

Arlington: An Age and Dementia Friendly Action Plan

January 2022

Commissioned by the Town of Arlington & Arlington Council on Aging

Center for Social and Demographic Research on Aging
Gerontology Institute

John W. McCormack Graduate School of Policy & Global Studies
University of Massachusetts Boston



December 2021

Dear Arlington Community,

On behalf of the Arlington Council on Aging, I am excited to share our Age and Dementia Friendly Action Plan. This plan was created uniquely for Arlington, with input from residents, community partners, local businesses, government leaders and aging experts. Surveys were conducted, focus groups were held and feedback was collected both pre and post-pandemic to create a plan that reflects the dynamic environment that we are all living in. Using collected data, survey results, feedback and input, this plan was written by the expert team at the University of Massachusetts Boston Gerontology Institute.

The Council on Aging intends to distribute this plan to a broad scope of community partners, local businesses and decision makers in Arlington. We believe that prioritizing this plan will advance relevant projects that will have demonstrable impacts on how older adults live in Arlington. We are grateful to all those who took the time and effort to participate in the surveys and focus groups while input was being collected.

Residents aged 60 and older make up the fastest growing segment of our population. Arlington seniors are especially vibrant, leading active lives and advocating in our community like never before.

The priorities exemplified by the Age-Friendly and Dementia-Friendly designations reflect some of Arlington's core values. The goals in this plan serve to inspire all our residents, regardless of age or ability. It not only represents our shared values but also our shared optimism for a brighter future.

I believe implementation of this plan will strengthen our community and help make Arlington an even better place to live.

Sincerely,

Kristine Shah

Kristine Shah Executive Director Arlington Council on Aging

Acknowledgements

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

Dr. Caitlin Coyle and Beth Rouleau are primarily responsible for the contents of this report. Other contributors include Nidya Velasco-Roldán, and Rebecca Mailman. We are thankful for the leadership of the Director of the Arlington Council on Aging, Kristine Shah, and the members of the Arlington Council on Aging and the non-profit Arlington Seniors Association, who all offered guidance at each step of this process.

Town Appointed Council on Aging Members & Associate Members:

Pat Baillieul Anne Brown Sheila Connemey Nancy Cox Laura Liscio Mary Hung Michael Quinn

Anne Fitzgerald Mara Klein-Collins Bob Tosi, Jr. Marjorie Vanderhill Rick Fentin Karen Nichols Paul Raia

For more information, contact:

The Center for Social and Demographic Research on Aging Gerontology Institute University of Massachusetts Boston CSDRA@umb.edu | 617.287.7413

Recommended Citation:

Coyle, Caitlin and Rouleau, Beth. 2021. Center for Social and Demographic Research on Aging Publications.

Table of Contents

| Acknowledgements | 3 |
|---|----|
| Background | 2 |
| The Dementia-Friendly Framework | 5 |
| Arlington Age and Dementia Friendly Progress to Date | |
| Methods | 8 |
| Action Plan | g |
| Housing | |
| Transportation & Mobility | 15 |
| Community Supports & Health Services | 21 |
| Social Participation & Inclusion | 26 |
| Communication & Partnerships | 33 |
| Conclusion | 37 |
| Appendix A. Results: Demographic Profile of Arlington | 38 |
| Appendix B. Document Review | 50 |
| Appendix C. Arlington 2019 Community Survey 2019 | 51 |

Background

The Town of Arlington, located on the ancestral lands of the Massachusetts Tribe, was originally settled in 1635 as a village under the name Menotomy. In 1807, the Town and a section of what is now Belmont were set off from Cambridge and incorporated as West Cambridge. In 1867, the name was changed to Arlington in honor of the heroes buried at Arlington National Cemetery in Arlington, Virginia. Arlington was once a thriving agriculture and mill town. Today, Old Schwamb Mill exists as the oldest continuously operating mill site in the United States. Arlington remains proud of its history and is recognized as the birthplace of Uncle Sam, the location of the first public children's library, and the site of fighting at the start of the Revolutionary War. Arlington honors its history through the preservation of many historical buildings, a recreated town common, three museums, and educational programming and outreach offered by the Historical Society.

Arlington's access to metropolitan Boston has made it a very desirable place to live. Arlington is located six miles northwest of Boston and is bordered on the north by Winchester, on the east by Medford and Somerville, on the south by Cambridge and Belmont, and on the west by Lexington. The transportation network is well-connected and multimodal, with many sidewalks, bicycle routes, and convenient highway access for travel to Boston and the western part of Massachusetts. The Minuteman Bikeway is used by thousands of bicyclists and pedestrians each day for recreation and commuting throughout Cambridge, Lexington, and Bedford.

In addition to its location and rich history, Arlington has a vibrant local arts community with several organizations devoted to cultural production and appreciation. Arlington's Capitol Theatre and the Regent Theatre in Arlington Center draw approximately 200,000 patrons per year. According to a study prepared for the Planning Department, these visitors spend \$2.4 million annually at local shops and restaurants. Arlington's commercial districts offer opportunities for working, shopping, and visiting. Close to 60 of the town's 3,500 acres are parkland owned by the Town. There are over two dozen locations throughout town offering residents of all ages greenspace and water features for active and passive recreation.

As the Town of Arlington evolves and its residents age, there is increasing focus on quality of life, inclusivity, and accessibility. Projections suggest that by the year 2035¹ almost one out of each three Arlington residents will be age 60 or older—24% of the Town's population will be between

¹ Figures for 2035 are the Vintage Population Projections generated by the Donahue Institute, University of Massachusetts: http://pep.donahue-institute.org/

the ages of 60 and 79, with an additional 7% age 80 and older. Arlington's Council on Aging has a long history of creating resources and implementing programs and services for older adults through collaboration. These efforts came to fruition through the recent renovation and renaming of Arlington's Senior Center. The newly named and enhanced Arlington Community Center is currently under construction and is scheduled to open to the public in 2022 The Council on Aging intends to build upon its partner relationships to ensure that Arlington is an age-friendly community that offers equitable and sustainable resources, services, and programs, for residents of all ages.

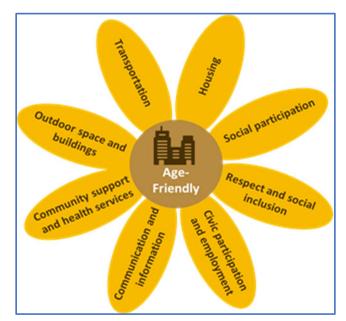
Dedicated to the goal of promoting age friendly planning and policy, Former Council on Aging Director, Susan Carp and Town Manager, Adam Chapdelaine, initiated the process of becoming a certified Age and Dementia Friendly Community. The Town was accepted into the Age-Friendly Community network in 2017 and is in the process of earning designation from the Massachusetts Council on Aging as a Dementia Friendly community. The contents of this report are designed to inform the Town as it puts action in place to address the needs of its older residents. In addition, this report intends to intersect with and advise other ongoing community planning efforts. This work also aligns with Governor Baker's plan for an Age-Friendly State.

What is Age-Friendly? What is Dementia Friendly?

The age friendly effort in the Town of Arlington has, from the outset, committed to integrate and prioritize members of the community living with dementia and their families, through the continued integration of two frameworks. On one hand, the Age-Friendly framework, developed by the World Health Organization (WHO) in 2002, is one where people participate, are connected, remain healthy and active, and feel they belong—no matter their age. Through assessment, planning, action, and evaluating progress, communities all over the world are taking steps to improve their social and physical environments as a strategy for promoting health and well-being throughout the life course.

The Age-Friendly model includes a conceptual framework describing domains for communities to focus on. It also lays out a process intended to ensure repeated consultation with the community, collective reflection, action, and evaluation. The Age-Friendly framework includes eight domains of community life that intersect with livability, accessibility, and the ability to thrive within the community. Within each domain, elements are identified relevant to affordability, appropriateness, and accessibility (See **Figure 1 below**).

Figure 1: Eight Domains of an Age-Friendly Community



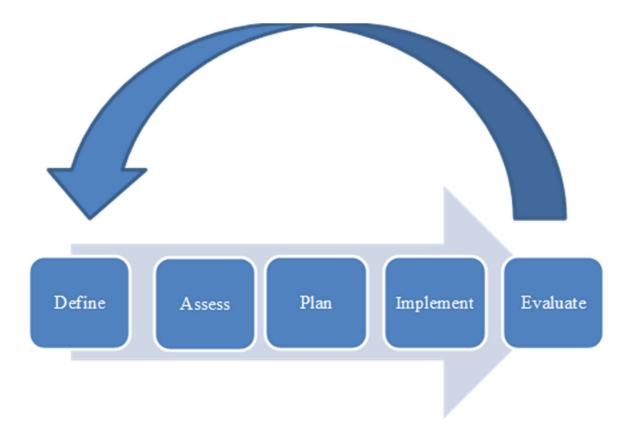
The Age-Friendly Initiative Process

WHO describes five components of an agefriendly initiative, and indicates that these components will be pursued sequentially. At the end of each age-friendly process cycle, a new phase begins, during which new goals are set, innovations put in place, and progress evaluated (see Figure 2 below). Briefly, in step one local principles are defined in conjunction with building partnerships, creating a vision, recruiting community members Through involvement. these efforts, initiative goals are prioritized. Step two

involves generating a needs assessment, focusing on environmental and population-based features that reflect age-friendliness, as well as those that pose a challenge to this goal. The <a href="https://discrete-this.org/line-th

Broadly speaking, the final steps involve implementing promising interventions; these may include programs (such as evidence-based health promotion activities) as well as environmental modifications (such as expanding traffic-calming features at key intersections). As programs and modifications are put in place, evaluations focus on demonstrating impact of the initiative through individual outcomes and broader community change indicators. Local conceptualizations shape the initiatives, programs, and partnerships put in place; they also shape the research and measurement used in support of the effort. Ultimately, the first step involved in pursuing an age-friendly agenda is to define and assess environmental features relative to the characteristics and resources of residents actually living in the community. Based on what is learned in that initial step, a community develops an Action Plan designed to address the most pressing or most actionable issues identified through the needs assessment process. In subsequent years, as the Action Plan is implemented and evaluated, the broad goals of the Initiative may be modified in a continuous improvement cycle.

Figure 2. Process of Developing an Age-Friendly Community



The Dementia-Friendly Framework

Additionally, the Dementia-Friendly aims to make communities livable for aging residents, particularly those with Alzheimer's or related dementias. The leader of this movement in the United States is Dementia Friendly America (DFA), which was formed in 2015 after the White House Conference on Aging (http://www.dfamerica.org/what-is-dfa/). DFA is a network comprised of public and private organizations or communities that are working to make the community more dementia-friendly. Indeed, a grassroots movement in Massachusetts, Dementia Friendly Massachusetts, is a part of DFA and aims to make communities in Massachusetts dementia-friendly (https://www.mass.gov/dementia-friendly-massachusetts). The Dementia-Friendly movement is similar to the Age-Friendly framework in that it aims to make communities livable for older adults, particularly those with Alzheimer's or related dementias.

