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Swampscott for All Ages: A Community Needs Assessment

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Swampscott for All Ages: A Community Needs Assessment

Commissioned by the Town of Swampscott

OCTOBER 2019



Town of Swampscott

Office of the

Town Administrator

Elihu Thomson Administrative Building
22 Monument Avenue



Sean R. Fitzgerald
Town Administrator

Tel: (781) 596-8850
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Dear Swampscott Resident:

These are exciting times for Swampscott and I am really pleased to report on the extraordinary work of our Swampscott For All Ages (SFAA) Initiative as we work hard to assure that Swampscott is a healthy and happy community for people of ALL ages.

While some of you may have just heard about this initiative, many of Swampscott's residents and seniors have participated in a number of programs, discussions, and surveys over the last year. I am excited to share in this report the culmination of feedback and ideas from Swampscott's residents who have provided their time, energy and ideas. The focus areas include: outdoor spaces and public buildings; broader transportation options; respect for diversity and social inclusion; communication and public information; housing choices; social participation; civic participation and employment; community and mental and physical health services. Respondents included Swampscott residents of all ages, those directly impacted by dementia, municipal providers, human service agencies, healthcare providers, representatives from finance and banking, media and information services, and private business.

This report is possible thanks to the hard work and expertise of the Gerontology Institute, Center for Social & Demographic Research on Aging at University of Massachusetts Boston. Special thanks to Dr. Caitlin Coyle and Rebecca Mailman for their flexibility and willingness to share a wealth of knowledge and experience with all the community members who participated, and for creating this report. The work and leadership of the Gerontology Institute was not possible without the support of Swampscott Select Board and the financial commitment of Town Meeting members to fund this study. We are deeply grateful to the Swampscott residents, community leaders, service providers, business owners, and municipal leaders who shared with us their time and insight into what can be done to make Swampscott a more age and dementia friendly community.

I am so proud that Swampscott is leading the way with age and dementia friendly initiatives. These efforts require deliberate and intentional steps to design a community that supports people of all ages and abilities and assure that the community meets the needs of all residents. This assessment and extraordinary report is one step that will help outline a number of key goals in this process.

We look forward to integrating the findings from this needs assessment into a Five-Year Action Plan in the coming months. The results of this study will serve as a guide in our planning going forward to strategically advance relevant policies, programs, and projects – creating Swampscott For All Ages.

Thank you for your support, vision and engagement as we truly make *Swampscott a Community for All Ages!*

Sincerely,



Sean Fitzgerald
Town Administrator

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Contributors and Acknowledgements

This report was produced by the Center for Social and Demographic Research on Aging (CSDRA), a research unit within the Gerontology Institute at UMass Boston's McCormack School. The CSDRA provides resources and research expertise to communities, non-governmental organizations, and other agencies through the Commonwealth.

Dr. Caitlin Coyle is primarily responsible for the contents of this report. Other contributors include Jan Mutchler, Nidya Velasco, Sue Berger, and Rebecca Mailman. We are thankful for the leadership of Robert Powell, Heidi Whear, and Marzie Galazka, tri-chairs of the Swampscott for All Ages Committee, who offered guidance at each step of this process. Other members of the Swampscott for All Ages Committee include:

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This report would not have been possible without the vision and support of Town Administrator, Sean Fitzgerald, and Town Meeting for approving the funding to produce this report. We are incredibly grateful to the residents of Swampscott and community stakeholders that shared their thoughts as part of the data collection.

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Executive Summary

Introduction

By the year 2030, 35% of Swampscott residents will be age 60 and older¹. In response to this demographic shift as well as in response to the desire of most residents to remain living in their community, the resident leaders of Swampscott, with support of the Town, have embarked on the journey to become a more age friendly community. They call themselves the Swampscott for All Ages Committee. The Swampscott for All Ages initiative is meant to ensure that Swampscott is and remains a place where older adults can comfortably and safely age in place. It is a resident-led committee with strong municipal support. This report describes research undertaken by the Center for Social & Demographic Research on Aging within the Gerontology Institute at the University of Massachusetts Boston, on behalf of the Swampscott for All Ages Committee and the Town of Swampscott, to investigate the needs, interests, preferences, and opinions of Swampscott's residents age 60 and older. Structured around livability principles embedded in the World Health Organization's Age Friendly Community framework², the Swampscott for All Ages initiative considers physical infrastructure as well as social and service environments as it seeks to strengthen livability for Swampscott's older residents. The contents of this report are designed to inform the Swampscott for All Ages Committee as it develops a plan for action to address the needs identified; and also intersect with and advise other ongoing efforts, including the development of the Swampscott Master Plan. This work also aligns with Governor Baker's plan for an Age Friendly State.

Methods

Research in support of this report began in the March of 2019 with a community forum held at Swampscott High School. Approximately 100 residents and community stakeholders gathered to share their insights regarding the strengths and challenges of growing older in the Town as well as their hopes for future improvements. Subsequent data collection included a resident survey that was mailed to a sample of residents age 55 and older in May 2019. A total of 1,645 surveys were received for a response rate of 33%. Among them, 290 surveys were completed online, 90 of which were received from residents under age 55. In addition, several key Town documents were reviewed, six key-informant interviews were conducted with Town leaders and those providing direct service to older residents, and four focus groups were facilitated in the summer of 2019 with residents of a variety of ages as well as community stakeholder representatives.

¹ Population projections are based on figures from the Donahue Institute. <http://www.donahue.umassp.edu/>

² <https://extranet.who.int/agefriendlyworld/Age-Friendly-cities-framework/>

Select Findings and Priorities

Housing and Economic Security

Efforts to identify and address challenges associated with housing have been underway in Swampscott for some time. Information gathered for this study focuses on two intersecting aspects of housing as it relates to livability in Swampscott. Housing affordability is identified as a key barrier to age friendliness of the community. The number one concern respondents gave about aging in Swampscott is the cost of housing and maintaining housing. More than two-thirds of respondents under age 60 would prefer a smaller single family home in the future, while respondents age 60-79 would prefer an apartment or condominium; and among those respondents age 80 and older, senior independent living communities are preferred. More than half of survey respondents reported that their current residence does not have a bedroom and bathroom on the first floor. As well, shortfalls in the availability of housing options are identified including not just more affordable units; but lack of opportunities to reduce costs associated with living in Swampscott for older residents or regulations that prohibit the use of the existing housing stock for the development of alternative housing models like cohousing or accessory dwellings. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Housing & Economic Security

- Consider opportunities to reduce property taxes for those struggling to meet their needs. For example:
 - Freeze property taxes for those age 70 and older.
 - Expand access to existing property tax relief programs by raising the income limit for the tax work-off program.
 - Ensure that those who are already eligible for existing programs are aware of how to apply. Identify and communicate trusted resources for in-home supports (both home care and handyman services).
 - Adopt new property tax relief programs, including a senior tax deferral program.
- Investigate strategies for developing a “village” in Swampscott. This model is an opportunity for older residents to come together to share resources for services and increase social interaction.
 - Resource sharing may include transportation, meals, and errands.
- Promote home repair and modification so that current housing is appropriate as people age.
- Increase opportunity for public discourse around affordable senior housing.
- Continue to promote the recently amended requirement for accessory-dwelling units so that interested residents take up this opportunity.
- Develop mechanisms by which residents who remain living in single-family homes as they age remain connected to the community (e.g., via the senior center) in order to prevent social isolation and other types of crises.

- Consider targeting through mailings to homeowners of particular age groups educational materials about available opportunities and resources.
- Review current zoning regulations to identify opportunities to create more alternative housing options in Swampscott. For example, allowing congregate living of multiple older adults in existing large single-family homes.
- Increase community connections to senior housing developments in Swampscott.

Transportation

Most survey respondents reported driving themselves as the way they get around. Although there are public transportation options and ride sharing services available in Swampscott, barriers to access were identified by older residents. Two gaps in transportation for Swampscott residents were identified: one is the ability to easily get around locally in Swampscott or to neighboring communities like Marblehead or Salem; and the other is access to reliable and convenient medical transportation for both the patients and those older family members who wish to visit their loved ones. More than 40% of survey respondents reported walking or biking as modes of transportation, highlighting the importance of walkability and safe streets for residents of all ages. Forty-five percent of respondents reported being dissatisfied with sidewalk quality and 30% dissatisfied with lighting along walkways. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Transportation & Walkability

- Expand options for medical transportation.
 - Consider the use of volunteer drivers through developing a FISH program or TRIP program and include the transport of caregivers or visitors in these programs.
- Conduct a feasibility study or procure funds for pilot-testing a local shuttle in Swampscott.
 - Consider partnerships with Salem, Lynn, Marblehead and Nahant in this effort.
- Consider ways to make commuter rail access less expensive for older adults.
- Review bus stops in Swampscott to ensure they have benches, shelters, and flat pathways for access.
- Make ride share services more Age Friendly, considering ease of use, trust issues, and accessibility of vehicles.
 - Consider profiling local Uber/Lyft drivers so that residents are more familiar with local drivers.
 - Host workshops on ride-sharing “apps” at the public library, senior center and other venues.
 - Explore Go-Go Grandparent, a ride-sharing service for older adults.

- To inform Swampscott’s “Complete Streets” initiative³, convene a walking group that identifies barriers to access outdoor spaces.
 - Look for dangerous intersections, connectivity challenges, tree interference, sidewalk disrepair, etc.
- Work with neighboring communities to develop multi-town transportation solutions. See other regional transportation authorities for examples⁴. Include transportation stops at senior centers of participating communities.

Outdoor Spaces & Buildings

Availability of shaded seating, signage, public restrooms, and handicap accessibility were also discussed as barriers to getting out in the community by a portion of respondents. These improvements to outdoor spaces have been named in other planning processes taken up by the Town; and thus, ensuring that the public is kept informed of the progress being made could be a valuable effort. Focus group participants and key informants also highlighted the lack of community space for residents of all generations to gather in Town. In fact, 39% of survey respondents reported that there are not enough places to go in Swampscott for leisure and socialization—and this was truer for those respondents under age 60. Participants described their travels to nearby communities to access public spaces like this; but requested better connections with these communities. For example, transportation and information about what is going on in such close proximity to Swampscott was requested. When it comes to public buildings and opportunities for social participations—opportunities for Swampscott to engage in an “age friendly region” effort became clear. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Outdoor Spaces & Buildings

- Consider increasing accessibility within the Town to make it easier for older adults with or without a disability to take advantage of Swampscott amenities. For example, provide signage around Town in large print for those with decreased vision. Encourage Swampscott restaurants to participate in the Purple Table reservation program, a program that makes eating out more enjoyable for those with dementia or other conditions.

³http://www.swampscottma.gov/sites/swampscottma/files/uploads/swampscott_complete_streets_policy_development.pdf

⁴ <http://www.gatra.org/index.php/tri-town-connector/>

- In support of recent plans for the downtown⁵ and waterfront areas⁶—advocate for the completion of sidewalk and intersection improvements, added handicap parking, shaded seating, and public restrooms that will improve walkability.
- Create a mechanism for residents to be informed about sidewalk repair plans and progress. For example, make the public works permits publicly accessible or generate a map of sidewalk repairs and update as progress is made⁷.
- Using the “Snow Angels” program as a model, consider other seasonal tasks where older residents might need help. (e.g., leaf removal or lawn mowing).
- Consider the development of a community center that would offer more space for physical activity and community gathering space.
- Review the relationship between the COA and the Swampscott High School to ensure that older adults have some access to the indoor walking track and other amenities.
- Replicate the Town garden in other locations and consider age friendly design such as waist high beds for accessibility.

Social Participation

Two kinds of social participation were included in this study of Swampscott residents: formal opportunities like attending the senior center or participating in social clubs and informal opportunities like talking with neighbors, or getting together friends and family. There was consensus that although the Swampscott Senior Center provides invaluable service—its ability to meet the growing and evolving needs of Swampscott residents is limited. Only 18% of respondents had ever been to the Senior Center and many provided ideas for ways that social opportunities can be expanded or developed—all would require additional capacity in terms of space and staff. Overall, the majority of Swampscott respondents reported high levels of social connection. In addition, there is a strong willingness to help fellow residents with small tasks when needed—91% of survey respondents reported that they do provide neighbors with help or they would if they were asked. That said, there is a segment of the population that can be identified as prone to social isolation. For example, 18% of survey respondents report not having talked with a neighbor in the past month and 23% of respondents get together in person with friends or family once a month or less, and 17% were dissatisfied with opportunities to engage informally with neighbors. These findings illustrate an opportunity to strengthen social participation opportunities to reduce risk of isolation in later life. Based on these results, the following ideas for action are recommended:

⁵ http://www.mapc.org/wp-content/uploads/2017/10/Final_Swampscottreport_1_17_13.pdf

⁶ <http://www.swampscottma.gov/town-administrator/pages/harbor-waterfront-plan-2018>

⁷ <https://www.cityofsanrafael.org/2-20-19-sidewalk-repair-program-see-live-updates-on-our-map/>

Ideas for Action in Swampscott: Social Participation

- Initiate a Facebook page for older adults to share knowledge and resources as well as make requests and find peers with similar interests in attending events.
- Explore the possibility of increasing the number of active adult events such as bowling, wine tasting, or an indoor walking group.
- Consider strengthening intergenerational activities through the creation of a senior-student liaison who can make connections and share information about opportunities for intergenerational activity throughout the community (e.g., inviting older adults to attend Big Blue Band concerts etc.).
- Develop a “companion” program that connects residents who have a shared interests (e.g., museum visit, day trip, or walking). This type of connection can provide socialization, transportation, and recreation.
- Identify neighborhood-based programs or mechanisms to strengthen informal networks in neighborhoods and ensure that existing neighborhood-based activities are inclusive of older residents.
- Consider ways to welcome first-time participants to the Senior Center who are reluctant to participate on their own (e.g., a welcoming committee or a “buddy” program that encourages current users to bring a friend).
- Educate community organizations and faith communities about who to contact if they identify someone who may be at risk of social isolation.
- Develop an Age Friendly regional coalition to strategize about ways that area senior centers can work together to ensure that all older residents have access to the rich array of programs without duplication of effort. Explore the development of a “specialty senior center model”. For example, the Marblehead Senior Center could promote its exercise programs to residents of area communities, the Nahant Senior Center could do the same with its arts and cultural programs and the Swampscott Senior Center could also contribute through the promotion of its recreational programs and health clinics. Transportation and other resources could be shared.
- Consider how the various clubs in town (e.g., yacht, golf, rotary, garden) are connected to the COA and identify opportunities for co-hosting events or collaborating to reach a larger swatch of older residents.

Civic Engagement & Employment

Most survey respondents were satisfied with volunteer opportunities and opportunities to get involved in local government (59%; and 64% respectively); but more than one third of respondents reported “I don’t know” about these two aspects of community living. This suggests a lack of awareness of opportunities for volunteer work or civic engagement. Considering ways that residents can be more easily made aware of these opportunities is a priority within this

domain. Not surprisingly, most residents under age 60 are still working full time while among those respondents over age 60, more than two-thirds are retired. A segment of Swampscott's older residents is looking for work and more are working part-time. This finding suggests the appetite for continued involvement in the workforce among older residents. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Civic Engagement & Employment

- Designate a group of resident advocates who will consistently attend board and committee meetings to raise awareness of older adult issues.
- As more residents begin to retire, consider ways for them to get connected with volunteer opportunities and post-retirement work.
 - Consider hosting a “retirement fair” and invite residents who have recently turned 65 as well as business and local organizations seeking part time employees or volunteers.
 - Facilitate “retirement groups” where groups of residents can meet regularly to develop purpose, make connections, and work through challenges.
- Expand programming around retirement planning or finding a post-retirement job
- Continue providing opportunities for residents to volunteer and stay civically engaged in town activities. Assure that residents can easily identify the opportunities that already exist through the Town or other local organizations and groups.
- Develop an all ages civic academy^{8,9} that focuses on educating residents about municipal processes and empowering residents to advocate on behalf of themselves and their peers.

Community Supports & Health Services

Participants highlighted the strength of being in such close proximity to high-quality health services as an aspect of Swampscott that makes it an ideal place to age. However, the second most commonly cited concern about remaining in Swampscott over time was the idea of maintaining healthy and functional ability to remain living independently; and securing the necessary supports to do so affordably. Twenty-four percent of Swampscott residents have at least one disability. Almost half of survey respondents reported providing care to someone who was disabled, frail, or struggling with a physical or mental health condition; and among those under age 60, 67% reported that this was challenging for them to provide this care and meet their other responsibilities. Further, 49% of survey respondents reported that they did not know who to contact in Swampscott if they or someone in their family should need help accessing social

⁸ http://www.wenhamma.gov/citizens_leadership_academy/

⁹ <https://www.boston.gov/news/first-senior-civic-academy-cohort-graduates>

services, health services, or municipal services. These two stark findings highlight the importance of communication and outreach about existing community supports and health services---particularly to those providing care. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Community Supports & Health Services

- Improve community knowledge about available services.
 - While broadening awareness overall, take special efforts to improve awareness and access to those who could benefit from services, especially those with participation limitations or who are providing care to someone.
 - Host a “crash course in caregiving” to provide families with necessary information about services and supports.
 - Create opportunities to connect the Greater Lynn Senior Services (GLSS) with family caregivers.
- Encourage a formal collaboration between the police, fire, and Swampscott Senior Center departments to identify “at risk” older adults in Swampscott. If possible, formulate a routine check-in with these residents to stay ahead of crisis-situations.
 - Consider requiring a home-visit before a resident can obtain a lock box or life alert from the Swampscott Fire Department as a way of screening for risk factors related to falls or isolation.
- Consider the necessary increase in staff and building capacity of the Swampscott Senior Center so that additional programming and services can be obtained by the growing population of older residents.
- Consider hosting a “Caregiver’s Night Out”.
 - Explore partnerships with volunteer groups to provide respite care during the event.
- Expand and develop dementia-friendly initiatives.
 - Improve public education about dementia, access to adult day programs, and businesses that are trained to interact with people with dementia may be considered.
 - Promote greater awareness of dementia in the community. Participate in state-wide and national events like “Purple Pew” or the Walk to End Alzheimer’s, offer a free memory screening in partnership with a healthcare professional, or raise awareness in the workplace by sponsoring a “Go casual for a cause” Friday.
 - Pilot test a memory café or consider providing transportation to a nearby memory café.

Communication & Information

Nearly every aspect of an age friendly community relies on communication and information. This includes both information relayed to residents; but also the ability for organizations, departments and other stakeholder groups to communicate among each other. Local newspaper, word of mouth, and social media were the most commonly reported methods of obtaining information. While most participants have access to the internet, 21% of respondents age 80 and older do not. These findings highlight the necessity of a multi-media approach. When asked specifically about programs offered by the Swampscott Senior Center and other community supports and health services, large numbers of respondents indicated “I don’t know”. Although these individuals may not yet have a need for these programs and services—this finding makes clear the work to be done around education future generations of older adults and their families about the resources available them in support of aging in place. Based on these results, the following ideas for action are recommended:

Ideas for Action in Swampscott: Communication & Information

- Consider scheduling quarterly meetings of key employees who work for organizations that provide services to older adults, providing an avenue to share information. Consider it a human service networking event.
- Continue to disseminate information in multiple forms and provide print copies of important information in places other than the Senior Center and utilize local newspaper as a mechanism for getting information distributed. Consider a “senior sentiment” as an editorial column to engage older residents with relevant topics.
- Explore the possibility of having a centralized social calendar for events happening around Swampscott as a way of making residents aware of programs (e.g., library, Senior Center, recreation, church groups).
- Disseminate information about existing information channels in Town. Consider developing a “how to” guide that includes instructions on things like how to post something to the Town website, how to use the robo-call system, how to submit a letter to the editor.

Respect & Social Inclusion

During the community forum and in focus group conversations, residents described the “small town feel” and inclusive nature of Swampscott that they valued so deeply. Although survey results indicate an unevenness in this experience. When asked if they have ever felt excluded, 17% of respondents said yes. The most common reasons for feeling this way included: income (34%), age (27%), and religion or cultural background (17%). Many respondents wrote in other reasons for feeling excluded and the most commonly reported reason was not being a Swampscott native---or in other words, feeling like an outsider in their own town. In addition,

more than 1 out of 4 survey respondents disagreed that local policymakers take into account the interests and concerns of older residents. Improving lines of communication and opportunities for advocacy could improve this public perception. Based on these results, the following ideas for action are recommended:

Ideas for Action: Respect & Social Inclusion

- Designate a group of resident advocates who will consistently attend board and committee meetings to raise awareness of older adult issues.
- Review existing processes for collecting public input on planning and policy change to ensure that it is Age Friendly. For example, is transportation available for public meetings or are surveys made available in hard-copy as well as online.
- Consider accessibility of public events, including seating, restrooms and cost to ensure that all residents feel welcome and supported.
- Consider educating “front facing staff” of Town offices on how to communicate with people with memory impairment and ensure that all older residents are treated with respect.
- Swampscott for All Ages Committee may wish to embed themes of inclusion in their mission statement and consider opportunities to build a broad-based coalition to tackle the issue of inclusion, involving representatives from faith communities, disability organizations, the schools, the Senior Center and other organizations committed to working collaboratively on this issue.
- Consider accessibility issues when planning community events; this includes taking into account the cost of participation, which may be out of reach for those with economic challenges.
- Consider strategies to improve outreach to all residents, including residents of senior public housing, as a means of promoting awareness and inclusion.

Priorities

Study findings point to many strengths of Swampscott that contribute to its livability, including the historic nature of the community, the walkable waterfront, and the proximity to Boston and surrounding communities like Lynn, Salem, Marblehead, and Nahant. Yet some aspects of Swampscott are regarded less positively. The cost of living and limited number of downsizing options are a concern for many study participants. Walkability of the town—including sidewalk quality, safety of intersections, and amenities like seating, lighting and restrooms impede older residents from fully engaging in the community. Some alternatives to driving exist in Swampscott, however transportation remains a challenge for some residents. Equally important, there appears to be a segment of the population that is isolated or at risk of isolation. By putting cross-departmental strategies in place to respond to emergency needs of those who are isolated

or might be at risk of isolation, the Town can work to prevent extreme isolation and the crises that often come along with that condition.

Communication crosses all domains addressed within this study. As such, one priority may be to improve communication about available resources. Many programs are available in Town but residents are either unaware of them or unable to access them. Another priority for the Swampscott for All Ages initiative may be to identify strategies to empower older adults living in Swampscott to remain civically engaged through advocacy and volunteer work. Although the residents of Swampscott have a wide range of interests in social and recreational activities--- there are not many places in town to gather communally to engage in these activities. The capacity of the existing buildings—library, senior center, and the Swampscott Recreation Department is limited. Many participants commented on the value that a community center space would add to the livability of the town for residents of all ages. In addition, many residents currently participate in activities in surrounding communities; and yet transportation and information about these resources is uneven. Given the close proximity to other communities and the goals of advancing Governor Baker’s Age Friendly State initiative, opportunities for a more age friendly region should be pursued in this geographic region.

It is worth highlighting that an age friendly community is also supportive and inclusive of people living with dementia and their families. Results from this project suggest that few additional resources that appear to be needed in support of a more Age Friendly Swampscott community. Many Swampscott residents provide care for a loved one, 25% of those caregivers are providing care to someone with dementia; and survey results show that this is challenging for many. It appears that many who provide care don’t know or don’t take advantage of the currently available services (e.g., social services, homemaking services). Exploring targeted strategies to reach these vulnerable populations is crucial. Not only can information about resources and programs be instrumental in facilitating quality of life for these residents and their caregivers; but increasing overall community knowledge about the experience of caregiving and living with dementia can erode stigma and make caregivers feel less isolated.

Many projects to improve livability in Swampscott are already underway and therefore, we suggest building on the momentum of projects already in place. The Swampscott for All Ages Committee and the Senior Center have an important role to play in listening to and advocating for the needs of Swampscott’s older residents.

The Swampscott for All Ages Initiative

Introduction

By the year 2030, 35% of Swampscott residents will be age 60 and older¹⁰. In response to this demographic shift as well as in response to the desire of most residents to remain living in their community, the resident leaders of Swampscott, with support of the Town, have embarked on the journey to become a more age friendly community. They call themselves the Swampscott for All Ages Steering Committee and Initiative. The Swampscott for All Ages initiative is indicative of how the community of Swampscott values resident contribution. Two dozen residents, with a range of backgrounds and expertise, volunteered to make the town more Age Friendly. This Swampscott for All Ages Committee is charged with ensuring that Swampscott is and remains an accessible and inclusive place in which to live, work and play. The purpose of the research described in this report is to inform Swampscott's effort to be an age friendly community for residents of all ages and abilities.

The Swampscott for All Ages initiative is structured around livability principles embedded in the Age Friendly Community framework, developed by the World Health Organization (WHO) and coordinated in the U.S. by AARP. The initiative, taking its first steps in 2016, is designed to intersect with and inform other ongoing efforts occurring in Swampscott.

The Swampscott approach is meant to include physical infrastructure as well as social and service environments as it seeks to strengthen livability for all ages and abilities, including residents with dementia and their families. Research conducted in Swampscott and discussed in this report is meant to support an understanding of the current livability of Swampscott and to identify gaps and disparities in livability features. The ultimate goal of the report is to identify priorities for action that may be taken up by the initiative in coming years.

The Age Friendly Community Framework

Communities throughout the nation are pursuing new strategies to promote health and quality of life among their residents. 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, based on WHO's "Age Friendly communities" framework, as well as related models such as "livable communities" or "lifelong communities."

¹⁰ Population projections are based on figures from the Donahue Institute. <http://www.donahue.umassp.edu/>

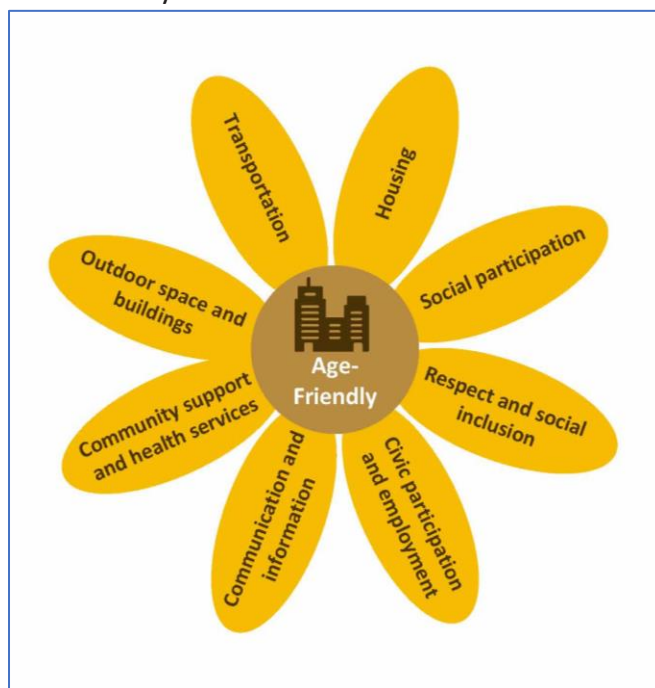
An “Age Friendly” Community, as described by WHO, is one in which people participate in activities, are connected to their neighbors, remain healthy and active, and feel they belong—no matter their age. Through planning, taking action, and evaluating progress, communities all over the world are taking 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. WHO also hosts an Age Friendly Network, established in 2010 as a means of facilitating the exchange of information among communities. More than 50 cities and towns in Massachusetts have already joined the Age Friendly Network (<https://extranet.who.int/agefriendlyworld/who-network/>), and in his January 2018 State of the State speech, Governor Baker announced that Massachusetts joined the network of Age Friendly States, signaling broader commitment to the principles that support aging in community.

