

2018

Envisioning a Watertown for All Ages

Caitlin Coyle

University of Massachusetts Boston, caitlin.coyle@umb.edu

Follow this and additional works at: <https://scholarworks.umb.edu/demographyofaging>



Part of the [Gerontology Commons](#), [Public Policy Commons](#), and the [Social Welfare Commons](#)

Recommended Citation

Coyle, Caitlin, "Envisioning a Watertown for All Ages" (2018). *Center for Social and Demographic Research on Aging Publications*. 35.
<https://scholarworks.umb.edu/demographyofaging/35>

This Research Report is brought to you for free and open access by the Gerontology Institute at ScholarWorks at UMass Boston. It has been accepted for inclusion in Center for Social and Demographic Research on Aging Publications by an authorized administrator of ScholarWorks at UMass Boston. For more information, please contact library.uasc@umb.edu.

Envisioning a Watertown for All Ages

**COMMISSIONED BY WATERTOWN FOR ALL AGES
GROUP AND THE WATERTOWN COUNCIL ON AGING
& SENIOR CENTER**



*Support for this project provided by AARP Massachusetts



Introduction

Watertown for All Ages is a group of residents working to improve the livability of Watertown for residents of all ages and abilities. They work closely with the Watertown Council on Aging/Senior Center. The Watertown Council on Aging/Senior Center provides a variety of social, health, educational, recreational, advocacy, and support programs designed to help Watertown's older adults age well in the community (Watertown COA/Senior Center website, <http://www.watertown-ma.gov/index.aspx?nid=128>). Services provided to seniors living in the community range from transportation support to nutrition services and social services, along with a range of programs and activities meant to enhance well-being and quality of life. Similar to many Councils on Aging, the Watertown COA also provides leadership in the community, as the community as a whole addresses the growing number and changing needs of senior residents.

As a means of learning more about community concerns and values relating to aging in place, the Watertown Senior Center arranged a public forum to be held at the Watertown Free Public Library in cooperation with the resident-led community organization Watertown for All Ages. This event was held on November 30th, 2017 at 6:30PM. The forum was moderated by Caitlin Coyle, PhD, from the Gerontology Institute at the University of Massachusetts Boston. Claire Wickersham, a doctoral student in Gerontology at UMass Boston, served as note-taker. The purpose of these forums was to introduce the community to the age-friendly community framework, as outlined by the World Health Organization; to present selected demographic features of Watertown relevant to planning for an age-friendly future; and to elicit input from the community about Watertown as a community in which to age in place. The purpose of this document is to report on each of these elements of the forums.

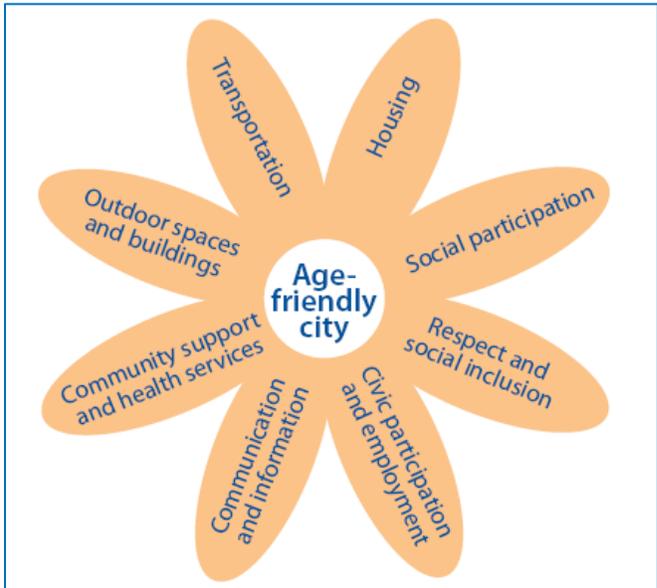
The age-friendly community framework

Communities throughout the nation are pursuing new strategies to promote health and quality of life among their residents. Based on the "age-friendly communities" framework, as well as related models such as "livable communities" or "lifelong communities," towns and cities are embarking on community-engaged initiatives meant to identify and improve local amenities and services that have a meaningful impact on resident well-being.

An "age-friendly world" community, as described by the World Health Organization (WHO), is one in which people participate, are connected, remain healthy and active, and feel they belong—no matter their age. Through planning, taking action, and evaluating progress, communities all over the world are taking steps to improve their social and physical environments as a strategy for promoting health and well-being throughout the life course. The Age-Friendly framework describes focus areas for communities and lays out a process intended to ensure repeated consultation with the community, collective reflection, action and evaluation. As well, the WHO hosts an Age-Friendly network, established in 2010 as a

means of facilitating the exchange of information among communities. This network currently includes 533 cities and communities in 37 countries (<https://extranet.who.int/agefriendlyworld/who-network/>). Communities in Massachusetts that have publically committed to being joined age-friendly include Agawam, Arlington, Boston, Brookline, Dartmouth, Lawrence, Martha's Vineyard, New Bedford, Newton, North Adams, Peabody, Pittsfield, Salem, Stoughton, Wakefield, West Springfield, Yarmouth, and Berkshire County.

Domains. The Age-Friendly framework includes eight domains of community life that intersect with livability, accessibility, and the ability to thrive within the community (see diagram at right). Within each domain, elements are identified that are relevant to affordability, appropriateness, and accessibility (see Table 1).