Figure 3. Aspects of a Dementia Friendly Community

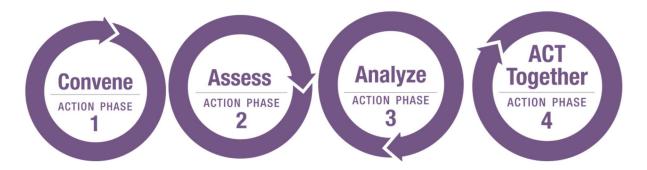


Reproduced from ACT on Alzheimer's® developed tools and resources. http://www.actonalz.org/dementia-friendly-toolkit

Dementia Friendly America (DFA) defines a Dementia-Friendly community as "a village, town, city or county that is informed, safe and respectful of individuals with the disease, their families and caregivers and provides supportive options that foster quality of life" (http://www.dfamerica.org/what-is-dfa/). Furthermore, DFA cites the successful "ACT on Alzheimer's" initiative from Minnesota as a model for developing the Dementia Friendly Framework. Based on the Dementia-Friendly Communities Toolkit developed by the ACT on Alzheimer's Initiative, it is clear that a Dementia-Friendly community is based on efforts at all levels of the community. From individual residents to municipal and state government and private organizations, it takes a collaboration of all involved in the community to foster a welcoming environment for those with Alzheimer's or related dementias in all of the domains presented in Figure 3. The Dementia-Friendly Toolkit outlines the four phases of creating a dementia-friendly community (Figure 4). Phase 1, convene, is about getting community buy-in by involving key leaders in the community in the development of dementia-friendly efforts. Upon

securing buy-in and collaboration from community members and organizations, <u>Phase 2</u> involves assessing the community for assets and challenges for individuals with dementia and their loved ones. <u>Phase 3</u> is the time during which the assessment from Phase 2 is analyzed and used to determine priorities for action. <u>Phase 4</u> is dedicated to creating an action plan and implementing change in the community to meet the action plan. The four phases are intended to take about a year to complete, with the understanding that dementia-friendliness is an ongoing process of assessment and action.

Figure 4. Phases of Creating a Dementia-Friendly Community Adapted from ACT on Alzheimer's® developed tools and resources. http://www.actonalz.org/dementiafriendly-toolkit



The description of age and dementia friendly features, and the experiences of communities throughout the world that are using the framework, make clear that each community will conceptualize this effort in a unique way. Local conceptualizations will shape the initiatives, programs, and partnerships put in place; they will also shape the research and measurement used in support of the effort. An initial task of any community's effort is therefore to identify elements that residents feel are "age-friendly." Community efforts to become age-friendly or dementia-friendly stem from two separate movements. However, when communities take steps to integrate the work of both movements, they can reduce duplicated efforts, avoid confusion, save resources, and allow each movement to strengthen and support each other.

Arlington Age and Dementia Friendly Progress to Date

In 2017, Town Manager Adam Chapdelaine and Former Senior Center Director, Susan Carp, initiated the process of becoming a certified Age-Friendly Community. The Council on Aging (COA) and town leaders gathered to learn about the WHO Age-Friendly Framework and discuss the COA's plans to launch Age Friendly Arlington. The COA Board actively supports the town's efforts in becoming age and dementia friendly and brings valuable years of experience in social, health, and financial services.

The COA conducted a needs assessment through a focus group and an age-friendly survey in 2019. The survey gathered feedback from close to 500 residents about the challenges and barriers to livability in Arlington. Nearly all (90%) of respondents expressed that it is very or somewhat important to remain in Arlington as they age. Survey sections were designed to evaluate challenges and supports to aging in place, in the context of the Age Friendly framework developed by the World Health Organization (WHO). Additional outreach was supported through various platforms and partnerships with the five HUD properties, houses of worship, and the two town libraries. The Age-Friendly Initiative was also presented on the local cable program; "Living Out Loud" continues to air on Arlington Community Media.² Results of the survey can be found in **Appendix C**. and key findings are integrated in this report, by domain.

Following the survey and outreach, Arlington's next step was to develop an action plan to address barriers to livability. In 2021, with age-friendly momentum established, the Town of Arlington invited collaboration from the Center for Social & Demographic Research on Aging (CSDRA) in the Gerontology Institute at the University of Massachusetts Boston to guide in the development of an Age-Friendly Action Plan.

The contents of Arlington's Age-Friendly Action Plan are described in detail in this report.

Methods

Demographic Profile

Demographic material used in this report was drawn from the U.S. Census Bureau (the decennial censuses and the American Community Survey); from projections generated by the Donahue Institute at the University of Massachusetts; and from the Healthy Aging Data Report¹ for Arlington. A full demographic profile of Arlington's older population can be found in **Appendix A**.

Document Review

In order to draw on current momentum in Arlington, research staff from the CSDRA completed a systematic review of documents completed by or referencing the Town of Arlington, including documentation from multiple municipal departments about their current age friendly practices and future goals; See **Appendix B** for a full list of documents included in this review.

Community Planning Work Sessions

Together with the CSDRA, the Town of Arlington identified community leaders and stakeholders to gather in the Fall of 2021. A total of 32 participants were included and represented residents, local civic and non-profit leaders, aging service providers, and Town department staff. During five

² Living Out Loud | Arlington Community Media, Inc. (acmi.tv)

brainstorming sessions, findings from the Town's survey, outreach, document review, and demographic profile assembled by the CSDRA were presented. Participants discussed challenges specific to: (1) housing; (2) transportation and outdoor space; (3) partnerships and communication; (4) community-based health supports; and (5) social participation. Attendees were then tasked with developing concrete ideas for action to serve as recommendations for Arlington's Age-Friendly Action Plan. It was crucial to the success of the age friendly initiative to obtain insight from these key community stakeholders for their expertise and knowledge, as well as for their engagement in the future implementation of the Age-Friendly Action Plan. Participants, across the five sessions, met for 2.5 hours each and contributed to structured discussions that were facilitated by research staff from the CSDRA.

The tables throughout the Action Plan outline Arlington's age and dementia friendly goals, a brief description of the action steps to be taken to achieve those goals, as well as the identification of potential partners and an estimated timeframe for completion.

Action Plan

This following section provides details of Arlington's Age-Friendly Action Plan categorized by domain. Given the vast amount of planning and activity happening in Arlington, we first document current activities that can be characterized as age-friendly, followed by referencing future plans that have already been put in place. Lastly, we present a set of action steps that will build on existing momentum and allow Arlington to continue its evolution toward a more age-friendly community. These findings are presented in the tables below.

Housing Housing

For adults to remain in their communities as they age, housing must be available, affordable, and designed to accommodate a range of physical abilities. Moreover, homeowners must be able to adequately maintain and repair their homes in order to stay in them safely. An age-friendly community provides a continuum of safe, affordable, and healthy housing options that provide the services and accessible design necessary to allow residents, regardless of income or housing type, to age in place.

In Arlington, 21% of homeowners with a mortgage (*ACS*, 2014–2019, Table S2506) and 24% of homeowners without a mortgage (*ACS*, 2014–2019, Table S2507) are "cost-burdened," spending more than 30% of their income on housing costs including mortgage payments, property taxes, home insurance, and utilities. For renters in Arlington, 38% are "cost-burdened" (*ACS*, 2014 – 2019, Table S2503). A large share of households headed by someone age 65 and older (24%) report annual incomes under \$25,000. This compares with just 6% of households headed by individuals aged 45 to 64 having incomes under \$25,000. Thus, there is a sizeable segment of Arlington's older population that is at risk of financial insecurity or economic disadvantage. A sizeable share of Arlington residents who are 65 and older and live alone also own their home (57%). The much higher number of older homeowners has implications for what amenities and services are likely to be needed and valued by members of the community. Home maintenance and supports are often necessary for older homeowners—especially those who live alone—in order to maintain comfort and safety in their homes. 14 % of respondents to the 2019 age friendly survey expressed that they are not able to take care of home and property maintenance activities.

While Arlington has been successful in creating affordable housing, there are growing challenges due to significant increases in property values and changing demographics. The cost of housing in Arlington is prohibitive for residents living on a fixed income. Arlington's Council on Aging is witnessing increasing demand, with waitlists, for subsidized housing for older adults. Arlington's older housing stock presents accessibility challenges. Many two-family homes are Philadelphia Style and lack accessibility due to interior staircases. The growing demographic of residents over the age of 65 will challenge the Town in ensuring there is capacity to accommodate these residents in the coming years. In addition to limited downsizing options and zoning that restricts new development, the quality, suitability, and accessibility of Arlington's existing housing stock should be evaluated for potential enhancements and modifications. The September, 2021 work session stressed the need for additional downsizing opportunities and home modification resources to support the safety and suitability of existing homes. Efforts are underway to create housing that offers affordability, accessibility, and supportive services to promote aging in place.

Current Age Friendly Practices in Arlington:

- In early 2021, the Town hired Barrett Planning Group, LLC, to complete the update to Arlington's 2016 Housing Production Plan. Feedback was explicitly sought regarding the housing needs of older residents.
- Arlington's Fair Housing Action Plan was completed in 2021³. The plan describes Arlington's local and regional history of housing discrimination and residential segregation and describes specific recommended actions the Town can take to ensure equitable access to housing choice.
- Arlington Housing Authority owns and operates roughly 500 units of affordable housing for older adults
 - Housing units for older adults are available in 5 developments: the Robert Hauser Memorial Building; Drake Village; Chestnut Manor; Winslow Towers; and Gerard Cusack Terrace.
- Through inclusionary zoning, a tool used to increase affordable rentals and ownership, federal funding has been directed to the nonprofit Housing Corporation of Arlington (HCA), and the Town has created over 140 low-moderate-income housing units since 2000.
- HCA develops and manages affordable rental housing. HCA currently owns 90 units of rental housing for families and small households, within two family houses and larger buildings throughout Arlington. Units vary in size from one to four bedrooms with rents starting at about \$1,000 per month⁴.
- Corcoran Jennison owns 176 subsidized independent living units at Millbrook Square for older adults.
- Sunrise Senior Living in Arlington provides market-rate assisted living, independent living, memory care, short term stays, companion living, and hospice care for older and disabled adults.
- A sixty-unit assisted living residence called Brightview recently opened at the former Symmes Hospital site.
- A warrant article to allow Accessory Dwelling Units by right passed at Town Meeting,
 Spring 2021.
- The Community Preservation Act was adopted November, 2014. Arlington's Community Preservation Fund receives approximately \$1.8 million in annual revenue from a property tax surcharge (1.5% of the net tax levy) and matching distributions from the

³ <u>Arlington Fair Action Plan (arlingtonma.gov)</u>

⁴ Housing Corporation of Arlington (housingcorparlington.org)

- Massachusetts Community Preservation Trust Fund. A portion of these funds are dedicated to the creation of affordable housing.
- Affordable Housing Trust Fund was established in 2020 to support the creation of affordable housing in Arlington.

Existing Plans that Support Age Friendly Housing in Arlington:

The following goals were established in Arlington's 2016 Housing Production Plan⁵:

- Build an aging-supportive community through housing choices that support aging in place for Arlington's residents
- Update existing housing inventory and create more diverse housing options for a range of ages and needs
- Integrate affordable units in a range of housing types within existing neighborhoods throughout Arlington. Consider redevelopment of underutilized properties and renovation of existing buildings
- Ensure zoning offers flexible approaches to build housing affordability and livability
- Increase capacity to facilitate housing production by allocating funding, staff, and other resources to related activities, and efforts to build awareness about housing needs

Arlington's 2015 Master Plan, Your Town Your Future⁶, included the following goals:

- Study and plan for increasing the supply of smaller-unit, over-55 active senior market-rate housing, and affordable, subsidized housing
- Address the quality and condition of existing housing stock and identify financial assistance programs for home modifications.
- Encourage mixed-use development that offers affordable housing close to shopping, dining, and other resources.
- Allocate resources (Community Preservation Act (CPA) funds, Community Development Block Grant (CDBG), federal housing & residential development 89 HOME funds, inclusionary zoning, local non-profit housing developers, and Townowned land) to support housing needs and meet the State's requirement for affordable housing under Chapter 40B while protecting neighborhood character.

