



Aging in Place in Marion

A Community Endeavor

FRIENDS OF THE MARION COUNCIL ON AGING

Aging in Place in Marion: A Community Endeavor

Commissioned by the Friends of the Marion Council on Aging

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Executive Summary

This report describes collaborative efforts undertaken by the Friends of the Marion Council on Aging (FMCOA) and the Center for Social and Demographic Research on Aging, within the McCormack Graduate School at the University of Massachusetts Boston (UMass Boston). Beginning in Fall 2014, these organizations partnered to conduct a study to investigate the needs, interests, preferences, and opinions of the Town's older resident population, and the priorities of other stakeholders in the Town, with respect to living and aging in Marion.

In the earliest phase of the project, we met several times with members of the FMCOA to discuss and better understand their concerns about current and future aging-related needs of the Town and their evaluation goals. We used information gathered at these meetings to develop a research plan to systematically address the questions and issues that arose. During this assessment, multiple research methods were used. We began the process by examining public data from the U.S. Census Bureau to describe basic demographic characteristics, as well as economic traits, living situations, and disability status of older people living in the Town. We also conducted three focus groups to obtain feedback from multiple stakeholders, including representatives from municipal departments, private organizations, and older residents themselves. Finally, we conducted a comparison of Councils on Aging in five municipalities that are similar to Marion in order to assess how needs of older adults are met in other communities. Collectively, the contents of this report are intended to inform planning by the Marion Council on Aging (COA), other offices within the Town, and organizations that provide services to and who advocate for Marion's older residents.

Summary of Demographics

- In 2010, there were more than 4,900 residents, of whom nearly 1 in 3 (30%) were age 60 and older.
- Since 2000, the number of persons age 60 and over increased by about 24%, compared to a net loss of 4% in the Town.
- Residents who are age 60 or older are heads of a large proportion (44%) of Marion's households.
- Nearly half (48%) of Marion households have at least one member who is age 60 or older.
- About 1 in 4 (24%) residents who are age 60 and older live alone.
- Marion's households headed by residents who are age 65 and older have a higher median income (\$53,594) than older people in Massachusetts overall (\$36,282); but about 35% of older residents have incomes under \$25,000 annually.
- In Marion, about 47% of men age 75 and older and 55% of women in this age group experience at least one disability.

Summary of Focus Groups

- Communication between departments and organizations that serve older people was a central concern of many participants in the focus groups. Discussants recognized a “fragmentation” of services that they attributed to a lack of a central “clearing house” for information. By increasing their knowledge through improved communication, participants felt they would be in a better position to make more appropriate referrals to departments outside of their own.
- Many participants cited a need for better communication between organizations in the Town and older residents about what programs and services are currently available. Modes of sharing information that are currently in use seemed to be inefficient and somewhat disorganized. One recommendation was to better utilize traditional media to spread information, for example by creating a regular column in the local newspaper that addresses local issues of interest to older people.
- Focus group participants acknowledged the inadequacy of affordable housing options in the Town. There are very few appropriate downsizing options for residents with medium or high incomes; and in many cases smaller housing units with accessibility features such as universal design are not available at all. The groups recommended seeking creative solutions to this problem, including reconsideration of zoning regulations, and exploring cutting edge senior housing options, such as the Beacon Hill Village Model, which supports the ability of seniors to stay in their homes and to “age in place.”
- Alternative modes of transportation for older adults who do not drive are in short supply in Marion. This problem is exacerbated by the layout of the town, in that many necessary amenities are not centrally located. Focus group participants were aware of the COA vans that provide much of the transportation to older people; however, options were discussed regarding how to better utilize this resource to serve a greater number of residents more efficiently.
- Preserving Marion’s historic character as well as its village setting was extremely important to focus group participants; at the same time they acknowledged the need to continue to update the Town’s buildings and built environments to accommodate the growing number of residents with functional and mobility difficulties.
- The need for a Town Senior Center was mentioned in all three focus groups. Participants felt that a dedicated space, where programs and services could be offered would alleviate some of the perceived fragmentation, and could serve as a “central hub” from which to advocate for the older population in the Town.
- Participants suggested that Marion is a very close-knit community, and that they could rely on their neighbors to assist them when they needed help. The high degree of interdependence between residents represents one of the Town’s greatest strengths, since informal care from friends and neighbors is often the easiest and least costly to procure.

- When older adult participants were asked to identify their biggest challenges for staying in Marion as they age, they mentioned housing and transportation issues; concerns about keeping up with the cost of living on fixed incomes (e.g., increasing property taxes); and not knowing where or from whom to acquire the services they thought they might need.

Summary of Community Comparison

- The Town of Marion COA plays a central role in promoting the wellbeing of older residents through the coordination and provision of an array of programs and services from which older adults benefit.
- The quantity of services demanded has continued to increase. For example, in Fiscal Year 2013 the COA provided services to 1,125 older adults (duplicated count), including the provision of 3,487 meals and 6,908 van rides—these numbers are expected to increase as the older population continues to grow.
- In comparison to Councils on Aging in similarly sized towns, Marion's COA falls among those that are "minimally" to "somewhat active", based on the frequency and availability of services and the resources dedicated by the Town to serving older residents.
- The most active comparison towns have dedicated space for providing services, including Senior Centers and Adult Day Centers, which offer support services to older adults within a group setting.

Acknowledgements

The authors wish to acknowledge the support of the Friends of the Marion Council on Aging, who generously provided funding for this project. The input and assistance contributed by members of this organization were invaluable as we identified research questions, developed focus group content, and recruited study participants. Specifically, we wish to thank the following officers of the FMCOA: Susan Wood, President; Jerry Garcia, Vice-President; Priscilla Ditchfield, Treasurer; Christina Bascom, Secretary; and William Redway, Director.

In addition, we owe thanks to many residents of Marion who supported our data collection efforts by giving their time graciously to participate in focus groups, and who provided their thoughtful responses to our queries.

The authors, Bernard A. Steinman, Hayley Gleason, Maryam Khaniyan, Ceara R. Somerville, and Jan E. Mutchler from the University of Massachusetts Boston, are responsible for the contents of this report; however, the research could not have been completed without the cooperation and efforts of all those mentioned above.

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Introduction

Like many communities across Massachusetts, the population in the Town of Marion is aging. In fact, even as the total population of Marion is projected to decrease in size over the next fifteen years, the number of residents who are age 60 and over is expected to continue growing during that time frame. As the demographics of Marion shift toward a population that is older and living longer, the demand for programs and services that address aging-related needs will likely increase as well.

Although the Town has no Senior Center, its Council on Aging serves as an important and valued resource that is viewed as a central point of contact for many older residents. Planning is necessary to ensure that the Town is adequately prepared to meet the challenges and to capitalize on opportunities that an aging population will present. In addition, it is increasingly relevant and necessary for those who provide services and amenities in the Town to understand different stakeholder perspectives with regard to the aging-related needs of Marion's older residents.

This report presents research findings from a study conducted by the Center for Social and Demographic Research on Aging at the University of Massachusetts Boston (UMass Boston), in collaboration with the Friends of the Marion Council on Aging (FMCOA). The purpose of this study was to investigate and document current and future needs and preferences of Marion's older residents. To this end, our primary methodology was focus groups aimed at identifying concerns related to aging in Marion, with an emphasis on services and amenities that facilitate "aging in place", as well as qualities of the community that influence "livability" of the Town for residents of all ages.

The contents of this report are intended primarily to inform planning by the Marion Council on Aging (COA) and other municipal departments. In addition, contents may be of interest to community stakeholders in other public and private organizations that operate programs, provide services, and/or advocate for older adult residents in Marion, and as a resource for the community at large.

Background

The Town of Marion, Massachusetts is a small community located on the Southeastern coast of Massachusetts. According to the U.S. Census, in 2010, the Town had more than 4,900 residents, of whom nearly 30% were age 60 and older. The relative proportion of older Marion residents is projected to grow at an astonishing rate over the next 15 years, even as the population overall decreases in size. By 2030, more than 40% of residents will be age 60 and older.

Marion is a Town that is characterized as one where many residents have put down roots early in life and remained throughout their old age. Additionally, the Town's coastal location and highly livable character will likely be alluring to many Baby Boomers looking for new places to spend their retirement years. Given these demographic and civic traits, Marion's growing senior population will likely be a diverse combination of life-long residents and

relative “new-comers” who are looking to, and expecting to “age in place” within the community. In proactive response to changes that are appearing on the horizon, entities within the Town have begun to examine ways to maintain Marion’s highly livable environment, and to make aging in place possible for the majority of Marion’s older residents.

Previous research in gerontology has documented an overwhelming preference among older adults to remain in their homes and communities as long as possible (AARP, 2005). Despite this growing trend, a number of common aging-related circumstances often challenge the ability of individuals to age successfully in their homes and communities, and strain the resources available within towns to address the broad range of services and amenities needed.

Many older adults experience physical and social changes that threaten their independence and wellbeing. In addition, older individuals who live on fixed incomes may experience financial constraints that limit their choices and reduce their quality of life in retirement. In communities that actively promote aging in place, older residents may be better able to retain their independence and maintain valued social relationships. Communities that support aging-related needs may also be more successful in retaining a larger share of their vital older residents, and in turn benefit from the experiences and the local commitment and civic engagement that long-term residents often contribute.

The research described in this report was conducted in Fall 2014 to assess the specific aging-related needs of older adult residents in Marion, and to explore concerns of providers of goods and services to this segment of the population. Discussions with members of FMCOA steered the direction our study’s focus, and guided our research protocols.

Generally, key stakeholders were interested in ways in which their community could become more “livable,” with respect to aging in the Town. According to Nelson and Guengerich (2009), livable communities have features that allow older adults to maintain their independence and quality of life as they age and retire.

Key components of livability that were central topics addressed in quantitative and qualitative components of this study included:

- Accessible and affordable housing choices;
- Adequate and appropriate transportation options; and
- Targeted community services that address specific needs of older people.

Housing

The ability of older adults to age in place depends on the availability of housing options designed to accommodate the changing physical, social, and financial circumstances that typically accompany aging. As a result of these changes, the degree of “fit” between individuals and their homes can decrease, creating living situations that are impractical, unsafe, or undesirable for older people (Pynoos, Steinman, Nguyen, & Bresette, 2012).

- Affordable housing options, especially those that include adaptive features that accommodate physical limitations, such as home modifications or universal design elements, can make it possible for older residents to remain independent in their homes and communities.
- Housing options that blend shelter and services, such as assisted living or continuing care retirement communities, may allow individuals to remain relatively independent and socially engaged with others, even if they are no longer able to stay in their original homes.
- Unfortunately, many towns do not have adequate appropriate and affordable housing units available to meet the diverse, often changing preferences and needs of a large, and growing number of older people. As a result, many elderly residents must sometimes relocate against their wishes to new communities where their needs can be met.
- Thus, towns such as Marion that are interested in promoting aging in place must prioritize housing options that facilitate these needs.