The description of age-friendly features, and the experiences of communities throughout the world that are using the framework, make clear that each community will conceptualize this effort in a somewhat unique way. Local conceptualizations will shape the initiatives, programs, and partnerships put in place; they will also shape the research and measurement used in support of the effort. Ultimately, the age-friendly framework requires that environmental features are defined and evaluated relative to the characteristics and resources of residents actually living in the community. An initial task of any community's effort is therefore to identify elements that residents feel are "age-friendly."

Table 1: Rationale and examples for the eight age-friendly domains established by the World Health Organization

| Domain | Rationale | Sample elements |
|---|--|---|
| Outdoor spaces and buildings | Features and perceptions of indoor and outdoor spaces impact mobility, independence and quality of life | <ul style="list-style-type: none"> • Safe pedestrian crossings • Adequate public toilets • Spaces are evaluated as safe |
| Transportation | Being able to get where one wants to go promotes participation and helps maintain networks | <ul style="list-style-type: none"> • Affordable and reliable public transportation • Transport stops have adequate seating and shelter |
| Housing | Appropriate housing shapes independence, quality of life, and being able to stay in the community | <ul style="list-style-type: none"> • Sufficient affordable housing in safe areas with good service access • Accessible and reliable home maintenance services |
| Social participation | Participating in family and community activities builds social networks and social support, and promotes health and well-being | <ul style="list-style-type: none"> • Information about activities and events is readily available • Outreach occurs to those at risk of social isolation |
| Respect and social inclusion | Feeling respected and included promotes participation and facilitates use of services | <ul style="list-style-type: none"> • Service staff are courteous • Community events accommodate age-specific needs and preferences |
| Civic participation and employment | Civic participation (such as volunteering and voting) and paid employment build social capital, may yield income, and allow residents to pursue interests and be involved. | <ul style="list-style-type: none"> • Appropriate volunteer opportunities are available and known by residents • Age discrimination is not tolerated • Work opportunities are adequate |
| Communication and information | Engagement, participation and health are promoted by being aware of opportunities to stay connected and having access to needed information. | <ul style="list-style-type: none"> • Regular and widespread distribution of information is assured • Printed information is available in accessible formats • There is wide access to the internet |
| Community supports and health services | Medical and non-medical services promote wellness and quality of life | <ul style="list-style-type: none"> • Medical services & home care are broadly available, accessible, and affordable • Emergency planning takes into account the vulnerabilities and capacities of all residents |

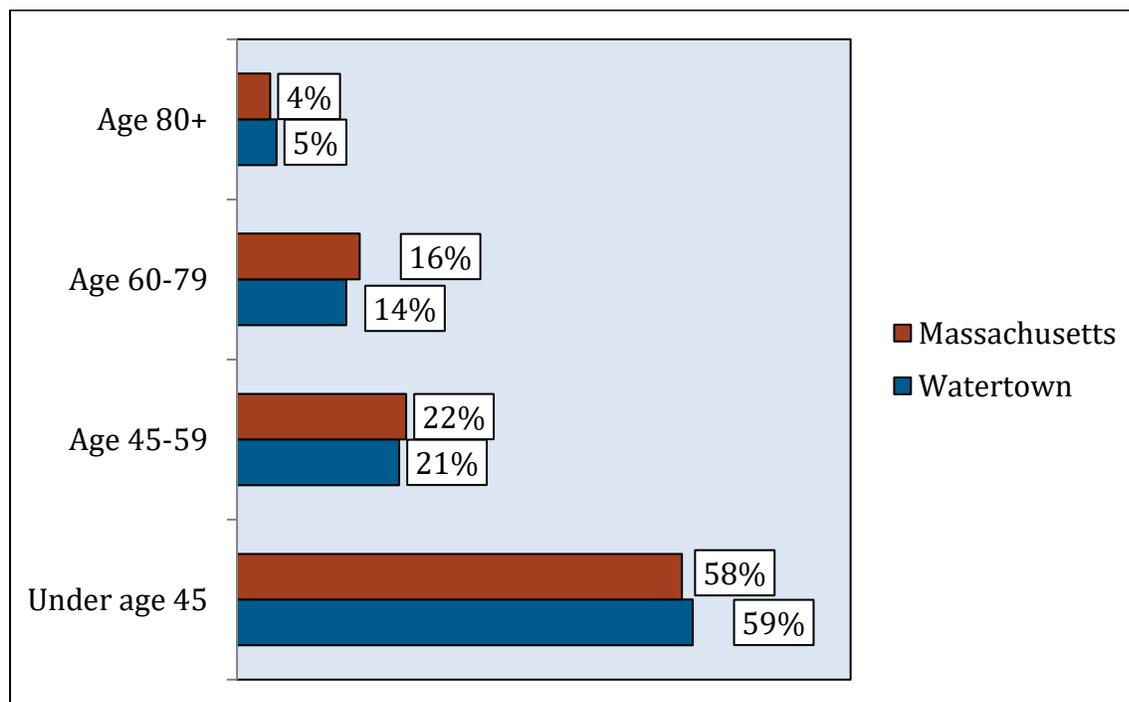
Source: Adapted from WHO 2007; Ontario Seniors' Secretariat, Accessibility Directorate of Ontario, University of Waterloo and McMaster University (nd).

Demographic profile: Planning for an age-friendly Watertown

Demographic information about Watertown was drawn from publicly available data sources, including the U.S. Census Bureau (decennial Census and the American Community Survey [ACS]) and projections made available through the Donahue Institute at the University of Massachusetts (<http://pep.donahue-institute.org/>) and the Metropolitan Area Planning Council (MAPC; <http://www.mapc.org/projections>). Data presented here describe recent and anticipated changes in the age distribution of the population of Watertown, along with selected characteristics of the current senior¹ population of the community.