⁵ <u>636682909463070000 (arlingtonma.gov)</u>

⁶ Master Plan | Town of Arlington (arlingtonma.gov)

Housing Action Items

Goal #1: Expand housing options in Arlington and support home modifications that promote aging in place.

| Proposed Age Friendly Action Items: | Potential Partners | Timeframe |
|--|---|-----------|
| Action Item A: Execute a land inventory of existing parcels in Arlington. Include information about ownership, size, zoning, and other parameters relevant to property development. | | Years 2-5 |
| Action Item B: Encourage developers to create housing options for downsizing. Include an evaluation of potential locations for mixed-use development. | | Years 2-5 |
| Action Item C: Promote awareness of various housing options across the lifespan. Consider hosting a housing planning seminar to encourage proactive thinking about aging in place. Invite local experts (e.g., real estate agents, contractors, disability commission members, lawyers, financial professionals) who can share their perspective about future housing options. | Planning Department | Year 1 |
| Action Item D: Increase inclusion among older adults for policy and planning decisions. Improve access to Town voting and decision-making processes re: housing. | COATown ClerkSelect BoardAffordable Housing Trust | Year 1 |
| Action Item E: Promote access to home safety evaluations and modification supports and services. Consider the provision of incentives for contractors to do pro-bono work. For example, add a sur-charge for building permits that could be used to offset costs for a small-repair program. | COA Building Department Knights of Columbus Rotary Club or fraternal organizations | Year 1 |

| Action Item F: Advocate for more flexible zoning laws that relax zoning around parks and conversion of historic homes to multip Support the implementation of an affordable housing overlay in the further promote access to housing options. | le units. • Smart Growth Alliance | Year 1 |
|--|--|-----------|
| Action Item G: Explore shared housing arrangements for older Identify best-practices for co-housing models and make public the achieve higher levels of resident education. Enlist the Senior Center estate agents to connect homeowners with residents seeking rental un Nesterly. ⁷ | esults toand realZoning Board of Appeals | Year 1 |
| Action Item H: Research and implement property tax relief opt will expand the number of positions/eligible residents who can be property tax work off or other tax relief programs. Examples include scale tax rates for older residents and public education about tax programs. | • Building Department • Sliding • Assessing Department | Years 2-5 |

⁷ https://www.nesterly.io/



Accessible and affordable transportation options are necessary for active aging. When transport is available and adapted to the needs of older adults, both in terms of access and destination, it enhances mobility and facilitates social-participation and a sense of belonging to one's community. An age-friendly community provides coordinated intra- and inter-city travel options and public transportation that is accessible to people of all abilities. According to U.S. Census data, many of Arlington's residents aged 65 and older experience some level of disability that could impact their ability to function independently in the community, and the likelihood of acquiring a disability increases with age. Close to 16% of Arlington's residents age 65 and older have one disability, and 16% report two or more disabilities. The Council on Aging recognizes the need to enhance access to transportation services. The September 2021 work session highlighted the need for increasing lighting, signage, "senior parking spots," and benches in the community.

Current Age Friendly Transportation Practices in Arlington:

- Connect Arlington⁸, a sustainable transportation plan (STP) was adopted July, 2021. The STP is a 20-year strategic plan that supports the development of a safe, equitable, reliable, multimodal transportation network across the age and ability spectrum, particularly for those who are most vulnerable in Arlington.
 - The eight strategic goal areas include: safety, mobility (including shared and micro mobility), walking, biking, public transit, sustainability, infrastructure and policies, and responsiveness and transparency.
- The Town's public engagement efforts during 2020 and early 2021 included online surveys; public forums; focus groups; an interactive online mapping tool for location specific resident feedback; and presentations to Town committees.
- The Sustainable Transportation Plan Advisory Committee is guiding implementation and consists of residents, business owners, and Town staff. Collaborative projects are underway with the MBTA, Arlington schools, and other regional partners.
- Arlington's transportation Factbook recognizes potential challenges for older adults and utilizes maps and graphics to provide a description of travel modes and travel patterns and safety issues for the existing transportation network in Arlington in the context of demographics, zoning, and topography of the Town.
- COA Transportation Services:
 - Community Development Block Grant (CDBG) funding was awarded to the COA in 2021 to address the need to provide low cost and accessible transportation services for older residents.
 - Accessible Van Service for Every Day Living is available for local errands within Arlington and to Market Basket in Burlington. The cost is \$6 round trip.

15

^{8 &}lt;u>637641174457130000 (arlingtonma.gov)</u>

- The dial a ride taxi program provides individualized routes and is supported by federal grant funding for people with disabilities and low income. The subsidized program travels anywhere in Arlington (Monday through Saturday). Registration is required; an annual membership fee of \$20.00 was waived in 2021. The cost for a one-way ticket is \$5.00. Once registered, rides are scheduled directly through the taxi company.
- Medical rides are currently free due to grant funding.
 - Accessible Van or a taxi service is available for medical appointments in Arlington and surrounding towns.
 - Support for Uber and Lyft on demand ride requests for medical appointments is available through a central online system managed by the COA.
 - Volunteer drivers with Medical Escort Service (MES) utilize their personal vehicles to transport passengers to medical appointments in Arlington and surrounding communities. Passengers are responsible for parking fees and tolls. Rides should be scheduled at least 2 weeks in advance. (Currently free due to grant funding.)
 - A 2021 grant from the Lahey Hospital & Medical Center supports free curb-to-curb transportation to medical appointments for underserved older adult populations in Arlington.
 - Free Medical Rides to Cancer related appointments in neighboring towns and Boston are funded through the Sanborn Foundation.
- Arlington is serviced by the Massachusetts Bay Transportation Authority (MBTA)
 through: The Ride; 11 bus routes; the Red Line which provides subway service between
 Alewife Station near East Arlington, Somerville, Cambridge, and Boston; and the Green
 Line Extension, expected to open in December 2021, which will provide rail connectivity
 near Arlington at the new Medford/Tufts Station.
- Residents age 65 and older can apply for a discounted MBTA Senior Charlie Card at the COA.
- To encourage residents to choose public transit over driving alone in the morning, a
 peak bus priority lane expedites bus travel approaching the congested Mass
 Ave/Alewife Brook Parkway intersection.

Bicycle Network

- The Minuteman Bikeway parallels Mass Ave and is within a five- to ten-minute walk of much of Arlington. The 10-mile pathway is used by thousands of bicyclists each day for recreation and commuting throughout Arlington, Cambridge, Lexington, and Bedford; it connects to the Red Line at Alewife and Davis Square stations.
 - The Minuteman Bikeway Visioning Project was funded by the Community Preservation Act Committee at the November 2021 Special Town Meeting and will focus on future plans for the bikeway.
- The Mystic River Path and Alewife Greenway, along the length of Arlington's eastern border, provide the only separated north-south bikeways in town.

- Arlington introduced BlueBikes, a regional bike share system operating in nearby Boston, Cambridge, Brookline, Everett, and Somerville, in 2020. There are 6 stations in Arlington and new locations are being explored.
- The Lake Street/Minuteman Bikeway Signal Project installed a new tragic signal at the intersection to direct vehicles, pedestrians, and bicycles.

Existing Plans that Support Age Friendly Transportation & Mobility in Arlington:

- Expand safe and accessible mobility options, including walkability, bicycling, for all ages, abilities, and incomes.
- All roadway design projects adhere to the Town's adopted Complete Streets policy and guidelines⁹.
- The Town actively explores opportunities to expand transportation options through grant funding and volunteerism.
- Opportunities to implement neighborhood traffic calming programs are highlighted in the Town's sustainable transportation plan, Connect Arlington.
- 2015 Open Space and Recreation Plan¹⁰ recognized growing demographic of older adults and need for more outdoor programming and activities including areas for passive reception, walking, picnicking, as well as more benches and rest areas.
- Americans with Disabilities Act (ADA) Plan updates were shared by the Master Plan Implementation Committee Report to Annual Town Meeting April 26, 2021
 - Self-Evaluation and Transition Plan was completed in June 2020 utilizing Community Development Block Grant and Massachusetts Office on Disability planning grant funds.
 - The Town hired the Institute for Human Centered Design in 2019 to survey 27 public buildings including four public safety buildings, 12 public school facilities, two libraries, two facilities managed by the Arlington Redevelopment Board, one cemetery building, one Recreation Department facility, and five Town-owned buildings.
 - The prioritization plan was completed with input from various Town departments as well as the Disability Commission. The Town allocated annual funding in the five-year Capital Plan to remove architectural barriers and address accessibility issues.

,50 111 10500000 (

⁹ Microsoft Word - CS Policy and Guidelines final (1).doc (arlingtonma.gov)

¹⁰ 635805041146500000 (arlingtonma.gov)

Transportation & Mobility Action Items

| Goal #1: Enhance existing transportation options | | |
|--|---|------------|
| Proposed Age Friendly Action Items: | Potential Partners: | Timeframe: |
| Action Item A: Offer "travel training" events for residents to familiarize themselves with transportation options in Arlington. Consider the development of Rider-training on MTBA/the Ride. Consider AARP safe driver training. ¹¹ | COAThe RIDEMBTA/regional transitAARP | Year 1 |
| Action Item B: Engage the Town to explore options for using existing Town-owned vehicles. Explore grants to purchase a sedan/electric vehicle so that a "Town car" can be used for rides | • COA | Year 1 |
| Action Item C: Raise funds for a ride subsidy account. Host an Arlington for All Ages "Walk" or a raffle at the local car show. | COASchool Committee | Years 2-5 |
| Action Item D: Promote safe walkability by eliminating bricks to create a consistent asphalt sidewalk network throughout town | Planning Department Historic Commission | Years 2-5 |
| Action Item E: Promote safe bicycling by enforcement speed limits along commuter trails. Explore technology solutions that encourage rider adherence to traffic rules. | Town of Arlington Police Department Bicycle Advisory Committee | Year 1 |

¹¹ https://www.aarpdriversafety.org

Goal #2: Promote ride-sharing services and volunteer transportation opportunities.

| Proposed Age Friendly Action Items: | Potential Partners | Timeframe |
|--|--|-----------|
| Action Item A: Increase awareness and advocate for the use of ondemand ride services through funding and educational workshops. Host information sessions and develop directory of ride sharing services such as Uber ¹² and GoGoGrandparent. ¹³ | COALibrary | Year 1 |
| Action Item B: Develop a volunteer driver program to assist those who are unable to drive. Consider offering a volunteer driver position as a property tax work-off position. Consider the creation of a regional volunteer driver pool—engage area COAs to develop. Target volunteer driver recruitment to parent groups, faith groups, or young professionals to fill in the demand for evening and weekend rides. | COA School Committee Faith Community Veterans Affairs | Year 1 |
| Action Item C: Promote carpooling and alternative transportation options to reduce traffic. Sponsor a "One Less Car" day in Arlington as a way of tapping into a shared frustration resulting from traffic and unpredictable travel times. | COA Town of Arlington Police Department | Year 1 |

