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Envisioning an Age Friendly Stoneham

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Envisioning an Age Friendly Stoneham

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Commissioned by the Town of Stoneham

Center for Social and Demographic Research on Aging
Gerontology Institute
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Caitlin Coyle, PhD and Mary Krebs, MS are primarily responsible for the contents of this report. Other contributors include Rebecca Mailman, Kailyn Fellmeth, and Ceara Somerville. We would like to thank Maureen Canova, Director of the Stoneham Senior Center and Dennis Sheehan, Town Administrator for their leadership and guidance on this project. As well, we would like to thank Erin Wortman, Stoneham's Director of Planning & Community Development and Stoneham Council on Aging Board of Directors: Kathleen Hudson (Chair), Maureen Buckley, Kathy Care, Jane DiGangi, Tom Flynn, Bill Kelly, Denise Kneeland, Traci Mello, Connie Rosa, Walt Wolonsavich, Mary Zatta, and Marge Neylon. This work could not have been done without the residents who participated in a focus group or completed a questionnaire. We are grateful to them as well as the many community stakeholders and municipal employees who gave of their time (during a very challenging time) and expertise as to how Stoneham can evolve to being a more age friendly community.

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Introduction

Tucked between two major highways, about nine miles from Boston, the Town of Stoneham is currently home to more than 22, 000 residents, 27% of which are age 60 and older. According to projections created by the Donahue Institute at the University of Massachusetts, a trend toward an older population in Stoneham is expected in future decades. Donahue Institute vintage projections suggest that by 2035, more than one out of each three Stoneham’s residents will be age 60 or older—28% of the town’s population will be between the ages of 60 and 79, with an additional 10% age 80 and older (see **Appendix A**). Occupying just about 6 square miles, this densely populated community is rich in resources for livability. Aside from proximity and transportation to a major metropolitan city with world-class healthcare and education, Stoneham is home to idyllic New England features (a Town common, the Stone Zoo, the Stoneham Theatre on Main Street, and a daily “Nine O’Clock Horn”¹) as well as a plethora of shopping, healthcare, and dining opportunities within the Town limits. Some could argue that Stoneham “has it all”.

The Town of Stoneham and the Stoneham Senior Center have led the commitment to becoming a more age friendly community and in 2018, the Town was accepted into the WHO’s global network of age-friendly cities and communities. The significance of this event is that the Town was willing to identify the strengths of Stoneham as a community to grow up and grow old in, but also to acknowledge where there is room for improvement. In January 2020, the Council on Aging invited collaboration from the Center for Social & Demographic Research on Aging (CSDRA) in the Gerontology Institute at the University of Massachusetts Boston to initiate a needs assessment and explore the age-friendly community framework, as outlined by the World Health Organization. The purpose of this report is to document results from the needs assessment and lay forth recommendations as to how Stoneham can take action to advance their goals of becoming a more age friendly community.

The project was planned to be completed during the Spring of 2020, but the COVID-19 pandemic caused these plans to change. In order to accommodate public health recommendations and capacity of the Town’s leadership, the scope of this project was adjusted. Specifically, 2 community forums, initially scheduled to be conducted in-person in March and April 2020, were forced to be moved to a virtual format as were the facilitation of 3 focus groups. The purpose of this report is to share highlights from these components of the needs assessment and to provide a foundation for future input from the community and future age friendly planning efforts.

¹https://en.wikipedia.org/wiki/Stoneham,_Massachusetts#:~:text=The%20Nine%20O'clock%20Horn,for%20a%20period%20of%20time.

The Age-Friendly Community Framework

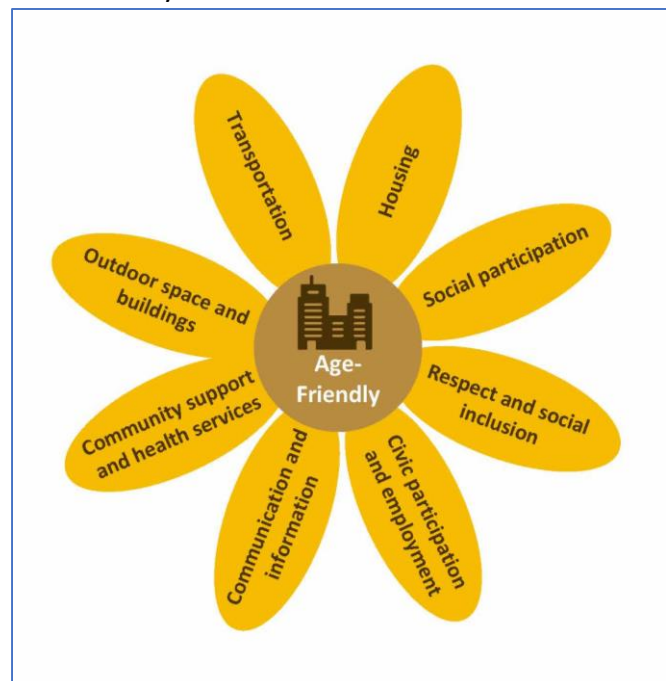
Communities throughout the nation are pursuing new strategies to promote health and quality of life among their residents. Towns and cities are embarking on community-engaged initiatives meant to identify and improve local amenities and services that have a meaningful impact on resident well-being, based on WHO's "Age-friendly communities" framework, as well as related models such as "livable communities" or "lifelong communities."

