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Aging in Berlin: A Community Needs Assessment

July 2023

Commissioned by the Town of Berlin

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



REPLIA REPLIA

Town of Berlin

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townadmin@townofberlin.com

Dear Berlin Residents and Community Members,

We are pleased to present the report <u>Aging in Berlin: A Community Needs Assessment</u>, as researched and written by the expert team at the University of Massachusetts Boston Gerontology Institute.

This report is the result of many months of coordination and planning both within the community and among our outside partners. While this may be the first time you are hearing of this initiative, many Berlin residents of all ages participated in programs, discussions, and a community survey over the past year. This research has culminated in the enclosed report which contains feedback and recommendations from Berlin's residents.

The focus areas of this report 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.

We are deeply grateful everyone who participated in this process and provided thoughtful insights including Berlin residents, community leaders, service providers, business owners, and municipal leaders who gave of their time and provided insights into how to make Berlin a more vibrant community. We would also like to thank to Dr. Caitlin Coyle and her team at UMASS for their passion, enthusiasm, and dedication to this project.

We hope you enjoy reading this report and we encourage you to participate in the work ahead to meet our community's needs and improve the lives of Berlin's residents. We intend to distribute this report as broadly as possible and to use the information to develop relevant projects that will have positive impacts on how residents live in the Town of Berlin.

Thank you for your support, vision, and engagement as we work to make Berlin a community for all ages!

Sincerely,

Kristen L. Rubin Town Administrator

Misten Lyuber

Victoria Flynn-Sankaran, LICSW

Council on Aging/Social Services Director

And-Jankaron, LICSW

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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 throughout the Commonwealth.

Caitlin Coyle, PhD, and Mary Krebs, MS, MPPM are primarily responsible for the contents of this report. Other contributors include Ceara Somerville, MS, and the following UMass Boston undergraduate students Roisin O'Keeffe, Danny Caron, Himani Pachchigar, Giana Brandolini, Taylor Carmody, and Bowofoluwa Fahuwa that worked on data entry.

We would like to acknowledge the Town of Berlin for their support of this project. Specifically, we offer our appreciation to Kristen Rubin, Town Administrator, and Victoria Flynn-Sankaran, the Director of both Social Services and the Berlin Council on Aging, who provided guidance and leadership that enabled the success of the project. We are also grateful to the many other Berlin staff and community leaders that made this work possible, alongside our deep gratitude for every Berlin resident that took time to participate in this endeavor.

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Recommended Citation

Krebs, M. and Coyle, C. "Aging in Berlin: A Community Needs Assessment" (June 2023). *Center for Social and Demographic Research on Aging Publications*

Executive Summary

This report describes research undertaken by the Center for Social & Demographic Research on Aging (CSDRA) within the Gerontology Institute at the University of Massachusetts Boston, on behalf of the Town of Berlin. The goals of this project were to investigate the needs, interests, preferences, and opinions of Berlin residents age 18 or older by engaging the community regarding their experiences and needs relevant to the Social Services alongside the Council on Aging's objectives to serve the needs of all Berlin citizens 60 and older. The contents of this report are meant to inform the Town of Berlin, the Berlin COA together with Berlin Social Services (COA/SS), in addition to organizations that work with and on behalf of older residents of Berlin for the purposes of COA/SS mission fulfillment alongside planning and coordination of services for current and future needs of residents. The report will also help to build awareness about issues facing Berlin among community members at large.

In the Winter and Spring of 2023, a series of key informant interviews were conducted with local leaders and decision-makers in Berlin and a demographic profile was generated using estimates from the American Community Survey. Finally, a survey of residents was distributed by mailing a postcard to all residents inviting them to complete the survey online or by phone. Residents age 60 and older received a hard copy of the survey by mail as well. A total of 519 responses to the survey were obtained, representing a return rate of 21%. This is a strong return rate and reflects interest among community residents.

A broad range of findings are reported in this document, highlighting the many positive features of Berlin as well as concerns expressed by residents. While many of our findings, and the recommendations that follow, intersect with the scope of responsibility of the Berlin COA/SS, 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.

We summarize key findings and make the following recommendations to the Town of Berlin:

The demand for programs and services, for residents of all ages, is expected to grow in coming decades; and the interests of residents remain focused on health and access to programs that support independent living.

- o Among those under age 60 and those respondents currently in their 60s, about 20% of them report retiring within the next 10 years. This trend suggests future impacts on the demands for municipal COA and Social Service programs and services in Berlin.
- o The majority of survey participants (52%) report it is very or somewhat important for them to remain in Berlin. Across age groups, 93% age 80 and over, 86% age 70-79, 87% age 60-69, and 74% under the age of 60 responded that it is very or

somewhat important for them to remain living in Berlin. The expectation is that there will be an increased demand over time for municipal COA and Social Services. This trend is also supported by survey write-in respondents indicating concern for "staying in my home" and being able to "receive care (home aide, nursing support)."

- o About 17% would increase participation if programs and services were better suited to needs and interests.
- o When asked about preferences for future expansion of programs and services, differences across age groups were observed. Berliners under the age of 60 specified preference for wellness programming (43%), mental health supports (33%), and adult day/caregiver services (24%). Similarly, respondents age 60-69 specified preference for wellness programs and services (31%) and adult day/caregiver supports (15%), with interest in lunch or other food offerings (25%). A larger share of Berliners age 70 and over (56%) specified a preference for lunch or other food offerings and wellness supports (35%). Additional write-in responses voiced preference for more programs "on common health challenges" and "issues like financial planning, end-of-life and Wills."

Recommendations:

- o Expand capacity of the COA/SS department to offer more social and health programming. For example, consider hiring part-time instructors or program coordinators to ensure continuity and variety of program delivery.
- o Investigate opportunities for providing COA/SS programs and services at additional satellite locations in the community, such as public housing, the library, the schools, and local businesses.
- o Explore identifying volunteer guest speakers to present topics of interest in the community or contribute articles to the Powder House News publication available in-print and online. Perhaps these volunteer positions could be open to the property tax work off program.
- o Pilot-test a weekly or monthly lunch program. Consider working with the local school district or the Aging Service Access Point¹ to coordinate expanded food delivery.
- o Consider being designated as an Age and Dementia Friendly² community, which provides an avenue of community organizing and outreach that could support the effort to build a renewed perception of aging in Berlin.
- o Routinely assess the adequacy and range of health and community support services offered for promoting, maintaining and restoring health of Berlin's residents.

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¹ https://www.agingservicesma.org/

² https://www.mass.gov/info-details/examples-of-age-and-dementia-friendly-community-characteristics

There is desire for space to gather and receive services; and current capacity is not sufficient.

- o Key informant interviewees cited a reluctance among residents to engage with Social Services and COA programs and services as the space is widely considered "unwelcoming" and "cramped."
- o Nearly one-quarter of survey respondents (23%) would be more likely to use the Berlin COA/Social Services if programs and services included residents of all ages and functioned like a community center.
- o The current COA/SS Town Hall space is insufficient, which has implications for accessing COA/SS programs and services. Key Informant interviewees and survey respondents both cited "the limited size" and the "lack of permanent dedicated space" as key challenges. Survey participants offered preference for "added choices in a large space" such as the Old Town Hall.
- o When asked about the likelihood of participating at an all-ages community center, 47% of survey respondents of all ages stated they would be very likely or somewhat likely to participate.

Recommendations:

- o Explore additional ways to connect with community members for input and feedback about what a unifying public space might look like. Explore multiple avenues of communication and information (e.g., written feedback, email or online feedback, public forums) and ensure that perspectives representative of the community are heard, to gain a better understanding for how to join and align all segments of the population.
- o Consider updating the COA/SS space with new paint, decorations, and furniture to create a more welcoming space that can encourage new participants to come and participate.
- o Organize a task force to identify suitable existing space in Berlin while exploring the appetite and potential for a Community Center. Include Town Departments that may be most affected by the development of a center, such as the departments of recreation, the COA/SS, and school leaders.

Awareness and understanding of the Berlin COA/SS is uneven among residents.

- o Lacking a sense of belonging is a deterrent that was commonly reported. For example, a substantive share of survey respondents cited feeling excluded by sharing write-in responses stating, "lived here 10 years still treated like an outsider" and "never felt included." Limits to awareness and inclusion are exemplified by a survey participant who commented, "not sure about events…feel odd just showing up."
- o When surveyed, 12% of adults in Berlin reported not knowing someone living nearby that can be relied on for help.

- o Most key informant interviewees described an ongoing reluctance of Berliners to request help, even during emergency events, for "fear of being seen as needing assistance" by other members of the community. Recent examples stated during interview discussions described this stigma as including requests for routine medical transport, essential errands like banking and food shopping, personal injury, visits to the food bank and/or requesting fuel assistance.
- o Over one in four survey respondents (26%) rate assistance with local and state support programs as very important to them or their families, while 30% of those surveyed report they do not know what is offered.
- o 39% of respondents reported that having more knowledge about the programs and services available would increase their likelihood of participating.

Recommendations:

- o Explore developing a resident ambassador program to educate residents with information about existing resources to be conduits between COA/Social Serivces and the community at-large, this could possibly expand the current property tax work off position.
- o Investigate ways to welcome first-time participants who are reluctant to participate on their own (e.g., a "new member day" or a "bring a buddy" program to welcome new participants).
- o Begin a rebranding effort to raise awareness about what is offered by the Berlin COA and Social Services. Perhaps changing the name to be more inclusive and creating an image that reframes overall health, mental health, and aging as a positive and active experience may empower residents to participate in the community.
- o Expand the use of technology (e.g., phone or other mobile devices) to include residents who are unable to leave their home in existing programs through video technology or making "friendly visits" by telephone.

Costs of living and availability of accessible housing options are perceived as challenging in Berlin, together with home modifications and repairs.

- o Almost all key informants alongside survey participants reported challenges associated with housing, including that property taxes are becoming unaffordable.
- o There are extremely limited options within Berlin to downsize. Three percent of Berliners surveyed noted that they would prefer a smaller home or different residence, suggesting the desire for added housing options for those who want to downsize in the future.
- o When asked about preferences for type of housing, 56% of the younger participants preferred a single-family home. Among respondents age 70s, a senior independent

- living community is first choice and an assisted living is the most preferred housing type for the future, reported by those age 80+.
- o Cost of living, particularly rising property taxes, is named as the top concern among survey respondents as they think about being able to stay in Berlin as they age. One survey participant summarized the challenges reported by many residents for, "the rising costs of electricity, upkeep of a home, lawn, snow removal, and repairs." A share of write-in responses voices concerns for an ability to "access affordable housing for my children" and "how much maintenance is required at our farm." Others questioned that the "cost of living is constantly rising as are taxes" and "at some point we probably won't be able to afford to live here."
- o Nearly a third of survey respondents report needing some kind of home repair to remain living safely over the next 5 years. Among them, 19% are unable to pay for such repairs.

- o Consider ways of connecting residents with local resources for home repair or modifications. Including sources of funding, but also with other individuals who can do minor tasks or projects around the home.
- o Advocate for options that current residents prefer.
- o Promote awareness of various housing options across the lifespan and continue to <u>contribute to local conversations</u> about housing options for older adults who wish to find supportive housing.
 - Advocate for options that current residents prefer, including types of housing that offer low maintenance and single floor living. Single-family homes, assisted living communities and senior independent living units are desirable housing options.
 - Host a virtual forum to promote community conversations and awareness related to home sharing opportunities. Include representatives from Nesterly³, a social enterprise that is dedicated to building intergenerational engagement and access to affordable housing through home sharing or the TreeHouse model⁴.

³ https://www.nesterly.com

⁴ https://www.treehousefoundation.net/

- o Promote awareness of existing property tax relief program.
 - Document the number of residents who are "turned away" from the existing program due to eligibility requirements or other reasons to establish recommendations for expanding access. If vacancies exist, consider a recruitment campaign.
 - Explore other incentive programs for volunteers.

Desire for improved accessible outdoor spaces

- o A third of Berliners (33%) have a physical disability, including 13% who have two or more disabilities. Survey respondents reported having a condition limiting their participation in the community reported being dissatisfied or very dissatisfied (19%) with handicap accessibility features.
- o Conversations with key informant interviewees illuminated issues of accessibility for Berliners experiencing "mobility constraints," both inside and outside of municipal structures.
- o Availability and lighting of sidewalks, conveniently located public restrooms, and availability of benches or shaded seating in public areas/along walkways each received the lowest levels of satisfaction for survey participants when asked to rate their satisfaction with the livability of features in Berlin. The absence of these features can have serious implications for mobility around Town.
- o Outdoor fitness options like "completing a rail trail" and the "ability to bike or walk" were cited as priorities by survey participants, indicating resident's desire for staying healthy, active, and independent.
- o 14% of survey respondents reported having an impairment that limits their ability to participate in the community. This share nearly triples for those age 80 or older (40%).

- o Plan the dedication of existing benches or installation of new benches as "age friendly" or "happy to chat" benches that include features like shade, arm rests, and solid pathways to/from the bench.
- o For many community members of all ages, the fear of not being able to locate a public restroom is enough to keep them homebound. Consider engaging with local business, organizations, and municipal entities to document where accessible bathrooms exist and make a map of these restrooms available to older residents via the Town website.
- o Ensure that park or public space redesign or beautification plans in Berlin include adequate input from residents of all ages—this might mean hosting daytime and

- evening feedback sessions and targeted outreach to adults encouraging them to be involved.
- o Encourage collaborative community garden projects where residents are paired with a household who can host the raised garden bed and they collectively care for and benefit from the plantings.

Many Berlin residents need support due to physical or cognitive conditions, and many caregivers need help.

- o More than one-third (38%) of survey respondents reported having been a caregiver for someone who is frail or disabled within the past 5 years. Over two-thirds (68%) of caregivers reported that it is challenging to provide care and complete their daily responsibilities, including 65% of those in their 60s.
- o Rates of caregiving were highest among younger respondents, with 40% under 60 years of age.
- o Key Informant interviewees cited rising community demand for local supports that include "informal in-home service, and on-call support from medical and mental health professionals in lieu of limitations to regional partners capacity to provide assistance to Berlin's residents."

- o Create new ways of providing information and assistance for caregivers, support groups for caregivers, and provide information about referral resources available.
- o Consider hosting a family caregiver "resource fair" as an opportunity to connect the COA/SS with family caregivers.
- o Consider creating a COA Homemaker position, part-time, from 16-18 hours a week. This position could focus on providing short-term in-home support (e.g., light housekeeping) for residents.
- o Track demand for this municipal program and consider further expansion of the role as needed.
- o Consider hosting a "Caregiver's Night Out" to provide residents who might be caring for a spouse, parent, or grandparent an opportunity to enjoy a night of entertainment.
- o Explore partnerships with volunteer groups and other aging service providers to provide respite care during the event.
- o Assess the potential for offering a Memory Café or providing resources of nearby Cafés for residents and their caregivers to attend.
- o Consider pilot-testing a volunteer respite program.

- o Encourage City employees or resident volunteers to become "dementia friends" to learn more about communication and reduction of stigma around dementia.
- o Continue to coordinate with other COAs and organizations to connect Berlin caregivers with existing services.

Obtaining supplementary and accessible transportation is a concern for some of Berlin's residents as they age.

- o Maintaining independence is a major concern for survey respondents and one key facilitator of this independence is transportation. This sentiment was summarized by respondents indicating future concern due to an "ability to drive-nothing is within walking distance," and an "ability to get around town, run errands, address health needs."
- o Only 5% of respondents do not drive, although this number is significantly larger when looking at just those age 80 and older, as 29% of this older segment of the population do not drive. Many residents who do drive, modify their driving to make it easier or safer.
- o Among those who do not currently drive, 29% have missed or needed to reschedule a medical appointment because of a lack of transportation within the past 12 months. This is compared to only 1% of those who drive themselves and 7% of those who drive with some modifications.

- o Conduct targeted, proactive, outreach to raise awareness of the existing programs that provide transportation to medical appointments and for other trips.
- o Consider <u>developing a local "travel training" program</u> where residents can learn about options and navigation.
- o Promote access to driver education and refresher courses for all drivers.
- o Target information to segments of the community within Berlin who may have particular need for transportation services, including those living alone and those with disabilities. Consider additional outreach for transportation when inclement weather is anticipated.
- o Explore the expansion of <u>volunteer transportation programs beyond medical</u> <u>appointments (e.g., Friends in Service Helping⁵ (F.I.S.H.) to expand door-to-door transportation to the Senior Center or other social gatherings or shopping excursions and appointments.</u>

⁵ https://fishlexington.org/

Introduction

The Town of Berlin is small community with rural attributes that is situated about 15 miles northeast of the City of Worcester, Massachusetts' second largest city. The Town possesses many community assets such as conservation lands, a tradition of farming and gardening, multi-generational home ownership, strong Town leadership and resources, alongside an energized enthusiasm for intergenerational opportunities to engage residents across the lifespan. Additionally, several volunteer-backed local nonprofits such as Nashoba Neighbors, Berlin's Food Pantry, and faith groups offer an array of programming and supports for older residents as well as their families. Providing physical gathering space and mirroring the interests of the community are Berlin's 1870 Hall and the XIX Carter that feature local arts happenings, programs, classes, community gatherings, events, and opportunities to socialize. The Berlin General Store located in the heart of Town provides a strong sense of community, connection, and communication, alongside meals and provisions.

As a municipal entity, the Town of Berlin operates both a Council on Aging and Social Services Department (COA/SS) to assist generations of adults and their families within the community. Although the scope of responsibilities is unique, they share some overlap and are managed solely by a single Director. Taken together, these departments address any general health, mental health, or social need of residents, while also enhancing quality of life factors for older adults such as health screenings, nutrition, education, and exercise activities. As of 2022, charge for the COA/SS is overseen by a full-time Director who splits time and responsibilities equally between the two departments and is the sole Town employee of the COA/SS. Part-time assistance is available to the COA/SS Director, furnished though a single position created by Berlin's Senior & Veteran Tax Work-Off program. The nature of responsibilities for this post primarily relate to coordinating COA transportation appointment requests, where two part-time municipal employees serve as Van Drivers on a weekday schedule.

As the community evolves, it is likely the municipality will continue to engage residents in a process of identifying needs and preferences such that programs and services offered reflect the individuals that make up Berlin. The distinctive responsibilities and tasks of both departments, overseen by a single full-time director and municipal leadership, are detailed below.

The Berlin Council on Aging

The Berlin Council on Aging (COA), a municipally appointed board, meant to link residents to needed resources and desired activities. Virtually every city and town in Massachusetts has a COA, and in most communities, they serve as the only public social service agency. Each COA is expected to establish its own priorities based on local needs and resources. Many COAs are responsible for operating a senior center, a community facility housing senior services and programs, along with the staff and volunteers offering them.

Berlin's COA is charged with providing services, programming, and support to the town's population so that they may live well and independently in the community. This work is done in concert with other local town departments and various area private and public providers and organizations, including the 1870 Town Function Hall, XIX Carter, and Aging Services Access Points—the regional Area Agency on Aging serving Berlin—the Massachusetts Council on Aging (MCOA), Nashoba Boards of Health, and the Executive Office of Elder Affairs (EOEA). The goal is to provide a welcoming environment that services the diversity of the Town's older adult residents. The Berlin Council's mission is "to enhance the quality of life of Seniors in the community by providing services which include nutrition, health screening, education and exercise programs that meet their needs." Working toward that end, they assist in delivering programs and initiatives that shape and enrich the experiences of generations of older adults.

In general, when considering the mission of COAs, observers commonly think of two sets of responsibilities. First, COAs promote well-being among older residents by offering activities that appeal specifically to older adults and that promote personal growth and social engagement. This includes things like parties, arts classes, and educational lectures. Taking Berlin's limited space and resources for hosting activities into consideration, exercise classes like Yoga and Tai Chi held on a regular basis are good examples of consistent programming offered by the COA and appealing to residents. Second, in general, COAs provide services to older residents and their families that promote physical and emotional wellness. Berlin meets this challenge by collaborating with regional resources to offer regularly scheduling meal delivery, blood pressure clinics, health screenings, and weekday transportation services, which are strong examples of such services.

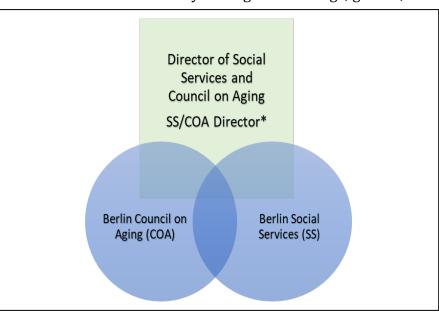
Many observers are not aware of two additional important responsibilities of COAs. Their staff and members link older residents in the community to existing programs for which they may be eligible by providing needed information and referring residents to appropriate programs and services. For example, staff may help residents apply for income support programs or health insurance made available through the state or federal government. Finally, COAs provide leadership within the community around issues faced by older adults, by serving on municipal boards, interacting with other municipal offices, and serving as resources to residents and organizations.