Transportation

In addition to affordable housing, reliable transportation options are required to support aging in place by providing individuals with access to work or volunteer activities, social supports, needed goods and town amenities, and to promote engagement with others in the community. For many older adults, physical changes associated with aging may make continued driving unsafe. When transportation options are not available to replace driving, or are extremely limited, challenges in procuring transportation can increase the risk of isolation and unnecessarily reduce the individual's quality of life.

- In many of Marion's neighborhoods where local transportation options are relatively scarce, a large share of older residents could be frustrated by difficulties meeting their travel needs.
- Communities such as Marion can promote quality of life and encourage social engagement among older people by supporting convenient, affordable, and reliable local transportation options for residents who are unable to drive safely themselves, or who prefer to travel using alternatives to driving.
- Improving community attributes to facilitate walkability may supplement transportation options that are provided publically, or through organizations that specifically serve older people. Examples include safe, uninterrupted sidewalks, strategically placed benches, and clearly marked pedestrian crossings with signals that allow adequate time for older people to cross safely.
- In addition, the physical health of older adults and the public at large can be improved by encouraging alternate forms of transportation that increase physical activity (e.g., safe, conveniently located, well maintained bike trails and walking paths).

Community Features & Services

Finally, in highly livable communities, older adults have access to a variety of home and community based services, as well as public and commercial amenities that support aging in place. For instance, older adults who have mobility difficulties or who can no longer drive are likely to benefit from access to medical and social services that can be delivered directly to their homes.

- Programs that connect older residents with affordable assistance with home and yard maintenance can help protect property values and improve neighborhoods where older people live.
- Communities can also support opportunities for social engagement and participation in community events through provision of volunteer programs, learning opportunities, exercise programs, and social activities that help community members remain active and socially engaged, prolong independence, and improve quality of life.

Purpose of Study

In this report, we have assembled information from a number of sources with the goal of addressing the service needs, preferences, and concerns of stakeholders affected by the Town's growing aging population. Formal community needs assessments such as this are often employed to identify deficiencies and to improve services and programs provided by organizations that target older adults (Nolin, Wilburn, Wilburn, & Weaver, 2006). Throughout the remainder of this report, we present a profile of the characteristics and concerns of the current population of Marion. Knowledge of these attributes provides an important basis for planning by the Marion COA and other Town offices and organizations within the community.

Methods

In the current project, we compiled data from several sources, including publicly available information obtained through the U.S. Census Bureau, qualitative data collected directly from Marion's older residents and service providers within the Town who interact frequently with the older adult population, and data obtained from the websites of Councils on Aging in comparable communities. All research methods and instruments used in this project were approved by the Institutional Review Board at UMass Boston, which is charged with protecting the rights and welfare of human subjects who take part in research conducted through the university.

Marion Demographic Data

As an initial step toward understanding characteristics of the older population in Marion, we generated a demographic profile of the Town using data from the 2010 U.S. Census and the American Community Survey (ACS). Whereas the decennial census is a complete accounting

of all residents in the country, the ACS is a large, annual survey of the population, conducted by the U.S. Census Bureau and designed to provide estimates of various demographic qualities in years intervening the ten-year censuses. In towns the size of Marion, ACS estimates are available for the most recent five-year period (2008-2012). All census data files were downloaded from the American Fact Finder website, which is maintained by the U.S. Census Bureau.

Focus Groups

During the month of October 2014, we conducted three focus groups with a range of stakeholders who were hand-selected and recruited by FMCOA, an advocacy group for the Town's COA. Each focus group lasted approximately an hour and a half. Generally, discussions focused on attributes of the community that promote aging in place; perceived challenges to aging in place in Marion; and opportunities that an aging population affords the community to improve its livability for people of all ages. Specific topics for each discussion were developed beforehand in consultation with members of FMCOA. Appendix A displays samples of questions that guided each discussion.

Focus Group #1 consisted of public safety officials, and representatives of service organizations within Marion who have regular interactions with older adult residents of the Town.

Focus Group #2 consisted of representatives from community organizations that enrich, educate, or engage older community members.

Focus Group #3 consisted of residents who were age 50 and older (most were 60 or older), and who were current or prospective consumers of programs and services designed for older people in the Town.

Most participants in all three focus groups were longtime residents of Marion, and all were knowledgeable about the Town's programs and services that are available for older residents.

Peer Community Comparison

We gathered information from similar Councils on Aging in five "peer" communities surrounding Marion using a web-search protocol. Communities were selected based primarily on population size, the community's proportion of seniors, and their proximity to Marion. We examined features of the Councils on Aging in each community, including whether they managed formal Senior Centers, as well as their programming and staffing.

Data Analysis

We used U.S. Census data for the Town of Marion to summarize demographic characteristics including growth of the older population, shifts in the age distribution, gender, race, and education distributions, householder status, living arrangements, household income, and disability status. Qualitative data collected during focus groups were reviewed by project

staff and used to characterize and categorize salient ways in which aging issues are impacting older adults in Marion. Information collected from the web regarding Councils on Aging in peer communities were compared side-by-side with information collected from the FMCOA and the Town COA's website. We used information from all sources of data to develop the recommendations found in the final section of this report.

Results

Demographic Description of Marion

Age Structure and Population Growth

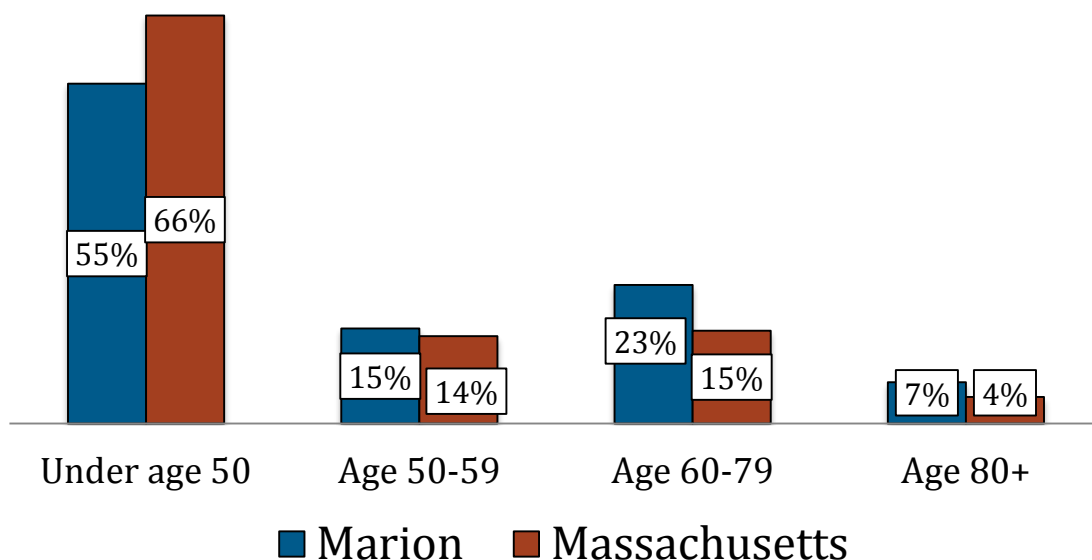
According to the U.S. Census, 4,907 residents lived in Marion in 2010. Among these, not quite half (2,196; 45%) were age 50 and older (see **Table 1**). Residents in the age category 60 to 79 numbered 1,107 individuals (23% of the Town's population) and 330 residents were age 80 and older (7%). Another 759 residents (15%) were age 50 to 59. This latter group represents a segment of the population that will become eligible for services provided to older adults in the community within the next ten years.

Table 1. Number and percentage distribution of Marion's population by age category, 2010

	Number	Percentage
Under age 18	1,221	25%
Age 18-49	1,490	30%
Age 50-59	759	15%
Age 60-79	1,107	23%
Age 80 and older	330	7%
Total	4,907	100%

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

Figure 1. Age distribution of Marion residents in comparison to Massachusetts



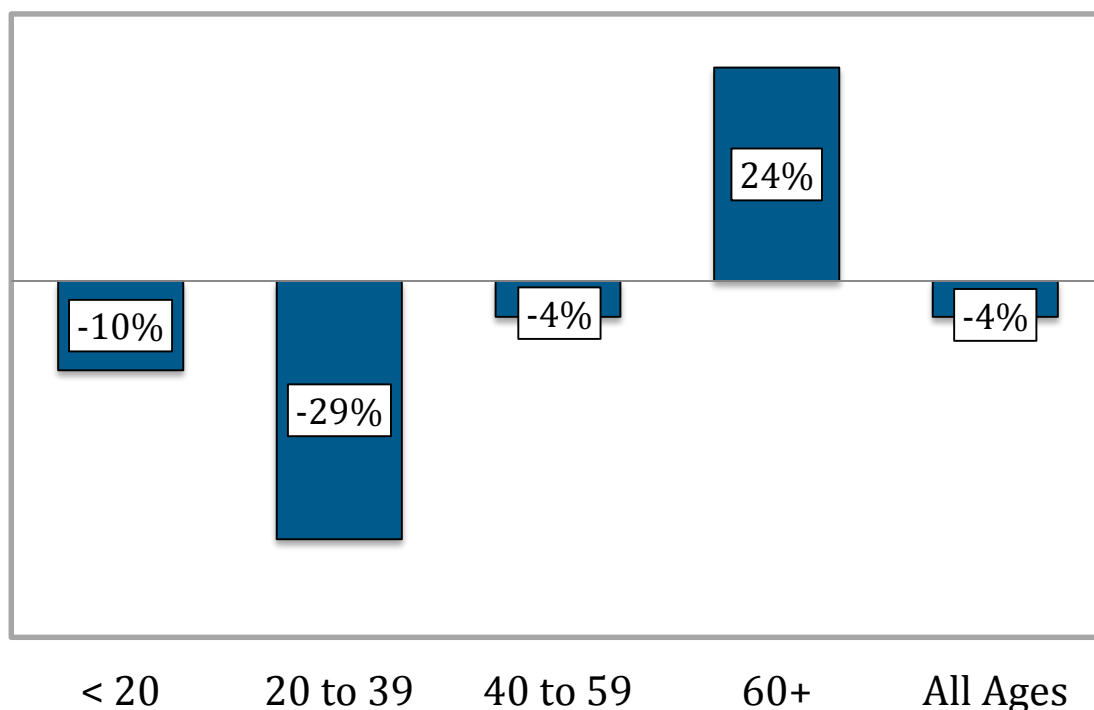
Source: *U.S. Census Bureau. 2010 Census, Summary File 1, Table QT-P1*

Marion is comparatively older than Massachusetts overall (see **Figure 1**). Whereas the proportion of Massachusetts residents under the age of 50 is greater than Marion (66% and 55%, respectively), the proportion of Marion residents in all three older age groups is greater than those in Massachusetts.