An "Age-friendly" Community, as described by WHO, is one in which people participate in activities, are connected to their neighbors, remain healthy and active, and feel they belong—no matter their age. Through planning, taking action, and evaluating progress, communities all over the world are taking steps to improve their social and physical environments as a strategy for promoting health and well-being throughout the life course. The Age-friendly framework describes focus areas for communities and lays out a process intended to ensure repeated consultation with the community, collective reflection, action and evaluation. WHO also hosts an Age-friendly Network, established in 2010 as a means of facilitating the exchange of information among communities. Many cities and towns in Massachusetts have already joined the Age-Friendly Network (<https://extranet.who.int/agefriendlyworld/who-network/>), and in his January 2018 State of the State speech, Governor Baker announced that Massachusetts joined the network of Age-friendly States, signaling broader commitment to the principles that support aging in community.

Domains. The Age-friendly framework includes eight domains of community life that intersect with livability, accessibility, and the ability to thrive within the community (see **Figure 1**). Within each domain, elements are identified that are relevant to affordability, appropriateness, and accessibility.

The description of Age-friendly features, and the experiences of communities throughout the world that are using the framework, make clear that each community will conceptualize this effort in a somewhat unique way. Local conceptualizations will shape the initiatives, programs, and partnerships put in place;

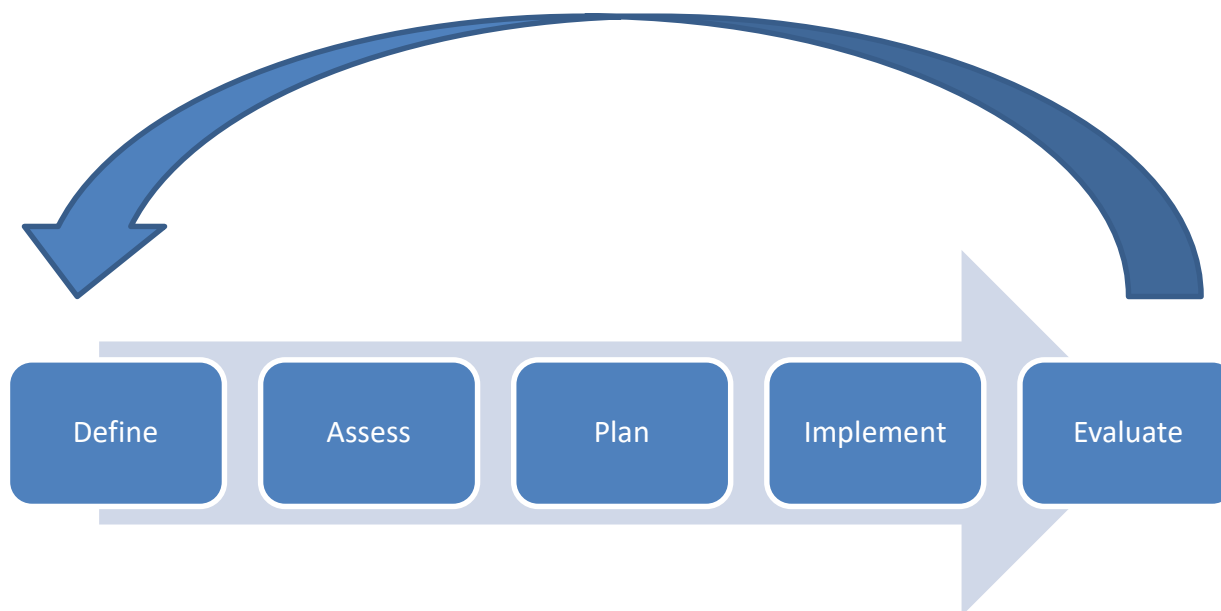
Figure 1. Eight Domains of an Age-Friendly Community



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

they will also shape the research and measurement used in support of the effort. Ultimately, the first step involved in pursuing an Age-friendly agenda is to define and assess environmental features relative to the characteristics and resources of residents actually living in the community. Based on what is learned in that initial step, a community will develop an action plan designed to address the most pressing or most actionable issues identified through the needs assessment process. In subsequent years, as the Action Plan is implemented and evaluated, the broad goals of the Initiative may be modified in a continuous improvement cycle (see **Figure 2**). When working towards building an Age-friendly Community, it is helpful to keep in mind that not all domains must be addressed in a single cycle. A community may wish to select domains in which they are most prepared to make progress, or which are identified as priority areas by stakeholders.

Figure 2. Process for Developing an Age-friendly Community



Methods

The contents of this report are based on a review of Stoneham’s demographic features, six key informant interviews, a virtual community forum, three virtual focus groups, and a document review all conducted by researchers at the Center for Social & Demographic Research on Aging (CSDRA) within the Gerontology Institute at the University of Massachusetts Boston (UMass Boston). Each of these methods was designed and guided with the specific goal of capturing perspectives on the needs of Stoneham’s residents as they anticipate growing older in Town.

Demographic Profile

As an initial step toward understanding characteristics of the Town of Stoneham’s population through quantitative data, we generated a demographic profile of the Town using data from the decennial U.S. Census and the American Community Survey (ACS)—a large, annual survey conducted by the U.S. Census Bureau. For purposes of this assessment, we primarily used information drawn from the most current 5-year ACS files (2014-2018), along with U.S. Census data for the Town of Stoneham and projections made available through the Donahue Institute at UMass Boston and the Metropolitan Area Planning Council. Data presented here describe recent and anticipated changes in the age distribution of the Town of Stoneham, along with selected characteristics of the current senior² population of the community.

Community Forum

In September 2020, a videotaped community forum presentation was distributed community-wide. This presentation included a brief description of the eight features of an age friendly community as defined by the WHO and asked viewers to share their experiences living in Stoneham as they relate to strengths, challenges, and suggestions for aging in Stoneham via write in questions made available online. Responses (n=60) were then coded by consensus for emerging themes by a team of three members of the research team. Of note, the virtual nature of the forum and response collection was designed to replace an in-person public event. The in-person forum was cancelled in response to the COVID-19 pandemic.