Estimates from the most recent American Community Survey (2011-2015) demonstrate that the age distribution of Watertown is slightly younger than that of Massachusetts overall (see **Figure 1**). Specifically, 19% of Watertown's population is 60 or older, compared to 20% of the population of the Commonwealth as a whole. The median age of Watertown is 38.2, compared to 39.1 for Massachusetts. Slightly more than one fifth of Watertown's residents were aged 45-59 at the time of these estimates. This age group includes a large share of Baby Boomers who will be moving into the senior age range rapidly over the next decade.

Figure 1: Age distribution, Watertown and Massachusetts, 2011-2015



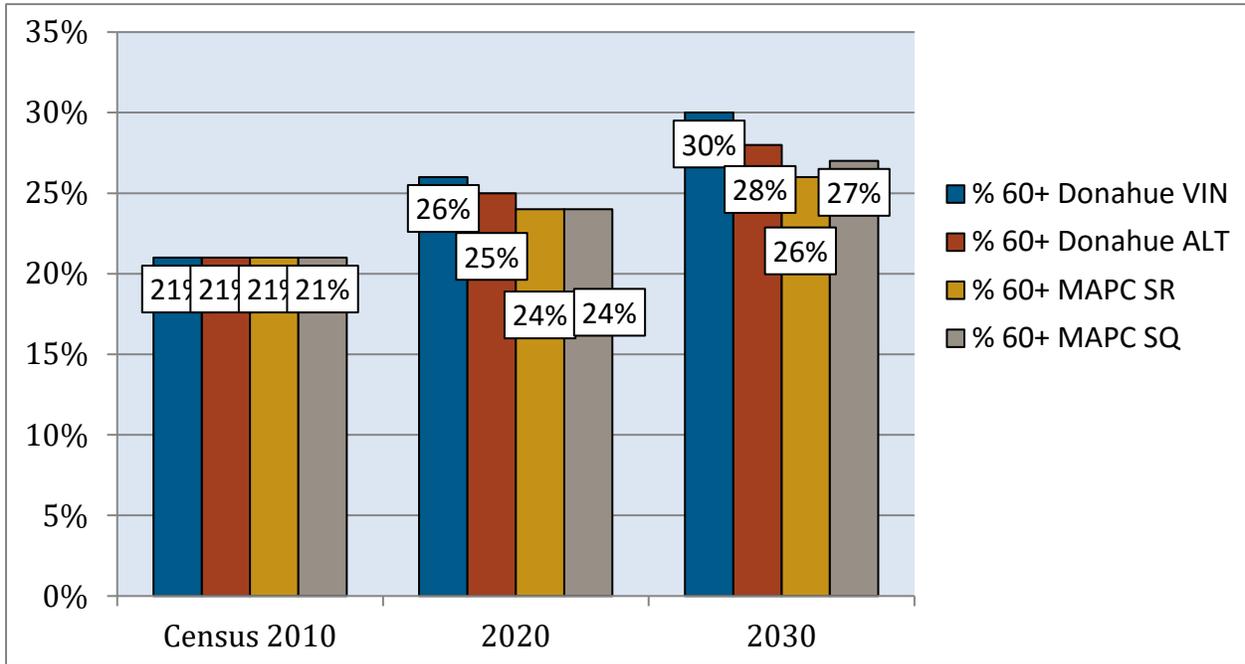
Source: 2011-2015 ACS Estimates, Table B01001

¹ The term "senior" is used to refer to anyone age 60 or older. This usage aligns with language included in the Older Americans Act. Where available, data are presented for the age 60+ population; however, in some cases, existing data are only available for the population age 65+.

In support of anticipating shifts in the age composition of Watertown moving forward, projections generated by the Donahue Institute (University of Massachusetts) and the Metropolitan Area Planning Council (MAPC) are examined. Each of these sources offer two sets of projections based on somewhat different assumptions about growth moving forward. All four sets of projections suggest similar changes in Watertown's age composition to the year 2030. In particular, each set of projections suggests that Watertown will experience growth in the share of its population made up of seniors. The projections offered in **Figure 2** suggest that the share of Watertown's population aged 60 and older is expected to rise from 21% in 2010 to between 25% and 27% in 2030. Though the Donahue projections suggest that seniors will make up a smaller share of Watertown's population in 2030 than is suggested by the MAPC projections, all four sets of projections suggest that the number of seniors will increase in Watertown. The number of residents age 60 or older is expected to increase from 6,500 seniors enumerated in the 2010 US Census to between 6,500 and 10,700 in 2035.²

² The UMass Donahue Institute generates "vintage" projections, using a component-of-change method based on trends observed in town-level fertility and mortality from 2000-2010, and regional gross migration-by-age trends observed in data from the 2005-2012 American Community Survey. The "alternative" projections do not control municipality projections to the larger region and may in some cases be more accurate for small communities. In Watertown, the "vintage" projections yield a larger total and 60+ population size for 2030; however, the percentage age 60+ is the same for the two projections. The Metropolitan Area Planning Council also generates two sets of projections. The "SQ" projections assume "status quo" patterns of births, deaths, migration, and housing occupancy. The "SR" projections assume "Stronger Regional" growth, and yields a somewhat larger total and 60+ population size for 2030; again, however, the age 60+ is the same for the two MAPC projections.