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 **Figure 1**). Within each domain, elements are identified that are relevant to affordability, appropriateness, and accessibility.

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 first step involved in

pursuing an Age Friendly agenda is to define and assess environmental features relative to the characteristics and resources of residents actually living in the community. Based on what is learned in that initial step, a community will develop an Action Plan designed to address the most pressing or most actionable issues identified through the needs assessment process. In

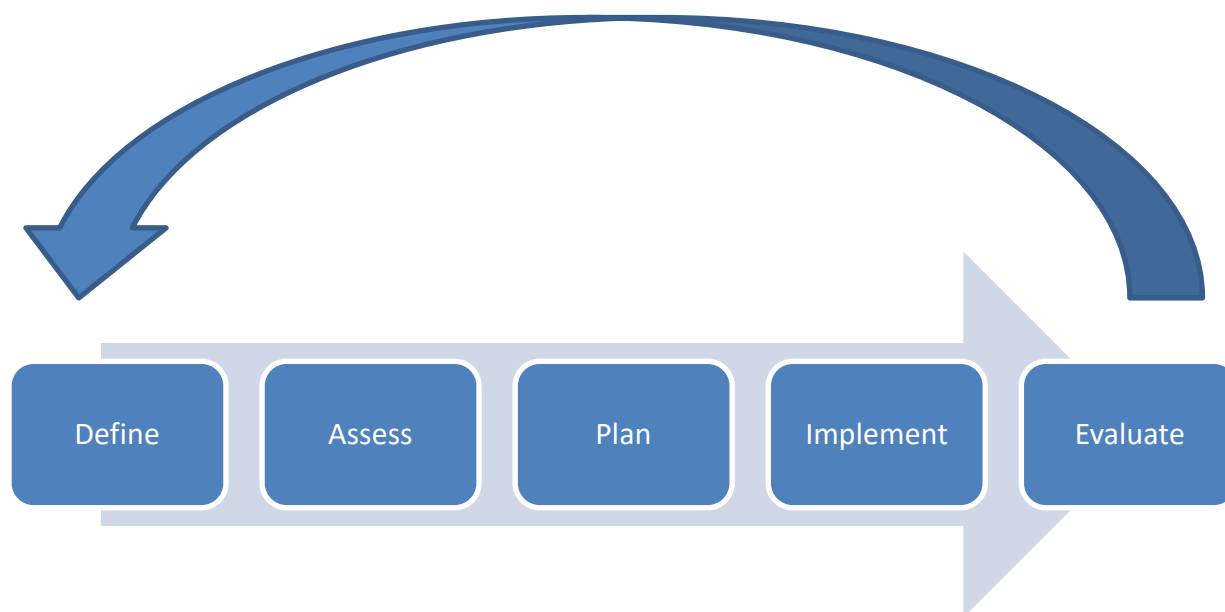
Figure 1. Eight Domains of an Age Friendly Community



Source: Adapted from WHO by S. Harris (Design for Aging Committee, BSA)

subsequent years, as the Action Plan is implemented and evaluated, the broad goals of the Initiative may be modified in a continuous improvement cycle (see **Figure 2**). When working towards building an Age Friendly Community, it is helpful to keep in mind that not all domains must be addressed in a single cycle. A community may wish to select domains in which they are most prepared to make progress, or which are identified as priority areas by stakeholders.

Figure 2. Process for Developing an Age Friendly Community



Research in support of this report started with a community forum conducted in the Spring of 2018, during which residents offered initial information about the current livability of Swampscott as a place to grow old and their hopes for future improvements. Subsequent data collection included key-informant interviews with local leaders, a peer-community comparison, focus groups with community stakeholders, and a mailed survey of all residents age 55 and older.

Methods

Community forum. In March 2018, a community-wide forum was conducted at the Swampscott High School with more than 100 residents in attendance. After a brief presentation by CSDRA researchers regarding the eight features of an age friendly community as defined by the WHO, attendees shared strengths and challenges to living in Swampscott. Comments were also received from forum participants both in writing and from individual conversations with research staff.

Key-informant interviews. Seven key-informant interviews were conducted during May 2018. Interviewees included: the Town Administrator, the Director of the Swampscott Senior Center,

the Chiefs of Police and Fire, the Director of the local YMCA, the Director of the local aging service access point (ASAP), and a member of the Swampscott Planning Board. These conversations focused on the features of an age friendly community, unmet needs among residents, and potential solutions to support a more livable Swampscott.

Peer Community Comparison. In order to harness the momentum of the age friendly community movement in the region, interviews were conducted with representatives from 4 surrounding communities: Nahant, Marblehead, Salem, and Lynn. This community comparison also allowed for a deeper understanding of regional assets and barriers to an age friendly Swampscott.

Resident Survey. A survey was developed by UMass Boston research staff in consultation with representatives of the Swampscott for All Ages initiative. In designing the survey, efforts were made to address elements of each domain within the framework being used by the initiative along with relevant demographic information. All residents of Swampscott age 55 and older were mailed a postcard to notify them of the survey process and one week later the survey was mailed. The survey was also made available online. All responses were kept confidential and data was entered and analyzed at UMass Boston. In total, 1,645 residents responded to the survey, including 290 completed online for a response rate of 33%. The age distribution of respondents is shown in **Table 1**. Survey respondents represent a slight over representation of residents age 60-69 and underrepresentation of those age 70-79. Thus, results of the survey should be interpreted with this in mind. In addition, a majority of respondents were female (59%) and 42% of respondents have lived in Swampscott for more than 35 years. Tables and figures of survey results are dispersed throughout this report and are included in detail (by age group) in **Appendix A**.

Table 1. Age distribution of survey respondents compared to the American Community Survey

| | Survey Respondents | American Community Survey |
|--------------|--------------------|---------------------------|
| 55-59 | 14% | 16% |
| 60-69 | 38% | 47% |
| 70-79 | 32% | 19% |
| 80+ | 16% | 18% |
| Total | 100% | 100% |

*Note that residents under age 55 are excluded from this comparison. Although individuals under age 55 were not prohibited from responding, only 90 did so. In addition, 86 respondents chose not to report their age. Tables and charts in this report include all individuals responding, including those under age 55.

Focus Groups. Four focus groups were held in June 2019, each including stakeholders and/or residents who were recruited by members of the Swampscott for All Ages committee. Two focus groups included 20 residents of Swampscott of a variety of ages and the other two included a total of 9 individuals representing faith communities, local government, small business representatives, and aging service provider agencies. Focus groups were held in locations convenient to participants and lasted for approximately one hour. Discussions were audio recorded and a note-taker was also present to ensure the accuracy and comprehensiveness of the group conversation.

Results

In discussing results, findings are presented by domain starting with the features associated with the built environment (housing, transportation, and spaces and buildings), followed by domains involving the availability of appropriate services and supports, social participation, involvement in work and civic life, information access, and inclusiveness of the community. We note that, to a considerable extent, items discussed under domains overlap with one another. For example, inadequate knowledge within a community about local amenities – say, opportunities for recreation – represents a challenge under the participation domain, but also reflects shortfalls in the communication and information domain.

Our general approach in presenting findings based on the survey is to describe the patterns of response for respondents as a whole, and then break out findings based on relevant subgroups, and presented by age group. Within each domain, findings draw on all sources of information gathered for this study. In many cases, related observations emerged from multiple sources in our data collection – from interviews, focus groups, and survey responses, for example – and is presented in an integrated way. We make every effort to be clear about the source of the information but do not explicitly segment off information by source, as the goal is to emphasize common findings that emerge across sources. Text placed in italics and within callouts are respondent comments drawn from write-ins on the community survey.

Finally, we note that some important themes emerged from the study that do not strictly align with any specific domain. For example, the theme of financial security emerged throughout our research, intersecting with virtually all of the named domains. These cross-cutting themes are addressed initially in sidebars and developed further in the domains with which they connect.

Housing and Economic Security

Efforts to identify and address challenges associated with housing have been underway in Swampscott for some time. The Swampscott Housing Production Plan completed in 2016 offers a comprehensive housing needs assessment, and includes commitments meant to increase availability of appropriate housing to support an aging population¹¹. The town has established and funded the Swampscott Affordable Housing Trust, which supports affordable housing, and an increase in affordable units has occurred. For example, funding for the Senior Residences at the Machon was secured in July 2019; this project will include 38 units of affordable senior housing for the Town. This will add to the 212 units of subsidized housing in Swampscott.



Information gathered for this study focuses on two intersecting aspects of housing as it relates to livability in Swampscott. Housing affordability is discussed as a key barrier to livability in the community. As well, shortfalls in the availability of housing options are identified and discussed, including not just more affordable options but also opportunities that would facilitate residents' moving to a home that is better aligned with their evolving lifestyle while still remaining in Swampscott.

Data from the American Community Survey (ACS) highlight the distinctive markets represented by owner-occupied and renter-occupied housing in Swampscott. ACS data suggest that 81% of occupied homes in Swampscott are owned by the residents. As shown in **Table 2**, most owner-occupied homes in Swampscott are one-unit detached structures, while 20% of renter-occupied homes are in buildings with at least 10 units. More than half (56%) of homeowners are age 55+ and only 10% are aged 34 or younger. Similarly, 44% of renters in Swampscott are aged 55+ and 18% of renters are aged 34 or younger. As well, median household income is substantially higher among homeowners than among renters. However, the share of "cost burdened" householders is similar among homeowners and renters, at about 60%, indicating that costs may pose

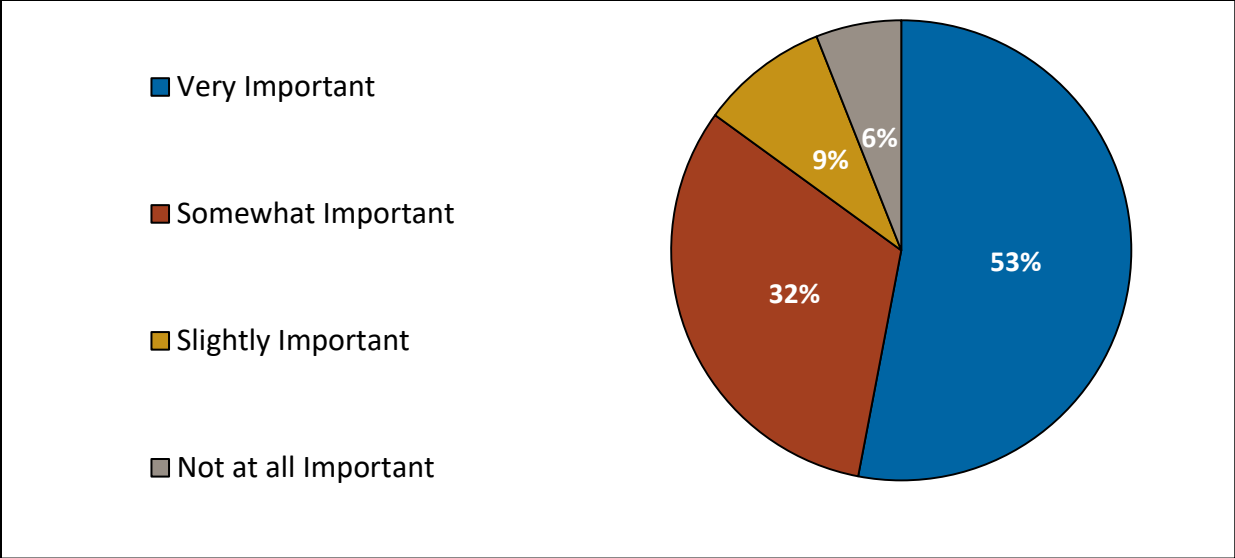
¹¹ See Housing Production Plan (2016) Goal #2: Provide seniors and persons with disabilities with greater housing options in Swampscott.

challenges for about two-thirds of households in Swampscott, impacting homeowners and renters alike.

| Table 2. Features of owner-occupied and renter-occupied homes in Swampscott (American Community Survey) | | |
|--|-----------------------------|--|
| Owner-occupied homes | | Renter-occupied homes |
| 76% of owner-occupied homes are one-unit detached structures. | Structure of housing | 20% of renter occupied homes are located in buildings with at least 10 units. |
| 56% of homeowners are age 55+. 34% are age 35-54. 10% are under age 34. | Age | 44% of renters are age 55+. 38% are age 35-54. 18% are under age 34. |
| Median household income is high among homeowners: \$144,070 (for homeowners with and without a mortgage). | Income | Median household income among renters is far lower than for homeowners, at \$46,162. |
| 36% of homeowners with a mortgage and 32% of homeowners without a mortgage are “cost burdened” spending more than 30% of their income on housing (mortgage payments, property tax, home insurance, utilities). | Cost burden | 61% of Swampscott renters are “cost burdened”, spending at least 30% of their income on housing (rent and utilities) |
| <u>Sources:</u> American Community Survey, 2013-2017, Tables S2506, S2503, S2504 & S2507. Statistics are based on 5-year survey estimates. | | |

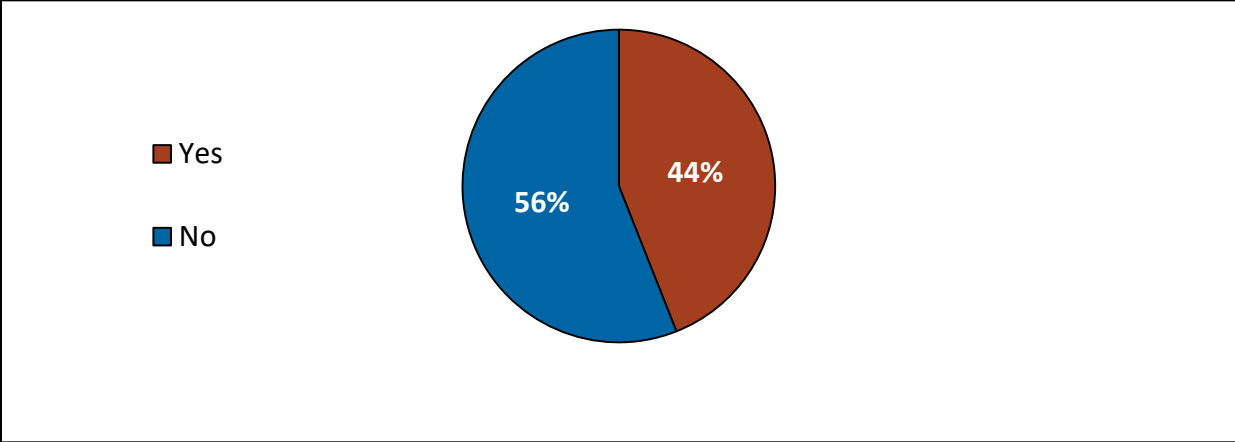
Respondents were asked how important it is to them to remain living in Swampscott as they get older. More than half of respondents reported that it was very important to them to remain in Swampscott (see **Figure 3**). However, 15% of respondents indicated that remaining in Swampscott was only slightly important or not at all important.

Figure 3. How important is it for you to remain living in Swampscott as you age?



Understanding the housing stock in Swampscott is important when assessing the age-friendliness of the community. Survey respondents were asked about their current place of residence. A majority (68%) of the Swampscott for All Ages community survey respondents reported living in a single-family home and 86% of respondents reported owning their current place of residence. Further, more than 1 in 5 (23%) of survey respondents reported living alone---and these rates were higher among respondents age 70-79 (29%) and 80 and older (44%). In addition, more than half of survey respondents (56%) report that their current residence does not have a bathroom and bedroom on the first floor (see **Figure 4**), which can present challenges in mobility and independence related to daily living needs.

Figure 4. Does your current residence have a bathroom and full bath on the first floor?



Further, survey respondents reported the level to which their current homes need repairs or modifications to maintain them as safe places to live. **Figures 5 and 6** illustrate that 42% of respondents have homes that would require some repairs in order to make them “age friendly”.

Of that group, only 10% report not being able to afford these repairs. Similarly, 29% report needing to modify their homes for the future and only 6% report not being able to afford to make these changes. Maintaining a home requires resources—including people who can make the repairs or modifications and the finances to pay for this work. Consequences of these challenges to maintenance and repair may lead to unsafe living conditions, isolation, loss of independence, and potentially involuntary relocation.

Figure 5. “Does your current residence need home repairs (e.g., new roof, electrical work, etc.) to improve your ability to live in it safely for the next five years?”

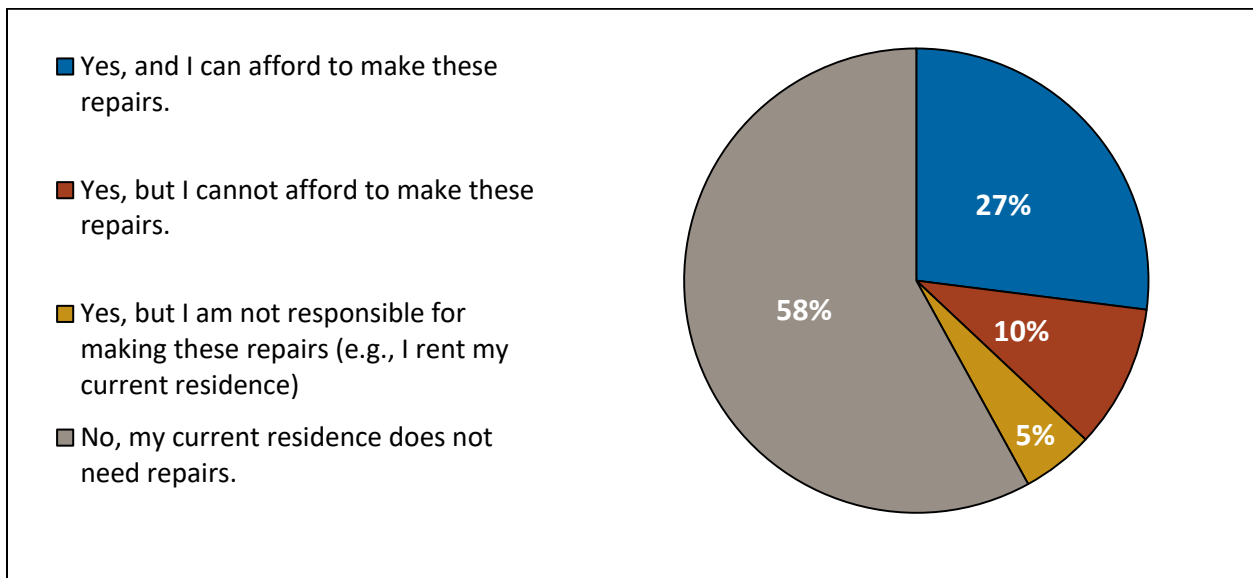
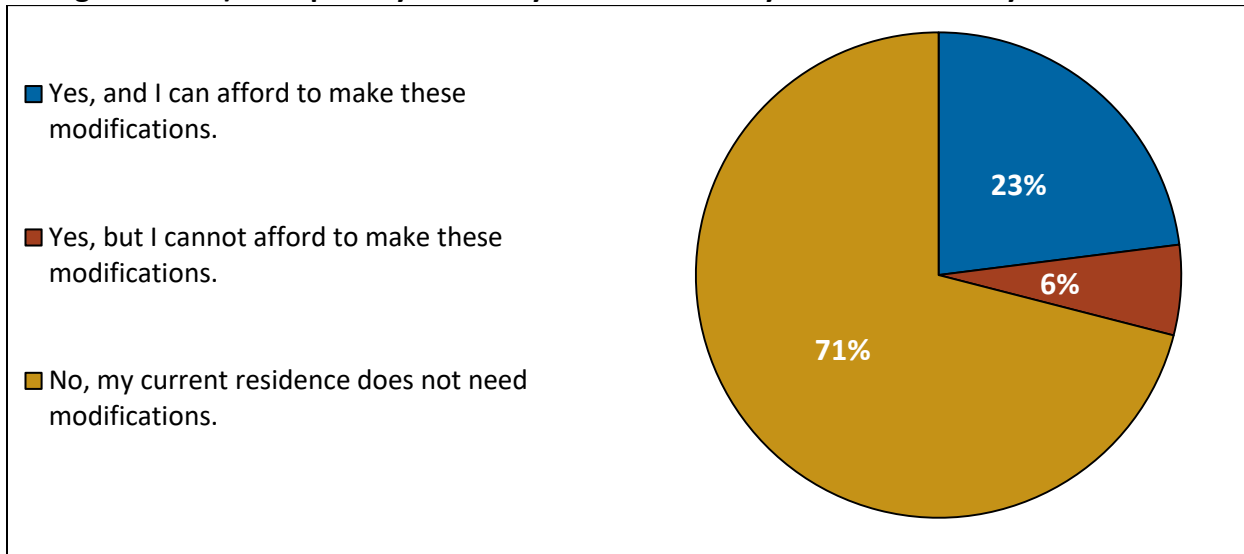
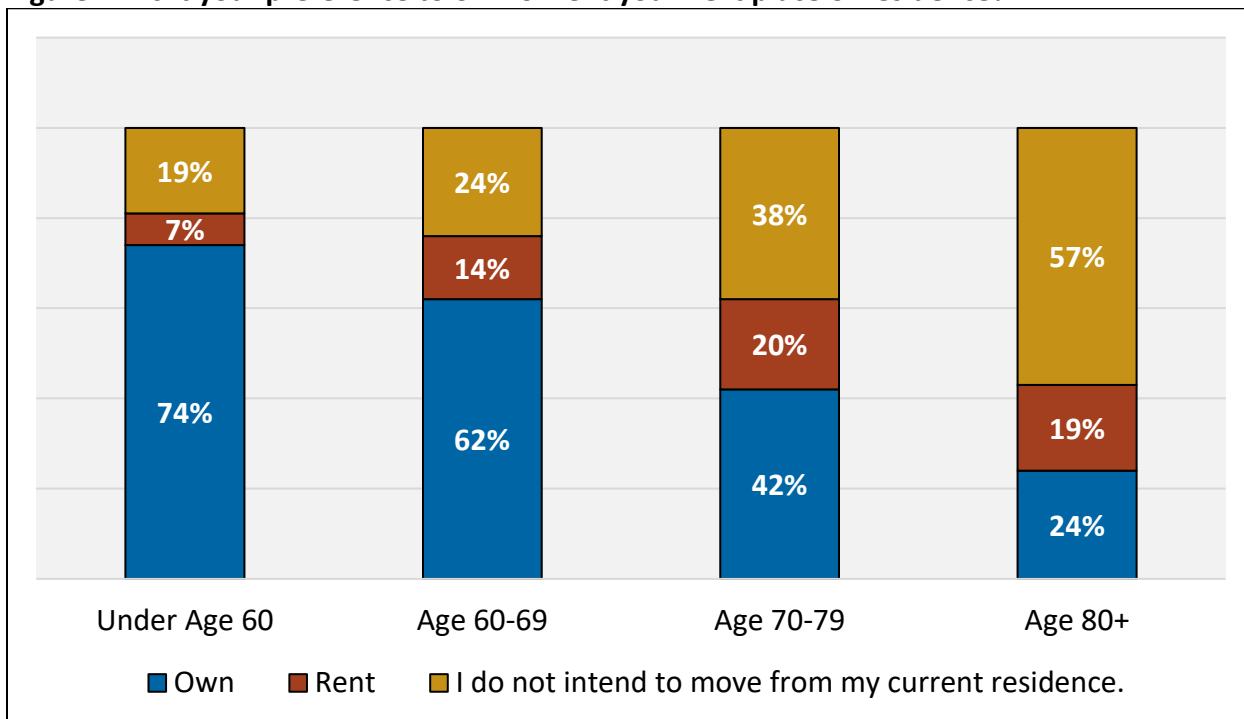


Figure 6. “Does your current residence need home modifications (e.g., grab bars in showers or railings on stairs) to improve your ability to live in it safely for the next five years?”



When asked about preferences for future housing, two key findings to note: 1) most people prefer to own their next residence; and 2) a sizeable share of Swampscott’s older residents do not intend to move from their current residence (see **Figure 7**). Taken together, these survey results suggest that Swampscott’s older residents are committed to continuing to age in Swampscott.

Figure 7. “Is it your preference to own or rent your next place of residence?”