Key-informant interviews. Six key-informant interviews were conducted during March and April of 2020 to identify ways in which services are provided to older adults in Stoneham and to gain perspective from these community leaders. Interviewees included: The Chair of Stoneham’s Select Board, the Director of the Stoneham Senior Center, the Chiefs of Police and Fire, the Town Planner, and a Select Board member who also serves as Office Assistant in the Police Department. The conversations focused on the interviewees’ reflections relating to features of an age friendly community, how the growing size of the older population is impacting Stoneham, identification of the unmet needs among older adults in the community, and thoughts about potential solutions to support a more livable Stoneham.

Covid-19 follow-up key-informant interviews. Five follow-up interviews were conducted with the key-informants during late July and August of 2020 to understand challenges faced during the pandemic and how those insights fit into Stoneham’s goals for an age friendly community.

² The term “senior” is used to refer to anyone age 60 and older. This usage aligns with the language included in the Older Americans Act. Where available, data are presented for the age 60 and older population; however, in some cases, existing data are only available for the population 65 and over.

Focus Groups. Three focus groups were conducted in October 2020. The groups included stakeholders and/or residents who were recruited by members of the Stoneham Council on Aging (N=19). Participants in the 90-minute sessions were representatives of local organizations and Stoneham government departments which all have regular interactions with Stoneham’s older residents. Additionally, several Stoneham residents participated in one focus group. Each of the three sessions took place via Zoom videoconferencing.

Document Review. Several Town of Stoneham key documents and appendices were reviewed offering a broad array of findings. These include: 1) Complete Streets Policy (2017), 2) Economic Development Self-Assessment Tool (EDSAT) Report (May 2017), 3) Stoneham Community Development Corporation – current projects, 4) Stoneham Town Center Complete Streets Strategy Final Report (2016), 5) Open Space and Recreational Plan – Update (2018) with appendices A-C, 6), 7) Planning & Community Development – Overview & Mission (update for Tri-Board 2018), 8) the Planning and Community Development Department 2019 Annual Report, 9) the Stoneham Town Center Strategic Action Plan (2014); and 10) results of a recent survey of senior center attendees (N=95).

Results

In discussing results, findings are presented by domain starting with the features associated with the built environment (housing, transportation, and spaces and buildings), followed by domains

“There are a lot of people here living in their homes, surviving, but not thriving.”

—Key Informant

involving the availability of appropriate services and supports, social participation, involvement in work and civic life, information access, and inclusiveness of the community. Within each domain, findings are presented drawing on all sources of information gathered for this study. In many cases, related observations emerged from multiple sources in our data collection – from community forums, focus groups, and key-informant interviews, and that information is organized in an integrated way. We make every effort to be clear about the source of the information but we do not explicitly segment off information by source, as our goal is to emphasize common findings that emerge across sources. Quotations placed within callouts are respondent comments drawn from responses to the community forum or from key-informant interviews.



Age Friendly Housing Needs in Stoneham

Our homes serve not only as a source of shelter, but also as the platform for maintaining social networks and connecting us to neighborhood amenities. Access to affordable and appropriate housing is linked to well-being across the life-course; accordingly, housing is an important issue for age-friendly communities.

Overall, housing is consistently identified as a pressing issue facing Stoneham as it proactively plans for a future where households led by householders age 65 and older are expected to increase from the current level of 29%, to comprising 40% of Stoneham’s housing population by the end of this decade. Key informants echoed the need for housing solutions presented in Stoneham’s comprehensive housing needs assessment conducted in partnership with MAPC. Similar and additional unmet housing needs were identified by focus groups, key informant interviews, and by forum respondents. Concerns shared by younger seniors and older residents were described as active or anticipated decision points regarding whether to remain in their existing homes, take the chance of finding an existing, smaller, and more affordable down-sizing option in Stoneham, or move to another community offering a better fit for their evolving circumstances.

“Elderly folks are in a hard position where they cannot pay taxes and utilities but simultaneously do not know how to go about selling their homes, packing, and moving.”
—Focus Group Participant

Need for Diversifying Housing Stock

Although Stoneham has proactively increased the housing supply and worked to keep costs of housing lower compared to surrounding towns, housing demand for low-to-mid-income status residents exceeds available housing stock. Some younger seniors relayed several anecdotal stories describing the need to proactively sell their homes after recognizing an inability to maintain these larger residences moving forward. Others detailed stories about how lifelong residents who raised their kids here have been forced to move out of the community. A common thread expressed is a concern for ending up with excessive living space that requires levels of maintenance that these older residents are not prepared to do. Mechanisms identified for diversifying housing stock include:

- Revisit Stoneham’s zoning bylaw regarding accessory dwelling units, two-family homes, garden houses, tiny homes, and apartments and consider expanded allowable uses.

- Make updates to senior public housing to create more desirable and conducive places to age
- Continue implementation of recommendations made in the housing production plan
- Consider ways to integrate housing with services, for example, make social work services available to residents of public housing and other rental properties.