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⁶ This mission statement was retrieved in March of 2023 from https://www.townofberlin.com/sites/g/files/vyhlif4156/f/pages/town_reports_2022_online_4-5-2023.pdf

The Town of Berlin's COA members include two Co-Chairs, one Treasurer, and four serving members (for total of seven serving members with three-year terms) in addition to the COA/SS Director. The COA's members meet publicly on the last Tuesday of every month at 4:00p.m. via a Zoom invitation published on the Town's website. Berlin's Social Services Department works in tandem with the COA and is tasked with "addressing any health, mental health, or social needs of residents and are available to everyone regardless of age, gender,

sexual orientation, socioeconomic status, race, culture, or ethnicity."8 In addition to serving as a hub of information and referral to that resources support mental physical and wellness—and maintaining independent living, the COA has the added responsibility of planning and executing social and recreational programming to ensure that older residents are active and engaged. The Belin COA offers exercise. education, and health programming



*Berlin Council on Aging and Social Services Director (COA/SS Director) implements the missions of both departments at a ratio of

primarily in the COA's Room 118, located on the lower level of Berlin's Town Hall. Virtual options are available and certain events take place at the 1870 Town Function Hall.

Social Services

In the fall of 2021, ARPA funds allowed for the Town to formalize a Social Services Director position for the Town. Given the Covid-19 pandemic outbreak and that over half of Berlin's population at this time is age 45 or older, adaptation and delivery of services were a challenge. Beyond prioritizing families and teens in the community, Social Services arranged availability of the Covid-19 vaccine. Additionally, the Director, a licensed social worker, connects residents with needed resources to access public housing, urgent transportation, fuel assistance, social security, health providers, safety checks, and Medicaid/Medicare enrollment. Although the COA/SS Director's time will be split between COA and Social

⁷ Information retrieved from Town website on June 6, 2023 from https://www.townofberlin.com/council-aging/pages/coa-meetings

⁸ Information retrieved from Town website on June 23, 2023, page 45 of the 2022 Town Report, visiting: https://www.townofberlin.com/sites/g/files/vyhlif4156/f/pages/town reports 2022 online 4-5-2023.pdf

Services offices, Social Services have been collaborating with both the police and fire departments, completing follow up to calls and going on-scene when necessary, which also benefits the health and well-being of Berlin's older residents. While both COA/SS departments provide information and referral to residents of all ages about resources that can support their physical and mental wellness, as requested, the Social Services department has the added responsibility of supporting first responders in their work. Given the close proximity of the COA/SS Director's office to Berlin's Police and Fire Department offices, all located within Berlin's Town Hall, efficient coordination of Social Service aid and response facilitates inter-department collaboration better serving the community.

Operations of the Berlin Council on Aging and Department of Social Services

For the following section, data reported about Berlin's Council on Aging/Social Services (COA/SS) was gathered from newsletters⁹, the COA/SS Director, the Town Administrator, and from town reports.¹⁰ As the numbers of older residents increase, the need for resources dedicated to this segment of the population will also continue to grow and to change. Thus, it is crucial that the Berlin COA/SS plan in earnest to assure that resources are used efficiently and effectively to meet the current and future needs of older people in the Town.

As previously mentioned, the current position of the COA/SS Director is full-time and is municipally funded. The Director can be contacted by Berlin residents through a variety of modes, either in-person at Town Hall, via email, by the Town's website using an online form, by phone or my word of mouth referral from other municipal departments. The hours of operation are weekdays, Monday through Friday, between the hours of 8:00a.m. and 4:30p.m.. Contact details are publicly available by visiting Berlin's Town website 11 and are listed in the Powder House News, available online or in-print.

Initiatives offered through the Berlin COA/Social Services include:

- *Transportation:* The Berlin COA provides a van service Monday through Friday with advanced notice. Appointments can be made either online or by telephone and require 48-72 hour notice essential and/or medical transportation.
- <u>Health Management and Crisis Referral:</u> The Berlin Social Services/COA Director is responsive to calls requesting assistance, both from residents as well as through calls

⁹ Powder House News retrieved online on May 29, 2023 from https://www.townofberlin.com/council-aging/pages/powder-house-news

¹⁰ The 2022 Town Report retrieved on May 30, 2023 https://www.townofberlin.com/sites/g/files/vyhlif4156/f/pages/town reports 2022 online 4-5-2023.pdf

¹¹ Information retrieved from Town website on June 6, 2023 by visiting: https://www.townofberlin.com/social-services

from Emergency Services to address issues of health, wellbeing, and referrals to available regional resources. In the Fall of 2022, Social Services office opened in public safety, outside of both police and fire departments.

- <u>Nutrition Offerings:</u> The Town of Berlin COA coordinates with the Montachusett Opportunity Council to provide three meals to each qualified elder on Tuesdays and Thursdays. Each individual receives one hot, one cold, and one frozen meal delivered via volunteer driver. Additionally, farmers market coupons are available in summer to older residents and low-income families. The COA provides Grab and Go meals to seniors twice annually for pickup at town offices or delivered to those who are unable to travel. Last year, the COA provided over two hundred meals to older adults in need.
- <u>Support Services:</u> Residents can receive health screenings through Berlin's collaboration with the regional Nashoba Associated Board of Health (NABOH), including blood pressure screenings and Covid-19 vaccines at the COA meeting room on the first Thursday of each month. Additionally, durable medical equipment is available for loan including walkers, toilet extenders, bed rails, canes, wheelchairs, and shower chairs.
- <u>Recreation, Fitness & Social Events:</u> Fall Prevention Classes, Yoga, and Tai Ch are available on an ongoing basis and are open-ended. Participants are asked to make a contribution on \$2 for each class. Offerings take place both in-person at the COA meeting room as well as virtually. An archive of previous classes is posted to YouTube.
- <u>Newsletter:</u> The Powder House News is a print newsletter which is mailed to each senior household in Berlin every-other-month. It provides information on health, legislative issues, and other topics of interest for older residents in the community. Current issues as well as archived versions of the Powder House News is also available online at: https://www.townofberlin.com/council-aging/pages/powder-house-news.
- <u>Volunteering</u> Individual in-kind contributions are made across the community and support a variety of activities and transportation. Two part-time van drivers operate COA/SS van service Monday through Friday. Appointments for transportation are coordinated by a member of the tax write-off program.
- <u>Education and Social Events for the Community:</u> The COA collaborates with the Berlin Seniors to provide various entertainment and events such as Swing and Dixieland ensembles and the annual Twinkle Tour, with planning in progress to co-sponsor additional entertainment for Berliners.

This report presents the results of a comprehensive needs assessment of adults in Berlin as it relates to livability. A multi-pronged project was undertaken in order to support planning

on the part of the Council on Aging (COA) and Department Social Services (SS), as well as the broader community. Results presented here focus on the characteristics and needs of Berlin residents who are age 18 and older. While the primary goal of this report is to support COA/SS planning, a secondary goal is to present information that will be useful to other Berlin offices and organizations interacting with older residents.

Methods

This assessment utilized both qualitative and quantitative data collection methods alongside rigorous analyses in order to capture a broad and deep understanding of Berlin and its older residents. Methods used in compiling this report include analysis of existing data and primary data collected through qualitative and quantitative methods. Demographic material used in this report was drawn from the U.S. Census Bureau (the decennial censuses and the American Community Survey) and from projections generated by the Donahue Institute at the University of Massachusetts. Primary data was collected through qualitative methods, including key informant interviews, and through a community survey. Additional information about the Berlin COA/SS was retrieved from material drawn from the Town's 2022 Annual Report as well as original data collected for this study.

Demographic Profile

As an initial step toward understanding characteristics of the Town of Berlin's adult population through quantitative data, we generated a demographic profile of Berlin using data from the decennial U.S. Census and the American Community Survey (ACS)—a large, annual survey conducted by the U.S. Census Bureau. For purposes of this assessment, we primarily used information drawn from the most current 5-year ACS files (2017-2021), along with U.S. Census data for the Town of Berlin to summarize demographic characteristics including growth of the older population, shifts in the age distribution, gender, race and education distributions, householder status, living arrangements, household income, and disability status.

Key Informant Interviews

In the Winter of 2023, we conducted individual interviews with six individuals who hold leadership positions in Berlin. The current Director of Social Services/Council on Aging (COA/SS), Berlin's Town Administrator, a member of the Select Board, the Police Chief, and Fire/EMS Chief each participated in these interviews. An additional detailed discussion took place with a local nonprofit president that plays a role central to the community by heading an organization offering programming and events in a thriving community space. Each dialogue focused on the interviewees' perceptions relating to unmet needs of adults in the community, and how the growing size of the older population is impacting Berlin alongside the work that the key informants do. Interviews were conducted remotely via video conference as well as in person. Interviews ranged from 60-120 minutes.

Community Survey

In collaboration with the Town Administrator and the COA Board members, a community survey was developed for this study and a postcard was mailed to all residents aged 18 and over (N=2,877). A mailing list was obtained from the Berlin Town Clerk, based on the most current municipal census. Postcards were mailed to participants alerting them that they would be receiving a survey in the coming weeks. Subsequently, printed surveys were mailed to the sample of Berlin residents meeting the 55 and over age requirement, along with a postage-paid return envelope (n=1,094). As well, the survey was made available via the Town's website. A total of 519 responses to the survey were obtained, representing a strong return rate of 21% (see **Table x**). Roughly 50% (n=301) were returned online, and the rest of the responses were returned by mail. In **Appendix A**, response distributions are shown by age group.

Data Analysis

Data collected for the resident survey were analyzed using simple descriptive statistics, including frequencies and cross-tabulations, and are reported in full in **Appendix A** and throughout the results section of this report. Some responses elicited through open-ended questions were extracted and cited verbatim within this report (e.g., "What are your greatest concerns about your ability to continue living in Berlin?"). Detailed notes taken during the study's qualitative interviews were reviewed by multiple project staff and used to characterize and categorize the ways in which aging issues are impacting adults and individuals who work with adults across the Town of Berlin. We used information from all sources of data to develop recommendations reported in the final section of this report.

Results

Demographic Profile

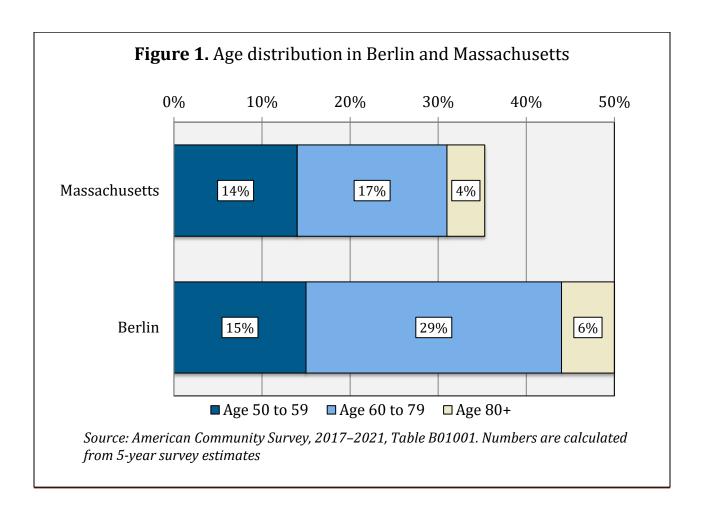
According to American Community Survey (ACS), there were 3,326 residents living in the Town of Berlin in 2021. About 50% of the population (1,660 individuals) were age 50 and older (See **Table 1**). Residents who were age 50 to 59 (490 individuals) made up 15% of the population; residents age 60 to 79 (954 individuals) comprised around 29%, and 216 residents (6%) were age 80 and older.

Table 1. Number and percentage distribution of Berlin's population by age category, 2021

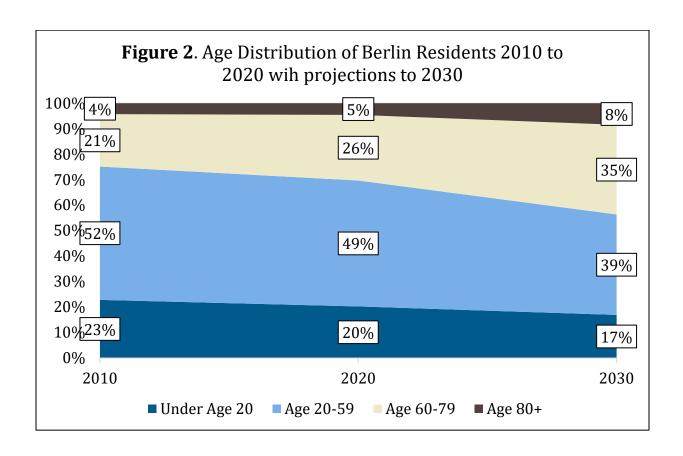
| Age Category | Number | Percentage |
|------------------|--------|------------|
| Under age 18 | 610 | 18% |
| Age 18 to 49 | 1,056 | 32% |
| Age 50 to 59 | 490 | 15% |
| Age 60 to 79 | 954 | 29% |
| Age 80 and older | 216 | 6% |
| Total | 3,326 | 100% |

Source: American Community Survey, 2017-2021, Table B01001. Numbers are calculated from 5-year survey estimates.

Comparatively, the share of Berlin population age 50 and older is substantively higher than the overall state of Massachusetts (**Figure 1**). About 35% of the Massachusetts population was in the 50+ age group in 2021, compared to approximately 50% of the Berlin population. In relation to the Commonwealth, Berlin had a higher portion of residents age 60 and older. The share of Berlin residents age 80 and over is also higher than the one estimated for the state as a whole. In 2021, Massachusetts residents age 60 and over comprised about 21% of the population, including 4% age 80 and over. In Berlin, about 35% of the population was 60 or older, including 6% who were 80 years or older.



Population growth in the Town of Berlin has been concentrated in older age groups. Between 2010 and 2020 decennial census, the population of all ages increased by 10% in Berlin. (*Data come from the U.S. Decennial Census, Table p12, 2010-2020*). The absolute numbers of residents age 60 and over also grew substantially during this time period from 712 in 2010 to 957 in 2020. The segment of Berlin's population age 70 and older increased in size by 150% during this period. **Figure 2** shows the age distribution of Berlin's population from 2010 to 2020 and population projections for 2030. In 2010, about 25% of Berlin's population was age 60 and older (see Figure 2); and this percentage steadily increased by 2020 (31%). Donahue Institute projections suggest that by 2030, 1,482 residents, or 43% of Berlin's population will be age 60 and older---35% of Berlin's population will be between the ages of 60 and 79, with an additional 8% age 80 and older.



Socio-Demographic Composition of Berlin's Older Population

Berlin is much less diverse than the state with respect to race. For all ages combined, about 93% of Berlin residents report their race as White non-Hispanic, compared to 71% in Massachusetts (*ACS*, 2017–2021, Table B01001A). However, among older adults, Berlin is also less diverse, with the large majority (99%) of adults over the age of 65 reporting their race as White non-Hispanic. **Table 2** displays the race and ethnicity of Berlin residents of all ages. The remaining ¹² percentage of the population 65 and older reported Asian (2%).

¹² Other includes Hispanic, Black, and other race.

Table 2. Race distribution of residents, all ages, in Berlin

| Race | Number | Percent |
|------------------------------|--------|---------|
| White | 3,109 | 93% |
| Two or More Races | 117 | 4% |
| Asian | 62 | 2% |
| Black or African American | 35 | 1% |
| Other | 3 | <1% |
| Total | 3,326 | 100% |

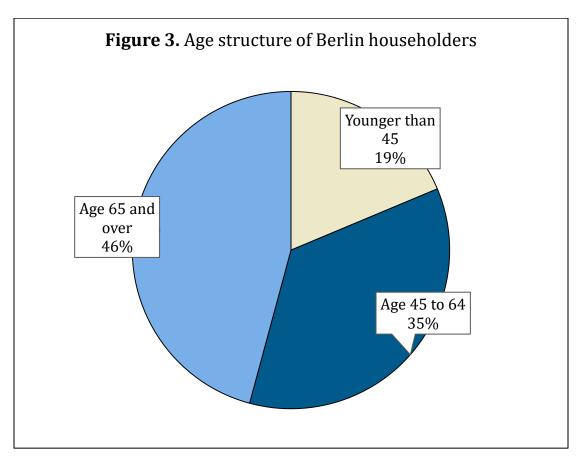
Source: American Community Survey, 2017–2021, Tables B02001. Numbers are calculated from 5-year survey estimates.

Currently, roughly 7% (N=128) of Berlin residents age 18-64 speak a language other than English. Similarly, 6% (N=59) of older Berlin residents 65+ speak a language other than English at home (*ACS, 2017–2021, Table B16004*). Of those 18-64 years of age who speak another language, 5% speak an Indo-European language, 2% speak Asian or Pacific Island languages, and less than 1% speak Spanish. Similarly, of those 65+ who speak another language other than English at home, 6% speak an Indo-European language, 6% speak an Asian or Pacific Island language, and less than a half of a percent report speaking Spanish at home.

The vast majority of Berlin's 1,311 households are householders who are middle-aged or older. According to the U.S. Census Bureau, a "householder" is the person reported as the head of household, typically the person in whose name the home is owned or rented. Residents age 45 and older comprise 85% of all households in Berlin¹³ and residents age 65 and over comprise 48% of all households in Berlin (**Figure 3**).

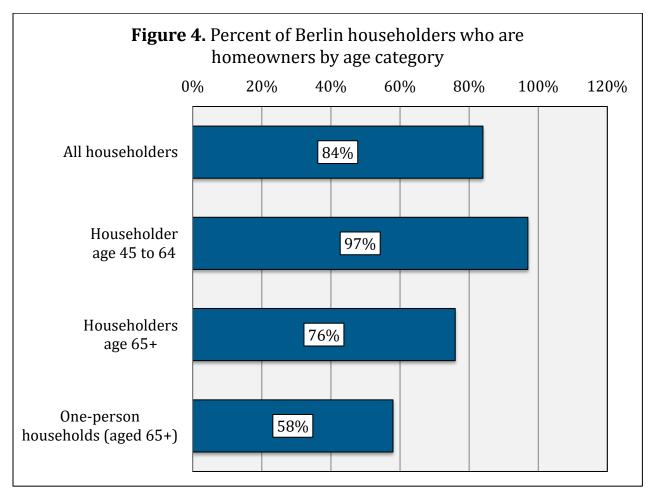
20

 $^{^{13}}$ Many available Census data on the older population of Berlin are based on ages 45 and 65 as reference points rather than ages 50 and 60, as are used elsewhere in this report.



Source: American Community Survey, 2017–2021, Table B25007. Numbers are calculated from 5-year survey estimates.

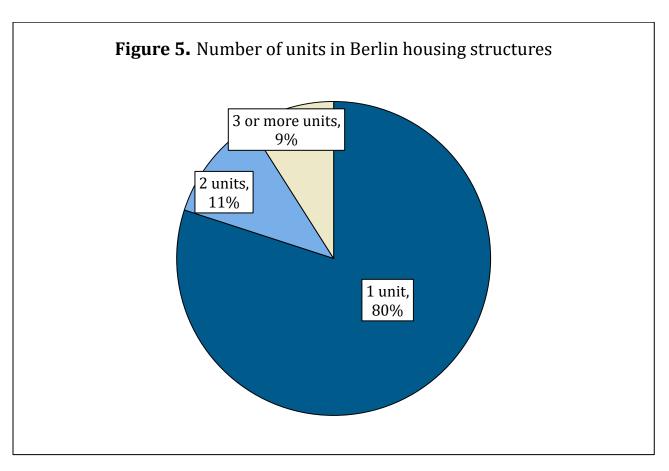
Approximately 84% of Berlin householders live in homes that they own or are purchasing (**Figure 4**). Nearly 97% of householders age 45 to 64 own their homes, and 76% of householders 65 and older own their homes. The number of older homeowners has implications for what amenities and services are likely to be needed and valued by members of the community. Home maintenance and supports are often necessary for older homeowners—especially those who live alone—in order to maintain comfort and safety in their homes. A sizeable share of Berlin residents who are 65 and older and live alone, also rent their home (51%).



Source: American Community Survey, 2017–2021, Tables B25007 and B25011. Numbers are calculated from 5-year survey estimates.

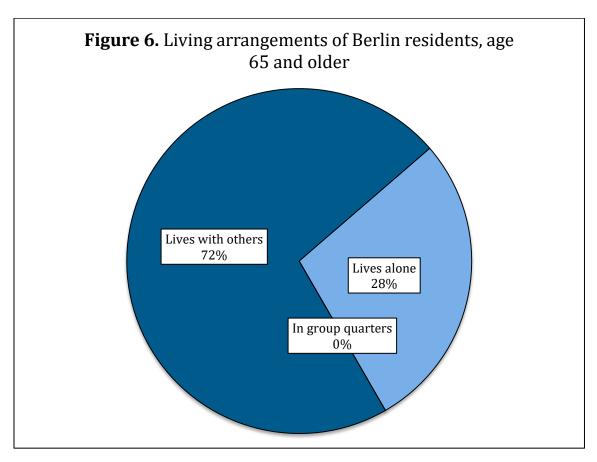
Additionally, 60% of Berlin's 1,311 households have at least one individual who is age 60 or older (*ACS 2017–2021, Table B11006*). This proportion— which is likely to increase in the future— generally reflects the widespread demand for programs, services, and other considerations that address aging-related concerns, including health and caregiving needs, transportation options, and safe home environments.