^{12 7} www.uberhealth.com

¹³ https://gogograndparent.com

| Goal #3: Address ways to Contribute to the Physical Environment | | |
|---|--|------------|
| Proposed Age-friendly Action Items: | Potential Partners: | Timeframe: |
| Action Item A: Increase parking options near senior housing, the community center, and resources. Support the organization of residents who can lobby for resident parking stickers. Consider parking spots designated for older adults and people with mobility limitations. | COAPublic WorksDisability Commission | Years 2-5 |
| Action Item B: Advocate for revision of Arlington's snow removal policy. Host public information sessions to build awareness and explore potential solutions. Recognize businesses that do a good job at keeping their sidewalks clear with a "Golden Shovel Award" ¹⁴ to promote snow removal policies. | Public WorksChamber of Commerce | Year 1 |
| Action Item C: Increase features that promote safety, accessibility, and comfort in outdoor spaces. Consider the installation of additional seating, lighting, signage, and accessible pedestrian signals. | Public WorksDisabilityCommission | Years 2-5 |

 $^{^{14}\}underline{\text{https://www.aarp.org/livable-communities/livable-in-action/info-2018/wwl-golden-shovel-award-bucksport-maine.htm}$

Community Supports & Health Services

An age-friendly community offers a continuum of services and supports to meet the health and social needs of its older adult population. Community supports include access to health services like home health care or access to hospitals and doctors; but also, to services like nutritious food, opportunities for physical activity and caregiver support services that enable older residents to age securely in the residence of their choosing.

A sizeable share of Arlington residents who are 65 and older and live alone, also own their home (57%). The much higher number of older homeowners has implications for what amenities and services are likely to be needed and valued by members of the community. The Town of Arlington recognizes that the availability and funding of supportive services are critical to promoting health and independence within the community. In addition to the resources available at the Senior Center, Arlington residents can access a spectrum of supportive programs through Minuteman Senior Services. While many valued supports and services exist, several evaluative outreach efforts have revealed that there is an opportunity to expand upon supportive services and a need to compile and communicate available resources for increased access among residents.

- The 2019 age friendly survey revealed that 35% of respondents do not know whom to contact if someone in their family needs to access supportive services.
- Nearly 25% of survey respondents age 55-74 expressed dissatisfaction with services that help in finding access to health and social services.
- The June 2021 Housing Plan community forum raised the need for supportive services that facilitate aging in place.
- The September 2021 work session highlighted the need to expand resources for caregivers and residents living with dementia.

Current Age-friendly Community Supports & Health Service Practices in Arlington:

- The Council on Aging (COA) is located in Arlington's newly renovated and accessible Community Center. Construction of the \$8.1 million project began in March 2020 and the Capital Campaign mailing has partially funded furnishings and technology for the new space.
- The mission of the COA is to provide advocacy, support services, and programs to help older residents of Arlington live dignified and independent lives. The Council's primary responsibilities are to design, promote, and implement services to address the identified needs of the community's age 60 and older population and to coordinate existing services in the community.
- Support groups offered by the COA:

- Caregiver Support Group; Low Vision Group; Declutter Group; Bereavement Group, Parkinson's Group; Memory Café for individuals with memory loss and their caregivers.
- Health supports offered by the COA:
 - Nursing services, blood pressure clinic, podiatry clinics, and a medical equipment loaner program.
 - 2021 CDBG grant funding provides a subsidy to low-income families for adult day health services.
 - The COA, collaborating with Cooperative Elder Services, identifies older adults and families that can benefit from day programs that include nursing and health care services, meals, and other social programs for individuals with medical or cognitive challenges.
- Financial Assistance, Health Insurance, and Legal Advisor Services offered by the COA:
 - Financial Assistance Programs are available for older adults to help pay for dental cleanings, personal needs, and property taxes.
 - Heat Assistance for qualified residents
 - Serving the Health Insurance Needs of Everyone (SHINE) Counselors respond to questions about Medicare and health insurance.
 - Legal Advisor, Financial Planning, and Long-Term Care Insurance Counseling services are available
- Nutrition support programs available in Arlington:
 - Meals on Wheels
 - SNAP (the COA is a SNAP application site)
 - The COA partners with: Arlington Eats Market food pantry; Foodlink, a food rescue and distribution organization; Lahey Hospital's Eat Fresh Program; and The Greater Boston Food Bank. Free rides to Arlington Eats are available through COA van.
 - Neighbors Eating All Together (NEAT) is a non-denominational, volunteer based non-profit offering an inclusive and welcoming place for meals.
- (Linking Neighborhood Kids with Senior Citizens (LINKS) Program for light snow removal by students

Dementia Friendly Initiative

- Dementia Friends Training has been completed by members of Town staff and other Arlington.
- The COA is working closely with first responders to promote additional training through the program Understand, Approach & Respond: Effective Interventions for First Responders in Working with People and Families Living with Dementia.
- Grant funding was awarded to support Dementia Friendly efforts through *I'm Still Here Foundation*. Grant funding of \$7,800 will support virtual exercise classes from August 2021 to July 2022 for those with dementia and their caregivers. Funding also supports training for instructors on dementia related topics.

- COA social workers support older adults and caregivers through several programs
 including Adult Day Health and a Memory café at Brightview Senior Living. The memory
 café provides a safe and engaging environment for individuals with memory loss and
 their caregivers each month.
- The COA and Robbins Library are collaborating to support residents and families living with dementia. Planning is underway to:
 - Add supportive programs such as Tales & Travel Memories (talesandtravelmemories.com)
 - Offer memory kits through the library
 - Hold dementia training for library staff

Existing Plans that Support Age-friendly Community Supports & Health Services in Arlington:

 The COA continues to build collaborative relationships with the Town's Department of Health and Human Services, Minuteman Senior Services, and the Visiting Nurse Association (VNA) to strengthen the network of Community Supports and Health Services.

With a pledge made to become a MCOA dementia friendly designated community in 2019, the Town continues to build awareness and expand services to meet the needs of residents living with dementia, and their caregivers.

Community Supports & Health Services

Goal #1: Explore the expansion of home and community-based services to support aging in place and dementia friendly practices.

| Proposed Age-friendly Action Items: | Potential Partners | Timeframe |
|---|---|-----------|
| Action Item A: Increase awareness of aging in place resources. Connect residents with a resource guide and host an informational forum to inform older residents of financial, home improvement, health, and convenience resources available. Create a therapeutic map highlighting the network of healthcare and other providers. | COAAARPMCOAMinuteman Senior Services | Year 1 |
| Action Item B: Explore the expansion of health and wellness services for older adult residents. Pursue partnerships between local health sciences degree students and the Visiting Nurses Association to increase support services. | COAVNALocal schools, healthcare related degrees | Year 1 |
| Action Item C: Encourage local businesses to take-on more "age-friendly" practices. Work with local businesses and organizations to offer a senior discount and expand services, including legal and financial consulting, to meet the needs of older residents. Consider Arlington Community Education for legal and estate planning services. | COAChamber of Commerce | Year 1 |
| Action Item D: Build educational opportunities and resources to increase awareness and supports for people living with dementia and their caregivers. Target medical providers and business owners to host training and offer resources to the community. Consider a resource guidebook for newly diagnosed families. | COALibraryChamber of Commerce | Year 1 |

| Action Item E: Identify existing home safety concerns and facilitate access | • COA | Years 2-5 |
|---|---|-----------|
| to home assessments, service providers, and funding for home | • Community Development | |
| modifications and home care services. Compile a vetted directory of | Block Grant Funds | |
| affordable handyman services and consider expansion of LINKS program for | Knights of Columbus | |
| high school students to support home maintenance. | • Habitat for Humanity | |
| | Arlington High School | |
| | i i i i i gir s en e e | |

Social Participation & Inclusion

An age-friendly community offers recreational programs, historical and cultural activities, and events that encourage social participation of residents and facilitate healthy aging. Improving the inclusion of older adults offers engagement opportunities for those who are at risk for social isolation. According to the ACS (2014-2019), A large proportion of Arlington residents who are age 65 and older (35%) live alone in their household whereas 63% live in households that include other people, such as a spouse, parents, children, or grandchildren. At a time when Arlington- and the rest of the world - is aging and diversifying, it is critical to identify opportunities to integrate older residents of allusing backgrounds into activities and communities in a meaningful way, both to prevent social isolation and its deleterious effects as well as to combat ageism through positive messaging about aging. During the 2019 age friendly focus group session the need for gathering spaces was highlighted, in part due to recent development in town that has replaced some of the former sites for social connection. The focus group also recognized isolation and maintaining a sense of purpose as growing concerns. During the 2021 work session language barriers were acknowledged as a risk factor for isolation and the need to provide resources and support for those living with dementia was recognized. Living with dementia impacts a person's ability to participate in the community and feel connected. In addition, the condition of dementia impacts families, friends, and neighbors---and therefore it is an important aspect of aging in community. Arlington's Dementia Friendly initiative will guide efforts to support approximately 13% of Arlington residents who are living with dementia. 15 While the Arlington Community Center, Library, and Recreation Department offer a wide range of programming, the 2021 work session stressed the need for increased coordination among providers and improved communication for residents to increasingly access available programming.

Current Age-friendly Practices in Arlington:

• COA Programming

- Fitness classes are offered at various levels and include virtual exercise, chair yoga, muscle strengthening, outdoor walking club and Tai Chi.
- COA partners with the non-profit Arlington Seniors Association to offer activities such as movies, lectures, discussion groups, games, computer help, and cultural events.
- The Master Plan highlights civic connections that promote social interaction. The list
 includes open spaces that link neighborhoods, thriving business districts, live and work
 opportunities, cultural and recreational resources, and a walkable public realm.
- Arlington's historic civic spaces are beloved community institutions that serve as both visual landmarks and cultural gathering spaces. While preserving these cultural gathering spaces is a priority for the Town of Arlington, several historic sites need longterm maintenance programs to ensure safety and accessibility.

¹⁵ https://mahealthyagingcollaborative.org/wp-content/themes/mhac/pdf/community_profiles/MA_Towncode10_Arlington.pdf

- Several organizations, including The Commission for Arts & Culture, are devoted to cultural production and appreciation and many residents work in the fine and performing arts.
- Arlington's Capitol Theatre and the Regent Theatre in Arlington Center draw approximately 200,000 patrons per year.
- Arlington's commercial districts offer opportunities for working, shopping, and visiting
- MCOA Dementia Friendly initiative: Designation as a Dementia Friendly Community in process.
- Activities funded by CDBG serve primarily low-to moderate-income individuals and households, in addition to older adults and persons with disabilities. As an entitlement community, Arlington has received CDBG funds for 46 years and is preparing for the start of its 47th year as a recipient community on July 1, 2021.
- 2021 Open Space and Recreation Plan was developed:
 - An intergenerational bocce park with games.
 - Through a MassDOT Shared Streets and Spaces grant, three public parklets and other public space improvements were installed in Arlington in 2020. A section of Park Terrace was closed to vehicle traffic to accommodate an outdoor seating area. Due to frequent usage, the parklet is undergoing upgrades that include decking, new furniture, and plantings.
 - o ADA Improvements Across Recreation Facilities.
 - The Take A Walk project encourages residents to explore Arlington's diverse parks and recreational facilities through seven suggested and overlapping walking routes across town.
- Town Committees dedicated to ensuring that Arlington is an inclusive and welcoming community include:
 - Arlington Seniors Association promotes the quality of life of Arlington older adults through the development of educational, recreational and social activities.
 - Envision Arlington's Diversity Task fosters awareness, and action on diversity issues to creating inclusive and safe spaces where all voices are welcome.
 - The LGBTQIA+ Rainbow Commission promotes equality-affirming policies and brings greater visibility and empowerment to the LGBTQIA+ population through education, advocacy, and collaboration with other Town agencies, schools, and community groups.
 - The Arlington Cultural Council supports public programs in the community that promote access, education, diversity, and excellence in the arts, humanities and the interpretive sciences.
 - The Human Rights Commission exists to advance issues related to the fair and equal treatment of Town residents and to address complaints arising out of these issues.