About 15% of Massachusetts residents are age 60 to 79, and 23% of Marion's residents are in that age group. Most notably, 7% of Marion residents are age 80 and older, but just 4% of residents statewide are in this oldest age group.

Persons who are age 80 and older are often at greater risk for detrimental health and social outcomes, especially when programs and services are not available to address this group's specific age-related needs.

Figure 2. Percentage change in number by age group in Marion, 2000 to 2010

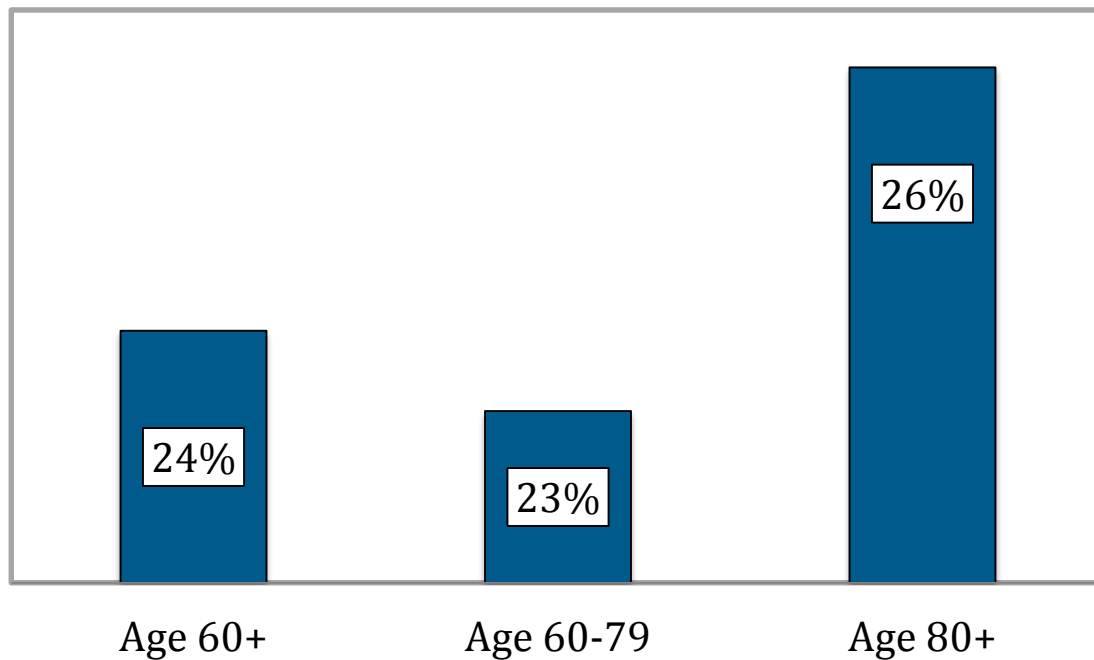


Source: *U.S. Census Bureau. 2010 Census, Summary File 1, Table QT-P1; and 2000 Census, Summary File 1, Table QT-P1*

Figure 2 shows the percentage change in Marion's population from 2000 to 2010, by age group. During the previous decade, the size of the total population decreased by 4%—a change driven primarily by a decline in the number of younger residents. The number of residents under age 60 decreased between 2000 and 2010, dropping by 29% for those who are age 20 to 39, and 10% for those under age 20.

The only age group that grew during the last decade was composed of residents who are age 60 and older—the number of persons in this age group increased in size by about 24%.

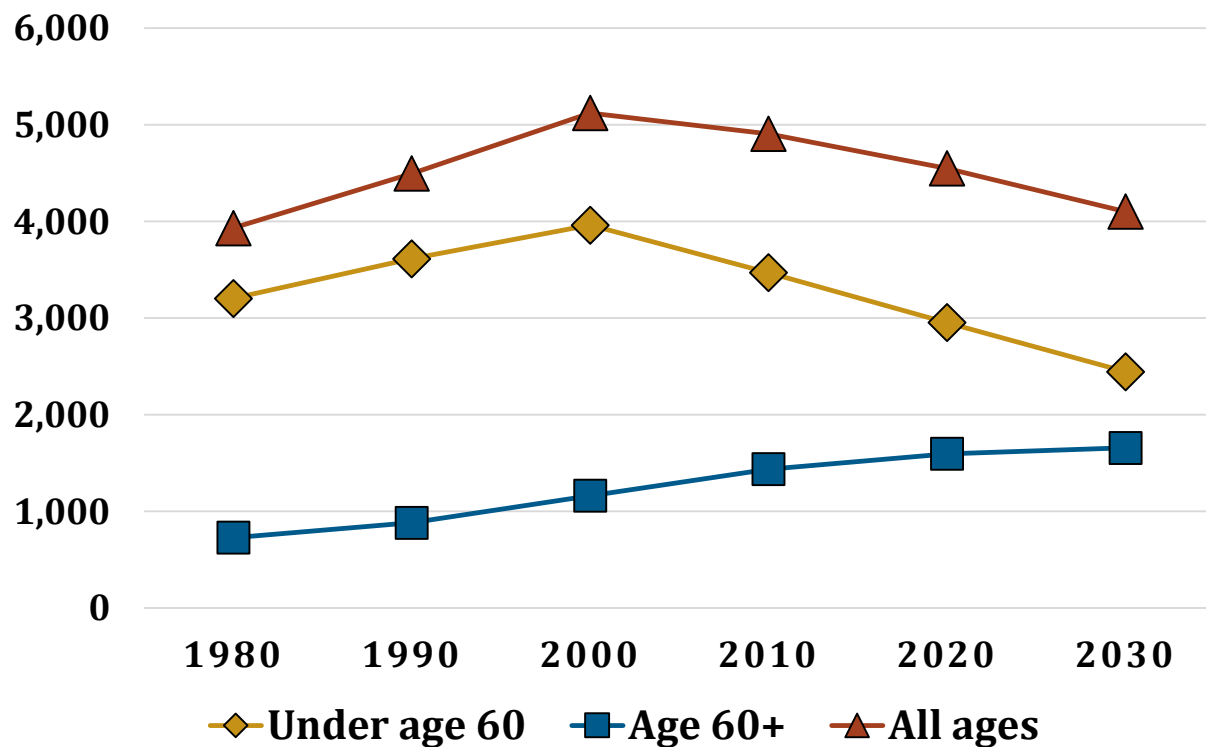
Figure 3. Growth *within* the senior population, 2000 to 2010



Source: U.S. Census Bureau. 2010 Census, Summary File 1, Table QT-P1; and 2000 Census, Summary File 1, Table QT-P1

Figure 3 shows growth within Marion’s senior population from 2000 to 2010. Growth among younger seniors has been substantial. The number of residents age 60 to 79 grew by about 23% during the previous 10 years. In that same time period, the fastest growing segment of the older population was those age 80 and older, which grew by about 26%. Individuals in this oldest age group are often at greater risk for health problems, social isolation, and economic insecurity—issues that are commonly addressed and ameliorated by COA programs and services.

Figure 4. Trends in the number of Marion residents under age 60, those age 60 and older, and the total population, 1980 to 2010 with projections for 2020* and 2030*



Source: Population figures for 1980-2010 are from the U.S. Census.

* Figures for 2020 and 2030 are projections generated by the Donahue Institute, University of Massachusetts: <http://pep.donahue-institute.org/>

Figure 4 shows the numbers of Marion residents from 1980 to 2010, along with population projections to 2030, by age group. Since 2000, the overall size of Marion's population has been in decline and is projected to continue decreasing until at least 2030. This trend appears to be driven primarily by an expected decrease in the number of residents who are age 59 or younger.

By comparison, the senior population has grown steadily since 1980. In 2010, 30% of the population was age 60 and older. By 2030, slightly more than 40% of Marion's population—about 1600 residents—is expected to be in this age group.

Demographic Composition of Marion's Older Population

Race/Ethnicity

Relative to other places in Massachusetts, there is little diversity among Marion residents with respect to race. The vast majority (91%) of Marion's residents are White and non-Hispanic. A small percentage (4%) is Asian, and 5% report being of some other race (*ACS, 2008-2012, Table B02001*). Due to Marion's small population, there are no ACS data available regarding the race of the Town's older residents specifically; however, in other communities, older cohorts are often less diverse than the population as a whole. For instance, in Massachusetts about 91% of residents over age 60 are White, compared to 76% of Massachusetts all residents who report White non-Hispanic backgrounds.

Language

With respect to the primary language spoken at home, there is also relatively little diversity among the older Marion population. For residents age 65 and older, it is estimated that 93% speak only English at home, 5% speak "other Indo-European" languages (e.g. German, Portuguese, Italian), and about 2% speak an Asian language (e.g., Chinese) or some other language (*ACS 2008-2012, Table B16004*). Among those who speak some language other than English at home, three out of four are also able to speak English "very well". Given these figures, it is possible that a small percentage of Marion residents may have limited access to programs and services that are available to them due to a language barrier.

Gender

In Marion, the gender distribution among residents who are age 60 and older is similar to that of Massachusetts as a whole—the majority of seniors are women (57%, compared to 53% in the Commonwealth; *2010 U.S. Census, Table DP-1*). Additionally, the proportion of women is much greater in older age groups—among Marion residents age 80 and older 67% are women. The greater number of older women is largely due to longer life expectancies of women compared to men—a demographic disparity that is widely observed in many older populations globally.

Education

American Community Survey statistics on education suggest that Marion residents are well educated on average. It is estimated that about 43% of persons aged 65 and older have at least an associate's degree. In addition, 16% have a graduate or professional degree (*ACS, 2008-2012, Table B15001*). This educational profile contributes to the community's vitality and character, which depends on older adults who value opportunities to be engaged in their communities through volunteer and civic engagement activities, as well as late-life learning opportunities—activities that are often valued in highly educated communities (Fitzgerald & Caro, 2014).