Among the 1,358 housing structures in Berlin (**Figure 5**), 80% are single unit structures and the remaining 20% are housing structures that contain two or more housing units, which include apartment complexes.



Source: American Community Survey, 2017–2021, Table B25024. Numbers are calculated from 5-year survey estimates.

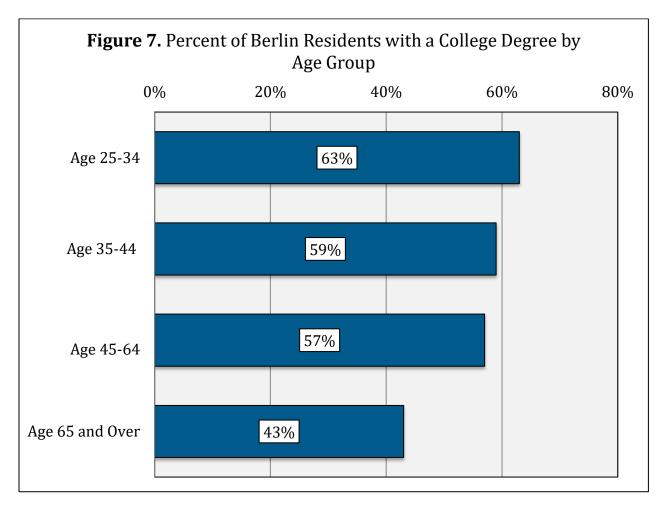
Nearly one out of three Berlin residents who are age 65 and older (30%) live alone in their household whereas 69% live in households that include other people, such as a spouse, parents, children, or grandchildren (**Figure 6**). Additionally, around 1% of older Berlin residents live within group quarters.



Source: American Community Survey, 2017–2021, Table B09020. Numbers are calculated from 5-year survey estimates.

American Community Survey estimates on education suggest that Berlin residents are well educated on average, illustrated in **Figure 7**. Of note, the percent of educational attainment decreases as the age of residents increase. Specifically, about 43% of persons 65 and older have either a bachelor's degree or a graduate/professional degree, including 5% having earned an associate degree (*ACS*, 2017–2021, Table B15001). Conversely, 63% of Berlin's adult population age 25 to 64 have earned the same educational attainment. This educational profile contributes to the vitality and character of the community, which depends on older adults who value opportunities to be involved through volunteer and civic engagement activities, as well as late-life learning opportunities.

Figure 7. Percent of Berlin Residents with a College Degree by Age Group



Source: American Community Survey, Educational Attainment for The Population 18 Years And Over, 2017–2021, Table B15001. Numbers are calculated from 5-year survey estimates.

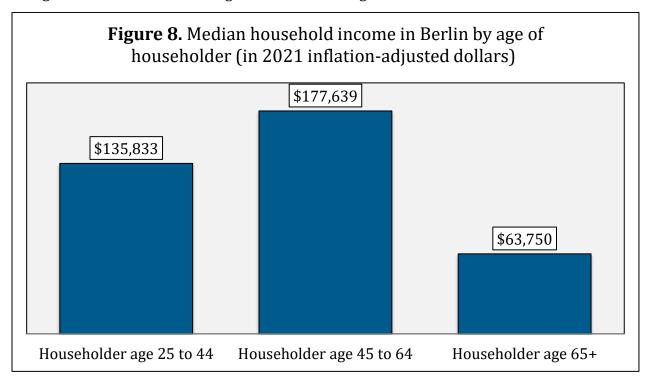
Similar to older adults living in communities throughout the U.S., a large proportion of Berlin residents aged 65 and over remain in the workforce. As four in five of Berlin's adults age 25 to 59 (86-96%) participate in the workforce, 35% of adults age 65 to 74 report participating in the labor force. Of those age 75 and older, more than 20% remain in the workforce (*ACS*, 2017–2021, Table S2301).

Nearly two hundred men in Berlin report Veteran status which includes roughly 7% of males age 18 and over. (*ACS*, 2017–2021, Table B21001). As a result, many of Berlin's residents may be eligible to receive some benefits and program services based on their military service or that of their spouses.

Regarding housing cost, for both, owners and renters, the high share of housing costs decrease as the household income increases. However, there is a higher share of owner-occupied households spending more than 30% of their income in housing costs compared to renters, regardless of the level of income. About 32% of renter-occupied households spend

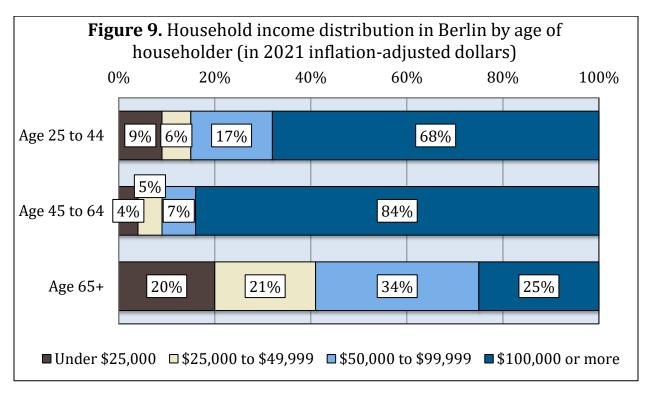
more than 30% of their income in housing costs compared to 58% of owner-occupied households.

With respect to household income, there is some comparative disadvantage of some older residents in Berlin. Residents' median household income is higher than the one estimated for Massachusetts as a whole, \$106,908 compared to \$89,026 (*ACS, 2017-2021, Table B19049*). Among Berlin's householders those aged 45 to 64 have the highest median income at \$177,639—which is substantively higher than the statewide median for this age group (\$109,641) illustrated in **Figure 8**. Among householders 65 and older, the median income is \$63,750, only slightly higher than the statewide median for this age group (\$56,483), while \$135,833 is the median income of younger Berlin householders. Generally, older residents living alone in Berlin are at the greatest disadvantage in terms of household income.



Source: American Community Survey, 2017–2021, Table B19049. Numbers are calculated from 5-year survey estimates. Note: Includes only community households, not group quarters.

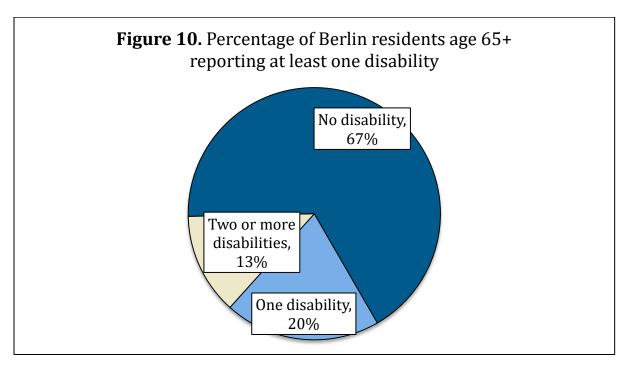
The economic profile of older Berlin residents relative to younger residents is further illustrated in **Figure 9**. About one-quarter of Berlin residents age 65 and older report incomes of \$100,000 or more, whereas over two-thirds of households headed by young adults report this income. By comparison, approximately four in five households headed by residents aged 45-64 report this level of income. A large share of households headed by someone age 65 and older (20%) report annual incomes under \$25,000. This compares with just 9% of households headed by individuals age 45 to 64 having incomes under \$25,000. Thus, there is a sizeable segment of Berlin's older population that is at risk of financial insecurity or economic disadvantage.



Source: Source: American Community Survey, 2017–2021, Table B19037. Numbers are calculated from 5-year survey estimates.

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

The increased likelihood of acquiring disability with age is evident in data from the ACS. Many Berlin residents age 65 and older experience some level of disability that could impact their ability to function independently in the community. Markedly, about 7% of residents age 18-34 and 11% of those age 35-64 report having a disability. Moreover, about 20% of Berlin residents age 65 and older report having one disability, and another 13% report having two or more disabilities (**Figure 10**). Among the different types of disability that are assessed in ACS, the most commonly cited by Berlin residents 65 and older were hearing problems (19%), vision difficulties (9%), cognitive limitations (3%), ambulatory difficulties-difficulty walking or climbing stairs (22%), independent living limitations-difficulty doing errands alone, such as visiting a doctor's office or shopping (10%), and self-care limitations (2%). Other disabilities experienced by older Berlin residents include self-care difficulties (2%). In total, these difficulties were reported by between 2-22% of the older population in Berlin (*ACS 2017–2021, Table S1810*).



Source: U.S. Census Bureau; American Community Survey, 2017–2021, Table C18108. Percentages by age group do not sum to 100% because people may report multiple difficulties and do not include those with no difficulties assessed by the ACS.

By comparison, by broadening the scope beyond just residents 65 years of age and older, disability affects individuals and families across all age groups in Berlin. Of note, 5% of residents under the age of 18 report a single disability, while 4% age 18-64 are living with one type of disability and 6% age 18-64 report two types of disability (*ACS 2017–2021, Table C18108*).

Insights from Interview Participants

In support of this needs assessment, one-on-one interviews were conducted with six individuals. The overarching goal of these sessions was to obtain in-depth information on interactions with Berlin's residents and gain a broader understanding of the role Berlin's Council on Aging and Social Services (COA/SS) play within the community, as well as gaining a deeper understanding for its partnerships with leaders and stakeholders. Ultimately, these discussions allowed researchers to gather additional insights and information about how Town of Berlin is addressing the needs of the adult population.

Individuals representing the police and fire departments, town staff, aging services, and recreation were selected for interviews. Participants were encouraged to share their thoughts and perspectives on what features make Berlin both a dynamic and challenging town for adults of all ages to reside, live, and work in the community. Interviewees also discussed changes in the aging of Berlin's population and its impact on the town. Moreover, these one-on-one discussions focused on identifying unmet needs of Berlin's adults and exploring strategies for making Berlin a strong and vibrant community for residents of all ages. In this section of the report, we present salient points and key themes that emerged from these conversations.

Issues around housing, taxes, and isolation are prevalent.

Key Informants reported that although a strong portion of Berlin's population have their housing needs and expenses met, many residents are in distress because they are finding it difficult to afford expenses and to remain in their homes. One Town Official noted, "as a town

we struggle from both ends of the income scale. There are a lot of multi-million-dollar homes and others struggling bit there's not a lot in the middle."

Additionally, older adults tend to be isolated in their often maintenance-intensive homes and can be reluctant to ask for help. Easily manageable housing down-sizing options are not common in Berlin, particularly due to the

"Surely a single individual on a fixed income trying to keep things maintained will eventually find it's a losing battle."

-Town Official

Town's desirable proximity to the City of Boston as well as regional employment opportunities. As Berlin's population ages, this situation is likely to become untenable. Many issues exist for older adults living alone in single-family homes requiring maintenance. Additionally, the cost of utilities, municipal fees, and property taxes were named as a critical need for some older residents.

Moreover, several Key Informants commented on the multigenerational ownership of large lot properties which have recently increased in value and are untenable for younger generations who inherit family residences. One Key Informant noted a striking example that "land-rich-cash-poor" multi-generational housing ownership challenges are common. For example, a home purchased for \$50,000 a few generations ago is valued at \$550,000 today.

"We don't want to restrict development—it brings in revenue. Development is a two-sided sword in that way."

-Town Official

For these families, no one planned to live in a half million-dollar home or pay takes that are \$8,000."

Taken together, these challenges have implications not only for housing and isolation, but also the support networks available to residents as financial, maintenance, and emotional factors affect residents' living conditions. Local service providers and municipal departments who take the

place of younger family members in this social support role see increased demand.

In general, an essential aspect for healthy aging is an individual's ability to remain living in the community as one ages—and the desire to do so was a salient point expressed by both focus group participants and Key Informant interviewees. The strong consensus is that without adequate housing options for residents looking to downsize, older adults will either remain in homes that are inappropriate or unmanageable, or they will be forced to leave the community.

There is increased demand for essential services among residents.

Not only was it evident in conversations with Key Informants that emergency calls have

"The aging demographic of Berlin translates into more calls for service. Since over a third of our Town are seniors, I see the increase in medical calls, assistance calls, more calls for wellness checks...so our job has changed quite a bit."

-Town Official

increased, but Berlin is also witnessing an uptick in demand for services and an influx of requests for supports and assistance, both medical and personal. This increased demand is cited as a function of the large share of older adults in the community broadly, and termed "community caretaking," specifically. During interviews with key informants, several Berlin officials described the reluctance of residents to proactively seek

help. This hesitancy is thought to be driven by an unwillingness to admit the need for assistance, combined with a sense of pride and social stigma. The behavior was described as less of a monetary constraint and more of a pride constraint driving the need for the community caretaking. Ultimately, the product of this challenge for municipal leaders was identified by one interviewee as, "when we get called in and show up at these houses, we are already a year too late." Other interview participants described these interventions as often "too late." Residents do not seek assistance and often end up isolated experiencing mental, physical, and self-care health issues. Hands-on checkups are often required in addition to resource referral.

Transportation limitations for older residents pose a burden on services in the Town of Berlin. Despite the proximity to excellent health care resources in the region, interviewees reported that older residents often do not seek care for ailments.

"Assistance and referral to resources is critical to financial security. Demand is high—from heating assistance to demand at the food pantry."

-Municipal Staff

Several factors deter engagement with community resources and needed assistance.

Tremendous concern was expressed consistently for the overarching reluctance of Berlin's residents to reach out for needed assistance. Common examples stated by interviewees involved a perceived shame of being seen by others as needing assistance. Instances conveyed during one-on-one conversations ranged from refusal to call public safety after a dangerous fall for fear a neighbor would repeat to others that an emergency vehicle was seen at the residence, or similarly, distress for being named when seen arriving in-person to receive food assistance to others in the community. This stigma, or shame, was reported by

"When we get called in and show up at these houses, we are already a year too late." -Key Informant Interviewee many Town departments as an ongoing challenge while serving the residents of Berlin.

These challenges for engaging with needed resources and accessing assistance are explained by several interviewees as occurring in Berlin for several reasons. First, many feel that others need the

resources more and one would be tying up medical services for those individuals with greater need. Next, seeking needed assistance is often deterred due to issues accessing transportation by the share of isolated adults who do not drive. Overall, this reason is considered a literal and substantive barrier to receiving care. Although the COA van service is available for medical appointments, an interviewee pointed out that many residents are very private and are concerned for their confidentiality. Meaning that riding with others to a medical appointment is often accompanied by awkward, and sometimes invasive, questions and prompts to share personal details. An emphasis was placed on residents' preferences for privacy, confidentiality, and inertia induced by challenges surrounding stigma during several conversations with interviewees. This trend suggests that a share of Berlin's residents may be isolated in unhealthy conditions, regardless of the worth of their residence or the availability of disposable income.

Mixed feedback was provided regarding the current physical space of Berlin's COA/SS and its current programs (e.g., Tai Chi, Yoga) and possibilities for the future. Opinion during interviews with Town leadership indicated that there is currently not enough space for dynamic programming and informal socialization for Berlin's older residents or scheduling events. Moreover, major concern was shared that space for confidential discussions with residents at the Berlin COA/SS is extremely challenging and is thought to limit engagement.

Accessing transportation is challenging.

Access to transportation, particularly in the evenings and on weekends, is viewed as crucial for accessing Berlins's amenities and needed resources, as well as traversing in and around the region. Despite weekday van service provided by the COA, many reported the 2-3 day advanced notice appointment window as a challenge to needed errands and outings. This sentiment includes an overarching sense that the COA/SS is neither conveniently located nor easy to access for older residents. Inadequate transportation systems alongside driver safety

were noted as major concerns that, if addressed, could benefit residents of all ages. Limited walkability alongside challenges for parking were also cited as barriers to access. The need for walkability, to safely walk around the Town of Berlin, is perceived as tantamount to healthy aging in Berlin and the average residents' inability to do so was highlighted frequently in private discussions.

Access to nature, pride in history of farming, and sense of community are valuable aspects of living in Berlin.

Interactions with interview participants revealed a deep sense of place where the community is perceived as strong and neighborly. Favorable Town features such as the many farms, rolling two lane roads, horses, general store for community engagement, and proximity of municipal buildings were highlighted by most participants. Additionally, the familiarity of many residents with one another was noted. Building on the theme of a connected and beloved community is the presence of the Powder House News, highlighted as a core feature strengthening the fabric of local society.

Results from Community Survey

In this section, we report key findings from each section of the survey. Tables illustrating results in detail are included in **Appendix A**.

All residents aged 18 and over (N=2,877) were notified of the survey through USPS postcard using names and addresses obtained from the Berlin Town Clerk, based on the most current municipal census. These postcards instructed residents to complete the survey online, by telephone, or by picking up paper copies at locations around Berlin. Subsequently, printed surveys were mailed to the sample of Berlin residents meeting the 60 and over age requirement, along with a postage-paid return envelope (n=1,094). A total of 519 responses to the survey were obtained, representing a return rate of 21%. This is a strong return rate and reflects interest among community residents. Roughly 50% (n=301) were returned online, and the rest of the responses were returned by mail. To facilitate comparison of younger and older segments of the population with respect to needs and interests, we most often present results throughout the report grouped into five age groups: age group 18-49, age group 50-59, age group 60-69, age group 70-79, and age groups 80 and older. In **Appendix A**, response distributions are shown by these age groups. Please note that in this report, survey results are presented using four age groups: under age 60, age 60-69, age 70-79, and age 80 and older.

Table 3. Community Survey Respondents

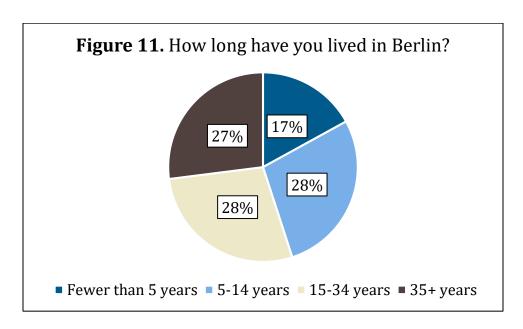
| | Number of responses | Age distribution (%), survey responses |
|----------|---------------------|--|
| 18 to 24 | 3 | <1% |
| 25 to 39 | 31 | 6% |
| 40 to 49 | 47 | 9% |
| 50 to 59 | 88 | 16% |
| 60 to 69 | 158 | 29% |
| 70 to 79 | 144 | 27% |
| 80+ | 72 | 13% |
| Total | 543* | 100% |

^{*}An additional 77 people declined to provide their age

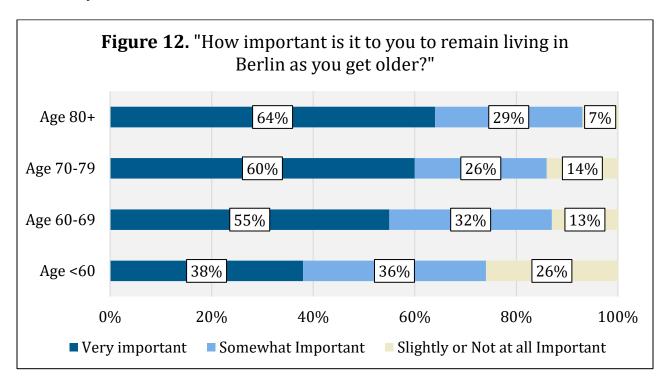
Community and Neighborhood

A commonly expressed goal of older adults is to remain living in their own homes for as long as possible. Aging in place implies remaining in familiar home and community settings, with supports as needed, as opposed to moving to institutional settings, such as nursing homes. By aging in place, older adults can retain their independence, as well as maintain valued social relationships and engagement with the community.

Survey respondents included residents who have lived in Berlin for many years, as well as relative newcomers. Twenty-seven percent of respondents have lived in Berlin for 35 years or longer (see **Figure 11**). These individuals offer insights based on their years of experience as Berlin residents. It is also helpful, however, to hear from those who are new to Berlin and roughly 45% of respondents have been residents less than 15 years, including 17% who have lived in Berlin for less than five years.



More than half of the respondents have lived in Berlin for 15 years or more so it is not surprising that a large number of residents want to remain living in Berlin as they get older. When asked how important it is for them to remain living in Berlin as they get older, the majority (52%) responded that it is very or somewhat important for them to remain in Berlin and this percentage was higher for older residents (see **Appendix A**). **Figure 12** shows that for more than one out of four respondents younger than 60 it is only slightly or not at all important for them to remain living in Berlin; and that these rates drop among those in their 60s (13%) and 70s (14%) and only five respondents in their 80s do not value staying in Berlin. Taken together, with age comes commitment to remaining in the community.