Existing Plans that Support an Age-friendly Arlington:

- The COA is dedicated to increasing targeted outreach to ensure inclusion and communication for older adults who are not currently accessing resources and social events.
- Collaborative community-based initiatives are underway, guided by several Town Committees dedicated to building inclusion.
- Resources to address language barriers continue to develop at the COA, and Library.

Social Participation & Inclusion Action Items

Goal #1: Engage adults age 55 and older in existing programs and develop new offerings to promote learning and wellness.

| Proposed Age-friendly Action Items: | Potential Partners | Timeframe |
|--|---|-----------|
| Action Item A: Increase access to off-site programs, entertainment, or trips through partnerships. For example, host coffee with an author at a local coffee shop or a 60+ employment workshop at the library. | COALibraryChamber of Commerce | Year 1 |
| Action Item B: Increase lifelong learning opportunities ¹⁶ . Invite representatives from local lifelong learning institutes to inform Arlington residents about these programs as well as free online courses. Consider organizing a club for older adults to communicate about coursework. | • COA | Year 1 |
| Action Item C: Increase programming and events for caregivers. Host events to provide information about aging services and caregiver support resources while offering opportunities for social engagement. See Plymouth County's "Caregiver Night Out". 17 | • COA • MCOA | Year 1 |

¹⁶ https://www.umb.edu/olli and https://harvardx.harvard.edu

¹⁷ http://www.prworkzone.com/old-colony-elder-services-treats-caregivers-to-a-special-%E2%80%9Ccaregiver-night-out%E2%80%9D

Goal #2: Promote the accessibility of existing social programs to include and attract residents age 55 and older.

| Proposed Age-friendly Action Items: | Potential Partners: | Timefra me: |
|--|--|----------------|
| Action Item A: Increase multigenerational engagement opportunities. Collaborate with schools to consider the development of a "gold card" program which provides older adults access to school theater, musical, and athletic events. See Commack School District in NY ¹⁸ as an example. and Generations United ¹⁹ which offers many resources for developing other types of intergenerational programming. | COASchool Committee | Year 1 |
| Action Item B: Broaden existing programming to include the interests and preferences of this wide age group. Encourage local organizations to offer a mix of day and evening programs on topics to attract residents age 55 and older including speed-dating, cooking classes, wine tasting, book-signings, or meditation classes. Build awareness of existing programming available at the Senior Center, Library, and Recreation department and incorporate additional intergenerational features. | • COA | Year 1 |

¹⁸ http://www.commackschools.org/seniorcitizens.aspx

¹⁹ https://www.gu.org/what-we-do/programs/

Goal #3: Increase opportunities to promote mutual respect and relationships across generations

| Proposed Age-friendly Action Items: | Potential Partners: | Timefra me: |
|---|--|----------------|
| Action Item A: Collaborate with Town Staff and local service providers to identify vulnerable residents and those at risk for isolation. Consider a series of classes or materials that educate residents about Town department offerings and other supportive resources. | COA Health and Human Services Veterans Affairs Town of Arlington Police and Fire departments VNA | Year 1 |
| Action Item B: Build awareness to prevent bullying and ageism. Implement training and education town wide. Convene intergenerational community conversations about ageism using recently developed campaigns to spark discussion and consider projects such as a photo exhibit that highlight and build respect for older adults. | COASchool Committee | Years 2-5 |
| Action Item C: Build awareness of Arlington's Dementia Friendly designation and promote dementia-friendly practices. Host a "Dementia-Friendly Forum" to educate residents and businesses about dementia-friendly practices and resources. Contact advocates at Dementia Friendly Massachusetts ²⁰ to arrange a presentation. Include resources like Purple Table ²¹ and Dementia Friendly Business Training. | COAMCOADementia Friendly MAPurple Table | Years 2-5 |

²⁰ http://www.dfamerica.org/business-training

https://www.purpletables.com

| Action Item E: Consider developing a volunteer respite program in | • COA | Year 1 |
|---|---------------------------|--------|
| Arlington to support caregivers. | • MCOA | |
| | • Local faith communities | |
| | | |
| | | |
| | | |

Communication & Partnerships

An age-friendly community offers multiple channels for communicating information across language barriers about emergencies, resources, services, and events. This is achieved through the continued use of electronic media, as well as the targeted preservation of printed communication materials as an important component to making information available to the community. During the COA's 2019 age friendly focus group and the September 2021 work group sessions, communication was recognized as a challenge for older adults in Arlington. Virtual programming and access to online resources have been increasingly valued since the start of the pandemic; however, many older adults do not have access to computers or the internet. There is an opportunity to improve access to technology while also developing consistent and equitable access to traditional communication channels.

Current Age-friendly Practices in Arlington:

- The COA offers a monthly newsletter, *Arlington 60+ News*, that communicates (in print and electronic) about the programs and services being facilitated by the Arlington Senior Center.
- Arlington Community Media offers multiple programming opportunities and workshops. The COA Director hosts "60+ Connection", an ongoing video series.
- Arlington Advocate, the local community newspaper, is available by subscription.
- The Town of Arlington has a Communications Director. In October 2020 the Town website (arlingtonma.gov) was updated to streamline content and improve accessibility through increased font size and higher color contrast.
- In January 2021 the Town conducted a Website and Communications Survey to measure community satisfaction with the recent website update, regular online communications, and crisis communications during the pandemic.
- The COA operates a "Technology Loan Library" program that offers Chromebooks and wireless hot spots to any resident age 60+
- The Town of Arlington's Communication Center is available through the "Connect" section of the Town's website. Content includes:
 - Current news
 - A categorized Town meeting calendar
 - A request and answer center and Arlington Alerts for information and emergency information
 - Subscription to email distributed by the Town
 - Community Conversations featuring topics related to housing, outdoor space, and events
 - Town Hall video updates with Town Manager, Adam Chapdelaine (weekly during COVID)

- Monthly video updates on police initiatives and activities with Arlington's Police Chief, Julie Flaherty
- A list of Town departments and committees with their respective Facebook and twitter information is available on the Town website. These links increase access to information related to Town governance and ongoing initiatives and events; and provide a vehicle for residents to share and discuss issues

Existing Plans that Support an Age-friendly Arlington:

- Through the Disability Commission and other efforts to promote inclusion, efforts throughout Arlington to address communication barriers due to language; vision and hearing loss; and limited access to technology
- Build access to information among older adults through COA grant funding for technology support and equipment
- Increase remote participation in public meetings. Arlington's Remote Participation Study Committee is exploring options and requirements for providing video-conferencing or other technology.

Communication & Information Action Items

Goal #1: Create multi-media information channels and enhance existing communication mechanisms for town-wide information distribution.

| Proposed Age-friendly Action Items: | Potential Partners | Timeframe |
|---|---|-----------|
| Action Item A: Address communication challenges associated with language barriers, vison and hearing loss. Consider increased translator services; a language line subscription; partnerships through the library and schools; and multiple language selections for the town website and other distributed resources such as the COA newsletter. | COA Health and Human Services Disabilities Commission Communications Director Schools Library Housing Authority | Year 1 |
| Action Item B: Explore ways to expand accessibility to print based media. Consider an annual mailing of the COA newsletter to residents 60+ and increase circulation at local businesses. Explore media grant opportunities, such as those offered by the Knight Foundation ²² , to increase print communication and distribution of the Arlington Advocate. | Town staff Chamber of Commerce | Years 2-5 |
| Action Item C: Create a town-wide email database for residents 55 and older. Determine a mechanism to share information and guide them to online and traditional information channels. | | Years 2-5 |
| Action Item D: Consider additional channels for in person outreach. Host a resource fair that celebrates the opening of the Community Center and informs residents of age friendly planning efforts and aging in place resources. | | Year 1 |

²² https://knightfoundation.org

| Action Item E: Convene quarterly social and human services providers in the | • COA | Year 1 |
|--|------------------------------|--------|
| Town for networking events to improve cross-organizational communication and | • Town Staff | |
| reduce duplicated efforts. | • Minuteman Senior Services | |
| | • Local faith communities | |
| | • Local health and home care | |
| | provider organizations | |
| | • Boards/Committees | |
| | | |

Goal #2: Foster creative partnerships to improve equitable access to existing communication channels.

| Proposed Age-friendly Action Items: | Potential Partners: | Timeframe |
|---|---|-----------|
| Action Item A: Educate residents of all ages about the importance of Livable Community Initiatives. Host promotional events and exhibits through committees, organizations, and businesses in Arlington. | COALibraryTown CommitteesChamber of Commerce | Year 1 |
| Action Item B: Build technology support for older adults to access online information and programming. Offer opportunities for peer to peer and intergenerational technology training. | COALibraryArlington High School | Year 1 |
| Action Item C: Expand utilization of MySeniorCenter data. Learn more about the available data in MySeniorCenter (e.g., a management software used by senior centers) and determine ways to compare Senior Center utilization data with the Town census to identify non-users and target outreach materials. | COATown Clerk | Year 1 |

Conclusion

The vision of the Age Friendly Arlington Initiative is to inspire change in the Town of Arlington so that residents of all ages and abilities can thrive. The success of this initiative is dependent on the involvement of a dedicated and passionate group of residents and stakeholders that will proactively spearhead this age-friendly effort. These individuals will actively collaborate with civic, business and non-profit organizations, as well as state and local government officials to heighten awareness of the age-friendly movement and implementation of the action items outlined in this report—all to spur positive change for the Town of Arlington. This report signifies a milestone in the continued efforts and calls for community involvement in the age-friendly process to improve the quality of life for Arlington residents across generations.

Appendix A. Results: Demographic Profile of Arlington

Age Structure and Population Growth

According to American Community Survey (ACS), there were about 45,304 residents living in the Town of Arlington in 2019. About 37% of the population (16,954 individuals) were age 50 and older (See **Table 1**). Residents who were age 50 to 59 (6,269 individuals) made up 14% of the population; residents aged 60 to 79 (8,612 individuals) comprised around 19%, and another 2,073 residents (5%) were age 80 and older.

Table 1. Number and percentage distribution of Arlington's population by age category, 2019

| Age Category | Number | Percentage |
|------------------|--------|------------|
| Under age 18 | 9,654 | 21% |
| Age 18 to 49 | 18,696 | 41% |
| Age 50 to 59 | 6,269 | 14% |
| Age 60 to 79 | 8,612 | 19% |
| Age 80 and older | 2,073 | 5% |
| Total | 45,304 | 100% |

Source: American Community Survey, 2014-2019 Table B01001. Numbers are calculated from 5-year survey estimates.