Need for Offsetting Housing Costs

Aligning with findings from the recent housing production plan, many older residents of Stoneham are considered “cost burdened” by their housing expenses. Specifically, 36% of Stoneham home-owners age 65 and older pay 30% of their monthly income for housing, compared to 22% of homeowners of all ages (ACS 2014-2018, Table B25093). Among residents age 65 and older who rent their home in Stoneham, 50% pay 30% or more of their monthly income on housing, compared to 39% of all renters in Stoneham (ACS 2014-2018, B25072). Costs expressed in these indicators include property taxes, insurance, and utilities. The [AARP Livability Index](#) cites housing affordability and accessibility as key livability concerns. Older adults conveyed a specific connection between rising monetary housing implications and future quality of life for themselves as well as for older adults in the community at large. The urgency expressed is that people may not be able to afford to stay in their homes.

Need for Resources for Home Repair & Maintenance

Additionally, a sizeable share of Stoneham residents who are 65 and older and live alone, also own their home (46%). 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. Among resident responses to the online questionnaire, explicit genuine worry was expressed relative to safely identifying handymen relevant to specific repairs, scheduling routine maintenance, and locating opportunities for reducing burdensome personal possessions. In some discussions, residents wondered if they would ever be able to manage a move without options for purging unneeded belongings. Some remarked that these thought processes have been exacerbated by the pandemic and seem like insurmountable challenges. Ultimately, serious concerns were expressed for a substantive need to develop strategies to address home management, maintenance, and safety.

“One of my current challenges is finding someone to come in and help with small home repairs...I do not want my home to fall apart. As I get older there are things I can’t do any more, what are the resources?”

—Forum respondent

Suggested Age-Friendly Actions

Given the high costs associated with housing in Stoneham were identified by community participants, key informants, and municipal stakeholders as a crucial need of the senior community, we suggest that the Town consider ways to bring supports to older residents like:

- Convene residents for an interactive housing forum with planning experts to discuss housing needs and preferences; explore planning solutions; and educate residents about aging in place resources such as tax deferrals, accessory dwellings, and reverse mortgages.
- Consider a monthly billing option for water, sewer, trash fees to align with seniors' budget cycles.
- Revisit strategies highlighted in the Housing Production Plan including rehabilitation and expansion of housing authority properties.
- Engage with local nonprofit organizations, faith communities, and fraternal organizations to generate a small fund for home repair or modification matching grants.
- Consider possible community partners who can support the creation of a list of trusted plumbers, carpenters, electricians, landscapers that can be made available to older residents of Stoneham. For example, making local reviews available in print v. online (via sources like Yelp or Angie's List).
- Consider ways to use volunteers to provide lawn care or snow removal to residents.
- Organize a collaborative rummage sale/event to support older residents in managing clutter proactively.



Age Friendly Transportation Needs in Stoneham

Being able to get where one wants and needs to go helps people maintain social ties, obtain needed foods and services, access local amenities and be engaged with the community. Ensuring that people have access to adequate travel options within and around their community, including walking, bicycling, driving, and taking public transportation, is part of creating an age-friendly community.

Far and away, the need for expanding transportation options within Stoneham was a pressing need identified by study participants. While the community has access to the MBTA the RIDE, and busses to surrounding communities as well as transportation services provided by the Stoneham senior center, including medical transportation and the TRIP Metro North program—there is a recognized need for more physically accessible, convenient transportation options to get around within Stoneham as well as to long-distance medical appointments.

Barriers to Accessing Existing Transportation Resources

A resounding theme consistently discussed throughout the needs assessment identified transportation for errands and shopping as a primary source of older residents becoming housebound. Although a committee has been working on a five-year plan to address known issues, six years on, their work is reported as still “dealing with questions.” Ultimately, residents echoed key informant perceptions for challenges to transportation in the Town of Stoneham and to access nearby resources. For example, east/west travel is said to be “virtually impossible.” Connections to hubs that go to Boston are limited and not possible for Stoneham residents with cognitive and/or physical disabilities. Key informants and focus group participants noted that nearby communities such as Peabody and Burlington are incredibly hard to access without a private car.

“I expect challenges in getting transportation to the market, appointments, entertainment; when driving is no longer possible.”

—Forum Respondent

Discussion often focused on gratitude for the Senior Center providing rides to shopping, errands, and appointments; however, no van or shuttle service is available after 4pm. Additionally, residents feel a substantive transportation challenge exists because offerings are centered mostly around Main Street. The gravity of negative affects weighing down the quality of life for older adults accessing transportation was a central topic among key informants who shared personal stories of house-bound relatives requiring assistance.

Driver Safety & Traffic

*“Seniors can't run across the street.
Slow down.”*

–Forum Respondent

Due to patchwork transportation options, residents may continue driving beyond their abilities--increasing the likelihood of traffic violations and accidents. Ultimately, this predicament was summarized by a focus group participant who stated, “for those who do not drive, it is hard to

meet basic needs.” Older residents’ made multiple appeals to navigate the community safely and have safe intersections and crosswalks throughout focus group discussions and write-in responses. As well, forum respondents illustrated that the increase in traffic around Stoneham both intimidates older adults from driving and prohibits them from walking as a mode of transportation. This theme of difficulty navigating Stoneham’s available assets was reported by several key informants as a community-wide as well as personal challenge contributing to a diminished quality of life for older residents and their caregivers.

Desire for Transportation to Social Activities

Although Stoneham is an active community with events, activities, and entertainment available during all seasons, older residents participating in focus group conversations reported challenges to accessing these happenings. A daytime excursion to see a movie is complicated by parking and near the venue, and then after business hours when this is less of an issue, driving, socializing, and traversing after dark is less desirable. With taxi services disappearing and misgivings for ride-share services like Uber/Lyft, residents express a concern for the lack of options. Respondents also discussed difficulty in accessing Senior Center activities due to transportation limitations even though the Center’s van is available for pick-up and drop-off scheduling.