The vast majority of respondents (86%, n=527) took time to respond to the open-ended question "What do you value most about living in Berlin?" Responses are summarized into major themes with illustrative quotes in **Table 4**. Over half of write-in responses emphasized the importance of Berlin's sense of place, both in terms of outdoor spaces and natural resources. An additional theme cited referred to the geographic proximity to nearby assets and in relation to other communities and needed amenities, such as shopping and healthcare. Most written responses centered on the people and assets of Berlin alongside feeling a strong connectedness and sense of community through family connections, close neighbors, and an overall feeling of safety in the Town of Berlin. Many attributed that feeling to "small-town charm," citing close-knit connections with an overarching perception that everyone looks out for one another. Others also described their personal connections to the Town, many citing long family history and residence in the Town of Berlin. Lastly, respondents who provided a response to this open-ended question cited satisfaction with public servants, and frequently noted the strength of their faith alongside that of their neighbors.

Table 4. Sample responses to question, "What do you value most about living in Berlin?"

Residents voice a strong sense of pride in the natural beauty and in fellow Berliners.

"The strong sense of community, the rural feeling while mostly keeping the industry-based development on the outskirts."

"The small town feel and people look out for each other."

"Peace, quiet, and land preservation."

"Seeing so many beautiful farms, horses, and other farm animals. Also, my church and neighbors."

"Berlin has a rural feel without being remote."

Geographic proximity to urban assets is prized.

"Rural ambiance with nearness to major highways to Boston and New Hampshire."

"Beauty of our area with easy access to medical care, shopping, community centers, and events."

"Neighboring towns offer urban conveniences like shopping, restaurants, and medical service."

"Proximity to 290/495, amenities in Worcester/Boston."

"Value friendships and relationships with the people and organizations in the town"

"Center Village community and the location is great to get to cities and shoreline."

Safety and proximity to family are important.

"Feeling secure and safe and away from a major city. No crime."

"It is a safe, quiet community in a convenient location."

'Rural community + accessibility to old friends and family."

"The proximity to family and friends and the outdoor spaces for walking in the woods."

Similarly, 85% (536 respondents) wrote about their greatest concerns about aging in Berlin. Commonly cited concerns with exemplary quotes are included in **Table 5**. Taken together, the vast majority of resident responses were relevant to the issues of affordability and quality of life. Many statements focused on financial security: residents are concerned about being able to afford to continue living in Berlin as they get older, citing increasing taxes and cost of living as burdensome, especially with respect to insufficient income. The second most common concern was about accessing essential services and amenities. This included concerns about being able to drive later in life as well as availability of alternative modes of transportation. Concerns about transportation most often referred to being able to get to where respondents need to go—healthcare services, shopping, social engagements, and others. Respondents were not only concerned about getting to these places, but making sure they exist in or around Berlin. Another primary concern for those who provided a response was that they can remain healthy and active in later life. Worries about physical health changes that could limit mobility and independence as well as concerns about having ample opportunity to stay active and engaged in the community were described. Lastly, several respondents communicated challenges with housing maintenance: needed improvements to current homes could become physically and financially burdensome, while the availability of alternate choices or the ability to affordably downsize within Berlin is limited.

Table 5. Sample responses to question, "What are your greatest concerns about your ability to continue living in Berlin as you get older?"

Affordability, particularly related to property taxes, persist as challenges to staying in Berlin.

"Affordability. Over the many years we have lived in town we have gone to town meetings to vote in various businesses and such (like the mall) with a promise of more revenue coming into town and lower taxes, yet the taxes continue to increase. It is ridiculous."

"High taxes! Taxes have gotten and have increased- very high. Too much spending going on. For many residents the high taxes are not an issue, but for seniors it is a definite issue ."

"Ability to afford my home/taxes, ability to do the upkeep for my home, ability to do errands (get to transfer station, grocery store, doctor visits, get medication), taxes will tilt towards the residents since there is so few businesses to help offset the taxes."

"Access to affordable housing for my children."

"Cost of living is constantly rising as are taxes. At some point we probably won't be able to afford to live here."

"I am concerned I will not be able to afford to live here in Berlin. Taxes are too high for my retirement. All the beautiful farmland is being used up for development."

Lack of transportation options limit access to services and amenities, both now and in the future.

"Ability to drive -nothing is within walking distance. And walking may become problematic."

"Ability + access to get out to do errands, etc, availability of wellness checks, in home help/care."

"Finding the many more services I would need to continue living in my home, such as household help, help with personal care including activities of daily living, food preparation appropriate with my vegan dietary habits, and transportation to medical care over the area from Worcester to Boston."

"Access to quality healthcare. Access to public transportation or the equivalent."

"I don't think I could stay in my house if I outlive my husband."

A strong desire to stay healthy, active, and independent.

"Concerned for staying in my home, and being able to receive care (home aide, nursing support) and being able to afford to stay home with services and not have to go into assisted nor skilled nursing facilities."

"Ability to keep up with house needs... ability to get around town, health needs."

"An increasing need to rely on others for transportation to health care sites and entertainment venues and help with our labor-intensive property maintenance."""

Continued ability to maintain property and home is worrisome.

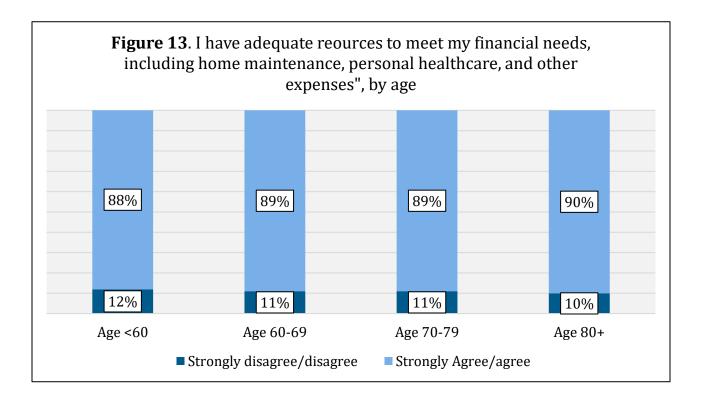
"Rising cost of electricity and upkeep of a home, taxes, lawn, snow removal and repairs."

"How much maintenance is required at our farm."

"My house is too big so it would be too costly to maintain.

"Financial ability to maintain house, Being able to remove snow."

Related to top concerns: respondents indicated their level of agreement with the statement, "I have adequate resources to meet my financial needs, including home maintenance, personal care, and other expenses." A total of 58 survey respondents (or 10% of the sample) disagreed (see **Figure 13**)—suggesting that this portion of respondents are living without the financial means to meet their basic needs.



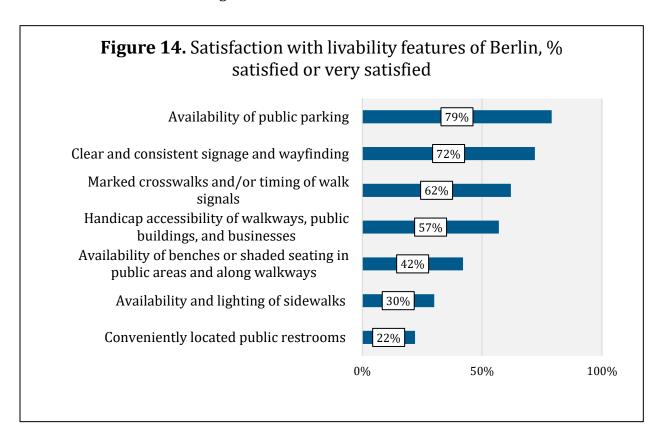
Residents were asked to rate their satisfaction with various features of outdoor spaces and buildings. The findings detailed here are illustrated in **Figure 14**, highlighting Very Satisfied/Satisfied with seven features of Berlin including parking, handicap accessibility, characteristics of walkways, crosswalks, outdoor seating, signage, wayfinding, and convenience of public restrooms. Ultimately, these features are a priority for creating safe and accessible shopping, entertainment, and community areas that promotes inclusion of all residents and their families. Ensuring that outdoor spaces and public buildings, as well as community meetings and services, are adequate and accessible are important elements of a vibrant community for all.

Survey findings identified numerous strengths and challenges relating to these features. Nearly four out of five adults reported strong satisfaction with the availability of parking (79%). Adequate parking promotes accessibility of public buildings, recreation venues, shopping, and errand. Nearly three out of four survey respondents (74%) reported being satisfied or very satisfied with clear and consistent signage and wayfinding in Berlin. Ensuring that signage is readable for persons with vision impairment or cognitive decline may be a path for future consideration as the population in the Town of Berlin continues to age. As well, two-thirds (62%) of survey respondents reported satisfaction with marked cross-walks and/or the timing of walk signals. And more than half of survey respondents are satisfied with the handicap accessibility of walkways, public buildings, and businesses in Berlin. While there are few crosswalks and businesses in Berlin--assessing public spaces for

accessibility by those with mobility issues or slow pace is crucial to creating an age friendly environment.

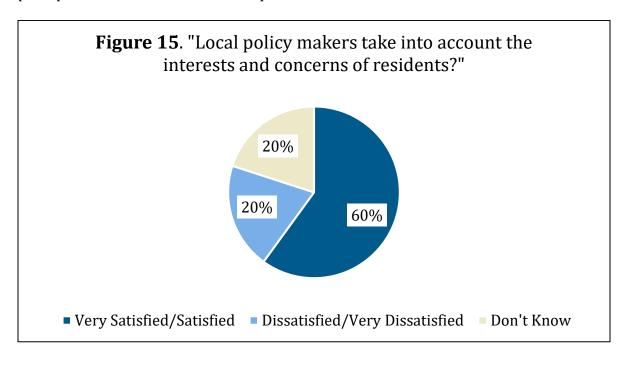
Based on those who reported "I don't know", it appears that respondents who have a condition limiting their participation in the community are more informed about handicap accessibility and are somewhat more dissatisfied with these features—or lack thereof. For example, 19% of those surveyed are dissatisfied or very dissatisfied, compared to 8% of those without a limiting condition.

Forty-two percent of survey respondents was satisfied or very satisfied with the availability of benches or shaded seating on public areas. Benches placed in strategically located areas can support walkability and promote access to public spaces, including shopping areas, event locations, municipal buildings, public parks, churches, and other community amenities. Shaded areas are key design features for creating vibrant outdoor spaces, friendly to Berlin's residents. Less than one-third of survey respondents (31%) reported being satisfied or very satisfied with the availability of sidewalks or lighting along walking paths. Improvement of this feature promotes health, mobility, safety, and well-being of Berlin's residents. Lastly, only one in five residents surveyed reported being satisfied or very satisfied with the convenient location of public restrooms in Berlin. This type of community feature is beneficial to residents of all ages.



With respect to the availability of After-school activities for kids, 23% reported being satisfied or very satisfied with this feature of Berlin. Of note, a large majority of respondents (70%) responded "I don't know" when prompted to rate their satisfaction. This could be a result of survey respondents not having students in the school or not having a need for after school care—it may also point to a lack of awareness of what is available to Berlin residents. A small share adults surveyed (7%) expressed being dissatisfied or very dissatisfied with the availability of after-school activities for kids. Supporting after-school activities can have many community benefits such as creating a sense of belonging, developing social skills, build confidence, while fostering a sense of security and support for families.

Survey respondents were asked to rate their level of agreement with the statement, "Local policy makers consider the interests and concerns of older residents." Feeling ignored or neglected by community leaders can be viewed as a form of exclusion with negative consequences for residents. About 60% of respondents are Satisfied or Very Satisfied with the statement, while 20% disagreed or strongly disagreed, with 20% offering no response (**Figure 15**). The pattern of results is similar across age groups (see **Appendix**). These results suggest that while the majority of survey respondents are satisfied along this dimension, there is room for improvement in action taken by local policy makers, or perceptions of those actions on the part of residents.

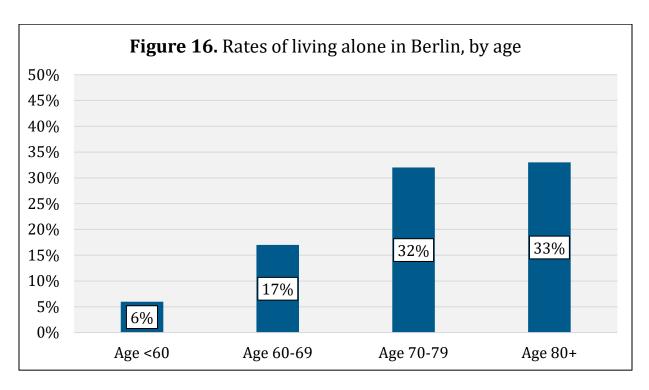


Housing and Living Situation

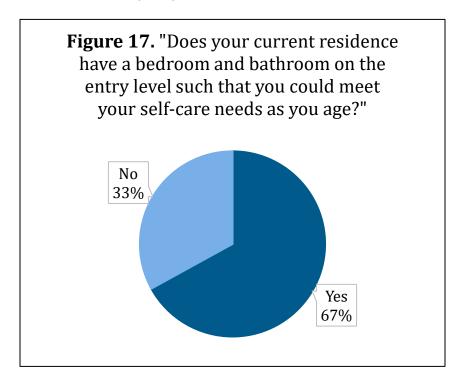
The availability and affordability of housing that is suitable to meet the changing capacity of older people are key factors that influence the ability of residents to age in place, and to lead fulfilling and healthy lives into old age. Many people are attached to their current home, even if the "fit" between individual capacity and the home environment decreases. Homes may become too large for current needs or may become too expensive to maintain on a fixed income. Design features of homes, such as the number of stories and manageability of stairs, may challenge older residents' ability to remain living safely in their home. Home modifications, including installation of bathroom grab bars, railings on stairs, adequate lighting throughout the home, ramps, and/or first floor bathrooms, may support residents' safety and facilitate aging in place. Programs that connect older homeowners with affordable assistance for maintaining and modifying their homes and their yards can help protect the value of investments, improve the neighborhoods in which older people live, and support safe living. The availability of affordable housing options, especially those with accommodating features, including assisted living, may allow residents who are no longer able to stay in their existing homes to remain in their community.

The large majority of survey respondents currently live with a spouse or partner (69%) compared to 20% who report living alone. Most Berlin residents live in single family homes (69%), followed by subsidized housing (8%), Eco Village/Co-Housing (7%), independent living community (7%), and condominium or townhome (7%). Less than 2% reported living in a multi-family home, accessory dwelling unit, apartment, or some other housing environment (see **Appendix A**). The large number of residents living in single family homes has implications for the need for home maintenance and modifications to safely remain in one's home.

The majority of survey respondents live with at least one other person (80%), but not surprisingly, this number is smaller for the older cohorts (see **Appendix**). Roughly 94% of respondents age 18 to 59 and 75% percent of those age 60 to 79 live with someone else whereas 67% of people age 80 and older do. In contrast, only 6% of those age 18 to 59 live alone while 17% of those age 60-69 and 32% of those age 70-79 and 33% of those age 80 and older live alone (see **Figure 16**). Living alone has the potential to lead to social isolation and has implications for services that may be needed by the older segment of the Berlin population.

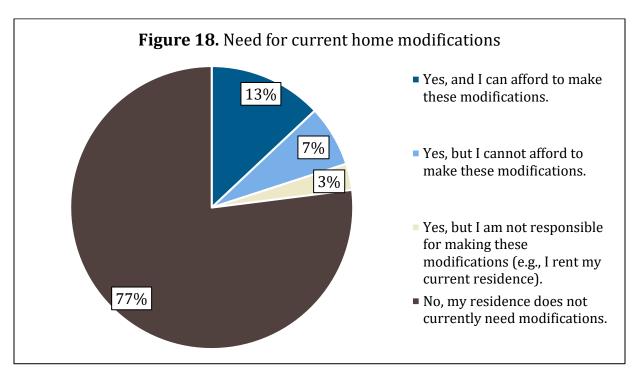


In order to further explore the characteristics of housing stock in Berlin, respondents were asked if they currently had a bedroom and bathroom on the entry level of their home. This feature is important not only for residents as they age, but also for occupants experiencing mobility challenges. For example, climbing up and down stairs. **Figure 17** illustrates the majority (67%) of residents surveyed do have this feature in their home, and one-third of residents do not (33%).

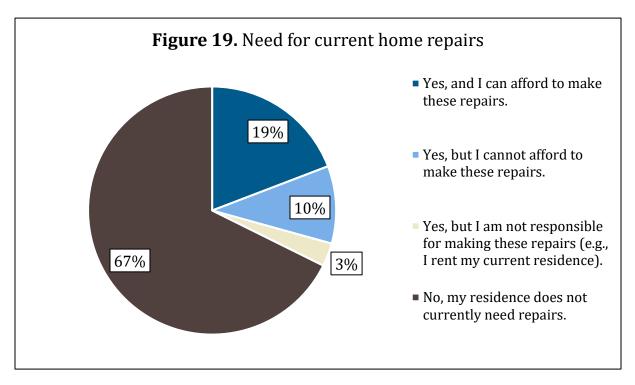


Residents were asked if they plan to stay in Berlin for the next 5 years or more and the vast majority, 90% roughly of participants, responded positively (see Appendix **A**). Three percent Berliners surveyed noted that they plan to stay in Berlin but would move to a smaller home or different residence. This suggests the desire for added housing options for those who want to downsize in the future.

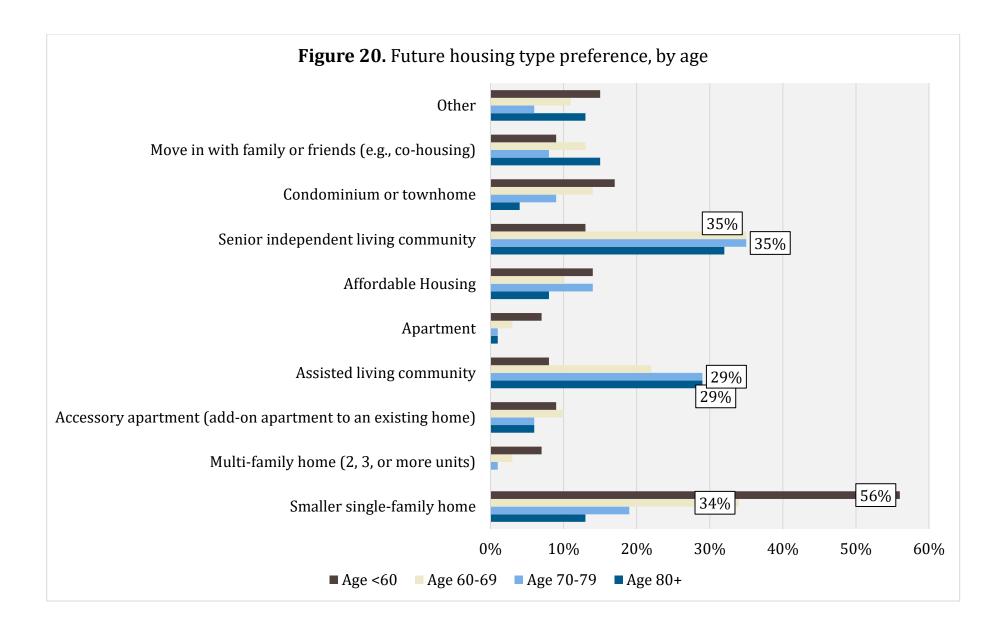
Maintaining a home requires resources, including people who can make repairs and the finances to pay for these repairs. In response to the question, "Does your residence currently need home modifications (*e.g., ramp, auto-open door, doorbell modifications*) to improve your ability to live in it safely for the next five years?" A total of 23% of survey respondents reported needing some such modification. Among them, 13% of respondents stated that they could afford to pay to make these changes (see **Figure 18**). More than three out of four residents (77%) surveyed stated that their current residence does no need modifications such as a ramp, auto-open door, or doorbell modification.



Similarly, in response to the question, "Does your current residence need home repairs (*e.g., a new roof or heating system*) to improve your ability to live in it safely for the next five years?" About one-third of respondents stated that their home does need repairs (see **Appendix**). Of those whose current residence needs repairs, 19% reported that they could pay for these repairs while 10% stated that they could not (see **Figure 19**). Supporting residents in identifying and completing home repairs and modifications is a short-term solution for improving current housing conditions for many residents aging in place.



Survey participants were asked to identify the type of housing they would prefer if a change in health status or physical ability required moving from their current residence. Responses varied by age group (see **Figure 20**). Among the youngest respondents, the highest rated type of future housing is a smaller single family home (56%), and among residents age 60-79 independent senior living community is most preferred (35%)—this housing type is also known as age restricted housing that is developed to age in place. Among those in their 80s, assisted living was the most preferred type of future housing. This interest in senior housing options by those age 60 and older has implications for housing stock needs in Berlin. Interestingly, a number of respondents (12%) would prefer affordable or subsidized housing and an dditional 4% would prefer an apartment (see **Appendix A**).