The share of Arlington population age 50 and older is similar than the overall state of Massachusetts (**Figure 2**). About 37% of the Massachusetts population was in the 50+ age group in 2019, compared to 38% of the Arlington population. Compared to the Commonwealth, the portion of Arlington residents age 60 and older is very similar. In 2019, Massachusetts residents age 60 and over comprised about 23% of the population, including 4% age 80 and over. In Arlington, about 24% of the population was 60 or older, including 5% who were 80 years or older.

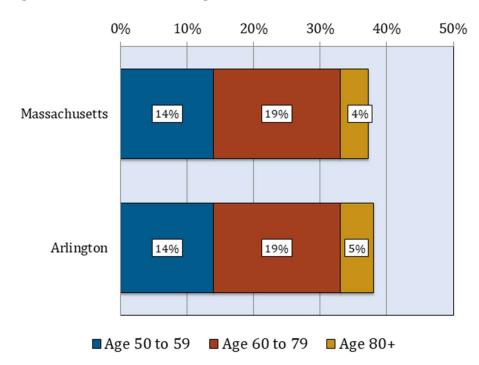
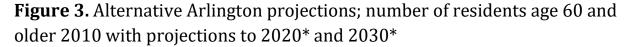


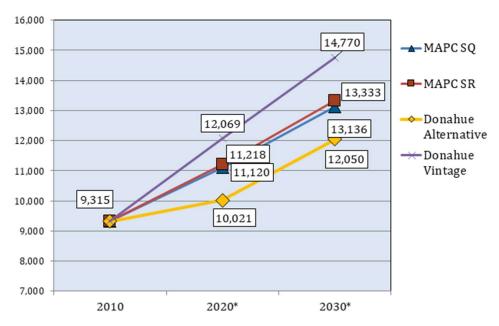
Figure 2. Age distribution in Arlington and Massachusetts

Source: American Community Survey, 2014-2019, Table B01001. Numbers are calculated from 5-year survey estimates

Population growth in both Massachusetts and the Town of Arlington has been concentrated in older age groups. During 2000 and 2010, population of all ages increased by 1% in Arlington compared to 3% in the state as whole. However, in both Arlington and Massachusetts, the absolute numbers of residents age 50 and over also grew substantially during this time period (*US Census, Table QT-P1*). The segment of Arlington's population age 50 to 59 increased in size by 24%, a rate of growth lower than in Massachusetts overall (29%). The population of residents who are age 60 and older increased by 5% in Arlington, compared to a 16% increase for the state.

The increments in the share of older population are projected to continue in the following decades. **Figure 3** shows four sets of projections for Arlington population age 60 and over. Two sets are generated by the Donahue Institute at the University of Massachusetts, and two by the Metropolitan Area Planning Council (MAPC). All of them suggest steady increments in the share of older population between 2010 and 2030.



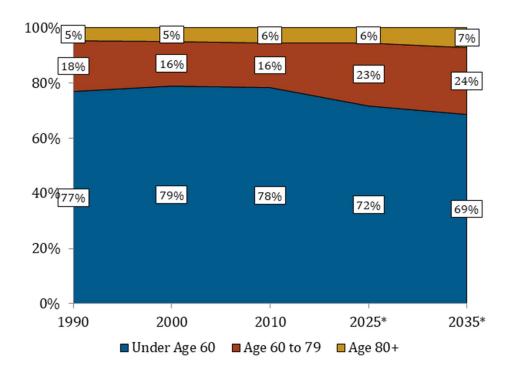


Source: Population figures for 2010 are from the U.S. Census.

Figure 4 shows the age distribution of Arlington's population from 1990 to 2010, and population projections for 2025 and 2035¹. In 1990, about 23% of the Town's population was age 60 and older; this percentage decreased by 2000 (21%) and stayed the same by 2010 (21%). According to projections created by the Donahue Institute at the University of Massachusetts, a trend toward an older population is expected in future decades. Donahue Institute vintage projections suggest that by 2035, almost one out of each three Arlington's residents will be age 60 or older—24% of the Town's population will be between the ages of 60 and 79, with an additional 7% age 80 and older.

^{*} The four sets of projections for 2020 and 2030 are from two different sources: 1. Donahue Alternative and Vintage projections are estimated by the Donahue Institute, University of Massachusetts http://pep.donahue-institute.org/ 2. MAPC Status Quo (SQ) and Stronger Region (SR) Scenarios projections are prepared by the Metropolitan Area Planning Council https://www.mapc.org/learn/projections/

Figure 4. Population trends; age distribution of Arlington residents under age 60, age 60-79, and age 80 and older, 1990 to 2010 with projections to 2025* and 2035*



Source: Population figures for 1990 thru 2010 are from the U.S. Census.

Socio-Demographic Composition of Arlington's Older Population

Arlington is more diverse than the state with respect to race. For all ages combined, about 76% of Arlington residents report their race as White non-Hispanic, compared to 72% in Massachusetts (*ACS*, 2014-2019, Table B01001). However, among older adults, Arlington is less diverse. **Table 2** displays the race and ethnicity of Arlington residents aged 65 and older. The large majority of older residents report White race and ethnicity (93%). The remaining percentage of the population 65 and older reported Asian (5%) and Black (1%). Less than 1% report other race and ethnicity and 2% reported Hispanic race and ethnicity.

^{*} Figures for 2025 and 2035 are the Vintage Population Projections generated by the Donahue Institute, University of Massachusetts: http://pep.donahue-institute.org/

Table 2. Race distribution of residents who are age 65 and older in Arlington

| Race | Number | Percent |
|----------|--------|---------|
| White | 7073 | 93% |
| Asian | 412 | 5% |
| Black | 61 | 1% |
| Other | 34 | <1% |
| Total | 7,580 | 100% |
| Hispanic | 112 | 2% |

Source: American Community Survey, 2014-2019, Tables B01001A-I. Numbers are calculated from 5-year survey estimates.

Additionally, almost 16% of older Arlington residents speak a language other than English at home (*ACS, 2014-2019, Table B16004*). Those who speak another language other than English at home most commonly speak other Indo-European languages (11%) followed by an additional 4% who speak an Asian and Pacific Island languages. Additional Arlington residents who speak a language other than English speak Spanish or other language.

A majority of Arlington's 19,065 households have householders who are middle-aged or older. According to the U.S. Census Bureau, a "householder" is the person reported as the head of household, typically the person in whose name the home is owned or rented. Residents aged 45 and older are householders of 63% of all households in Arlington² including 27% of those who are age 65 and over (**Figure 5**).

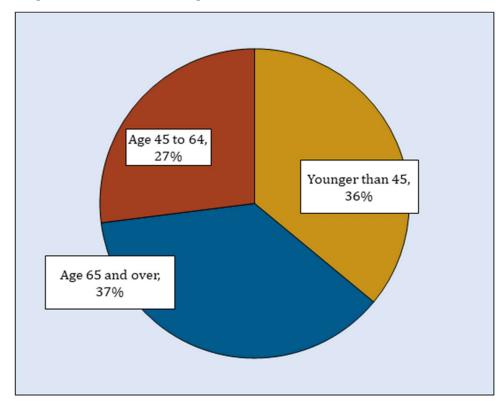
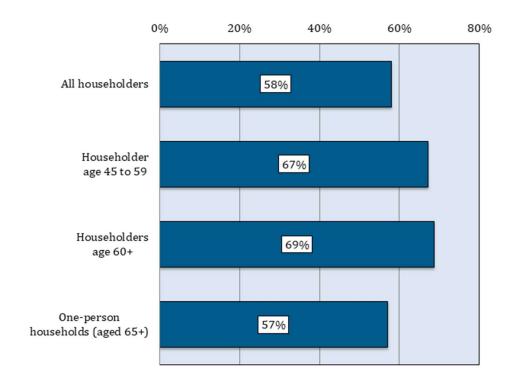


Figure 5. Age structure of Arlington householders

Source: American Community Survey, 2014-2019, Table B25007. Numbers are calculated from 5-year survey estimates.

Most of all Arlington residents live in homes that they own or are purchasing (58%; **Figure 6**). Nearly 67% of residents aged 45 to 64 own their homes, and 69% of householders 65 and older own their homes. A sizeable share of Arlington residents who are 65 and older and live alone, also own their home (57%). The much higher number of older homeowners has implications for what amenities and services are likely to be needed and valued by members of the community. Home maintenance and supports are often necessary for older homeowners—especially those who live alone—in order to maintain comfort and safety in their homes.

Figure 6. Percent of Arlington householders who are homeowners by age category



Source: American Community Survey, 2014-2019, Tables B25007 and B25011. Numbers are calculated from 5-year survey estimates.

Additionally, 41% of Arlington's 19,065 households have at least one individual who is age 60 or older (*ACS 2014-2019, Table B11006*). This high proportion— which is likely to increase in the future— generally reflects the widespread demand for programs, services, and other considerations that address aging-related concerns, including health and caregiving needs, transportation options, and safe home environments.

Among the 20,207 housing structures in Arlington (**Figure 7**), 44% are single unit structures and the remaining #% are housing structures that contain two or more housing units, which include apartment complexes.

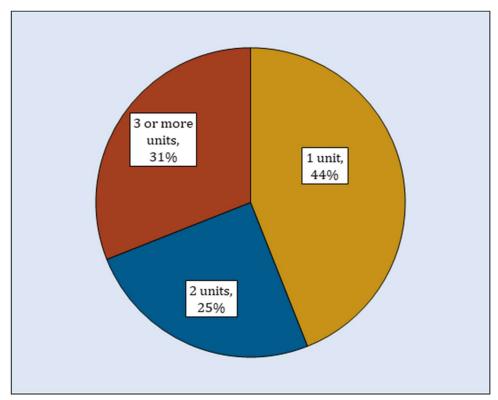


Figure 7. Number of units in Arlington housing structures

Source: American Community Survey, 2014-2019, Table B25024. Numbers are calculated from 5-year survey estimates.

A large proportion of Arlington residents who are age 65 and older (35%) live alone in their household whereas 63% live in households that include other people, such as a spouse, parents, children, or grandchildren (**Figure 8**). Additionally, around 2% of older Arlington residents live within group quarters.

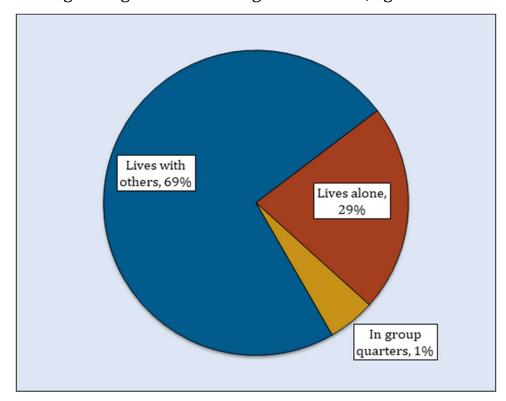


Figure 8. Living arrangements of Arlington residents, age 65 and older

Source: American Community Survey, 2014-2019, Table B09020. Numbers are calculated from 5-year survey estimates.