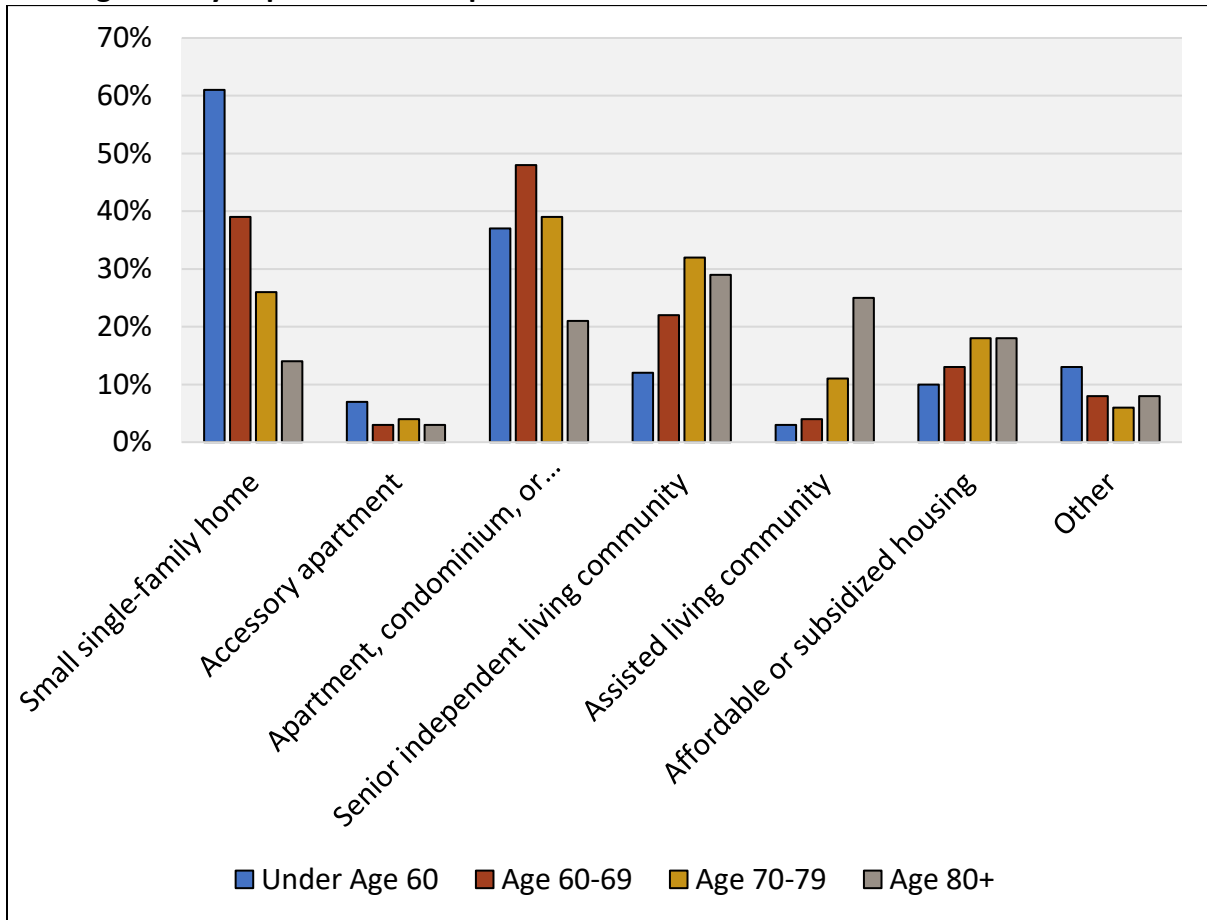


In focus groups and interviews, Town leaders and residents observed that there are a host of consequences to the lack of affordable senior housing currently being faced by older residents of Swampscott. This concept of being “house poor” was used to describe older Swampscott residents who no longer had a mortgage and could pay for the property taxes and utilities but not a whole lot more than that. This type of constraint can lead to social isolation, neglecting healthcare needs, and overall decline to the quality of the property. Further, some focus group participants pointed out that it is not possible to find housing in Swampscott that costs less than the current property tax bill on a single-family home—pointing to the fact that most recently developed housing has been market-rate which is not considered affordable to the average Swampscott resident, let alone an older adult with a fixed income. As one focus group participant who works in social services described, the results of this conundrum include a town that has some gorgeous houses that are awful inside. This individual commented that “no one knows what is going on here”.

Survey participants were asked the type of housing they would prefer if a change required moving from their current residence. Responses varied by age group. More than two-thirds of the respondents under age 60 chose a single-family home compared to other options, whereas those age 60-79 preferred apartments, condos, or townhomes and those survey respondents age 80 and older most preferred to be in a senior independent living community (see **Figure 8**). Among the write-in responses to the “other” answer option, most respondents reported that if they needed to move—they would not stay in Swampscott due to the costs of housing and lack of supportive, age-appropriate housing. The reported alternative would be to move to other communities in Massachusetts or potentially another state to be closer to family.

*Not able to afford to (downsize).
When I get to a point, when I need
assistance, I will not be able to
afford living in my beautiful town.*

Figure 8. “In the next 5 years, if you needed to move from your current home, what kind of housing would you prefer in Swampscott?”

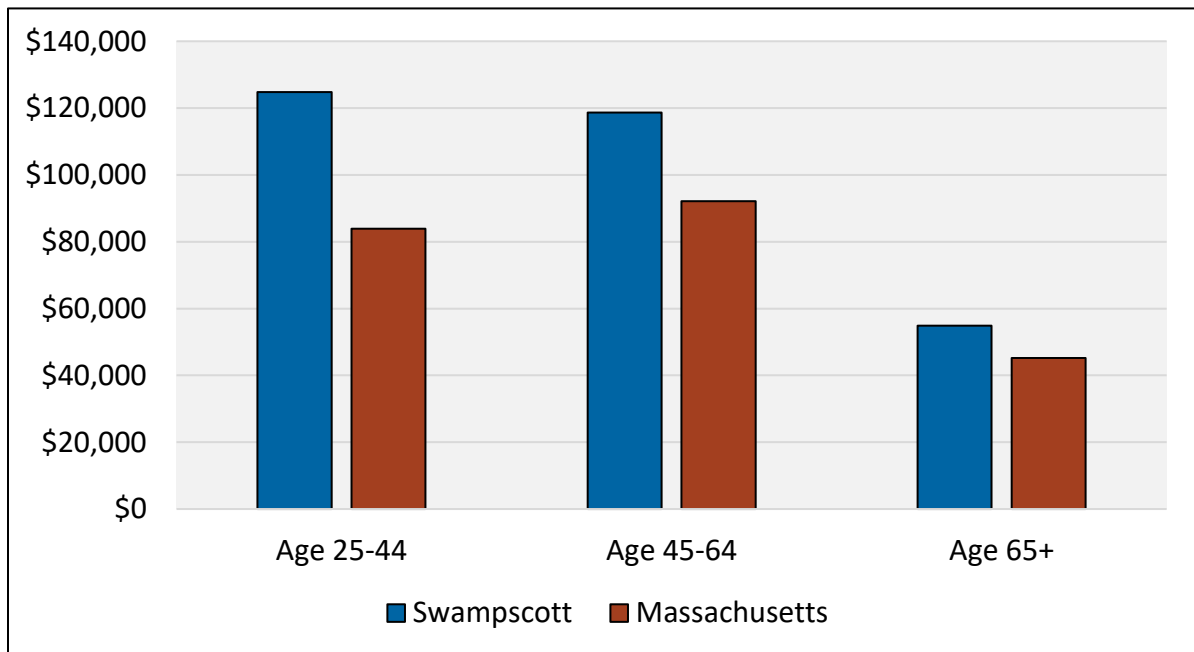


Housing & Economic Security

Information gathered for this study suggests that many housing challenges in Swampscott relate to the cost of housing in general, and property taxes in particular. Discussion of affordability arose routinely in focus groups and interviews, with one person commenting, “the number one and biggest concern in this town is the very high tax rate on my property taxes”. Focus group participants spoke about the high cost of housing in Swampscott and the lack of affordable options, particularly for older residents.

On average Swampscott residents report relatively high income, but segments of the community struggle financially. Estimates from the ACS place median household income in Swampscott at \$105,169 in 2017 dollars, well above comparisons for Massachusetts as a whole. Across each age group, typical household income in Swampscott is higher than in Massachusetts overall (see **Figure 9**).

Figure 9. Median household income by age of householder (2017 dollars)

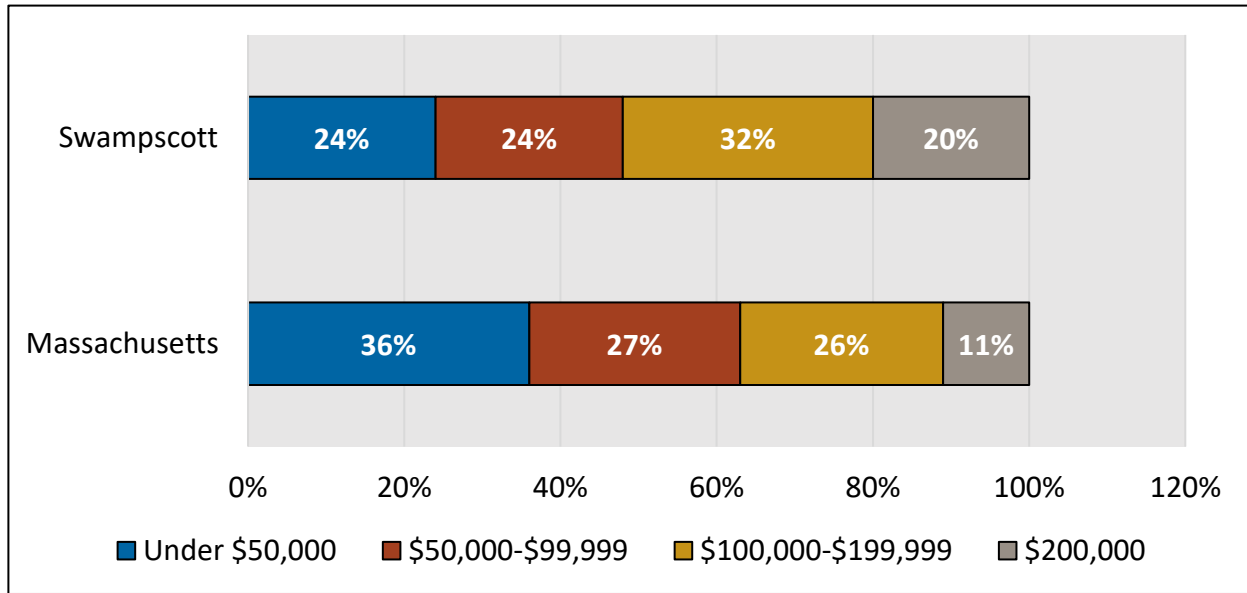


Source: American Community Survey (2013-2017), Table B19049

With respect to household income, there is some comparative disadvantage of some older residents in Swampscott (see **Figure 9**). Among householders 65 and older, the median income is \$54,871, which is higher than the statewide median for this age group (\$45,193) but much lower than the median income of younger Swampscott householders. These figures suggest that a sizeable number of residents are at risk of economic insecurity.

More than half of Swampscott households report incomes of \$100,000 or more (see **Figure 10**), compared to 37% of households in Massachusetts overall, yet 24% of Swampscott’s residents report incomes below \$50,000. Given the cost of living in Swampscott, especially associated with housing costs, it is likely that many people who would feel financially secure in other locations feel financially stretched in Swampscott.

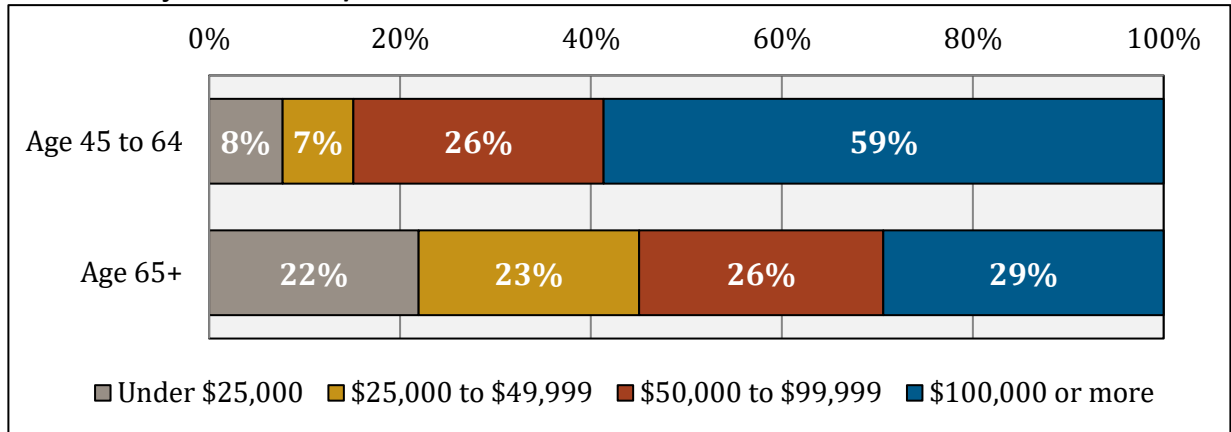
Figure 10. Household income distribution (2017 dollars)



Source: American Community Survey, 2013-2017, Table S19001. Statistics are based on 5-year survey estimates.

The economic profile of older Swampscott residents relative to younger residents is further illustrated in **Figure 11**, which shows that the older adult population lives on a modest income. About 29% of Swampscott residents age 65 and older report annual household incomes of \$100,000 or more. By comparison, 59% of households headed by younger residents report this level of income. Nevertheless, a large share of households headed by someone age 65 and older report annual incomes under \$25,000 (22%). This compares with just 8% of households headed by individuals age 45 to 64 having incomes under \$25,000. Thus, there is a sizeable segment of Swampscott’s older population that is at risk of financial insecurity or economic disadvantage.

Figure 11. Household income distribution in Swampscott by age of householder (in 2017 inflation-adjusted dollars)



Source: American Community Survey, 2013-2017, Table B19037. Numbers are calculated from 5-year survey estimates. Note: Includes only community households, not group quarters such as nursing homes.

The community survey conducted for this project sought to capture the number of respondents who were financially insecure, painting a landscape of financial security in Swampscott, using the following question: “Please indicate your level of agreement or disagreement with the following statement: ‘I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses.’” As shown by **Figure 12**, 17% of respondents disagreed or strongly disagreed with the statement. These responses highlight that segments of the older adult population struggle financially.

Figure 12. “I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses.”

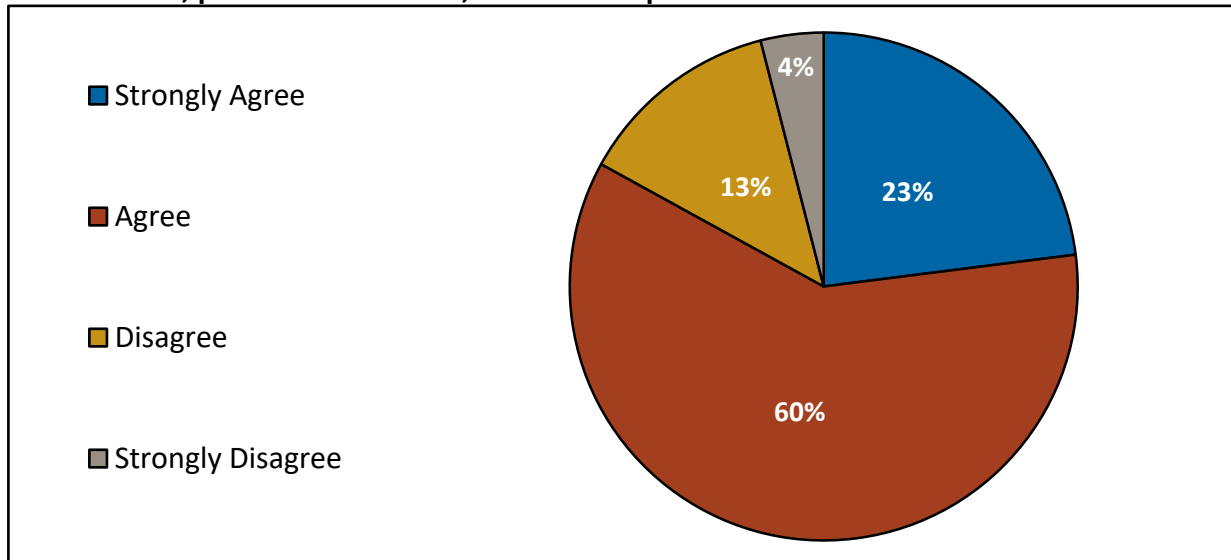
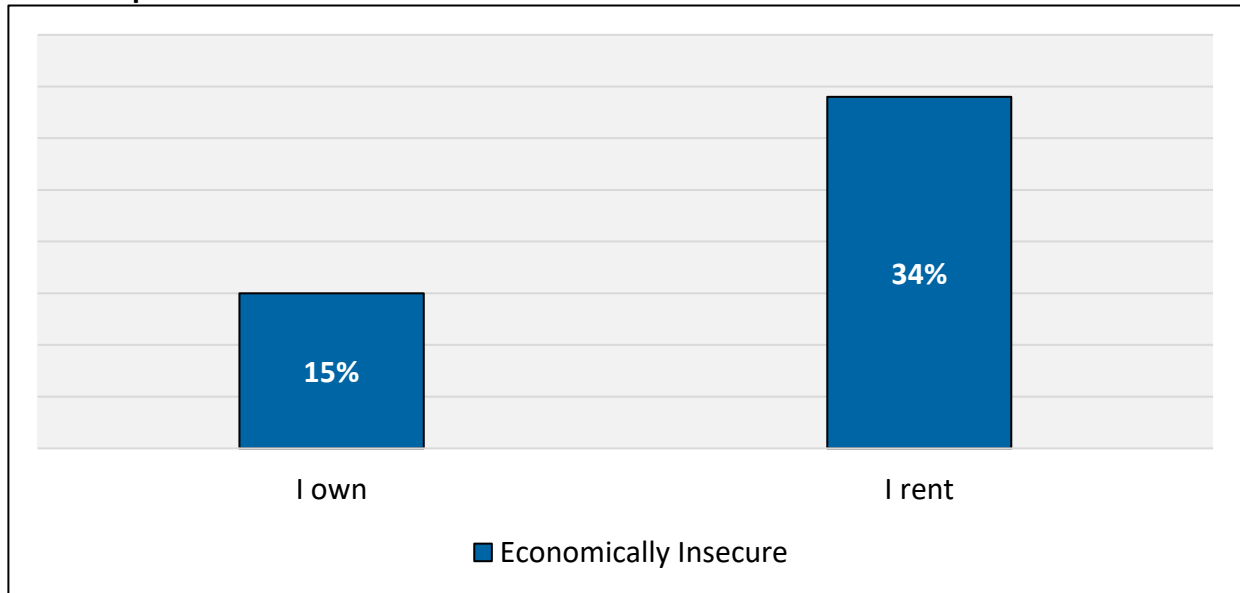


Figure 13 shows the share of respondents who are struggling financially based on their homeownership status. Notably, 34% of renters are economically insecure, as indicated by responding that they disagree or strongly disagree with the statement, “I have adequate resources to meet my financial needs, including home maintenance, personal healthcare, and other expenses”.

Figure 13. Percentage of participants who reported economic insecurity, by home ownership status



Respondents indicated their biggest concerns for being able to stay in Swampscott as they get older. The cost of living, particularly the cost of housing and associated taxes, was the most commonly reported concern (see **Table 3**)¹².

| Table 3. Cost of living as a concern in Swampscott |
|---|
| <i>Taxes on real estate will force me from my community</i> |
| <i>Taxes if we stay in our home.</i> |
| <i>No affordable options if we can no longer garden, shovel, rake, etc.</i> |
| <i>I may need to have a home that has a bedroom & bathroom on the 1st floor and my home would not sell for enough to buy one.</i> |
| <i>Our current home (which we own) is no longer meeting our needs as a family but we cannot afford to buy a new house in Swampscott - home prices are no longer affordable.</i> |
| <i>Housing affordability - not sure I can continue to pay mortgage & taxes when retired.</i> |
| <i>Fairly close to a tipping point—if we lose more commercial properties... would increase the residential rate</i> |

¹² Beyond housing and living expenses, other survey participants wrote in about their other concerns. Mainly, these included the physical accessibility of Swampscott (quality of roads, walkability and access to amenities), a sense that Swampscott was being overdeveloped, and overall worry about abilities to maintain homes.

Ideas for Action in Swampscott: Housing & Economic Security

- Consider opportunities to reduce property taxes for those struggling to meet their needs. For example:
 - Freeze property taxes for those age 70 and older.
 - Expand access to existing property tax relief programs by raising the income limit for the tax work-off program.
 - Ensure that those who are already eligible for existing programs are aware of how to apply. Identify and communicate trusted resources for in-home supports (both home care and handyman services).
- Investigate strategies for developing a “village” in Swampscott. This model is an opportunity for older residents to come together to share resources for services and increase social interaction.
 - Resource sharing may include transportation, meals, and errands.
- Promote home repair and modification so that current housing is appropriate as people age.
- Increase opportunity for public discourse around affordable senior housing.
- Continue to promote the recently amended requirement for accessory-dwelling units so that interested residents take up this opportunity.
- Develop mechanisms by which residents who remain living in single-family homes as they age remain connected to the community (e.g., via the senior center) in order to prevent social isolation and other types of crises.
 - Consider targeting through mailings to homeowners of particular age groups educational materials about available opportunities and resources.
- Review current zoning regulations to identify opportunities to create more alternative housing options in Swampscott. For example, allowing congregate living of multiple older adults in existing large single-family homes.
- Increase community connections to senior housing developments in Swampscott.

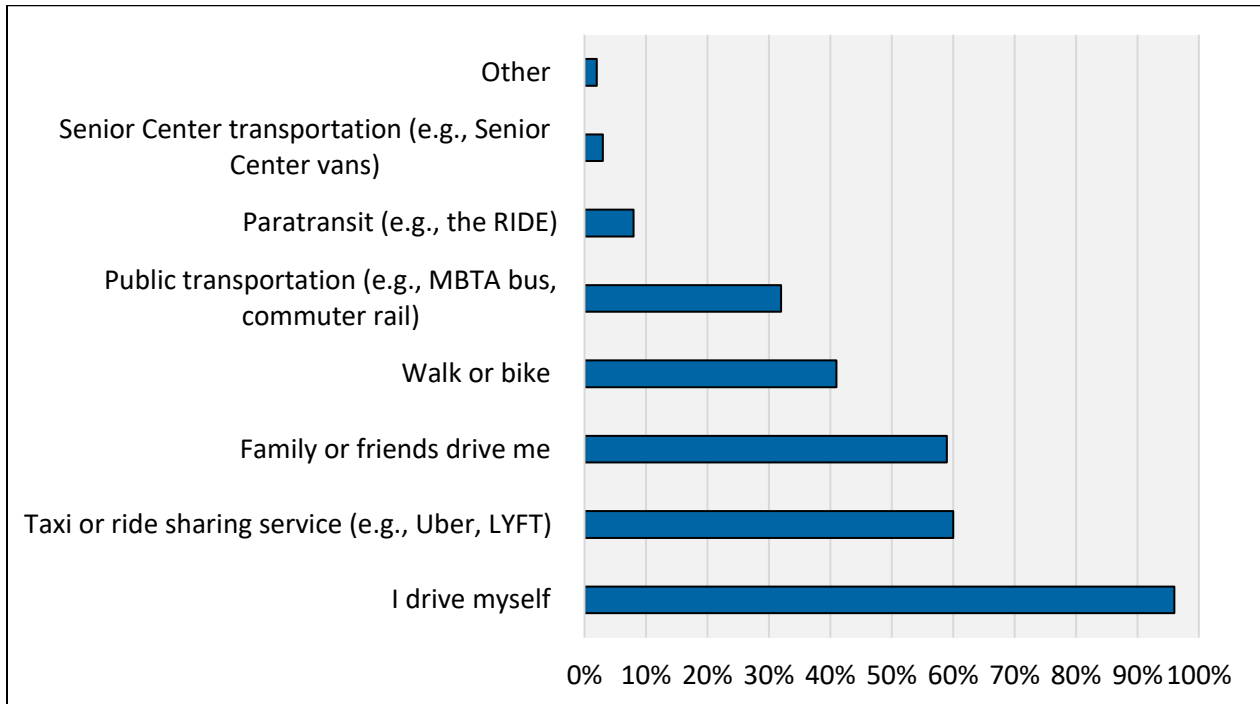
Transportation

Although Swampscott is characteristically suburban, it is a small town, and necessary destinations such as grocery stores and medical providers are subsequently typically located beyond Town boundaries in surrounding communities, including



the cities of Lynn and Boston. As a result of its proximity to Boston, some public transit does exist in Swampscott including the MBTA commuter rail and bus service (including to nearby Wonderland Station on the Blue Line). Despite these options, many Swampscott residents, including 96% of survey respondents, drive themselves as a primary way of getting around. Other modes of transportation are shown in **Figure 14**. Overall, most (64%) survey respondents were satisfied with the transportation options in Swampscott (see **Appendix A**).

Figure 14. “I use the following methods of transportation to meet my transportation needs (Check all that apply).”

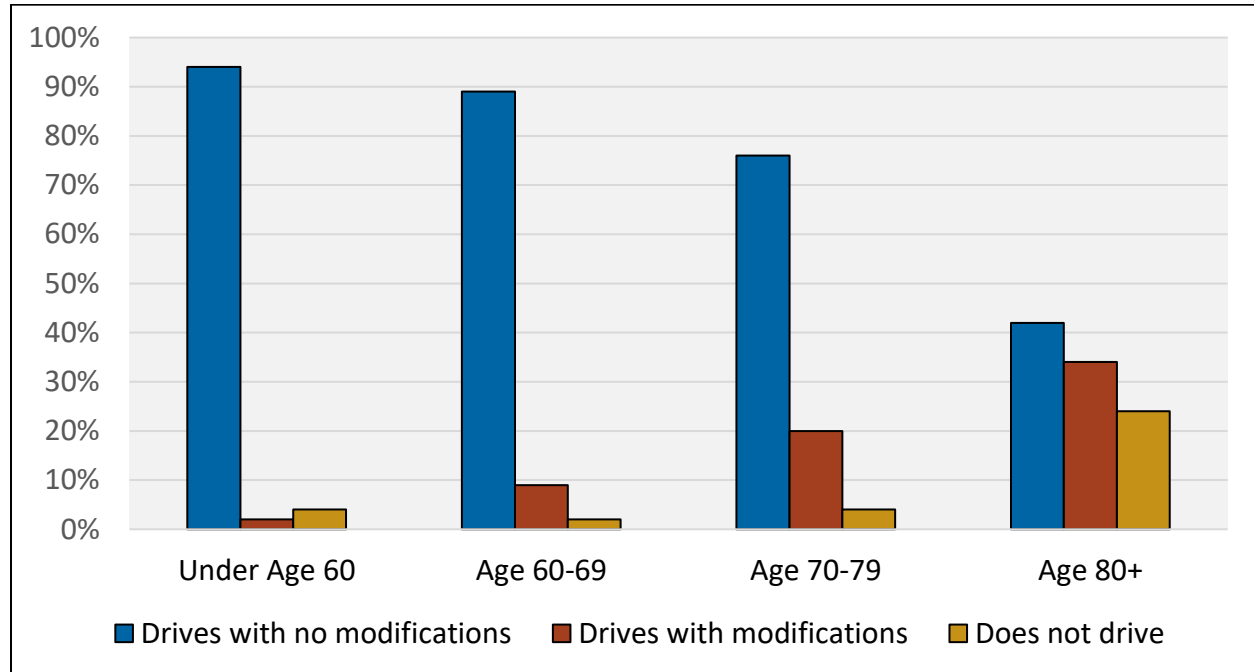


Respondents were asked if they had a condition that limits their ability to participate in the community as they wish. Among those survey respondents reporting a condition that limits their community participation, 43% report using the paratransit services in Swampscott, 35% report using the senior center transportation options, and 86% report that family or friends drive them where they need to go. These results, compared to the survey sample as a whole, indicate that supportive transportation options in Swampscott provide key mechanisms for community participation among those with physical limitations.