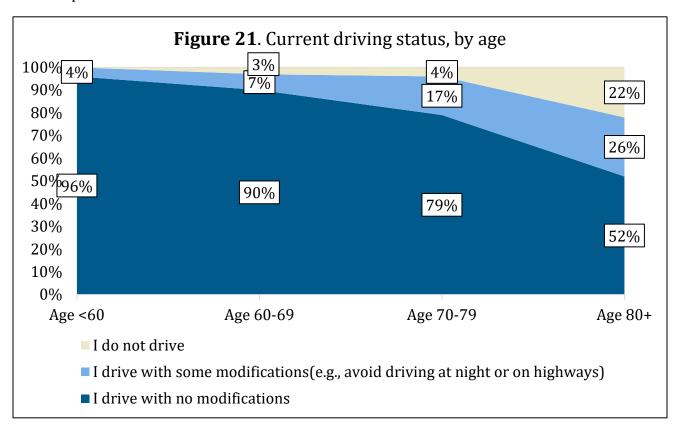
Transportation

Transportation is a basic need for people of all ages who desire to lead independent, meaningful, and socially engaged lives. For older adults specifically, limited transportation options can lead to challenges in socializing, attending appointments, and fully participating in their community. The vast majority of Americans rely primarily on private transportation to meet these needs, and most individuals drive their own automobiles well into old age. Due to difficulties with transportation, individuals with health conditions and disabilities that adversely affect their ability to drive safely may be unable to participate in activities they previously enjoyed and valued. Indeed, a national survey of people aged 50 and older conducted by the AARP (2005) found that compared to older drivers, non-drivers reported lower quality of life, less involvement with other people, and more isolation.

The Town of Berlin is connected to the surrounding area with extremely limited public transportation options, particularly as the Worcester Regional Transit Authority (WRTA), public transportation network has been sporadic. Given limited public transit options, reliance on the weekday by-appointment COA van service the senior center will arrange to transport senior residents, residents have few alternatives but to drive in order to access various locations throughout Berlin and the surrounding region.

Most survey respondents reported active driving themselves with no modifications (84%), 11% reported driving themselves and making modifications to their driving such as avoiding nighttime driving or highway driving and a portion (5%) report not driving at all (see **Appendix A**).

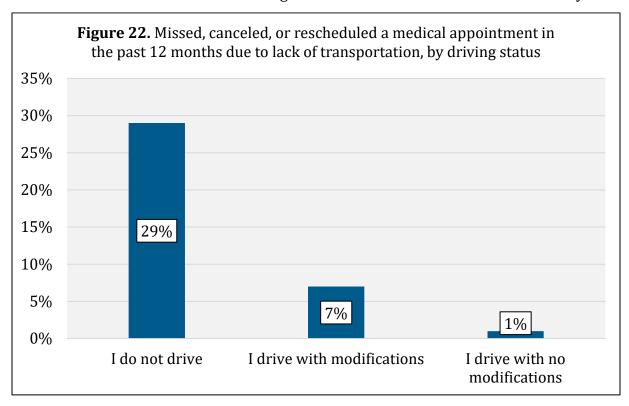
Figure 21 demonstrates that driving status diminishes with age: 96% of those under age 60 drive without limitations, compared to 79% of those in their 70s and 52% of those age 80 and older. More than one out of four respondents in their 80s do not drive and an additional 26% report driving with some limitations—suggesting that the oldest old are in highest need of transportation alternatives.



When it comes to transportation options, relying on family to drive (27%) and walking or biking (10%) are the most commonly cited modes, aside from driving one's self (see **Appendix A**). Small shares of survey respondents report using the commuter rail (2%), taxi or ridesharing (2%), transportation provided by the Berlin COA (2%) or via WRTA (1%). The percentage of respondents using transportation provided by the COA increases to 6% for those age 80 and older. Among those respondents who limit their driving in some way, or do not drive at all, a similar pattern of transportation use emerged. Aside from driving one's self, relying on family or friends was a top option reported by 59% of these respondents; followed by relying the on Berlin COA transportation (15%) and reliance on friends or neighbors (14%). Four percent of these nondrivers or limited drivers report walking or biking and only 1 respondent reported using the Worcester Regional Transit Authority (WRTA) (tabulations not shown).

A small share of respondents (3%) reported "yes" when asked if they have had to miss, cancel, or reschedule a medical appointment due to lack of transportation (see **Appendix A**). When considering driving status, however, 29% of those who do not drive reported "yes" to

this question as did 7% of those who drive with some modifications (**Figure 22**). These findings suggest that transportation limitations appear to negatively impact accessing medical care for the most vulnerable segments of Berlin's older resident community.

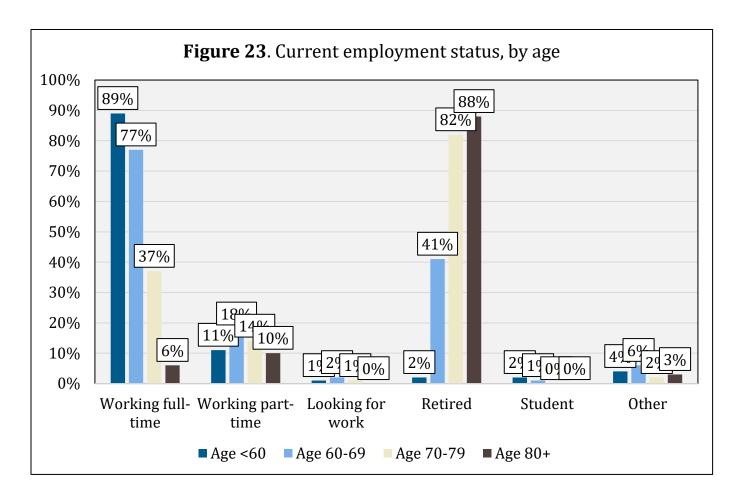


While 16% of all survey respondents reported dissatisfaction with current options in Berlin, these rates were highest among those who report not driving at all (25%) and those who report modifying their driving (16%) (tabulations not shown). This finding suggests that for those with most transportation needs, the options in Berlin are not sufficient.

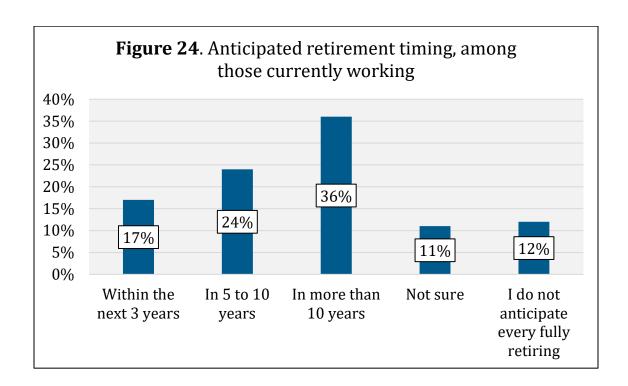
Employment and Retirement

Remaining in the workforce due to financial necessity or personal preference is a decision that shapes later life for most older people. For those still working, their experiences can mean less hours, different schedules, and an interest in maintaining professional relationships. For those who have chosen retirement, maintaining active lifestyles and contributing to the world around them can be important factors when considering how to spend their time. Regardless of employment status, the ability to pay for necessary expenses and maintain quality of life can be challenging due to agerelated shifts in health, ability, costs, and streams of income.

Many people across the country continue to work beyond the traditional retirement age of 65 and this is evident in the Berlin survey results. Among survey respondents in the 70s, 20% are still working full or part time; and even among the oldest old 11% are still working. (see **Figure 23**). These results are similar to results from the American Community Survey, which reports that 35% of adults age 64 to 74 are participating in the labor force. Of those age 75 and older, more than 20% remain in the workforce (ACS, 2017–2021, Table S2301).



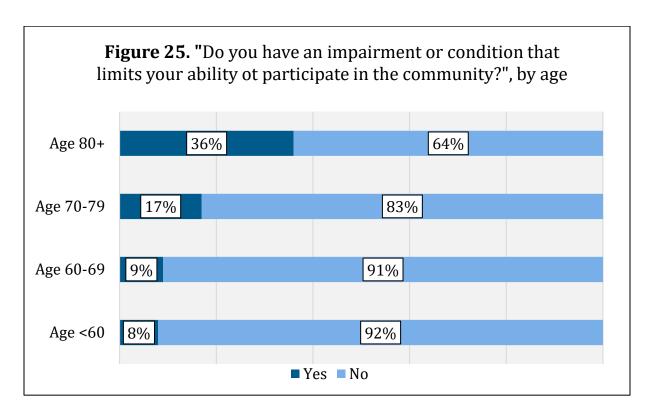
Among those under age 60 and those respondents currently in their 60s, about 20% of them report retiring within the next 10 years (tabulations not shown). Interestingly, about 15% of survey respondents report not knowing when they will retire or do not anticipate ever retiring (see **Appendix A**). For those who responded that they are still working full or part-time, 41% expect to retire within the next 10 years (see **Figure 24**). Interestingly, more than 1 out of 5 respondents who are still working do not know when they expect to retire (see **Figure 24**) do not anticipate ever retiring. Developing new programs that would particularly attract older workers may be useful. For example, convening a job fair for part-time or volunteer positions or hosting seminars on retirement planning—both financial and social.



Health and Caregiving

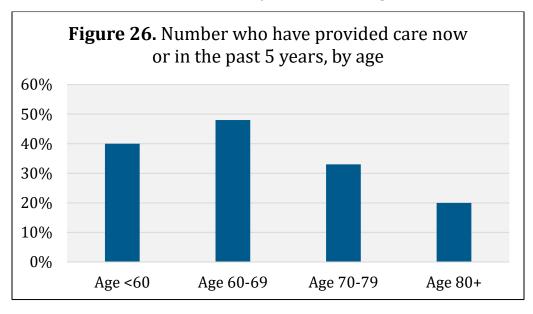
Nationally, most of the care and support received by older adults due to health difficulties or disability is provided informally by family members or friends. Informal caregivers throughout the country contribute millions of hours of care without financial compensation (see statistics through the Family Caregiver Alliance).

Survey participants were asked to report whether they had an impairment that limits their ability to participate in community activities. About 14% (n=75) of all respondents reported having a limiting impairment, and it is apparent that the likelihood of impairment increases with age. Nearly 40% of those age 80 or older reported having an impairment that limits their ability to participate in the community (see **Figure 25**). Recognizing the variability in older residents' ability to get around the community is an essential factor to consider when planning for the future of aging services.

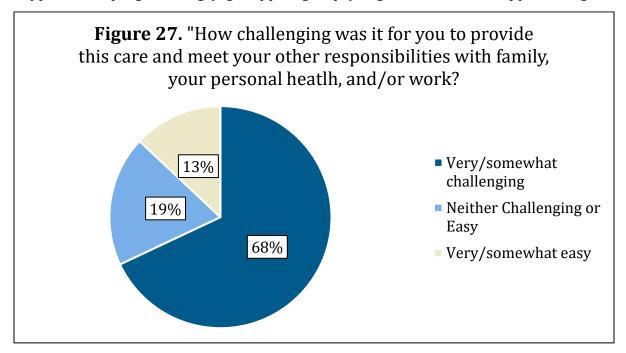


Only 30 respondents reported that they sometimes worry about whether their food supply will run out before they get money to buy more (see **Appendix A**). Promoting awareness, reducing stigma, and increasing accessibility of available food resources are necessary activities to address this essential need for a portion of survey respondents.

More than one-third (38%) of survey respondents report providing care to someone who is frail or disabled now or in the past five years (see **Appendix A**). Rates of caregiving are highest among younger respondents. **Figure 26** shows that 40% of those younger than 60 an d48% of those in their 60s identify as a recent caregiver.



Many caregivers who responded to the Berlin survey, when asked how challenging it was to provide care and meet other family/work responsibilities, stated that it was very or somewhat challenging (68%) (see **Figure 27**). This was especially true for those younger than age 60, nearly three-quarters (72%) of those providing care reported this was very or somewhat challenging and 65% of those in their 60s reported the same level of challenges (see **Appendix A**). 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 65-7% of those who provide care find it very or somewhat challenging. Services (e.g., transportation to adult day programs), connections to local or state care giving supports, and programming (e.g., support groups) might be needed to support caregivers

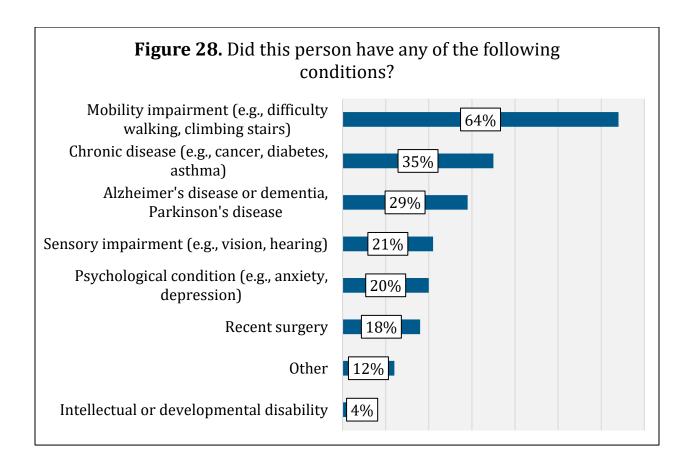


Caregivers were asked to indicate which conditions were experienced by their care recipient. The most frequently reported condition was mobility impairment (such as difficulty walking or climbing stairs) at 65%, followed by chronic diseases like diabetes, arthritis, or heart disease (35%) or Alzheimer's or dementia (29%) (see **Figure 28**). Data from the Massachusetts Healthy Aging Community Profiles indicate that approximately 14% of Berlin's residents age 65 and older have been diagnosed with Alzheimer's disease or related dementia¹⁴. Given that many live without a formal diagnosis of dementia, it is expected that this is an underrepresentation of the disease prevalence. This finding also

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¹⁴https://mahealthyagingcollaborative.org/wpcontent/themes/mhac/pdf/community_profiles/MA_Towncode28_Berlin.pdf

reinforces the needs for the community to be accessible to persons with mobility limitations such that they can participate fully in the community.

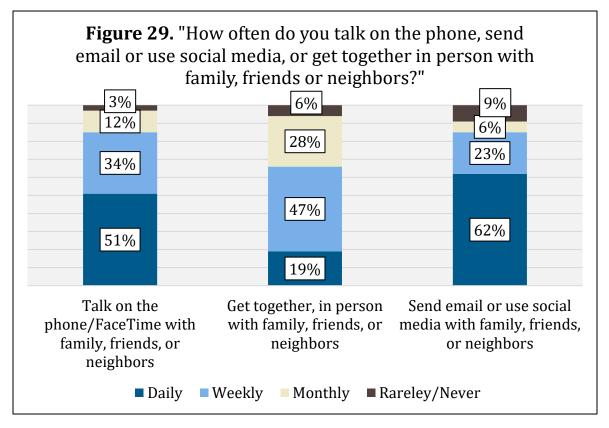


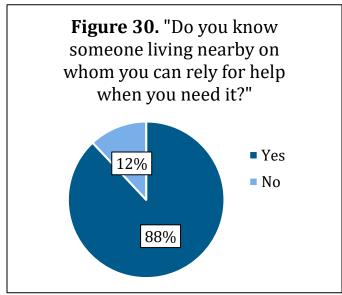
Social Activities and Relationships

Social activities and relationships shape wellbeing for individuals of all ages. Indeed, the absence of social relationships may have a substantial a negative impact on health as behaviors such as smoking or overeating. Many older adults are at high risk for social isolation, especially if their health and social networks break down. These risks are exacerbated if accessible services and transportation are not readily available to them as a means for maintaining contact with the world outside their homes. Providing opportunities for social engagement and participation in community events—through volunteer programs, learning opportunities and exercise programs, as well as social activities—can help community members maintain social support, remain active, prolong independence, and improve quality of life.

One-half of survey respondents speak with someone or use email or social media on a daily basis to connect with family, friends, or neighbors (see **Figure 29**). Although 62% of the

respondents get together in person with someone at least weekly, 15% only get together monthly or less frequently. Of note, 17% of respondents age 80 or older reported never send email or used social to connect with others **Appendix A**). Individuals who have infrequent contact with friends or relatives represent important groups to target efforts aimed at reducing isolation and, more generally, improving emotional wellbeing.





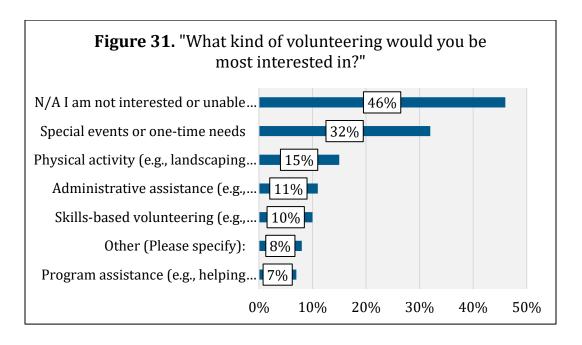
Openness to helping others, watching out for neighbors, and being embedded in a strong system of mutual support are hallmarks of a strong community. Yet when survey respondents were asked if they know someone living nearby on whom they can rely for help when needed, 12% of all respondents said they did not (**Figure 30**).

Respondents were asked if they have felt excluded in Berlin because of personal characteristics over the last five years (**Appendix A**). Although the majority

(80%) have not felt excluded, some respondents cited income (4%), age (2%), religion or cultural background (2%), or disability (2%) as reasons for feeling excluded. Eight percent of respondents (n=48) wrote in other reasons for feeling excluded in Berlin. Upon review of

those responses, most referred to feeling unwelcome as relative "newcomers" to Berlin (e.g., not being born in Town) and also feeling excluded for participating in co-housing options. For example, one participant wrote "It's hard to break into a small town. I feel we will be excluded for being newcomers".

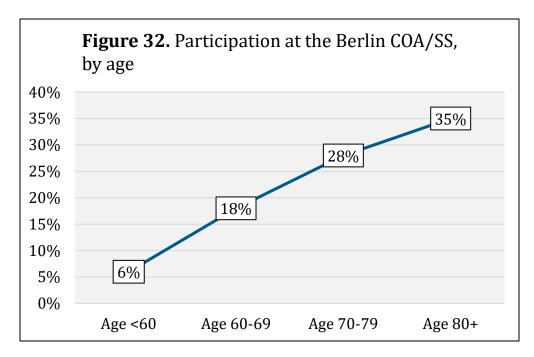
Volunteering is one known way for connecting with others in your community. In order to align volunteer opportunities with the interests and preferences of the community, survey respondents were asked what types of volunteering they would participate in. While 46% reported that they are not interested or able to volunteer at this time, there was interest in volunteering for special events or one-time needs and, particularly among younger respondents, there was interest in helping with physical work like landscaping or setting up tables for events or programs (see **Figure 31**). About 45 respondents took the time to write in ideas about what kind of volunteering they would like to engage in and some of those ideas included a food bank, managing donations and friendly visits. As well, some described future interest in volunteering, for example "busy now, but would consider volunteering down the road, greeting participants or other activities...".



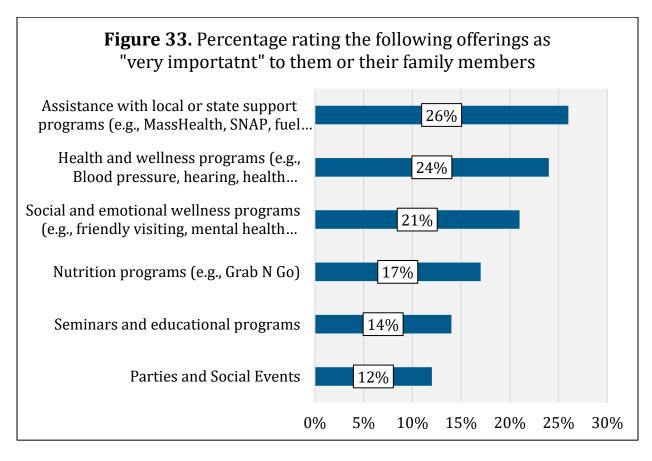
Current & Future Programs & Services at the Berlin COA/SS

Local senior centers 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.

Survey results suggest that rates of participation at the Berlin COA/SS increase with age, as expected. As shown in **Figure 32**, 18% of respondents in their 60s report ever using programs or services offered by the Berlin COA/SS. Then, about 28% respondents in their 70s and 35% of respondents age 80 and older indicated they have participated at the Berlin COA/SS. Among respondents who participate at the Berlin COA/SS, 69% only visit a few times a year, while 15% attend weekly and 16% attend monthly (results not shown). This range of participation levels highlights the broad continuum of affiliation with the Berlin COA/SS, with many residents participating just periodically, while others include visits to the Berlin COA/SS as part of their regular weekly schedule.