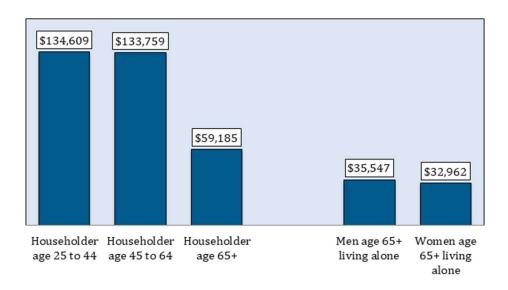
American Community Survey estimates on education suggest that Arlington residents are well educated on average. About 51% of persons 65 and older have either at least a bachelor's degree. Among the 3,860 adults age 65 and over with at least a bachelor's degree more than half also have graduate education (54%; *ACS*, *2014-2019*, *Table B15001*). This educational profile contributes to the vitality and character of the community, which depends on older adults who value opportunities to be involved through volunteer and civic engagement activities, as well as late-life learning opportunities— activities that are often present in highly educated communities (Fitzgerald & Caro, 2014).

Similar to older adults living in communities throughout the U.S., a large proportion of Arlington residents aged 65 and over remain in the workforce. Almost 39% of adults aged 64 to 74 are participating in the labor force. Of those age 75 and older, nearly 8% remain in the workforce (*ACS*, 2014-2019, *Table S2301*).

Nearly 31% of men aged 65 and older report veteran status (*ACS, 2014-2019, Table B21001*). As a result, many of Arlington's older residents may be eligible to receive some benefits and program services based on their military service or that of their spouses.

With respect to household income, there is some comparative disadvantage for some older residents in Arlington (**Figure 9**). Arlington residents' median household income is considerably higher than Massachusetts as a whole: \$108,389 compared to \$81,215. Among Arlington's householders those aged 45 to 64 have the highest median income at \$133,759—which is also greater than the statewide median for this age group (\$100,386). Among householders 65 and older, the median income is \$59,185, also higher than the statewide median for this age group (\$50,475), and much lower than the median income of younger Arlington householders. Older residents living alone are at the greatest disadvantage in terms of household income, especially women. Older men living alone in Arlington have higher median income (\$35,547) than women (\$32,962). Given that about 35% of older residents aged 65 and older live alone in Arlington, these figures suggest that a sizeable number of residents are at risk of economic insecurity.

Figure 9. Median household income in Arlington by age and living situation of householder (in 2019 inflation-adjusted dollars)



Source: American Community Survey, 2014-2019, Tables B19049 and B19215. Numbers are calculated from 5-year survey estimates.

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

The economic profile of older Arlington residents relative to younger residents is further illustrated in **Figure 10**, which shows that the older adult population lives on a modest income. Around27% of Arlington residents aged 65 and older report incomes of \$100,000 or more. By comparison, 63% of households headed by younger residents report this level of income. Nevertheless, a large share of households headed by someone age 65 and older (24%) report annual incomes under \$25,000. This compares with just 6% of households headed by individuals aged 45 to 64 having incomes under \$25,000. Thus, there is a

sizeable segment of Arlington's older population that is at risk of financial insecurity or economic disadvantage.

Figure 10. Household income distribution in Arlington by age of householder (in 2019 inflation-adjusted dollars)

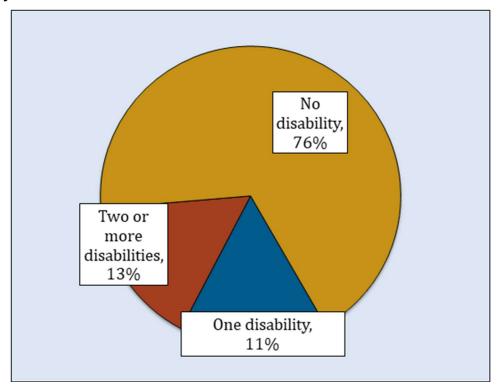


Source: Source: American Community Survey, 2014-2019, Table B19037. Numbers are calculated from 5-year survey estimates.

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

The increased likelihood of acquiring disability with age is evident in data from the ACS. Many Arlington's residents age 65 and older experience some level of disability that could impact their ability to function independently in the community. About 16% of Arlington's residents age 65 and older have one disability, and 16% report two or more disabilities (**Figure 11**). Among the different types of disability that are assessed in ACS, the most commonly cited by older Arlington residents 65 and over were ambulatory difficulties-difficulty walking or climbing stairs- (18%), independent living limitations-difficulty doing errands alone, such as visiting a doctor's office or shopping- (13%), and hearing problems (13%; ACS 2014-2019, Table S1810). Other disabilities experienced by older Arlington residents include cognitive difficulty (7%), self-care difficulties (5%), and vision difficulties (5%).

Figure 11. Percentage of Arlington residents age 65+ reporting at least one disability



Source: U.S. Census Bureau; American Community Survey, 2014-2019, Table C18108.

Percentages by age group do not sum to 100% because people may report multiple difficulties and do not include those with no difficulties assessed by the ACS.

Appendix B. Document Review

Documents included in Arlington Document Review

- Sustainable Transportation Plan Connect Arlington, July 2021
- Arlington's Fair Housing Action Plan, 2021
- ADA Self-Evaluation and Transition Plan, June 2020
- Council on Aging, Age Friendly Survey, 2019
- Community-Wide Historic Preservation Survey Master Plan, 2019
- Housing Production Plan, 2016 (update is currently underway)
- Arlington Master Plan, Your Town Your Future, 2015
- Open Space and Recreation Plan, 2015 (update is currently underway)

Appendix C. Arlington 2019 Community Survey 2019



Section I: Housing & Living Situation

| 1. How long have you lived in Arlington? (Check only one) O Less than 1 year O 1-5 years O 6-10 years O 11-15 years O 16-20 years O 21-30 years O 31-40 years O More than 40 years |
|--|
| 2. Which of the following best describes your current place of residence? (Check only one) |
| O Single family home O Multi-family home (2, 3, or more units) O Apartment in a multi-unit building O Room in an apartment or house O Condominium or townhome O Public housing (including Section 8) (e.g., Arlington Housing Authority and Millbrook Apartments) O Retirement comminity/Independent living (55+) O Assisted living community (e.g., Brightview, Sunrise) O Nursing Home (e.g., Park Avenue) O Other (Please specify): |
| 3. Whom do you live with? (Check all that apply) |
| O I live alone O I live with a spouse or partner O I live with a family member O I live with a non-relative (friend) O I live with siblings O Other (Please specify): |
| 4. Do you rent or own your current place of residence? (Check only one) O I own |
| O I rent O Other (Please specify): |
| 5. Are you satisfied with your current living arrangements? |
| O Yes O No |
| If not, please tell us why? |
| 6. Does your current residence need home modifications (e.g., grab bars in showers or railings on stairs) to improve your ability to live in it safely for the next five years? (Check all that apply) |
| O Easier access into or within your home such as a ramp, chairlift or elevator, or wider doorways O Bathroom modifications such as grab bars, handrails, a higher toilet or non-slip tiles O Putting a bedroom, bathroom and kitchen on the first floor O Installing a medical emergency response system that notifies others in case of emergency O Other (Please Specify): |
| 2 |



| 7. | Are you able to take care of home/property maintenance activities for your current residence (e.g., snow removal, yard work, trash/recycle bin removal)? |
|----|--|
| | O Yes O No O I am not responsible for home maintenance |
| 8. | In the next 5 years, if you needed to move from your current home, what kind of housing would you prefer in Arlington? (Check all that apply) |
| | O Single family home O Multi-family home (2, 3, or more units) O Apartment in a multi-unit building O Room in an apartment or house O Condominium or townhome O Public housing (including Section 8) (e.g., Arlington Housing Authority and Millbrook Apartments) O Retirement comminity/Independent living (55+) O Assisted living community (e.g., Brightview, Sunrise) O Nursing Home (e.g., Park Avenue) O Other (Please specify): |
| 9. | Would your preference be to rent or own your next home? (Check only one) |
| | O To own O To rent O I do not plan on moving from my current residence |
| 10 | . How important is it to you to remain living in Arlington as you get older? (Check only one) |
| | O Very important O Somewhat important O Not important at all |
| 11 | . What do you value most about living in Arlington? |
| | |
| 12 | . What are your greatest concerns about your ability to continue living in Arlington? |
| | |



Section II: Community Services and Support

| 13. | How would you rate Arlington as a place for people to live as they age? |
|-----|---|
| | O Excellent |
| | O Very good |
| | O Cood |

O Good O Fair

O Poor

14. Please rate your level of satisfaction with each of the following outdoor spaces:

| | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|--|-------------------|-----------|--------------|----------------------|----------------|
| Transportation options | 0 | 0 | 0 | 0 | 0 |
| Availability of parking | 0 | 0 | 0 | 0 | 0 |
| Handicap accessibility of walkways, public buildings, and businesses | 0 | 0 | 0 | 0 | 0 |
| Availability of maintained sidewalks | 0 | 0 | 0 | 0 | 0 |
| Lighting along sidewalks and pathway | s O | 0 | 0 | 0 | 0 |
| Availability of benches in public areas and along walkways | 0 | 0 | 0 | 0 | 0 |
| Timing of traffic lights and marked crosswalks | 0 | 0 | 0 | 0 | 0 |
| Clear and consistent signage and way finding | 0 | 0 | 0 | 0 | 0 |
| Conveniently located public restrooms | s O | 0 | 0 | 0 | 0 |

$15. \ Please \ rate \ your \ satisfaction \ with \ the \ following \ services, \ supports, \ or \ opportunities \ in \ your \ community:$

| | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| Fitness opportunities (e.g., exercise classes, walking paths, or trails) | e, o | 0 | 0 | 0 | 0 |
| Affordable, nutritious, quality food | 0 | 0 | 0 | 0 | 0 |
| Home health aide services | 0 | 0 | 0 | 0 | 0 |
| Caregiver support (e.g., respite and support groups) | d o | 0 | 0 | 0 | 0 |
| Opportunities for continued learning adult education, workshops, tours, | | 0 | 0 | 0 | 0 |
| Opportunities in your neighborhoo informal sharing and social interact | | 0 | 0 | 0 | 0 |
| Social services and supports (housing assistance, caregiver supporting meals on wheels, food pantry, publishenefits ex: fuel assistance/SNAP) | | 0 | 0 | 0 | 0 |



16. Please rate your satisfaction with the following services, supports, or opportunities in your community (continued):

| | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| Services that help people to find and access the health and social services they need | 0 | 0 | 0 | 0 | 0 |
| Access to urgent care services when you are sick and need care right away | 0 | 0 | 0 | 0 | 0 |
| Access to medical services | 0 | 0 | 0 | 0 | 0 |
| Access to mental health services | 0 | 0 | 0 | 0 | 0 |
| Access to substance use services | 0 | 0 | 0 | 0 | 0 |
| Access to physical therapy services | 0 | 0 | 0 | 0 | 0 |
| Access to home health services | 0 | 0 | 0 | 0 | 0 |
| Access to nursing home or assisted living facilities | 0 | 0 | 0 | 0 | 0 |

17. How important do you think it is to have the following in your community?

- O Conveniently located venues for entertainment
- O Activities specifically geared to older adults
- O Activities that offer senior discounts
- O Activities involving young adults and older adults
- O Activities involving children and older adults
- O Accurate and widely publicized information about social activities
- O A variety of cultural activities for diverse populations
- O Continuing education classes
- O Social clubs (e.g., book, gardening, craft, and hobby clubs)