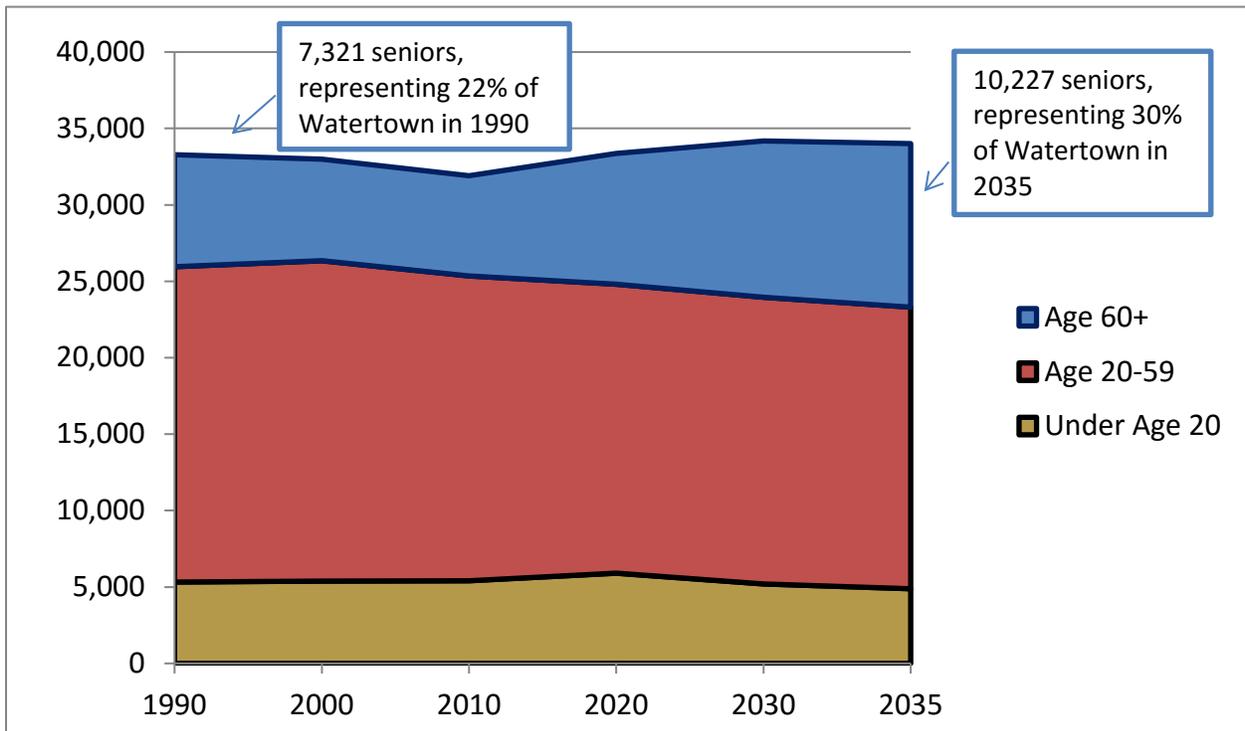
Figure 2: Percentage of Watertown population age 60+: 2010 with projections to 2030



Source: Projections from the Donahue Institute at the University of Massachusetts (<http://pep.donahue-institute.org/>) and the Metropolitan Area Planning Council (MAPC; <http://www.mapc.org/projections>).

Using the Donahue Vintage projections as an illustration, **Figure 3** further examines the shifting age composition that may occur in Watertown moving forward. The Donahue Vintage projections suggest that by 2030, Watertown will include nearly 30,000 residents and of these, nearly 8,000 will be age 60 or older. This set of projections suggests that by 2020, the number of seniors will be roughly on par with the number of residents under age 20 in Watertown and that by 2030, seniors will outnumber residents under the age of 20.