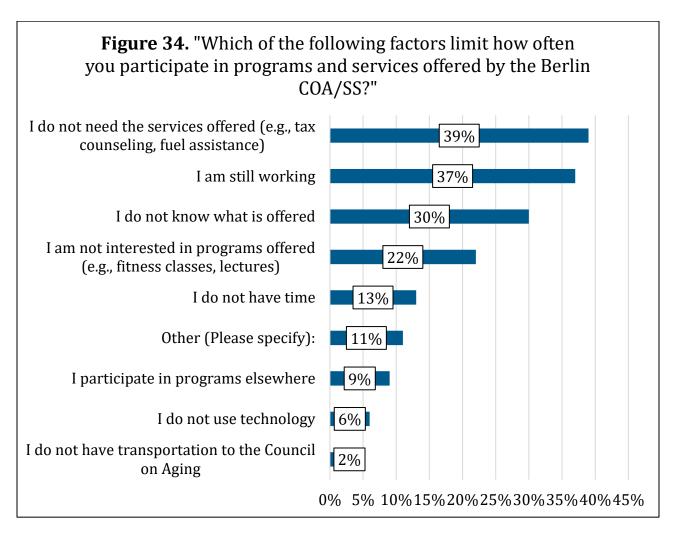


When asked about current offerings, more than half of survey respondents place a high level of importance to the tangible services offered by the Berlin COA/SS, as shown in **Figure 33**.

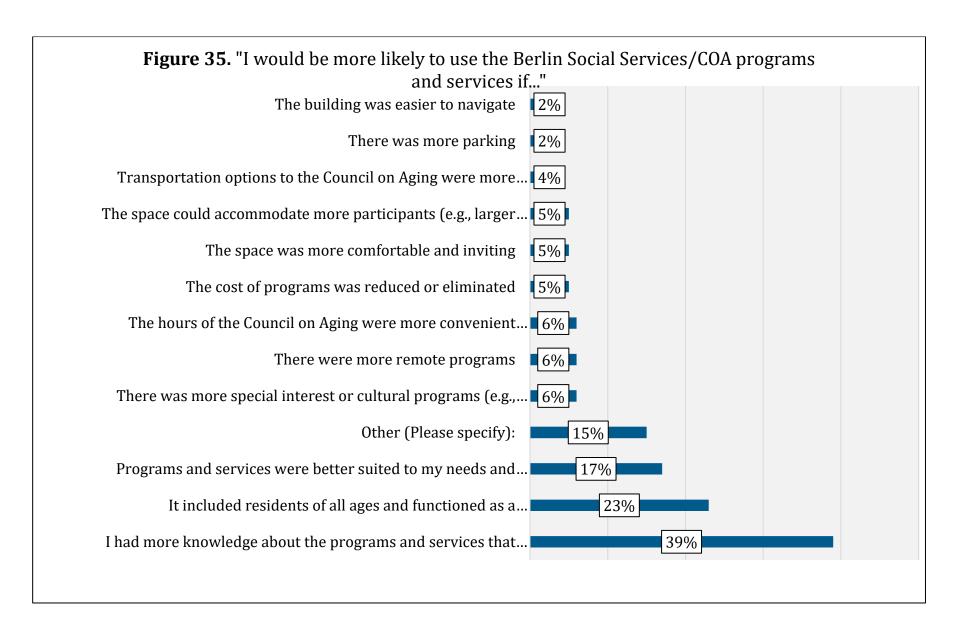


The following three figures present findings related to barriers and facilitators to participation at the Berlin COA/SS.

Figure 34 presents the factors that limit participation at the Berlin COA/SS. The top factors limiting participation include "not needing" programs or services offered by the Berlin COA/SS (39%) and still working (37%) as well as not knowing what is offered (30%). Not surprising, among those under age 60 and those respondents currently in their 60s, still working and not having a need are the top responses and for those in their 70s these shift to not knowing what is available and not needing the offerings. Among those in their 80s, the most cited factors limiting participation at the Berlin COA/SS include not needing the programs and services and not being interested in what is offered (see **Appendix A**). These results suggest that there is a perception that one has to "need" to attend the senior center, not just desire, and that accessibility to community resources for those in the workforce is crucial to participation.



When asked to indicate what would make it more likely they would use the services offered by the Berlin COA/SS, 39% of respondents reported that having more knowledge about the programs and services available would increase their likelihood of participating (see **Figure 35**). About one-quarter of respondents would be more likely to utilize these resources if they functioned like a community center for all ages, and 17% would be more likely to utilize programs and services if offerings were better suited to their needs and interests. Lastly, 15% (n=82) residents took the time to write in other factors that would increase the likelihood of their participation. Upon review of these responses, topics included intention for future use of the services and programs, phrases like "as I get older" alongside "if I had more time." For example, one respondent wrote, "If I needed them...I don't now but may in the future". Additional comments illustrated "the matter of someone to go with" and knowing others using Berlin Social Services/Berlin COA programs and services could increase the likelihood of their participation. A last theme reinforced by these comments was needing more information about what is offered. For example, one respondent wrote, "If I knew what they offered" and a different respondent wrote, "Not familiar with services to offer input."



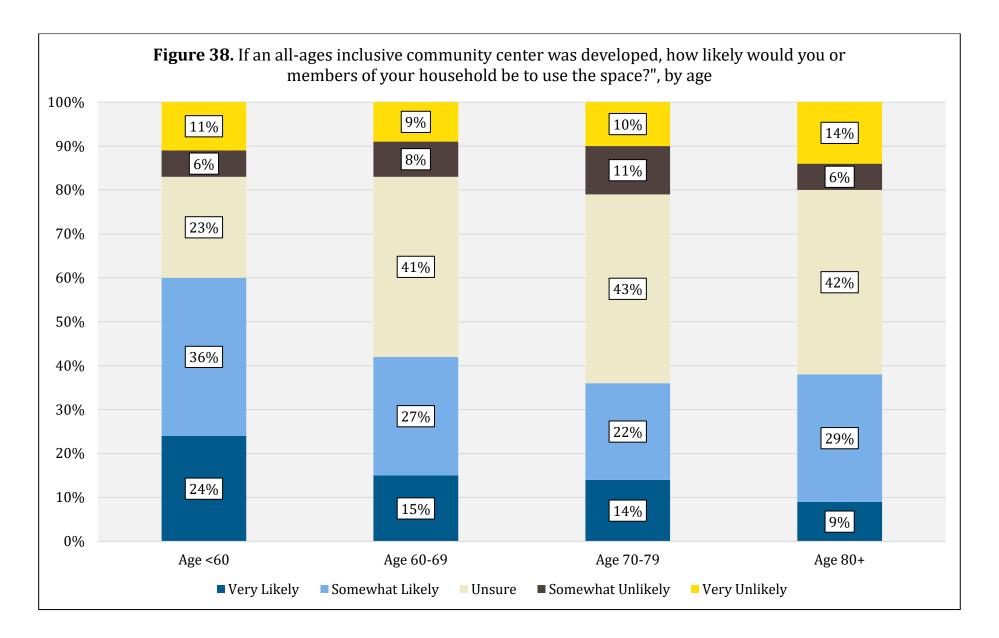
Taking into consideration future needs and interests, survey participants were asked to prioritize what features or offerings of the COA/SS they would like to see expanded (see **Figure 36**). Although the most commonly reported priority for future expansion across groups is indoor fitness (40%), outdoor fitness (38%), day trips (37%), performances (32%), wellness (30%), and social/educational activities (26%), a few notable differences across age groups are observed.

Among respondents under age 60, indoor and outdoor exercise are most preferred for future expansion as is arts programming (e.g., painting, music digital photography) reported by 41% of respondents in this age group. For those currently in their 60s, indoor and outdoor exercise and day trips or excursions are most preferred for future expansion and for those in their 70s, indoor fitness, day trips or excursions and performances (e.g., comedy, theatre) are most preferred. For the oldest old respondents, day trips or excursions, performances and social opportunities (e.g., coffee hour, informal space for socializing) are most preferred for future expansion (see **Figure 37**). These results suggest that higher frequency of attendance, and attraction of new attendees, could be attained through maximizing current trip and indoor exercise offerings and developing new and different arts and cultural programs. Some respondents took the time to write in their ideas for new or expanded programs. These included: in-home supports, educational opportunities, and transportation to neighboring communities.

Figure 36. Thinking about your own future needs and interests, which of the following areas would you prioritize in expanding through the Berlin COA/SS? Evening or weekend activities Performances (e.g., music, theater, comedy) Social activities (e.g., coffee hour, informal space for socializing) Recreational activities (e.g., cards, board games) Educational courses (e.g., technology, foreign language courses, or bird watching) Lectures and other one-time education events Day trips and excursions Outdoor fitness (e.g., walking, hiking, kayaking) Indoor fitness (e.g., strength training, exercise equipment) Volunteer opportunities Arts programs (e.g., painting, music, acting, digital photography) 10% 15% 20% 25% 30% 35% 40% 45% 50% ■ Age <60 ■ Age 60-69 ■ Age 70-79 ■ Age 80+

Figure 37. Thinking about your own future needs and interests, whihch of the following areas would you prioritize in expanding through the Berlin COA/SS 11% Other 43% 31% Wellness (e.g., meditation, massage) 24% 11% 15% 3% 5% 5% Job-seeking or employment support 24% 15% Adult day/Caregiver program 9% 11% 33% 18% Mental health (e.g., counseling or referrals) 10% 6% 25% 25% Lunch or other food offerings 31% 25% 0% 5% 10% 15% 20% 30% 35% 40% 25% 45% ■ Age 60-69 ■ Age 70-79 ■ Age <60 ■ Age 80+

When it comes to services offered by the Berlin COA/SS, respondents were asked to similarly prioritize areas for future growth. Among younger respondents, wellness opportunities were most valued—including things like massage or meditation. Among older respondents, having access to lunch or other regular food offerings is a priority, moving forward (see **Figure 37**). Considering future planning of the Berlin COA/SS, respondents were asked about their likelihood of participating at an all-ages community center (see **Figure 38**). Across ages, nearly half (47%) would be very likely or somewhat likely to participate (see **Appendix A**). Figure 37 shows that across age groups, likelihood of participating at an all-ages community center ranges from 36% of those in their 70s to 60% of those under age 60. It is important to note the high levels of "Unsure" responses—more than 40% of those age 60 and older are unsure. This suggests that public education and input is necessary to move toward the development of an all ages community center space in Berlin.



The Berlin COA/SS printed newsletter is the most preferred source of communication, across age groups (see **Figure 39**). For those younger than 60, the Town's website and social media are also preferred methods of receiving information about the happenings at the Berlin COA/SS. **Appendix A** shows that most respondents have internet in their home (94%) and among those who do not have internet at home, 6% are choosing to not have internet—either because of cost or other personal reasons. Interestingly, small numbers of those in their 60s and 70s cannot afford to have the internet at home (n=8) and an additional 6 in these age groups choose not to have access to the internet at home. Among those in their 80s, 16 respondents (or 24% of those in this age group) choose not to have internet at home. Taken together, taking a multi-media approach to communication is needed in Berlin

Figure 39. Where do you prefer to find information about the activities and services offered by the Berlin COA/SS?, by age 90% 80% 71% 67% 70% 57% 60% 56% 50% 40% 30% 20% 10% 0% Word of Facebook or Town of Berlin Public Berlin Other The Clinton The Clinton Local cable YouTube Berlin Powder Powder item (print) Item (online) Access mouth postings (flyers, (Berlin TV) website **House News House News** billboards) (online) (print) ■ Age <60 ■ Age 60-69 Age 70-79 ■ Age 80+

At the conclusion of the survey, respondents were invited to write in any additional thoughts or comments about the Town of Berlin and close to 200 participants took the time to provide additional feedback. Some comments mirrored support for topics learned during this needs assessment while many comments provided fresh insights. The most prominent themes that emerged are presented in Table 6, with sample quotes. The majority of the comments were positive, about the Town of Berlin more broadly, and expressions of love for the natural beauty and neighborly nature of the Town, specifically. It is evident from the comments that while some of those who complimented senior activities take advantage of the programs and services, others do not and lament having to travel elsewhere for their current and future needs.

In addition, there were many suggestions and strong sentiment regarding the limited space available to serve as a senior center, in addition to sharing the room with programs and services. Strong support for added activities supporting kids and adults of all ages were stated. Other comments regarding programs emphasized participating in activities, creating social connections, and wellness that contribute to quality of life. Modernized surroundings with greater handicap accessibility and expanded offerings are things that respondents identified as needs—but in the opinion of some residents, would require additional investment in an appropriate space, staffing, and other resources conducive to a vibrant center.

Another sentiment expressed by survey respondents included the perception that residents in Berlin need more attention and support from the Town. Many cited feeling that their own needs and interests were in competition with those of younger wealthier residents, specifically when it comes to municipal spending and development priorities.

Many statements shared as write-ins by survey participants focused on community-wide issues such as wishing Berlin would spend the money to preserve the character of the town and prevent developers from "invading our open spaces" or "cutting down more forest." Many Berliners feel much has already changed and preservation of the Town's rural aesthetic and natural beauty should be a priority moving forward. Moreover, farmlands transitioning to real estate developments was of great concern, as are the impacts of tax increases on residents with lower incomes.

Some respondents provided specific ideas for the Town and the COA/senior center to amplify outreach, such as welcoming packets to facilitate participation by Berlin's newer residents and engage these newcomers in the community and provide a map of Town resources (e.g., where to vote, location of library, Town Hall, etc.). Recognizing the heterogeneity among the older population, multiple streams of communication and information (e.g., print materials, emails, social media, phone calls) can be synthesized to maximize reach. Comments suggested information available on Berlin's website could be improved.

Table 6. Additional thoughts or comments about the Town of Berlin

Walkability and safety are a major concern

"Would love sidewalks installed on gates pond road for the safety of children and many of my neighbors who walk daily."

"Want to take more advantage of 19 Carter and old Town Hall, library. Enjoy walking on trails. Carter St sidewalks need work."

"There are areas where there is no cell signal (Lancaster Road) this is extremely dangerous when walking and hiking, it should be addressed."

"The town needs a traffic light at the corner of Pleasant Street, 62 and Carter Street with walking guard. That's an impossible intersection during rush hour."

"We need this town to be proactive in making sure all are protected either driving, walking, or riding a bike. No matter what age you are and especially older adults."

Consensus for new and varied programs & services in Berlin

"They used to have senior luncheons monthly but I didn't go because I was younger, busier... but don't think they have them now. Would be nice to have again. Maybe some more group activities, drop in, would be nice."

"More activities/classes for seniors. I shouldn't have to go to other towns."

"The town of Sterling has more robust programs offered for seniors. The problem is that Berlin is not as large of a town and I'm sure that affordability plays a big part in this. Can Berlin merge with another town for more affordable options?"

Calls for increased commerce and spaces to gather

"We are in (dire) need of a new accessible library building which could also serve as a community center offering after school programs for kids along with classes for adults."

"Please - we need an actual downtown where we can spend time with places to go and hang out (coffee shops, small stores, restaurants, events with a beer garden in the summer, live music, etc). Please!"

"We have loved living in Berlin so far. It would be great to have a few more restaurants and business. (Nobody delivers to our house and it would be great to keep the revenue local I stead of giving it to Hudson and Northborough all the time.)"

"How can we best utilize existing spaces and buildings such as the 1870's town hall or other spaces?"

Desire for accessible and comprehensive communication and information

"You have to be very proactive to find out what is going on in town. I do like the mobile electronic boards that are on the side of the road with some information on them."

"I have called the COA or any town office number looking for information and you get an answering machine and need to leave a message- doesn't help at the specific time."

"I often find out about events after they have happened. More communication would help. Where is the newsletter available- didn't know they did one."

Conclusions and Recommendations

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 Town of Berlin. The goals of this project were to investigate the needs, interests, preferences, and opinions of Berlin's residents age 18 or older by engaging the community regarding their experiences and needs relevant to Social Services and the COA department's objectives to identify and serve the needs of all Berlin's residents age 18 and older. The contents of this report are meant to inform the Town of Berlin, Berlin Council on Aging and Social Services (COA/SS), and organizations that work with and on behalf of residents of Berlin for the purposes of COA mission fulfillment alongside planning and coordination of services for current and future needs of residents. The report will also help to build awareness about issues facing Berlin among community members at large.

Sustained growth in the percentage of older Berlin residents, compared to the full Berlin population, is expected in the coming years. The overarching observation – that the share of older residents of Berlin is already large and will continue to expand – makes clear the importance of considering how well features of the Town, the services and amenities available, together with virtually every aspect of the community align with the age demographic moving forward. Planning is especially warranted with respect to the Council on Aging, and Social Services, which may be heavily impacted by aging of Berlin residents.

A broad range of findings are reported in this document, highlighting the many positive features of Berlin as well as concerns expressed by residents. While many of our findings, and the recommendations that follow, intersect with the scope of responsibility of the COA/SS, 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.

We summarize <u>key findings</u> and make the following <u>recommendations</u> to the Town of Berlin:

The demand for programs and services, for residents of all ages, is expected to grow in coming decades; and the interests of residents remain focused on health and access to programs that support independent living.

- o Among those under age 60 and those respondents currently in their 60s, about 20% of them report retiring within the next 10 years. This trend suggests future impacts on the demands for municipal COA and Social Service programs and services in Berlin.
- o The majority of survey participants (52%) report it is very or somewhat important for them to remain in Berlin. Across age groups, 93% age 80 and over, 86% age 70-79, 87% age 60-69, and 74% under the age of 60 responded that it is very or somewhat important for them

to remain living in Berlin. The expectation is that there will be an increased demand over time for municipal COA and Social Services. This trend is also supported by survey write-in respondents indicating concern for "staying in my home" and being able to "receive care (home aide, nursing support)."

- o About 17% would increase participation if programs and services were better suited to needs and interests.
- o When asked about preferences for future expansion of programs and services, differences across age groups were observed. Berliners under the age of 60 specified preference for wellness programming (43%), mental health supports (33%), and adult day/caregiver services (24%). Similarly, respondents age 60-69 specified preference for wellness programs and services (31%) and adult day/caregiver supports (15%), with interest in lunch or other food offerings (25%). A larger share of Berliners age 70 and over (56%) specified a preference for lunch or other food offerings and wellness supports (35%). Additional write-in responses voiced preference for more programs "on common health challenges" and "issues like financial planning, end-of-life and Wills."

Recommendations:

- o Expand capacity of the COA/SS department to offer more social and health programming. For example, consider hiring part-time instructors or program coordinators to ensure continuity and variety of program delivery.
- o Investigate opportunities for providing COA/SS programs and services at additional satellite locations in the community, such as public housing, the library, the schools, and local businesses.
- Explore identifying volunteer guest speakers to present topics of interest in the community or contribute articles to the Powder House News publication available in-print and online.
 Perhaps these volunteer positions could be open to the property tax work off program.
- o Pilot-test a weekly or monthly lunch program. Consider working with the local school district or the Aging Service Access Point¹⁵ to coordinate food delivery.
- o Consider being designated as an Age and Dementia Friendly¹⁶ community, which provides an avenue of community organizing and outreach that could support the effort to build a renewed perception of aging in Berlin.
- o Routinely assess the adequacy and range of health and community support services offered for promoting, maintaining and restoring health of Berlin's residents.

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¹⁵ https://www.agingservicesma.org/

¹⁶ https://www.mass.gov/info-details/examples-of-age-and-dementia-friendly-community-characteristics

There is desire for space to gather and receive services; and current capacity is not sufficient.

- o Key informant interviewees cited a reluctance among residents to engage with Social Services and COA programs and services as the space is widely considered "unwelcoming" and "cramped."
- o Nearly one-quarter of survey respondents (23%) would be more likely to use the Berlin Social Services/COA if programs and services if it included residents of all ages and functioned like a community center.
- o The current COA/SS Town Hall space is insufficient, which has implications for accessing COA/SS programs and services. Key Informant interviewees and survey respondents both cited "the limited size" and the "lack of permanent dedicated space" as key challenges. Survey participants offered preference for "added choices in a large space" such as the Old Town Hall.
- o When asked about the likelihood of participating at an all-ages community center, 47% of survey respondents of all ages stated they would be very likely or somewhat likely to participate.

Recommendations:

- o Explore additional ways to connect with community members for input and feedback about what a unifying public space might look like. Explore multiple avenues of communication and information (e.g., written feedback, email or online feedback, public forums) and ensure that perspectives representative of the community are heard, to gain a better understanding for how to join and align all segments of the population.
- o Consider updating the COA/SS space with new paint, decorations, and furniture to create a more welcoming space that can encourage new participants to come and participate.
- o Organize a task force to identify suitable existing space in Berlin while exploring the appetite and potential for a Community Center. Include Town Departments that may be most affected by the development of a center, such as the departments of recreation, the COA/SS, and school leaders.

Awareness and understanding of the Berlin COA/SS is uneven among residents.