In addition, transportation options matter most when residents no longer drive themselves. **Figure 15** shows that small portions of respondents under age 80 do not drive, but 24% of respondents age 80 and older are no longer driving themselves. Further, 20% of respondents age 70-79 and 34% of those age 80 and older drive with some modifications (e.g., don't drive at night,

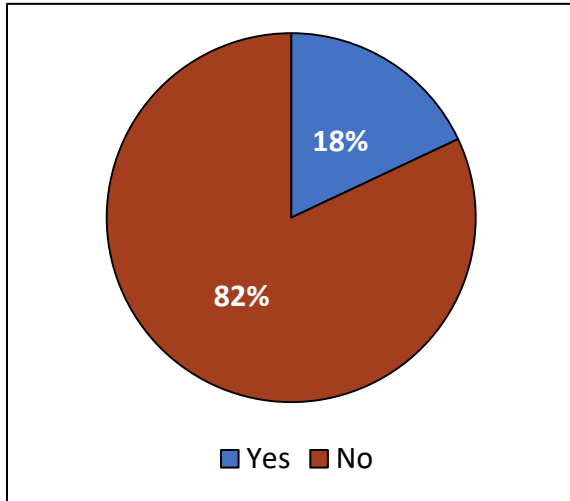
avoid driving in bad weather, only drive in familiar areas) suggesting that sizeable share would benefit from convenient and reliable transportation options.

Figure 15. “Which of the following best describes your current driving status”, by age



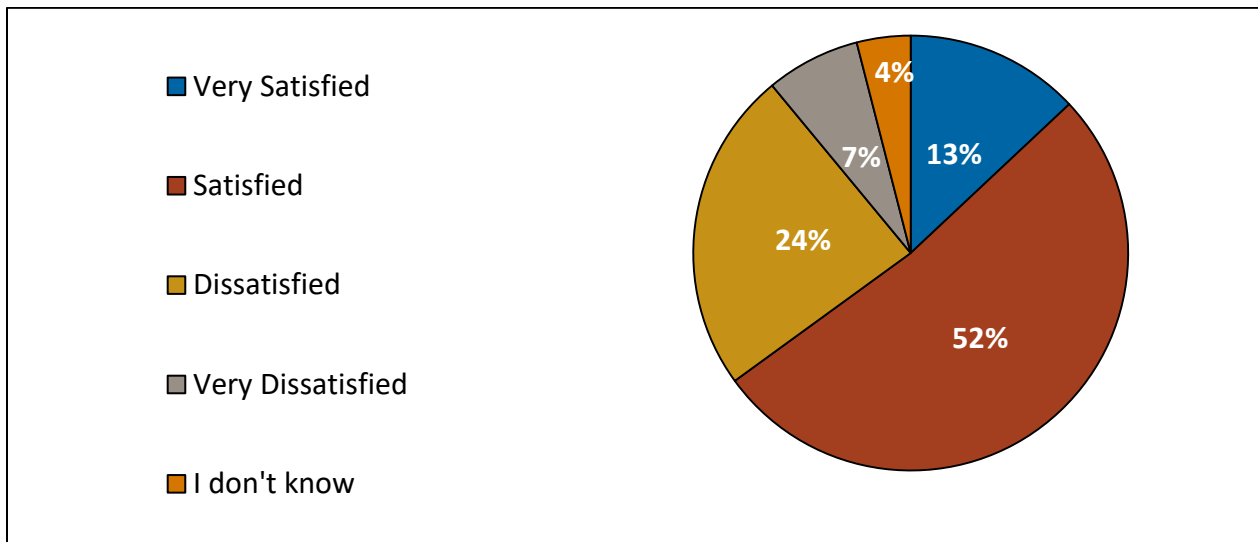
Transportation barriers can limit an individual’s access to obtaining necessary services such as medical care. Respondents were asked if within the previous 12 months they had missed, cancelled or rescheduled a medical appointment because of a lack of transportation. Among all respondents, only 4% reported this experience but among respondents age 80 and older, 7% have experienced this barrier to medical care (see **Appendix A**). However, among those respondents reporting a condition that limits their community participation, 18% have had his experience with disruption to obtaining medical care (see **Figure 16**).

Figure 16. “Within the past 12 months, did you have to miss, cancel, or reschedule a medical appointment because of a lack of transportation?”, by physical limitation status



The survey conducted for this study asked about issues relating to local travel, including satisfaction with parking. Although a majority of respondents (65%) indicated that they were satisfied or very satisfied with parking availability, 31% are dissatisfied—indicating that parking is a challenge for nearly one-third of respondents (see **Figure 17**). Narrow streets with on-street parking present navigational challenges both for older drivers but also pedestrians.

Figure 17. Satisfaction with parking in Swampscott



Transportation options for older residents and residents with disability

A priority of the Swampscott for All Ages initiative is supporting access to nearby services and supports, especially for those who are unable to drive or need transportation supports. Inadequate transportation can lead to isolation, decreased autonomy, and depression. Several transportation options exist in Swampscott for older adults. The Swampscott Senior Center provides rides to and from the Senior Center for the lunch program for Swampscott residents. Transportation for grocery shopping and transportation to medical appointments is available multiple times per week. In addition the MBTA paratransit service, the RIDE, is available to eligible Swampscott residents.

Focus group participants and interviewees described limitations of local transportation for those residents that are living with physical or cognitive limitations. To identify people who may

As I get older, I would like to take the train into Boston more often but cannot find parking at [the] station.

Town offers many activities but difficult to access if you don't drive.

benefit from some level of accommodation based on health or disability, the following survey question was asked, “How much are your daily activities limited by your health or health-related problems?”. Ten percent of respondents reported experiencing limitations often or all of the time.

This has implications for accessing transportation (e.g., walking to a bus stop or navigating public transportation).

Walking in Swampscott

The challenge of “getting around” was mentioned in forums, during interviews, and at all focus groups. Key concerns among participants focused on the barriers to walkability in Swampscott and the traffic. As a densely populated community nestled in between the City of Lynn, with access to Boston and Salem and among other seaside communities like Marblehead and Nahant, Swampscott is close to a lot but not accessible to much.

The lack of walkability is discouraging. Even if things are walking-distance I often have to drive. The sidewalks are crumbling, non-existent or being torn up by roots. I end up pushing a stroller in the street all the time and it's very unsafe.

Figure 18 shows that 45% of survey respondents are dissatisfied with the availability of maintained sidewalks. Things like uneven surfaces, large cracks or tree roots can create hazards for pedestrians. Similarly, 30% of survey respondents are dissatisfied with lighting on sidewalks and 19% are dissatisfied with timing of traffic lights and marked crosswalks (see **Figures 19 and 20**). Fear of falling can prohibit older people from walking—which has negative consequences both for their health and their ability to access local amenities without driving.

Figure 18. Satisfaction with availability of maintained sidewalks

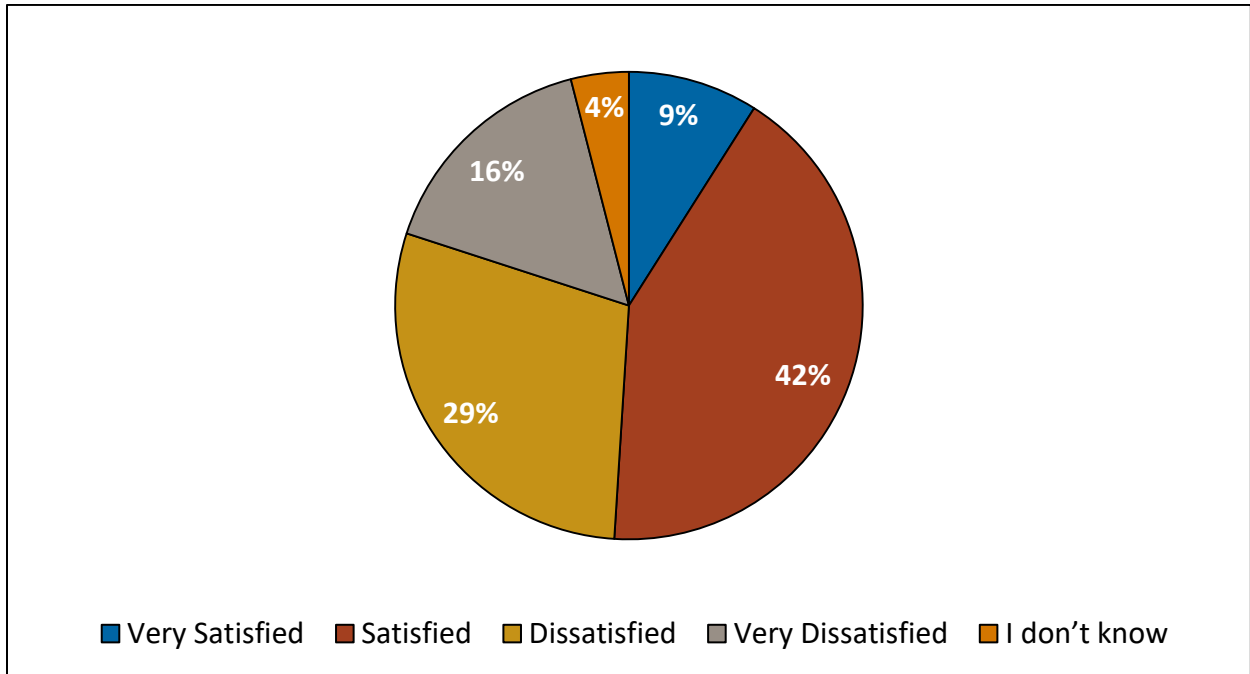


Figure 19. Satisfaction with lighting along sidewalks and cycle paths

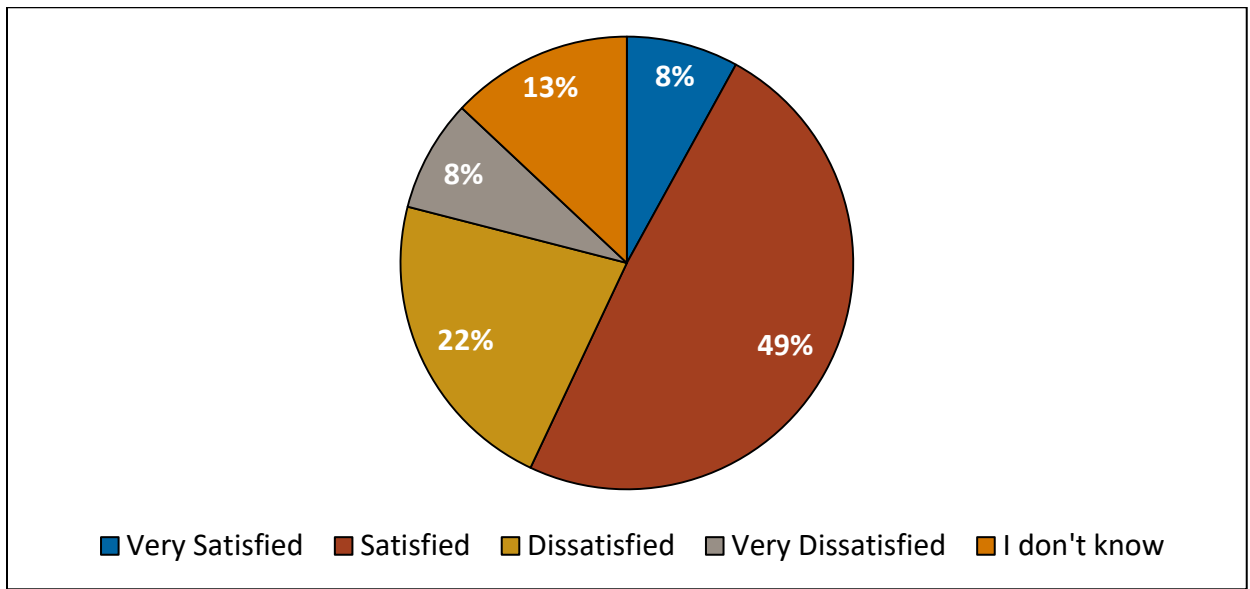
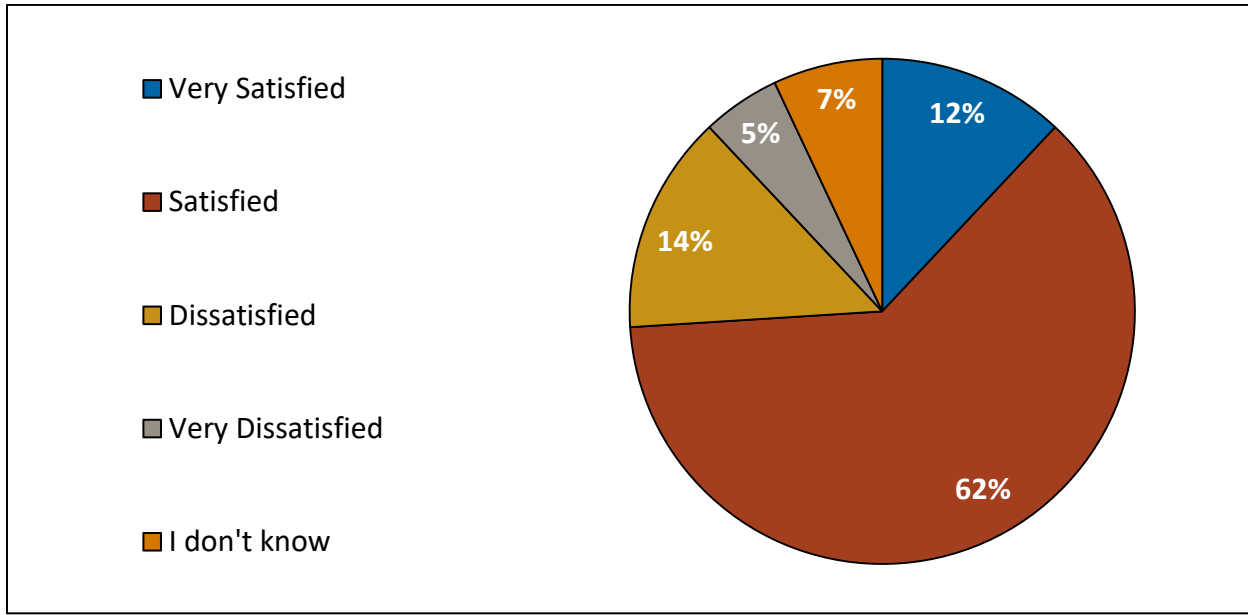


Figure 20. Satisfaction with timing of traffic lights and marked crosswalks



Ideas for Action in Swampscott: Transportation & Walkability

- Expand options for medical transportation.
 - Consider the use of volunteer drivers through developing a FISH program or TRIP program¹³ and include the transport of caregivers or visitors in these programs.
- Conduct a feasibility study or procure funds for pilot-testing a local shuttle in Swampscott.
 - Consider partnerships with Marblehead, Nahant in this effort.
- Consider ways to make commuter rail access less expensive for older adults.
- Review bus stops in Swampscott to ensure they have benches, shelters, and flat pathways for access.
- Make ride share services more Age Friendly, considering ease of use, trust issues, and accessibility of vehicles.
 - Consider profiling local Uber/Lyft drivers so that residents are more familiar with local drivers.
 - Host workshops on ride-sharing “apps” at the public library.

Several times I have needed an escort to take me home after dental work or an outpatient operation. I've had to pay a healthcare professional from an agency. I'd volunteer to do this for other people if I weren't concerned about insurance.

¹³<https://www.mass.gov/files/documents/2017/10/10/Profiles%20of%20successful%20volunteer%20driver%20programs.pdf>

- Explore Go-Go Grandparent, a ride-sharing service for older adults¹⁴.
- To inform Swampscott’s “Complete Streets” initiative¹⁵, convene a walking group that identifies barriers to access outdoor spaces.
 - Look for dangerous intersections, connectivity challenges, tree interference, sidewalk disrepair, etc.
- Work with neighboring communities to develop multi-town transportation solutions. See other regional transportation authorities for examples¹⁶. Include transportation stops at senior centers of participating communities.

Outdoor Spaces and Buildings

Swampscott prides itself on its beauty, beaches, and greenspaces. In fact, when asked about what they value most about living in Swampscott, comments about the outdoor spaces (specifically, the proximity to the ocean) were the most frequently mentioned (see **Table 4**).



¹⁴ https://gogograndparent.com/gogostart?gclid=Cj0KCCQjwrrXtBRCKARIsAMbU6bF-TxHXG18UZ4uG6sR4Yy35dcQAVIruQLT2cAxc3XJ85mFIWSt92McaApF-EALw_wcB

¹⁵ http://www.swampscottma.gov/sites/swampscottma/files/uploads/swampscott_complete_streets_policy_development.pdf

¹⁶ <http://www.gatra.org/index.php/tri-town-connector/>

Table 4. Survey respondents identified the natural beauty of Swampscott and proximity to other cities and towns as valued signature features.

| |
|--|
| <i>Wonderful seaside community. Small, friendly. Close to Boston.</i> |
| <i>Beautiful Phillips Beach, well-kept downtown area, proximity to Boston, lovely neighborhoods.</i> |
| <i>The proximity to the ocean and to other historic North Shore towns</i> |
| <i>The small-town feel, although only being 12 miles north of a major city.</i> |

A seven year (2013-2020) plan for improvements to outdoor spaces and recreation was completed in 2013. Within this report, there were several objectives that would directly improve outdoor spaces in Swampscott for older residents. For example, some of these objectives include examining ways to include recreation needs for residents age 60 and older, incorporating age-appropriate elements to open spaces and recreation areas, and, in order to promote public access and awareness, generating signage and wayfinding as well as overall handicap accessibility of Windsor Park and adding rest areas in Jackson Park. For a community that is only 3 square miles, Swampscott has clearly made it a priority to maximize access to its local beauty. In addition, an ambitious plan for updates to the waterfront was published in 2018. This plan includes a seasonal local trolley that would connect residents with the beaches and the commuter rail station as well as public bathrooms near the beaches. Discussion under this domain includes a description of public buildings, open spaces, and accessibility challenges encountered by Swampscott’s older residents.

One factor that can shape access to community amenities is handicap accessibility. Ramps, curb cuts and other features meant to promote access among those who use wheelchairs or walkers benefit anyone with mobility limitations, as well as people with children in strollers. **Figure 21** indicates that most survey respondents (64%) are satisfied with the handicap accessibility of businesses, buildings and sidewalks in Swampscott—and 12% report dissatisfaction. In contrast, 32% of survey respondents are dissatisfied with the availability of shaded seating in public spaces (see **Figure 22**). Benches placed in strategically located areas can support walkability and promote access to public spaces, including shopping districts, public parks, and other community amenities. Shaded areas are key design features for creating age friendly outdoor spaces, reducing risk of overheating and promoting public access. Many public buildings in Swampscott are quite old, and some may require expansion or updating to promote livability. According to participants of this study, the local Post Office in Swampscott is not currently accessible.

Figure 21. Satisfaction with handicap accessibility of sidewalks, public buildings, and businesses

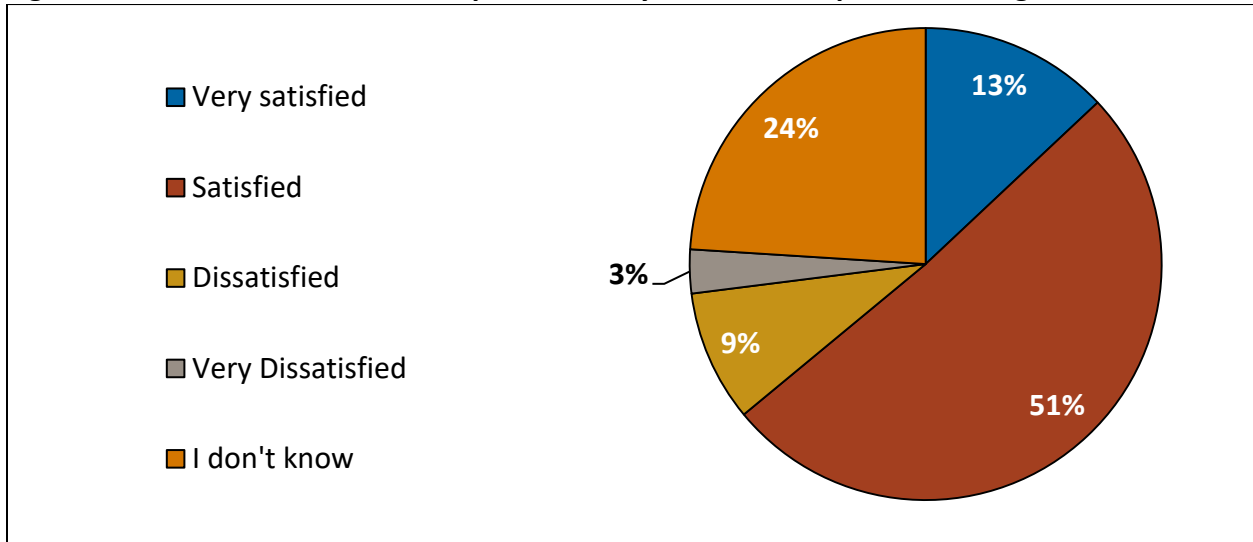
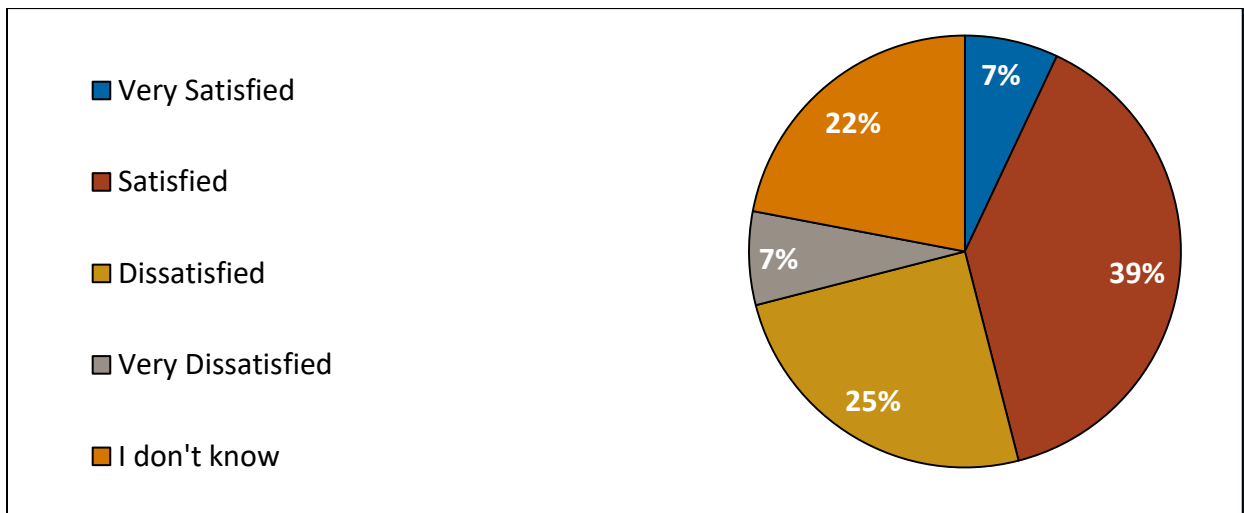


Figure 22. Satisfaction with availability of shaded benches in public areas and along walkways



Seventy percent of survey respondents reported being satisfied with clear and consistent signage and wayfinding in Swampscott (see **Figure 23**). Ensuring that this signage is readable for persons with vision impairment or cognitive decline is a potential path for future improvement. More than half of survey respondents (56%) were dissatisfied with the availability of public restrooms in Swampscott (see **Figure 24**). This type of community feature was referred to as being, “beneficial to residents of all ages”.