Suggested Age-Friendly Actions

Evidence suggests strong support for an intergenerational shuttle moving residents of all ages through the Town of Stoneham on a regularly scheduled loop. In addition to expanding transportation options, this strategy addresses some unmet needs for those at-risk of isolation, the house-bound, employment, housing proximity to shopping and essential resources, in addition to expanding opportunities for residents to participate in activities, programs, and events. Consider this suggestion as well as other supports to older residents like:

- Continue expansion of Senior Center vehicle fleet to include a sedan that offers a more intimate experience to extended routes, hours, and on demand services.
- Explore opportunities to increase use of ride-sharing services through a volunteer driver program or ride share training workshops to offer “door through door” service.

- Explore a regional transportation partnership to facilitate planning and funding efforts to connect nearby communities.
- Consider a feasibility study for a Stoneham Shuttle moving residents through the Town on a scheduled loop—connecting crucial destinations (Town Hall, Grocery Stores) and social destinations (Senior Center, Library, Parks, and Trails).
- Consider ways to make options for travel to social/recreational activities accessible
- Engage volunteers in delivery of medications/food.
- Incentivize carpooling, offer a coordinated effort to match residents as “travel companions.”



Age-Friendly Outdoor Space and Building Needs in Stoneham

Creating safe and accessible shopping, entertainment, and community areas promotes inclusion of all residents. Ensuring that outdoor spaces and public buildings, as well as community meetings and services, are adequate and accessible to all is an important element of an age-friendly community.

The Town of Stoneham offers its residents several outdoor features that promote quality of life. Residents openly discussed a fondness for the accessibility of municipal department and proximity to public outdoor spaces such as Spot Pond and the biking/walking trails. The multitude of recent initiatives outlined by the Stoneham Community Development Corporation, Complete Streets Policy (2017), and the Director of Planning and Community Development Department 2019 Annual Report identify many current and future age-friendly actions, such as the Housing Choice Community Designation and Complete Streets Tier 3 Funding supporting seven projects from the Town of Stoneham's prioritization plan. A meaningful example cited by focus group participants was the expanded walkway access and new railing installed at the Stoneham Library.

Walkability is Limited

Ultimately, there are many walkable features, but many are severed from one another. Some neighborhoods are isolated by damaged or nonexistent sidewalks, often reinforced by lack of nearby transportation options. As well, many focus group and forum participants identified infrastructure issues for damaged sidewalks, lack of safe street crossings, winter conditions of ice and snow preventing secure travel on foot, along with overgrown trees and roots preventing passage. It was widely concluded through forum responses, focus groups, and interviews that walkability is not only an issue of Town access for exercise or those who no longer wish to drive, it has implications for younger residents' proximity to resources as well as the attractiveness of Stoneham as a place to live. Overwhelming feedback from participants urged Town of Stoneham planning to meet needs from not just a community standpoint, but also an ADA standpoint.

Improvements to the Accessibility of Existing Public Buildings & Services

Challenges identified by participants also included repair and accessibility needs for the Stoneham Library. Specifically, there is need for a sound system in the library auditorium so that everyone can hear, particularly those with hearing loss. One struggle at the library is with working the elevator and access to the basement bathroom. Post-pandemic

*“Town meeting format, late at night. may be hard for those without transportation to attend or mobility issues to participate-- too long to sit.
–Forum Respondent*

reactions from key informants and residents highlighted the need for added outdoor drop boxes at municipal buildings and increased pressure to consider how Town Meeting can be more accessible (e.g., timing, transportation, childcare); but also align with public health recommendations to control the spread of illness.

Desire for More Passive Outdoor Spaces

Key informants and residents, as well as focus group participants emphasized the lack of community space for individuals of all ages to gather and engage in Stoneham both indoors and outdoors. Some COVID-19 ordinance changes allowed for expanded dining and gathering outdoors and these changes could be considered for the future to accommodate outdoor socialization and economic opportunity. The installation of “igloos” or other types of covered outdoor seating as well as the identification of more localized areas for “parklets” or small gathering spaces for neighbors to socialize.

Oftentimes, things that will benefit seniors will benefit everyone else.”

–Forum Respondent

Suggested Age-Friendly Actions

- Address accessibility issues at the Library—installation of sound system in the auditorium that allows for all persons to hear and consider ways to avoid residents needing to wait for an elevator to access the bathrooms.
- In partnership with the Disabilities Commission, consider implementing community walk audits to identify additional barriers to walkability and locations for curb cut outs, shelter, and seating
- Establish a communication platform to keep residents informed of progress on repairs and progress on the Complete Streets initiative
- Build partnerships with Stoneham’s Disabilities Commission and continue to incorporate ADA compliance and age friendly features in buildings and outdoor spaces, including intergenerational playgrounds, updated signage, and parks.
- In response to COVID-19 consider the expansion of outdoor features such as additional weather protected seating and outdoor programming at the Senior Center and Stoneham Town Common.



Age-Friendly Community Support and Health Service Needs in Stoneham

Age-Friendly communities offer nearby access to services that support physical and behavioral health, as well as home- and community-based long-term care services.

Currently, collaboration occurs with a “town-wide team” that meets periodically to discuss issues with residents more broadly, but not specifically to identify the unmet needs or issues affecting older adults. For example, the Police Department, Council on Aging, and Board of Health members participate. Another initiative supporting the community is in coordination with a local bank that manages distribution of funds from a donation program supported by individual donors. This important community support disperses gift cards for use at the grocery store, local restaurants, or as direct contributions to the food pantry. While community supports like this exist in Stoneham, increases in complexity of needs require that the community adapt its response accordingly.