- o Lacking a sense of belonging is a deterrent that was commonly reported. For example, a substantive share of survey respondents cited feeling excluded by sharing write-in responses stating, "lived here 10 years still treated like an outsider" and "never felt included." Limits to awareness and inclusion are exemplified by a survey participant who commented, "not sure about events...feel odd just showing up."
- o When surveyed, 12% of adults in Berlin reported not knowing someone living nearby that can be relied on for help.

- o Most key informant interviewees described an ongoing reluctance of Berliners to request help, even during emergency events, for "fear of being seen as needing assistance" by other members of the community. Recent examples stated during interview discussions described this stigma as including requests for routine medical transport, essential errands like banking and food shopping, personal injury, visits to the food bank and/or requesting fuel assistance.
- o Over one in four survey respondents (26%) rate assistance with local and state support programs as very important to them or their families, while 30% of those surveyed report they do not know what is offered.
- o 39% of respondents reported that having more knowledge about the programs and services available would increase their likelihood of participating.

Recommendations:

- o Explore developing a resident ambassador program to educate residents with information about existing resources to be conduits between Social Services/COA and the community atlarge, this could possibly expand the current property tax work off position.
- o Investigate ways to welcome first-time participants who are reluctant to participate on their own (e.g., a "new member day" or a "bring a buddy" program to welcome new participants).
- o Begin a rebranding effort to raise awareness about what is offered by the Berlin COA and Social Services. Perhaps changing the name to be more inclusive and creating an image that reframes overall health, mental health, and aging as a positive and active experience may empower residents to participate in the community.
 - o Expand the use of technology (e.g., phone or other mobile devices) to include residents who are unable to leave their home in existing programs through video technology or making "friendly visits" by telephone.

Costs of living and availability of accessible housing options are perceived as challenging in Berlin, together with home modifications and repairs.

- o Almost all key informants alongside survey participants reported challenges associated with housing, including that property taxes are becoming unaffordable.
- o There are extremely limited options within Berlin to downsize. Three percent of Berliners surveyed noted that they would prefer a smaller home or different residence, suggesting the desire for added housing options for those who want to downsize in the future.
- o When asked about preferences for type of housing, 56% of the younger participants preferred a single-family home. Among respondents age 70s, a senior independent living community is first choice and an assisted living is the most preferred housing type for the future, reported by those age 80+.

- o Cost of living, particularly rising property taxes, is named as the top concern among survey respondents as they think about being able to stay in Berlin as they age. One survey participant summarized the challenges reported by many residents for, "the rising costs of electricity, upkeep of a home, lawn, snow removal, and repairs." A share of write-in responses voices concerns for an ability to "access affordable housing for my children" and "how much maintenance is required at our farm." Others questioned that the "cost of living is constantly rising as are taxes" and "at some point we probably won't be able to afford to live here."
- o Nearly a third of survey respondents report needing some kind of home repair to remain living safely over the next 5 years. Among them, 19% are unable to pay for such repairs.

- Consider ways of connecting residents with local resources for home repair or modifications. Including sources of funding, but also with other individuals who can do minor tasks or projects around the home.
- o Advocate for options that current residents prefer.
 - o Promote awareness of various housing options across the lifespan and continue to <u>contribute to local conversations</u> about housing options for older adults who wish to find supportive housing.
 - Advocate for options that current residents prefer, including types of housing that offer low maintenance and single floor living. Single-family homes, assisted living communities and senior independent living units are desirable housing options.
 - Host a virtual forum to promote community conversations and awareness related to home sharing opportunities. Include representatives from Nesterly¹⁷, a social enterprise that is dedicated to building intergenerational engagement and access to affordable housing through home sharing or the TreeHouse model¹⁸.
- o Promote awareness of existing property tax relief program.
 - Document the number of residents who are "turned away" from existing program due to eligibility requirements or other reasons to establish recommendations for expanding access. If vacancies exist, consider a recruitment campaign.
 - Explore other incentive programs for volunteers.

¹⁷ https://www.nesterly.com

¹⁸ https://www.treehousefoundation.net/

Desire for improved accessible outdoor spaces

- o A third of Berliners (33%) have a physical disability, including 13% who have two or more disabilities. Survey respondents reported having a condition limiting their participation in the community reported being dissatisfied or very dissatisfied (19%) with handicap accessibility features.
- o Conversations with key informant interviewees illuminated issues of accessibility for Berliners experiencing "mobility constraints," both inside and outside of municipal structures.
- o Availability and lighting of sidewalks, conveniently located public restrooms, and availability of benches or shaded seating in public areas/along walkways each received the lowest levels of satisfaction for survey participants when asked to rate their satisfaction with the livability of features in Berlin. The absence of these features can have serious implications for mobility around Town.
- o Outdoor fitness options like "completing a rail trail" and the "ability to bike or walk" were cited as priorities by survey participants, indicating resident's desire for staying healthy, active, and independent.
- o 14% of survey respondents reported having an impairment that limits their ability to participate in the community. This share nearly triples for those age 80 or older (40%).

- Plan the dedication of existing benches or installation of new benches as "age friendly" or "happy to chat" benches that include features like shade, arm rests, and solid pathways to/from the bench.
- o For many community members of all ages, the fear of not being able to locate a public restroom is enough to keep them homebound. Consider engaging with local business, organizations, and municipal entities to document where accessible bathrooms exist and make a map of these restrooms available to older residents via the Town website.
- Ensure that park or public space redesign or beautification plans in Berlin include adequate input from residents of all ages-this might mean hosting daytime and evening feedback sessions and targeted outreach to adults encouraging them to be involved.
- o Encourage collaborative community garden projects where residents are paired with a household who can host the raised garden bed and they collectively care for and benefit from the plantings.

Many Berlin residents need support due to physical or cognitive conditions, and many caregivers need help.

- o More than one-third (38%) of survey respondents reported having been a caregiver for someone who is frail or disabled within the past 5 years. Over two-thirds (68%) of caregivers reported that it is challenging to provide care and complete their daily responsibilities, including 65% of those in their 60s.
- o Rates of caregiving were highest among younger respondents, with 40% under 60 years of age.
 - o Key Informant interviewees cited rising community demand for local supports that include "informal in-home service, and on-call support from medical and mental health professionals in lieu of limitations to regional partners capacity to provide assistance to Berlin's residents."

- o Create new ways of providing information and assistance for caregivers, support groups for caregivers, and provide information about referral resources available. Consider hosting a family caregiver "resource fair" as an opportunity to connect the Senior Center with family caregivers.
- o Consider creating a COA Homemaker position, part-time, from 16-18 hours a week. This position could focus on providing short-term in-home support (e.g., light housekeeping) for residents.
- o Track demand for this municipal program and consider further expansion of the role as needed.
- o Consider hosting a "Caregiver's Night Out" to provide residents who might be caring for a spouse, parent, or grandparent an opportunity to enjoy a night of entertainment.
- o Explore partnerships with volunteer groups and other aging service providers to provide respite care during the event.
- o Assess the potential for offering a Memory Café or providing resources of nearby Cafés for residents and their caregivers to attend.
- o Consider pilot-testing a volunteer respite program.
- o Encourage City employees or resident volunteers to become "dementia friends" to learn more about communication and reduction of stigma around dementia.
- o Continue to coordinate with other COAs and organizations to connect Berlin caregivers with existing services.

Obtaining supplementary and accessible transportation is a concern for some of Berlin's residents as they age.

- o Maintaining independence is a major concern for survey respondents and one key facilitator of this independence is transportation. This sentiment was summarized by respondents indicating future concern due to an "ability to drive-nothing is within walking distance," and an "ability to get around town, run errands, address health needs."
- o Only 5% of respondents do not drive, although this number is significantly larger when looking at just those age 80 and older, as 29% of this older segment of the population do not drive. Many residents who do drive, modify their driving to make it easier or safer.
- o Among those who do not currently drive, 29% have missed or needed to reschedule a medical appointment because of a lack of transportation within the past 12 months. This is compared to only 1% of those who drive themselves and 7% of those who drive with some modifications.

- o Conduct targeted, proactive, outreach to raise awareness of the existing programs that provide transportation to medical appointments and for other trips.
- o Consider <u>developing a local "travel training" program</u> where residents can learn about options and navigation.
- o Promote access to driver education and refresher courses for all drivers.
- o Target information to segments of the community within Berlin who may have particular need for transportation services, including those living alone and those with disabilities. Consider additional outreach for transportation when inclement weather is anticipated.
- o Explore the expansion of <u>volunteer transportation programs beyond medical</u> <u>appointments</u> (e.g., Friends in Service Helping¹⁹ (F.I.S.H.) to expand door-to-door transportation to the Senior Center or other social gatherings or shopping excursions and appointments.

¹⁹ https://fishlexington.org/

Appendix A: Community Survey Results

<u>Note</u>: Appendix tables are based on 591 responses to the Town of Berlin Survey of residents age 18 and over, conducted in Spring 2023. Of all the respondents, 301 completed the survey online and the 290 were returned my mail. See text for additional details.

Section I: Community & Neighborhood

How long have you lived in the Town of Berlin? (Check only one)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-----------------------|----------|---------------|---------------|---------------|---------------|---------|
| Fewer than 5 years | 17% | 37% | 9% | 14% | 16% | 14% |
| 5-14 years | 28% | 41% | 45% | 25% | 20% | 13% |
| 15-24 years | 17% | 14% | 20% | 11% | 19% | 30% |
| 25-34 years | 11% | 0% | 17% | 18% | 9% | 4% |
| 35-44 years | 11% | 6% | 2% | 18% | 13% | 8% |
| 45 years or longer | 16% | 2% | 7% | 14% | 23% | 31% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

How important is it to you to remain living in Berlin as you get older? (Check only one)

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|-------------------------|----------|-----------|-----------|-----------|-----------|---------|
| Very Important | 52% | 35% | 41% | 55% | 60% | 64% |
| Somewhat Important | 32% | 37% | 36% | 32% | 26% | 29% |
| Slightly Important | 10% | 17% | 13% | 10% | 9% | 4% |
| Not at All Important | 6% | 11% | 10% | 3% | 5% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

How often do you feel unsafe in the community where you live? (Check only one)

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|------------|----------|-----------|-----------|-----------|-----------|---------|
| Never | 62% | 61% | 66% | 62% | 62% | 59% |
| Rarely | 33% | 32% | 26% | 36% | 33% | 34% |
| Sometimes | 5% | 7% | 7% | 2% | 5% | 7% |
| Frequently | <1% | 0% | 1% | 0% | 0% | 0% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

The following items refer to the level of satisfaction with features of Berlin. <u>Please rate</u> <u>your level of satisfaction with each of the following features of Berlin.</u> (Check only one box per item)

Availability of Public Parking

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 28% | 39% | 25% | 27% | 26% | 27% |
| Satisfied | 51% | 44% | 50% | 57% | 51% | 44% |
| Dissatisfied | 6% | 10% | 7% | 5% | 4% | 4% |
| Very Dissatisfied | 2% | 2% | 2% | 1% | 2% | 2% |
| I don't know | 13% | 5% | 16% | 10% | 17% | 23% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Handicap accessibility of walkways, public buildings, and businesses

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 17% | 19% | 14% | 16% | 16% | 23% |
| Satisfied | 39% | 21% | 32% | 43% | 47% | 51% |
| Dissatisfied | 12% | 16% | 19% | 9% | 12% | 4% |
| Very Dissatisfied | 4% | 8% | 5% | 3% | 3% | 0% |
| I don't know | 28% | 36% | 30% | 29% | 22% | 22% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Availability of after-school activities for kids

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 6% | 7% | 12% | 4% | 2% | 8% |
| Satisfied | 17% | 23% | 14% | 18% | 13% | 20% |
| Dissatisfied | 5% | 14% | 10% | 1% | 2% | 2% |
| Very Dissatisfied | 2% | 3% | 2% | 3% | 0% | 0% |
| I don't know | 70% | 53% | 62% | 74% | 83% | 70% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Availability and lighting of sidewalks

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 6% | 6% | 5% | 8% | 3% | 10% |
| Satisfied | 25% | 22% | 26% | 24% | 24% | 31% |
| Dissatisfied | 31% | 40% | 31% | 30% | 30% | 20% |
| Very Dissatisfied | 17% | 27% | 25% | 17% | 9% | 6% |
| I don't know | 21% | 5% | 13% | 21% | 34% | 33% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Availability of benches or shaded seating in public areas and along walkways

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 8% | 9% | 8% | 10% | 3% | 13% |
| Satisfied | 33% | 33% | 38% | 33% | 31% | 35% |
| Dissatisfied | 20% | 21% | 17% | 17% | 24% | 19% |
| Very Dissatisfied | 8% | 9% | 15% | 9% | 4% | 2% |
| I don't know | 31% | 28% | 22% | 31% | 38% | 31% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Marked crosswalks and/or timing of walk signals

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 12% | 14% | 11% | 13% | 8% | 20% |
| Satisfied | 50% | 53% | 50% | 47% | 51% | 53% |
| Dissatisfied | 12% | 11% | 16% | 13% | 11% | 4% |
| Very Dissatisfied | 6% | 6% | 8% | 8% | 3% | 2% |
| I don't know | 20% | 16% | 15% | 19% | 27% | 21% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Clear and consistent signage and wayfinding

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 14% | 17% | 13% | 12% | 11% | 21% |
| Satisfied | 58% | 64% | 61% | 58% | 57% | 47% |
| Dissatisfied | 11% | 11% | 14% | 10% | 12% | 6% |
| Very Dissatisfied | 3% | 4% | 2% | 4% | 3% | 2% |
| I don't know | 14% | 4% | 10% | 16% | 17% | 24% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Conveniently located public restrooms

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 4% | 5% | 4% | 3% | 4% | 7% |
| Satisfied | 18% | 15% | 17% | 18% | 19% | 24% |
| Dissatisfied | 19% | 12% | 24% | 20% | 20% | 13% |
| Very Dissatisfied | 11% | 10% | 19% | 6% | 14% | 4% |
| I don't know | 48% | 58% | 36% | 53% | 43% | 52% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Please indicate your level of agreement with the following statement: "Local policy makers take into account the interests and concerns of residents?"

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Satisfied | 11% | 12% | 13% | 9% | 9% | 11% |
| Satisfied | 49% | 48% | 46% | 50% | 51% | 49% |
| Dissatisfied | 15% | 11% | 18% | 18% | 13% | 12% |
| Very Dissatisfied | 5% | 10% | 2% | 5% | 6% | 2% |
| I don't know | 20% | 19% | 21% | 18% | 21% | 26% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Section II: Housing and Living Situation

Which of the following best describes your current place of residence? (Check only one)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| Single-family home | 69% | 83% | 69% | 73% | 60% | 62% |
| Multi-family home (2, 3, or more units) | 1% | 3% | 3% | 1% | 0% | 1% |
| Accessory apartment (add-on apartment to an existing home) | 2% | 0% | 2% | 2% | 3% | 1% |
| Apartment | 2% | 5% | 1% | 2% | 1% | 5% |
| Subsidized/Affordable housing | 8% | 6% | 23% | 5% | 5% | 3% |
| Eco Village/Co-Housing | 7% | 0% | 0% | 8% | 15% | 9% |
| Senior Independent Living Community (e.g., 55+ housing) | 7% | 0% | 0% | 8% | 14% | 9% |
| Condominium or townhome | 7% | 1% | 0% | 5% | 12% | 17% |
| Other (Please specify) | 1% | 1% | 0% | 1% | 0% | 1% |

^{*}Figures do not sum to 100%

Does your current residence have a bedroom and a bathroom on the entry level such that you could meet your self-care needs as you age?

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|-------|----------|-----------|-----------|-----------|-----------|---------|
| Yes | 67% | 53% | 53% | 66% | 77% | 85% |
| No | 33% | 47% | 47% | 34% | 23% | 15% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

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

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| I live alone | 20% | 7% | 5% | 17% | 32% | 33% |
| A spouse/partner | 69% | 80% | 84% | 75% | 59% | 44% |
| My adult children (age 18 or older) | 16% | 7% | 33% | 18% | 6% | 18% |
| Pet(s) | 24% | 49% | 35% | 25% | 11% | 6% |
| My grandchild(ren) (under age 18) | 2% | 1% | 1% | 1% | 7% | 2% |
| My child(ren) (under age 18) | 13% | 54% | 27% | 1% | 0% | 0% |
| My parent(s) | 4% | 15% | 7% | 3% | 0% | 0% |
| Another relative | 2% | 4% | 1% | 2% | 1% | 4% |
| Someone else (please specify) | 3% | 4% | 3% | 3% | 2% | 1% |

^{*}Figures do not sum to 100%

Do you plan to stay in Berlin for the next 5 years or more?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| Yes, I plan to stay in Berlin in my current home | 90% | 86% | 89% | 93% | 88% | 91% |
| Yes, I plan to stay in Berlin but move to a different residence | 3% | 4% | 5% | 3% | 2% | 3% |
| No, I plan to move out of Berlin | 7% | 10% | 6% | 4% | 10% | 6% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Does your current residence need <u>home modifications</u> (*e.g., ramp, auto-open door, doorbell modifications*) to improve your ability to live in it safely for the next five years?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| Yes, I can afford to make these modifications | 13% | 2% | 15% | 11% | 17% | 19% |
| Yes, but I cannot afford to make these modifications | 7% | 3% | 6% | 5% | 11% | 11% |
| Yes, but I am not responsible for making these modifications (e.g., I rent my current residence) | 3% | 5% | 3% | 1% | 2% | 5% |
| No, my residence does not currently need modifications | 77% | 90% | 76% | 83% | 70% | 65% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Does your current residence need <u>home repairs</u> (*e.g., a new roof or heating system*) to improve your ability to live in it safely for the next five years?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| Yes, and I can afford to make these repairs | 19% | 15% | 25% | 23% | 14% | 19% |
| Yes, but I cannot afford to make these repairs | 10% | 9% | 8% | 11% | 14% | 8% |
| Yes, but I am not responsible for making these repairs (e.g., I rent my current residence) | 4% | 5% | 2% | 2% | 4% | 3% |
| No, my current residence does not need repairs | 67% | 71% | 65% | 64% | 68% | 70% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

In the next 5 years, if a change in your health or physical ability required that your move from your current residence, what kind of housing would you prefer in Berlin? (*Check all that apply*)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| Smaller single-family home | 34% | 62% | 51% | 34% | 19% | 13% |
| Multi-family home (2, 3, or more units) | 3% | 7% | 6% | 3% | 1% | 0% |
| Accessory apartment (add-on apartment to an existing home) | 8% | 10% | 8% | 10% | 6% | 6% |
| Apartment | 4% | 10% | 3% | 3% | 1% | 1% |
| Affordable housing | 12% | 14% | 14% | 10% | 14% | 8% |
| Assisted living community | 20% | 5% | 11% | 22% | 29% | 20% |
| Senior Independent Living Community | 28% | 4% | 22% | 35% | 35% | 32% |
| Move in with family or friends (e.g., co-housing) | 11% | 5% | 13% | 13% | 8% | 15% |
| Condominium or townhome | 12% | 16% | 17% | 14% | 9% | 4% |
| Other (Please specify) | 11% | 11% | 19% | 11% | 6% | 13% |

^{*}Figures do not sum to 100%

Section III: Transportation

Which of the following best describes your driving status?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60-69 | Age 70-79 | Age 80+ |
|---|----------|---------------|---------------|-----------|-----------|---------|
| I do not drive | 5% | 0% | 0% | 3% | 4% | 22% |
| I drive with some limitations (e.g., avoid driving at night or on highways) | 11% | 4% | 5% | 7% | 17% | 26% |
| I drive with no limitations | 84% | 96% | 95% | 90% | 79% | 52% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

What are the primary ways in which you meet your transportation needs? (*Check all that apply*)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| I drive myself | 93% | 100% | 100% | 96% | 92% | 72% |
| My spouse or child(ren) drive(s) me | 27% | 225% | 24% | 22% | 24% | 47% |
| My parents drive me | 1% | 1% | 1% | 0% | 0% | 0% |
| Friends or neighbors drive me | 6% | 1% | 3% | 6% | 8% | 7% |
| Berlin Council on Aging (COA) | 2% | 0% | 0% | 3% | 4% | 6% |
| Commuter rail | 2% | 4% | 4% | 4% | 1% | 0% |
| Taxi or ride sharing options (e.g., Uber, Lyft) | 2% | 3% | 2% | 3% | 1% | 1% |
| Walk or bike | 10% | 19% | 10% | 14% | 4% | 1% |
| Berlin WRTA | <1% | 0% | 0% | 0% | 0% | 1% |
| Other | 3% | 0% | 2% | 3% | 4% | 4% |

^{*}Figures do not sum to 100%

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

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------|----------|---------------|---------------|---------------|---------------|---------|
| Yes | 3% | 0% | 7% | 2% | 3% | 7% |
| No | 97% | 100% | 93% | 98% | 97% | 93% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

How satisfied are you with the transportation options available to you?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Completely Satisfied | 29% | 42% | 29% | 31% | 21% | 24% |
| Very Satisfied | 31% | 20% | 25% | 30% | 39% | 40% |
| Somewhat Satisfied | 24% | 27% | 20% | 26% | 24% | 22% |
| Slightly Satisfied | 9% | 9% | 13% | 5% | 10% | 9% |
| Not at All Satisfied | 7% | 2% | 13% | 8% | 6% | 5% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Section IV: Caregiving

Do you <u>now or have you in the past 5 years</u> provided care or assistance to a person who is disabled, frail (e.g., a spouse, parent, relative, or friend)?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------|----------|---------------|---------------|---------------|---------------|---------|
| Yes | 38% | 31% | 48% | 49% | 33% | 20% |
| No | 62% | 69% | 52% | 51% | 67% | 80% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

How challenging is/was it for you to care for this person(s) and meet your other responsibilities with family, your personal health, and/or work? (Check only one)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|------------------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Challenging | 26% | 24% | 33% | 21% | 28% | 31% |
| Somewhat Challenging | 41% | 48% | 38% | 43% | 38% | 31% |
| Neither Challenging Nor Easy | 20% | 20% | 17% | 25% | 17% | 15% |
| Somewhat Easy | 8% | 4% | 5% | 8% | 11% | 15% |
| Very Easy | 5% | 4% | 7% | 3% | 6% | 8% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

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

Did this person have any of the following conditions?

| | All Ages |
|---|----------|
| Alzheimer's disease or dementia, Parkinson's disease | 11% |
| Psychological condition (e.g., anxiety, depression) | 8% |
| Intellectual or developmental disability | 2% |
| Sensory impairment (e.g., vision, hearing) | 8% |
| Chronic disease (e.g., cancer, diabetes, asthma) | 14% |
| Mobility impairment (e.g., difficulty walking, climbing stairs) | 25% |
| Recent surgery | 7% |
| Other | 4% |

^{*}This table only includes respondents who reported providing care to someone now or in the last five years. Age breakdown is not provided due to small cell sizes. Figures do not sum to 100%.