Employment & Veteran Status

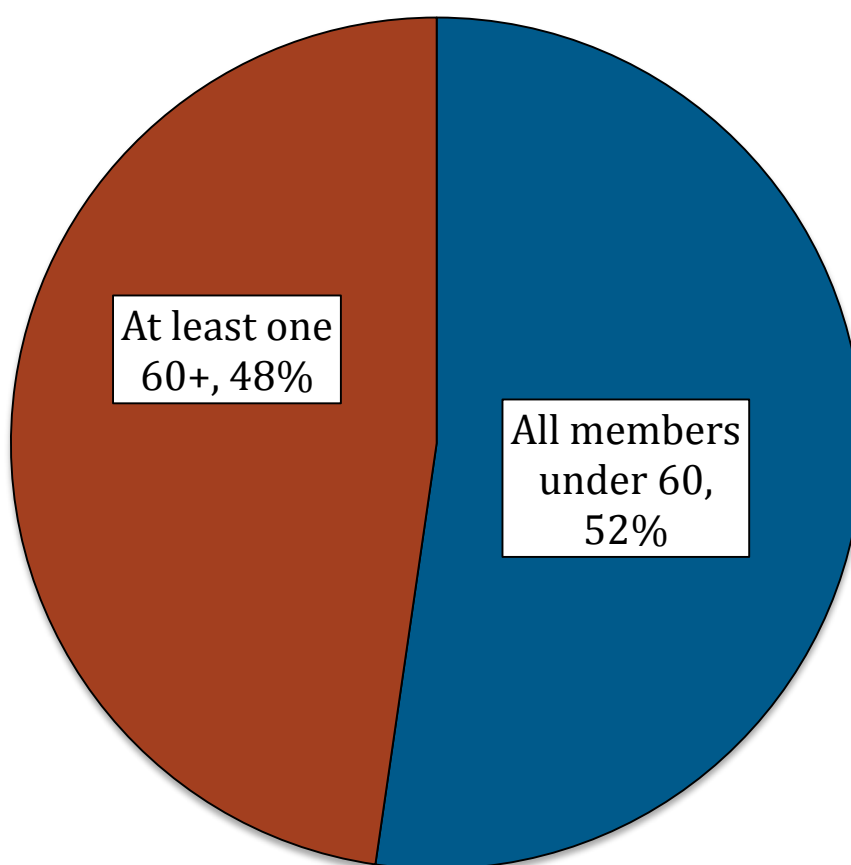
According to ACS estimates, about 1 in 5 (18%) of Marion residents aged 65 to 74 remain in the workforce, and just 2% of those 75 and older are in the workforce (*ACS, 2008-2012, Table 23004*). A sizeable share (53%) of men aged 65 and older in Marion report veteran status, including 78% of men aged 75 and older (*ACS, 2008-2012, Table 21001*). As a result, many of the Town's older residents may be eligible to receive some benefits and services based on their military service or that of their spouses.

Housing and Living Situation of Marion Households

Of the nearly 1,900 Marion households counted in the 2010 U.S. Census, a substantial share includes one or more older adults. As shown in **Figure 5**, almost half of all households in Marion (48%) include at least one adult age 60 and older. Additionally, nearly one in five (18%) households include at least one person who is age 75 and older (not shown). This high proportion, which is likely to increase in the future, reflects the widespread demand for programs, services, and other considerations.

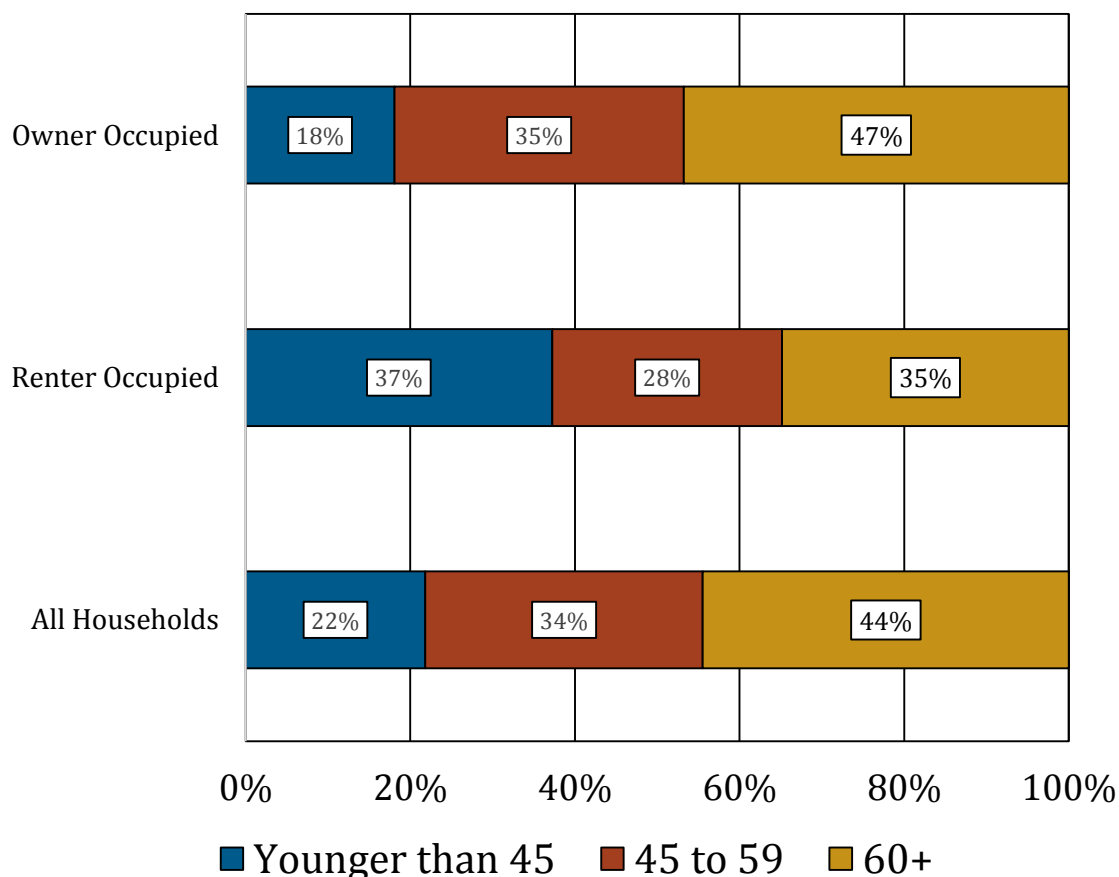
Many households—even those headed by individuals not old enough to be eligible for services themselves, may have a direct interest in services and amenities that address aging-related concerns, including health and caregiving needs, transportation options, and safe home environments for older family or household members.

Figure 5. Marion households that include one or more individuals aged 60 and older



Source: American Community Survey, 2008-2012, Table B11006

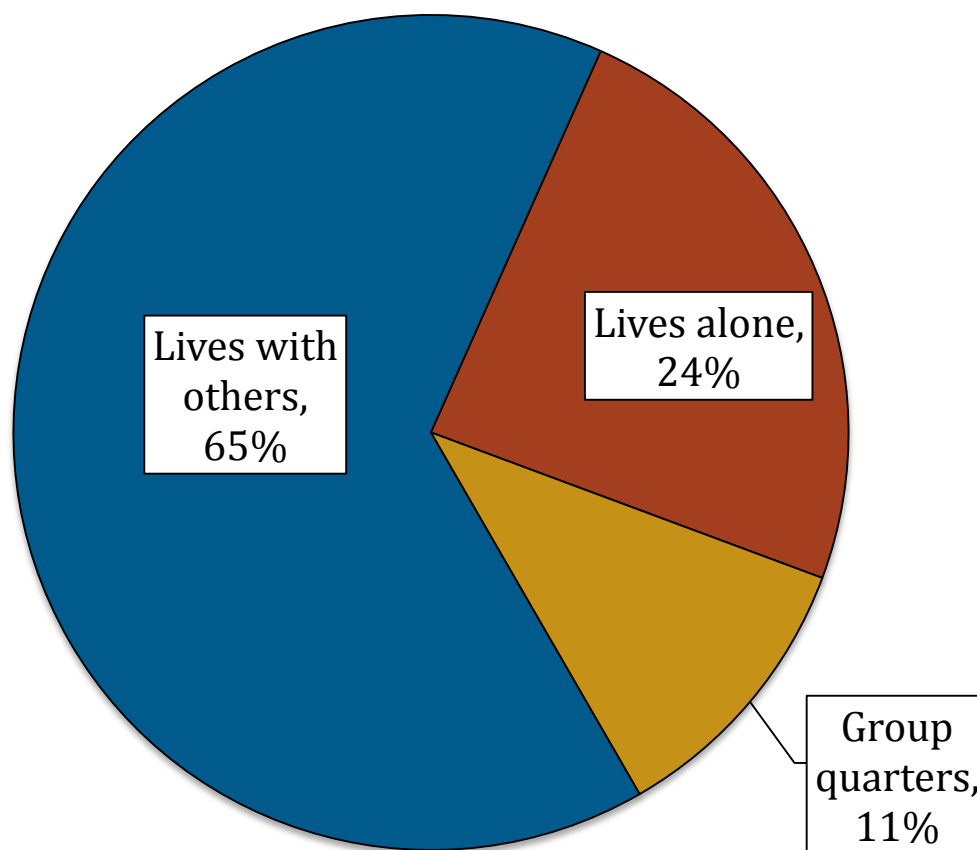
Figure 6. Percentage of Marion’s householders, by age—including owner occupied, renter-occupied, and all households



Source: U.S. Census Bureau. 2010 Census, Summary File 1, Table H17.

A “head of household” is typically the individual in whose name a home is owned or rented. **Figure 6** shows that a substantial percentage (44%) of Marion’s nearly 1900 households are headed by individuals who are age 60 and older—only 22% of households are headed by individuals who are younger than 45; and 34% are headed by individuals age 45 to 59. Among the households that are owned by the head of household, nearly half (47%) are headed by individuals age 60 and older. Among households that are rented by the head of household, individuals younger than age 45 make up the largest share (37%).