Responding to Increased Demand for In-Home Services & Supports

The increased likelihood of acquiring disability with age is evident in data from the ACS. Many Stoneham’s residents age 65 and older experience some level of disability that could impact their ability to function independently in the community. About 19% of Stoneham’s residents age 65 and older have one disability, and nearly 20% report two or more disabilities (see **Appendix A**). Among the different types of disability that are assessed in ACS, the most commonly cited by older Stoneham residents 65 and older were ambulatory difficulties-difficulty walking or climbing stairs, independent living limitations-difficulty doing errands alone, such as visiting a doctor’s office or shopping, and hearing problems.

A pervasive demand related to community supports identified by key informants and stakeholders was related to increase in volume of requests for emergency services, including a surge in requests for reasons that were more socioemotional in nature (e.g., social isolation, mental health, substance misuse), within the community of Stoneham. In addition, a new nursing home in Town also contributes to increase in demand for emergency services and transport. As well, these issues are compounded by the observation that there is a higher prevalence of families living geographically far away from one another—limiting the impact of familial support during times of crisis. Participants identified a consistent increase in calls to police and fire from older adults, emphasizing the need for additional caseworkers and ambulance services. Prior to the coronavirus outbreak, increased concerns were prevalent for mental health challenges within Stoneham and steps were taken to collaborate with regional care providers, contingent on grant funding, such as Winchester Hospital.

Members of the community also discussed limits to offering expanded supports to older adults due to the stretched capacity of stakeholder groups. There was a strong sentiment among key informants and stakeholders that demands on the Town of Stoneham’s departments is increasing and subsequently, demands on staff are increasing. Capacity as a challenge was also identified specific to the Senior Center. Prior to Covid-19 the limitations reported affecting the COA Board of Director’s priorities were central to demand for contemporary educational programming, whereas in follow-up key informant interviews, the capacity concerns recognized were for the importance of 1:1 outreach in support of older residents in the community.

“For people who we can’t reach yet, because of mental health, because of barriers we don’t recognize yet...that’s what I think is challenging.”
–Key Informant

Suggested Age Friendly Actions

- Consider pilot-testing a “community service officer” at the Stoneham Police/Fire departments to address mental, behavioral health conditions
- Explore other ways to augment social work services at the Town-level through a shared position across public health, senior center
- Consider establishing an Age Friendly Stoneham Network that meets quarterly for coffee to update one another about recent events, developments or opportunities for collaboration. This allows for open lines of communication and networking among stakeholders in the area around issues of aging in the community.
- Encourage and facilitate dementia and age friendly practices in town departments, town sponsored activities, and in businesses.
 - Consider holding a forum featuring Purple Table, a dining reservation and training provider for restaurant staff, and partnership with Dementia Friends, a training provider that promotes understanding and support for those living with dementia and their caregivers.
 - Approach the faith communities about participating in the “Purple Pew” program. During Alzheimer’s and brain health awareness months (decorate the pews in purple to raise awareness about dementia in the community and to demonstrate that persons of all cognitive abilities are welcome.



Age-Friendly Social Participation Needs in Stoneham

Being engaged and participating in community events—through learning opportunities, fitness programs, and social activities—helps community members build and maintain social support, remain active, and avoid isolation. Ensuring that ample and accessible participation activities are available is an important task of building an age-friendly community.

Stoneham residents have access to a multitude of activities hosted by the Stoneham Senior Center, the Stoneham Public Library, along with various organizations in the Town. Many activities have been tailored to a post-pandemic reality and are proactively reinventing safe activities to engage Stoneham’s older residents.

Need to respond to Changing Community Preferences

Overwhelmingly, residents identified many opportunities to engage in activities while recognizing these offerings are a major factor in staying healthy as one ages. Although stakeholders and key informants voiced strong support for high level of opportunities for social participation, continually reimagining engagement has been challenging. Similarly, participants in focus groups and the community forum offered concern for the lack of programs and activities overall, contributing to a heightened sense of isolation for many. Consistently throughout the community there was feedback from the participants that there are not adequate opportunities to engage socially.

Despite the current challenges, older residents frequently cited the lack of “outside trips” or excursions as lacking. This sentiment was also expressed by focus group and forum participants requesting an increase in variety and resident involvement in discussions addressing their social needs.

Additionally, key informants recognize an increased demand for more “contemporary” learning opportunities, citing a shift towards more intellectually stimulating content and diverse offerings and potentially involving satellite locations to align with increased interest. Further, it was noted by forum and focus group participants that intergenerational social interaction, games, phone conversations, etc. are a high priority for older residents in Stoneham who view younger residents as a community asset.

Need to Engage Those Who Are Not Actively Connected

In addition to designing programming for “younger seniors” to engage with, it is important to

“Students could develop a sense of community, goodwill, and volunteerism. Being a good steward in society...on the senior side, it’s that social interaction. They get to speak with somebody who may be interested in the stories of what it was like growing up here in Stoneham in the 50s, the 60s...”
—Stoneham Stakeholder

consider the other side of the spectrum of “nonparticipants”—those who are socially isolated by choice, or not. This year, the COVID-19 response forced the Town of Stoneham to get a handle on communicating with all older residents of the community. This is an opportunity to be maintained as an “emergency response practice and

also an outreach strategy. For some older adults, simply knowing that there is someone to call in case of an emergency can offer a sense of relief to their otherwise isolated existence. They may not want to participate socially, but being “thought of” is a crucial contributor to social well-being. Consider using this practice to annually or biannually conduct wellness checks.