Figure 3: Watertown population change 1990-2010 and projections to 2035

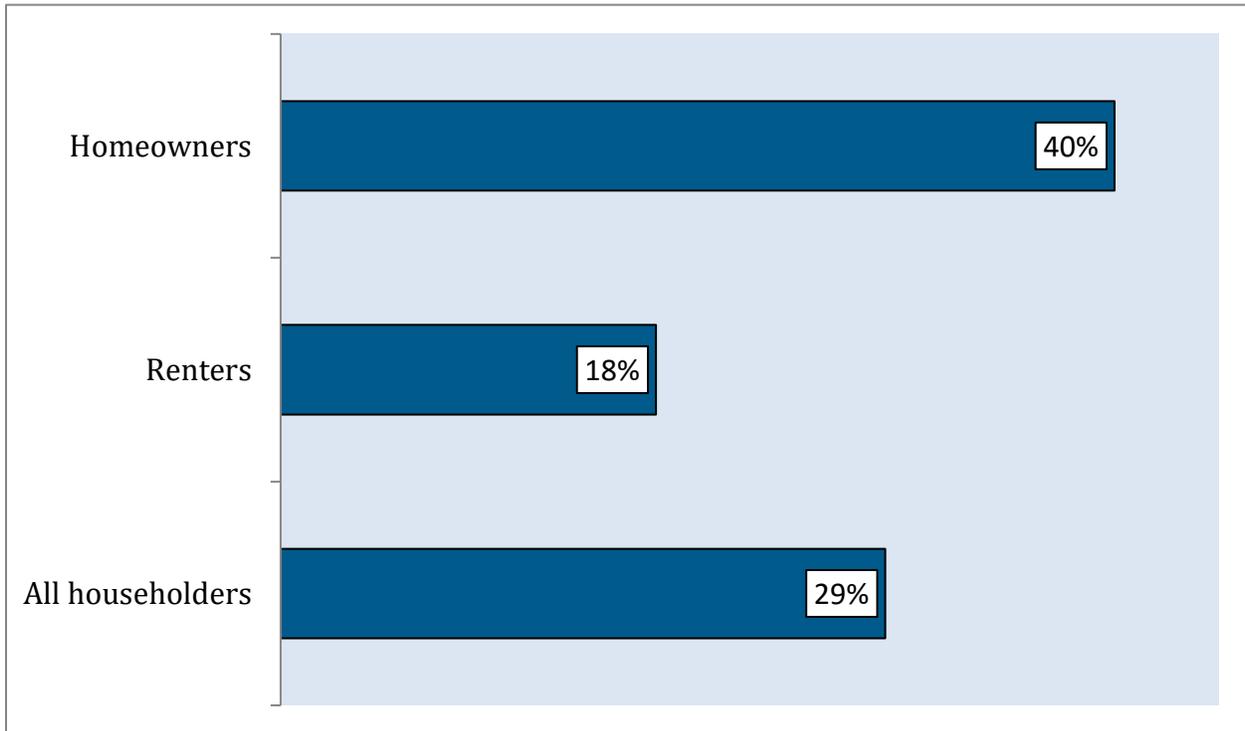


Source: Projections from the Donahue Institute at the University of Massachusetts (<http://pep.donahue-institute.org/>) "vintage" series.

It is impossible to know how likely these projections are to be realized over the next 15 years. However, if these projections bear out, all suggest that the number and share of seniors in Watertown will likely increase moving forward.

Additional demographic information drawn from data retrieved from the US Census Bureau website highlights the characteristics and resources of Watertown seniors. As shown in **Figure 4**, one-third of all householders and four out of ten Watertown homeowners are age 60 or older. To the extent that homeownership suggests embeddedness in the community and financial investment in the municipality, seniors appear to be strongly attached to Watertown.

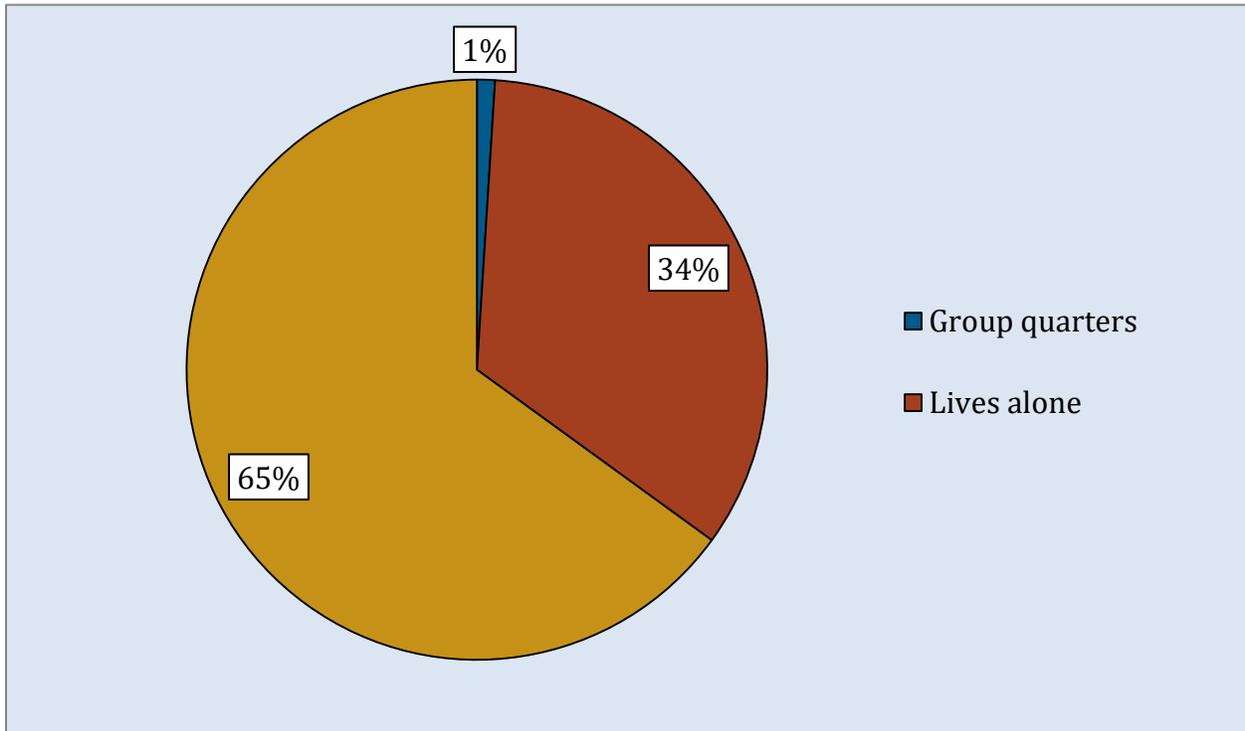
Figure 4: Percentage of householders who are age 60 or older in Watertown



Source: American Community Survey, 2011-2015, Table B25007

In Watertown, as in most communities, a large share of senior residents lives alone (see **Figure 5**). The risk of losing one’s spouse or partner to death or marital disruption is higher among older adults, resulting in increasing likelihood of living alone, especially as one’s children mature and move out of the family home. In Watertown, about one-third of residents age 65 and older live alone and 1% live in group quarters (for example, a nursing home or group home); the remaining seniors live with others including a spouse or partner, adult or minor children, other relatives or roommates. Living alone places older adults at increased risk of financial insecurity and isolation; moreover, older adults who live alone may experience shortfalls in caregiving support should a health event occur.