Figure 23. Satisfaction with clear and consistent signage and wayfinding around Swampscott

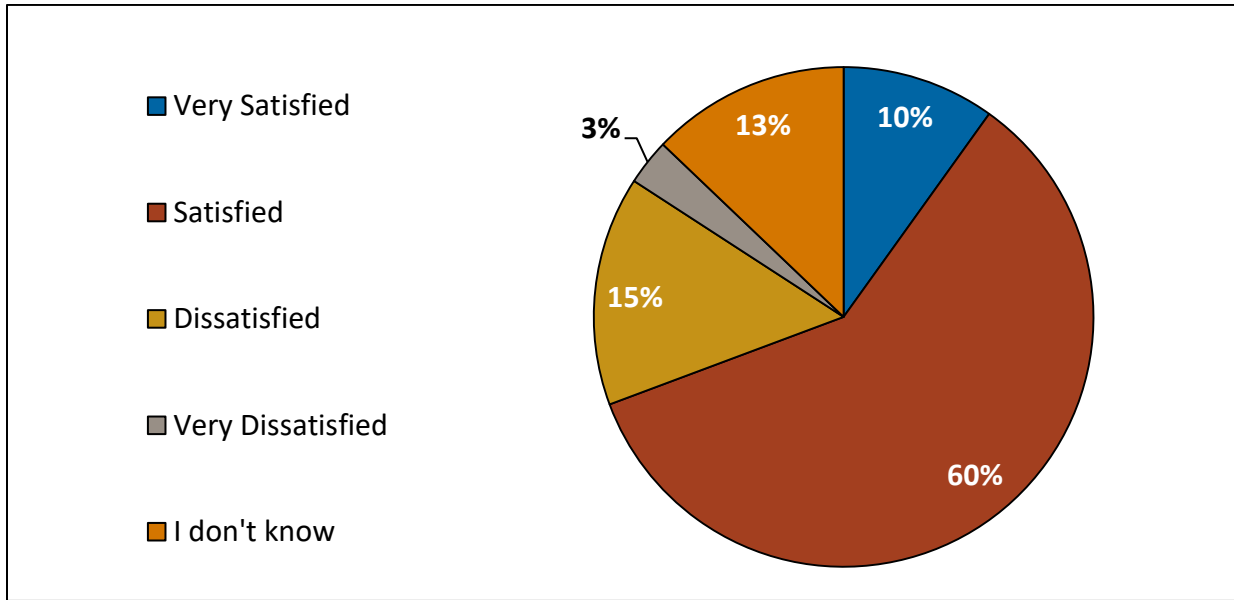
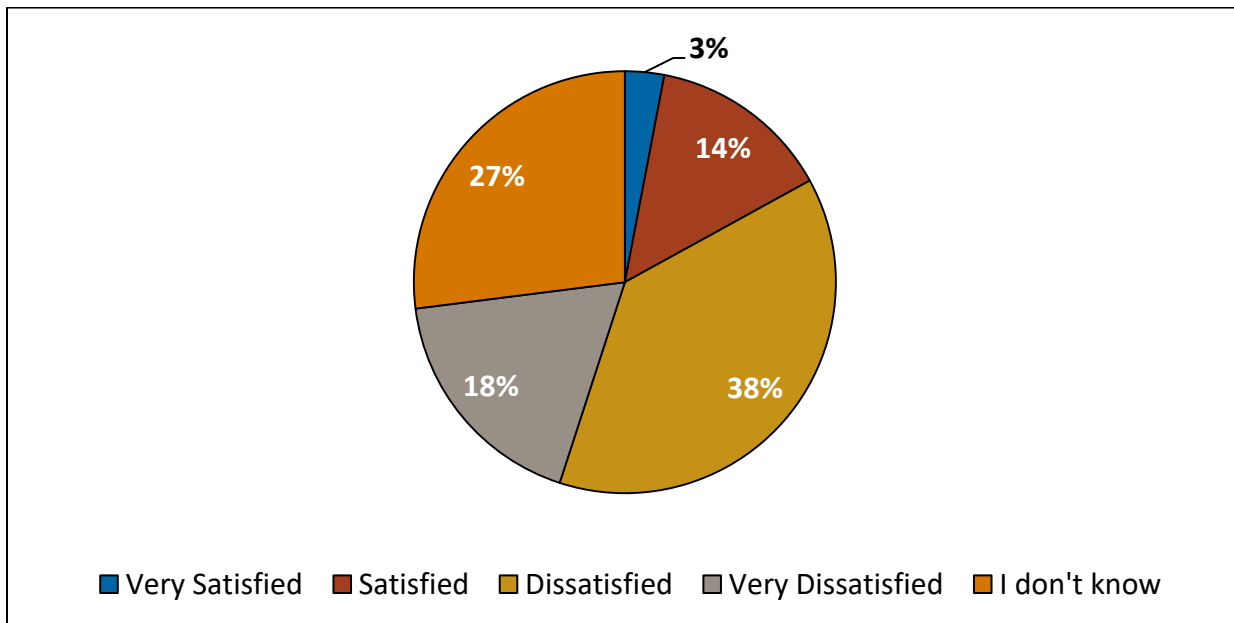
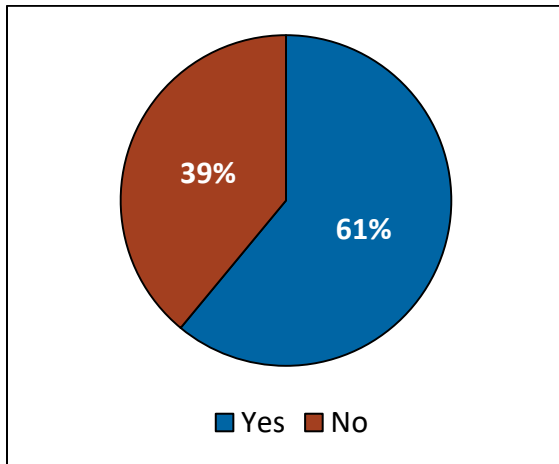


Figure 24. Satisfaction with availability of public restrooms



Many town amenities are highly valued, including the Library, the Senior Center, and the farmers market. However, a sizeable portion (39%) of the survey respondents reported that there are not enough places to go in Swampscott for socialization or leisure activity (see **Figure 25**). This was even more true among the under age 60 population—51% feel this way.

Figure 25. “Are there sufficient places to go in Swampscott to socialize for leisure activity?”



We could use [a place] for our residents in our downtown Humphrey Street center that would foster community & mix the age groups ... we should not be segregated by age- we need to engage with each other face to face, in a civil manner - less tribalism - more community!

Forum, focus group and interview participants identified snow removal as a major need of the older adults in Swampscott. Recent local policy changes now require that snow be removed from residential sidewalks. For persons who cannot physically accomplish this or are living on a fixed income, paying someone to shovel can become burdensome. These participants reiterated the importance of safe intersections and walkability elements (e.g., curb cuts) for making Swampscott a more livable community. In addition, they identified ways that the few local businesses could participate. For example, restaurants could assess whether the lighting in their establishments is bright enough to facilitate reading the menu or walking safely or if the music is soft enough to allow customers to hear their conversations. Restaurant management could consider offering senior discounts to encourage demonstrate their support of older residents.

It would be great to have a community center of some sort, such as a recreation and meeting Hall.

Elaborating on the benefit of being in close proximity to cities like Lynn, Boston and Salem but also towns like Marblehead and Nahant—forum participants talked about the need for better connections to these towns. For example, providing transportation to the local senior centers, Marblehead Theatre or the Lynn Auditorium for concerts and events could connect Swampscott residents with more places for recreation. There was also consensus among focus group participants, interviewees, and forum participants that although the current senior center in Swampscott offers much to older residents of the community—its capacity to meet any additional need is very limited. Despite being connected to the high school; the Swampscott Senior Center does not have regular access to exercise space. These participants highlighted the need for a community center. They described the creation of a community gathering space as a

way to complement Senior Center offerings and engage the younger segments of the population in social, educational, physical and wellness programs.

Ideas for Action in Swampscott: Outdoor Spaces & Buildings

- Consider increasing accessibility within the Town to make it easier for older adults with or without a disability to take advantage of Swampscott amenities. For example, provide signage around Town in large print for those with decreased vision. Encourage Swampscott restaurants to participate in the Purple Table reservation program, a program that makes eating out more enjoyable for those with dementia or other conditions.
- In support of recent plans for the downtown¹⁷ and waterfront areas¹⁸—advocate for the completion of sidewalk and intersection improvements, added handicap parking, shaded seating, and public restrooms that will improve walkability.
- Create a mechanism for residents to be informed about sidewalk repair plans and progress. For example, make the public works permits publicly accessible or generate a map of sidewalk repairs and update as progress is made¹⁹.
- Using the “Snow Angels” program as a model, consider other seasonal tasks where older residents might need help. (e.g., leaf removal or lawn mowing).
- Consider the development of a community center that would offer more space for physical activity and community gathering space.
- Review the relationship between the COA and the Swampscott High School to ensure that older adults have some access to the indoor walking track and other amenities.
- Replicate the Town garden in other locations and consider age friendly design such as waist high beds for accessibility.

¹⁷ http://www.mapc.org/wp-content/uploads/2017/10/Final_Swampscottreport_1_17_13.pdf

¹⁸ <http://www.swampscottma.gov/town-administrator/pages/harbor-waterfront-plan-2018>

¹⁹ <https://www.cityofsanrafael.org/2-20-19-sidewalk-repair-program-see-live-updates-on-our-map/>

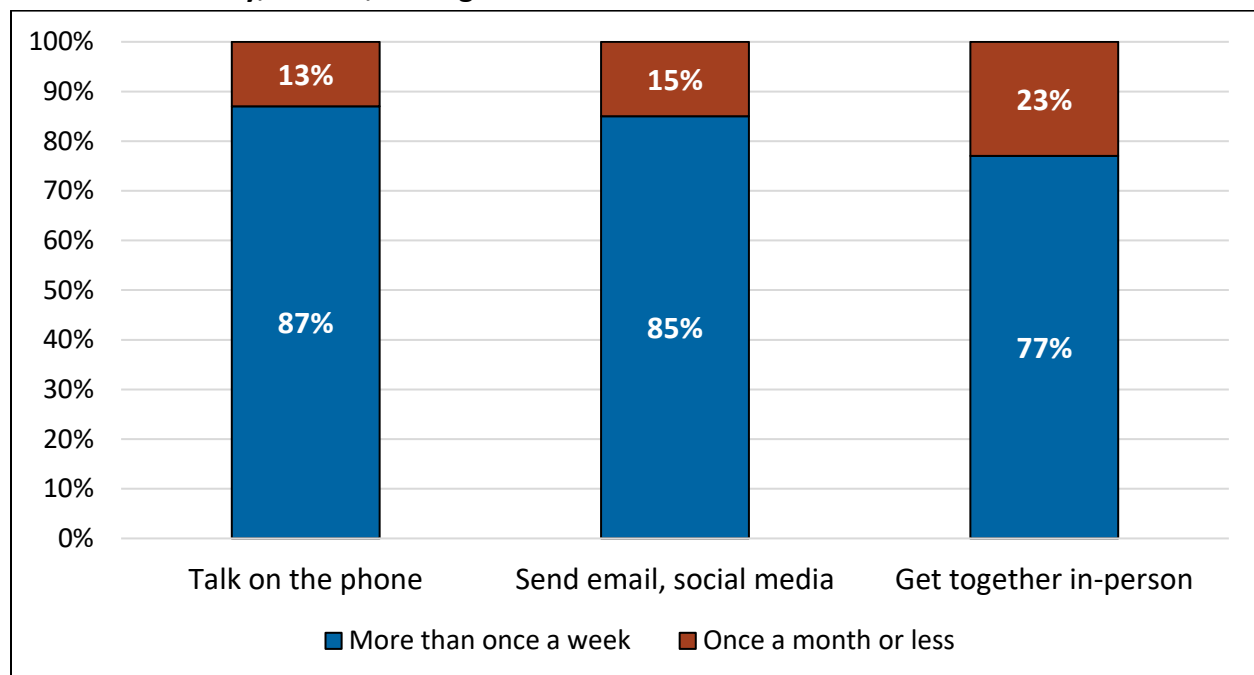
Social Participation

Ensuring that ample and accessible participation activities are available is an important part of building an age-friendly community. Social participation includes virtual, telephone, and in person connections, with family, friends, and community members, and can also occur through activities and events at town and private facilities such as learning opportunities, fitness programs, and social activities.



Most Swampscott residents talk on the phone, send email, and get together in-person with family, friends, or neighbors more than once/week (see **Figure 26**). However, among respondents age 80 and older only 65% report using social media or email to contact their friends, family, or neighbors more than once a week (see **Appendix A**). This finding suggests that not all residents of Swampscott use web-based communications.

Figure 26. "How often do you talk on the phone, send email, use social media, or get together to visit with family, friends, or neighbors?"

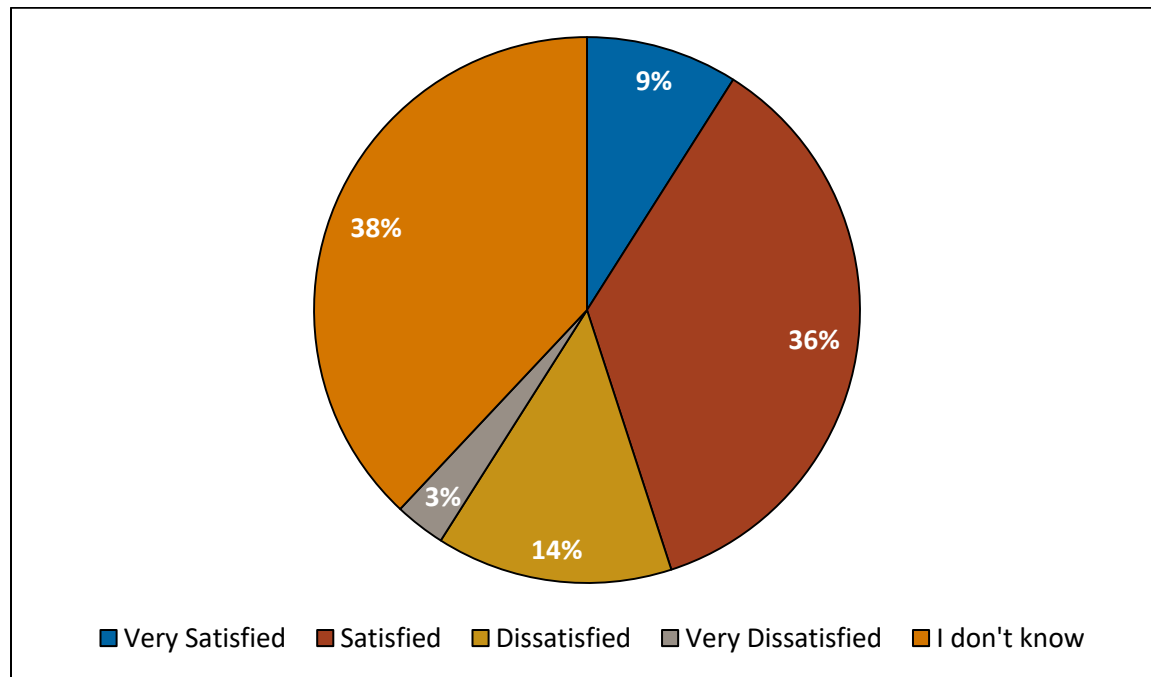


Most survey respondents (92%) know someone living within 30 minutes of their home on whom they could rely for help if they need it (see Appendix A). And many have talked with their neighbors in the past month (see **Table 5**). That said, between 18%-20% of survey respondents have no talked with their neighbors in the past month suggesting that there is a segment of Swampscott residents who are relatively disconnected from their neighborhood.

| Table 5. In the past month, have you talked with any of your neighbors for 10 minutes or more? | | | | |
|--|--------------|-----------|-----------|---------|
| | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
| Yes | 82% | 82% | 84% | 80% |
| No | 18% | 18% | 16% | 20% |

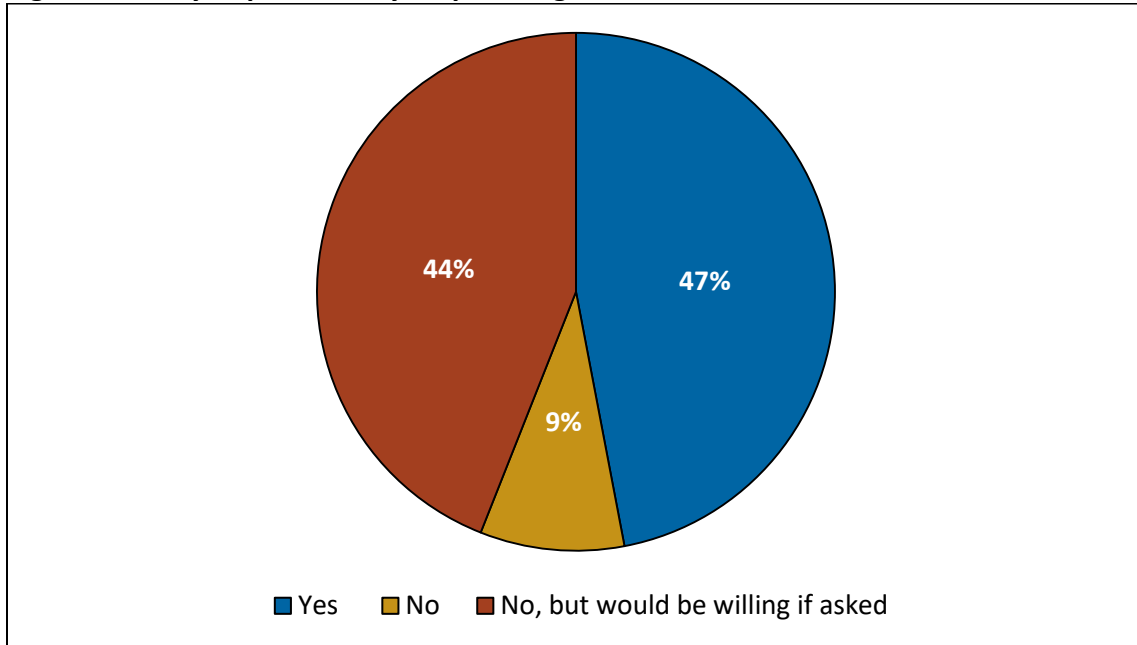
Figure 27 shows that 17% of respondents are not satisfied with opportunities to gather informally with neighbors. Further, 38% of respondents said “I don’t know” when asked about opportunities for gathering with neighbors. These findings underpin the idea that strengthening neighbor-to-neighbor ties could be an important effort of the Swampscott for all Ages Initiative.

Figure 27. Satisfaction with opportunities in your neighborhood for informal sharing and social interaction



Survey participants were asked if they would ask a neighbor for help if they needed help with a minor task or errand and more than two-thirds (69%) of the respondents of all ages said they would (see **Appendix A**). In response to the survey question, “Do you provide any help to neighbors with minor tasks or errands?” 44% reported no, but they would be willing if asked (see **Figure 28**). These findings illustrate a possible opportunity to strengthen neighbor-to-neighbor relations in Swampscott as a way of supporting older residents wishing to age in place.

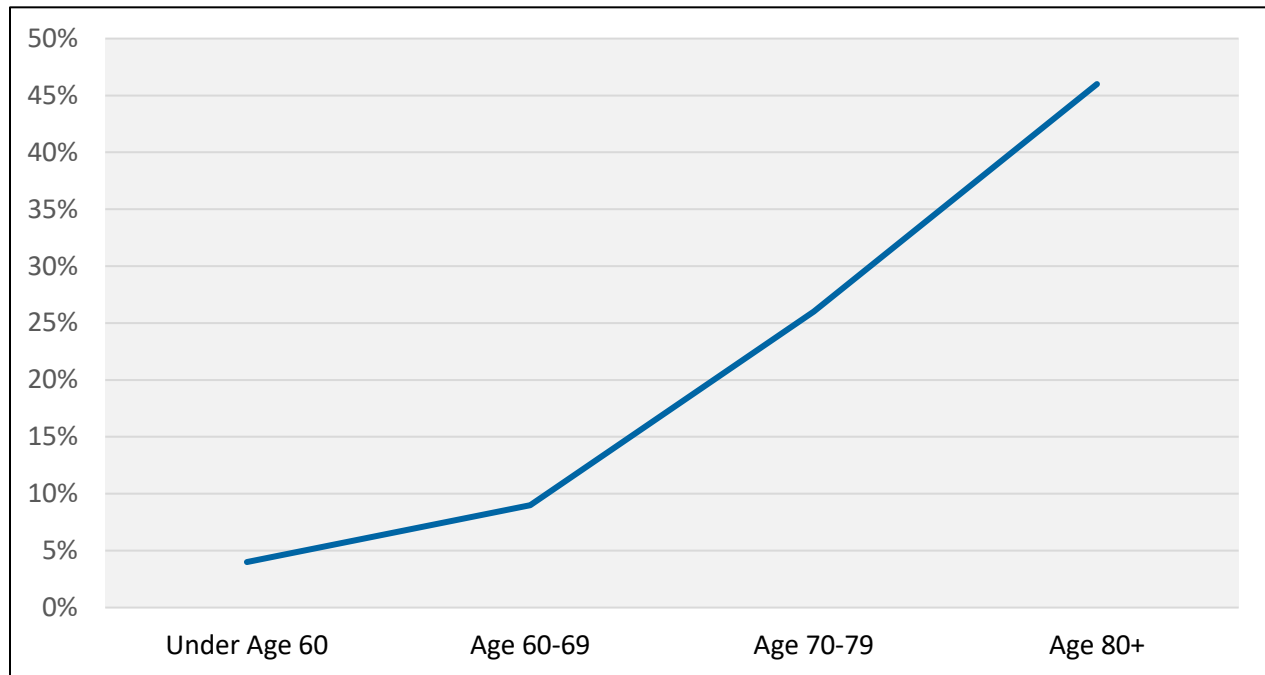
Figure 28. Do you provide any help to neighbors with minor tasks or errands?



Swampscott Senior Center

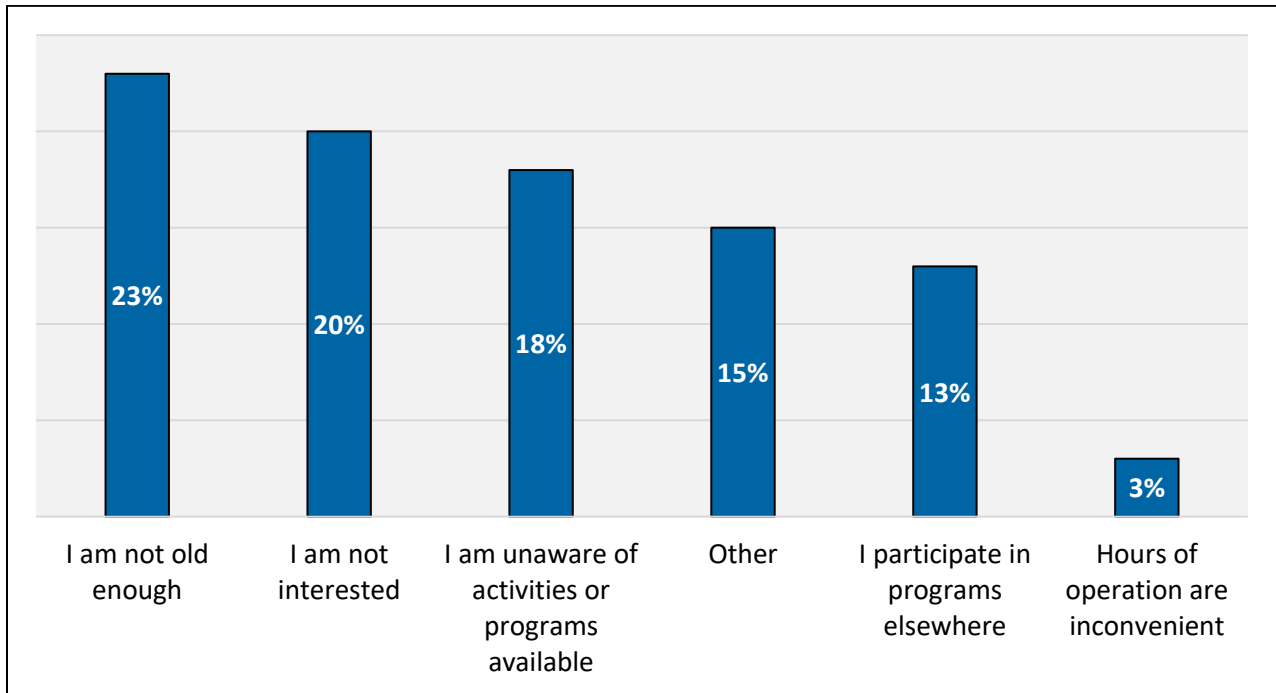
Senior centers play a role in the social participation of older adults. Survey results suggest that participation in the Swampscott Senior Center is considerably more common among older residents. As shown in **Figure 29**, just 4% of respondents under age 60 and 9% of respondents under age 70 have ever used programs or services offered by the Swampscott Senior Center.

Figure 29. Percentage of respondents who have ever been to the Senior Center, by age group



Overall, 18% of survey respondents reported ever having been to the Swampscott Senior Center. Of those who do not use the Senior Center, at least one out of five survey respondents reported the reason they have not attended is because they are “not old enough” or are “not interested” (see **Figure 30**). Sixteen percent of respondents provided reasons for non-participation other than those listed as options. Many commented that they “don’t need” the Senior Center—suggesting that the community perception that the Senior Center is a need-based municipal service—which is not the case in Swampscott. The Swampscott Senior Center can play a part in helping older adults age in place and in community. Residents may obtain transportation, health screening, or social services through their local COA. Older adults may seek opportunities for engagement and socialization through volunteer programs, learning opportunities and exercise programs, as well as social activities. These involvements can help community members maintain social support, remain active, prolong independence and improve quality of life. Some research suggests that participating in a Senior Center may reduce one’s sense of isolation, a highly significant outcome given the negative consequences of being disconnected socially.

Figure 30. Reasons for not currently using programs or services at the Swampscott Senior Center



Survey respondents were asked to name the types of programs and services that they would like to see made available in Swampscott. Responses were categorized by theme; and examples of those themes are presented in **Table 6**. Nearly all suggestions for additional programming and

A bigger senior center space could do a lot for the community.

increased outreach would require growth of capacity in both staff and space of the Swampscott Senior Center. In fact, residents wrote in about the need for a larger community/senior center space that would better accommodate the growing population of older adults and create opportunities for multiple generations to gather.

| Table 6. “What programs and services not currently offered through the Swampscott Senior Center would you like to see made available?” | |
|--|--|
| Additional Exercise & Wellness Classes | <i>Tai Chi, Yoga, seniors bicycle, Pilates</i> |
| | <i>Mindfulness meditation or massage</i> |
| Trips | <i>Inexpensive day trips, maybe some overnight trips...</i> |
| | <i>Trips to New England historic sites</i> |
| More diverse recreational and educational activities | <i>Spiritual memoir writing, theatre, mentoring with children/teens</i> |
| | <i>It would be great to have programs for men in their 60s—music tutoring? Woodworking? Watching local sports?</i> |
| | <i>Singles activities for my single sister!</i> |
| | <i>Music, book clubs, lectures or lifelong learning courses, oral histories</i> |
| Resources for Supporting Aging in Place | <i>Workshop for "senior-izing" our home; memory care for dementia folks</i> |
| | <i>Pet sitting and dog walking for seniors</i> |

Ideas for Action in Swampscott: Social Participation

- Initiate a Facebook page for older adults to share knowledge and resources as well as make requests and find peers with similar interests in attending events.
- Explore the possibility of increasing the number of active adult events such as bowling, wine tasting, or an indoor walking group.
- Consider strengthening intergenerational activities through the creation of a senior-student liaison who can make connections and share information about opportunities for intergenerational activity throughout the community (e.g., inviting older adults to attend Big Blue Band concerts etc.).
- Develop a “companion” program that connects residents who have a shared interests (e.g., museum visit, day trip, or walking). This type of connection can provide socialization, transportation, and recreation.
- Identify neighborhood-based programs or mechanisms to strengthen informal networks in neighborhoods and ensure that existing neighborhood-based activities are inclusive of older residents.

- Consider ways to welcome first-time participants to the Senior Center who are reluctant to participate on their own (e.g., a welcoming committee or a “buddy” program that encourages current users to bring a friend).
- Educate community organizations and faith communities about who to contact if they identify someone who may be at risk of social isolation.
- Develop an Age Friendly regional coalition to strategize about ways that area senior centers can work together to ensure that all older residents have access to the rich array of programs without duplication of effort. Explore the development of a “specialty senior center model”. For example, the Marblehead Senior Center could promote its exercise programs to residents of area communities, the Nahant Senior Center could do the same with its arts and cultural programs and the Swampscott Senior Center could also contribute through the promotion of its recreational programs and health clinics. Transportation and other resources could be shared.
- Consider how the various clubs in town (e.g., yacht, golf, rotary, garden) are connected to the COA and identify opportunities for co-hosting events or collaborating to reach a larger swatch of older residents.

Civic Participation and Employment

There are a number of volunteer opportunities in Swampscott including at the Senior Center, the library, and Bertram House. Swampscott residents are also involved in Town governance, including membership on numerous Boards and Councils. In this section, information on employment in Swampscott is offered, along with local volunteer and other civic engagements.