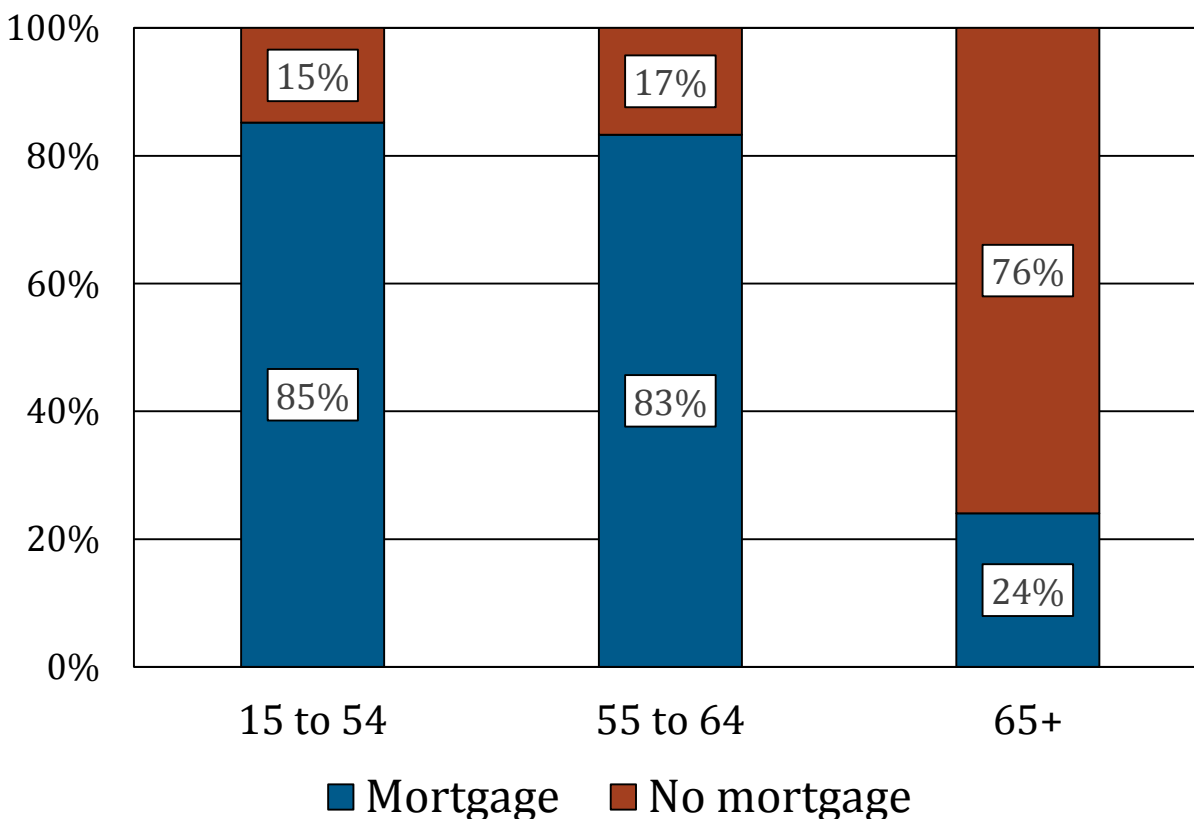
Figure 7. Living arrangements of Marion residents, age 60 and older



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

Figure 7 shows living arrangements of Marion's older residents age 60 and older. The most common living arrangement among residents in this age group is living with others (65%), including family and non-family co-residents. A significant proportion of Marion residents who are age 60 and older—about 24%—live alone, and greater than one in ten (11%) older Marion residents reside within group quarters. In Marion, these individuals live in nursing homes.

Figure 8. Homeownership and mortgage status of householders by age group



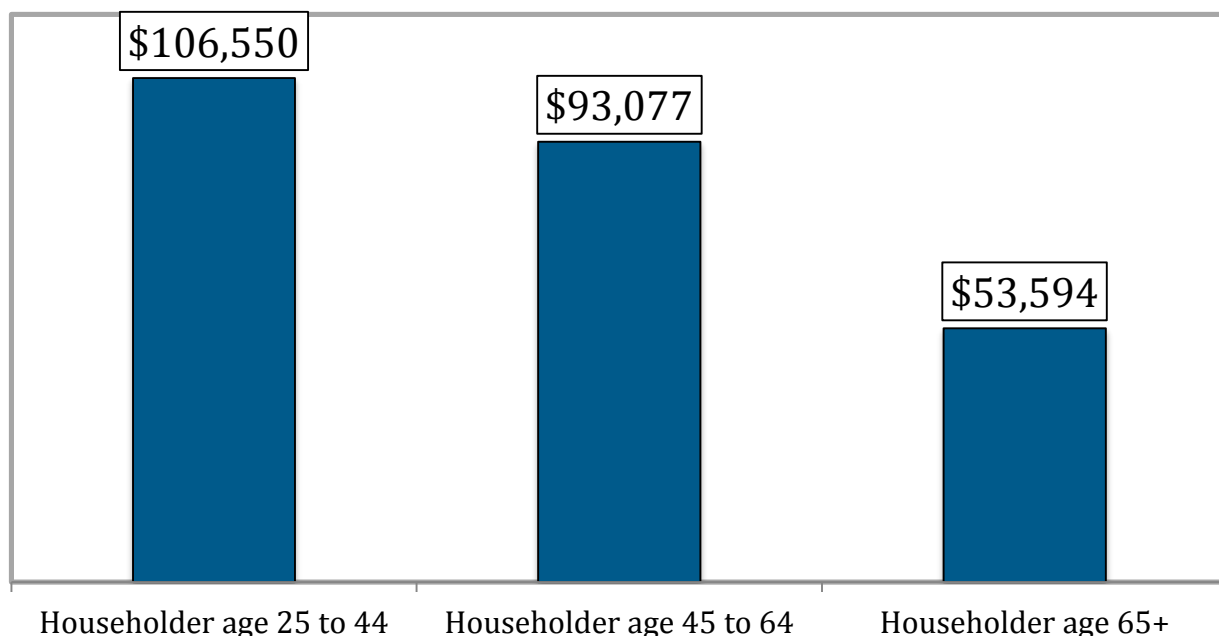
Source: 2008-2012 American Community Survey, Table B25027

Figure 8 shows homeownership and mortgage status of householders in Marion by age group. Not surprisingly, younger residents are far more likely to have a mortgage on their homes. Most homeowners under age 65, including 85% of those aged 15 to 54, and 83% age 55 to 64 have mortgages. The majority of Marion’s homeowners aged 65 and older (76%) own their homes free and clear.

The large number of older Marion residents who are homeowners and heads of households has implications for the amenities and services that are needed and valued as residents strive to maintain their homes and remain independent and safe. Homeownership is an important asset for many individuals and families. It represents a financial resource that can be converted to income if necessary, but also requires maintenance and the costs and burden associated with that. Taking into account factors such as mortgage, utilities, real estate taxes, and insurance, about one-third of Marion homeowners spend more than 35% of their income on housing (*ACS, 2008-2012, Table B25093*). This is considered to be a high housing burden. Slightly greater older homeowners have this level of housing burden, compared to younger homeowners.

Economic Well-Being of Older Marion Households

Figure 9. Median household income in Marion by age of householder (in 2012 inflation adjusted dollars)

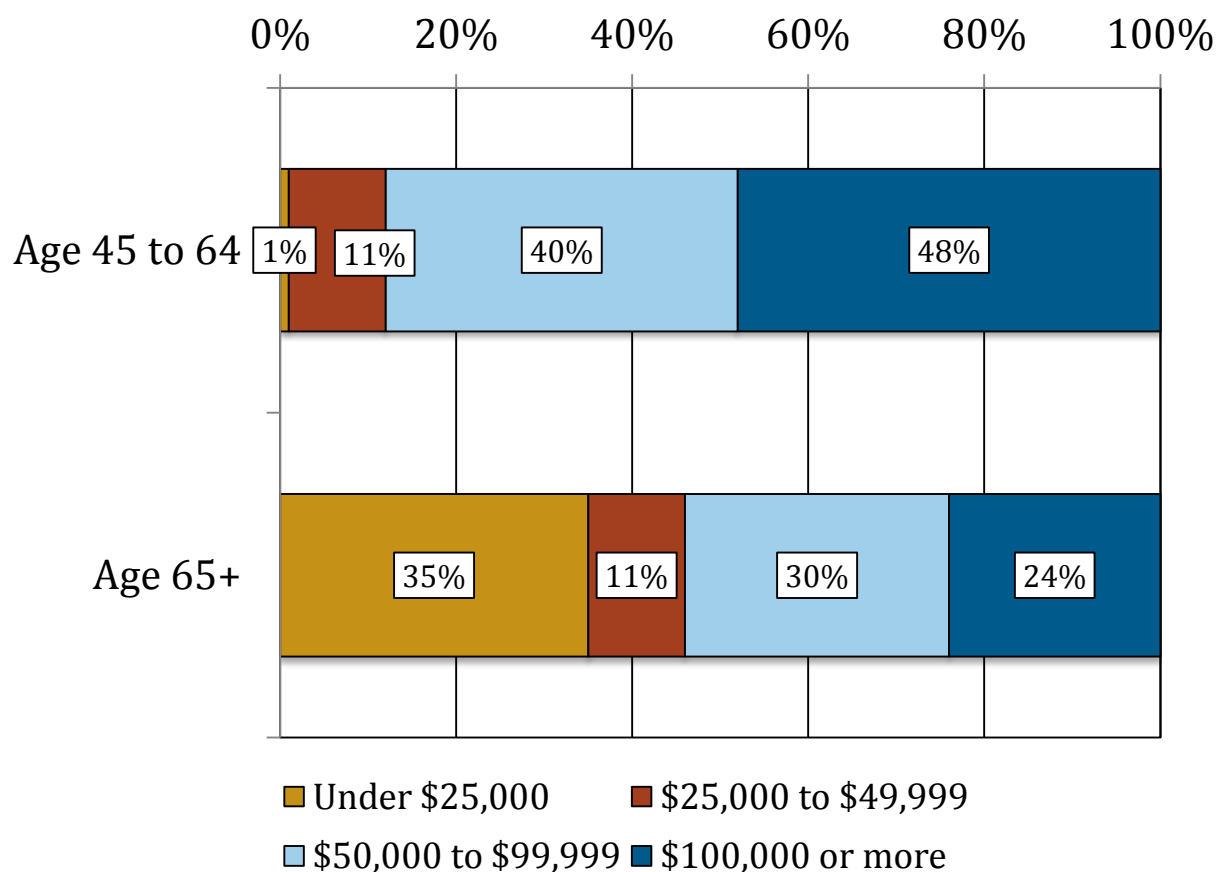


Source: U.S. Census Bureau; American Community Survey, 2008-2012, Tables B19049 and B19215.

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

Although Marion is a relatively affluent town overall, **Figure 9** illustrates the comparative disadvantage of older residents with respect to household income. Among all age groups, households headed by individuals who are aged 25 to 44 have the highest median income at \$106,550—this amount is substantially greater than the statewide median for this age group. Among Marion households headed by persons aged 65 and older, the median income is \$53,594—this amount is also much greater than the statewide median of \$36,282.

Figure 10. Household income distribution in Marion by age of householder (in 2012 inflation-adjusted dollars)



Source: U.S. Census Bureau; American Community Survey, 2008-2012, Table B19037.