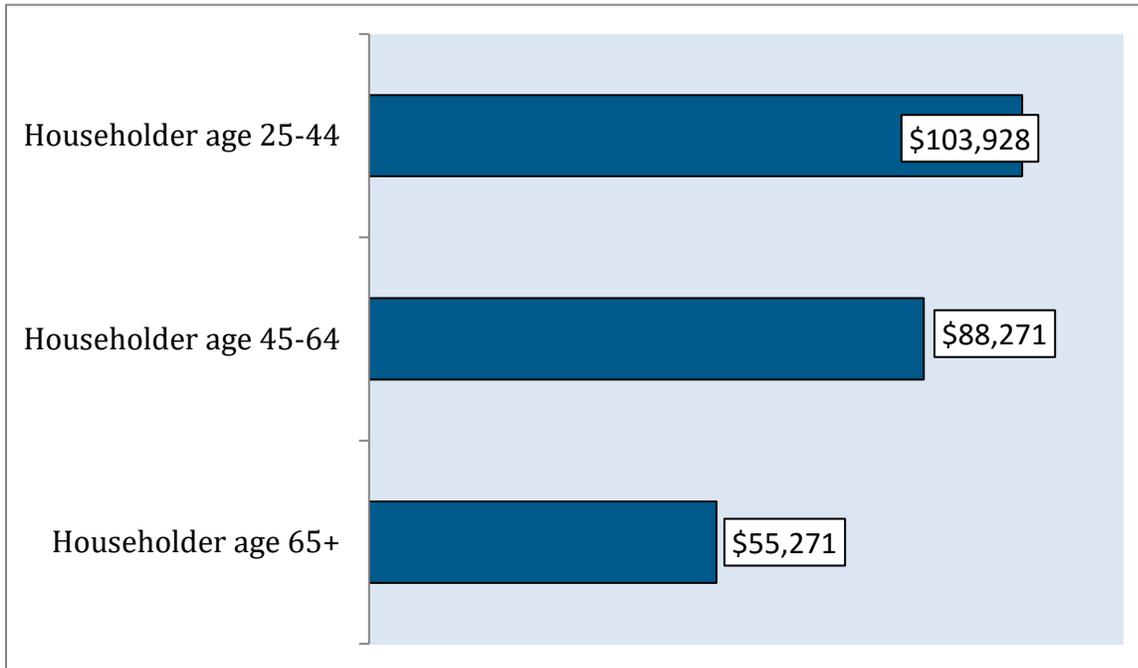
Figure 5: Living arrangements among residents age 65+



Source: American Community Survey, 2011-2015, Table B09020

Older adults commonly experience a decline in financial resources as they retire and become reliant on income sources other than earnings, such as Social Security benefits, other pensions, savings, and investments. In Beverly, the median income for households headed by residents age 65 or older is substantially lower than for households with younger household heads, as shown in **Figure 6**. The American Community Survey estimates median income—the value at which half of households have more income and half have less—at almost \$55,000 for seniors, compared to nearly \$95,000 for middle-aged households. Younger households not only benefit from more earned income on average, they also typically have multiple earners (as well as multiple household members relying on that income). However, the fact that the median middle-aged household has income twice as high as the senior counterpart is notable.

Figure 6: Median household income by age of householder (in 2016 dollars)

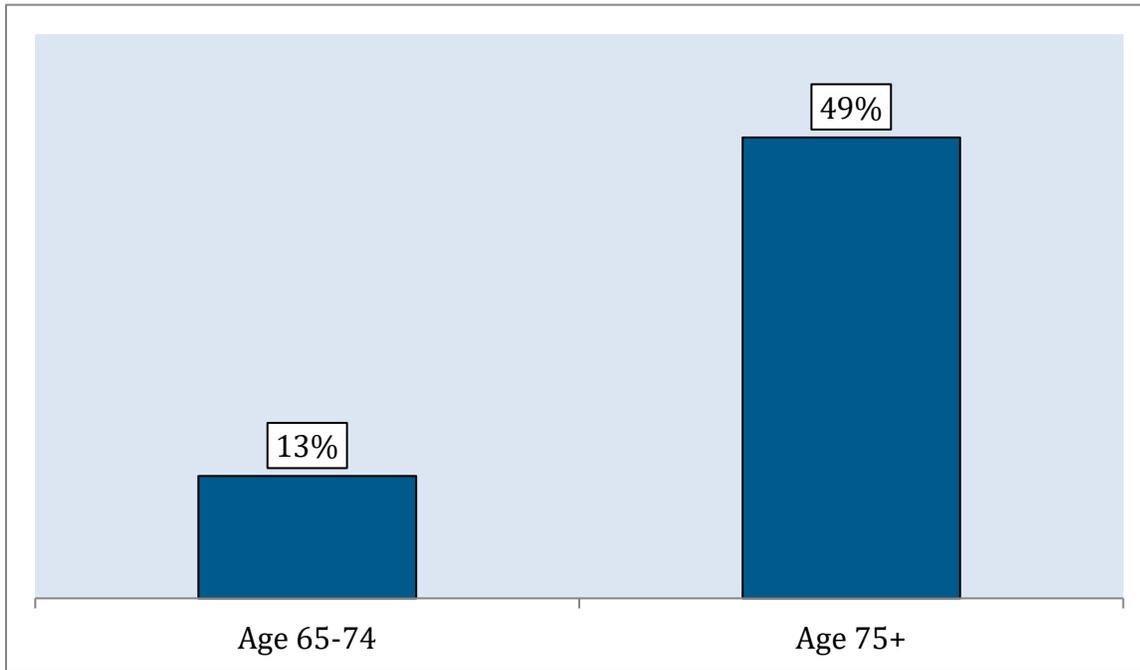


Source: American Community Survey, 2011-2015, Table B19049

In Watertown, as in other communities, the risk of experiencing a disabling condition increases with age. As shown in **Figure 7**, an estimated 13% of Watertown residents age 65-74 report one or more disability; this percentage increases to 49% among residents age 75 or older.³ Among Watertown seniors, “ambulatory difficulty” (or difficulty walking or climbing stairs) is most frequently reported, followed by “independent living difficulty” (or difficulty doing errands alone such as visiting a doctor’s office or shopping) (*American Community Survey, 2011-2015, Table K201803*). In the absence of assistance, these types of difficulties may challenge an older adult’s efforts to remaining living independently in the community.

³ The disabilities considered in the American Community Survey, from which these data are drawn, include being deaf or having serious difficulty hearing; being blind or having serious difficulty seeing even when wearing glasses; having serious difficulty concentrating, remembering, or making decisions; having serious difficulty walking or climbing stairs; having difficulty dressing or bathing; or having difficulty doing errands alone such as visiting a doctor’s office or shopping.

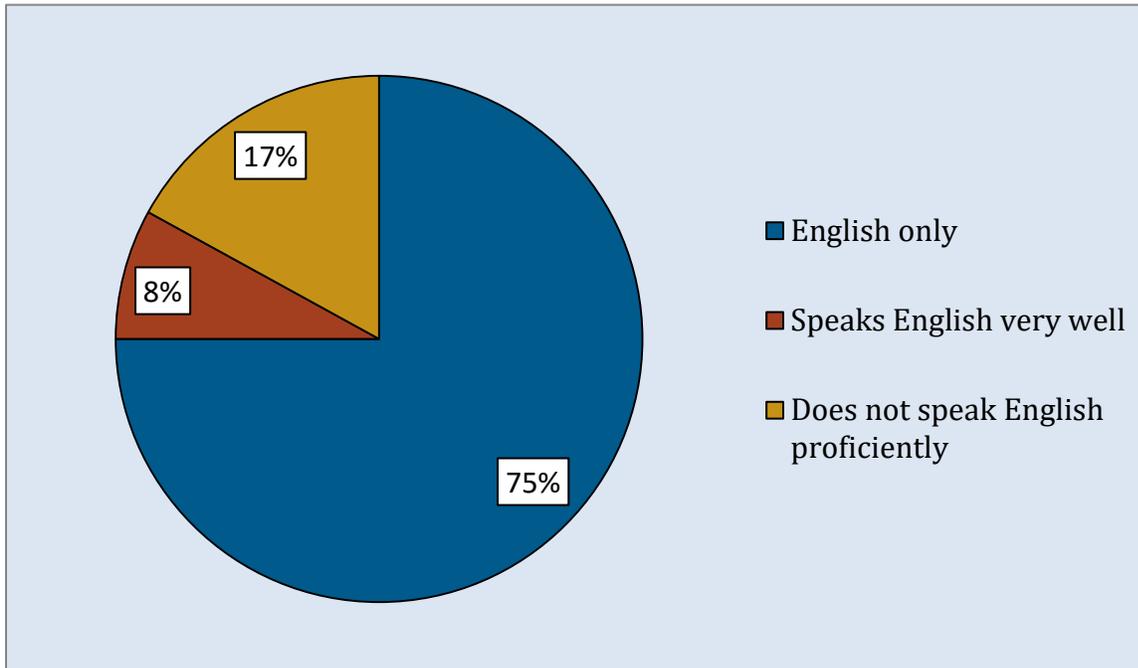
Figure 7: Percentage of Watertown Residents reporting disability, by age group



Source: American Community Survey, 2011-2015, Table B18101

Watertown is a relatively diverse community with respect to race, ethnicity, country of origin and other cultural attributes. **Figure 8** shows that one out of four Watertown residents age 65 or older speaks a language other than English at home. Moreover, 17% of Watertown seniors do not speak English proficiently and some do not speak English at all. For these residents, the most frequently spoken language is an Indo-European language (for example, Russian) followed by Asian languages. Older residents who do not speak English well may need language assistance in order to access needed services and programs.

Figure 8: Language spoken at home, Watertown residents age 65+



Source: American Community Survey, 2011-2015, Table B16004

Summary of comments made at the forums by Watertown residents

A community forum was held at the Watertown library. The forum was at 6:30PM and attracted over 50 participants. The forum lasted approximately 1 hour. Each forum began with a brief introduction by Anne-Marie Gagnon, Director of the Watertown senior center, followed by a short presentation by Caitlin Coyle from UMass Boston Gerontology. Dr. Coyle subsequently led a group discussion structured around three themes: features of Watertown that participants viewed as *strengths* for aging in place; features or issues that represent *challenges* or limitations for aging in place; and suggestions or *recommendations* for making Watertown a community that is more “age-friendly.”

Forum participants made clear that they desire to stay in Watertown as they get older. Participants indicate that they enjoy the location of Watertown, and its accessibility to shopping, stores, restaurants, medical facilities, and into Boston. They enjoy the wide array of community organizations and supports that provide services and view Watertown as a safe community with good services. These and other features of Watertown are viewed as strengths for aging in place.