Employment

Similar to older adults living in communities throughout the U.S., a large proportion of Swampscott residents aged 65 and over remain in the workforce. Approximately out of ten Swampscott residents age 65 to 74 are participating in the labor force on at least a part-time basis, along with nearly 5% of residents age 75 and older (ACS, 2013-2017, Table S2301). In the community survey distributed for the Swampscott Age Friendly initiative, we asked respondents

their employment status and found a similar pattern of results (see **Figure 31**). About six percent of survey respondents marked other and wrote in that they were a homemaker, volunteer, self-employed, or disabled.

Figure 31. Employment status of survey respondents

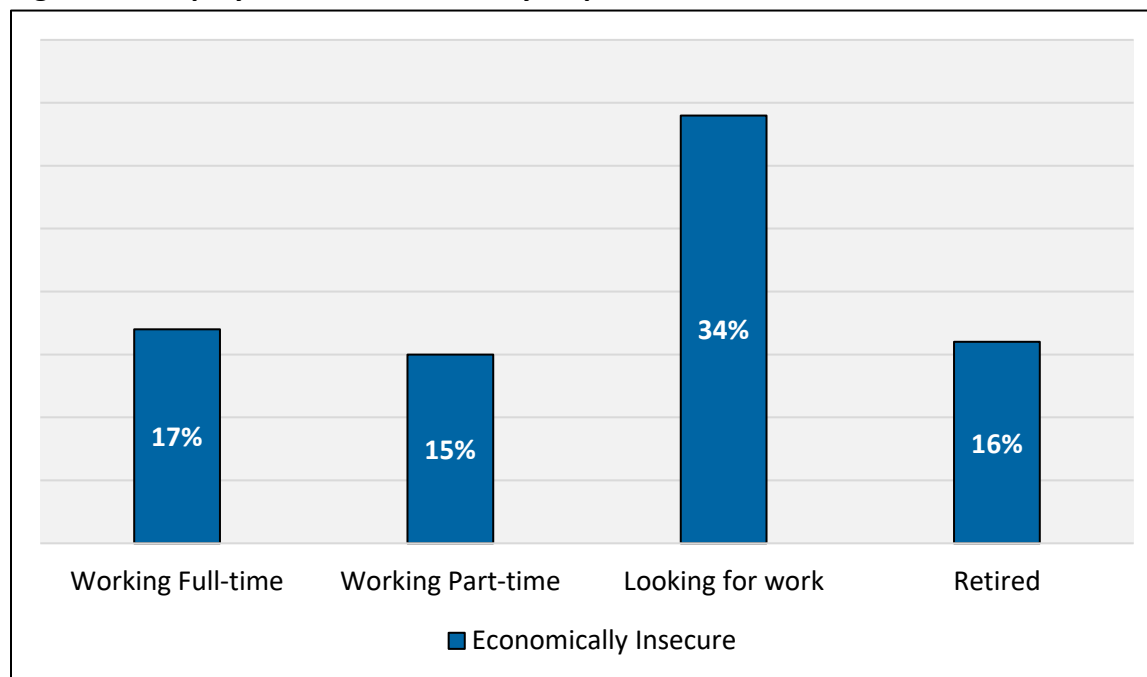


Figure 32 shows the share of respondents who are struggling financially based on their employment status. Notably, 34% of respondents who are looking for work and 33% reporting “other” types of employment status (e.g., self-employed, disabled) are financially insecure. Similarly, some of the survey respondents who are currently working or are retired are also struggling financially. Exploring opportunities to support these individuals through programs that provide discounts and work-off opportunities may be helpful.

Figure 32. Percentage of people who report economic insecurity, by employment status

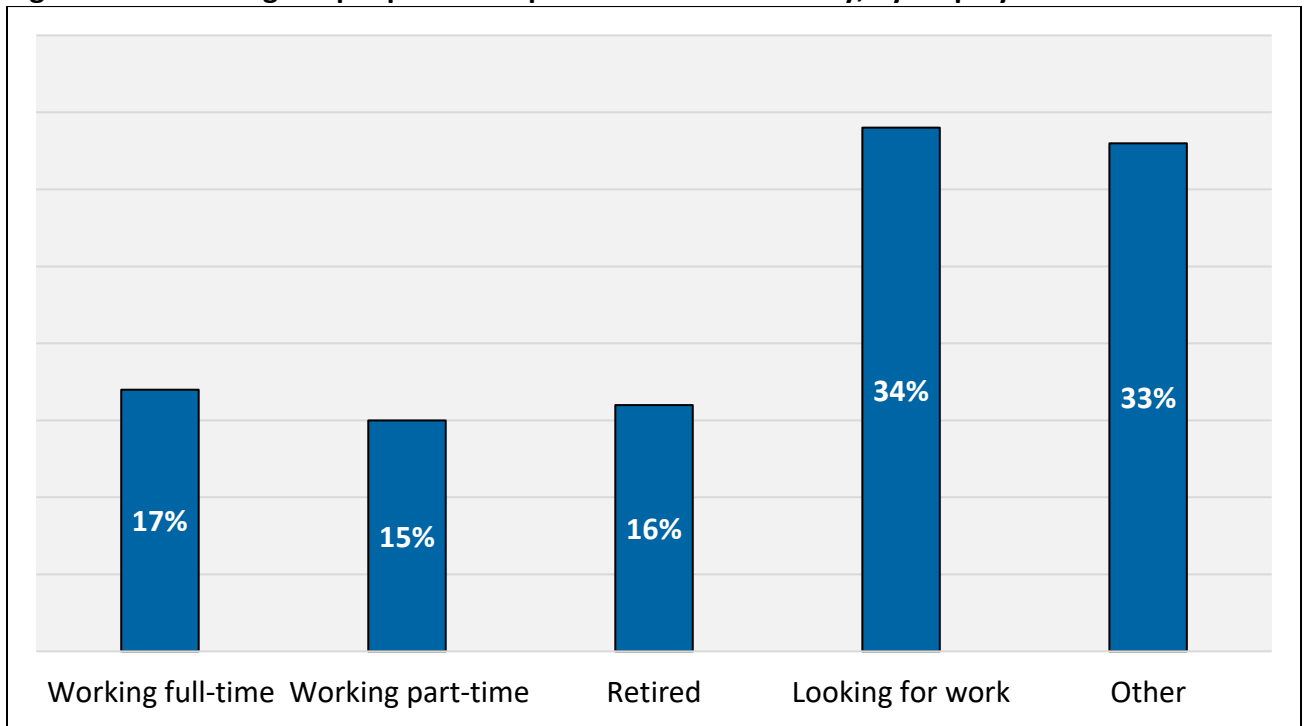
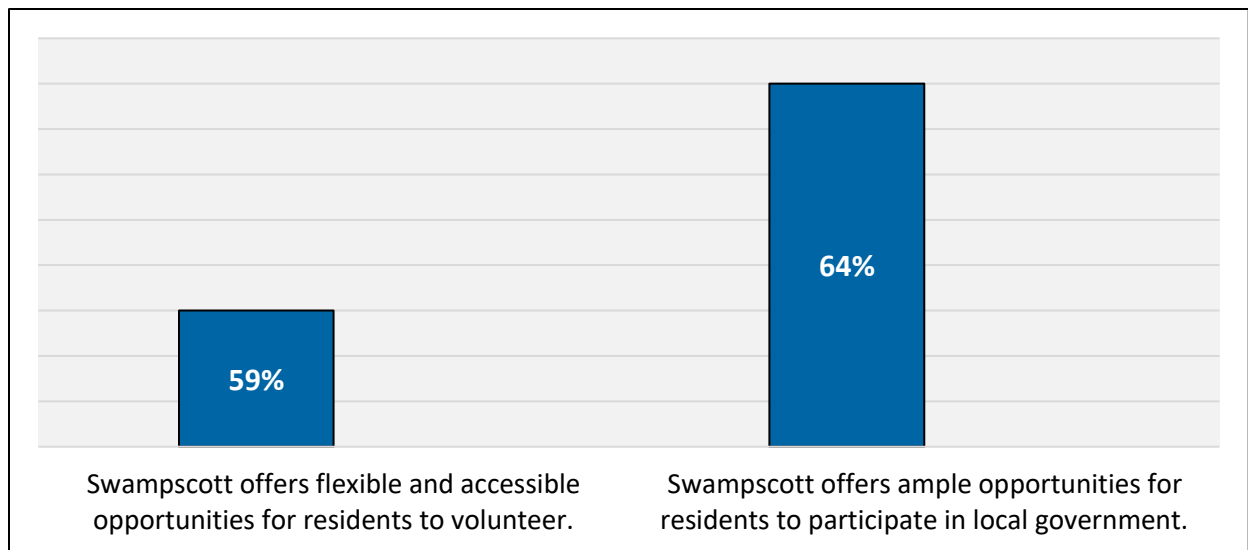


Figure 33. Those who agree that there are opportunities for civic engagement and employment in Swampscott



In the community survey, respondents were asked to select their level of agreement with the following statements: 1) Swampscott offers flexible and accessible opportunities for residents to volunteer; and 2) Swampscott offers ample opportunities for residents to participate in local government. The majority of survey respondents agreed with statements about volunteering and participation in local government (see **Figure 33**). Further, a sizeable share of respondents

marked “I don’t know” in response to these questions (see **Appendix A.**). It is possible these individuals do not have time to volunteer or participate in local government, have not explored the opportunities, or are not able to or interested in becoming active in the community for a variety of other reasons.

Ideas for Action in Swampscott: Civic Engagement & Employment

- Designate a group of resident advocates who will consistently attend board and committee meetings to raise awareness of older adult issues.
- As more residents begin to retire, consider ways for them to get connected with volunteer opportunities and post-retirement work.
 - Consider hosting a “retirement fair” and invite residents who have recently turned 65 as well as business and local organizations seeking part time employees or volunteers.
 - Facilitate “retirement groups” where groups of residents can meet regularly to develop
- Expand programming around retirement planning or finding a post-retirement job
- Continue providing opportunities for residents to volunteer and stay civically engaged in town activities. Assure that residents can easily identify the opportunities that already exist through the Town or other local organizations and groups.
- Develop an all ages civic academy²⁰²¹ that focuses on educating residents about municipal processes and empowering residents to advocate on behalf of themselves and their peers.

Community and Health Services

A broad range of community and health services and supports was considered in this study, including the availability of nearby healthcare facilities, access to nutrition and home care services, services available through the Swampscott Senior Center, and supports for caregivers. Taken together, these features impact the health and well-being of Swampscott older residents.



²⁰ http://www.wenhamma.gov/citizens_leadership_academy/

²¹ <https://www.boston.gov/news/first-senior-civic-academy-cohort-graduates>

Participants at the community forums and focus groups spoke highly about the access to physical health services in neighboring communities and in Boston as well as the many community services provided by the Swampscott Senior Center. The library and faith groups also were discussed as important community organizations where people participate in programs, find community, and learn about resources. Key informants and focus group participants described the need for particularly isolated seniors to be identified and supported. In these high risk cases, being aware of the situation and communicating across departments can reduce the impact of, and perhaps prevent, crisis situations.

*{I'm concerned about...}
Growing disabled and not
being able to take care of
myself and my home*

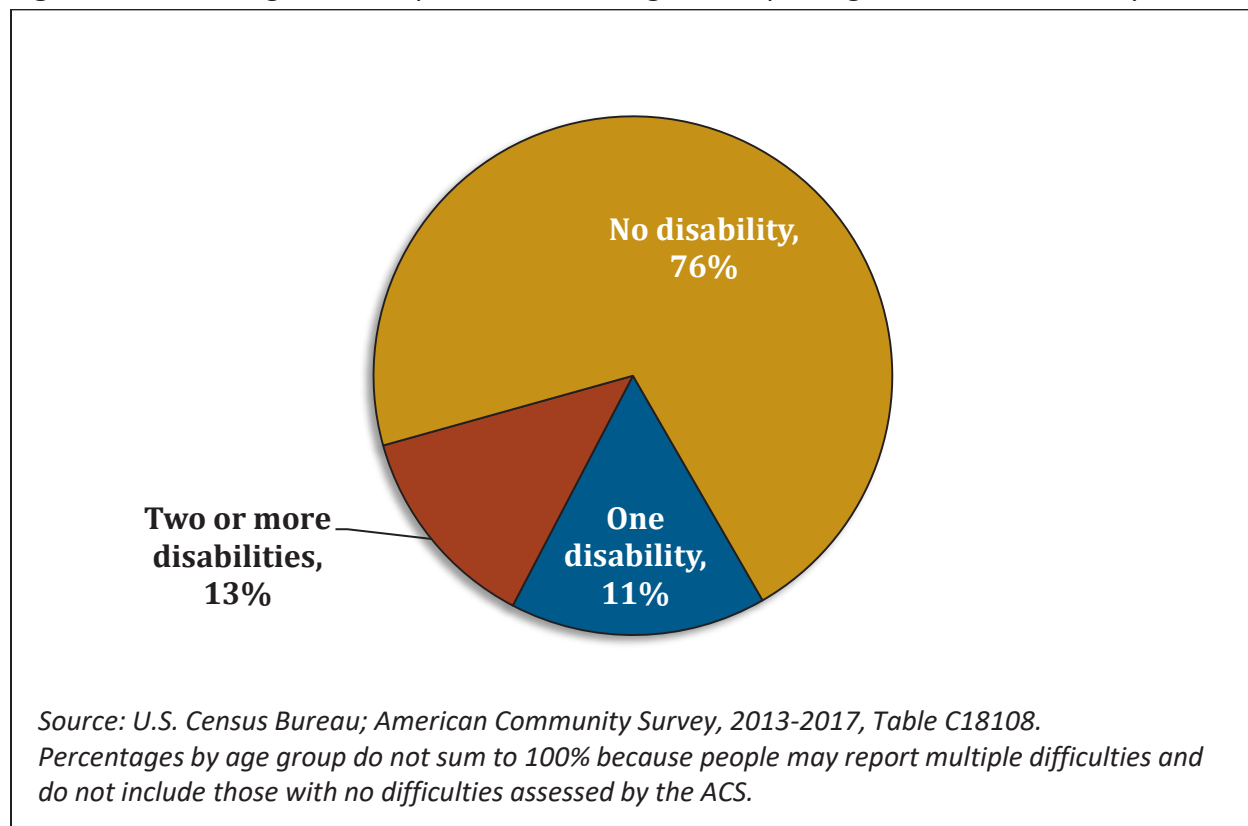
Data provided by the Massachusetts Healthy Aging Collaborative (MHAC) for the population age 65 and older suggest that along many dimensions, Swampscott older residents are in better health than their peers in Massachusetts as a whole²². Rates of hypertension, anxiety disorders, diabetes, COPD, and several other chronic conditions are estimated to be lower in Swampscott than in Massachusetts overall. According to these data, 59% of Swampscott residents age 65 and older have four or more chronic conditions, compared to a Massachusetts average of 61%. An estimated 12% of Swampscott residents age 65 and older have been diagnosed with Alzheimer's disease or dementia, a prevalence that is lower than the statewide average of 14%. Note that this prevalence level equates to an estimate 310 Swampscott residents age 65 and older with Alzheimer's disease or a related dementia, a number that is likely to increase as the older population becomes larger since risk of dementia increases with age. Data from MHAC suggest that Swampscott residents age 65 and older are more likely to engage in health promoting behaviors such as getting the recommended levels of physical activity or not smoking compared to the statewide average. However, 7% of Swampscott residents age 60 and older report their health status as fair or poor.

The increased likelihood of acquiring disability with age is evident in data from the ACS. Nearly one-quarter of Swampscott residents age 65 and older experience some level of disability that could impact their ability to function independently in the community. About 11% of Swampscott's residents age 65 and older report a single disability, and nearly 13% report two or more disabilities (see **Figure 34**). Among the different types of disability that are assessed in ACS, the most commonly cited by Swampscott residents 65 and older were ambulatory difficulties (difficulty walking or climbing stairs), independent living limitations (difficulty doing errands

²² See Massachusetts Health Aging Collaborative at <https://mahealthyagingcollaborative.org/data-report/explore-the-profiles/community-profiles/>

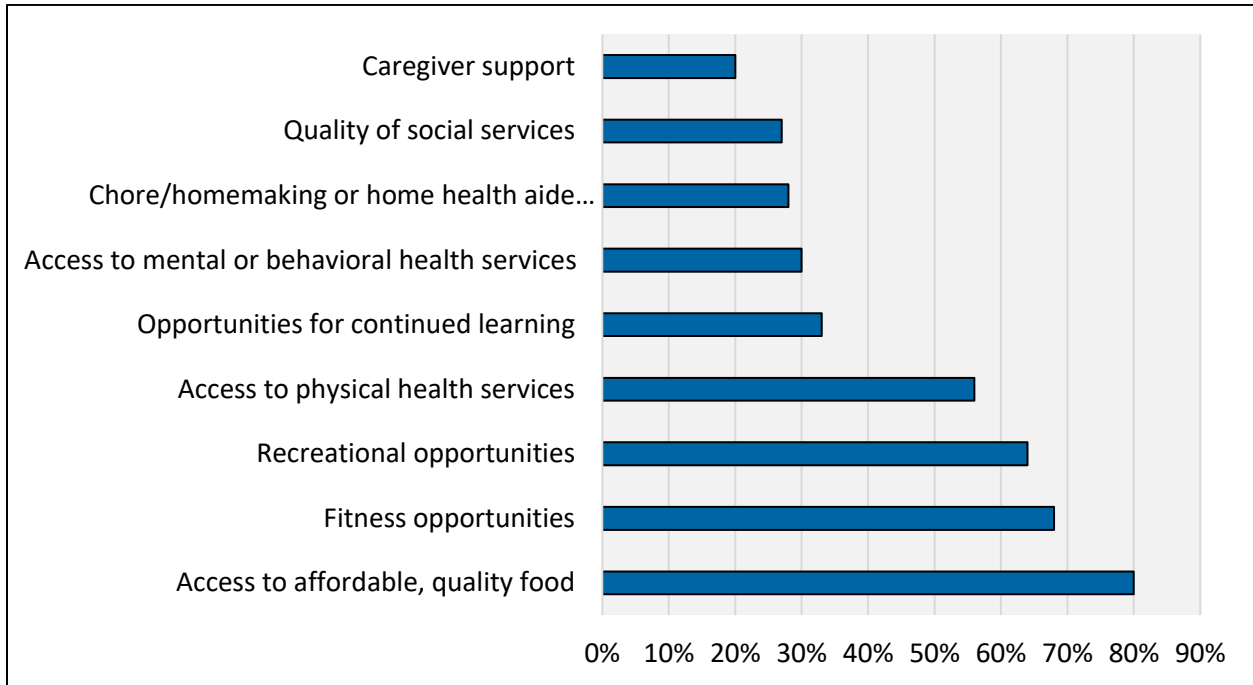
alone, such as visiting a doctor’s office or shopping), and hearing problems. Each difficulty was reported by 11% of the older population in Swampscott (ACS 2013-2017, Table S1810). Other disabilities experienced by older Swampscott residents include cognitive difficulty (9%), self-care difficulties (6%), and vision difficulties (4%). Risk of disability increases with age; indeed, while 11% of Swampscott residents age 65-74 report at least one disability, 38% of residents age 75 and older report disability.

Figure 34. Percentage of Swampscott residents age 65+ reporting at least one disability.



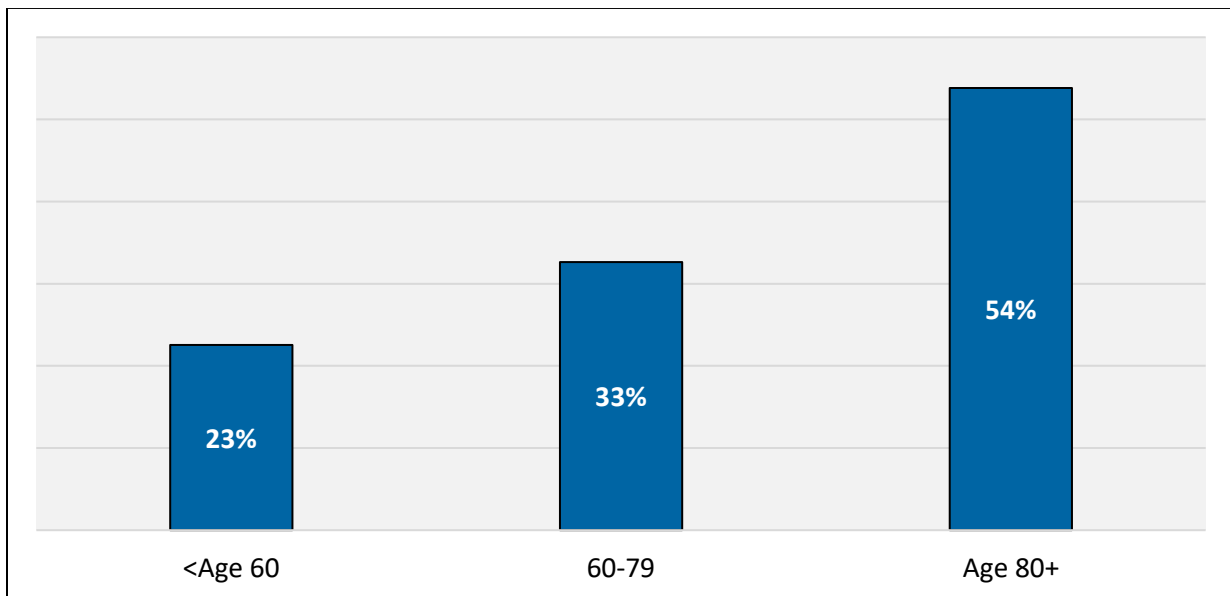
Only 30% of respondents reported being satisfied with access to mental or behavioral health services (see **Figure 35**) and many responded “I don’t know” to this question (see **Appendix A**), indicating a low uptake of these services and/or low levels of awareness of what exists. During the stakeholder focus group and key informant interviews, discussion occurred regarding the lack of attention to mental health issues for older residents. Patterns of satisfaction with these programs and services were similar among caregivers and those reporting a disability---and yet large proportions of “I don’t know” response remained.

Figure 35. Percentage satisfied with aspects of community and health services



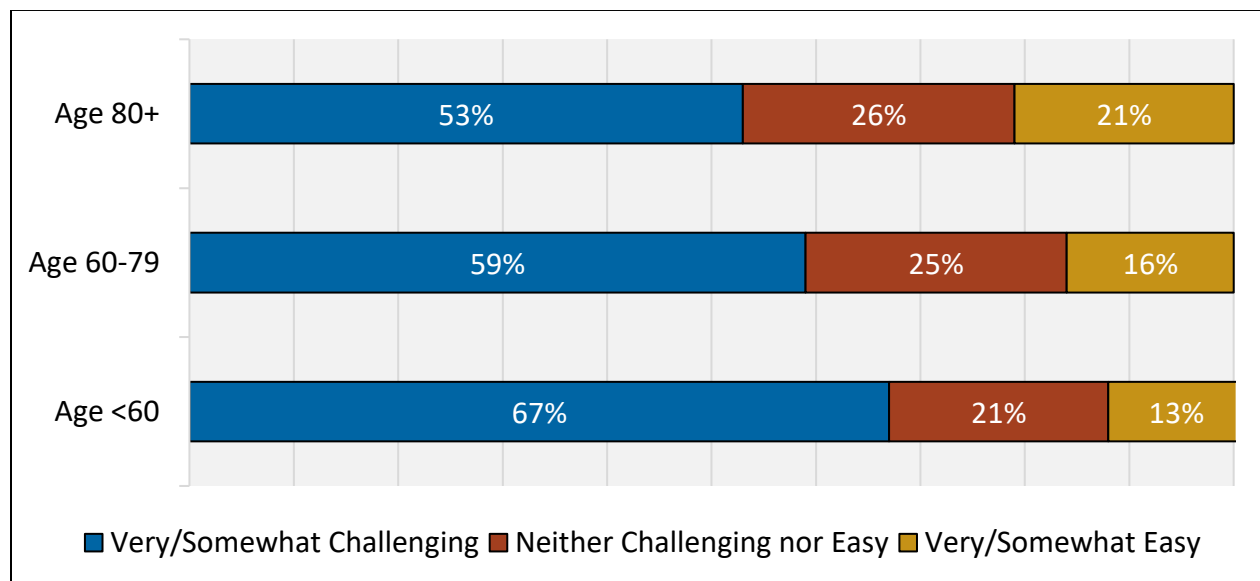
Almost half of all respondents stated that they currently or have in the past five years provided care or assistance to a person who was disabled, frail, or struggling with a physical or mental health condition and that number is similar across all age ranges (see **Appendix A**). For more than one third of the caregivers, the care recipient lives or lived with the caregiver and this number is higher for older caregivers, many of whom may be caring for a spouse (see **Figure 36**).

Figure 36. Percentage of Caregivers who lived with the care recipient, by age



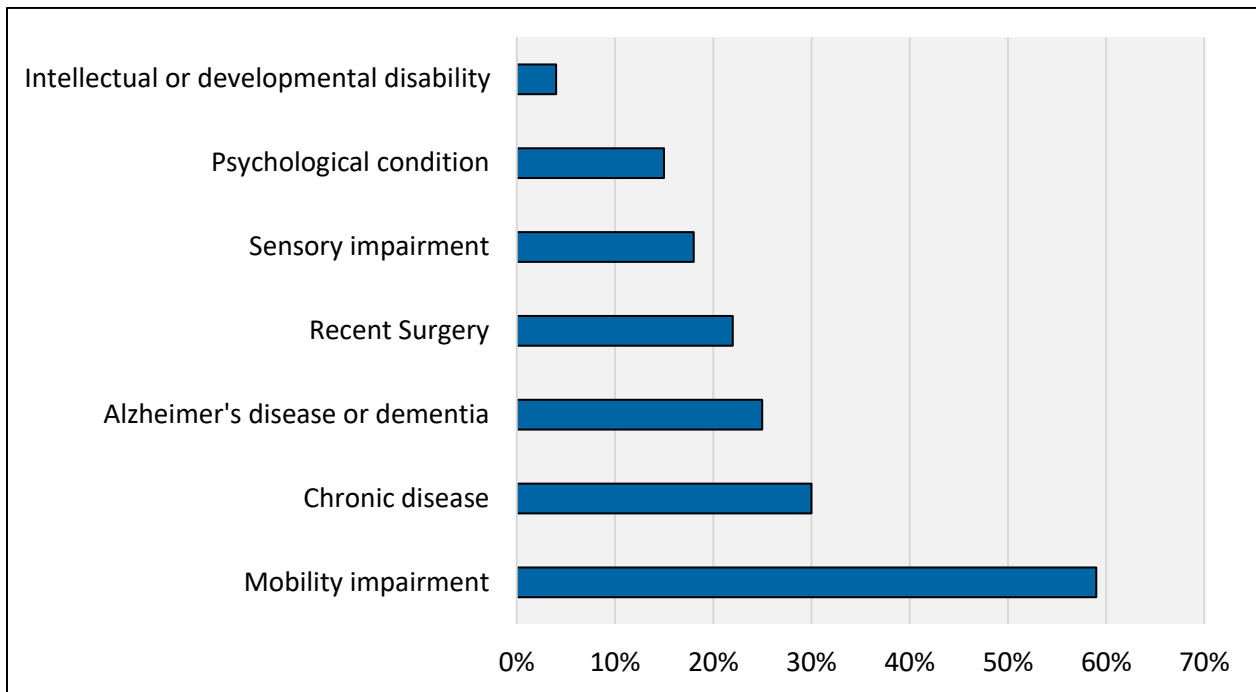
Many of those who have provided care or assistance to someone within the past five years stated that it was very or somewhat challenging to provide this care and meet other family and/or work responsibilities. This was especially true for those under age 60, where 67% of those providing care reported this was very or somewhat challenging (see **Figure 37**). Many in this age group are likely still working and therefore may be struggling to meet the demands of both caregiving and work. Even for the other age groups, between 53% and 59% of those who provide care find it very or somewhat challenging. Expanded services (e.g., transportation to adult day programs) and programming (e.g., support groups) might be indicated to support caregivers.