Section V: Current and Future Programs & Services at the Council on Aging (COA)

Currently, how frequently do you use programs or services offered by Berlin Social Services/Berlin COA? *(Check only one)*

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| Two or more times a week | 1% | 0% | 0% | 1% | 1% | 1% |
| About once a week | 2% | 0% | 0% | 2% | 5% | 1% |
| A few times a month | 1% | 0% | 0% | 3% | 1% | 1% |
| About once a month | 2% | 0% | 1% | 1% | 3% | 2% |
| A few times a year | 13% | 4% | 7% | 11% | 17% | 29% |
| Never, I do not use programs or services offered by the Berlin Social Services/Council on Aging | 81% | 96% | 92% | 82% | 73% | 66% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

The following items refer to programs and services that are offered through Berlin's Social Services. <u>Please rate the importance of each service to you or your family.</u> (Check only one box per item)

Assistance with local, state, or federal programs (e.g., MassHealth, SNAP, fuel assistance)

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|-----------|-----------|-----------|-----------|---------|
| Very Important (1) | 26% | 31% | 26% | 33% | 19% | 16% |
| (2) | 7% | 6% | 6% | 7% | 7% | 7% |
| Moderately Important (3) | 22% | 22% | 25% | 22% | 21% | 19% |
| (4) | 7% | 4% | 7% | 10% | 7% | 7% |
| Not at all important (5) | 38% | 37% | 36% | 28% | 46% | 51% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Information and referral for available services and resources

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|-----------|-----------|-----------|-----------|---------|
| Very Important (1) | 31% | 28% | 36% | 37% | 26% | 27% |
| (2) | 11% | 12% | 1% | 11% | 16% | 10% |
| Moderately Important (3) | 28% | 22% | 33% | 30% | 24% | 33% |
| (4) | 9% | 8% | 5% | 10% | 11% | 5% |
| Not at all important (5) | 21% | 30% | 25% | 12% | 23% | 25% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Health programs and wellness programs (e.g., Blood pressure, hearing, health education)

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|--------------------------|----------|-----------|-----------|-----------|-----------|---------|
| Very Important (1) | 24% | 31% | 23% | 27% | 18% | 20% |
| (2) | 13% | 14% | 13% | 13% | 15% | 5% |
| Moderately Important (3) | 26% | 19% | 29% | 23% | 29% | 34% |
| (4) | 10% | 5% | 11% | 12% | 12% | 8% |
| Not at all important (5) | 27% | 31% | 24% | 25% | 26% | 33% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Exercise classed (e.g., Tai Chi, Yoga)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Important (1) | 20% | 30% | 27% | 22% | 12% | 5% |
| (2) | 14% | 12% | 14% | 18% | 14% | 9% |
| Moderately Important (3) | 30% | 29% | 30% | 30% | 35% | 22% |
| (4) | 10% | 4% | 8% | 11% | 10% | 19% |
| Not at all important (5) | 26% | 25% | 21% | 19% | 29% | 45% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Social and emotional wellness program (e.g., friendly visiting, mental health counseling)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Important (1) | 21% | 33% | 32% | 20% | 12% | 15% |
| (2) | 12% | 13% | 10% | 17% | 11% | 8% |
| Moderately Important (3) | 22% | 20% | 24% | 20% | 24% | 20% |
| (4) | 16% | 9% | 11% | 23% | 17% | 15% |
| Not at all important (5) | 29% | 25% | 23% | 20% | 36% | 42% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Nutrition programs (e.g., Grab N Go)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Important (1) | 17% | 23% | 24% | 20% | 9% | 13% |
| (2) | 13% | 18% | 14% | 13% | 14% | 7% |
| Moderately Important (3) | 23% | 19% | 25% | 20% | 24% | 25% |
| (4) | 12% | 7% | 6% | 13% | 17% | 10% |
| Not at all important (5) | 35% | 33% | 31% | 34% | 36% | 45% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Seminars and educational programs

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Important (1) | 14% | 23% | 18% | 17% | 6% | 7% |
| (2) | 16% | 12% | 16% | 17% | 19% | 10% |
| Moderately Important (3) | 31% | 35% | 28% | 29% | 31% | 33% |
| (4) | 13% | 6% | 14% | 14% | 18% | 10% |
| Not at all important (5) | 26% | 24% | 24% | 23% | 26% | 40% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Parties and social events

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Very Important (1) | 13% | 14% | 15% | 12% | 8% | 13% |
| (2) | 10% | 19% | 11% | 12% | 14% | 10% |
| Moderately Important (3) | 28% | 33% | 28% | 30% | 27% | 28% |
| (4) | 11% | 13% | 17% | 19% | 19% | 11% |
| Not at all important (5) | 38% | 21% | 29% | 27% | 32% | 38% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

 $Which \ of \ the \ following \ factors \ limit \ your \ use \ of \ Berlin \ Social \ Services/Berlin \ COA? \ (Check \ all \ that$

apply)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|-------------|---------------|---------------|---------------|---------------|---------|
| I am not interested in programs offered (e.g., fitness classes, lectures) | 22% | 20% | 14% | 22% | 24% | 32% |
| I do not know what is offered | 30% | 27% | 35% | 28% | 31% | 25% |
| I do not have time | 13% | 16% | 21% | 13% | 8% | 13% |
| I do not use technology | 6% | 0% | 0% | 3% | 8% | 21% |
| I do not have transportation to the Council on Aging | 2% | 0% | 0% | 1% | 3% | 8% |
| I do not need the services offered (e.g., tax counseling, fuel assistance) | 40% | 33% | 34% | 44% | 49% | 39% |
| I am still working | 37% | 59% | 67% | 41% | 14% | 8% |
| I participate in programs elsewhere | 9% | 5% | 3% | 10% | 12% | 10% |
| Other | 11% | 10% | 6% | 12% | 10% | 18% |

^{*}Figures do not sum to 100%.

"I would be more likely to use the Berlin Social Services/COA programs and services if...." (Check all that apply)

| | All A ==== | Age 18- | Age 50- | Age 60- | Age 70- | A 00 · |
|---|------------|---------|---------|---------|---------|---------|
| Transportation | All Ages | 49 | 59 | 69 | 79 | Age 80+ |
| options to the Council on Aging were more convenient | 4% | 2% | 2% | 3% | 3% | 11% |
| There was more parking | 2% | 6% | 1% | 1% | 1% | 4% |
| The building was easier to navigate | 1% | 1% | 3% | 1% | 3% | 2% |
| I had more knowledge about the programs and services that are available | 39% | 32% | 36% | 36% | 51% | 33% |
| The space could accommodate more participants (e.g., larger class size or more variety of programs) | 5% | 0% | 5% | 7% | 7% | 3% |
| There were more remote programs | 6% | 4% | 6% | 7% | 7% | 4% |
| The hours of the Council on Aging were more convenient (e.g., nights or weekend hours) | 6% | 5% | 11% | 7% | 5% | 3% |
| The cost of programs was reduced or eliminated | 5% | 5% | 8% | 5% | 6% | 3% |

| The space was more comfortable and inviting | 5% | 4% | 3% | 4% | 8% | 3% |
|---|-----|-----|-----|-----|-----|-----|
| Programs and services were better suited to my needs and interests | 17% | 9% | 16% | 17% | 20% | 19% |
| There was more special interest or cultural programs (e.g., LGBTQ+, singles, or grandparents raising grandchildren) | 6% | 5% | 17% | 6% | 4% | 1% |
| It included residents of all ages and functioned as a community center | 23% | 38% | 40% | 21% | 13% | 11% |
| Other | 15% | 16% | 11% | 21% | 7% | 21% |

^{*}Figures do not sum to 100%.

Thinking about your own future needs and interests, which of the following areas would you prioritize in expanding the Department of Social Services or the Council on Aging? (Check all that apply)

| | ATI 4 | Age 18- | Age 50- | Age 60- | Age 70- | |
|--|----------|---------|---------|---------|---------|---------|
| Lunch or other food | All Ages | 49 | 59 | 69 | 79 | Age 80+ |
| offerings | 27% | 19% | 32% | 25% | 31% | 25% |
| Arts programs (e.g., painting, music, acting, digital photography) | 29% | 46% | 38% | 34% | 17% | 11% |
| Volunteer opportunities | 28% | 38% | 36% | 36% | 18% | 10% |
| Mental Health (e.g., counseling or referrals) | 19% | 37% | 30% | 18% | 10% | 6% |
| Indoor fitness (e.g., strength training, exercise equipment) | 40% | 35% | 53% | 46% | 43% | 14% |
| Outdoor fitness (e.g., walking, hiking, kayaking) | 38% | 42% | 44% | 46% | 36% | 15% |
| Day trips and excursions | 37% | 26% | 27% | 42% | 42% | 38% |
| Adult day/Caregiver program | 15% | 26% | 22% | 15% | 9% | 11% |
| Lectures and other one-time educational events | 27% | 22% | 24% | 33% | 29% | 22% |
| Educational courses (e.g., technology, foreign language courses, or bird watching) | 26% | 37% | 31% | 29% | 22% | 11% |
| Recreational activities (e.g., cards, board games) | 25% | 40% | 27% | 28% | 17% | 14% |

| Job seeking or employment support | 7% | 19% | 11% | 5% | 3% | 0% |
|---|-----|-----|-----|-----|-----|-----|
| Social activities (e.g., coffee hour, informal space for socializing) | 26% | 37% | 25% | 25% | 19% | 26% |
| Performances (e.g., music, theater, comedy) | 32% | 33% | 24% | 35% | 33% | 29% |
| Evening or weekend activities | 19% | 25% | 30% | 23% | 8% | 8% |
| Wellness (e.g., meditation, massage) | 30% | 42% | 43% | 31% | 24% | 11% |
| Other | 6% | 4% | 5% | 11% | 2% | 7% |

^{*}Figures do not sum to 100%.

If an all-ages inclusive community center was developed, how likely would you or members of your household be to use the facility?

| | All Ages | Age 18-49 | Age 50-59 | Age 60-69 | Age 70-79 | Age 80+ |
|----------------------|----------|-----------|-----------|-----------|-----------|---------|
| Very Likely | 17% | 22% | 25% | 15% | 15% | 9% |
| Somewhat Likely | 29% | 34% | 37% | 27% | 22% | 29% |
| Unsure | 36% | 21% | 24% | 41% | 43% | 42% |
| Somewhat Unlikely | 8% | 9% | 5% | 8% | 11% | 6% |
| Very Unlikely | 10% | 14% | 9% | 9% | 9% | 14% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Section VI: Social Activities and Relationships

How often do you talk on the phone or video call, send email, use social media, or get together to visit with family, friends, or neighbors? (Check only one per item)

Talk on the phone or video call with family, friends, or neighbors

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-----------------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Every day | 51% | 53% | 51% | 50% | 48% | 56% |
| One or more times a week | 34% | 33% | 33% | 36% | 35% | 28% |
| More than once a month | 9% | 6% | 9% | 7% | 11% | 9% |
| Once a month | 3% | 5% | 5% | 3% | 2% | 2% |
| 2-3 times a year (e.g., holidays) | 2% | 1% | 2% | 3% | 2% | 2% |
| Never | 1% | 2% | 0% | 1% | 2% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

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

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-----------------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Every day | 62% | 78% | 74% | 61% | 57% | 41% |
| One or more times a week | 23% | 17% | 22% | 23% | 24% | 26% |
| More than once a month | 6% | 3% | 2% | 7% | 7% | 7% |
| Once a month | 2% | 2% | 1% | 3% | 2% | 2% |
| 2-3 times a year (e.g., holidays) | 2% | 0% | 0% | 4% | 1% | 7% |
| Never | 5% | 0% | 1% | 2% | 9% | 17% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Get together to visit with family, friends, or neighbors

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60-69 | Age 70-79 | Age 80+ |
|-----------------------------------|----------|---------------|---------------|-----------|-----------|---------|
| Every day | 19% | 16% | 26% | 22% | 8% | 25% |
| One or more times a week | 46% | 47% | 41% | 39% | 57% | 49% |
| More than once a month | 21% | 26% | 21% | 26% | 19% | 12% |
| Once a month | 7% | 9% | 6% | 6% | 8% | 9% |
| 2-3 times a year (e.g., holidays) | 5% | 1% | 6% | 5% | 7% | 5% |
| Never | 1% | 1% | 0% | 2% | 1% | 0% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Do you know someone living nearby on whom you can rely for help when you need it?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------|----------|---------------|---------------|---------------|---------------|---------|
| Yes | 88% | 90% | 81% | 85% | 92% | 92% |
| No | 12% | 10% | 19% | 15% | 8% | 8% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

<u>In the past five years</u>, have you ever felt excluded in Berlin because of any of the following? *(Check all that apply)*

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---------------------------------------|----------|---------------|---------------|---------------|---------------|---------|
| Age | 3% | 4% | 5% | 3% | 1% | 1% |
| Disability | 2% | 3% | 2% | 2% | 1% | 0% |
| Gender | 1% | 4% | 0% | 0% | 0% | 0% |
| Income | 4% | 9% | 6% | 4% | 1% | 0% |
| Religion or cultural background | 2% | 5% | 6% | 0% | 2% | 1% |
| Skin color, race, or ethnicity | 1% | 3% | 2% | 0% | 0% | 0% |
| Sexual orientation | 1% | 3% | 2% | 0% | 0% | 0% |
| No, I have never felt excluded | 80% | 72% | 68% | 80% | 87% | 88% |
| Other | 9% | 10% | 14% | 9% | 6% | 6% |

^{*}Figures do not sum to 100%.

What kind of volunteering would you be most interested in? (Check all that apply)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| N/A I am not interested or unable to volunteer at this time | 46% | 38% | 40% | 40% | 54% | 1% |
| Physical activity (e.g., landscaping or setting up tables) | 5% | 26% | 18% | 17% | 10% | 7% |
| Administrative assistance (e.g., answering phones or greeting people) | 11% | 9% | 9% | 13% | 14% | 10% |
| Special events or one-time needs | 32% | 41% | 43% | 37% | 24% | 18% |
| Program assistance (e.g., helping host programs) | 7% | 7% | 8% | 8% | 8% | 3% |
| Skills-based volunteering (e.g., providing marketing or technology consultation) | 10% | 28% | 10% | 8% | 7% | 0% |
| Other | 8% | 5% | 6% | 10% | 9% | 4% |

^{*}Figures do not sum to 100%.

Section VII: Current & Future Retirement Plans

What is your employment status? (Check all that apply)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-----------------------|----------|---------------|---------------|---------------|---------------|---------|
| Working full- time | 38% | 88% | 77% | 37% | 6% | 1% |
| Working part- time | 13% | 7% | 15% | 18% | 86% | 9% |
| Looking for work | 1% | 1% | 1% | 2% | 1% | 0% |
| Retired | 46% | 0% | 4% | 41% | 82% | 88% |
| Student | 1% | 3% | 1% | <1% | 0% | 0% |
| Other | 4% | 3% | 3% | 6% | 3% | 4% |

^{*}Figures do not sum to 100%.

When do you plan to fully retire? (Check only one)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| N/A, I am already fully retired | 43% | 0% | 4% | 40% | 78% | 89% |
| Within the next 3 years | 9% | 0% | 10% | 19% | 6% | 5% |
| In 5 to 10 years | 13% | 0% | 35% | 20% | 4% | 2% |
| In 10 to 15 years | 6% | 7% | 28% | <1% | 0% | 0% |
| In more than 15 years | 13% | 74% | 6% | <1% | 0% | 0% |
| Not sure | 8% | 9% | 9% | 9% | 7% | 2% |
| I do not anticipate ever fully retiring | 7% | 10% | 7% | 10% | 5% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

^{*}Figures do not sum to 100%.

Section VIII: Communication

Where do you prefer to find information about the activities and services offered by the Town of Berlin? (Check all that apply)

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|--|----------|---------------|---------------|---------------|---------------|---------|
| Berlin Powder House News (print) | 55% | 11% | 22% | 67% | 81% | 71% |
| Berlin Powder House News (online) | 12% | 11% | 14% | 13% | 14% | 7% |
| Local Cable Access (Berlin TV) | 4% | 0% | 1% | 4% | 4% | 13% |
| Public postings (flyers, billboards) | 17% | 18% | 10% | 13% | 15% | 14% |
| Facebook or YouTube | 35% | 64% | 49% | 30% | 26% | 15% |
| The Clinton Item (print) | 10% | 5% | 9% | 12% | 10% | 13% |
| The Clinton Item (online) | 4% | 9% | 5% | 8% | 0% | 1% |
| Town of Berlin Website | 43% | 57% | 58% | 46% | 36% | 19% |
| Word of mouth | 33% | 32% | 41% | 26% | 33% | 43% |
| Other | 6% | 7% | 9% | 8% | 4% | 3% |

^{*}Figures do not sum to 100%

Are you able to access the internet from your home?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|---|----------|---------------|---------------|---------------|---------------|---------|
| Yes, I have access to the internet at home | 94% | 100% | 100% | 96% | 94% | 76% |
| No, I cannot afford to have access to the internet at home | 2% | 0% | 0% | 3% | 2% | 0% |
| No, I choose not to have access to the internet at home | 4% | 0% | 0% | 1% | 4% | 24% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Section IX: Demographic and Health Information

Do you have an impairment that limits your ability to participate in your community?

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|-------|----------|---------------|---------------|---------------|---------------|---------|
| Yes | 14% | 6% | 9% | 17% | 36% | 14% |
| No | 86% | 94% | 91% | 83% | 64% | 86% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|----------------|----------|---------------|---------------|---------------|---------------|---------|
| Often True | 1% | 1% | 1% | 2% | 0% | 0% |
| Sometimes True | 5% | 2% | 6% | 6% | 5% | 3% |
| Never True | 92% | 93% | 90% | 91% | 93% | 94% |
| I don't know | 2% | 4% | 3% | 1% | 2% | 3% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

Please select your gender.

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|------------|----------|---------------|---------------|---------------|---------------|---------|
| Female | 63% | 60% | 68% | 66% | 59% | 61% |
| Male | 36% | 35% | 30% | 34% | 41% | 39% |
| Non-binary | 1% | 5% | 1% | 0% | 0% | 0% |
| Other | <1% | 0% | 1% | <1% | 0% | <1% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |

What is your age range?

| | All Ages |
|----------|----------|
| 18 to 24 | 1% |
| 25 to 39 | 6% |
| 40 to 49 | 9% |
| 50 to 59 | 16% |
| 60 to 69 | 29% |
| 70 to 79 | 26% |
| 80+ | 13% |
| Total | 100% |

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."

| | All Ages | Age 18- 49 | Age 50- 59 | Age 60- 69 | Age 70- 79 | Age 80+ |
|----------------------|----------|---------------|---------------|---------------|---------------|---------|
| Strongly Agree | 38% | 50% | 40% | 36% | 34% | 34% |
| Agree | 51% | 39% | 48% | 53% | 55% | 56% |
| Disagree | 9% | 11% | 11% | 9% | 8% | 9% |
| Strongly Disagree | 2% | 0% | 1% | 2% | 3% | 1% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |