

9-2015

# Aging in Boxford: Planning for an 'active and involved' future

Nina Silverstein

*University of Massachusetts Boston, nina.silverstein@umb.edu*

Caitlin Coyle

*University of Massachusetts Boston, Caitlin.Coyle@umb.edu*

Follow this and additional works at: [http://scholarworks.umb.edu/gerontologyinstitute\\_pubs](http://scholarworks.umb.edu/gerontologyinstitute_pubs)



Part of the [Gerontology Commons](#)

---

## Recommended Citation

Silverstein, Nina and Coyle, Caitlin, "Aging in Boxford: Planning for an 'active and involved' future" (2015). *Gerontology Institute Publications*. Paper 112.

[http://scholarworks.umb.edu/gerontologyinstitute\\_pubs/112](http://scholarworks.umb.edu/gerontologyinstitute_pubs/112)

This Research Report is brought to you for free and open access by the Gerontology Institute at ScholarWorks at UMass Boston. It has been accepted for inclusion in Gerontology Institute Publications by an authorized administrator of ScholarWorks at UMass Boston. For more information, please contact [library.uasc@umb.edu](mailto:library.uasc@umb.edu).

# Aging in Boxford: Planning for an 'active and involved' future



# **Boxford Council on Aging: Planning for an ‘active and involved’ future**

Commissioned by the Town of Boxford  
Council on Aging

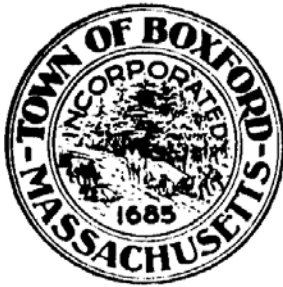
Pam Blaquiere, Director, Council on Aging  
Richard F. Taylor, PhD, Chair, Council on Aging Board

September 2015

Prepared by  
Nina M. Silverstein, PhD  
Caitlin E. Coyle, PhD

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

## Letter from Director & COA Board Chair



**Town of Boxford**  
**Council on Aging**  
7A Spofford Road  
Boxford, Massachusetts  
01921

Dear Boxford Residents,

Boxford is a rich and vibrant community, with a wide spectrum of residents of all backgrounds in professions ranging from traditional farming to professional careers including medicine, law, finance, teaching and business. It is a town filled with small businesses and enthusiastic entrepreneurs. It is a town of volunteers dedicated to town government, our two churches, and organizations including scouts, sports, music and theater groups, hiking, and environmental awareness and activism.

Boxford is also a town of space. Two acre zoning is sought and prized by current and prospective residents. Homes are secluded and private, providing respite for active professionals and quiet for those able to stay home for work or to enjoy retirement. Over 100 miles of trails provide peaceful walks for those seeking the beauty and wonders of nature.

Boxford is a town of age diversity, from school and pre-school children representing approximately 28% of our population, to Seniors representing about 20%. But this is changing. Based on growth data over the past 15 years, Boxford's Senior population is projected to be near 38% by 2030. This change in age demographics will change all aspects of Boxford as Seniors become the major age group in the town.

This report addresses the needs of Boxford's growing Senior population as more live longer and stay in Boxford. The traditional movement of age 60+ residents out of town resulting in a constant Senior population is no longer the case. Boxford Seniors are living longer, love Boxford, want to stay in their homes as long as possible, and have the financial security to remain. As the number of Seniors continues to grow, Boxford must provide the services and help they need. In return, the town retains a valuable group of residents, fiercely loyal to Boxford and passionate in preserving its history and maintaining its lifestyle.

The Boxford Council on Aging (COA) is charged with providing services and addressing the needs of Seniors. These include health and wellness clinics, exercise classes, arts and craft classes, social lunches and meetings, Medicare and Medicaid help, tax advice, medical services, Meals-on-Wheels, emergency help and routine checks of shut-ins, and help to the children of Seniors faced with the challenges of an aging parent.

The 2014 Boxford Annual Report details over 49,000 individual acts of service provided to individuals by the COA in 2014, by our staff of a full time director, part time secretary, part time social worker, van driver, and over 100 volunteers. The majority of these services originate out of the Boxford Community Center, the former Town Hall, where the COA occupies and uses all of the approximately 3500 square feet of space four days weekly. It is an aging building, small and crowded, and not ADA compliant.

This is not the first study on the needs of our Seniors. The steady growth of Boxford's Senior population made it very apparent by the late 1990s that our space and staff were becoming inadequate to serve our Seniors. By the early 2000s, the COA began addressing the need for new and expanded services. Proposals were made addressing expansion of the Community Center or building a new building on a new site. In 2007, the Selectmen appointed the Community Center Study Committee to address expanded space for the COA. Town Meeting approved a \$25,000 budget for the Committee to hire an architectural firm, Reinhardt Associates Inc., to design plans for expansion of the Community Center or construction of a new building. Reinhardt accomplished this task and concluded that due to many negative factors with expansion, a new building would be most economical and best serve the COA's growing needs. A proposal by the COA to the October 2008 Special Town Meeting for funds to plan the new building was defeated.

Reinhardt also laid out a plan for expansion of the then West Boxford Library, 188 Washington Street, for a COA center. A proposal by the COA to the 2011 Annual Town Meeting for funds to design a new COA building at 188 Washington Street was defeated.

In 2012, the Selectmen appointed a new blue ribbon committee, the Senior Center Study Committee, to study the needs of Boxford Seniors through 2022. The Committee carried out a survey, compiled regional data from other Senior Centers, and visited other Senior Centers. The Committee concluded that the space at the Community Center would not meet the needs of COA programs and activities for Seniors by 2022, and concluded that the most favorable solution to COA space needs would be to build a new building on a parcel of land near the Town Hall and Spofford Pond School.

The current study was commissioned as the result of challenges from various town officials to the conclusions of the COA and the Senior Center Study Committee on growing service demands from Seniors, the projected growth of Boxford's Senior population, and the need for additional space for COA services

and functions. This study also compliments a parallel study for the Library Trustees to establish needs for a new library in Boxford. At the writing of this report, the Library Trustees and the COA Board are working together to evaluate and draw up preliminary plans for a combined Community Center-Library in the center of Boxford which would meet the needs of both the Library and COA for twenty years or longer.

We have been impressed by the manner in which this study was performed by Drs. Silverstein and Coyle. The approaches used including focus groups and wide ranging interviews in their role as a third, unbiased party, and lends credence to their conclusions accurately reflecting the current status and future needs for Boxford Seniors. We have enjoyed working with them and thank them for this report.

For the Boxford Council on Aging Board,

Pam Blaquiere, COA Director

Dick Taylor, Chair, COA Board

## Executive Summary

This planning study was conducted to investigate current and anticipated needs, interests, preferences, and concerns of Boxford adults aged 45 and older. Special emphasis is placed on gauging future age-related services needed by residents, including those provided by the Boxford Council on Aging and its Senior Center (hereafter, COA), as well as the existing physical infrastructure of the COA relative to these service needs now and in the future. A primary focus of this study was whether Boxford is a town where lifelong residents will feel supported in later life.

The goals of the project were (1) to identify the current services offered to Boxford seniors, how these service needs will grow in the next 20 years, and whether Boxford will need to add new programs; and (2) to examine the adequacy of the current Senior Center space relative to addressing current and future service needs, based on projected needs 10 and 20 years from now. This study considered the characteristics and needs of Boxford residents age 45 to 59 (the cohort referred to hereafter as “Future Users”) and age 60 and over (hereafter, “Seniors”); to identify specific concerns of community members related to aging in Boxford, and make explicit their ideas regarding how quality of life could be improved for older adults who live in Boxford; to explore the current and potential role of the Senior Center in the lives of older residents; and to outline the implications of an aging population for the Town of Boxford as a whole. The contents of this report are intended to aid planning by the COA, , as well as other Town offices, private and public organizations that provide services and advocate for older people within Boxford, and the community at large. By proactively taking steps to support the goals of older adults in terms of successful aging and aging-in-place, a community may retain a larger share of its older population in the community and benefit from the experiences and local commitment that vital long-term residents offer.

According to the 2010 U.S. Census, 19% of Boxford residents were age 60 and older compared to 20% of the population of Massachusetts overall. In addition, 39% of Boxford’s residents are age 45-59 compared to only 7% of the State’s population as a whole. This younger group of adults will begin moving into later life during the coming decade and is likely to have a, relatively, larger impact in the Town of Boxford given its large size as well as the increasing preference to remain “aging-in-place”. Since the Census in 2000, the overall population of Boxford is projected to decline slightly over time from 7,921 in 2000 to 7,054 in 2030; however, the population of Seniors in Boxford is projected to increase consistently from 1,030 in 2000 to 2,686 in 2030, increasing from 13% of the total population in 2000 to 38% of the total population in 2030. Based on the 2010 Census, Boxford has a higher proportion of residents age 60-79 (17%) compared all of its geographic peer communities.

Within Boxford households, well over one-third (38%) include at least one adult age 60 and older. Further, 97% of households are owner-occupied while just 3% are renter occupied, suggesting that a high proportion of Boxford residents reside in single-family, owner occupied homes. A significant proportion of Boxford residents age 65+ (15%) live alone.

Compared to state averages, older adults in Boxford have lower rates of depression, diabetes, stroke, chronic obstructive pulmonary disease (COPD), hypertension, heart attack, ischemic heart disease, congestive heart failure, arthritis, colon cancer, and lung cancer. Only a quarter of older adults in Boxford have 5 or more servings of fruits and vegetables per day; 15% have had a shingles vaccine, 35% have complete tooth loss, and over a third (35%) have not had colorectal cancer screening. These results provide opportunities for the Boxford Council on Aging to make specific efforts towards supporting the healthy aging of its older adult population.

Focus groups of Current Seniors, Future Seniors, board members of the Council on Aging and a group of community stakeholders were conducted in early phases of this study. Results of these four focus groups indicate strong agreement among town leaders and constituents of a variety of ages that:

- the current COA space is inadequate to meet the current needs of Boxford's senior population
- the lack of alternative housing and transportation makes it difficult for adults to age-in-place in Boxford—or if adults do remain living independently, risk for social isolation is high and access to needed amenities is challenging
- as the next generation of seniors approach retirement—they expect to remain active members of the Boxford community and desire a COA to reflect this active lifestyle

Results from these focus groups illustrate the important role that the COA plays in the community of Boxford as both a primary resource for older adults and their families for information, programming and other elder services; but also that the Boxford COA is a key partner to other Town departments to ensure the safety, health and well-being of older residents across a variety of more general domains like housing or transportation.

Ten key-informant interviews were conducted with two state experts, Council on Aging Directors from three peer communities and several Boxford town leaders (including: town administrator, COA Director, COA Board Chair, Library Director, and Director of Public Health). Results from the two state expert interviews along with the three peer community interviews provided details on the needs for physical space as COAs throughout the Commonwealth are preparing for the aging of the Future Users population and beyond. The general guideline reported by these key informants was that any future plans should allocate five square feet per resident aged 60+. For Boxford, based on the 2010 Census, that would



mean COA space needs are 7,805 square feet in total<sup>1</sup>; and this approximation only grows as Boxford looks toward the projected growth in its older adult population remaining in Boxford as they age (Table 1).

**Table 1.** Older Adult Population Growth and COA sq. ft. Estimation, 2010-2030

Year	Population age 60+	COA Sq. Ft. Estimation
2010	1,561	7,805
2020	2,168	10,840
2030	2,686	13,430

*Source:* Population figures for 2000-2010 are from the U.S. Census. Figures for 2020 and 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

Other emergent themes from these key informant interviews included:

- Current Senior Center space is inadequate
- Co-location with a library can be done; but requires open communication and agreement on a wide array of decisions.
- Involved parties need to develop a coherent message and public information campaign in order to be successful in Town Meeting with any proposed changes to COA space.

To summarize, the COA is expected to respond to these changing needs in order to sustain its contribution to the landscape of Boxford. This means that an expansion of services to include more caregiving support services (i.e., respite, support groups, or access to adult day care programs and home care assistance services) as well as opportunities to stay active through physical fitness and overall wellness programming. Transportation within and around Boxford will be a key to facilitating engagement and access to resources for seniors as they are no longer able to drive. In addition, opportunities for volunteering and engaging with younger generations are valuable to the future generation of seniors of Boxford. Just as the population of Boxford is evolving both in size and composition so must the physical space and services of the Boxford COA. ‘

Nearly all aspects of Boxford will be impacted in some way by the shifting age demographic. By providing good leadership and the availability of adequate and quality space, the COA can help promote quality of life for seniors and their families throughout the community, and beyond the walls of the COA.

<sup>1</sup> According to current records kept by the Boxford COA and based on the Town Census with deaths and institutionalized older adults removed, as of September 24<sup>th</sup>, 2015 there were 1,826 residents of Boxford age 60+. This would estimate the need for 9,130 sq. ft. of COA space to accommodate the size of the older adult population.

## Acknowledgments

The authors wish to acknowledge the Town Boxford Council on Aging Board and Senior Center staff for their contributions to this study. We thank Pam Blaquiere, Director of the COA and Richard Taylor, Chair of the COA Board for providing valued leadership during the early stages when the scope of the project was being developed, and throughout the project period as components of the study were designed and carried through. Our collaboration with staff of the Council on Aging and Senior Center was invaluable for identifying research questions, developing survey and interview content, and bringing the project to a successful conclusion.

We thank the residents of Boxford who participated in focus groups. We appreciate the cooperation of town officials and community service providers who shared their insights and expertise during focus groups and key informant interviews.

The authors thank Emmett Schmarsow, Massachusetts Executive Office of Elder Affairs, Kathleen Bowler, Massachusetts Councils on Aging (MCOA), Karin Canfield Moore Townsend Senior Center Director, Gail Farrugia, Mansfield Council on Aging Director, and Kelly Burke, Northborough Council on Aging Director who each contributed important information for the project.

Nina M. Silverstein and Caitlin E. Coyle from the Center for Social and Demographic Research on Aging, within the Gerontology Institute at the University of Massachusetts Boston, are responsible for the contents of this report and the opinions expressed; however, the report could not have been completed without the cooperation and efforts of all those mentioned above.

### **BOXFORD COUNCIL ON AGING BOARD MEMBERS**

Richard F. Taylor, Chair  
Richard Shaw, Vice Chair  
Judith Andersen  
Stephen Harvey  
Elizabeth Murphy  
Joan Tarleton  
Suzanne Cox

## Table of Contents

Letter from Director & COA Board Chair .....	iii
Executive Summary .....	vi
Acknowledgments.....	ix
Table of Contents.....	x
List of Figures.....	xi
List of Tables.....	xii
Introduction .....	1
Background.....	2
The Boxford Council on Aging .....	3
Methodology .....	6
Drive-around Boxford .....	6
Boxford Demographic Analysis .....	6
Focus Groups.....	6
Key Informant Interviews .....	7
Data Analysis .....	7
Results.....	7
Demographic Description of Boxford.....	7
Age structure and population growth .....	7
Demographic Composition of Boxford Population .....	12
Race/Ethnicity.....	12
Gender.....	12
Marital Status.....	13
Education.....	13
Employment & Veteran Status.....	13
Housing and Living Situation of Boxford Households .....	13

Disability Status of Older Boxford Residents .....	16
Healthy Aging Status of Older Boxford Residents .....	17
Results of Focus Groups .....	18
Summary of Focus Group Findings.....	25
Results from Key Informant Interviews.....	25
Issues Impacting Aging Felt Statewide and in Boxford.....	27
Aging in Boxford .....	28
The COA Space.....	29
Future Space and Senior Center Design .....	30
Co-locating with a library .....	31
Boxford stakeholder comments on Co-locating with the Library .....	31
What would directors do differently? .....	33
Vision for Aging in Boxford.....	34
Summary of Key Informant Findings.....	35
Conclusion & Recommendations .....	35
References .....	37
Appendices .....	39

*List of Figures*

Figure 1. Age distribution of Boxford residents in comparison to Massachusetts .9	
Figure 2. Percentage change in number by age group in Boxford, 2000-2010... 10	
Figure 3. Growth of the number of Boxford residents, and age 60 and over, 2000 to 2010..... 11	
Figure 4. Age Distribution Comparison, by Geographic Peer Community .....	12
Figure 5. Boxford Households that include one or more individuals aged 60 and older..... 14	
Figure 6. Living Arrangements of Boxford Residents, age 65 and older .....	15

Figure 7. Median household income in Boxford, by age of householder in 2013 ..... 15

Figure 8. Percentage of Boxford Residents reporting at least one disability by gender and age group..... 16

Figure 9. Age distribution in Boxford and selected comparison areas .....26

Figure 10. Peer community comparison, by size of senior center and size of senior population.....26

*List of Tables*

Table 1. Percentage distribution of Boxford's population by age group .....8

Table 2. Older Adult Population Growth and COA sq. ft. Estimation.....11

Table 3. Healthy aging indicators where Boxford fares significantly better than the state estimate ..... 17

## Introduction

The town of Boxford, Massachusetts, like communities across the nation, is feeling the impact of changing demographics and the challenges and opportunities presented by aging. The average life expectancy for a person born in 1900 was 47 years; today, it is well past 80. The Centers for Disease Control and Prevention (2030) estimate that by 2030, more than 72 million Americans will be 65 years or older representing 20% of the population. Recent estimates show that 22% of the total population of Boxford is over age 60 and projections estimate that 38% of the Town's population will be age 65+ by 2030 (American Community Survey, 2009-2013; Donahue Institute, University of Massachusetts).

This planning study was conducted to investigate current and anticipated needs, interests, preferences, and concerns of Boxford adults aged 45 and older. Special emphasis is placed on gauging future age-related services needed by residents, including those provided by the Boxford Council on Aging as well as the existing physical infrastructure of the COA relative to these service needs now and in the future. Is Boxford a town where lifelong residents will feel supported in later life?

The assessment was conducted on behalf of, and in collaboration with, the Town of Boxford's Council on Aging and its senior center (hereafter, COA). The COA and its staff functions as the prominent resource for Boxford's older adult population, facilitating the delivery of services and coordinating activities designed to enhance the wellbeing and independence of the Town's aging residents. COAs nationwide are a hub for information and referral, services, activities, family caregiver support, leadership and advocacy around issues impacting older adults. A strong COA is a critical component to the vitality of a community. A COA is more than just bricks and mortar. It serves not only the people that cross its threshold, but also serves the community as whole.

This report presents results of a comprehensive examination of issues relating to aging and older adults in Boxford. Research methods were chosen with the intent toward engaging a wide range of stakeholders, including residents, municipal officials and other Town leaders. The assessment has as its primary focus the current and future consumers of COA services. The goals of the project were (1) to identify the current services offered to Boxford seniors, how these service needs will grow in the next 20 years, and whether Boxford will need to add new programs; and (2) to examine the adequacy of the current COA space relative to addressing current and future service needs, based on projected needs 10 and 20 years from now.

This study considered the characteristics and needs of Boxford residents age 45 to 59 (referred to hereafter as "Future Users") and age 60 and over (referred to hereafter as, "Seniors"); to identify specific concerns of community members related to aging in Boxford, and make explicit their ideas regarding how quality of life could be improved for older adults who live in Boxford; to explore the current and potential role of the COA in the lives of older residents; and to outline the

implications of an aging population for the Town of Boxford as a whole. The contents of this report are intended to aid planning by the COA, as well as other Town offices, private and public organizations that provide services and advocate for older people within Boxford, and the community at large.

## Background

Boxford is a community of close to 8,000 residents located approximately 25 miles northwest of Boston, Massachusetts. Similar to other communities throughout the country, Boxford expects to experience continued growth in its population of residents age 60 and over, as the generation of Baby Boomers (those born between 1946 and 1964) age into later life (Vincent & Velkoff, 2010). The 2010 Census enumerated 1,493 Boxford residents age 60 or over, comprising nearly 19% of the total population, and another 2,472 residents between the ages of 45 to 59, poised to move into later life within the coming decade (U. S. Census Bureau, 2010).

A commonly expressed goal among a majority of older adults is to remain living in their homes as long as possible. The phrase “aging-in-place” implies remaining in familiar home and community settings, with supports as needed, as opposed to moving to institutional settings (Salomon, 2010). By aging-in-place, and in community, older people are able to retain their independence, as well as maintain valued social relationships and community involvement. Growth of the senior population of Boxford will occur at a rapid pace in coming years as current residents “age in place”.

Within a wide body of research in gerontology, a number of common aging related circumstances have been identified that place unique demands on resources of communities as they plan for aging populations. Among them are changes in the health and service needs of older people. Many older people experience physical and social changes that could threaten their independence and wellbeing, if not addressed by specialized and targeted services. In addition, many retirees experience constraints associated with living on fixed incomes that could limit their choices, and reduce their quality of life in retirement. Insofar as many services required by older populations are provided either publicly or through public-private partnerships, municipalities such as Boxford are finding it necessary to adapt to changing age profiles within their populations. To this end, the Boxford COA seeks to plan for the continued growth of its older population by learning about the current and expected needs and experiences of its aging residents, with specific emphasis on how the COA can adapt to best meet the needs of the changing community.

Further, according to Rowe and Kahn (2015), to whom the theory of successful aging is attributed, successful aging of each individual is fostered by the promotion of successful aging at a societal or community level. COAs often serve as one community-based indicator that facilitates successful aging. Empirical evidence also indicates that social participation is a strong contributor to healthy

aging. For example, being involved in COA activities is associated with excellent or very good self-rated health (Ichida et al., 2013).

COAs and their staff members are a valuable resource in the community to help improve the health and well-being status of elders. Collaboration between COA staff members and other community groups can improve the quality of the lives of seniors as well as other members of the community. (Swan et al., 2013). By proactively taking steps to support the goals of older adults in terms of successful aging and aging-in-place, a community may retain a larger share of its older population in the community and benefit from the experiences and local commitment that vital long-term residents offer. In this report, we describe recent activities conducted to assess the aging-related needs of Boxford's current and future older adult residents.

COAs play a critical role on the aging continuum of care by offering a diverse array of recreational, nutritional, health, and social service programs (Aday, 2003). Senior centers are designed to promote the health and well-being of older adults while effectively engaging them in their communities and must continue to adapt to the evolving needs of a healthier and more active senior population (Fitzpatrick & McCabe, 2008). In addition, it is important to understand that government funding for COAs is meant to be used to support all older residents of the community and not just those who cross the threshold of the senior center. The current formula grant in Massachusetts is figured at \$8 per elder. Based on the FY2010 Federal Census, Boxford's formula grant for FY2014 was \$12,488 or \$8 x 1,561 persons age 60+ (MA Executive Office of Elder Affairs, 2014). Thus, one goal for a community is to have adequate space and services for the senior population in its entirety. Another emerging constituent group served by COAs is the family members who seek out services and support related to caregiving.

### The Boxford Council on Aging

Councils on Aging (COA) are municipal agencies charged with establishing priorities, serving as advocates, and offering opportunities to elders, their families, and their caregivers. As in many communities across Massachusetts, the Town of Boxford Council on Aging provides leadership in identifying and promoting community features and services that respond to the evolving needs of older residents. Programs and services offered through the COA are designed to support the transition of residents through later life, and help promote wellbeing.

When considering the mission of COAs within communities, observers commonly think of two distinct responsibilities. First, COAs promote wellbeing among older residents by offering activities that appeal specifically to older adults, are interesting, and that promote personal growth and social engagement. Reading clubs, exercise classes, and late-life learning programs are good examples.

Second, COAs provide services to older residents and their families that meet needs in the community and promote physical and emotional wellness. Blood



pressure clinics, support groups for family caregivers, and transportation services are common examples.

Many observers, however, may not be aware of two additional responsibilities of COAs. The staff members at COAs link older residents in the community to existing programs for which they may be eligible through providing needed information and referral services to residents and their family caregivers to connect them with appropriate programs and services. For example, staff members may help seniors apply for income support programs or health insurance made available through the state or federal government. SHINE (Serving Health Insurance Needs of Elders) is a free program offered through the Executive Office of Elder Affairs with counselors housed at Councils on Aging throughout the state.

Finally, COA staff members provide leadership within the community around senior issues, by interacting with other Town offices, and serving as resources to residents and organizations both within a community and representing the Town in issues that are regional or statewide.

In Boxford, the COA is located in the East Village of Boxford. In fiscal year (FY) 2013, Boxford's COA had participation from 1,997 seniors, and it currently seeks to enlarge its services and programs to respond to an increasing population of older residents. The COA cooperates with many Town organizations, the Massachusetts Executive Office of Elder Affairs, and Elder Services of Merrimack Valley, Inc., the Aging Service Access Point (also called an Area Agency on Aging), in its operations.

Currently, the Town of Boxford COA offers an array of programs and services free of charge (with the exception of exercise classes which request a small cash donation to participate) to residents who are aged 60 and older. Serving as a multipurpose space, it provides health and wellness programs, education and recreational activities, outreach and referrals, and transportation services. The COA emphasizes healthy aging and enhancing quality of life for seniors and their supporting family members. As per the COA Director, the current Boxford COA exists on less than 3000 sq. ft. and serves an unduplicated count of about 200 seniors per month. Specific programs offered through the Town of Boxford COA include:

- ❖ **Health and Wellness Activities:** Regularly scheduled fitness classes, such as strength training, yoga, and line-dancing, are offered.
- ❖ **Social, Crafts and Education Activities:** A variety of activities are offered on a weekly, monthly, or special occasion basis, such as bus trips, current events discussion groups, birthday lunches, card or board games, art programs, such as wood carving, and knitting
- ❖ **Medical Services:** blood pressure, foot care and an annual health fair are available. SHINE Counseling (Serving the Health Insurance Needs of Elders) is also offered through the Center, providing seniors with

assistance with medical insurance questions, including selection of new plans or concerns about billing or payment.

- ❖ **Transportation:** Door-to-door transport of seniors to and from the COA is available. The COA employs one part-time van driver and has one van to provide these services. Transport to medical appointment is offered on a semi-regular basis, dependent on the availability of volunteer drivers.
- ❖ **Meal Programs:** The COA hosts weekly lunches during the months of September to May (meals provided by the local school) and also offers home-delivered meals for eligible seniors in Boxford.
- ❖ **Professional Services:** The COA provides legal assistance and tax assistance through the Property Tax Work-Off Program.
- ❖ **Outreach Program:** The COA provides assessments for elders who are homebound, case management and coordination of services and benefits, and information and referral to local programs as well as assistance with the application process for programs. They also
- ❖ **Volunteer Opportunities:** Volunteers provide invaluable support to the COA, assisting with many of the programs and activities including: volunteer medical transportation, reassurance phone calls, assisting or leading activities and completing administrative tasks.

The Boxford COA operates four days a week from 8:00 a.m. to 4:00 p.m. Its staff members include 2 FTE employees funded through the Town operating budget, and 2.0 part-time employees. Nearly 80 active volunteers serve in critical roles at the Center, including providing administrative assistance, driving seniors to medical appointments, and lending their skills and talents to programming and activities at the Center.

In the following pages, we present a profile of the characteristics and resources of the current population of Boxford— those who are at and approaching later life (the 60+ population) as well as those who will be moving into later life over the next two decades (the population age 45 to 59). Knowledge of these characteristics provides an important basis for planning by the Senior Center, as well as by other Town offices and organizations within the community. In addition to review of a recent Boxford COA annual report, several other documents were reviewed to assess community context with respect to the Boxford COA and the Senior Center (i.e. the 2008 Community Center Study Committee Report; the 2013 Senior Center Study Committee Report; and a recent proposed COA future space plan). These documents outline a long history of senior advocacy in Boxford as well as investment in understanding the viable options for making Boxford a vibrant place to grow old. However, this document review highlights the importance of harnessing valuable human capital within a community in order to respond to the changing needs and experiences of its residents.

## Methodology

### *Drive-around Boxford*

Prior to meeting Boxford residents through focus groups and key informant interviews, the researchers toured Boxford with COA Chairperson, Richard Taylor on June 22, 2015 and were shown the East and West Villages, the geographic center where Town Hall is located, Four Mile village, and vacant Town properties. The tour was very helpful in orientating the researchers as well as providing greater context for understanding statements that arose through the focus groups and key informant interviews.

### *Boxford Demographic Analysis*

As an initial step toward understanding characteristics of Boxford's Future Users and Senior populations through quantitative data, we generated a demographic profile of Boxford, using data from the 2010 U.S. Census, and from the American Community Survey (ACS)—a large, annual survey of the population, conducted by the U.S. Census Bureau. For purposes of this assessment, we used information drawn from the most current ACS files, along with Census data for the Town of Boxford, population growth estimates from the Donahue Institute at the University of Massachusetts and the most recent data collected by the COA to summarize demographic characteristics including growth of the older population, shifts in the age distribution, householder status, living arrangements, household income, and disability status. The research design and protocols were approved by the Institutional Review Board of the University of Massachusetts Boston. (See Appendices for focus groups questions and interview guides.)

### *Focus Groups*

Four focus groups were held in June, 2015. Participants were selected and recruited by the COA Board and the Director of the Boxford COA. One group was composed primarily of representatives from municipal departments. The other was composed primarily of community members and representatives from organizations that provide services to older Boxford residents. The third and fourth groups were comprised of residents of Boxford. A group of 'Future Users' of the COA included adults age 45-60 and a fourth group of adults represented 'Current Users' of COA services. These two groups of future and current users of Boxford COA received \$20 gift certificate to a local store to compensate them for their time and effort. Focus groups were held at the in Boxford. Each discussion lasted approximately 90 minutes. Nina Silverstein, co-investigator of this study, facilitated the groups. Caitlin Coyle, the other co-investigator of this study, also attended to capture key points of the discussion by taking notes and audio recording each session. The goal of holding focus groups was to engage community leaders and service providers, and to better understand relationships between the COA and the respective departments/organizations of the participants.

### *Key Informant Interviews*

Themes raised during the focus groups were further explored through ten key informant interviews in June through August, 2015. Specifically, interviews were conducted with five Boxford officials (COA Board Chairperson, COA Director, Town Administrator, Library Director, and the Director of Public Health), directors of Councils on Aging in three communities chosen as peer communities due to their recent construction of senior centers or co-location with libraries. A secondary selection criteria for the communities chosen included population size and number of seniors. Interviewees were asked about features of their Senior Center, including programming and staffing. Additional information on selected COAs was retrieved from websites and other publicly available documents. Peer communities included: Townsend, MA, Mansfield, MA, and Northborough, MA. In addition, three geographic peer communities were also selected to get a more regional comparison relative to the population distribution. These geographic comparison towns include: Georgetown, MA, Middleton, MA and North Andover, MA.

In addition, interviews were conducted with two statewide leaders within the aging network in Massachusetts [representing the Massachusetts Executive Office of Elder Affairs and the Massachusetts Councils on Aging (MCOA)]. The MCOA representative, who was formerly a COA director in a community that underwent new construction, was able to provide additional insights on another community experience. Requests for interviews were issued by email. Interviews were conducted via telephone or email, and discussions were documented using hand-written notes. Eight interviews were conducted by phone and two were conducted in-person. The two co-investigators participated in all interviews. The interviews ranged from 19 minutes to an hour and averaged 50 minutes.

### *Data Analysis*

In addition to the descriptive analysis of existing demographic data, key informant and focus group notes were reviewed by project staff and used to characterize and categorize the ways in which aging issues are impacting offices and organizations throughout the Town. We used information from all sources of data to develop recommendations for the Town of Boxford and the Boxford COA.

## **Results**

### *Demographic Description of Boxford*

#### **Age structure and population growth**

According to the U.S. Census, 7,965 residents lived in Boxford in 2010. Among these, the majority was from the Future User population, ages 40 to 59 (see **Table 1**). Persons aged 40 to 59 numbered 3,075 individuals (nearly 40% of the Town's population); and these individuals are poised to enter the ranks of the Town's older population within the coming decade (U.S. Census Bureau, 2010).

Further, the youth population of Boxford comprises nearly 30% (2,243 individuals) of the Town; and only 1,086 young adults live in Boxford.

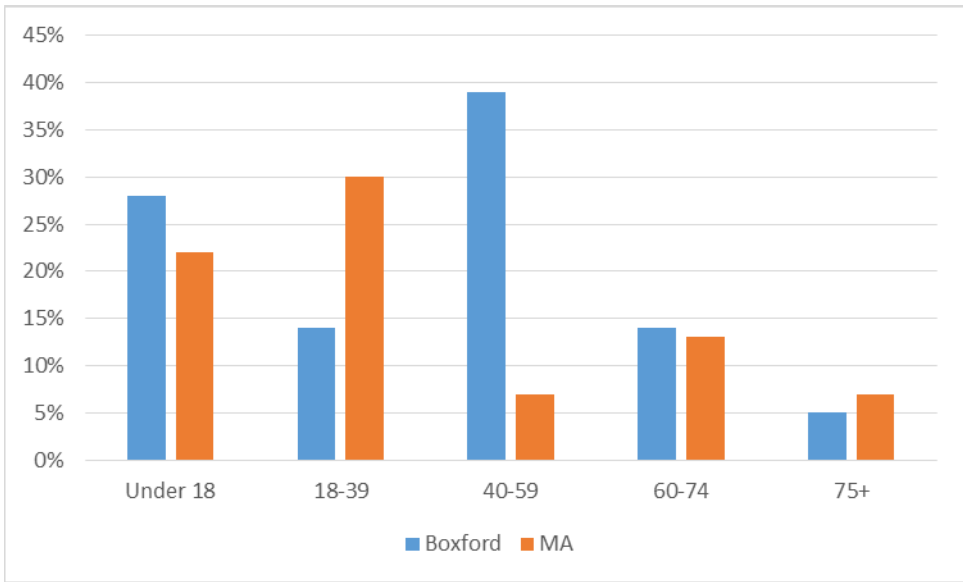
**Table 1.** Percentage distribution of Boxford’s population by age group

	Number	Percentage
<b>Under age 18</b>	2243	28%
<b>Age 18-39</b>	1086	14%
<b>Age 40-59</b>	3075	39%
<b>Age 60-74</b>	1121	14%
<b>Age 75+</b>	440	5%
<b>Total</b>	7,965	100%

*Source: U.S. Census 2010, Table DP-1, Boxford town, American Fact Finder*

The Future User population of Boxford is comparatively larger than the State of Massachusetts’ Future User Population (39% and 7% respectively) (see **Figure 1**). Whereas the proportion of Massachusetts residents age 18-39 is greater than Boxford (30% and 14%, respectively), the proportion of Boxford residents in the older age groups (60-74 and 75+) is quite similar to those in Massachusetts. This suggests that the aging of the Future User population is likely to have a relatively larger impact in the Town of Boxford given its large size as well as comparable older adult population to the State overall. This is an important point because persons who reach age 75+ are at greater risk for detrimental health and social outcomes, especially when programs and services are not available to address this group’s specific age-related needs.

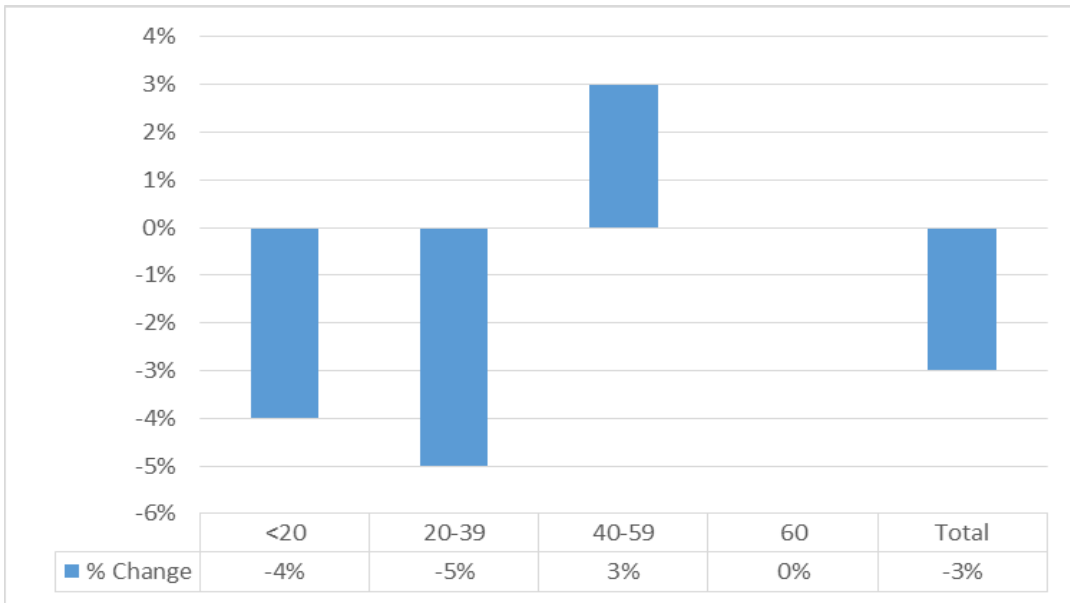
**Figure 1.** Age distribution of Boxford residents in comparison to Massachusetts



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

**Figure 2** shows the percentage change in Boxford's population from 2000 to 2010, by age group. During the previous decade, the size of the total population decreased by 3%—a change driven primarily by a decline in the number of younger residents. The number of residents under age 60 decreased between 2000 and 2010, dropping by 5% for those who are age 20 to 39, and 4% for those under age 20. The only age group that grew during the last decade was composed of residents who are age 40-59—the number of persons in this age group increased in size by about 3%. Overall, population growth remains somewhat constant. Despite little change in size in the age 60+ group, the aging of the age 40-59 or Future User population contributes to the future aging of Boxford's population and is crucial for planning efforts by the COA.

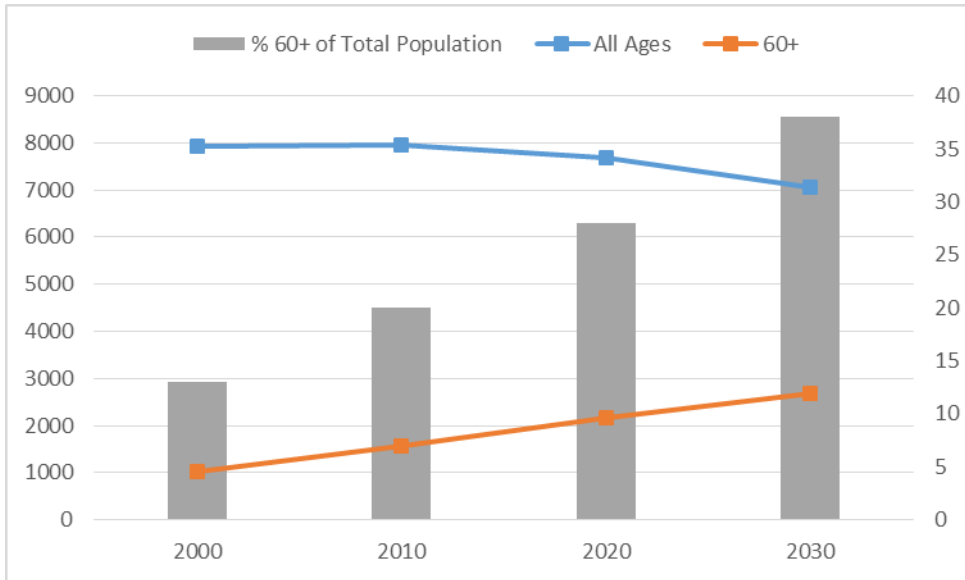
**Figure 2.** Percentage change in number by age group in Boxford, 2000-2010



Source: U.S. Census, 2000 thru 2010.

As shown in **Figure 3**, the population of Boxford is projected to decline slightly over time from 7,921 in 2000 to 7,054 in 2030; however, the population of seniors in Boxford is projected to increase consistently from 1,030 in 2000 to 2,686 in 2030, when seniors will represent 38% of Boxford’s total population. In other words, the proportion of the senior population in Boxford is expected to increase steadily over time.

**Figure 3.** Growth of Boxford Population, by age and % of the population, 2000 to 2030



Source: Population figures for 2000-2010 are from the U.S. Census. Figures for 2020 and 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

A general recommendation made by expert Key Informants was that any future plans should allocate five square feet per resident aged 60+. Meaning that currently the Boxford COA space is not large enough<sup>2</sup> to meet the needs of its resident at 3,384 sq. ft. and will certainly be too small for its growing proportion of older residents in 2020 or 2030 (shown in **Table 2**).

**Table 2.** Older Adult Population Growth and COA sq. ft. Estimation, 2010-2030

Year	Population age 60+	COA Sq. Ft. Estimation
<b>2010</b>	1,561	7,805
<b>2020</b>	2,168	10,840
<b>2030</b>	2,686	13,430

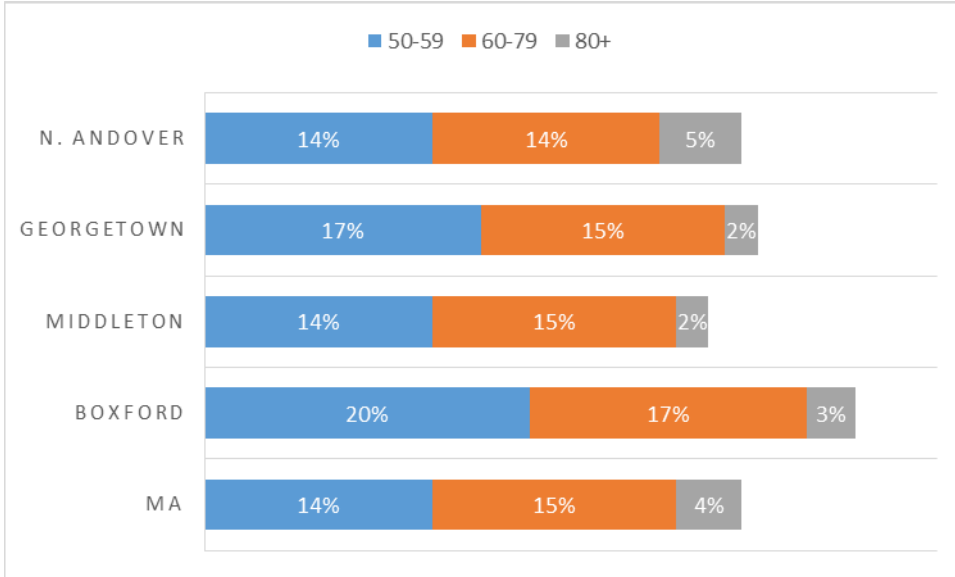
Source: Population figures for 2000-2010 are from the U.S. Census. Figures for 2020 and 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

<sup>2</sup> According to current records kept by the Boxford COA and based on the Town Census, with deaths and institutionalized older adults removed, as of September 24<sup>th</sup>, 2015 there were 1,826 residents of Boxford age 60+. This would estimate the need for 9,130 sq. ft. of COA space to accommodate the size of the current older adult population.



As depicted in **Figure 4**, Boxford has a larger share of residents (20%) in the age 50-59 group compared to its geographic peers (i.e., communities where Boxford residents use resources—medical services, pharmacy, grocery stores, etc.). Further, Boxford has a higher proportion of residents age 60-79 (17%) compared all of its geographic peer communities.

**Figure 4.** Age Distribution Comparison, by Geographic Peer Community



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

### *Demographic Composition of Boxford Population*

#### **Race/Ethnicity**

Relative to other places in Massachusetts, there is little diversity among Boxford residents with respect to race. The large majority (95%) of Boxford residents are White and non-Hispanic. Only 3% of residents identify themselves as Asian and 2% report being some other race or two or more races [American Community Survey (ACS), 2009-2013, Table B02001]. Due to Boxford’s small population, there are no ACS data available regarding the race or ethnicity of the Town’s older population; however, according to data reported by the Massachusetts Health Aging Collaborative 100% of Boxford residents age 65 or older are White and non-Hispanic. In Massachusetts, 91% residents over age 65 are White, compared to 81% of Massachusetts residents of all ages who report White non-Hispanic backgrounds (ACS, 2009-2013, Table S0103).

#### **Gender**

In Boxford, the gender distribution among residents age 60 and older is nearly equal (50% female). Additionally, the proportion of women is greater among the

oldest old age groups—among Boxford residents age 80 and older 56% are women. The greater number of older women is largely due to longer life expectancies of women compared to men—a demographic disparity that is widely observed in older populations globally (Seifarth, McGowan & Miline, 2012).

### Marital Status

Based on data developed for the Massachusetts Healthy Aging Collaborative, over two-thirds (76%) of Boxford residents over age 65 are currently married compared to only 51% of older Massachusetts residents as a whole. Further, in Boxford 17% of older adults are widowed, 6% are divorced/separated and the remaining 1% have never been married—all of which are significantly smaller proportions compared to older adults of the Commonwealth more globally (30%; 12% and 7% respectively).

### Education

American Community Survey statistics on education suggest that Boxford residents are well-educated on average. It is estimated that about 46% of persons aged 65 and older have at least an associate's degree. In addition, more than one-third (34%) have earned a graduate or professional degree. (ACS, 2009-2013, Table B15001). According to Fitzgerald and Caro (2014), this educational profile contributes to the community's vitality and character, which depends on older adults who value opportunities to be engaged in their communities through volunteer, civic engagement activities as well as lifelong learning opportunities.

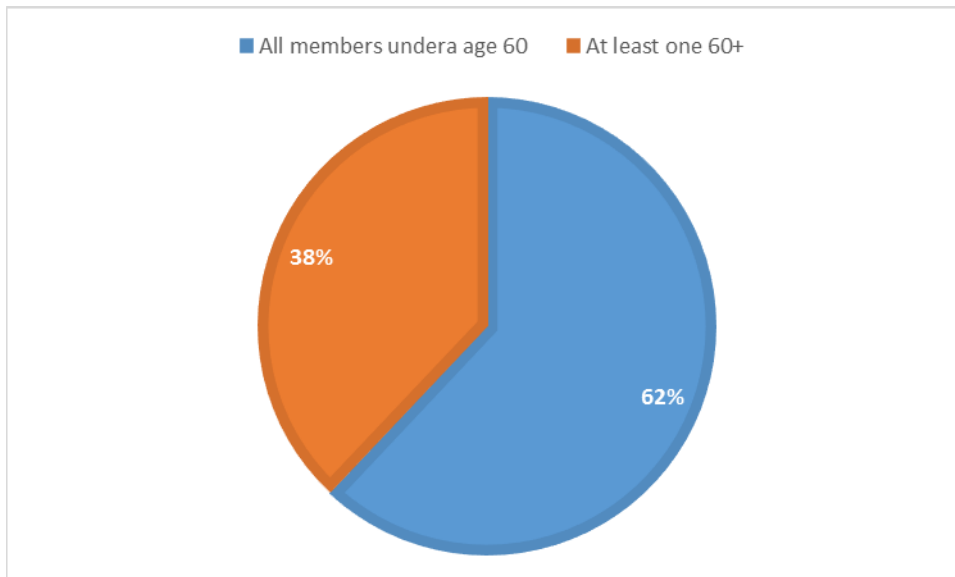
### Employment & Veteran Status

ACS estimates reveal that about 46% of Boxford residents age 65-74 remain in the workforce, and just 3% of those 75 and older are in workforce (ACS, 2009-2013, Table S23001). A sizeable share of men aged 65-74 (28%) in Boxford report veteran status as well as 26% of men aged 75 and older (ACS, 2009-2013, Table 21001). As a result, the Town's older residents may be eligible to receive some benefits and services based on their military service or that of their spouse.

### Housing and Living Situation of Boxford Households

Of the 2,571 households counted in the 2010 U.S. Census, a substantial share include one or more older adults. As shown in **Figure 5**, well over one-third (38%) include at least one adult age 60 and older. Further, 97% of households are owner-occupied while just 3% are renter occupied (American Community Survey Estimates, 2010, Table B25011). Thus, a high proportion of Boxford residents reside in single-family, owner occupied homes.

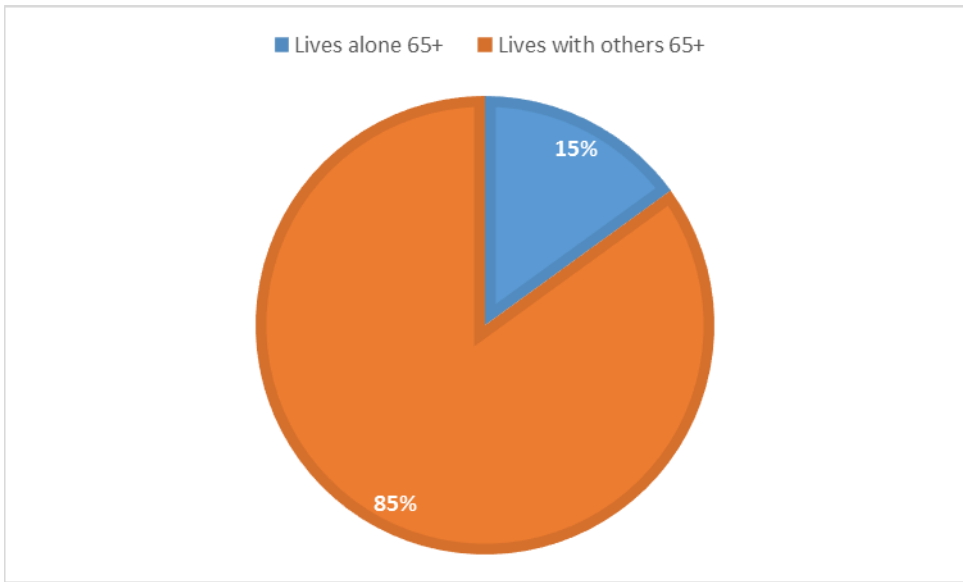
**Figure 5.** Boxford Households that include one or more individuals aged 60 and older



Source: American Community Survey, 2009-2013, Table B11006

**Figure 6** shows living arrangements of Boxford's older adult residents age 65 and older. The most common living arrangement among residents in this age group is living with others (85%) including family and non-family co-residents. A significant proportion of Boxford older residents (15%) live alone, and no older Boxford residents live in group quarters because Boxford does not have group quarter residences (i.e., nursing homes or assisted living). One housing development for older adults, Four Mile Village, does exist but it is independent housing consisting of single family units. Understanding the household composition of older adults within a community is critical for a Council on Aging relevant to supporting aging-in-place. That is, assisting not only in emergency case-finding, but also in providing the information and referral services connecting that individual or family member to needed services. Moreover, the COA staff members' knowledge of household composition and who may be at risk of social isolation helps in terms of program planning and outreach.

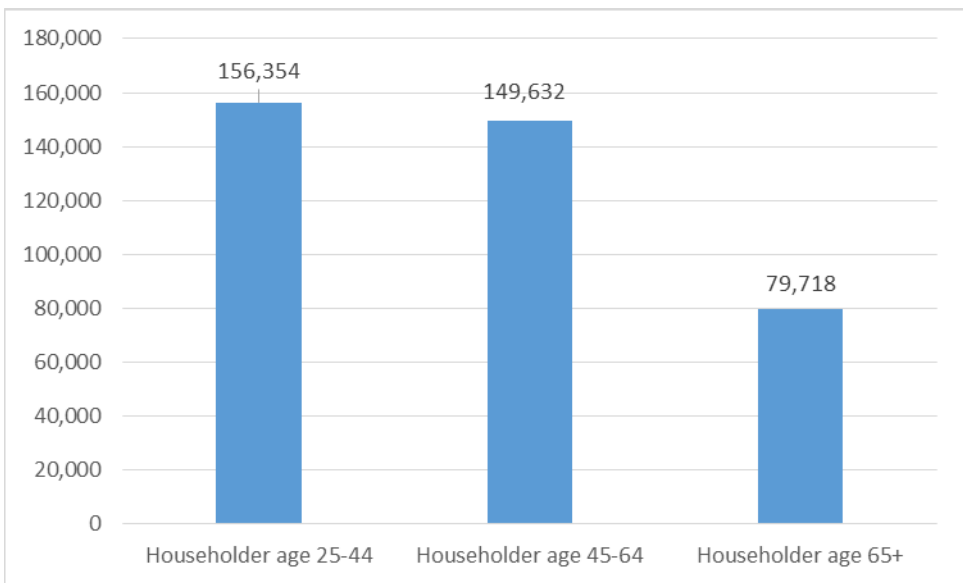
**Figure 6.** Living Arrangements of Boxford Householders, age 65 and older



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

Boxford is a relatively affluent town overall. However, **Figure 7** illustrates the comparative disadvantage of older residents with respect to household income. The Council on Aging is able to provide information and referral either directly or through the Elder Services of the Merrimac Valley, the Aging Service Access Point or area agency on aging serving Boxford who may then provide case management and direct services on a sliding fee scale.

**Figure 7.** Median household income in Boxford, by age of householder in 2013

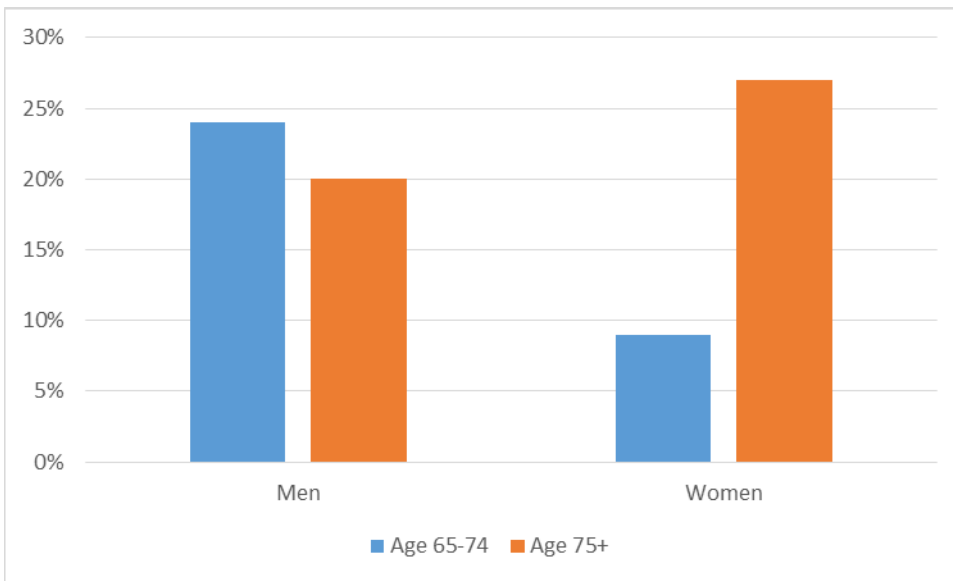


Source: American Community Survey, 2009-2013, Table B19049

### Disability Status of Older Boxford Residents

The well-documented likelihood of acquiring disability with age is evident in ACS data on Boxford residents. **Figure 8** illustrates that many older Boxford residents age 65 and over experience some level of disability that impacts their ability to function well and independently in the community. Specifically, the ACS determines disability by whether a respondent answers 'yes' to having difficulty with one of the following: hearing, vision, cognition, ambulation, self-care or independent living (i.e., grocery shopping). A Council on Aging that is responsive to the needs of older residents designs programs and has an adequate physical structure sensitive to the level and types of disabilities present in that community.

**Figure 8.** Percentage of Boxford Residents reporting at least one disability by gender and age group



Source: American Community Survey, 2009-2013, Table B18101

### *Healthy Aging Status of Older Boxford Residents*

Compared to state averages, the community profile developed by Dugan et. al (2015) for the Massachusetts Healthy Aging Data Report indicates as illustrated in **Table 3** below, that older adults in Boxford have lower rates of depression, diabetes, stroke, chronic obstructive pulmonary disease (COPD), hypertension, heart attack, ischemic heart disease, congestive heart failure, arthritis, colon and lung cancer. They have fewer hospital stays, hospital readmissions, nursing home stays, home health visits, emergency room visits, and a lower usage rate of monthly prescription medications. There are areas where the State is doing poorly and Boxford does not significantly differ. For example, only a quarter of older adults in Boxford have 5 or more servings of fruits and vegetables per day; 15% have had a shingles vaccine, 35% have complete tooth loss, and over a third (35%) have not had colorectal cancer screening. [Note: Key informants shared that the COA has fostered programs and hopes to offer further advance efforts with other stakeholders in Boxford in helping seniors to consume a better diet and to adhere to regular health check-ups. Moreover, the wellness clinics and regular visits of a podiatrist to the COA are already established and may need to be expanded in the future.]

**Table 3.** Healthy aging indicators where Boxford fares significantly better than the state estimate

<b>Healthy Aging Indicator</b>	<b>Community Estimate for Boxford</b>	<b>State Estimate</b>
% ever diagnosed with depression	22.4%	28.6%
% with diabetes	21.9%	32.1%
% with stroke	9.2%	12.6%
% with chronic obstructive pulmonary disease (COPD)	15.4%	23.3%
% with hypertension	71.3%	77.5%
% ever had a heart attack	2.9%	5.0%
% with ischemic heart disease	35.5%	44.1%
% with congestive heart failure	17.1%	24.8%
% with osteoarthritis/rheumatoid	45.7%	50.2%

arthritis		
% with colon cancer	1.7%	3.3%
% with lung cancer	1.3%	2.1%

**Source:** Adapted from Massachusetts Healthy Aging Collaborative Data Report Community Profiles (2014)

### *Results of Focus Groups*

Over 30 Boxford residents and community representatives participated in one of four focus groups held in June 2015. Participants from 4 distinct groups of adults in Boxford with varying degrees of relationships to the COA were invited to participate: 1) current participants of the COA programs and services; 2) future participants of COA programs and services (i.e., adults age 45-64); 3) the COA board members (with the exception of the board’s chairman who was interviewed as a Key Informant); and 4) a group of wider community stakeholders in the town. Our primary aim in engaging these groups was to identify concerns and issues that affect aging in Boxford now and in the future. Focus group protocols were based loosely on three areas of question: 1) understanding current needs of adults aging in Boxford; 2) a discussion of future needs related to aging in Boxford and; 3) a discussion about specific space needs for the Council on Aging as a town department. In general, there was a high level of commonality between themes identified in focus groups with respect to transportation, caregiving, and the inadequacy of current COA space. The results presented in this section reflect the perceptions of the participants and will be incorporated with results from the other components of this study.

### **Focus Group 1: Council on Aging Board Members**

The first focus group included Boxford Council on Aging Board members. All six members (4 female; 2 male) are currently residents of Boxford with most of them having lived in Boxford for most of their adult life. Their tenure as members of the COA ranged from 1 year to over 8 years of service. These participants were invited to participate by the Council on Aging Director. It is important to note that each member of the COA board expressed an individual reason for serving the community of Boxford via their work on the COA board. Examples of these reasons included: raising awareness of the COA to the larger community, and supporting families as they age and provide care to aging relatives. Finally, this group discussed the fact that the COA is one of the few resources in town for older adults and their family caregivers; and thus warrants their advocacy and support. One member said, “no place else to go—this is it for seniors. That’s why I think it’s really valuable”. There was also unanimous (and unsolicited) support for the COA director and the other staff of the COA.

As far as current challenges to aging in Boxford, this group contextualized their discussion by explaining that there is no commercial tax-base in Boxford, and that this factor constrains resources of all town departments. In addition, this absence of a commercial tax-base also means a lack of amenities and services available to Boxford residents, particularly seniors. Thus the COA, from the general perspective of this group, is a real asset to the community. Challenges were discussed in relation to the current needs of the COA as a department. First and foremost, the physical space of the COA was discussed as being inadequate. Currently the COA also serves as a community center on the weekends and in the evening hours. The building has one activity room of limited space which limits COA programming and the number of attendees able to attend COA activities. Instead, the COA must host 'big events', like Christmas dinner and St. Patrick's Day gathering, at a local church hall. These events, as well as daily operations of the COA, also depend on approximately 100 volunteers. As one board member put it, "we survive on volunteers". Things like the writing group have broken away from the COA and independently meet on their own now due to space and lack of a quiet meeting room. In addition their limited space results in multiple programs occurring simultaneously in the single activity room. For example, one board member recounts, "one day in this room there was an art class going on, the massage lady was busy and someone was getting their toenails cut...and I thought wouldn't be nice if we had some separation?" It was also stated that the director's office is commonly used for extra programming space.

Space limitations not only affect programming but also accessibility of the senior center. For example, the current space does not meet standards set forth by the Americans with Disabilities Act building code. According to this group, it has also been determined that renovations could be made to meet ADA requirements but would result in loss of almost 40% of available space in the building. These issues were discussed as a top priority for this group, because these limitations keep the COA from being accessible to individuals requiring assistive devices such as wheelchairs or walkers. Currently, meals are delivered twice per week (September to May) by the local school because the COA kitchen is not a commercial kitchen equipped and approved to cook for large groups. Finally, several commented that a contingent of Boxford seniors are afraid to use the lift elevator because of its small design and slow speed. This prevents individuals from attending events or programs on the second floor of the building.

Secondly, transportation both within Boxford as well as to surrounding communities is cited as a current and future need. One participant reflects, 'if you don't drive, you're stuck'. Although there is a van service provided by the COA for medical appointments and to programs and events these resources are limited both in their availability and range of transport. The perception of another participant was that there are few amenities in Boxford and stated that even though she attends COA programs only once per week, 'it's a nice feeling like you have a choice and know that things (COA programs) are out there...".



A third overall challenge described by this group of COA board members is relative to the perception of the COA by the community as a whole. Politically, some of the perception at Town Meeting was described as dismissive. For example, focus group participants stated that some individuals in town believe that all the COA is good for is serving lunch; and thus additional space/resources are not necessary. In addition, there was a general perception that a majority of the Town's budget is spent on schools and the remaining amount is divided across other town departments; and that this proportion reflects how the Town administration feels about the COA. The other set of perceptions come from individuals who do not identify as being 'old' and thus the COA is not a place for them. Focus group participants believed that a more attractive space and contemporary programming would draw in some of these residents who have created this self-barrier to participation.

In the future, the population of older adults will grow and will make the COA more of an important community resource than ever before—particularly because there are not many options in town. When asked about the future needs of the senior population of Boxford, this group not only outlined programming needs; but also described the benefits of having new or renovated space. Currently, the exercise classes are well-attended programs and these classes were viewed to continue to be a draw for younger seniors in the future. In addition, computer/technology skills classes, intergenerational programming, caregiving support groups or resources, more programming for men (e.g., pool tables, cards, sports and game-watch events). Additional and/or larger participant art classes and monthly movies were also named as programming that will continue to be needed in the future. Finally, most participants in this group (5 out of 6) believe that the creation of a small adult day care program that would provide social day care as opposed to adult day health services is a priority for the future of the Boxford COA.

With regard to possible future space changes, this group does have hesitation about a collocated or shared space—mostly because they are concerned about not having enough exclusive space for the COA. That being said, they also recognize that it would be better than the current situation and that the renovation of existing Town buildings may be an alternative. They suggest that if a shared space is pursued, that the partnering Town department (i.e., the library) send a liaison to spend some time at the current COA to observe their needs for space as well as to identify places where the two could overlap/conflict in programming and/or use of space.

## **Focus Group 2: Future Users of the COA**

The second focus group was composed of 8 potential Future Users of the COA programs and services (5 males; 3 females). In other words, these adults are between age 45 and 60 (the age of eligibility for senior programs in Massachusetts). On average, these participants had lived in Boxford for 10 years (range 2-31 years). When asked to name reasons why they enjoy living in Boxford, these participants reported three major reasons: 1) to be near family and/or return to the place they grew up; 2) to be closer to nature and have space (i.e., the 2-acre zoning minimum, it's quiet and access to outdoor activities) and due to the location of the town in proximity to the coastline, the city of Boston and other desirable locations. When asked about intentions to stay in Boxford as they age, responses were quite mixed. Most participants were not sure and that it depended greatly on where their children end up living. Some mentioned a desire to relocate closer to the ocean, mountains, or to a warmer climate.

As far as current needs of seniors in Boxford, this group reported things like housing maintenance support, lack of alternate transportation options as well as distance to basic resources like a grocery store, doctor's offices and gas. Another current need mentioned by this group was social isolation. Reasons given for isolation included that the very reasons why it is desirable to live in Boxford (single family homes, open green spaces and quiet etc.) also make it difficult to stay engaged socially—particularly when health or functioning decline for an individual or a spouse or when family moves away. Another reason identified by this group is that people do not think of themselves as 'old' and thus they don't participate in COA programs and services and have very limited access to other opportunities for participation.

In thinking about what types of programs and services this group of future COA users would be attracted to, a set of productive activities was described. Interestingly, it was first mentioned that this group really feels a strong sense of filial piety, that supplementing care for seniors is a responsibility of the family and not for the Town. Further, they described the desire for more intergenerational activities. Specifically they discussed that one way to promote this type of interaction would be to design or renovate a space that is more like a community center which includes the COA. Technology based courses and resources was also mentioned as being a) a future need as technology continues to evolve rapidly and b) a way for the younger generation to get involved in the COA activities by facilitating or teaching these courses. The desire for physical activity opportunities is also a priority of this younger group as they see themselves aging. Both exercise courses and outdoor activities and outdoor education were mentioned. Further, the outdoor activities and education were also discussed in the context of intergenerational opportunities.

The notion that seniors need to feel 'needed' or as if they are serving a purpose came up and another participant mentioned his mother as an example. "She is in her 80's and goes to the COA a couple of times per week, in her mind, to volunteer with the 'old people'." To address this need, the group talked about

volunteer opportunities (friendly visiting, reading to children) as a potential program that would attract them to engage with the COA. Finally, opportunities for local high school students to get their required community service hours for graduation was mentioned as a way to engage younger generations and support the COA simultaneously. Perhaps because the majority of this group was male, there was a discussion of the need for more male-oriented activities at the COA in order to attract this younger population of adults in the future. For example, pool-tables, Ping-Pong tables, food and a place to watch sports games in a group setting (i.e., a pub, farm-stand or café).

The theme mentioned in the focus group of COA Board Members about ‘nice having the choice to go and do things’ was also mentioned by this group. They described that people who live in Boxford do so for a reason and this notion of it being neighborly but not quite a ‘community feeling’ was discussed. The two village format of the town (East and West Village) is described as a blessing and a curse. The issue of existing empty buildings also needs to be addressed because it will be difficult to justify new space to their open Town Meeting. The suggestion of an ‘integration committee’ is mentioned in order to try and coordinate across existing groups to bring people together. The thought with this group is that people vote on ‘group lines’ and if we can bring groups together—more can get accomplished at Town Meeting. The thought is that in order for this to work—a new space needs to be for “all citizens” including seniors—but also including families. This group consensus was that an intergenerational community center would be the best way to service seniors and foster more sense of community in Boxford—given the lack of ‘things to do.’

### **Focus Group #3: Community Stakeholders**

Representatives were recruited by the COA Board and COA Director from 10 organizations or committees in town and came together to discuss current and future needs of adults aging in Boxford (7 male and 3 female). These organizations included: the Finance Committee, Second Church, Four Mile Village, Capital Planning Committee, fire department, 911 communications staff, Board of Selectmen, permanent building committee and former member of town government and lifelong resident. Five out of 10 reported being ‘lifelong residents’ of Boxford. The remaining 5 reported periods of residency ranging from 5 years to 32 years. Only one person was not a Boxford resident.

Reasons why seniors move out of Boxford seemed to shape the discussion about current and future needs of older adults in town. For example, it was mentioned that a group of adults are moving out of Boxford to find more supportive housing options, to be in smaller single-story homes, closer to amenities or closer to their children. This led to a discussion about the need for housing options as an alternative to the large single family homes on large parcels of land. The erection of senior housing units has been voted down at Town Meeting at least 2 times. Currently, the wait-list to move into Four Mile Village is over 100 people; but only 25 of those individuals are considered ‘active’—meaning they are ready to move in immediately. Others simply stay on

the waitlist so that when that time comes—they have the option. Multiple proposals for how to address the issue of housing were discussed. First, someone suggested that they sell some of the Town's land to a developer to build a phased housing complex (i.e., start small with room to expand as needed) or a continuing care retirement community. Another suggestion was that this housing development could serve as a regional senior housing option. Finally, someone mentioned that if a new building was built near Town Hall as proposed they could use that utility infrastructure to build a small housing development. This discussion of housing ended on the recollection that Boxford is a unique town and that getting things passed at Town Meeting is historically difficult.

It is worth noting that the police, fire and emergency response representatives report having a very good working relationship with the COA and often are in communication related to cases of particularly vulnerable seniors or just to be in touch with the safety needs of seniors in town. For example, the police speak to seniors about scamming to be sure they are in touch with the senior population of Boxford. They have a small group of seniors in town that are in particularly vulnerable situations. For example, this group of vulnerable seniors have hoarding tendencies or live alone and be resistant to services or they are just far away from family members. Calls from out of town family to the police are not uncommon. Through one program, Operation Concern, police and fire employees can check in on people both by phone and/or a visit. Currently there are about 8-10 people on this list—the most they have ever had. If Boxford residents continue to age in place, it is logical that this program would also grow in size and importance.

Although consensus was reached about the fact that the current COA space is inadequate for the current needs of the community, this group also acknowledged the context of the Town's currently empty building space and reluctance of Town Meeting to support new construction as being an important factor to consider. Due to the number of representatives from town politics in this focus group, there was a final discussion of the overall climate of Boxford relevant to the future of the COA space. Currently there is a proposal for new recreational fields and the regional high school is preparing a \$6 million capital plan which leaves little room for new building proposals. This means that other proposals need to focus on efficiency. This efficiency includes a plan for existing buildings in Town and how to maintain the new facilities. One suggestion for making a new proposal cost-effective could be to make it a joint-building proposal. This group also made it clear that ongoing maintenance of Town property and other operational expenses is grossly underfunded and neglected which leaves the Town in a 'crisis situation' quite often.

#### **Focus Group #4: Current Users of COA**

A fourth focus group with current users of the COA (5 female and 2 male) clearly illustrated the impact that the COA has on the lives of participating seniors. Phrases like 'I just love it' and 'it's like a second home to me' were used to describe the Boxford COA. One striking characteristic of this group was that 4/5

women are widowed and this revelation led to a discussion of the need for a bereavement group or grief counseling. In addition, resources for caregivers and transportation alternatives were mentioned as currently unmet needs for seniors in Boxford. One person mentioned carpooling with others who reside at Four Mile Village—which could be replicated in other parts of town as a way of managing the transportation needs of some seniors in town. This group would welcome increased supportive transportation options to more destinations both within and outside of Boxford beyond what is offered through the Council on Aging.

As mentioned in the other groups, the current space of the COA was described as a problem. Apparently the knitting group and reading group moved out due to lack of space or in need of a quiet place. They also describe the fact that now they have to sign up for activities which limits the number of people who can participate when they would prefer it be open to everyone. Finally, the lack of parking on certain days and the fear of the elevator also deter these participating seniors, and likely others, to attend programs.

Six out of the seven participants in this focus group have no intention of leaving Boxford. Although this entire group has family either in Boxford or nearby towns, they describe the status of their peers as being mixed. Lack of housing options is cited as a reason that seniors move out of town but another barrier exists in that you 'can't live in senior housing in another town if you aren't already a resident.'

Another strand of conversation addressed the fact that Boxford does not offer many opportunities to socialize. This is exacerbated by the fact that many residents move to Boxford for the school system and are professionals commuting elsewhere to work. This group describes a divide between residents who have lived in Boxford their whole lives and those who recently moved to the area. This is one of the things this group of seniors enjoys most about participating at the COA as it provides an opportunity to socialize with peers from all walks of life.

### *Summary of Focus Group Findings*

In summary, results of these 4 focus groups indicate strong agreement among town leaders and constituents of a variety of ages that:

- the current COA space is inadequate to meet the current needs of Boxford's senior population
- the lack of alternative housing and transportation makes it difficult for adults to age in place in Boxford—or if adults do remain living independently, risk for social isolation is high
- as the next generation of seniors approach retirement—they expect to remain active members of the Boxford community and their use of the COA will reflect this active lifestyle

Thus the COA is expected to respond to these changing needs in order to sustain its contribution to the landscape of Boxford. This means that an expansion of services to include more caregiving support services (i.e., respite, support groups, or access to adult day care programs and home care assistance services) as well as opportunities to stay active through physical fitness and overall wellness programming. Transportation within and around Boxford will be a key to facilitating engagement and access to resources for seniors as they are no longer able to drive. In addition, opportunities for volunteering and engaging with younger generations are valuable to the future generation of seniors of Boxford. Just as the population of Boxford is evolving both in size and composition so must the physical space and services of the Boxford COA.

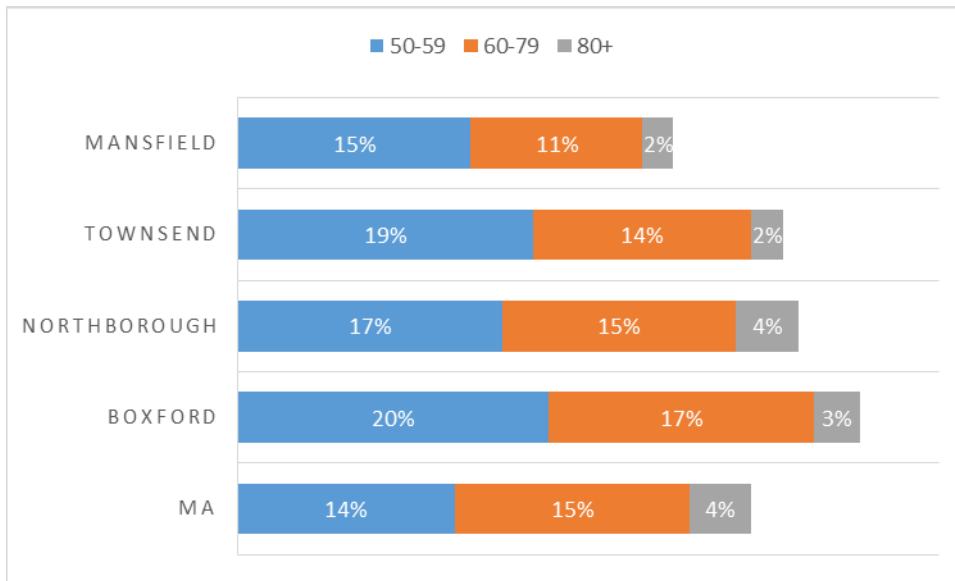
### *Results from Key Informant Interviews*

The in-depth interviews provided an opportunity to further explore themes raised in the focus groups. As previously mentioned, 10 key informant interviews were conducted including 5 Boxford officials (COA Board Chairperson, COA Director, Town Administrator, Library Director, and the Director of Public Health), directors of Councils on Aging in 3 communities chosen for recent construction of senior centers or with senior centers that were co-located with libraries--in addition, information about a 4th community was garnered through the MCOA representative who was formerly a COA director in a community that underwent new construction; and 2 statewide leaders within the aging network in Massachusetts [representing the Massachusetts Executive Office of Elder Affairs and the Massachusetts Councils on Aging (MCOA)].

We began by learning about the role the informant played in the aging network in Massachusetts and in Boxford specifically. Those interviewed from state organizations or other town councils on aging had had decades of experience and willingly shared their insights. Those interviewed from Boxford were key stakeholders representing town government and departments, many of whom were longtime residents.

**Figures 9 and 10** offer a context for considering Boxford relative to other communities who have undergone new construction or co-locating their senior centers and where the Council on Aging Directors participated as Key Informants to this report. Driving the selection decision of these communities was their experience with co-locating their senior centers with libraries.

**Figure 9.** Age distribution in Boxford and selected comparison areas



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

**Figure 10.** Peer community comparison, by size of senior center and size of senior population and staff

	Townsend	Mansfield	Boxford	Northborough
<b>Square Ft.</b>	7,000	9,000*	3,834	14,000
<b>Pop. 60+</b>	1,197	2,630	1,561	2,429
<b>FT Staff</b>	1	3	2	2
<b>PT Staff</b>	4	7	2	5

Note. \*Includes space shared with library.

## Issues Impacting Aging Felt Statewide and in Boxford

The interviewees from state organizations and peer communities were asked about the needs and challenges they perceived impacting older adults statewide. Universally, the top two issues mentioned were transportation and housing. Concern about transportation ranged from assessing fitness-to-drive to the lack of transportation options when driving cessation was necessary. Boxford officials echoed similar concerns about community mobility, "Transportation is always going to be a huge issue here-- no busses, no taxis, no sidewalks", "other than the COA van, [there is] nothing else." One Boxford leader surmised that, "[Boxford] has the potential for being isolating to older adults." Another official expanded on his concern about infrastructure in Boxford—"not a walking town-- no sidewalks-- you either drive yourself, ride your bicycle at your own peril, or use the COA van." His concern was that more of the population is becoming less mobile and that the homebound population will increase and be less connected with the advantages and services that the town offers. "Sidewalks" are a controversial issue for Boxford which are viewed by some as impacting its rural character and charm. For others, sidewalks offer an opportunity to support healthy aging and the World Health Organization (WHO) concept of "age-friendly communities" with destinations to safely walk to and from. One Boxford official mentioned the idea of a potential triangle in Boxford Village East where there may be possible opportunity for sidewalks--but not likely... he thought that sidewalks may be considered if housing plans ever get through.

Several interviewees noted that the housing stock may not be appropriate with one commenting, "What is good for younger families may have accessibility challenges for older adults [who are] aging-in-place." Suggestions for expanding housing options included zoning for in-law apartments, multi-generational or shared housing (unrelated individuals). Another interviewee noted that "it is in the interest of a community's vitality to preserve the older adult population...older adults tend to utilize municipal services at a lower rate than younger families." Some also observed that older adults may need assistance with downsizing their current housing. For Boxford, currently there is one independent housing complex that attracts seniors, Four Mile Village. And that housing has a waitlist of over 100, although the waitlist may be misleading in that the interviewees explained that residents buy into the housing as a reassurance that the unit will be available to them for a future need. One leader would like a senior community housing project to move forward on a parcel of land that the town owns to encourage aging-in-place in Boxford. [Note: A Key Informant mentioned that there is currently a plan for Senior Housing on the Haynes Land in the East Village.] Currently, "people get to the point where the houses are too big and then they leave." Another noted that prior suggestions for subsidized housing did not receive Town Meeting support but that Town Meeting "toyed with idea of high end senior cluster housing at market value." One town official voiced a concern, that some older adults may be forced to move from Boxford as "their children move out leaving them with high taxes and large homes."



The informants who represented the Council on Aging raised the need for Adult Day Care Services as there are none in town and observed that the number of caregiving questions have risen at the COA. While recognizing the need, others interviewed from the town had differing opinions as to how to address it with some wanting a small program privately managed but attached to senior center while others saw the potential for Adult Day Care Services only as private-managed and developed and not part of a public building. When asked about programs in surrounding towns, it was mentioned that there is a supportive day program in Amesbury but there is no transportation to go there from Boxford and it is up to the family to provide that transportation. Another interviewee noted that the Visiting Nurse Association (VNA) operates an Adult Day Care program in Mansfield.

Also mentioned was a concern for income security, although we are living longer, rising seniors may not be as financially secure as the current cohort of older adults, One interviewee reflected that, "older adults now are healthier and better off financially than the baby boomers moving into adulthood." Baby boomers likely will have fewer pensions, savings, mortgages, and there is likely a trend toward needing more support." And an implication for Boxford was expressed by one of the Boxford interviewees by the following statement,

"What a lot of the younger people in this town don't see is that this used to be a farming town and there are still quite a few 'blue collar' families still in town in big houses...and they are struggling...to help them, we are hurting them...they can't afford it [new senior center] and they aren't going to vote [for a project] that will raise their taxes."

### Aging in Boxford

The interviewees most knowledgeable about Boxford represented town government, agencies, and the local Council on Aging. The leaders anticipate a larger retired population with "more demand for active and social activities..." "[seniors] in good physical condition--active and involved." One administrator and longtime resident commented on the changing demographics, "the town no longer empties from 9 a.m. to 5 p.m." He sees a growing impact on fire, police, and daytime services and has already observed a slight uptick in medical calls for people age 65+. The same interviewee also mentioned the growing issue of scam and that the local district attorney has begun efforts to have police do educational events for seniors related to scam and exploitation prevention.

In addition to programs and services offered directly through the Council on Aging, collaboration with other departments and agencies was also mentioned, specifically, the Local Emergency Planning Committee (LEPC) in Boxford responds to emergencies and electric power outages and maintains a list of "care group" (that list has approximately 10 names); and the Board of Health runs a flu

clinic once a year in the fall at Town Hall and a second smaller one at the COA. Plans are underway with Rite Aid to offer clinic for other immunizations like shingles and pneumonia. The Board of Health contracts with the VNA to do wellness programs a few times per week at the COA. In addition, the Board of Health sometimes utilizes the services of an older adult through the Tax Relief program.

Boxford's needs were expressed by several interviewees. Some noted a specific need to increase staffing to full time for the social worker, the van driver and that the volunteers who serve the senior center are themselves aging and that the COA is not attracting younger volunteers. The interviewee also noted that home health aides are difficult to attract to Boxford--"they want to go where they can visit 6 people in in one town."

Additional current service needs mentioned included: caregiving (i.e., respite, support groups, or access to adult day care programs and home care assistance services) and bereavement support. Several interviewees expressed a frustration in not having space to include all older adults who would like to participate in activities and needing to resort to sign-up sheets.

The Boxford COA director offered some additional thoughts on the need for future programs: She would like to have more educational programs on topics such as estate planning information sessions and reverse mortgages. She also would like to attract interns noting that "there are several colleges in the area ...but currently does not have the space" [for interns]. She would "love someone to do social media--Facebook, website, etc.," and would like to expand hours to 5 days per week and more evening hours for educational programs and activities to attract boomers --but notes that "that is a staffing issue."

### The COA Space

Among those interviewees representing Boxford, there was consensus on the following message, "current COA space is inadequate." Inadequacy was expressed in several ways, "current users are turned away from programs and meals when capacity is met;" "the space is not fully accessible"; and "the space is inadequate to attract boomers." At a minimum, one town official said that there is a need to consider an option for possible expansion of the existing space with a function room and commercial kitchen--"that would be a step up."

The challenge to address the inadequacy was clearly stated by one official as, "Taxes are already high and there is no commercial tax base... Schools need repair and just got an override--that will raise property taxes too..." Another Boxford leader stated, "There are no services in town--no drugstore, no grocery, no doctor, no hairdresser..." Suggesting that the services provided by the Boxford COA is a unique asset to the community of Boxford.

## Future Space and Senior Center Design

Given his knowledge concerning the experiences with new senior centers across the state, the Program Manager for Councils on Aging and Senior Centers from the MA Executive Office of Elder Affairs, commented that, "a new center triples the unduplicated users within the first 18 months...No one has ever said they have too much space... this State expert further stated that, "[you] need to plan for everyone--from vibrant and active seniors to older adults with greater challenges and providing support to family caregivers who are helping family members to age-in-place in the community. "There is no specific way to age." Don't look in the rear-view mirror. It's about opportunities...use your imagination...COAs are a "community focal point"-- lots of people and groups use it. "Senior Centers can transform a community."

A director from a peer community echoed these comments and stated that the, "driving design message [for her community was] that the COA should be about "social connections that people develop" and that programming is an excuse to bring people together

The State expert and the COA Directors interviewed offered some specific design guidelines.

1. Plan for 5 sq. ft. per senior population age 60+. For Boxford, based on the aforementioned 2020 projections that would mean 2168 x 5 or 10,840 sq. ft. and in 2030 would mean 2686 x 5 or 13,430 sq. ft.
2. Plan for parking spaces per 100 sq. ft. Thus given the range provided above, 78 to 85 parking spaces would be needed.
3. Plan for a commercial kitchen, 900-1000 sq. ft. Improves quality of food which may also result in an increase in home delivered meals and or being able to provide congregate meals on-site and boost attendance at nutrition programs. Plus it is good for wider community use. Some senior centers have cafes or bistros that draw wider community use as well.
4. Senior center design should include expansion option and be located in an area that can support expansion.
5. Maximize rooms for use for multiple activities
6. Include Bifold door or other dividers—soundproof if possible, to accommodate space and varied activity needs
7. If co-located, include separate entrances for each plus a separate entrance for the shared space that community might use (multipurpose function room with commercial kitchen).
8. Sufficient bathrooms in dedicated and shared spaces and larger or more bathrooms for women.
9. Have tables on wheels for easier adaptation of flexible room use.

## Co-locating with a library

The Key Informants were specifically asked their thoughts about co-locating a senior center with a library. The communities that have done so, have made it work for them and for most interviewed, it was a decision of necessity and not preference.

Mansfield has a shared space of 3000 sq. ft for the multipurpose room that the COA uses daily from 8-3 pm. and the library uses after 3:30 and on weekends. Other non-profits may also use the multipurpose room and schedule through the library after completing a preliminary application and receiving approval from the Board(s). The approved non-profits are then responsible for opening set-up/closing clean-up "access is given to anyone who uses the room." According to the director, the community has "outgrown the space [for both library and COA combined]— and if there is an expansion or new construction in the future, does not see continued co-locating with library but does see movement toward community center concept.

Northborough concluded from their exploration of centers across the state that seniors in a community center model felt that their space was encroached upon—needed separate entrances and more dedicated than shared space.

Townsend uses "Event Keeper" software program to schedule shared meeting rooms and that "seems to work well" for them. COA Director's perception is that the "new center has attracted more people and that the library circulation has gone through the roof." Townsend is very positive about the co-locating concept and if given the opportunity would add on a recreation/community center, creating the message, "this is place where people get together."

One of the directors mentioned the importance of "working out in advance, who is responsible for the maintenance and oversight of the shared space—consider hiring a manager to oversee outside groups as in renting out—set-up/opening/closing of the shared space." In addition, relative to the whole project, another director mentioned the need for "better projections on maintenance of new building and updating technology and other equipment."

## Boxford stakeholder comments on Co-locating with the Library

According to Boxford Library Director, the Boxford library currently is co-located in Town Hall and has 2000 dedicated sq. ft. If shared space is included, it is about 6000 sq. ft. not including off site storage. While the COA Director would prefer a stand-alone facility, she acknowledges that that might not happen and that co-locating stands a better chance. The Boxford COA board chair is optimistic that shared space is possible. In his opinion, the library is a good partner since the library also needs new space. While the space and program

needs for the COA are not the same as for the library, a caution felt by all interviewed is that planning should encompass adequate space for all parties.

The Library Director further commented on co-location. He observed that seniors use a lot of library services and he can see the benefit of increased access because of convenience. He can also see shared meeting room space and greater access to programs and events and greater communication across staff if the library and COA with more focused programming. The concerns he raised were:

- Having adequate meeting space
- Scheduling issues, particularly when programs are directed toward other age groups
- Parking
- Restrooms
- Staff space
- Need space for library equipment

The Library Director welcomed increased collaboration with the COA on programming for older adults, regardless if the sites are co-located. He has seen other library systems develop outreach to homebound to increase access to library collection. He is thinking about asking COA to increase transportation with dedicated trips to the library. He commented that satellite and mobile library ideas are not feasible in Boxford given lack of staffing and resources [likely not increasing] given dependence on property tax. Currently, relationship the library provides large print books and audio books on CDs to older adults and people with vision deficiencies. The Director is in the process of developing an E-Book Reader lending program. This is part of his "Bridging Technology Gap Philosophy." In addition, the library used to provide and he wants to reinstate "Tech Tuesdays" and have direct outreach to the COA. A new reference librarian was recently hired to work one-on-one on computer instruction. The Director offered ideas for educational programming: develop broad based to meet informational needs of both baby boomers and also retired. Topics mentioned include: yoga, remaining active, and encouraging reading "keep body and mind active." He is also interested in reinstating discussion groups.

The Town Administrator perception is that residents are cautious as "taxpayer impact is seen right on their personal real estate tax bill--98% are single family homes"... "The cost of new building is borne entirely by taxpayer--yet, [Town] has high bond rating and is in good shape to absorb debt." The Board of Health representative thought that a "new senior would be wonderful" and that co-locating with the library would be a "nice combination" but she was not sure that the Town's people would agree on the plan.

What would directors do differently?

We asked the COA Directors to tell us their lessons learned, what they wished they had planned for, and what they had to correct after their new construction. Several messages of advice came through that should be helpful to Boxford in their planning, design, and building phases. These messages of advice are described below.

Importance of flexible space. Directors expressed appreciation for the functionality of their space in response to programming needs. One director said, "...can't predict future program desires but it's important to have flexible space." Include large flexible spaces to accommodate 20 to 60 to 120, 250. Large multipurpose rooms with adjacent patio/outdoor space, commercial kitchens, and expandable rooms. Add more general purpose rooms with movable furniture. Assure that AV/LCD is available where needed (multipurpose room/selected activity rooms, etc.) and that soundproofing dividers are installed.

Dedicated computer labs may no longer be necessary. Given the fast pace of advances in technology, it is no longer necessary to dedicate space for computer labs with desktop computers but new centers should be fully WIFI accessible with a limited number of laptops and tablets available for individual use and group instruction. Throughout the senior center design features should "enhance technology accessibility" (with regard to visual, hearing, and fine motor).

Dedicated fitness room with equipment and trained staff is desirable. Fitness and wellness-related programming is currently very popular and the directors see that trend continuing. Fitness rooms have been well-received by the communities where new centers have included them. "Brings younger folks in." While the directors noted the need to have trained staff to supervise use of equipment, several also mentioned that partnering with Park and Recreation Department or YMCA to provide the staff or charging a monthly fee covers that additional staffing need.

Include "quiet space" areas. "Sometimes a person just wants to get out of the house." Comfortable spaces to just sit, read, chat, or watch other people is as important to plan for as is programmed activities. One center was designed with a large lobby-"hotel style feel" with comfortable furniture, books, and puzzles.

Lighting is important. Pay attention to transitions with lighting and have seating areas between rooms and so eyes adjust. One center had to retrofit lighting-- "most lighting was on eco-friendly motion sensors...did not work well with meditation classes or movies where sudden movement would turn on the lights. Needed to install switch overrides."

Design with men's programming in mind. There were differing opinions on number of pool tables, one or two. The rationale for two tables was that two tables invite opportunity for tournaments. Other programming suggestions for men included woodworking and model ship building. One center had a model train area. One of peer community directors spoke about the success of the "Dull

Men's" group (national club of senior men's groups). A max Boxford focus thought space for sports watching on TV (have a beer... half serious idea) would attract Future Users. A media room with a flat screen TV and comfortable "living room" type furniture was suggested.

Plan for outdoor space use. Plan for activities outside such as bocce courts, walking paths, raised therapeutic gardens. Also consider a sandwich "events" board in front of center to attract attention and draw people in.

Include space for to be used predominately by Senior Center staff. Particularly among those COAs collocated with the library, it was advised include a small staff lounge/lunch room and conference room in addition to staff office space.

Increase storage. Among a more common response to the question of 'what would you have done differently?' was relative to space. One director summed it up by saying, "double whatever storage you are planning."

Security cameras. In addition to security cameras at each major entrance, also be sure to include them in areas that may not be visible to reception such as a loading-dock and parking lot areas.

### Vision for Aging in Boxford

Finally, we asked the Boxford Key Informants about their vision for aging in Boxford. Given the agreement by all Key Informants that the current space occupied by the COA is not adequate, their vision for the future of Boxford includes some expansion of the COA. Contrary to some of the remarks from the Future Users focus group where some felt that they would likely retire to other areas, the Boxford Key Informants felt that residents do and will continue to age-in-place in Boxford. And that Boxford valued its aging population. The Town Administrator referred to the COA/Senior Center as a "key component to a vibrant community." Others stated that "older adults are the very lifeblood of a community." One interviewee summarized by stating that, "some communities feel, "older adults drain a community because of their increased needs. Others recognize many older adults that are: active, involved and engaged until the day they die." We [in Boxford] recognize that [older adults] are a great source for volunteers across the community--Boards, Commissions, all areas...."

One barrier to moving forward is that there is a master planning study going on right now in Boxford. According to Town Administrator, "it would be difficult to approve new construction with existing empty buildings and that nothing will be approved related to the COA or the Library until after the Town wide plan is completed."

## Summary of Key Informant Findings

- Current COA space is inadequate
- Co-location with a library can be done; but requires open communication and agreement on a wide array of decisions.
- Involved parties need to develop a consistent message and public information campaign in order to be successful in Town Meeting with any proposed changes to COA space.

## Conclusion & Recommendations

Upon triangulation of results from each of the 3 sources of data collected in this study (demographics, focus groups and key informant interviews), it was clear that there is consensus that the current Boxford COA space is inadequate for both current and future users. The Town needs to decide where this issue fits in their master facilities planning study that is currently underway. Whether the decision is to co-locate a new senior center, renovate an existing space in Town or build a stand-alone structure-- that decision will need broad-based Town support. A consistent message through a public information campaign is recommended to garner support from all stakeholder groups prior to Town Meeting.

Boxford currently is not a community designed to support aging-in-place. While some residents plan to retire to other areas, those who remain in Boxford risk social isolation and difficulty meeting their basic daily living needs, and likely their healthcare needs. Currently, the COA and its senior center is among one of the only community assets providing socialization, educational opportunities for adults and information about basic health and nutrition needs. By investing in the COA, Boxford is investing in and making a statement on whether or not it chooses to encourage lifelong residents to remain in Boxford.

Aside from the outcome of decisions on the future of the COA, the Town is also encouraged to begin to develop strategies related to transportation and housing needs. Working with surrounding towns to regionalize needed services is one viable recommendation. Benefits to this regional planning offer both a solution to current and future needs of Boxford's older residents as well allows communities like Boxford to retain their rural charm.

A vibrant COA is a critical resource to supporting a community's aging population and contributing to a healthy community. A recurrent theme heard through the focus groups and the interviews is to plan for a center that is attractive to the rising cohort of Future Users. As the next generation of seniors approach retirement—they expect to remain active members of the Boxford community and their use of the COA will reflect this active lifestyle. Boomers are active. Boomers



are seeking health and fitness, opportunities to continue learning about a wide variety of topics, including insurance benefits, caregiving, and specific health conditions. Further, communities today are viewing the senior center as a place to gather socially, be involved civically and philanthropically (Malone Beach & Langeland, 2011). If senior services are to remain relevant, their service options must be altered to meet the needs of the next wave of older adults (Pardasani, 2004). One of the Key Informant COA directors observed that, “younger seniors want programs they can come and leave while older seniors like to linger and socialize.” Related to image-building, some communities are dropping the word, “senior” in naming new structures and facilities in favor of “community” center orientation with the intention of inviting interaction across generations and building a reputation as a welcoming environment. One proposed plan is to build a Community Center with the intent to provide space and opportunities for all ages and all activities. The Senior Center, which would be part of the Community Center, will provide opportunities for intergenerational programs.

The COA is expected to respond to these changing needs in order to sustain its contribution to the landscape of Boxford. This means that an expansion of services to include more caregiving support services as well as opportunities to stay active through physical fitness and overall wellness programming. In addition, opportunities for volunteering and engaging with younger generations are valuable to the future generation of seniors of Boxford. Just as the population of Boxford is evolving both in size and composition so must the physical space and services of the Boxford COA.

## References

Aday, R. H. (2003). The evolving role of senior centers in the 21st century. *Baby Boomers at the Gate*. Washington, DC: Government Printing Office, 69-79.

Centers for Disease Control and Prevention. The State of Aging and Health in America 2013. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2013. PDF and interactive version available at [www.cdc.gov/aging](http://www.cdc.gov/aging).

Dugan, E., Porell F., Silverstein N.M., Palombo R., and Mann S. (2014). Highlights from the Massachusetts Healthy Aging Data Report: Community Profiles. Retrieved 8-30-15 from: [https://mahealthyagingcollaborative.org/wp-content/uploads/2014/01/MA\\_Healthy\\_Aging\\_Highlights\\_Report1.pdf](https://mahealthyagingcollaborative.org/wp-content/uploads/2014/01/MA_Healthy_Aging_Highlights_Report1.pdf)

Dugan, E., Porell F., Silverstein N.M., Palombo R., and Mann S. (2015). Highlights from the Massachusetts Healthy Aging Data Report: Community Profiles. Retrieved 8-18-15 from: [https://mahealthyagingcollaborative.org/wp-content/uploads/2015/03/2015\\_MA\\_HealthyAgingDataReport\\_Highlights.pdf](https://mahealthyagingcollaborative.org/wp-content/uploads/2015/03/2015_MA_HealthyAgingDataReport_Highlights.pdf)

Boxford Community Profile found at: [https://mahealthyagingcollaborative.org/wpcontent/themes/mhac/pdf/community\\_profiles/towncode038.pdf](https://mahealthyagingcollaborative.org/wpcontent/themes/mhac/pdf/community_profiles/towncode038.pdf)

Fitzgerald, K. G., & Caro, F. G. (2014). An overview of age-friendly cities and communities around the world. *Journal of Aging & Social Policy*, 26(1-2), 1-18.

Fitzpatrick, T. R., & McCabe, J. (2008). Future challenges for senior center programming to serve younger and more active baby boomers. *Activities, Adaptation & Aging*, 32(3-4), 198-213.

Ichida, Y., Hirai, H., Kondo, K., Kawachi, I., Takeda, T., & Endo, H. (2013). Does social participation improve self-rated health in the older population? A quasi-experimental intervention study. *Social science & medicine*, 94, 83-90.

Malone Beach, E. E., & Langeland, K. L. (2011). Boomers' prospective needs for senior centers and related services: A survey of persons 50–59. *Journal of gerontological social work*, 54(1), 116-130.

Massachusetts Executive Office of Elder Affairs (2014). A message to Massachusetts Council on Aging (COA) Directors Regarding the FY2014 Formula Grant Allocation. Retrieved 8-18-15 from:

Massachusetts Healthy Aging Collaborative website at <http://mahealthyagingcollaborative.org/connect/conversations/>

<http://umassmed.typepad.com/files/fy-2014-coa-formula-grant-announcement-and-allocation.pdf>

Pardasani, M. P. (2004). Senior centers: Focal points of community-based

services for the elderly. *Activities, Adaptation & Aging*, 28(4), 27-44.

Rowe, J. W., & Kahn, R. L. (2015). Successful Aging 2.0: Conceptual Expansions for the 21st Century. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, gbv025.

Salomon, N. (2010). *Housing Solutions to Support Aging in Place*. AARP Fact Sheet 172, AARP Public Policy Institute. Washington DC: AARP.

Seifarth, J. E., McGowan, C. L., & Milne, K. J. (2012). Sex and life expectancy. *Gender medicine*, 9(6), 390-401.

Swan, J., Turner, K. , Shashidhara, S. and Sanders, D. (2013) Increased physical activity, physician recommendation, and senior center participation. *Health*, 5, 8-18. doi: [10.4236/health.2013.512A002](https://doi.org/10.4236/health.2013.512A002).

U.S. Census Bureau (2010). *American fact finder*. Retrieved October 30, 2013 from <http://www.Census.gov>

Vincent, G. K., & Velkoff, V. A. (2010). The next four decades: The older population in the United States: 2010 to 2050. *Current Population Reports*, P25-1138. Washington DC: U.S. Census Bureau.

# Appendices

## Appendix 1. Current User Focus Group Protocol

As people come in--fill out nametags, distribute consent forms

### I. Introductions and rationale

- A. Caitlin, Nina, our roles and expertise
- B. Introductions around the table
- C. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about the residents of Boxford—both those who are 60 and over, and those who will be entering this age group over the next decade or so—in order to better understand the needs, experiences, and opinions of the aging population in this community. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Council on Aging in support of this effort. The other components of this project include 1) interviews with neighboring Council on Aging Directors, the members of the COA Board of Directors and other community stakeholders; and 2) a demographic description of current and future trends occurring among Boxford's aging population.*

- D. Why we want to hear from this group of community members.

*You have been invited here today to share your experience and insights about the community of Boxford. We hope you will share your suggestions for how the Council on Aging and other town offices can work together to better serve the aging population of this community.*

### II. Consent forms--explanation, review, sign & return

*The Institutional Review Board at the University of Massachusetts Boston has approved all aspects of the research protocol that we are using in this project, including the focus groups we're holding today. It is important that you understand that your participation in this discussion is voluntary. If you do not wish to participate, you may leave the room at any time without consequence. If you do participate, your contributions to the discussion will be confidential. We will be using material from this focus group in our final report to Town of Boxford Council on Aging. However, we will not identify you by name. It is also important for all of the members of this group to respect that confidentiality.*

*Does anyone have any questions about this process?*

*If you'd like a copy of this information to keep, let us know and we'll have one made for you.*

1. *How long have you lived in Boxford? Do you have any intentions of leaving Boxford in the future? If so, why?*
2. *What are your favorite parts about living in Boxford?*
3. *What aspects of living in Boxford are challenging to you, especially as you get older?*
4. *In your opinion, what is missing in Boxford that would make it an ideal place to grow older?*
5. *What kinds of services, provided by the Council on Aging have you participated in?*
6. *In your opinion, what are the most important services that the Council on Aging currently provides?*
  - a. *What are your thoughts about the need for a social adult-day care program in Boxford? Is this a service that you or someone you know would use?*
7. *To what extent do older adults in Boxford travel elsewhere to access support services for older adults?*
8. *In what ways could service provided by the Boxford Council on Aging be improved?*
9. *In your opinion, is the physical space of the COA adequately meeting the needs of the older adult population of Boxford? How could the space be improved in the future?*
10. *Currently, the Boxford COA is open Monday-Thursday from 9am-3pm. From your perspective, would there be reason to change these hours to meet the needs of the community?*
11. *What services or supports for older adults in Boxford are most needed now? What about 10 years from now? What about 20 years from now?*
12. *What do you think keeps people in the community from utilizing the services provided by the Senior Center?*
13. *What are your thoughts about integrating a new senior center in a broader community center context?*

*Do you have anything else to add?*

## Appendix 2. Council on Aging Focus Group Protocol

### I. Introductions and rationale

A. Nina and Caitlin, our roles and expertise

B. Introductions around the table

C. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about the residents of Boxford—both those who are 60 and over, and those who will be entering this age group over the next decade or so—in order to better understand the needs, experiences, and opinions of the aging population in this community. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Council on Aging in support of this effort. The other components of this project include 1) interviews with neighboring Council on Aging Directors, the members of the COA Board of Directors and c; and 2) a demographic description of current and future trends occurring among Boxford’s aging population.*

D. Why we want to hear from this group of community officials.

*As officials in Town of Boxford, you have been invited here today to share your experience and insights about working in, and serving older people in the community of Boxford. We'd like to hear your reaction to the work we have done so far, and we hope you will share your suggestions for how the Boxford Council on Aging and your respective offices can work together to better serve the aging population of this community.*

### II. Consent forms--explanation, review, sign & return

*The Institutional Review Board at the University of Massachusetts Boston has approved all aspects of the research protocol that we are using in this project, including the focus groups we're holding today. It is important that you understand that your participation in this discussion is voluntary. If you do not wish to participate, you may leave the room at any time without consequence. Unfortunately, we are not able to guarantee the confidentiality of your discussion, given the public nature of your positions. Nevertheless, although we will be using material from this focus group in our final report to Town of Boxford Council on Aging, we will not identify you by name. It is also important for all of the members of this group to respect the confidentiality of other participants.*

*Does anyone have any questions about this process? If you'd like a copy of this information to keep, let us know and we'll have one made for you.*

- 1. How long have you served on the Board? What is your favorite part about being a member?*

2. *What have been the most pressing issues that you all have been working through in the last 3 years?*
3. *What changes have you seen in the last 5 years that are affecting the need for senior services in Boxford?*
4. *In your opinion, what is missing in Boxford that would make it an ideal place to grow older?*
5. *In your opinion, what are the most important services that the Council on Aging currently provides? To what extent are satellite locations used to provide services to the older residents of Boxford?*
  - a. *What are your thoughts about the need for a social adult-day care program in Boxford? Is this a service that you or someone you know would use?*
6. *In what ways could service provided by the Boxford Council on Aging be improved?*
7. *Currently, the Boxford COA is open Monday-Thursday from 9am-3pm. From your perspective, would there be reason to change these hours to meet the needs of the community?*
8. *In your opinion, is the physical space of the COA adequately meeting the needs of the older adult population of Boxford? How could the space be improved in the future?*
9. *What services or supports for older adults in Boxford are most needed now? What about 10 years from now? What about 20 years from now?*
10. *What do you think keeps people in the community from utilizing the services provided by the Senior Center?*
11. *What are your thoughts about integrating a new senior center in a broader community center context?*
12. *In your opinion, what are some of the most important unmet needs of the older population in Boxford?*
13. *What are your thoughts about integrating a new senior center in a broader community center context?*
  - a. *For example, what are your thoughts about a combined COA building with the library?"*

*Do you have anything else to add?*

### Appendix 3. Community Stakeholder Focus Group Protocol

#### I. Introductions and rationale

- A. Nina and Caitlin, our roles and expertise
- B. Introductions around the table
- C. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about the residents of Boxford—both those who are 60 and over, and those who will be entering this age group over the next decade or so—in order to better understand the needs, experiences, and opinions of the aging population in this community. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Council on Aging in support of this effort. The components of this project that have already occurred include 1) interviews with neighboring Council on Aging Directors, Boxford residents and other community stakeholders; and 2) a demographic description of current and future trends occurring among Boxford’s aging population.*

- D. Why we want to hear from this group of community officials.

*As professionals in the Town of Boxford, you have been invited here today to share your experience and insights about working in, and serving older people in the community of Boxford. We'd like to hear your reaction to the work we have done so far, and we hope you will share your suggestions for how the Boxford Council on Aging and your respective offices can work together to better serve the aging population of this community.*

#### II. Consent forms--explanation, review, sign & return

*The Institutional Review Board at the University of Massachusetts Boston has approved all aspects of the research protocol that we are using in this project, including the focus groups we're holding today. It is important that you understand that your participation in this discussion is voluntary. If you do not wish to participate, you may leave the room at any time without consequence. Unfortunately, we are not able to guarantee the confidentiality of your discussion, given the public nature of your positions. Nevertheless, although we will be using material from this focus group in our final report to Town of Boxford Council on Aging, we will not identify you by name. It is also important for all of the members of this group to respect the confidentiality of other participants.*

*Does anyone have any questions about the form or this process? If you'd like a copy of this information to keep, let us know and we'll have one made for you.*

1. How long have you been working in Boxford?
2. How has your organization been impacted by the aging of Boxford’s population?
3. What changes have you seen in the last 5 years that are affecting the need for senior services in Boxford?



4. *In your opinion, what is the impact of aging-in-place on public safety or public health? For example, what implications does aging have on emergency preparedness in Boxford etc.?*
5. *In your opinion, what are some of the unmet needs of the older population in Boxford? In other words, what aspects of the aging population of Boxford are most important for organizations working in Boxford to know about and understand?*
6. *In your opinion, what is missing in Boxford that would make it an ideal place to grow older?*
7. *Please describe the current relationship between your organization and the council on Aging?*
8. *What services or supports for older adults in Boxford are most needed now? What about 10 years from now? What about 20 years from now?*
9. *Based on your knowledge of the COA and their services, would you say that the physical space of the COA adequately meets the needs of the older adult population of Boxford? How could the space be improved in the future?*
  - a. *What are your thoughts about the need for a social adult-day care program in Boxford?*
10. *Currently, the Boxford COA is open Monday-Thursday from 9am-3pm. From your perspective, would there be reason to change these hours to meet the needs of the community?*
11. *What do you think keeps people in the community from utilizing the services provided by the Senior Center?*
12. *What are your thoughts about integrating a new senior center in a broader community center context?*
13. *What can you suggest about how organizations and offices within the Town could work together more effectively to respond to the aging of the Boxford population?*
14. *What are your thoughts about integrating a new senior center in a broader community center context?*

*Do you have anything else to add?*

## Appendix 4. Future User Focus Group Protocol

### I. Introductions and rationale

A. Caitlin, Nina, our roles and expertise

B. Introductions around the table

C. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about the residents of Boxford—both those who are 60 and over, and those who will be entering this age group over the next decade or so—in order to better understand the needs, experiences, and opinions of the aging population in this community. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Council on Aging in support of this effort. The components of this project that have already occurred include 1) interviews with neighboring Council on Aging Directors, the members of the COA Board of Directors and other community stakeholders; and 2) a demographic description of current and future trends occurring among Boxford's aging population.*

D. Why we want to hear from this group of community members.

*You have been invited here today to share your experience and insights about the community of Boxford. We hope you will share your suggestions for how the Council on Aging and other town offices can work together to better serve the aging population of this community.*

1. *How long have you lived in Boxford? Do you have any intentions of leaving Boxford in the future? If so, why?*
2. *What are your favorite parts about living in Boxford?*
3. *What aspects of living in Boxford are challenging to you, especially as you get older?*
4. *Overall, how familiar are you with the services provided by the Town of Boxford Council on Aging?*
5. *What kinds of services, provided by the Council on Aging have you or any of your friends or family members participated in?*
  - a. *Are you currently caring for a family member or friend? Have you ever done so? What types of services or support did you seek to help you during this time, if any?*
6. *In your opinion, what are the most important services that the Council on Aging currently provides?*
  - a. *What are your thoughts about the need for a social adult-day care program in Boxford? Is this a service that you or someone you know would use?*
7. *Based on your knowledge of the COA and their services, would you say that the physical space of the COA adequately meets the needs of the older adult population of Boxford? How could the space be improved in the future?*
8. *Currently, the Boxford COA is open Monday-Thursday from 9am-3pm. From your perspective, would there be reason to change these hours to meet the needs of the community?*

9. *In your opinion, what is missing in Boxford that would make it an ideal place to grow older?*
10. *What services or supports for older adults in Boxford are most needed now? What about 10 years from now? What about 20 years from now?*
11. *In what ways do you anticipate participating in services provided by the Boxford Council on Aging now or in the future?*
  - a. *What types of COA programs or services would you be most likely to use?*
12. *From your perspective, what strategies would you suggest for making Boxford Council on Aging services more widely known and used in the future—specifically for your generation.*
13. *What are your thoughts about integrating a new senior center in a broader community center context?*

*Do you have anything else to add?*

## Appendix 5. Town Key Informant Interview Protocol

### I. Introductions and rationale

A. Caitlin Coyle, role and expertise

B. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about the residents of Boxford—both those who are 60 and over, and those who will be entering this age group over the next decade or so—in order to better understand the needs, experiences, and opinions of the aging population in this community. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Council on Aging in support of this effort.*

*Today we are talking with you as a key informant—a person who works with and on behalf of members of the community. We are interested in your thoughts about the challenges faced by the Boxford Council on Aging, and your suggestions for the COA as it works to better serve the aging population of this community. We are interested in your thoughts as an individual who has your own views and ideas about these issues, but also as a representative of the organization you represent.*

### II. Consent --explanation, review, sign & return

*You're being asked to provide consent to participate in today's interview. The Institutional Review Board at the University of Massachusetts Boston has approved all aspects of the research protocol that we are using in this project, including the interview we're holding today. It is important that you understand that your participation in this discussion is voluntary. If you do not wish to participate, you may stop the conversation at any time without consequence. If you do participate, your contributions to the discussion cannot be kept confidential, due to your public role in the community. We will be using material from this interview in our final report to the Town of Boxford Council on Aging*

*Do you have any questions about the form or this process?*

*With your consent, I would like to begin. If you'd like a copy of the consent form to keep, let us know and we'll have one made for you.*

### III. Topics for the interview

- 1. Title, years in position, resident of Boxford? Years of residency?*
- 2. Please tell us about the organization that you are representing today. How do you interact/impact seniors in Boxford?*
- 3. Similarly, how has your organization been impacted by the aging of Boxford's population? In your opinion, what are some of the unmet needs of the older population in Boxford? How does the aging of Boxford's population impact your future vision for the library/town?*
- 4. What are your concerns about the future aging of Boxford's population?*
- 5. What aspects of the aging population of Boxford are most important for organizations working in Boxford to know about and understand?*
- 6. What changes have you seen in the last 5 years that are affecting the need for senior services in Boxford?*
- 7. From your perspective, what strategies would you suggest for making Aging Services more widely known and used?*
- 8. What can you suggest about how organizations and offices within the Town could work together more effectively to respond to the aging of the Boxford population?*
- 9. How do you feel about the possibility of a new senior center being co-located with the library?*

*10. What is your opinion of including the senior center within a broader community center context?  
Do you have anything else to add?*

## Appendix 6. Peer Community Interview Protocol

### I. Introductions and rationale

A. Caitlin Coyle, Nina Silverstein, our roles and expertise

B. Rationale for the project.

*The Town of Boxford Council on Aging wants to learn more about its residents in order to better understand the needs, experiences, and opinions of the population regarding the aging programs and services offered. The Gerontology Institute at UMass Boston is conducting a planning study for the Town of Boxford Senior Services Division in support of this effort. Today we are holding this interview so that we can learn more about your town's Senior Center. The information we learn from you will be beneficial to the Town of Boxford as they work towards planning for improved programming and services for their older population.*

C. Why we wanted to hear from key informants.

*We are talking with you as a peer community key informant because of your unique knowledge as the Director of your town's Council on Aging. We are interested in your perspective on your own town's Senior Center. It will be extremely helpful to Boxford's town management to understand not only the benefits and weaknesses of your senior center's physical structure, but also to learn about the programming, financing and staffing characteristics of the center. The information you provide, as well as your suggestions, will assist Boxford immensely as it works to better serve the aging population of its community. We are interested in your thoughts as individuals who have your own views and ideas about these issues, but also as representatives of the organizations you represent.*

### II. Consent—explanation, review script, acquire verbal consent.

*Today you're being asked to provide verbal consent to participate in today's interview. The Institutional Review Board at the University of Massachusetts Boston has approved all aspects of the research protocol that we are using in this project, including the interview we're holding today. It is important that you understand that your participation in this discussion is voluntary. If you do not wish to participate, you may stop the interviewer at any time without consequence. If you do participate, we cannot guarantee that your contributions to the discussion will remain confidential, due to your public role in the community. We will be using material from this interview in our final report to Town of Boxford Council on Aging.*

*Do you have any questions about the form or this process?*

*With your consent, I would like to begin. If you'd like a copy of this information to keep, let us know and we'll have one made for you.*

### III. General Topics for the Interview

-**Background**--Length of time as COA director, town of residence. How familiar are you with the Town of Boxford, MA?

-*Description of the Features of their Senior Center*: size; when built; hours of operation; use of the space; full kitchen; if co-located with library, how and when did that happen? What would you have done differently? What was that process like for you? How does the shared space work now?

-*Key Programming Features*: highest attended activities/programs; outings; tracking attendance, total number of programs offered/week, length of programs, non-regularly scheduled programs, outside assistance programs (SHINE), meal program

-*Financing Features*—what is their total budget? What share (or amount) from the Town? Do you charge residents to attend activities and programs?

-*Staffing Features*—Number of FT staff; number of PT staff; number of volunteers used for staffing

-*Outreach Features*- how do you advertise? Do you have a newsletter? What is your most successful advertisement technique? What other ways have you found effective in recruiting new attendees?

-*Future of COA*- what is your 5-year plan for your COA in terms of growth, maintenance or building space? How are you planning for the aging of your town's population? What kinds of changes are you seeing in your community relative to aging needs?

### Center for Social and Demographic Research on Aging

The **Center for Social and Demographic Research on Aging** was created with the goal to promote the demographic and applied research capacity within UMass Boston's Gerontology Institute.

The center aims to serve the research and evaluation needs of organizations that serve older adults in the community, municipalities and their growing numbers of older residents, as well as providing interdepartmental support for UMass Boston faculty and staff with shared interests. The center also provides training for students in the Gerontology PhD Program at UMass Boston who serve as researchers on various projects.

Areas of focus in the center span an array of social and demographic domains, including topics related to:

- economic security in later life, well-being and quality of life
- community supports for seniors, aging and disability
- evaluating programs designed for older adults
- demography and diversity of the aging population in Massachusetts, the U.S., and beyond

For more information about the Center and the research and activities of the Gerontology Institute, University of Massachusetts Boston, visit: <https://www.umb.edu/gerontologyinstitute>