Suggested Age-Friendly Actions

- Draw on volunteers to organize programming for homebound older adults including “crafts for a cause” or phone programming that include topics like story-telling or current events.
- Pilot-test satellite senior-center programming to take place on-site at senior housing buildings
- Consider grant funding for technology equipment loans and training to build a larger audience for virtual programming during the COVID-19 pandemic. Explore opportunities to collaborate with the School Department to order devices at a volume discount.
- Identify 1-2 younger senior residents to join the COA Board or serve as an advocate “super users” among their peers: first to promote the Senior Center activities and resources; and second to generate ideas for programming that aligns with their preferences and availability.
- Engage the student councils to offer discounted, free tickets to performances and concerts.
- Incentivize current senior center participants to “bring a friend”



Civic Participation and Employment

Civic participation, such as volunteering and involvement in local organizations, builds social capital and allows people to pursue interests and be involved in their communities; paid employment can yield these benefits as well as provide income.

An age-friendly community offers resources and partnerships to promote civic engagement, paid employment, consultancy, or mentorship for residents. These vehicles provide residents with mutually rewarding opportunities to actively share their ideas, interests, and talents through employment or volunteer support for programs, organizations, and economic growth. The ability of the Town of Stoneham to identify ways for residents to gain an awareness of opportunities for volunteer work or civic engagement seems limited after discussions with key informants, stakeholders, and residents. These representatives of the community discussed the rich environment of services but rarely expressed need for additional volunteers or volunteer opportunities. In contrast, resident interest and willingness to participate in volunteering was mentioned frequently as an asset of the community. Strengthening the process by which residents get connected to volunteer opportunities in the community seems a likely priority for the Age Friendly Stoneham initiative moving forward.

Involved Residents are more Aware of Available Resources

Economic security indicates the potential need/desire for additional employment or cost-saving programs. Awareness of these current and potential opportunities are limited to those who are already engaged in the community and are already “listening”. Developing mechanisms by which more adults can get involved could improve awareness. Key informant and stakeholder focus group participants identified low civic

“(need for more) open lines of communication to Select Board, establishing channel to initiate a request and get a response.” Forum Respondent

engagement by many of Stoneham’s residents and often a lack of understanding for programs and services offered by the community. The pattern was particularly concerning to a municipal stakeholder who identified a pattern of disconnect between the enthusiasm for planning for a robust community and the general lack of awareness in the population for basic governmental functions, some of which are income generating programs. Forum responses echoed this emerging pattern from the resident perspective who expressed a sense of disengagement and not being fully represented.

Among forum respondents, there was a perception that Town is “guided” by a small engaged segment of the population—in other words, decisions are not informed by full representation of Stoneham residents. Focus group participants conveyed the presence of an enthusiastic level of planning within the Town of Stoneham, but an absence of realistic coordinated goals serving the community. Ultimately, community residents expressed a desire for consideration of the diverse interests, talents, and varying schedules of older adults is critical for meaningful job and volunteer placement.

Suggested Age-Friendly Actions

- Consider a volunteer fair to connect residents with opportunities for volunteering and flexible paid employment. Consider a partnership with area Chambers of Commerce or higher education institutions for the event.
- Consider ways to expand access to property tax work off program:
 - Create ways for residents to conduct their work “from home”
 - Neighborhood ambassadors/liaisons
 - Walk auditors/pedestrian informants
 - Making regular wellness calls
 - Implement a proxy-worker option, someone can do the work on behalf of a resident who may not be physically or cognitively able
- Explore the possibility of increasing the property tax rebate associated with the work-off program to \$1,000-\$1,500 to incentivize more participation.
- Consider pilot-testing a Civic Academy program that offers an opportunity for residents to learn the basics of municipal government and offers a pipeline for board and committee applicants



Communication and Information

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

Stoneham residents can access a broad array of Town information. The Senior Center distributes a monthly digital and print newsletter, the Stoneham Sentinel, highlighting community resources and events, while also maintaining a website and coordinated messaging with social media, news sources, radio and cable TV. Key informants, older adults, and community stakeholders state that a broad net has been cast to communicate useful information with those living in the Town of Stoneham but there is a stalemate for understanding how to reach those not listening, reading, or engaging. This unaddressed need was exemplified by a story relayed during an August key informant interview, after the Town's coordinated Covid-19 response. When a Stoneham resident conveyed to a friend in a neighboring community via phone that she was experiencing pandemic challenges with nowhere to turn, the friend in Beverly instructed her to call Stoneham's Senior Center. Meaning, essential information the Town of Stoneham made available through multiple avenues of media was broadly understood elsewhere but not reaching disengaged residents of Stoneham who were unable to decipher assistance in a crisis.

Communication Among Community Stakeholders is Needed

Before the COVID-19 pandemic, disjoints in communication among community stakeholders in Stoneham was identified as a challenge. For example, a key informant reported that there is a false general

“There is a stalemate for understanding how to reach those not listening, reading, or engaging.”

–Forum Respondent

assumption that the Senior Center and COA “have eyes on all in the community.” In reality, respondents throughout focus groups and key informant interviews expressed concern for the challenges associated with identifying seniors who do not advocate for themselves and live in the community in relative isolation---in other words, the needs of these individuals in unknown to the community until crises arise. There is also the possibility that information could be better shared across partners to ensure that duplication of efforts and coordination of outreach is done effectively. Although the pandemic response initiated strong coordination among partners, developing mechanisms to maintain these lines of communication is necessary.