Strengths. Several features that align with age-friendly domains were mentioned as strengths, including the following:

Transportation:

- Good public transportation
- Accessible to medical facilities
- Residents can travel relatively easily to shopping, stores, restaurants, and into Boston
- Speed bus is efficient and reliable
- Community is compact and many destinations are within walking distance

Outdoor spaces and buildings:

- Good parks and recreation spaces, including river paths to enjoy nature
- Local walking groups
- Public library is an asset and is considered:
 - Accessible for people with mobility challenges
 - Has ramp and automated doors that open on both sides

Community supports and health services:

- Good public safety
 - Police and fire departments are well-respected and very involved
 - Feels like a safe community
 - Not afraid to be out in the evening
- Good access to health and wellness services
- Wide array of community organizations and supports serve as assets and enable seniors to stay in their own homes
 - Senior center provides an impressive array of activities and services
 - Library is age-friendly and provides an array of programming
 - Food pantry provides meals for older residents
 - Free snow shoveling for elders during the winter
- **Social services resources specialists**
 - At senior center and town-level
 - Connect people to resources available

Challenges. Participants at the forum also mentioned a number of challenges or concerns—features of Watertown that they felt could be improved or that may impede their efforts to age in place. Several of these challenges align with age-friendly domains, including the following:

Housing:

- Housing in Watertown is becoming increasingly expensive
 - New buildings driving up prices
 - Renters being priced out
 - Ability to stay and age in Watertown becoming difficult
 - Many have to move outside of Watertown

- Not enough housing units for seniors
- Home accessibility for seniors
 - Many housing units are on second floors
 - Challenges for mobility

Communication and information:

- Communication challenges were cited at the municipal level and between residents and organizations
 - Residents unaware of happenings in the community
 - It is unclear how to find out about and access community programs, services, and resources
 - Communication from the senior center is not as widespread as participants think it could be (emails, newsletters, announcements)
 - Only 1 newspaper in the community
 - Communication and information challenges are especially problematic for individuals who do not have or use the internet

Outdoor spaces and public buildings

- Concerns about snow shoveling
 - Snow shoveling not consistent
 - Creates accessibility and safety issues
 - Responsibility of snow removal is unclear
 - Places a burden on others to remove snow or it will not be done
- Concerns about sidewalks in Watertown
 - Sidewalks are in poor condition
 - No continuous sidewalks
 - Snow creates problems for walkability and safety
- Concerns about lighting
 - Parking lot lighting is inadequate
 - Lighting issues not addressed promptly
 - Presents safety issues

Transportation

- Inadequate public transportation bus routes across Watertown
- Traffic
 - Gridlock traffic
 - Difficult to commute to and from work
 - Traffic lights cause traffic to be backed up
 - Need to add extra half hour to go places or participate in activities in Watertown
 - Overwhelming traffic causes individuals to not want to participate in community activities
- Walk lights too short
 - Only 20 seconds long
 - Difficult to cross the street

Community supports and health services

- Inadequate space at senior center for more robust program offerings

Social Participation

- Type of residents of Watertown are changing. Historically, it was a community of long-term residents and multigenerational families. More recently, the population has become more transient. Forum attendees describe not knowing their neighbors and the way that the fabric of the community has changed.

Participant recommendations. As concerns were reviewed, participants at the community forums offered a number of recommendations representing opportunities for Watertown to become a more “age-friendly” community. Recommendations included the following:

Communication and information

- Create a community calendar
- Improve the town website
 - Make more user friendly and interactive
 - Educate people on how to navigate the town website
- Use multiple avenues of communication (i.e., radio, television, print, internet)
- Leave stacks of newsletters around different town locations

Housing

- Increase affordable housing options for seniors
- Pursue development of an independent senior living apartment complex, which will by law require a percentage of affordable housing to provide homes for seniors with limited incomes
- Encourage development of more handicapped accessible housing

Outdoor spaces and buildings

- Put in more benches around town, along sidewalks and bike paths, and near the river walk
- Improve side walk cleaning, particularly in the case of snow storms
- Widen sidewalks, so people can stroll with or without walkers

Community supports and health services

- Senior center
 - Hold activities in the evening for seniors who are still working
 - Increase robustness of senior center activities and programs
 - Expand space available to expand program/service offerings
 - Utilize spaces of other facilities (i.e., elementary schools)
 - Facility expansion of senior center if resources permit
- More collaboration among organizations to offer more activities for seniors (i.e., library and senior center to offer technology or social media classes specific to seniors)

- Encourage businesses to think about ways to increase sensitivity to meet the needs of seniors (i.e., gym could offer exercise class for seniors)

Transportation

- Extend intervals for walk lights at cross walks
- Increase frequency of local shuttle buses that run within town (i.e., to parks, shopping centers, churches etc.)

Respect and social inclusion:

- Increase effort to accommodate sensory impairments (i.e., hearing, vision)

Civic Engagement & Employment

- Develop a “citizens academy” to familiarize residents about the local policymaking process and provide them with appropriate advocacy tools and skills.

Social Participation

- Host “meet your neighbor” events to bring residents together. Provide information about public safety and other community events. Encourage ways for neighbors to help neighbors and share information.

Conclusion. Watertown can expect its number and share of older residents to increase over the course of the next few decades. In addition, changes in senior residents’ needs and interests will occur that may have implications for Town services and priorities. Participants at the public forum emphasized that Watertown has much to offer its older population. Watertown residents enjoy a strong community atmosphere and many wish to remain in Watertown long-term. Some challenges were noted, but recommendations were readily offered that could help make Watertown a stronger community in which to age in place.

For more information, contact:
Caitlin Coyle, PhD
Claire Wickersham, MS
Gerontology Institute
University of Massachusetts Boston
Caitlin.Coyle@umb.edu
617.287.7467