonly cited for senior centers is *5.5 square feet* per senior resident. None of the comparison communities reach this space benchmark. Newburyport (at 3.8) and Marshfield (at 2.4) report that their available space is sufficient for programming, suggesting that with appropriately configured space, less than 5.5 square feet per resident may be adequate. If Scituate secured dedicated space equivalent to that in Newburyport on the basis of square feet per resident, it would have a 16,000 square foot facility. Using the Marshfield benchmark, it would need a 10,000 square foot facility. Both of these benchmarks yield a physical space considerably larger than what is currently available to the Scituate COA.

Staffing levels vary with respect to their total number of paid full time and part time staff. Hingham and Scituate each have 9 paid employees, including 3 full time, and 6 part time staff each. Marshfield has a comparably sized staff with 5 part-time and 5 full-time positions. Newburyport, Rockland, and Sandwich each have 5 staff members. Given their limited budgets, all comparison communities reported using volunteers to complete their day-to-day operations. Volunteers are often critical to senior centers for providing support to paid staff, and maintaining programs and services. Volunteer tasks include a wide range of activities, including administrative work and bookkeeping, marketing and outreach, kitchen work, driving, teaching classes, and serving as board or committee members.

Though many programs and services offered in comparison communities are similar, some notable themes in programming emerged. Fitness programs have become more popular across the Councils on Aging. Rockland has a particular focus on physical wellness and has increased the number and types of fitness classes to include aerobics, yoga, Zumba, line dancing, and weight training. Rockland also has a room dedicated to fitness equipment. Similarly, Newburyport will have a dedicated fitness equipment room in its new senior center building. Councils on Aging in all comparison communities provide transportation for local errands and medical appointments during business hours. Both Marshfield and Newburyport have developed a telephone reassurance program in which volunteers call older residents who have registered in the program to let them know about senior center programs, and as a way to include potentially isolated seniors in activities.

A number of methods have been developed by directors of comparison COAs to appeal to a wider pool of potential consumers, including younger residents who are eligible for

services, but who do not use them. Traditional methods including monthly newsletters were cited, as was a movement toward greater use of electronic media, as a means to appeal to the younger residents. Local television programming, radio, and newspapers were also mentioned as important for advertising the COAs and their programming. In Hingham, the senior center is central in town and adjacent to the Town Hall, giving it high visibility within the community. Unique to Newburyport and Rockland is the “hype” associated with new facilities. Both communities cited word-of-mouth and publicity as important for increasing usage, and raising awareness of what each COA has to offer residents.

Summary and Recommendations

The Town of Scituate has experienced substantial growth among its older population in recent years. The number of residents who are age 60 or older increased by 20% between 2000 and 2010, and today, more than one-quarter of Scituate residents are included in that age group. On the basis of this growth, demand for programs and services offered by Scituate’s COA is greater today than ever before. Moreover, demographic projections suggest that the need for services will continue to increase for years to come as the Town’s “Baby Boomers” seek new opportunities to participate in community activities, or as their need for assistance grows.

The purpose of this study was to describe two cohorts of Scituate’s older residents, and to assess their needs and preferences with respect to aging in Scituate. To inform its planning process, the Town of Scituate and its COA, along with the research team from UMass Boston, solicited input from residents age 60 and over, who are currently eligible to participate in programs and services; and a cohort of younger residents age 45 to 59, who will become eligible for services during the coming decades. Assessment methods were designed to determine whether programs and services are appropriate and adequate to address specific current and future aging-related needs of older adults in the Town.

Study results suggest that older Scituate residents are deeply committed to staying in their community. Most are long-time residents, with a vested interest in maintaining the Town as a safe and highly livable locale in which to grow older. Additionally, our results portray Scituate as a healthy and vibrant community, as suggested by the large numbers of survey respondents who reported high levels of physical and emotional well-being. Older residents of Scituate have a strong sense of belonging to their community, and most perceive the Town to be a very safe place to live. Therefore, it is not surprising that many respondents reported a strong desire to remain living in Scituate as long as they can.

The Scituate Council on Aging plays an important role in connecting older adults to services and supports, offering opportunities for socialization and engagement, helping to meet transportation needs for older residents, and providing leadership in the community around aging issues. Information obtained for this report suggests that the energy and effectiveness of the COA staff are understood and valued throughout the Town. The Social Services Coordinator, a recent addition to the COA staff, is highly valued and is perceived as having strong impact throughout the community. The creation of this position represents one of several Town developments that signal a community commitment to stronger cross-

departmental coordination and creative planning in support of the older residents of Scituate.

Despite many positive findings across the areas we assessed, significant segments of Scituate's older population may be at risk due to declining health, inadequate and/or diminishing social networks, transportation limitations, and economic insecurity. In addition, many older residents who are financially secure, healthy, and active participants in the community at present still maintain concerns about the future. The Town's COA can continue to support older residents and target outreach to seniors who are at high risk for social isolation or who are particularly vulnerable to economic insecurity or uncertainties related to their housing situation.

In this study we reported some differences between age cohorts that may be helpful in planning for the future. For example, in developing new programs and expanding existing ones, Scituate's COA may wish to note the sizable number of respondents who have caregiving responsibilities. The COA can support current seniors in Scituate by serving as a resource for caregivers, including those who are not yet age 60. Boomers in this study could benefit from receiving information and referrals to supplemental care support, such as adult day care and respite care, and by helping with retirement planning. By reaching out to Boomers and offering services that they currently need, and that they find important and valuable, the COA could achieve the dual purpose of raising awareness among people who may need services themselves as they grow older.

The Town of Scituate COA can serve as a central hub in the larger network of agencies and services that support Scituate's older residents as they strive to age in place. Stakeholders who provided data for this study reported that the COA fills an important niche in the community, though virtually all acknowledged that the current Senior Center facility is inadequate. Results from the sample survey suggest that features of the facility—limited space, awkward scheduling, and difficult parking in particular—are seen as disincentives to participation by community members. An additional barrier to utilization of services is lack of knowledge about what is available or how to access services. Many residents are not well-informed about programs and services for which they and their families may be eligible. Focus group results confirm that many older adults are not aware of available services throughout the community, and many are reluctant to ask for help even if they need it. Moving forward, Scituate's COA may wish to seek new in-roads to reach members of the community and make them aware of its programming. Different age groups are drawn to different types of media; as a result, the greatest success in recruiting new participants is likely to be realized by strengthening dissemination both through traditional outlets such as newspapers, newsletters, and flyers, and through electronic outlets such as email and social media.

The Town of Scituate may consider working to expand housing options that would allow older residents who are not able or do not wish to remain in their homes, to downsize into rental, single-level, or supported housing within Scituate. Community members report a very strong commitment to aging in Scituate; yet few options to downsize currently exist. We note that the Scituate Economic Development Study produced by the MAPC earlier this year recommended building accessible housing appropriate for downsizing and aligning with the budgets of older residents; our results support this recommendation.

In addition to these general comments, we offer the following specific **recommendations** to assist the Town of Scituate in its planning for the future, and to guide policy-making by town departments charged with serving older adults and improving livability of the Town:

- Plan for substantial growth of the senior population in coming years. By 2030, residents who are age 60 and older are expected to constitute one-third of the entire population of Scituate. Recognize that expanding numbers of senior residents will impact virtually every aspect of the community, not just the Council on Aging and Senior Center.
- Consider ways to leverage existing services and programs within the community. Continue to build a culture in which coordination and cooperation across Town offices are the standard. The recent hiring of the Social Services Coordinator and her effectiveness in working with other Town offices is a good example of how this approach can yield benefits.
- Scituate can promote quality of life and social engagement among older people by supporting convenient, affordable, and reliable local public transportation options for residents who are unable to drive safely or who prefer to travel using public transportation.
- Recognize that walkability is a concern among many residents. We note that improved walkability in the community was recommended by the recent MAPC economic development study as well; improvements in this area can have benefits throughout the community.
- Use planning for the expanding senior population as an opportunity to promote livability of the community for all residents. Protecting and increasing access to public spaces, improving public transportation options, and promoting programs that help seniors maintain their property are ways in which the entire community may benefit.
- Consider opportunities to facilitate aging in place and downsizing for older Scituate residents who wish to do so. Many older Scituate residents report needing to make home modifications in order to stay in their current residence, but not being able to afford doing so; creating programs to connect residents to affordable and reliable home modification services can be helpful. Other residents express a preference for downsizing but do not perceive acceptable opportunities to do so within Scituate. Prioritize senior-friendly housing as part of future housing development planning.
- Recognize as a significant priority the need to expand knowledge of existing Council on Aging programs and services within the community. Engage in aggressive outreach to make residents of all age groups aware of the COA, its mission, and its scope of services. Expanding electronic dissemination of information as a supplement to print and other media will be valued.
- Although many older residents are financially secure, healthy, and socially engaged, significant segments are not. The Council on Aging is charged with serving all segments of the community, with widely varying needs. Targeting those with limited or inadequate resources for programs and services can ensure that resources are optimized to achieve the goals set forth in the Older Americans Act. Residents who are isolated, frail, or experience depression or other mental health challenges represent additional targets for intervention.

- Recognize that caregiving needs are substantial and may become more challenging as the age structure continues to shift. Additional support for caregivers may be beneficial, in the form of expanded caregiver support and education programs. Consideration may also be given to locating a supportive day program for seniors in Scituate; the community appears to be receptive to this possibility.
- Recognize a need for household and personal care services, especially among Scituate's oldest residents. Connecting older residents and their families to available services is an important role of the COA.
- Recognize that the demand for COA-provided transportation services is likely to increase steadily. As the population continues to age, alternatives to self-driving will be increasingly sought out. Especially given the limited public transportation options in the area, COA services will experience heightened demand.
- Indeed, recognize that the demand for COA services and programs in general will escalate in the future. The community will see steady increase in the number of older residents moving forward. A large share of older adults who do not currently use COA programs and services indicate they are likely to do so in the future. All evidence points to expanded demand for COA services and programs in Scituate.
- Consider an expansion in the number of tax work-off slots made available to the community. Scituate currently offers fewer of these opportunities than is available in most comparison communities. This program is a benefit for lower-income seniors aiming to age in place, as well as for Town offices that draw on their skills and experience.
- Develop a Senior Center facility that reflects the strong support for COA activities and programs within the community as well as throughout Town offices, is commensurate with the current energy and commitment of its staff, and that acknowledges the escalating senior population. Priority should be placed on creating a facility that has sufficient adjacent space for multiple activities to occur simultaneously. Multi-purpose and flexible spaces are needed to accommodate the diversity of interests reflected across senior cohorts; as well, as new cohorts of residents become engaged in COA activities program offerings will evolve in turn. Connecting residents to services and helping them enroll is an important activity of the COA; to meet this mission, private spaces for confidential conversations about support needs are required. Adequate parking and accessibility features are essential in any facility to be developed.
- An improved facility is likely to result in growing demand not only among newly eligible residents, but also among those who have been discouraged from participation in the past due to limitations in programming, space, or access. Survey results suggest that features of the current building and parking are disincentives to participation among some community members. Improved space and expanded programming will yield expanded participation. As a result, we recommend developing space adequate to support substantial growth in usage.

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APPENDIX A: Survey Questionnaire

PLEASE RETURN THE SURVEY BY NOVEMBER 24, 2014



Town of Scituate Council on Aging Community Survey

The *Town of Scituate Council on Aging Senior Center* is asking **residents age 45 and over** to share their views in order to assess the needs of our older population and improve programs and services provided by the Senior Center. Please help us improve our programs and services by completing the enclosed survey. **All of your responses will be kept confidential. Please do not include your name or other identifying information on this form.** If you need assistance completing this questionnaire or have questions, please leave a message at 617-287-7361 and we will return your call. If you prefer to respond online, please go to our secure site at: <https://www.surveymonkey.com/s/ScituateSeniorCenterSurvey>.

Section I. Current Housing

1. Which option best describes your current place of residence in Scituate? (Check only one)

- Single-family home Apartment complex, including subsidized apartment housing
 Condominium or townhouse Independent living, assisted living or health care facility
 Multi-family home (2, 3, or more units)
 Other (please specify): _____

2. Do you and/or your spouse/partner own the residence you live in?

- Yes No

3. Who do you live with? (Check all that apply)

- I live alone With my parent(s)
 With a spouse/partner With another relative
 With my child(ren) With someone else (including housemates)

4. Does your current residence need home modifications or changes to improve your ability to live in it over the next 5 years?

- Yes (if yes, continue to question #4a) No (if no, then skip to question #5)



4a. Can you afford to make these changes?

- Yes No

5. Do you live in Scituate year-round?

- Yes No

Please continue to the next page.

6. How long have you lived in Scituate? (Check only one)

- Fewer than 5 years 25-34 years
 5-14 years 35 years or longer
 15-24 years Scituate native

Section II. Health & Caregiving

7. How would you rate your overall physical health?

- Excellent Good Fair Poor

8. Due to a health issue, do you require help with activities around the house (e.g., doing routine chores like cleaning or yard work)?

- Yes No

9. Due to a health issue, do you require help with daily activities (e.g., using the telephone, preparing meals, taking medications, or keeping track of bills) or with personal care activities (e.g., taking a shower or getting dressed)?

- Yes No

10. Referring to the activities in questions 8-9 for which you answered "Yes": Who helps you with these activities? (Check all that apply)

- N/A, I don't require any help I need help, but I have no one to help me
 I pay someone to help me A family member helps me
 Someone else pays for my care A friend or neighbor helps me
 Someone else helps me (please specify): _____

11. Within the past 1 year have you provided unpaid care or assistance to a spouse, relative, or friend who is disabled or frail?

- Yes (if yes, continue to question #11a & #11b) No (if no, then skip to question #12)



11a. Does the person for whom you provide care have Alzheimer's disease or another dementia?

- Yes No

11b. How challenging is it for you to care for this person and meet your other responsibilities with family and/or work?

- Very Challenging Somewhat Challenging Neither Challenging Nor Easy Somewhat Easy Very Easy

Section III. Social and Emotional Well-Being

12. Over the last month, how often did you feel sad, depressed, or “down in the dumps”?

- Never Rarely Sometimes Often Always

13. How often do you talk on the phone, email, or get together with family, friends, or relatives?

- Never Once a month
 Very rarely (e.g., only on holidays) Two or three times each month
 Every two to three months One or more times a week

14. Outside of the Scituate Council on Aging Senior Center, in what other types of local programs, services, or activities do you participate? (Check all that apply)

- Volunteer programs Nutrition/meal programs
 Recreational/exercise/health programs Social activities
 Faith-based activities Educational/cultural programs
 Other (please specify): _____

15. How safe do you feel in the neighborhood where you live?

- Completely Safe Very Safe Somewhat Safe Slightly Safe Not at All Safe

16. Do you feel a sense of belonging in the community where you live?

- Yes No

17. How important is it for you to remain living in Scituate as long as possible?

- Very Important Somewhat Important Slightly Important Not at All Important

18. What are your greatest concerns about living in Scituate as you grow older?

Please continue to the next page.

Section IV: Transportation

19. How do you meet your transportation needs? (Check all that apply)

- I drive myself
- My spouse or child(ren) drive me
- Friends or neighbors drive me
- Public transportation (e.g., bus, commuter rail)
- Scituate Senior Center transportation services
- Other (please specify): _____

20. Below is a list of possible difficulties one might face when traveling locally. Which have you experienced when traveling locally, if any? (Check all that apply)

- N/A, I have experienced no difficulties
- Public transportation is inconvenient and/or not available where I want to go
- There is no one I can depend on for help
- Physical or other limitations
- No door-to-door assistance
- Walkability issues (e.g., lack of or interrupted sidewalks)
- Other (please specify): _____

21. Do you ever modify your driving by engaging in any of the following behaviors? (Check all that apply)

- Not applicable—I do not drive
- I do not modify my driving at all
- I avoid driving at night
- I avoid making left hand turns
- Other modifications of driving behavior (please specify): _____
- I avoid driving in bad weather
- I avoid expressway driving
- I avoid driving far distances
- I avoid driving in unfamiliar areas

22. How satisfied are you with the transportation options available to you in Scituate?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completely Satisfied | Very Satisfied | Somewhat Satisfied | Slightly Satisfied | Not at All Satisfied |

23. If you currently drive, do you ever assist any older adults by providing them with transportation?

- Yes
- No
- I do not drive

24. Have you ever traveled to senior centers in other towns to participate in their programs?

- Yes
- No

Section V. Current Senior Center Services

The Scituate Council on Aging Senior Center advocates on behalf of the Scituate Senior Residents age 60+ and offers local programs and services to meet their needs.

25. The following items refer to programs and services that are currently offered by the Scituate Council on Aging Senior Center or are being considered for future programming. In your opinion, what is the importance of each program or service to the community?


	Very Important	Somewhat Important	Neither Important or Unimportant	Somewhat Unimportant	Very Unimportant
Scituate Senior Center Van for local transportation					
Senior Center Transportation for out-of-town medical appointments					
Support groups					
Volunteer opportunities					
Health and wellness programs (blood pressure & glucose screening, fall prevention, etc.)					
Professional services (tax preparation, financial advisor, & legal services)					
Fitness activities (exercise, dance, yoga, Tai Chi, etc.)					
Social activities (lunch groups, book club, quilting, board & card games, etc.)					
Social functions (entertainment, sponsored lunches, etc.)					
Bus trips and outings (to theaters, museums, & destination tours)					
Learning opportunities & educational seminars					
Information & referral services to local resources & care providers					
Assistance applying for local or state programs (fuel assistance or food stamps)					
SHINE Program—Help with health insurance & prescription needs					
In-home outreach services (friendly visitor, minor home repairs, case management)					
Programs on coping with chronic conditions (diabetes, arthritis, etc.)					

Please continue to the next page.

26. Do you currently use programs or services offered at the Scituate Council on Aging Senior Center (or at other locations used by the Senior Center)?

No (if no, continue to question #26a)

Yes (if yes, continue to questions #26b & #26c)



26a. What is the reason that you do not currently utilize the Senior Center programs and services? (Check all that apply)

- I am not interested
- I am not old enough
- I participate in programs elsewhere
- The senior center building is not adequate or appealing
- Other (please specify): _____



26b. How often do you attend programs or utilize services offered by the Senior Center?

- One or more times a week
- Two or three times each month
- Once a month
- Every two to three months
- Very rarely (e.g., only for special events)

26c. Overall, how satisfied are you with the programs and services currently offered by the Senior Center?

- Completely Satisfied Very Satisfied Somewhat Satisfied Slightly Satisfied Not at All Satisfied

27. Below is a list of problems one could encounter when accessing the Senior Center or its programs. Which of these problems have you or someone you know experienced? (Check all that apply)

- N/A, I am unfamiliar with the Senior Center or any problems accessing the Center
- I have not experienced any problems
- The Senior Center building is not adequate
- Lack of transportation
- Lack of sufficient parking
- Not knowing how to access programs or services
- Not enough available openings to participate in some events or activities
- I don't think I would fit in there
- Other (please specify): _____
- Not knowing what programs/services are available
- I am concerned about protecting my privacy
- Inconvenient location of the Senior Center
- Hours of Senior Center are inconvenient
- Programs don't interest me
- Senior center-provided transportation is not available when needed or difficult to use
- Appointment-based services are not available when needed

28. If you care to comment further about the Senior Center, including the building, staff, or programs and services, please do so here:

Section VI. Future Senior Center Planning

29. In the future, how likely are you to participate in programs and services offered by the Scituate Council on Aging Senior Center?

Very
Likely

Somewhat
Likely

Neither Likely
Nor Unlikely

Slightly
Unlikely

Very
Unlikely

30. In the future, what would encourage you to participate in programs and services offered by the Senior Center? (Check all that apply)

- They offered programs that interested me
- They offered services I needed
- My friends, family or neighbors attended
- A new facility or different location
- Other (please specify): _____

- I had transportation to get there
- I knew about the programs & services they offered

31. Thinking about your possible *future* needs and interests, which of the following areas would you prioritize for *new* programs and services at the Senior Center? (Check all that apply)

- On-Site Senior Lunch Program
- Performances/presentations
- Quiet sitting/reading area
- Programs for veterans
- Strength training/aerobic exercise programs
- Lifelong learning & education programs
- Support groups for caregivers providing care to individuals with dementia
- Other (please specify): _____

- Hiking/walking club
- Technology & computer courses
- Arts & crafts programs
- Social programs
- Intergenerational programs
- Workshops on preparing for retirement
- Assistance with finding or obtaining home care or assisted living resources

32. How would you like to learn about the activities and services offered by the Senior Center? (Check all that apply)

- Scituate Senior Center Newsletter
- Cable TV
- Other (please specify): _____

- The Scituate Mariner Newspaper
- Facebook (or other social media sites)

Please continue to the next page.

33. Many towns offer a Social Adult Day Care program through their Council on Aging. Social Adult Day Care provides fee-based daytime supervision and care for adults, often seniors with dementia, in a small group setting. These programs are frequently helpful in providing respite for caregivers. To what degree do you favor or oppose offering a Social Adult Day Care program in Scituate?

Strongly Favor

Favor

Neither Favor
Nor Oppose

Oppose

Strongly Oppose

Section VII. Demographics & Living Situation

34. Please select your gender Female Male

35. What is your age range?

45-59

60-69

70-79

80+

36. Which of the following best describes your race/ethnicity? (Check all that apply)

White/Caucasian

Asian

Black/African American

Hispanic/Latino

Other (please specify): _____

37. Please indicate your level of agreement with the following statement: "I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses."

Strongly
Agree

Agree

Disagree

Strongly
Disagree

Not
Sure

38. If you have any other thoughts about the Scituate Council on Aging Senior Center or the current or future needs of older adult residents in Scituate, please include them here:

Thank you for your participation! We truly appreciate your time and support.

If you have any questions or concerns regarding this survey, please contact:

Jan E. Mutchler, Ph.D.

Director, Center for Social and Demographic Research, Gerontology Institute

McCormack Graduate School of Policy and Global Studies

University of Massachusetts, Boston

Phone: # 617-287-7321

APPENDIX B: Detailed tables from Scituate survey

Available online: <http://www.umb.edu/demographyofaging>

Appendix B: Complete tables, Scituate Resident Survey

Below, percentage distributions are shown for quantitative items included in the Scituate Council on Aging resident survey. Percentages are provided separately for Boomers (age 45 to 59) and Seniors (age 60+), and subsets are provided for two age groups within the Senior population (those 60 to 79; and those 80 and older). Calculations are weighted to account for sample stratification and age-graded return rates. Readers are cautioned against drawing strong conclusions based on differences between groups with small numbers of respondents.

Unweighted number of respondents

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
N of respondents	98	529	303	226

Section I: Current Housing

Q1. Which option best describes your current place of residence in Scituate? (Check only one)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Single family home	92%	84%	87%	72%
Condominium or townhouse	3%	9%	8%	11%
Multi-family home (2, 3, or more units)	4%	2%	1%	4%
Apartment complex, including subsidized apartment housing	1%	4%	3%	8%
Independent living, assisted living or health care facility	0%	0%	0%	0%
Other	0%	2%	1%	6%
Total	100%	100%	100%	100%

Q2. Do you and/or your spouse/partner own the residence you live in?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	91%	92%	94%	81%
No	9%	8%	6%	19%
Total	100%	100%	100%	100%

Q3. Who do you live with? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
I live alone	12%	22%	16%	48%
With a spouse/partner	81%	72%	80%	39%
With my child(ren)	45%	9%	9%	10%
With my parent(s)	7%	1%	1%	0%
With another relative	2%	2%	2%	2%
With someone else (including housemates)	0%	1%	1%	1%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q4. Does your current residence need home modifications or changes to improve your ability to live in it over the next 5 years?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	16%	20%	19%	23%
No	84%	80%	81%	77%
Total	100%	100%	100%	100%

Q4a. Can you afford to make these changes?

[Respondents who report “Yes” on Q4 only]

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	27%	41%	44%	31%
No	73%	59%	56%	69%
Total	100%	100%	100%	100%

Q5. Do you live in Scituate year-round?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	100%	96%	95%	98%
No	0%	4%	5%	2%
Total	100%	100%	100%	100%

Q6. How long have you lived in Scituate? (Check only one)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Fewer than 5 years	8%	3%	3%	3%
5-14 years	15%	13%	14%	11%
15-24 years	35%	12%	14%	7%
25-34 years	15%	14%	15%	7%
35 years or longer	15%	48%	44%	63%
Scituate native	12%	10%	10%	9%
Total	100%	100%	100%	100%

Section II: Health & Caregiving

Q7. How would you rate your overall physical health?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Excellent	47%	33%	38%	10%
Good	44%	56%	55%	62%
Fair	8%	10%	7%	25%
Poor	1%	1%	0%	3%
Total	100%	100%	100%	100%

Q8. Due to a health issue, do you require help with activities around the house (e.g., doing routine chores like cleaning or yard work)?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	10%	23%	17%	53%
No	90%	77%	83%	47%
Total	100%	100%	100%	100%

Q9. Due to a health issue, do you require help with daily activities (e.g., using the telephone, preparing meals, taking medications, or keeping track of bills) or with personal care activities (e.g., taking a shower or getting dressed)?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	4%	3%	1%	11%
No	96%	97%	99%	89%
Total	100%	100%	100%	100%

Q10. Referring to the activities in questions 8-9 for which you answered “Yes”: Who helps you with these activities? (Check all that apply)

[Respondents who report “Yes” on question 8 or question 9]

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
I need help, but I have no one to help me	10%	3%	4%	2%
I pay someone to help me	60%	61%	65%	55%
A family member helps me	40%	44%	43%	44%
Someone else pays for my care	10%	0%	0%	1%
A friend or neighbor helps me	20%	8%	6%	12%
Someone else helps me	0%	10%	10%	10%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q11. Within the past 1 year have you provided unpaid care or assistance to a spouse, relative, or friend who is disabled or frail?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	36%	27%	29%	19%
No	64%	73%	71%	81%
Total	100%	100%	100%	100%

Q11a. If Yes on question 11: Does the person for whom you provide care have Alzheimer’s disease or another dementia?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Yes	21%	34%	33%	39%
No	79%	66%	67%	61%
Total	100%	100%	100%	100%

Q11b. If Yes on question 11: How challenging is it for you to care for this person and meet your other responsibilities with family and/or work?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Very Challenging	12%	11%	12%	10%
Somewhat Challenging	29%	37%	39%	23%
Neither Challenging Nor Easy	35%	19%	16%	33%
Somewhat Easy	15%	19%	19%	23%
Very Easy	9%	14%	14%	11%
Total	100%	100%	100%	100%

Section III: Social and Emotional Wellbeing

Q12. Over the last month, how often did you feel sad, depressed, or “down in the dumps”?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Never	26%	29%	30%	23%
Rarely	41%	41%	42%	39%
Sometimes	27%	27%	25%	34%
Often	5%	3%	3%	4%
Always	1%	0%	0%	0%
Total	100%	100%	100%	100%

Q13. How often do you talk on the phone, email, or get together with family, friends, or relatives?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Never	0%	0%	0%	0%
Very rarely (e.g., only on holidays)	0%	2%	2%	1%
Every two to three months	2%	3%	3%	3%
Once a month	5%	3%	2%	4%
Two or three times a month	12%	11%	10%	17%
One or more times a week	81%	81%	83%	75%
Total	100%	100%	100%	100%

Q14. Outside of the Scituate Council on Aging Senior Center, in what other types of local programs, services, or activities do you participate? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Volunteer programs	25%	27%	29%	18%
Recreational/exercise /health programs	40%	39%	43%	22%
Faith-based activities	30%	27%	26%	32%
Nutrition/meal programs	0%	2%	1%	7%
Social activities	35%	37%	38%	32%
Educational/cultural programs	15%	23%	26%	11%
Other	17%	16%	15%	19%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q15. How safe do you feel in the neighborhood where you live?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Completely Safe	57%	51%	52%	45%
Very Safe	40%	44%	43%	45%
Somewhat Safe	3%	5%	5%	9%
Slightly Safe	0%	0%	0%	1%
Not at All Safe	0%	0%	0%	0%
Total	100%	100%	100%	100%

Q16. Do you feel a sense of belonging in the community where you live?

	Boomers Age 45-59	Seniors Age 60	Age 60-79	Age 80+
Yes	95%	91%	90%	93%
No	5%	9%	10%	7%
Total	100%	100%	100%	100%

Q17. How important is it to you to remain living in Scituate as long as possible?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Very Important	53%	75%	74%	80%
Somewhat Important	37%	18%	18%	16%
Slightly Important	8%	5%	5%	2%
Not at All Important	2%	2%	3%	2%
Total	100%	100%	100%	100%

Section IV: Transportation

Q19. How do you meet your transportation needs? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
I drive myself	98%	93%	97%	77%
My spouse or child(ren) drive me	6%	18%	16%	27%
Friends or neighbors drive me	1%	5%	2%	15%
Public transportation (e.g., bus, commuter rail)	12%	9%	10%	3%
Scituate Senior Center transportation services	1%	3%	1%	10%
Other	1%	2%	1%	7%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q20. Below is a list of possible difficulties one might face when traveling locally. Which have you experienced when traveling locally, if any? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
N/A, I have experienced no difficulties	66%	69%	69%	66%
Public transportation is inconvenient and/or not available where I want to go	21%	20%	21%	16%
There is no one I can depend on for help	1%	3%	3%	3%
Physical or other limitations	4%	5%	3%	13%
No door-to-door assistance	1%	3%	2%	3%
Walkability issues (e.g., lack of or interrupted sidewalks)	22%	12%	11%	14%
Other	1%	5%	4%	5%

Note: Participants could choose all options that apply, totals by age category do not equal 100%.

Q21. Do you ever modify your driving by engaging in any of the following behaviors? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Not applicable-- I do not drive	7%	8%	5%	21%
I do not modify my driving at all	70%	44%	49%	22%
I avoid driving at night	10%	29%	25%	45%
I avoid making left hand turns	2%	5%	5%	3%
I avoid driving in bad weather	10%	30%	27%	41%
I avoid expressway driving	3%	10%	9%	16%
I avoid driving far distances	6%	15%	12%	29%
I avoid driving in unfamiliar areas	4%	15%	12%	25%
Other	2%	4%	4%	4%

Note: Participants could choose all options that apply, totals by age category do not equal 100%.

Q22. How satisfied are you with the transportation options available to you in Scituate?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Completely Satisfied	17%	13%	14%	13%
Very Satisfied	24%	20%	19%	20%
Somewhat Satisfied	32%	27%	27%	26%
Slightly Satisfied	6%	18%	18%	19%
Not at All Satisfied	21%	22%	22%	22%
Total	100%	100%	100%	100%

Q23. If you currently drive, do you ever assist any older adults by providing them with transportation?

[Calculated only for respondents who drive]

	Boomers Age 45-59	Seniors Age 60	Age 60-79	Age 80+
Yes	37%	49%	49%	48%
No	63%	51%	51%	52%
Total	100%	100%	100%	100%

Q24. Have you ever traveled to senior centers in other towns to participate in their programs?

	Boomers Age 45-59	Seniors Age 60	Age 60-79	Age 80+
Yes	2%	19%	18%	24%
No	98%	81%	82%	76%
Total	100%	100%	100%	100%

Section V: Current Senior Center Services

Q25. The following items refer to programs and services that are currently offered by the *Scituate Council on Aging Senior Center* or are being considered for future programming. In your opinion, what is the importance of each program or service to the community?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Scituate Senior Center Van for local transportation				
Very Important	82%	80%	81%	74%
Somewhat Important	11%	11%	12%	10%
Neither Important Nor Unimportant	6%	6%	5%	11%
Somewhat Unimportant	1%	1%	1%	2%
Very Unimportant	0%	2%	1%	3%
Total	100%	100%	100%	100%
Senior Center Transportation for out-of-town medical appointments				
Very Important	72%	79%	80%	74%
Somewhat Important	20%	12%	12%	11%
Neither Important Nor Unimportant	6%	5%	4%	9%
Somewhat Unimportant	2%	2%	2%	2%
Very Unimportant	0%	2%	2%	4%
Total	100%	100%	100%	100%
Support groups				
Very Important	51%	55%	56%	46%
Somewhat Important	34%	31%	31%	31%
Neither Important Nor Unimportant	14%	9%	8%	17%
Somewhat Unimportant	1%	2%	2%	2%
Very Unimportant	0%	3%	3%	4%
Total	100%	100%	100%	100%

Q25 (Cont.)	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Volunteer opportunities				
Very Important	45%	45%	46%	36%
Somewhat Important	39%	37%	37%	37%
Neither Important Nor Unimportant	15%	13%	12%	18%
Somewhat Unimportant	1%	2%	2%	6%
Very Unimportant	0%	3%	3%	3%
Total	100%	100%	100%	100%
Health and wellness programs (blood pressure & glucose screening, fall prevention, etc.)				
Very Important	67%	62%	64%	52%
Somewhat Important	25%	27%	26%	29%
Neither Important Nor Unimportant	6%	6%	6%	10%
Somewhat Unimportant	2%	2%	1%	5%
Very Unimportant	0%	3%	3%	4%
Total	100%	100%	100%	100%
Professional services (tax preparation, financial advisor, & legal services)				
Very Important	46%	49%	50%	44%
Somewhat Important	38%	34%	35%	30%
Neither Important Nor Unimportant	13%	12%	11%	19%
Somewhat Unimportant	3%	2%	1%	3%
Very Unimportant	0%	3%	3%	4%
Total	100%	100%	100%	100%

Q25 (Cont.)	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Fitness activities (exercise, dance, yoga, Tai Chi, etc.)				
Very Important	59%	53%	56%	39%
Somewhat Important	34%	31%	31%	35%
Neither Important Nor Unimportant	7%	11%	9%	18%
Somewhat Unimportant	0%	2%	1%	3%
Very Unimportant	0%	3%	3%	5%
Total	100%	100%	100%	100%
Social activities (lunch groups, book club, quilting, board & card games, etc.)				
Very Important	60%	48%	50%	39%
Somewhat Important	29%	35%	34%	39%
Neither Important Nor Unimportant	10%	11%	11%	14%
Somewhat Unimportant	1%	3%	3%	4%
Very Unimportant	0%	3%	2%	4%
Total	100%	100%	100%	199%
Social functions (entertainment, sponsored lunches, etc.)				
Very Important	51%	45%	46%	39%
Somewhat Important	34%	34%	34%	35%
Neither Important Nor Unimportant	13%	16%	15%	19%
Somewhat Unimportant	2%	2%	2%	4%
Very Unimportant	0%	3%	3%	3%
Total	100%	100%	100%	100%
Bus trips and outings (to theaters, museums, & destination tours)				
Very Important	39%	45%	47%	45%
Somewhat Important	44%	36%	36%	36%
Neither Important Nor Unimportant	15%	14%	13%	14%
Somewhat Unimportant	2%	2%	1%	2%
Very Unimportant	0%	3%	3%	3%
Total	100%	100%	100%	100%

Q25 (Cont.)	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Learning opportunities & educational seminars				
Very Important	42%	46%	48%	32%
Somewhat Important	39%	37%	36%	36%
Neither Important Nor Unimportant	19%	13%	12%	22%
Somewhat Unimportant	0%	1%	1%	5%
Very Unimportant	0%	3%	3%	5%
Total	100%	100%	100%	100%
Information & referral services to local resources & care providers				
Very Important	46%	54%	56%	45%
Somewhat Important	42%	30%	30%	32%
Neither Important Nor Unimportant	11%	11%	10%	16%
Somewhat Unimportant	1%	2%	1%	3%
Very Unimportant	0%	3%	3%	4%
Total	100%	100%	100%	100%
Assistance applying for local or state programs (fuel assistance or food stamps)				
Very Important	55%	59%	61%	50%
Somewhat Important	33%	23%	22%	25%
Neither Important Nor Unimportant	12%	10%	9%	15%
Somewhat Unimportant	0%	3%	3%	4%
Very Unimportant	0%	5%	5%	6%
Total	100%	100%	100%	100%

Q25 (Cont.)	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
SHINE program—Help with health insurance & prescription needs				
Very Important	58%	63%	66%	51%
Somewhat Important	32%	22%	21%	22%
Neither Important Nor Unimportant	9%	9%	7%	18%
Somewhat Unimportant	1%	3%	3%	3%
Very Unimportant	0%	3%	3%	6%
Total	100%	100%	100%	100%
In-home outreach services (friendly visitor, minor home repairs, case management)				
Very Important	62%	54%	56%	45%
Somewhat Important	27%	28%	28%	29%
Neither Important Nor Unimportant	11%	11%	10%	17%
Somewhat Unimportant	0%	3%	2%	4%
Very Unimportant	0%	4%	4%	5%
Total	100%	100%	100%	100%
Programs on coping with chronic conditions (e.g., diabetes, arthritis)				
Very Important	50%	52%	53%	45%
Somewhat Important	40%	31%	31%	33%
Neither Important Nor Unimportant	10%	11%	10%	14%
Somewhat Unimportant	0%	2%	3%	2%
Very Unimportant	0%	4%	3%	6%
Total	100%	100%	100%	100%

Q26. Do you currently use programs or services offered at the Scituate Council on Aging Senior Center (or at other buildings used by the Senior Center)?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
No	3%	20%	16%	40%
Yes	97%	80%	84%	60%
Total	100%	100%	100%	100%

Q26a. If No on question 26: What is the reason that you do not currently utilize the Scituate Council on Aging Senior Center programs and services? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
I am not interested	13%	32%	32%	35%
I am not old enough	77%	17%	20%	0%
I participate in programs elsewhere	5%	11%	11%	15%
The senior center building is not adequate or appealing	10%	22%	21%	28%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q26b. If Yes on question 26: How often do you attend programs or utilize services offered by the Senior Center?

	Boomers Age 45-59*	Seniors Age 60+	Age 60-79	Age 80+
One or more times a week		18%	17%	19%
Two or three times each month		13%	15%	11%
Once a month		9%	10%	9%
Every two to three months		16%	20%	9%
Very rarely (e.g., only for special events)		44%	39%	53%
Total		100%	100%	100%

*Too few Boomers participate to calculate

Q26c. If Yes on question 26: Overall, how satisfied are you with the programs and services offered by the Scituate Council on Aging Senior Center?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Completely Satisfied		9%	7%	11%
Very Satisfied		33%	35%	31%
Somewhat Satisfied		37%	37%	38%
Slightly Satisfied		17%	16%	17%
Not at All Satisfied		4%	5%	3%
Total		100%	100%	100%

*Too few Boomers participate to calculate

Q27. Below is a list of problems one could encounter when accessing the Senior Center or its programs. Which of these problems have you or someone you know experienced? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
The Senior Center building is not adequate	19%	38%	37%	43%
Lack of transportation	5%	5%	4%	8%
Lack of sufficient parking	14%	34%	33%	39%
Not knowing how to access programs or services	4%	6%	7%	2%
Not enough available openings to participate in some events or activities	4%	12%	12%	12%
I don't think I would fit in there	2%	6%	6%	4%
Not knowing what programs/services are available	9%	11%	12%	7%
I am concerned about protecting my privacy	1%	3%	2%	3%
Inconvenient location of the Senior Center	4%	12%	11%	17%
Hours of Senior Center are inconvenient	3%	4%	5%	2%
Programs don't interest me	2%	11%	11%	13%
Senior center-provided transportation is not available when needed or difficult to use	2%	6%	5%	10%
Appointment-based services are not available when needed	0%	3%	3%	7%
Other	4%	5%	5%	8%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Section VI: Future Senior Center Planning

Q29. In the future, how likely are you to participate in programs and services offered by the Scituate Council on Aging or the Senior Center?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Very Likely	25%	24%	25%	19%
Somewhat Likely	40%	44%	45%	38%
Neither Likely Nor Unlikely	22%	19%	19%	23%
Somewhat Unlikely	5%	4%	4%	4%
Very Unlikely	8%	9%	7%	16%
Total	100%	100%	100%	100%

Q30. In the future, what would encourage you to participate in programs and services offered by the Scituate Council on Aging or the Senior Center? (check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
They offered programs that interested me	71%	66%	70%	48%
They offered services I needed	60%	50%	53%	41%
My friends, family or neighbors attended	40%	26%	28%	16%
A new facility or different location	31%	42%	43%	40%
I had transportation to get there	15%	9%	9%	9%
I knew about the programs & services they offered	44%	30%	33%	16%
Other	2%	5%	5%	6%

Q31. Thinking about possible *future* needs and interests, which of the following areas would you prioritize for *new* programs and services at the Scituate Council on Aging the Senior Center? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
On-Site Senior Lunch Program	38%	26%	25%	29%
Performances/presentations	37%	39%	42%	29%
Quiet sitting/reading area	16%	14%	14%	13%
Programs for veterans	27%	21%	20%	28%
Strength training/aerobic exercise programs	56%	49%	54%	28%
Lifelong learning and education programs	53%	52%	57%	31%
Support groups for caregivers providing care to individuals with dementia	39%	23%	24%	15%
Hiking/walking club	47%	32%	37%	11%
Technology and computer courses	46%	41%	45%	27%
Arts & crafts programs	43%	31%	32%	22%
Social programs	48%	36%	37%	30%
Intergenerational programs	26%	18%	20%	11%
Workshops on preparing for retirement	47%	14%	16%	8%
Assistance with finding or obtaining home care or assisted living resources	44%	35%	36%	32%
Other	3%	5%	5%	6%

Q32. How would you like to learn about the activities and services offered by the Scituate Senior Center? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Scituate Senior Center newsletter	46%	71%	70%	77%
Cable TV	20%	21%	21%	19%
The Scituate Mariner Newspaper	60%	54%	55%	49%
Facebook (or other social media sites)	32%	17%	20%	5%
Other	20%	11%	12%	7%

Q33. Many towns offer a Social Adult Day Care program through their Council on Aging. Social Adult Day Care provides fee-based daytime supervision and care for adults, often seniors with dementia, in a small group setting. These programs are frequently helpful in providing respite for caregivers. To what degree to you favor or oppose offering a Social Adult Day Care program in Scituate?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Strongly favor	45%	41%	43%	31%
Favor	38%	42%	42%	40%
Neither favor nor oppose	16%	16%	14%	28%
Oppose	0%	1%	1%	1%
Strongly oppose	1%	0%	0%	0%
Total	100%	100%	100%	100%

Section VII: Demographics

Q34. Please select your gender

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Female	62%	61%	61%	61%
Male	38%	39%	39%	39%
Total	100%	100%	100%	100%

Q35. What is your age range?

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Age 45-59	100%	0%	0%	0%
Age 60-69	0%	43%	53%	0%
Age 70-79	0%	38%	47%	0%
Age 80+	0%	19%	0%	100%
Total	100%	100%	100%	100%

Q36. Which of the following best describes your race/ethnicity? (Check all that apply)

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
White/Caucasian	95%	97%	96%	99%
Black/African American	0%	0%	0%	0%
Asian	0%	0%	0%	0%
Hispanic/Latino	2%	0%	0%	0%
Other	0%	2%	2%	1%

Note: Participants could choose all options that apply, therefore totals by age category do not equal 100%.

Q37. Please indicate your level of agreement with the following statement: “I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses.”

	Boomers Age 45-59	Seniors Age 60+	Age 60-79	Age 80+
Strongly agree	29%	28%	31%	17%
Agree	55%	55%	54%	61%
Disagree	6%	9%	8%	11%
Strongly disagree	4%	2%	2%	2%
Not sure	6%	6%	5%	9%
Total	100%	100%	100%	100%

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