Section III: Transportation

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

| | O I drive myself O Family or friends drive me O Public transportation (bus or train O MBTA The Ride O Taxi O Ride sharing service (e.g., Uber, Ly O Walk O Bike O Arlington Council on Aging Transp O Other, (Please specify): | ft, etc.) portation | | | | |
|-----|--|------------------------|-------------|----------------|----------------------|----------------|
| 19 | Which of the following best described: O I drive with no limitations O I limit my driving (e.g., avoid driving) O I do not drive | - | _ | - | nly one) | |
| 20. | How satisfied are you with the follo | owing tr | ansportatio | on services in | Arlington? | |
| | S | Very atisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
| | MBTA Bus/Train Services | 0 | 0 | 0 | 0 | 0 |
| | MBTA "The Ride" Services | 0 | 0 | 0 | 0 | 0 |
| | Transportation services provided by Arlington Council Aging | 0 | 0 | 0 | 0 | 0 |
| | Taxi services (including DART) | 0 | 0 | 0 | 0 | 0 |
| | Ride sharing services (Uber, Lyft, etc.) |) 0 | 0 | 0 | 0 | 0 |
| | Other transportation services, (Please specify): | 0 | 0 | 0 | 0 | 0 |
| 21. | Within the past 12 months, did you appointment because of lack of tran | | | el, or resched | ule a medica | l |



Section IV: Social Participation, Civic Engagement, & Employment

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

| | Nearly every day | Several times a week | 1-3 times a month | | A few days per year | Never |
|--|---------------------|----------------------------|-------------------|---|---------------------------|-------|
| Talk on the phone with family, friends, or neighbors | 0 | 0 | 0 | 0 | 0 | 0 |
| Send e-mail or social media messages (e.g., Facebook) to family, friends, or neighbors | 0 | 0 | 0 | 0 | 0 | 0 |
| Write letters to family, friends, or neighbors | 0 | 0 | 0 | 0 | 0 | 0 |
| Get together, in-person, with family, friends, or neighbors | 0 | 0 | 0 | 0 | 0 | 0 |

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

O Yes O No

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

O Yes O No

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

O Yes O No, but I would be willing if asked O No

26. Please rate your level of agreement or disagreement with the following statements.

| | Strongly Agree | Agree | Disagree | Strongly Disagree | Do Not Know |
|---|-------------------|-------|----------|----------------------|----------------|
| There are flexible and accessible opportunities for me to volunteer in Arlington | 0 | 0 | 0 | 0 | 0 |
| There are flexible and accessible opportunities for me to work (for pay) in Arlington | 0 | 0 | 0 | 0 | 0 |
| There are flexible and accessible opportunities for me to work or volunteer in Arlington local government | 0 | 0 | 0 | 0 | 0 |
| There are adequate opportunities for social exchanges between older adults and children, youth, or younger adults | 0 | 0 | 0 | 0 | 0 |



| Dian | | | |
|--|--------------------|------------------------|-------------------|
| 7. Where do you typically go for continui classes/workshops in your community | • | - | ovement |
| O University, college, or community colle O Town's recreation department O Faith community O Local organizations or businesses O Community Center O Council on Aging / Senior Center O On-line Programs O Arlington Community Education | ege | | |
| O Other (Please specify): O I do not participate in continuing educ | ation or self-in | nprovement c | lasses |
| 8. Do you think that Arlington's public an other organizations are responsive to | - | • | |
| | Very Responsive | Somewhat Responsive | Not Responsive |

| | Very Responsive | Somewhat Responsive | Not Responsive |
|--|--------------------|------------------------|-------------------|
| Local restaurants, banks, grocery stores and retail establishments | 0 | 0 | 0 |
| Police and Fire | 0 | 0 | 0 |
| Library | 0 | 0 | 0 |
| Council on Aging | 0 | 0 | 0 |
| Town Hall / Local Government Departments | 0 | 0 | 0 |
| Local health care agencies and offices | 0 | 0 | 0 |

| 29. | Have | you | ı eve | r <mark>felt e</mark> | exclude | d in | Arlington | because | of your: |
|-----|------|-----|-------|-----------------------|---------|------|-----------|---------|----------|
| | | | | | | | | | |

(Check all that apply)

- O Skin color, race or ethnicity
- O Age
- O Gender

- O Sexual orientation
 O Religion or cultural background
 O Physical or emotional disability
- O Income
- O Family status (i.e., no children)
 O Other (Please specify):
- O No, I have never felt excluded



Section V: Communication & Information

| 30. How do you currently obtain information about programs, activities, and services in your community? (Check all that apply) |
|--|
| O The Advocate Newspaper O Radio |
| O Television |
| O Arlington local cable TV |
| O Internet websites |
| O Social media (e.g., Facebook, Twitter) |
| O Word of mouth |
| O Council on Aging Newsletter O Arlington Senior Association |
| 31. Do you have access to internet in your home? |
| O Yes O No |
| 32. Do you feel informed about what to do in the event of a weather or other emergency? |
| O Yes O No |
| 33. Would you know whom to contact in Arlington should you or someone in your family need help accessing social services, health services or other municipal services? |
| O Yes O No |
| 34. Do you now or have you in the past 5 years provided care or assistance to a person who is disabled, frail, or struggling with a physical or mental health condition (e.g., a spouse, parent, adult son/daughter, relative, or friend)? |
| O Yes O No |
| 35. If yes, how challenging is/was it for you to care for this person(s) and meet your other responsibilities with family and/or work? (Check only one) |
| O Extremely challenging |
| O Somewhat challenging |
| O Slightly challenging |
| O Not challenging |
| 36. If yes, did you or do you now know how to access the supports and services you need on needed to care for your own physical and emotional needs? |
| O Yes O No |



Section VI: General Health

| D | rait | | |
|-----|--|-----------|--------------|
| 37. | How would you describe your health? | | |
| | O Excellent O Good O Fair O Poor | | |
| 38. | How often are your daily activities limited by physical health problem | s? | |
| | O Not at all O Not often O Sometimes O Often O Almost alw | | |
| 39. | How often are your daily activities limited by emotional health proble | ms? | |
| | O Not at all O Not often O Sometimes O Often O Almost alw | | |
| 40 | • | • | *** |
| 40. | Have you personally or any of your friends or family members been a any of the following health issues? (Check all that apply) | necteu | Family |
| | uny of the following neuten issues: (oneek un that apply) | You | Member |
| | Substance use (e.g., alcohol, marijuana, heroin, prescription drugs) | 0 | 0 |
| | Mental illness (e.g., depression, anxiety, stress etc.) | 0 | 0 |
| | Suicide (attempted or succeeded) | 0 | 0 |
| | Alzheimer's disease and/or related dementias | 0 | 0 |
| | Parkinson's disease | 0 | 0 |
| | Falls or balance issues | 0 | 0 |
| | Vision impairment | 0 | 0 |
| | Hearing impairment Mobility issues (arthritis, hip/knee problems, osteoporosis) | 0 | 0 |
| | | 0 | 0 |
| | Weight management (e.g., over or underweight) Heart Disease | 0 | 0 |
| | COPD | 0 | 0 |
| | Lung Disease | 0 | 0 |
| | Cancer | 0 | 0 |
| | Diabetes | 0 | 0 |
| 41. | During the past 30 days, for about how many days have you felt depres | ssed. sad | d or blue? |
| | O 0 days O 1-5 days O 6-10 days O 11-15 days O 16-20 days O 21-2 | | |
| 42. | During the past 30 days, for about how many days have you felt anxiou | - | - |
| | O 0 days O 1-5 days O 6-10 days O 11-15 days O 16-20 days O 21-2 | | |
| 12 | | 25 days | 0 20 30 day. |
| 43. | Do you now smoke cigarettes? | | |
| | O Every day O Some days O Not at all | | |
| 44. | Thinking about the amount of stress in your life, would you say that m | ost days | s are: |
| | O Extremely stressful O Somewhat stressful O Not stressful at all | | |
| 45. | How often do you engage in some form of physical exercise (such as w | alking, r | unning, |
| | biking, swimming, sports, strength training, yoga, stretching)? | | |
| | O Every day | | |
| | O Several times a week, but not every day | | |
| | O About once a week O About once every other week | | |
| | O About once a month | | |
| | O Less than once a month | | |
| | O Never | | |
| | 10 | | |



Section IX: Demographics

| 56. | What sex were you assigned at birth, on yo | our birth certificate? | | | | | | |
|---|---|---|--|--|--|--|--|--|
| | O Male O Female | | | | | | | |
| 57. | How do you describe yourself? (Check one) | | | | | | | |
| | O Male O Female O Transgender O Do not identify as female, male or transgen | nder | | | | | | |
| 58. | What is your age as of your last birthday? | | | | | | | |
| | | | | | | | | |
| 59. | Are you Hispanic or Latino? | | | | | | | |
| | O Yes O No | | | | | | | |
| 60. | Which category best describes your race? | (Check all that apply) | | | | | | |
| | O American Indian/Alaskan Native O Asian O Black or African American O Native Hawaiian/Pacific Islander O White O Other | | | | | | | |
| 61. | Is English your primary language? | | | | | | | |
| | O Yes O No If no, please specify: _ | | | | | | | |
| 62. What is your employment status, either paid work or volunteer work? (Check all that apply) | | | | | | | | |
| | O Retired | O Looking for work for pay | | | | | | |
| | O Working full-time for pay O Working full-time as unpaid volunteer | O Looking for work as unpaid volunte eer | | | | | | |
| | O Working part-time for pay | | | | | | | |



Section VII: Caregiving

| Draft | |
|---|--------|
| 46. During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?O YesO No | |
| 47. In the past 30 days, did you provide care for this person by managing personal care such as giving medications, feeding, dressing, or bathing? ○ Yes ○ No | |
| 48. In the past 30 days did you provide care for this person by managing household tasks such as cleaning, managing money, or preparing meals? ○ Yes ○ No | |
| 49. Of the following support services, which ones do you, as a caregiver, most need that | |
| you are not currently getting? (Check all that apply) O Classes about giving care O Help in getting access to services O Caregiver support groups O Individual counseling to help cope with stress of caregiver O Respite care (short-term breaks for people who provide care) O Regular or periodic home health services O I don't need any of these support services | |
| Section VIII: Financial Resources | |
| 50. Please indicate your level of agreement with the following statement: "I have adequate financial resources to support my daily independent living needs (e.g., housing costs, home maintenance, transportation, food, personal care, etc.)." | |
| O Strongly agree O Agree O Disagree O Strongly disagree | |
| 51. What was your annual household income before taxes in the most recent tax year? (Optional) | |
| O Less than \$10,000 | |
| 52. In the last 12 months, did you or anyone in your household ever cut the size of your meals or skip meals because there was not enough money? | |
| O Yes O No | |
| 53. Do you utilize the Arlington Food Pantry? O Yes O No | |
| 54. Are you enrolled in the Supplemental Nutritional Assistance Program (SNAP), food stamps | /EBT"? |
| O Yes O No | |
| 55. In the last 12 months, did you or anyone else in your household ever go without needed medications or cut back on your dosage because there was not enough money? | |
| O Yes O No | |