Figure 37. “How Challenging is/was it for you to care for this person(s) and meet your other responsibilities with family and/or work?”, by age group



Caregivers were asked to indicate which conditions were experienced by their care recipient; the most frequently marked condition was mobility impairment (such as difficulty walking or climbing stairs) (59%; see **Figure 38**), while 25% of the people the survey respondents cared for had Alzheimer’s or dementia, 30% were living with a chronic disease (such as cancer, diabetes, or asthma). Many respondents indicated that their care recipient had more than one disability.

Figure 38. Type of condition of the care recipient




Ideas for Action in Swampscott: Community Supports & Health Services

- Improve community knowledge about available services.
 - While broadening awareness overall, take special efforts to improve awareness and access to those who could benefit from services, especially those with participation limitations or who are providing care to someone.
 - Host a “crash course in caregiving” to provide families with necessary information about services and supports.
 - Create opportunities to connect the Greater Lynn Senior Services (GLSS) with family caregivers.
- Encourage a formal collaboration between the police, fire, and Swampscott Senior Center departments to identify “at risk” older adults in Swampscott. If possible, formulate a routine check-in with these residents to stay ahead of crisis-situations.
 - Consider requiring a home-visit before a resident can obtain a lock box or life alert from the Swampscott Fire Department as a way of screening for risk factors related to falls or isolation.
- Consider the necessary increase in staff and building capacity of the Swampscott Senior Center so that additional programming and services can be obtained by the growing population of older residents.
- Consider hosting a “Caregiver’s Night Out”.
 - Explore partnerships with volunteer groups to provide respite care during the event.
- Expand and develop dementia-friendly initiatives.

- Improve public education about dementia, access to adult day programs, and businesses that are trained to interact with people with dementia may be considered.
- Promote greater awareness of dementia in the community. Participate in state-wide and national events like “Purple Pew” or the Walk to End Alzheimer’s, offer a free memory screening in partnership with a healthcare professional, or raise awareness in the workplace by sponsoring a “Go casual for a cause” Friday.
- Pilot test a memory café or consider providing transportation to a nearby memory café.

Communication and Information

Several questions included on the survey related to communication and accessing information. People access information through a variety of methods and these methods vary based on age. When survey participants were asked how they currently obtain information about programs, activities, and services in their home (with the option to check all that apply), word of mouth; local newspaper, and social media were



An age-friendly community provides opportunities for residents to stay connected and informed. Promoting widespread awareness of local services, programs and resources maximizes the impact of community assets.

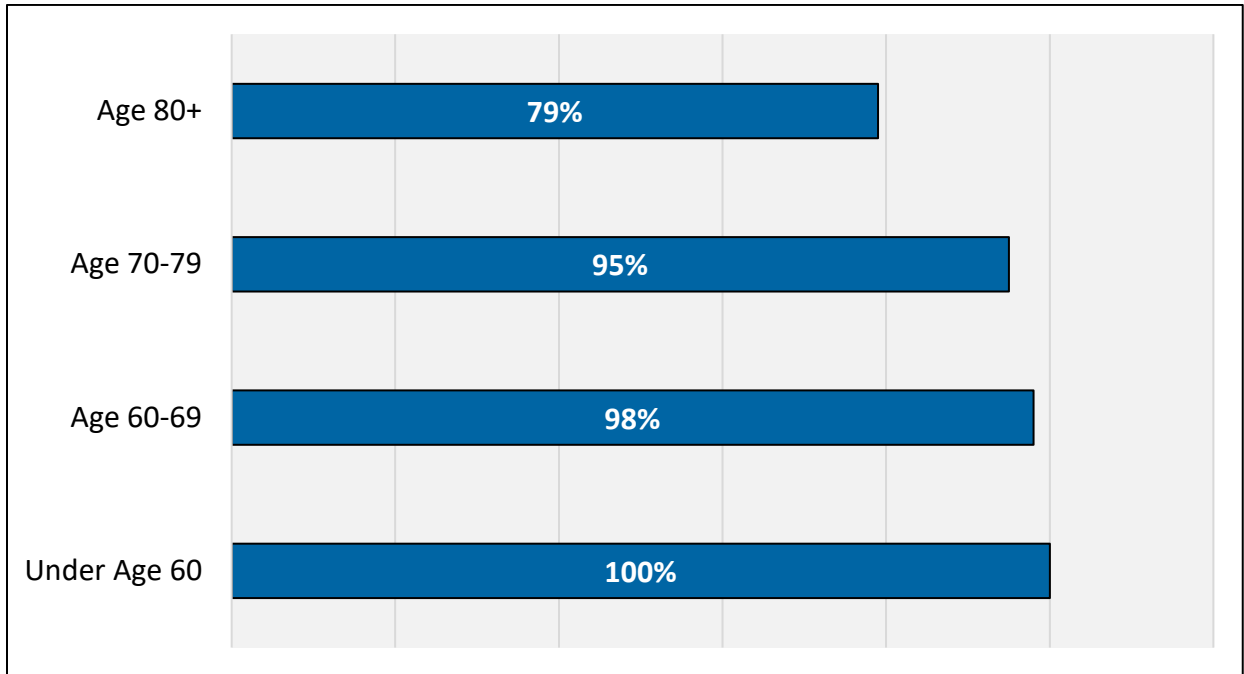
the three most common responses for all ages (52%, 51%, 30% respectively). The Town website is an important avenue of information for those under age 70 while only 9% of those age 80 and older use this method. The Senior Center Newsletter is a common method of obtaining information for those age 80 and older (see **Table 7**).

Table 7. “How do you currently obtain information about programs, activities, and services in your community? (Check all that apply)”

| | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ | All Ages |
|---|--------------|-----------|-----------|---------|----------|
| Local newspaper | 46% | 50% | 57% | 64% | 51% |
| Word of mouth | 60% | 52% | 53% | 55% | 52% |
| The Town’s website | 35% | 23% | 15% | 9% | 20% |
| Social media postings (e.g., Facebook, Twitter) | 62% | 35% | 20% | 6% | 30% |
| Faith-based organizations | 9% | 10% | 12% | 12% | 10% |
| Senior Center Newsletter | 2% | 5% | 17% | 34% | 12% |
| TV/Radio | 7% | 7% | 9% | 19% | 9% |
| Other | 10% | 9% | 9% | 11% | 9% |

Many survey respondents (88%) feel informed about what to do in the event of a weather or other emergency (see **Appendix A**), suggesting that essential information about emergency resources are widely disseminated throughout the community. As well, the majority of survey respondents are able to access the Internet at home through use of a smartphone, home computer, laptop, or tablet. Twenty-one percent of those 80 and older, however, do not have access to the Internet at home (see **Figure 39**). These individuals may struggle to learn about community programming, available services and resources unless information is communicated through other methods.

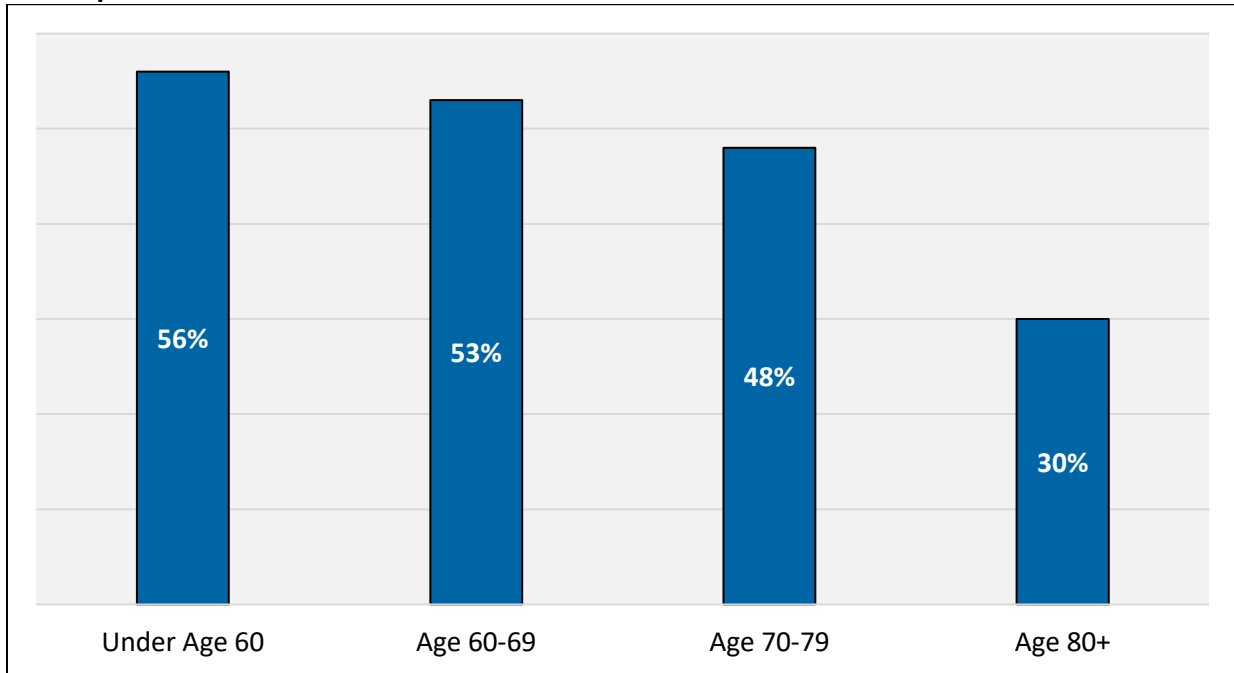
Figure 39. Percentage of survey respondents who have Internet access at home, by age group



However, when asked, “Would you know whom to contact in Swampscott should you or someone in your family need help accessing social services, health services or other municipal services?”, 49% of all respondents said no. Stronger awareness is evident among respondents age 80 and older, among whom only 30% of survey respondents responded that they don’t know who to contact (see **Figure 40**). It is possible that many in the older cohort have already needed services, and therefore figured out how to access them. Still, many respondents in all age groups lack this knowledge.

Swampscott should publish and mail to each address at least once a year a complete "Guide" for ALL town services and phone numbers and contacts; including anything related to this survey. i.e., a "one-shop-guide" to services and government in Swampscott.

Figure 40. Percentage of respondents who do NOT know who to contact in Swampscott should they or someone in their family need help accessing social services, health services, or municipal services.



Ideas for Action in Swampscott: Communication & Information

- Consider scheduling quarterly meetings of key employees who work for organizations that provide services to older adults, providing an avenue to share information. Consider it a human service networking event.
- Continue to disseminate information in multiple forms and provide print copies of important information in places other than the Senior Center and utilize local newspaper as a mechanism for getting information distributed. Consider a “senior sentiment” as an editorial column to engage older residents with relevant topics.
- Explore the possibility of having a centralized social calendar for events happening around Swampscott as a way of making residents aware of programs (e.g., library, Senior Center, recreation, church groups).
- Disseminate information about existing information channels in Town. Consider developing a “how to” guide that includes instructions on things like how to post something to the Town website, how to use the robo-call system, how to submit a letter to the editor.

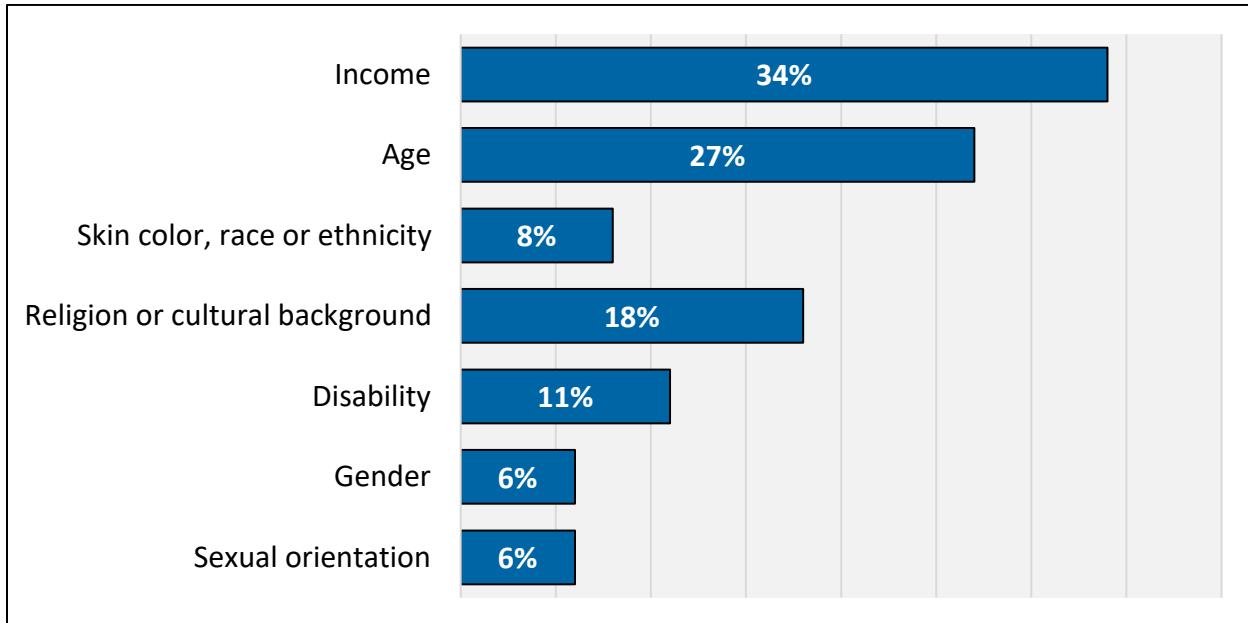
Respect and Social Inclusion

During the community forum, several participants acknowledged the “small-town feel” and inclusive nature of Swampscott. One individual mentioned that as a parent of a special needs child, “it takes a village and that village exists in Swampscott”. In addition, several attendees at the community forum identified the poor conditions of the public senior housing in Swampscott; and the feelings of exclusion by those who reside in these buildings. Key informants talked about the vulnerability of some older adults in Swampscott with respect to social isolation. Older people living alone and those with mental or physical impairment may fall victim to fraud or other scams and may also be at higher risk for becoming totally homebound or developing conditions like hoarding.



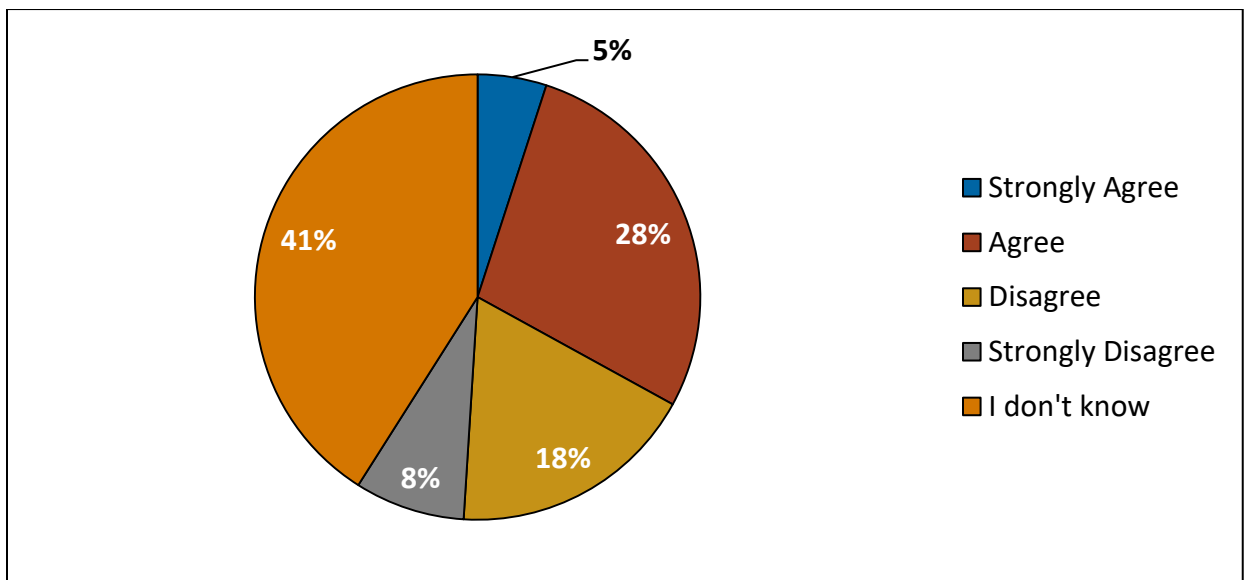
Survey respondents answered the question, “Have you ever felt excluded in Swampscott because of your (Check all that apply)” with response options of skin color, race or ethnicity, sexual orientation, age, gender, religion or cultural background, income, disability, or other. Respondents could also mark, “No, I have never felt excluded.” While the majority of people who responded to the survey have never felt excluded, 17% of survey respondents felt excluded based on at least one dimension. Among those reporting having felt excluded, the most common reason was income (34%) while 27% of the respondents felt excluded because of age (see **Figure 41**). Several respondents marked “other”, noting other reasons for exclusion, such as not being a “native” to Swampscott, or not feeling excluded for being single or not having children.

Figure 41. Percentage feeling excluded in Swampscott, by reason for exclusion



Survey respondents were asked the extent to which they agree with the following statement: “Local policymakers take into account the interests and concerns of older residents”; and 26% of respondents disagreed (see **Figure 42**) that local policymakers in Swampscott take into account the interests and concerns of older residents. Improving lines of communication between older residents and local policymakers could improve this public perception.

Figure 42. "How satisfied are you with the extent to which local policy makers take into account the interests and concerns of residents?"



Ideas for Action in Swampscott: Respect and Inclusion

- Designate a group of resident advocates who will consistently attend board and committee meetings to raise awareness of older adult issues.
- Review existing processes for collecting public input on planning and policy change to ensure that it is Age Friendly. For example, is transportation available for public meetings or are surveys made available in hard-copy as well as online.
- Consider accessibility of public events, including seating, restrooms and cost to ensure that all residents feel welcome and supported.
- Consider educating “front facing staff” of Town offices on how to communicate with people with memory impairment and ensure that all older residents are treated with respect.
- Swampscott for All Ages Committee may wish to embed themes of inclusion in their mission statement and consider opportunities to build a broad-based coalition to tackle the issue of inclusion, involving representatives from faith communities, disability organizations, the schools, the Senior Center and other organizations committed to working collaboratively on this issue.
- Consider accessibility issues when planning community events; this includes taking into account the cost of participation, which may be out of reach for those with economic challenges.
- Consider strategies to improve outreach to all residents, including residents of senior public housing, as a means of promoting awareness and inclusion.

Conclusions and Priorities

The number of older Swampscott residents is already sizable, and projections suggest it will increase within the next decade. Therefore, it is important to consider how well features of the Town, the services and amenities available, and virtually every aspect of the community align with the age demographic moving forward. A broad range of findings are reported in this document, highlighting the many positive features of Swampscott as well as concerns expressed by older residents. While many of the findings, and the recommendations that follow, intersect with the scope of responsibility of the Swampscott Senior Center and other municipal services, it is understood that responding to many needs and concerns expressed in the community will require the involvement of other municipal offices or community stakeholders, and some will require substantial collaborative effort. Domain-specific findings from this study are identified within each section above. Broad conclusions and priorities for next steps are outlined here.

Study findings point to many strengths of Swampscott that contribute to its livability. Residents appreciate the historic nature of the community and the proximity to the ocean and Boston. They have developed friends and established community in the Town and the majority want to remain in Swampscott as they age. The purpose of the study was to learn about areas for improvement to support aging in Swampscott, and study findings point to dissatisfaction in several areas. Many

residents expressed concern about being able to remain in Swampscott as they age due to the cost of living and availability of housing. There are few options for downsizing and one-level living in Swampscott and maintaining one's current home and paying taxes is unattainable for many. Not to mention that the existing senior housing in Swampscott is in poor condition; although 38 affordable senior units are scheduled to be built at the B'nai B'rith Housing development²³. As well, while Swampscott has some transportation options (e.g., the RIDE, the Senior Center vans, commuter rail, and few public buses), residents struggle to travel on the weekends when public transportation is limited and the Senior Center is closed. Specifically, medical transportation is limited in Swampscott.

The conditions of sidewalks, lighting, shaded seating, signage, bus shelters, and public bathrooms were all identified as needs of Swampscott to become more age and dementia friendly. However, there are several plans that have been done in recent years to address these outdoor space/accessibility issues. This report supports those "roadmaps" and encourages those plans to be done with an age friendly lens.

Several additional concerns were identified in the study. Some Swampscott older adults don't feel valued or heard. Social isolation and the potential for social isolation also emerged as a concern. Social connections are important as one ages, yet many Swampscott residents don't know someone living nearby and don't talk with neighbors often. And most importantly, communication emerged as a challenge within the Town and across all areas of livability. Many services and programs are already available that might support residents who are isolated, dealing with economic insecurity, or lacking transportation, for example, but many people don't know about these services. Spreading the word about the solutions can be challenging due to the different preferences for receiving communication in Swampscott.

Prioritizing next steps

Study findings point to many strengths of Swampscott that contribute to its livability, including the historic nature of the community, the walkable waterfront, and the proximity to Boston and surrounding communities like Lynn, Salem, Marblehead, and Nahant. Yet some aspects of Swampscott are regarded less positively. The cost of living and limited number of downsizing options are a concern for many study participants. Walkability of the town—including sidewalk quality, safety of intersections, and amenities like seating, lighting and restrooms impede older residents from fully engaging in the community. Some alternatives to driving exist in Swampscott, however transportation remains a challenge for some residents. Equally important, there appears to be a segment of the population that is isolated or at risk of isolation. By putting

²³ <https://www.itemlive.com/2019/07/18/gov-baker-announces-80-million-in-funding-for-affordable-housing-projects/>

cross-departmental strategies in place to respond to emergency needs of those who are isolated or might be at risk of isolation, the Town can work to prevent extreme isolation and the crises that often come along with that condition.

Communication crosses all domains addressed within this study. As such, one priority may be to improve communication about available resources. Many programs are available in Town but residents are either unaware of them or unable to access them. Another priority for the Swampscott for All Ages initiative may be to identify strategies to empower older adults living in Swampscott to remain civically engaged through advocacy and volunteer work. Although the residents of Swampscott have a wide range of interests in social and recreational activities--- there are not many places in town to gather communally to engage in these activities. The capacity of the existing buildings—library, senior center, and the Swampscott Recreation Department is limited. Many participants commented on the value that a community center space would add to the livability of the town for residents of all ages. In addition, many residents currently participate in activities in surrounding communities; and yet transportation and information about these resources is uneven. Given the close proximity to other communities and the goals of advancing Governor Baker’s Age Friendly State initiative, opportunities for a more age friendly region should be pursued in this geographic region.

It is worth highlighting that an age friendly community is also supportive and inclusive of people living with dementia and their families. Many Swampscott residents provide care for a loved one, 25% of those caregivers are providing care to someone with dementia; and survey results show that this is challenging for many. It appears that many who provide care don’t know or don’t take advantage of the currently available services (e.g., social services, homemaking services). Exploring strategies to reach these vulnerable populations is important to share information about the services available and to learn from those vulnerable populations or those who are connected to them.

Many projects to improve livability in Swampscott are already underway and therefore, we suggest building on the momentum of projects already in place. The Swampscott for All Ages Committee and the Senior Center have an important role to play in listening to and advocating for the needs of Swampscott’s older residents.

Appendix A: Community Survey Results

Note: Appendix tables are based on 1,645 responses to the Swampscott Needs Assessment Project Survey, conducted in Fall, 2018. 290 responses were received online with the rest of the responses received by mail. Total response rate was 33%. See text for additional details.