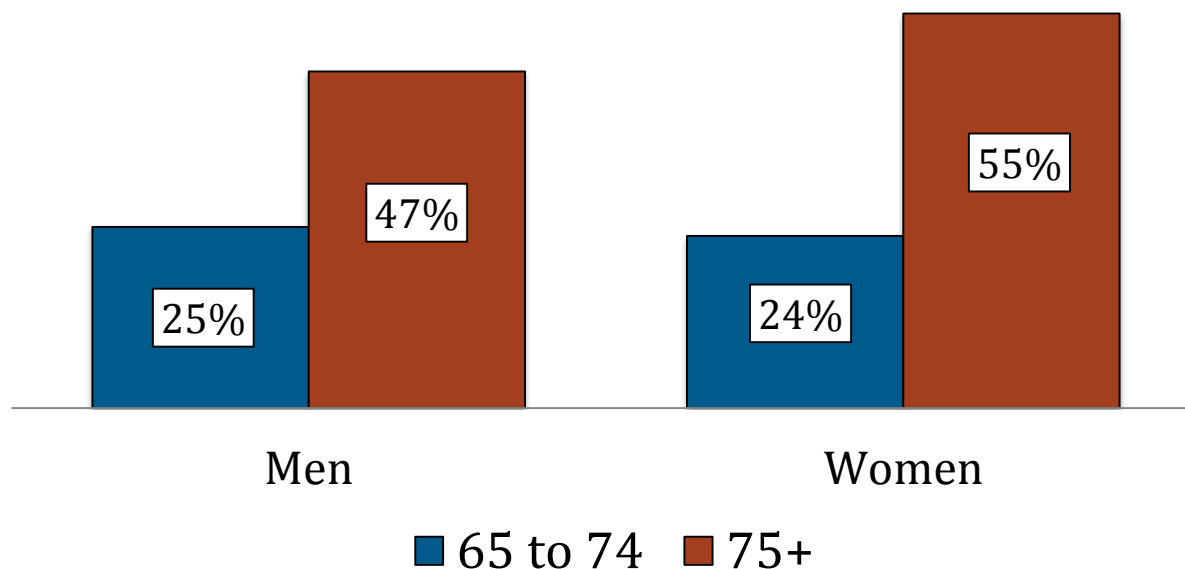
Note: Includes only community households, not group quarters such as nursing homes.

The economic profile of older Marion residents relative to younger residents is further illustrated in **Figure 10**, which shows that a sizable percentage of the older adult population is quite affluent—24% of Marion residents age 65 and older report incomes of \$100,000 or more. By comparison, almost half (48%) of households headed by individuals who are age 45 to 64 report this level of income.

Nevertheless, 46% of households headed by someone age 65 and older report annual incomes under \$50,000, including 35% with incomes under \$25,000. This compares with just 12% of households headed by individuals age 45 to 64 with incomes under \$50,000. Thus, there is likely a sizeable segment of Marion's older population that experiences economic insecurity or disadvantage.

Disability Status of Older Marion Residents

Figure 11. Percentage of Marion residents reporting at least one disability by gender and age group



Source: U.S. Census Bureau; American Community Survey, 2010-2012, Table B18101.

The increased likelihood of acquiring disability with age is evident in ACS data pertaining to Marion. Many older residents age 65 and older experience some level of disability that could impact their ability to function well and independently in the community. **Figure 11** shows the proportions of older adults who report some level of disability by gender and age. Among residents aged 65 to 74, 25% of men and 24% of women report at least one disability. The risk of acquiring disability is about double after age 75—in Marion, about 47% of men in this age group and 55% of women experience one or more disabilities. These rates of disability are comparable to those estimated for Massachusetts as a whole. At the state level, 22% of persons 65 to 74 experience at least one disability, as do 47% of persons 75 and older (not shown).

Among the different types of disability that were assessed in ACS, the most commonly cited difficulty was with ambulation (difficulty walking or climbing stairs)—23% of Marion residents aged 65 and older reported this type of difficulty. Other disabilities experienced by older Marion residents included independent living limitations (e.g., difficulty doing errands alone such as visiting a doctor's office or shopping; 18%), sensory problems, such as difficulty hearing (18%) or seeing (6%), cognitive difficulty (13%), and self-care difficulty, reported by 15% (ACS, 2008-2012, Table S1810). Individuals who have disabilities may have greater difficulty accessing town amenities due to mobility or transportation limitations; thus restricting their ability to participate fully in the community.

Focus Groups

Focus Group #1

Focus Group #1 ($N = 11$) consisted of public safety officials, and representatives of service organizations within Marion who have regular interactions with older adult residents in the Town. Specifically, this group included an attorney who specialized in elder law and estate planning; several members of clergy from various denominations; representatives from the police and fire departments and EMS; an outreach worker from the Town's COA; a services coordinator from a local housing community for older adults; and the Town nurse.

Among this group, the central issue of concern was the lack of adequate communication regarding senior issues within the Town. Discussants felt that departments and organizations within Marion needed to do a better job of communicating with each other. Many participants described the programs and services they were aware of in their respective departments/organizations, but which others in the group had not heard about. For instance, some in the group had not heard of the police department's "reassurance program" designed to provide "check-ins" with vulnerable and potentially isolated older residents. Participants stated that formal mechanisms for disseminating information are not widely or optimally utilized in the Town. One key way that information is shared between most organizations is via the Internet; however in many cases, websites are not kept up-to-date. Additionally, it was noted that there is inherent fragmentation of knowledge due to a lack of a central "clearing house" or "hub" for information contained on senior-related websites.

The consensus in the group was that an initial step for improving livability of Marion's older residents was improving connections and sources of shared knowledge between agencies and organizations that frequently interact with the Town's older population. By improving interdepartmental communication, focus group participants believed they would be better able to make appropriate referrals to programs and services that are available, while making more efficient use of their organization's own resources.

To this end, participants had several recommendations, including holding regular inter-organizational meetings to discuss issues related to seniors in the Town; better use of traditional forms of media (e.g., a newspaper column or regular feature disseminated in the local newspaper); and greater utilization of more modern modes of communication (e.g., e-mail, social media).

A related issue pertaining to communication involved the difficulty of making seniors themselves aware of the programs and services that are available for them in the Town. Most participants in the group agreed that departments and organizations needed to do a better job of reaching out to inform the community about what programs and services are available and to encourage their use. Participants believed this could be achieved, in part, by "framing" issues so they are about maintaining the current level of livability and improving quality of life, rather than identifying issues of older residents as "problems" to be solved. In communities like Marion, "Yankee pride" and a strong sense of self-reliance may often prevent many individuals who are eligible based on their age, and who could benefit from

participating, if they are perceived as being charitable services provided to address specifically age-related problems.

In general, participants in Focus Group #1 perceived current modes of sharing information with older residents as inefficient, somewhat disorganized, and piecemeal in fashion. Participants cited a lack of a widely known “central hub” for disseminating information to its target audience. In similar municipalities throughout Massachusetts, Senior Centers often fill this niche by providing residents with a physical space in which to congregate, organize, and participate in activities and programs. Senior Centers provide a physical location for “drawing in” residents who may not otherwise willingly access available services. Commonly accepted social and recreational activities that older people enjoy, and which are provided in a setting that is comfortable and with others who have similar needs and interests, may serve as a medium by which older adults in Marion learn about, and choose to participate in additional services that could be useful to them.

In lieu of a formal Senior Center, Marion relies primarily on its COA to operate as its organizing body for addressing senior-related issues. As the Town’s primary advocates for the older population, the COA exists to identify needs and to develop community resources, as well as provide information, referral, and outreach services. Many in the group believed better dissemination of information about senior services could be achieved if communication were somehow improved between the COA, the Town’s seniors, and the respective departments and organizations that serve older people in the Town.

Participants of Focus Group #1 acknowledged the enthusiasm and interest in the Town around senior issues, and they recognized a continued need for a strong voice and highly visible presence on behalf of the Town’s older adults, especially in the absence of a physical structure, or designated Senior Center to facilitate this purpose.

Beyond improving communication, participants in Focus Group #1 also acknowledged the inadequacy of affordable housing options for older adults as a significant problem facing the community. Although there are currently some options available for lower-income residents, viable alternatives are extremely limited for middle- or higher-income residents who wish to downsize within the community. In many cases, smaller housing units that are accessible are not available at all, and seniors may be forced to leave the area to find housing that is appropriate to meet their current level of need. According to participants in Focus Group #1, there is a considerable need for desirable housing options in Marion that are located within reasonable proximity to the services and amenities that older residents will need, and the socially vibrant village center.

Transportation was also noted in Focus Group #1 as a significant problem facing older adults in Marion. Relative to other places in Massachusetts, alternative modes of transportation that are available to older residents who do not drive or who wish to drive less frequently, are extremely limited. To compound this problem, commonly needed amenities tend to be arranged around the perimeter of the Town, beyond the range of many non-driving older people who live centrally or on the opposite edge of the Town. For instance, there are no centrally located grocery stores or pharmacies that are easily accessible to many older residents. In some cases, current zoning policies have prohibited commercial development

in the historic areas of Town where many older residents live, according to participants in Focus Group #1. Whereas preserving the Town's historic integrity was cited as a major priority for the vast majority of people who live Marion, Focus Group #1 also acknowledged the problems that acting on that priority could raise, if adequate transportation options are not available.

Currently, the COA operates 3 vans that transport seniors to medical services, shopping, and other destinations in the Town, and has three paid drivers available to operate its fleet. Because COA vans are essentially the only "public" mode of transportation available to older people in the Town, participants of Focus Group #1 felt that resources should be increased to encourage their use.

Unfortunately, according to participants, disuse of transportation services provided by the COA is often due to negative perceptions that older residents have about using publically available transportation services. Many feel that services are not for them, or that they can be better utilized by their fellow residents who have fewer alternatives and resources available to them. It was the consensus of the group that a marketing campaign could be utilized to combat inaccurate perceptions held by many Marion Seniors, and to make usage of COA vans more commonly accepted among all older residents.

Focus Group #2

Participants of Focus Group #2 ($N = 12$) were chosen to represent community organizations that enrich, educate, or engage older community members. Specifically, the group included two local merchants from the Village Center; a representative from the Historical Society; a representative from the Tabor Academy (a private boarding school in the Town); a representative from the Public Library; representatives from the Town's chapter of the Veterans of Foreign Wars and the local YMCA; a representative from a local facility that provides community nursing services and hospice care; the head of the Town's recreation department; and other interested members of the community, including a representative from the Friends of the Marion Council on Aging.

The discussion began by talking about the importance of the village center as an asset for Marion, with respect to its aging population. As a focal point in the Town, the village center contains various shops, a bookstall, multiple restaurants, the post office, and the historical society. In many respects, for those who live nearby, the village center's setting is optimal for aging in place because residents can access many of the things they need locally without having to go far, particularly during a snowstorm or emergency. According to participants in Focus Group #2, most residents feel very strongly about maintaining the vibrancy, tradition, and historic and sentimental allure of the village character and its center.

At the same time, discussants believed it is important to modernize the Town to ensure that amenities are accessible to the growing aging population and other residents who have disabilities. Though much of the downtown historic area remains inaccessible, participants in Focus Group #2 believed that the Town has made good faith efforts to broaden access to the Town's buildings for residents with different physical capacities. For instance, the Town recently took great pains to ensure that the "Music Hall" building, a distinctive structure in

the village center (where the Focus Groups were held) was handicapped accessible, while striving to retain its historical integrity. However, in some cases broadening access to buildings remains a challenge due to the high cost burden associated with modifying or retrofitting buildings and the limited resources that are available to do so. Nevertheless, participants in Focus Group #2 recognized accessible town amenities as a necessary component for those who wish to age in place. Participants remained concerned about the future of the village center, especially because many of the shopkeepers themselves are also aging and the fates of their businesses are somewhat uncertain.