How long have you lived in Swampscott? (Check only one)

| | All age | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------|---------|--------------|-----------|-----------|---------|
| Fewer than 5 years | 11% | 15% | 10% | 9% | 10% |
| 5-14 years | 12% | 18% | 12% | 11% | 7% |
| 15-24 years | 17% | 28% | 19% | 11% | 11% |
| 25-34 years | 18% | 18% | 24% | 14% | 10% |
| 35-44 years | 16% | 3% | 21% | 23% | 7% |
| 45 years or longer | 26% | 18% | 14% | 32% | 55% |
| Total | 100% | 100% | 100% | 100% | 100% |

How important is it to you to remain living in Swampscott as you get older?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|----------------------|----------|--------------|-----------|-----------|---------|
| Very Important | 53% | 40% | 47% | 60% | 68% |
| Somewhat Important | 32% | 41% | 34% | 28% | 24% |
| Slightly Important | 9% | 11% | 11% | 8% | 4% |
| Not at All Important | 6% | 8% | 8% | 4% | 4% |
| Total | 100% | 100% | 100% | 100% | 100% |

Do you rent or own your current place of residence?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Own | 86% | 91% | 86% | 89% | 74% |
| Rent | 12% | 8% | 12% | 10% | 23% |
| Other | 2% | 1% | 2% | 1% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% |

Which of the following best describes your current place of residence?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|-------------|--------------|-------------|-------------|-------------|
| Single-family home | 68% | 82% | 68% | 66% | 49% |
| Multi-family home (2, 3, or more units) | 10% | 2% | 1% | 1% | 2% |
| Accessory apartment (add-on apartment to an existing home) | 1% | 5% | 11% | 11% | 12% |
| Condominium or townhome | 17% | 10% | 16% | 19% | 29% |
| Assisted living community (e.g., Bertram House or Residence at Vinnin Square) | 1% | 0% | 0% | 0% | 5% |
| Other (Please specify): | 3% | 1% | 4% | 3% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% |

With whom do you live? (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| I live alone | 23% | 9% | 19% | 29% | 44% |
| A spouse/partner | 66% | 78% | 73% | 66% | 42% |
| I live with a relative (e.g., children, grandchildren, parents) | 13% | 28% | 10% | 6% | 10% |
| Other | 3% | 5% | 4% | 1% | 3% |

**Figures do not sum to 100%*

Does your current residence have a bedroom and full bath on the first floor?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 44% | 27% | 43% | 46% | 68% |
| No | 56% | 73% | 57% | 54% | 32% |
| Total | 100% | 100% | 100% | 100% | 100% |

In the next 5 years, if you needed move from your current home, what kind of housing would you prefer in Swampscott? (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| Small single-family home | 36% | 61% | 39% | 26% | 14% |
| Accessory apartment (add-on apartment to existing home) | 4% | 7% | 3% | 4% | 3% |
| Apartment, condominium or townhome | 38% | 37% | 48% | 39% | 21% |
| Senior Independent Living community (e.g., continuing care retirement community, 55+ community) | 23% | 12% | 22% | 32% | 29% |
| Assisted Living Community | 9% | 3% | 4% | 11% | 25% |
| Affordable or subsidized housing | 14% | 10% | 13% | 18% | 18% |
| Other | 8% | 13% | 8% | 6% | 8% |

**Figures do not sum to 100%*

Is it your preference to rent or own your next home?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Own | 54% | 74% | 62% | 42% | 24% |
| Rent | 15% | 7% | 14% | 20% | 19% |
| N/A, I do not intend to move from my current residence | 31% | 19% | 24% | 38% | 57% |
| Total | 100% | 100% | 100% | 100% | 100% |

Does your current residence need home repairs (e.g., new roof, electrical work, etc.) to improve your ability to live in it safely for the next five years?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Yes, and I can afford to make these repairs. | 27% | 35% | 28% | 25% | 19% |
| Yes, but I cannot afford to make these repairs. | 10% | 11% | 9% | 11% | 7% |
| Yes, but I am not responsible for making these repairs (e.g., I rent my current residence) | 5% | 4% | 4% | 6% | 9% |
| No, my current residence does not need repairs. | 58% | 50% | 59% | 58% | 65% |
| Total | 100% | 100% | 100% | 100% | 100% |

Does your current residence need home modifications (e.g., grab bars in showers or railings on stairs) to improve your ability to live in it safely for the next five years?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| Yes, and I can afford to make these modifications. | 23% | 15% | 24% | 29% | 18% |
| Yes, but I cannot afford to make these modifications. | 6% | 5% | 6% | 8% | 6% |
| No, my current residence does not need modifications. | 71% | 80% | 70% | 63% | 76% |
| Total | 100% | 100% | 100% | 100% | 100% |

I use the following methods of transportation to meet my travel needs. (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| I drive myself | 96% | 97% | 98% | 98% | 88% |
| Family or friends drive me | 59% | 44% | 52% | 63% | 94% |
| Public transportation (e.g., MBTA bus, commuter rail) | 32% | 73% | 65% | 63% | 24% |
| Paratransit (e.g., the RIDE) | 8% | 2% | 4% | 9% | 41% |
| Senior Center transportation (e.g., Senior Center vans) | 3% | 1% | 4% | 9% | 42% |
| Taxi or ride sharing service (e.g., Uber, LYFT) | 60% | 69% | 64% | 51% | 35% |
| Walk or bike | 41% | 88% | 84% | 60% | 46% |
| Other | 2% | 2% | 2% | 2% | 2% |

**Figures do not sum to 100%*

Which of the following best describes your driving status? (Check only one)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| I drive with no limitations | 79% | 94% | 89% | 76% | 42% |
| I limit my driving (e.g., I avoid driving at night, during bad weather, in unfamiliar areas) | 15% | 2% | 9% | 20% | 34% |
| I do not drive | 6% | 4% | 2% | 4% | 24% |
| Total | 100% | 100% | 100% | 100% | 100% |

Within the last 12 months, did you have to miss, cancel, or reschedule a medical appointment because of a lack of transportation?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 4% | 4% | 3% | 4% | 7% |
| No | 96% | 96% | 97% | 96% | 93% |
| Total | 100% | 100% | 100% | 100% | 100% |

Please rate your level of satisfaction with each of the following features of Swampscott.

Transportation Options

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 18% | 19% | 18% | 19% | 18% |
| Satisfied | 46% | 46% | 49% | 48% | 38% |
| Dissatisfied | 10% | 13% | 9% | 10% | 7% |
| Very Dissatisfied | 3% | 5% | 2% | 2% | 3% |
| I don't know | 23% | 17% | 22% | 21% | 34% |
| Total | 100% | 100% | 100% | 100% | 100% |

Availability of Parking

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 13% | 8% | 13% | 15% | 17% |
| Satisfied | 52% | 56% | 47% | 55% | 49% |
| Dissatisfied | 24% | 27% | 27% | 22% | 17% |
| Very Dissatisfied | 7% | 6% | 9% | 5% | 6% |
| I don't know | 4% | 3% | 4% | 3% | 1% |
| Total | 100% | 100% | 100% | 100% | 100% |

Accessibility of Parking

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 13% | 7% | 14% | 15% | 16% |
| Satisfied | 53% | 58% | 49% | 56% | 49% |
| Dissatisfied | 20% | 19% | 21% | 20% | 21% |
| Very Dissatisfied | 6% | 5% | 8% | 4% | 4% |
| I don't know | 8% | 11% | 8% | 5% | 10% |
| Total | 100% | 100% | 100% | 100% | 100% |

Clear and consistent speed limit signage and enforcement

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 15% | 11% | 15% | 15% | 20% |
| Satisfied | 61% | 59% | 62 | 60% | 59% |
| Dissatisfied | 13% | 15% | 14% | 14% | 9% |
| Very Dissatisfied | 6% | 9% | 5% | 6% | 3% |
| I don't know | 5% | 6% | 4% | 5% | 9% |
| Total | 100% | 100% | 100% | 100%12+ | 100% |

Handicap accessibility of walkways, public buildings, and businesses

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 13% | 8% | 12% | 16% | 16% |
| Satisfied | 51% | 47% | 48% | 55% | 58% |
| Dissatisfied | 9% | 15% | 8% | 7% | 6% |
| Very Dissatisfied | 3% | 3% | 3% | 4% | 4% |
| I don't know | 24% | 27% | 29% | 18% | 16% |
| Total | 100% | 100% | 100% | 100% | 100% |

Availability of maintained sidewalks

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 9% | 6% | 8% | 10% | 13% |
| Satisfied | 42% | 44% | 41% | 41% | 44% |
| Dissatisfied | 29% | 28% | 31% | 30% | 22% |
| Very Dissatisfied | 16% | 20% | 17% | 14% | 12% |
| I don't know | 4% | 2% | 3% | 5% | 9% |
| Total | 100% | 100% | 100% | 100% | 100% |

Lighting along sidewalks and trails

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 8% | 5% | 7% | 9% | 13% |
| Satisfied | 49% | 51% | 45% | 51% | 49% |
| Dissatisfied | 22% | 26% | 25% | 20% | 12% |
| Very Dissatisfied | 8% | 9% | 9% | 7% | 6% |
| I don't know | 13% | 9% | 14% | 13% | 20% |
| Total | 100% | 100% | 100% | 100% | 100% |

Availability of shaded benches in public areas and along walkways

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 7% | 5% | 5% | 8% | 10% |
| Satisfied | 39% | 43% | 39% | 37% | 41% |
| Dissatisfied | 25% | 21% | 28% | 28% | 16% |
| Very Dissatisfied | 7% | 10% | 6% | 8% | 4% |
| I don't know | 22% | 21% | 22% | 19% | 29% |
| Total | 100% | 100% | 100% | 100% | 100% |

Marked crosswalks and timing of walk signals

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 12% | 11% | 11% | 12% | 14% |
| Satisfied | 62% | 58% | 62% | 64% | 61% |
| Dissatisfied | 14% | 19% | 14% | 12% | 12% |
| Very Dissatisfied | 5% | 7% | 5% | 5% | 3% |
| I don't know | 7% | 5% | 8% | 7% | 10% |
| Total | 100% | 100% | 100% | 100% | 100% |

Clear and consistent signage and wayfinding around Swampscott

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 10% | 8% | 9% | 12% | 16% |
| Satisfied | 60% | 62% | 60% | 59% | 57% |
| Dissatisfied | 15% | 17% | 16% | 14% | 10% |
| Very Dissatisfied | 3% | 4% | 4% | 3% | 2% |
| I don't know | 12% | 9% | 11% | 12% | 15% |
| Total | 100% | 100% | 100% | 100% | 100% |

Availability of public restrooms

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 3% | 1% | 2% | 4% | 5% |
| Satisfied | 14% | 10% | 14% | 13% | 20% |
| Dissatisfied | 38% | 50% | 37% | 37% | 27% |
| Very Dissatisfied | 18% | 21% | 19% | 19% | 13% |
| I don't know | 27% | 18% | 28% | 27% | 35% |
| Total | 100% | 100% | 100% | 100% | 100% |

How often do you talk on the phone, send email, use social media, or get together to visit with family, friends, or neighbors?

Talk on the phone with family, friends, or neighbors?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---------------------------------|----------|--------------|-----------|-----------|---------|
| Every day | 65% | 69% | 67% | 62% | 64% |
| One or more times a week | 27% | 22% | 26% | 29% | 28% |
| More than once a week | 5% | 5% | 4% | 6% | 3% |
| Once a month | 2% | 3% | 2% | 1% | 1% |
| 2-3 times a year | 1% | 1% | 1% | 1% | 3% |
| Never | 0% | 0% | 0% | 1% | 1% |
| Total | 100% | 100% | 100% | 100% | 100% |

Send email or use social media with family, friends, or neighbors

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---------------------------------|----------|--------------|-----------|-----------|---------|
| Every day | 66% | 81% | 71% | 61% | 38% |
| One or more times a week | 19% | 12% | 19% | 22% | 25% |
| More than once a month | 5% | 2% | 4% | 7% | 5% |
| Once a month | 2% | 3% | 2% | 2% | 2% |
| 2-3 times a year | 1% | 1% | 1% | 1% | 5% |
| Never | 7% | 1% | 3% | 7% | 25% |
| Total | 100% | 100% | 100% | 100% | 100% |

Get together in person with family, friends, or neighbors

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Every day | 28% | 28% | 26% | 27% | 30% |
| One or more times a week | 49% | 49% | 49% | 52% | 50% |
| More than once a week | 16% | 14% | 18% | 15% | 11% |
| Once a month | 4% | 6% | 4% | 3% | 3% |
| 2-3 times a year | 3% | 3% | 3% | 3% | 5% |
| Never | 0% | 0% | 0% | 0% | 1% |
| Total | 100% | 100% | 100% | 100% | 100% |

Do you know someone living within 30 minutes of your home on whom you can rely for help when you need it?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------|----------|--------------|-----------|-----------|---------|
| Yes | 92% | | 92% | 93% | 92% |
| No | 8% | | 8% | 7% | 8% |
| Total | 100% | | 100% | 100% | 100% |

Would you ask a neighbor for help if you needed assistance with a minor task or errand (e.g., changing a lightbulb, shopping, shoveling snow)?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------|----------|--------------|-----------|-----------|---------|
| Yes | 69% | 74% | 68% | 68% | 65% |
| No | 31% | 26% | 32% | 32% | 35% |
| Total | 100% | 100% | 100% | 100% | 100% |

Do you provide any help to neighbors with minor tasks or errands?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------------------------|----------|--------------|-----------|-----------|---------|
| Yes | 47% | 59% | 50% | 44% | 31% |
| No | 9% | 4% | 6% | 7% | 23% |
| No, but I would be willing if asked | 44% | 37% | 44% | 49% | 46% |
| Total | 100% | 100% | 100% | 100% | 100% |

In the past month, have you talked with any of your neighbors for 10 minutes or more?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 82% | 82% | 82% | 84% | 80% |
| No | 18% | 18% | 18% | 16% | 20% |
| Total | 100% | 100% | 100% | 100% | 100% |

Please state your level of agreement with each statement below.

Swampscott offers flexible and accessible opportunities for residents to volunteer (e.g., faith communities, nonprofit organizations).

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Strongly Agree | 15% | 19% | 13% | 15% | 15% |
| Agree | 44% | 39% | 44% | 47% | 45% |
| Disagree | 6% | 8% | 6% | 6% | 5% |
| Strongly Disagree | 2% | 2% | 1% | 0% | 2% |
| I don't know | 33 | 32% | 36% | 32% | 33% |
| Total | 100% | 100% | 100% | 100% | 100% |

Swampscott offers ample opportunities for residents to participate in local government (e.g., boards, committees).

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Strongly Agree | 14% | 20% | 13% | 13% | 14% |
| Agree | 50% | 48% | 50% | 52% | 49% |
| Disagree | 8% | 9% | 7% | 10% | 7% |
| Strongly Disagree | 2% | 2% | 2% | 2% | 1% |
| I don't know | 26% | 21% | 28% | 23% | 29% |
| Total | 100% | 100% | 100% | 100% | 100% |

Local policymakers take into account the interests and concerns of older residents.

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Strongly Agree | 5% | 6% | 4% | 5% | 7% |
| Agree | 29% | 32% | 25% | 28% | 33% |
| Disagree | 18% | 14% | 19% | 22% | 16% |
| Strongly Disagree | 7% | 8% | 8% | 7% | 6% |
| I don't know | 41% | 40% | 44% | 38% | 38% |
| Total | 100% | 100% | 100% | 100% | 100% |

Are there sufficient places to go in Swampscott to socialize or for leisure activity?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 61% | 49% | 58% | 68% | 76% |
| No | 39% | 51% | 42% | 32% | 24% |
| Total | 100% | 100% | 100% | 100% | 100% |

Have you ever felt excluded in Swampscott because of your:

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| Skin color, race, or ethnicity | 1% | 2% | 1% | 1% | 1% |
| Sexual orientation | 1% | 1% | 1% | 1% | 0% |
| Age | 5% | 5% | 3% | 7% | 3% |
| Gender | 1% | 3% | 1% | 1% | 0% |
| Religion or cultural background | 3% | 4% | 5% | 3% | 1% |
| Income | 6% | 13% | 4% | 5% | 1% |
| Disability | 2% | 3% | 1% | 3% | 2% |
| No, I have never felt excluded | 77% | 69% | 79% | 81% | 88% |

***Figures do not sum to 100%**

Please rate your level of satisfaction with each of the following aspects of your community.

Fitness opportunities (such as exercise classes and paths or trails)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 18% | 18% | 18% | 18% | 20% |
| Satisfied | 50% | 53% | 49% | 51% | 48% |
| Dissatisfied | 15% | 19% | 16% | 14% | 6% |
| Very Dissatisfied | 2% | 2% | 3% | 2% | 1% |
| I don't know | 15% | 8% | 14% | 15% | 25% |
| Total | 100% | 100% | 100% | 100% | 100% |

Affordable, quality food

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 18% | 13% | 16% | 19% | 28% |
| Satisfied | 62% | 59% | 64% | 64% | 57% |
| Dissatisfied | 14% | 22% | 14% | 12% | 6% |
| Very Dissatisfied | 2% | 4% | 3% | 1% | 1% |
| I don't know | 4% | 2% | 3% | 4% | 7% |
| Total | 100% | 100% | 100% | 100% | 100% |

Chore/Homemaking or home health aide services

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 7% | 2% | 5% | 8% | 17% |
| Satisfied | 21% | 20% | 18% | 21% | 30% |
| Dissatisfied | 4% | 2% | 3% | 5% | 3% |
| Very Dissatisfied | 1% | 1% | 1% | 2% | 1% |
| I don't know | 67% | 75% | 73% | 64% | 49% |
| Total | 100% | 100% | 100% | 100% | 100% |

Caregiver support (such as respite or support groups)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 4% | 2% | 3% | 4% | 11% |
| Satisfied | 16% | 13% | 14% | 16% | 23% |
| Dissatisfied | 4% | 4% | 4% | 5% | 4% |
| Very Dissatisfied | 1% | 1% | 1% | 2% | 1% |
| I don't know | 75% | 80% | 78% | 73% | 61% |
| Total | 100% | 100% | 100% | 100% | 100% |

Opportunities for continued learning (such as lifelong learning opportunities, workshops, or tours)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 7% | 5% | 4% | 7% | 14% |
| Satisfied | 26% | 21% | 24% | 27% | 33% |
| Dissatisfied | 15% | 21% | 16% | 15% | 7% |
| Very Dissatisfied | 2% | 3% | 2% | 3% | 1% |
| I don't know | 50% | 50% | 54% | 48% | 45% |
| Total | 100% | 100% | 100% | 100% | 100% |

Opportunities in your neighborhood for informal sharing and social interaction

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 9% | 10% | 7% | 9% | 11% |
| Satisfied | 36% | 38% | 35% | 37% | 36% |
| Dissatisfied | 14% | 18% | 14% | 13% | 10% |
| Very Dissatisfied | 3% | 5% | 3% | 4% | 1% |
| I don't know | 38% | 29% | 41% | 37% | 42% |
| Total | 100% | 100% | 100% | 100% | 100% |

Recreational Opportunities

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 11% | 10% | 11% | 12% | 13% |
| Satisfied | 53% | 56% | 51% | 52% | 52% |
| Dissatisfied | 12% | 17% | 13% | 10% | 6% |
| Very Dissatisfied | 2% | 3% | 3% | 2% | 1% |
| I don't know | 22% | 14% | 22% | 24% | 28% |
| Total | 100% | 100% | 100% | 100% | 100% |

Quality of social services (such as information and referral services, or Meals on Wheels)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 6% | 2% | 4% | 8% | 12% |
| Satisfied | 21% | 12% | 18% | 22% | 37% |
| Dissatisfied | 4% | 4% | 2% | 5% | 5% |
| Very Dissatisfied | 1% | 2% | 1% | 1% | 1% |
| I don't know | 68% | 80% | 75% | 64% | 45% |
| Total | 100% | 100% | 100% | 100% | 100% |

Access to physical health services

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 12% | 10% | 11% | 12% | 19% |
| Satisfied | 44% | 40% | 41% | 50% | 50% |
| Dissatisfied | 5% | 6% | 4% | 6% | 3% |
| Very Dissatisfied | 1% | 1% | 0% | 1% | 1% |
| I don't know | 38% | 43% | 44% | 31% | 27% |
| Total | 100% | 100% | 100% | 100% | 100% |

Access to mental or behavioral health services

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Very Satisfied | 7% | 6% | 4% | 8% | 12% |
| Satisfied | 23% | 21% | 24% | 22% | 25% |
| Dissatisfied | 7% | 9% | 6% | 6% | 5% |
| Very Dissatisfied | 2% | 4% | 1% | 1% | 1% |
| I don't know | 61% | 60% | 65% | 63% | 57% |
| Total | 100% | 100% | 100% | 100% | 100% |

How frequently do you use programs or services offered by the Swampscott Senior Center?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Two or more times a week | 3% | 0% | 0% | 3% | 16% |
| About once a week | 4% | 0% | 1% | 6% | 9% |
| A few times a month | 2% | 0% | 2% | 3% | 2% |
| About once a month | 1% | 1% | 0% | 2% | 1% |
| A few times a year (e.g., special events) | 8% | 3% | 6% | 12% | 17% |
| Never, I do not use programs or services offered by the Swampscott Senior Center | 82% | 96% | 91% | 74% | 55% |
| Total | 100% | 100% | 100% | 100% | 100% |

If never: What is the reason that you do not currently use programs or services offered by the Swampscott Senior Center? (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| I am not interested | 25% | 17% | 22% | 32% | 40% |
| I participate in programs elsewhere | 15% | 5% | 14% | 25% | 19% |
| I am unaware of activities or programs available | 23% | 16% | 29% | 23% | 15% |
| I do not have time | 17% | 12% | 21% | 20% | 10% |
| I am not old enough | 30% | 75% | 27% | 7% | 2% |
| Hours of operation are inconvenient | 3% | 2% | 4% | 4% | 4% |
| Other | 18% | 9% | 22% | 18% | 22% |

**Figures do not sum to 100%.*

How do you currently obtain information about programs, activities, and services in your community? (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Local newspaper | 51% | 46% | 50% | 57% | 64% |
| Word of mouth | 52% | 60% | 52% | 53% | 55% |
| The Town's website | 20% | 35% | 23% | 15% | 9% |
| Social media postings (e.g., Facebook, Twitter) | 30% | 62% | 35% | 20% | 6% |
| Faith-based organizations | 10% | 9% | 10% | 12% | 12% |
| Senior Center Newsletter | 12% | 2% | 5% | 17% | 34% |
| TV/Radio | 9% | 7% | 7% | 9% | 19% |
| Other | 9% | 10% | 9% | 9% | 11% |

**Figures do not sum to 100%.*

Are you able to access the internet from your home? (Check all that apply)

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Yes, using a smartphone (that is a cellular phone that provides access to the internet) | 67% | 90% | 81% | 66% | 30% |
| Yes, using a home computer, laptop, tablet | 81% | 90% | 89% | 87% | 68% |
| No, I do not have internet access at home | 5% | 1% | 2% | 5% | 21% |
| Total | 100% | 100% | 100% | 100% | 100% |

**Figures do not sum to 100%.*

Do you feel informed about what to do in the event of a weather or other emergency?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 88% | 84% | 85% | 91% | 94% |
| No | 12% | 16% | 15% | 9% | 6% |
| Total | 100% | 100% | 100% | 100% | 100% |

Would you know whom to contact in Swampscott should you or someone in your family need help accessing social services, health services, or other municipal services?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 51% | 44% | 47% | 52% | 70% |
| No | 49% | 56% | 53% | 48% | 30% |
| Total | 100% | 100% | 100% | 100% | 100% |

How much are your daily activities limited by your health or health-related problems?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|----------------------|----------|--------------|-----------|-----------|---------|
| Almost always | 4% | 3% | 2% | 4% | 9% |
| Often | 6% | 2% | 3% | 6% | 16% |
| Sometimes | 15% | 5% | 10% | 19% | 32% |
| Seldom | 18% | 15% | 16% | 24% | 16% |
| Not at all | 57% | 75% | 69% | 47% | 27% |
| Total | 100% | 100% | 100% | 100% | 100% |

Do you now or have you in the past 5 years provided care or assistance to a person who is disabled, frail, or struggling with a physical or mental health condition (e.g., spouse, parent, relative, or friend)?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 49% | 57% | 52% | 46% | 37% |
| No | 51% | 43% | 48% | 54% | 63% |
| Total | 100% | 100% | 100% | 100% | 100% |

If Yes, Did or does this person live with you?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------|----------|--------------|-----------|-----------|---------|
| Yes | 32% | 23% | 26% | 39% | 53% |
| No | 68% | 77% | 74% | 61% | 47% |
| Total | 100% | 100% | 100% | 100% | 100% |

**This table only includes respondents who reported providing care to someone now or in the last five years.*

If Yes, Did this person have the following conditions?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|--------------|-----------|-----------|---------|
| Sensory impairment (e.g., vision, hearing) | 18% | 16% | 18% | 21% | 19% |
| Mobility impairment (e.g., difficulty walking, climbing stairs) | 59% | 57% | 61% | 59% | 53% |
| Recent surgery | 22% | 23% | 18% | 27% | 22% |
| Chronic disease (e.g., cancer, diabetes) | 30% | 30% | 29% | 33% | 24% |
| Alzheimer's or dementia | 25% | 21% | 27% | 24% | 27% |
| Psychological condition (e.g., anxiety, depression) | 15% | 17% | 15% | 15% | 12% |
| Intellectual or developmental disability | 4% | 5% | 4% | 4% | 5% |
| Other | 10% | 9% | 11% | 11% | 9% |

**Figures do not sum to 100%.*

**This table only includes respondents who reported providing care to someone now or in the last five years.*

If Yes, How challenging is/was it for you to care for this person(s) and meet your other responsibilities with family and/or work?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|------------------------------|----------|--------------|-----------|-----------|---------|
| Very Challenging | 22% | 27% | 22% | 19% | 24% |
| Somewhat Challenging | 38% | 38% | 42% | 34% | 27% |
| Neither challenging Nor Easy | 25% | 22% | 24% | 29% | 26% |
| Somewhat Easy | 9% | 9% | 9% | 11% | 7% |
| Very Easy | 6% | 4% | 3% | 7% | 16% |
| Total | 100% | 100% | 100% | 100% | 100% |

**This table only includes respondents who reported providing care to someone now or in the last five years.*

What is your age range?

| | All ages |
|--------------|-------------|
| Under age 55 | 6% |
| 55-59 | 14% |
| 60-69 | 35% |
| 70-79 | 30% |
| 80-89 | 12% |
| 90+ | 3% |
| Total | 100% |

Please select your gender.

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|------------------------|-------------|--------------|-------------|-------------|-------------|
| Male | 40% | 39% | 37% | 44% | 40% |
| Female | 59% | 60% | 62% | 55% | 60% |
| Other | 0% | 0% | 0% | 0% | 0% |
| Do not care to respond | 1% | 1% | 1% | 1% | 0% |
| Total | 100% | 100% | 100% | 100% | 100% |

What is your employment status?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------|----------|--------------|-----------|-----------|---------|
| Working full time | 32% | 73% | 43% | 11% | 3% |
| Working part time | 14% | 7% | 19% | 18% | 9% |
| Retired | 46% | 6% | 35% | 72% | 88% |
| Looking for work | 3% | 8% | 3% | 3% | 0% |
| Other | 5% | 8% | 7% | 2% | 2% |

Figures do not sum to 100%

When do you plan to fully retire?

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--|----------|--------------|-----------|-----------|---------|
| N/A, I am already fully retired | 44% | 4% | 31% | 68% | 89% |
| Within the next 3 years | 9% | 3% | 16% | 9% | 1% |
| In 3 to 5 years | 9% | 11% | 14% | 5% | 0% |
| In 6 to 10 years | 10% | 22% | 13% | 1% | 0% |
| In more than 10 years | 8% | 35% | 3% | 0% | 0% |
| Not sure | 11% | 14% | 13% | 9% | 3% |
| I do not anticipate ever fully retiring | 9% | 11% | 10% | 8% | 7% |
| Total | 100% | 100% | 100% | 100% | 100% |

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.

| | All ages | Under Age 60 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|--------------|-----------|-----------|---------|
| Strongly Agree | 23% | 19% | 23% | 23% | 24% |
| Agree | 60% | 61% | 61% | 61% | 58% |
| Disagree | 13% | 13% | 13% | 12% | 15% |
| Strongly Disagree | 4% | 7% | 3% | 4% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% |

TOWN OF SWAMPSCOTT

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