When asked what attributes would need to be present to make Marion into a community that is more “age friendly,” many familiar issues were raised. For instance, lack of appropriate housing was mentioned as one of the largest barriers to staying in the Town in the future. The relatively limited housing stock makes downsizing within Marion very difficult as people age and their families and households become smaller.

Currently, it is very difficult to find suitable housing options in Marion with first floor bedrooms (a quality that many individuals who have difficulty climbing stairs may desire). For individuals who have extensive care needs, or who can no longer live independently, there are also very few options. Within Marion there is just one nursing home but no assisted living facilities or continuing care retirement facilities are available.

In other surrounding towns, bylaws have been proposed with provisions for senior housing or 55+ housing, and zoning accommodations have sometimes been granted for developers to build these types of senior housing units. Some discussants in Focus Group #2 felt that similar options may be possible in Marion. However, it was noted that relative to its neighboring towns, Marion has little space available for new developments, and planning to build new structures may be challenging on many fronts. As a result, some focus group participants concluded that a good strategy would be to renovate old buildings and include universal design features that facilitate aging in place.

Transportation was also raised as an important consideration in creating an age-friendly town. According to participants in Focus Group #2, the only viable options currently available to older adults in Marion, beyond driving themselves, are the COA vans that are in use. Ridership has increased exponentially in the past five years and demand for the services is expected to continue growing as the older population expands. Nevertheless, many participants in Focus Group #2 felt the COA vans were not operated as efficiently as they could be. One participant offered the observation that although the largest van can accommodate up to 14 passengers in a trip, many times trips are limited to single riders while others sit waiting.

Thus, many Focus Group discussants stated that it should be a priority to improve the operation of the vans and to search out innovative ways to maximize transportation services in the Town. One participant suggested utilizing at least one of the vans on a regular route, which circled from the Town’s perimeter and into the village center. Another option that was raised was the use of cars, which if operated by volunteers or supported and coordinated by the COA, could be utilized to handle requests for a small number of passengers. Regardless of which options are eventually chosen, it is clear that the Town must make a plan to meet

the vital transportation needs of older residents, if they are expected to remain in the community.

Finally, some participants in Focus Group #2 were emphatic about the need for a Senior Center in Marion. In communities that have them, Senior Centers are an important resource, often serving as the central point of contact for older residents and their families who seek services that promote independent, healthy, and fulfilling lives. In addition, Senior Centers provide a regular physical space where administrative functions can take place and multiple programs can be conducted.

Currently, in Marion, an impressive number of programs and services are administered in locations throughout the Town (e.g. senior wellness programs offered at the YMCA). Nevertheless, many in Focus Group #2 believed that by having no central location from which programs are regularly provided, services could be perceived by many older residents as fragmented and confusing.

Participants in Focus Group #2 believed that if a Senior Center were opened, it would quickly become a much-needed “central hub” of activities, information, advocacy, and innovation for seniors in Marion. Early discussions exploring the feasibility of opening a Senior Center have occurred and multiple options have been introduced; however, to move the process forward, continued strong advocacy by the COA and other organizations that serve older adults, as well as self-advocacy by older adults themselves, is necessary.

Focus Group #3

Participants in Focus Group #3 (N= 9) consisted mostly of long-term residents of Marion who are age 50 and older, and who are current or prospective consumers of programs and services for older people in the Town. Several participants were younger caregivers for aging family members or friends, and sought services in this capacity. Input from this group was solicited in order to acquire a *primary* stakeholder perspective about what works and what does not, with respect to aging in place in the community.

Initially, participants were asked to reflect on the attributes of Marion that make aging in place possible, or desirable for them. Several mentioned their sense of safety and security in their neighborhoods as an important factor associated with their quality of life and the livability of their community. According to Focus Group participants Marion is perceived as a safe and secure environment in which to age, in part due to programs and services sponsored and/or provided by emergency responders in the Town. Examples that were provided included the reassurance program in which police officers check in on frail seniors who fail to call in at regularly scheduled times. Similarly, the fire department operates a program in conjunction with the COA, called “File for Life” in which pertinent medical information is made available in red magnetic plastic folders provided by the COA that can be easily accessed by first responders in the event of an emergency.

In addition to a sense of safety, the livability of communities is also influenced by the degree of interdependence between residents—that is, the degree to which neighbors feel they can rely on each other for help, as well as their willingness to provide help when

others need assistance. Participants in Focus Group #3 suggested that Marion is a very close-knit community, and that they felt they could rely on their neighbors in the event that they needed help with something. This general sense of interdependence between neighbors bodes well for residents who wish to age in place, and is an important resource for older adults in Marion, since neighbors are often the closest and most accessible human resource when extra help is needed.

Finally, participants in Focus Group #3 cited the wide variety of programs and services that are available from agencies and organizations throughout the Town as being instrumental to them, in regards to staying in their homes as they age. The services that are coordinated and often provided by the COA, including nutrition, transportation, and outreach services are highly valued by many older residents. These services may provide the only access that some seniors have to necessities that support their health, wellness, and independence. Similarly, services that are organized by town entities, such as those provided by the library to deliver materials to the homes of older adults, or events sponsored by the Town, such as music concerts or theater performances are also appreciated, and improve quality of life for many older people and presumably younger people in the Town.

Going forward, one focus group participant, who provides care to her octogenarian parent advised that regardless of whether services are centralized in a senior center or continue to be provided as they currently are, they need to be purposeful and engaging in order to be accepted and utilized by older residents. This participant also stated, and others agreed, that finding ways to involve younger generations, whether through formal intergenerational programs, or through an informal volunteer network could be beneficial for shaping positive relationships between Town residents of different ages.

When asked to identify their biggest challenges to staying in their homes and/or the community, participants in Focus Group #3 identified many of the same difficulties that were cited in the two earlier discussions. One participant mentioned the somewhat limited transportation services, reporting that the COA vans do not provide rides to town events and activities, as may often be desired. Availability of housing options for mid- and high-income residents was also a concern that was voiced in the group, along with concerns about being able to keep up with increasing property taxes, and affording the regular maintenance that home-ownership requires. Some participants in Focus Group #3 stated that they did know where to get help when they needed it, and that lines of communication between agencies that coordinate and provide services to older adults in the Town were in need of improvement.

In summary, results of focus groups conducted for this study reflected many of the commonly cited issues found in the literature pertaining to aging in place. Namely, participants in all three focus groups were concerned about the availability of adequate transportation and housing options that could accommodate their changing needs as they aged in Marion. In addition, all participants saw great value in supporting the array of services that help to keep older individuals healthy and independent in their homes, and in communicating the mission of the COA broadly to the diverse pool of service providers, first responders, town merchants, and older adults themselves in the Town.

Community Comparison

Town of Marion Council on Aging

The Town of Marion COA plays a central role in safeguarding the wellbeing of the older residents by coordinating activities that appeal specifically to older adults. The Marion COA serves as key point-of-contact for seniors in the community who desire and need programs and services that are interesting and enjoyable, and that promote their personal health, growth, and social engagement.

According to the COA's annual report to the Town's Selectmen, in Fiscal Year (FY) 2013, the COA provided services to 1,125 older residents (duplicated count - an individual is counted each time they use one of the COA services), including 3,487 meals and 6,908 van rides. The Marion COA strives to enhance the quality of life for all members in the community by facilitating an array of educational, recreational, and cultural programs and activities. The COA also administers or refers services to older residents and their families that promote physical and emotional wellness, and provides leadership within the community around senior issues by interacting with other town offices, and serving as a resource to residents and organizations.



Within Marion, a variety of programs and services are provided by a mix of organizations and coordinated through the Marion COA. Programs and services are designed to support fitness, health and nutrition, education, music and arts, and entertainment. In addition, the COA supports access to social service programs through referrals to home care services, fuel assistance and utility discount programs, counseling services, and housing support programs. Other specific programs that older residents have available either directly or through referrals by the Marion COA include:

- *Friendly Visitor Program:* Provides screened and trained volunteers to visit seniors in their homes, who are isolated, lonely, and/or have limited family or community support;
- *Shine Program:* Provides free health insurance information, assistance, and counseling to Medicare beneficiaries of all ages and their caregivers;
- *Housing Applications:* Provides assistance filling out applications for housing communities in the Town for older adults;

- *Outreach Services:* Provide one-on-one assessment of an elder's situation, explains community programs and benefits, assists with applications to needed programs, aids elders in their search for services, and acts as an advocate and support for elders in need. Also assists elders in crisis and is a mandated reporter for suspected elder abuse, neglect, and financial exploitation;
- *Legal/Professional Services:* Provides referral to free legal information and advice on civil matters to people 60 years of age and over who live in Marion; tax assistance;
- *Nursing/Medical Services:* Provides health screening (e.g., blood pressure, blood sugar, tuberculosis), health and nutrition information and counseling, and adult immunization; podiatry clinic; medical equipment loans; and flu shots;
- *Meals on Wheels:* Provides nutrition support—one meal per day, five days a week (Monday through Friday) to those Seniors (60 and older) who request it;
- *Transportation Programs:* Provides essential transportation for those in the community who do not drive themselves and do not have family available to assist them. Administered as a volunteer program coordinated through the COA, and through three part-time paid drivers;
- *Physical Activity Programs:* Coordinates low-impact aerobics and stretching classes in locations throughout the town;
- *Safety/Reassurance Programs:* Coordinates with Marion Police Department to provide reassurance calls to frail residents; File for Life magnets; Smart Alert Beacon Bulbs; Safe Return registration for Alzheimer's patients, and the "Get Smart" series of lectures on topics related to weather emergencies, falls prevention, etc.;
- *Miscellaneous Services:* Coordinates with Public Library for home-delivered library books; Senior discounts; and provision of emergency funds for residents with unexpected food, utility, or medicine needs;
- *Senior Work-off Program:* Provides seniors with reduction in real estate taxes in return for work in several town organizations, including Sippican School, Elizabeth Taber Library, the Police Department, Assessor's Office, Public Works, the Council on Aging, and the Board of Health;
- *Monthly Newsletter:* Provides local seniors with information about available programs and services via the *Sippican Soundings* newsletter, which is written and published by COA staff; and
- *Website:* Maintains up-to-date website on the Town's server, listing current services and programs, and providing links to relevant state and national aging services.

In general, the Marion COA plays an instrumental role in providing key services to older adults in the Town, or directing older individuals to those services. Currently, the COA is able

effectively to fill a crucial niche, despite their limited staff and funding resources; however, as the number of older residents increases, the need for resources dedicated to this segment of the population will also grow.

Councils on Aging in Comparable Communities

Within Massachusetts, there are 30 towns that have populations that are comparable to Marion in size. Towns with populations between 4000 and 7000 residents can vary widely with respect to how active their respective Councils on Aging are in providing programs and services or coordinating services that are provided by other agencies or organizations within their towns. Of the towns that are similar to Marion in size, about one-third have “minimally active” Councils on Aging. Like Marion, most of these communities do not have senior centers. Minimally active Councils on Aging typically offer only limited programming in different locations in the town. Their physical presence in the community may be limited to a small office, if space is dedicated at all. Often minimally active Councils on Aging maintain little or no web-presence to inform residents about their activities and may only do limited advertising of their programs and services in other media formats.

Another one-third of communities that are similar in size to Marion are “somewhat active.” Of these, a small number have senior centers, or have some other dedicated space (such as shared space in a community center). Somewhat active Councils on Aging provide or coordinate limited activities on a daily basis. They may also have resources available to provide sparingly, home-delivered meals or meals served in a congregate setting.

Finally, the last one-third of towns that are comparable in size to Marion have Councils on Aging that are “very active”. All of these communities have senior centers that make available an array of activities on a daily basis. They may provide meals to older residents several times per week, and some have resources available to provide adult day services and transportation options.

Within this spectrum, the Town of Marion’s COA falls among other towns that maintain “minimally active” to “somewhat active” Councils on Aging. There are many factors that influence the level of activity in a given community, foremost among them being the amount of resources that are dedicated to the providing services to older residents. The level of funding received by Councils on Aging from various state and local sources depends on the proportion of residents in the town that are age 60 and older. Socioeconomic factors, including household income levels, often differ widely in communities throughout Massachusetts, and the resources that towns make available to serve older people can vary drastically depending on what other needs are present in the community. Generally though, towns with larger shares of older residents must dedicate relatively greater resources to assure that seniors are able to remain safe, healthy, and independent in their homes and communities.

Clearly, small towns must take varied approaches to offering services and programs to older adults who reside in their communities. **Table 2** shows towns that are similar to Marion with respect to their population size and the share of senior residents in each town. With the exception of Marion, all towns in **Table 2** have Senior Centers that are run by their Council

on Aging. Senior centers in Chatham, Rochester, and West Bridgewater are each freestanding structures; whereas, the Senior Center in Mattapoisett is abutted by an elementary school, and Cohasset's Senior Center is housed in a community center (though they are in the process of building a new singularly dedicated space).

The Senior Center in Chatham provides lunch every Monday, and Senior Center staff organizes between 2 and 6 specific activities per day, in addition to programs that are offered in partnership with other groups in the community. Cohasset provides an array of transportation services, including trips to medical appointments, shopping, and to various places around town. Mattapoisett provides a full schedule of daily activities, including exercise programs, speakers, and day trips into the surrounding community. Rochester is able to provide breakfast to seniors 5 days per week, and provides lunch to senior participants 3 days per week. In addition, Rochester supports 4 or more activities per day, as well as organizing regular off-site trips.

Table 2. Total population and percentage of people aged 60 and older in Marion, and surrounding communities

Town	Population	Percentage Age 60+
Marion	4,907	30%
Chatham	6,125	48%
Cohasset	7,542	22%
Mattapoisett	6,045	28%
Rochester	5,229	21%
West Bridgewater	6,916	24%

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

West Bridgewater is the only Council on Aging included in **Table 2** that provides some kind of senior adult day program. Adult day programs offer support services in a group setting within the community. Many similar programs offer support with activities of daily living along with social activities. The supportive adult day program in West Bridgewater provides recreational and social opportunities in a structured environment, including transportation services and meals.

Summary and Recommendations

The Town of Marion's older population has grown dramatically during the last decade. The number of residents who are age 60 or older has increased by about 24% between 2000 and 2010, and today, more than 30% of Marion residents are included among that age group. On the basis of this unprecedented growth, demand for programs and services that are needed

by older adults in Marion is greater than ever before. Moreover, demographic projections suggest that the need for services that facilitate aging in place will continue to increase for years to come.

The purpose of this study was to explore the needs and preferences of Marion's older residents. To inform the Town's planning process, the FMCOA, along with the research team from UMass Boston solicited input from older Marion residents, as well as service providers in the Town who commonly have interaction with older adult residents. Assessment methods were designed to identify areas of concern with respect to aging in place, and to provide a context for planning to address future aging-related needs of the Town's population.

Results of this study suggest that Marion's residents are committed to staying and aging in their community as long as possible. Many seniors in the Town are long-time residents who enjoy Marion's character and value its cultural and natural amenities. Older residents of Marion have a strong sense of community and interdependence with their neighbors. This trait is seen as one of the Town's many strengths that can be drawn upon in the future to address changes that will accompany the aging of the population.

Nevertheless, as is true in most towns, there are qualities of Marion that often challenge the ability of older residents to remain in the community as they age. Issues related to inefficient or inadequate transportation; limited housing options to address changing physical health, family size, economic status, and living preferences; and lack of adequate services or knowledge about available services are common in Marion. Thus, there are challenges inherent in maintaining the close-knit character of Marion, even as the Town evolves to accommodate the needs of its older population.

Participants in this study perceived Marion to be a resource-rich community where it is possible and desirable to successfully age in place. However, they also acknowledged the need for strong leadership moving forward that will be central in advocating within the Town for senior-related issues. The Town of Marion's COA is a central node in a diverse network of agencies and services that support the Town's growing older population. As such, the role of the COA in advocating and providing leadership is paramount to the Town's success in maintaining its high degree of livability and for continued development of its age-friendly attributes in the future.

To serve in this role, the COA must be highly visible and proactive in encouraging and facilitating cooperation and communication between agencies. It must also prioritize community inclusion in programs and services by communicating its mission widely to a range of stakeholders throughout the Town.

Results from focus groups conducted for this study suggest that a major barrier to utilization of services may be a lack of knowledge about what is available or how to access services. Residents are often not well informed about services and programs for which they and their families may be eligible. In addition, the service providers that we spoke with sensed a fragmentation of information, which if addressed creatively by the community, could result

in a service-provision system that is more efficient and better equipped to serve the large numbers of older adults who will reside in Marion in the future.

Older Marion residents are fortunate to live in a community that recognizes its ongoing responsibility to strengthen senior services and to provide opportunities for older residents to participate and remain engaged in the community. Nevertheless, planning must continue with an eye toward addressing many issues raised in this report, including wider availability of transportation options; adequate, desirable, supportive, and affordable housing options; better access to appropriate services and assistance when needed; and facilities that can accommodate the changing needs of a growing senior population. In addition, we offer the following specific recommendations, based on our research, to assist the Town of Marion COA in planning to achieve their mission and to meet their goals.

- Begin to plan for substantial growth of the senior population in coming years. By 2030, residents who are age 60 and older will constitute more than 40% of the entire population of Marion. Recognize that expanding numbers of senior residents will impact virtually every aspect of the community, not just the COA.
- Promote quality of life and social engagement among older people by supporting convenient, affordable, and reliable local transportation options for residents who are unable to drive safely or who prefer alternatives to driving themselves, including walking.
- Explore and encourage the development of accessible neighborhoods and community structures for seniors that include attributes such as universal design to facilitate aging in place.
- Develop creative solutions to address the dearth of supported and affordable housing in Marion, including reviewing zoning regulations, and exploring cutting-edge senior housing models (e.g., The Village model).
- Use planning for the expanding senior population as an opportunity to promote livability of the community for all residents. Protecting natural amenities, facilitating walkability, and promoting programs that help seniors maintain their property are ways in which the entire community may benefit by making Marion even more “livable”.
- Recognize as a significant priority the need to expand knowledge of existing COA programs and services within the community. Engage in aggressive outreach to make residents of all age groups aware of the COA and its mission.
- Capitalize on already existing programs that are available through different departments and organizations throughout the Town—and strive to raise awareness of stakeholders, including other service providers and seniors (and their families) about what is already available.
- Seize the opportunity to design senior services and programs that will support the active, healthy-aging goals of seniors. Prioritize the most valued and needed services and

programs, and let those programming needs direct discussions about space and staffing requirements.

- Plan to expand services to accommodate the increased number of Marion seniors who will seek services to help them age in place. Improvements in space, staffing, services and programming will generate even *higher* rates of participation, with the result that an overly modest allocation of resources will be outgrown quickly.
- Consider and encourage new and innovative ways within the Town to support the COA, to ensure its vitality into the future, and to facilitate its mission to advocate for Marion's older adult residents.

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Appendix A: Focus Group Protocols

FOCUS GROUP #1: Caregivers, public safety officials, representatives of service organizations

October 28, 2014: 10:00 am

Sample prompts:

- *What can you tell us about your experiences living and aging in Marion? How long have you lived or worked here?*
- *What aspects of aging in Marion do you think are most important for organizations working in Marion to know about and understand?*
- *What changes have you seen in the last 5 years that might have affected the need for senior services in Marion?*
- *What could the Town do to better support residents' goals to age in place?*
- *What is missing from the community that would support those goals?*
- *Do you see needs among seniors in the community that are not being addressed adequately?*
- *What can you suggest about how organizations and offices within the Town could work together more effectively to respond to the aging of the Marion population?*
- *Do you have anything else to add?*

FOCUS GROUP #2: Representatives of community organizations that enrich, educate, or engage community members

October 28, 2014: 2:00 pm

Sample prompts:

- *Could you tell the group about the nature of your contact with the older population of Marion?*
- *How is the aging of Marion's population shaping your organization's planning?*
- *What kinds of amenities belong in an age-friendly community?*
- *What does "age friendly community" mean to you?*
- *Does Marion meet your definition of an "age friendly community"? [If NO] What is missing?*
- *What should Marion's priorities be moving forward with respect to preparing for its aging population?*
- *In your opinion, what are some of the unmet needs of the older population in Marion?*
- *Do you have anything else to add?*

FOCUS GROUP #3: Consumers, residents age 50+

October 28, 2014: 4:30 pm

Sample prompts:

- *Please share with the group something about your experiences living in Marion. How long have you lived here? What are your plans with respect to staying here as you get older?*
- *Please share your thoughts about what is working well for residents of Marion who are aging in place? What are the good things happening in Marion that contribute to quality of life for older adults?*
- *What about the challenges and gaps for Marion's seniors? What do you see from your experience that doesn't seem to be working well?*
- *In your opinion, what are some of the unmet needs of the older population in Marion?*
- *Do you have any concerns about the future aging of Marion's population? Tell us about those concerns.*
- *What aspects of the aging population of Marion are most important for organizations working in Marion to know about and understand?*
- *What changes have you seen in the last 5 years that are affecting the need for senior services in Marion?*
- *Do you have anything else to add?*