The Digital Divide is Here to Stay—Addressing it is Necessary

Other salient concerns were identified by multiple key informants. The first is that rise in technology and access to digital devices has resulted in a substantive increase in scams/fraud. Meaning, the general population is targeted by scams; however, older adults are more likely to fall prey to fraud. Department resources are stretched in providing education to the population and information to combat schemes so seniors do not get swept up in the moment and lose their savings (e.g. extorted falsely for “back taxes” under threat of losing property). Older adults have been targeted frequently and with some success. The second substantive concern that the digital divide, meaning the gap in access and ability for use digital of digital communication technologies, is likely (unintentionally) creating a barrier to information and services. In a post-pandemic Stoneham, key informants felt this issue is of an even greater importance to address.

Suggested Age-Friendly Actions

- Publicize the availability of technology resources and technology training at the Senior Center and Library.
 - Explore opportunities to work with the Stoneham School District to receive volume discounts on devices and coordinate resources to include older adults in gaining access to Internet
- Explore the creation of “neighborhood networks” that can provide channels for word-of-mouth communication at a micro-local level. Establish neighborhood liaisons as volunteers (or property tax work off employees) to serve as the conduit between the Town and their neighbors
- Consider developing a youth and family services committee/agency—birth to death—a small agency that simply acts as triage for the community. Coordination would plug residents in to services while taking pressure off of Senior Center.
 - Could be branded as a “one stop” information source for the town and could also facilitate town-wide communication on issues of human and social services



Respect and Social Inclusion

Feeling respected and included promotes participation in the community and facilitates effective use of services and amenities.

A large proportion of Stoneham residents who are age 65 and older (27%) live alone in their household whereas 71% live in households that include other people, such as a spouse, parents, children, or grandchildren (See Appendix A, **Figure 7**). Additionally, around 2% of older Stoneham residents live within group quarters.

Need for Attention to be Paid to Socially Isolated Seniors in Stoneham

Social isolation of Stoneham's older residents was a core topic of discussion during each key informant interview, and its affects were described as intensified by the Covid-19 pandemic throughout follow-up interviews as well as by focus group participants. Perceptions of social isolation included negative mental and physical health outcomes while simultaneously creating challenges for the Town of Stoneham as it proactively works to address these broad issues. Most residents who participated in interviews and focus groups, both pre and post Covid-19 reported a shared community goal of being supportive of residents who face isolation as they age in place.

Participants referenced strong support for the community's repeated efforts during the pandemic; however, a consistent comment from older residents through written responses to the community forum and focus group participation reveals an unmet need for more opportunities to engage socially. Although the Senior Center offered a wide range of activities prior to the pandemic, both then and now, residents feel the availability of opportunities to engage socially are insufficient. This community feedback was common in the forum write-in responses.

The theme of isolation was also well known in key informant discussions where the lack of family structure in proximity to their elders was cited as a major concern. Meaning, widespread unease exists in the community for those Stoneham residents without relatives nearby, so there is no one to notify. Sometimes, town officials are unable to reach family members to interact after issues of falling, driving accidents etc. so emergency decisions are made without input from family. Additionally, it was commonly reported that residents living in senior public housing are not well represented in community activities and processes—not to mention that they do not participate actively at the Stoneham Senior Center. Considering ways to include this group of hundreds of older adults will be crucial to creating a more inclusive community moving forward.

Need to Combat Ageism—both Implicit and Explicit

Participants acknowledged that a key objective of their age-friendly community efforts are to create environments where older adults of all backgrounds and abilities engage with others.

Responses, particularly from the resident community forum, indicate a perception by some older residents of a generational divide in terms of resource allocation at the Town level as well as ageism being perpetrated by and against older residents of the community. Continuing to address issues of ageism and organizing intergenerational activities and collaborative efforts can be effective ways to continue making Stoneham an inclusive community.

“It would be great if seniors and almost-seniors are made to feel that they contribute as much to the town as all other residents, that they are seen as actively contributing to the health and vitality of the town.”

–Forum Respondent

Suggested Age-Friendly Actions

- Create a “see someone, tell someone” campaign to encourage those who interact with residents directly to notify the Senior Center of someone who is isolated or in need of support.
- Consider the development of an intergenerational summer program that welcomes students and older adults to engage in activities, learning, and community service with a focus on age friendly policy and planning.
- Encourage cross-pollination of boards and committees. For example, ensure that older residents are represented on school committees, youth boards etc. and vice versa.
- One forum respondent suggests the facilitation of an intergenerational day of service or community clean-up program called “See Stoneham Shine.”

Conclusions

As Stoneham moves towards becoming an increasingly age friendly community, the Town has an opportunity to utilize and build on the many assets already in place, including the Council on Aging (COA), the human resource of its residents, the emerging municipal organizational structure that arose from the pandemic response, and the enthusiastic proactive spirit of planning for a better Stoneham, ubiquitous throughout our experiences in the Town. As the number of older Stoneham residents is already sizable, and projections suggest it will increase within the next decade, it is important to consider how well features of the Town, as well as virtually every aspect of the community align with the age demographic moving forward. A broad range of findings are reported in this document, highlighting the many positive features of Stoneham as well as concerns expressed by older residents and those who serve this vulnerable community. To aid in planning for the projected increase in the older population, this report provides Stoneham and the COA with a tool that is informed by resident and stakeholder input. The contents of this report can be used to improve services and programs for older adults and to expand Stoneham's standing as an age friendly community.

Appendix A: Demographic Profile of Stoneham

According to American Community Survey (ACS), there were about 22,144 residents living in the Town of Stoneham in 2018. About 40% of the population (9,046 individuals) was age 50 and older (See **Table 1**). Residents who were age 50 to 59 (2,972 individuals) made up 13% of the population; residents age 60 to 79 (4,512 individuals) comprised around 20%, and another 1,562 residents (7%) were age 80 and older.

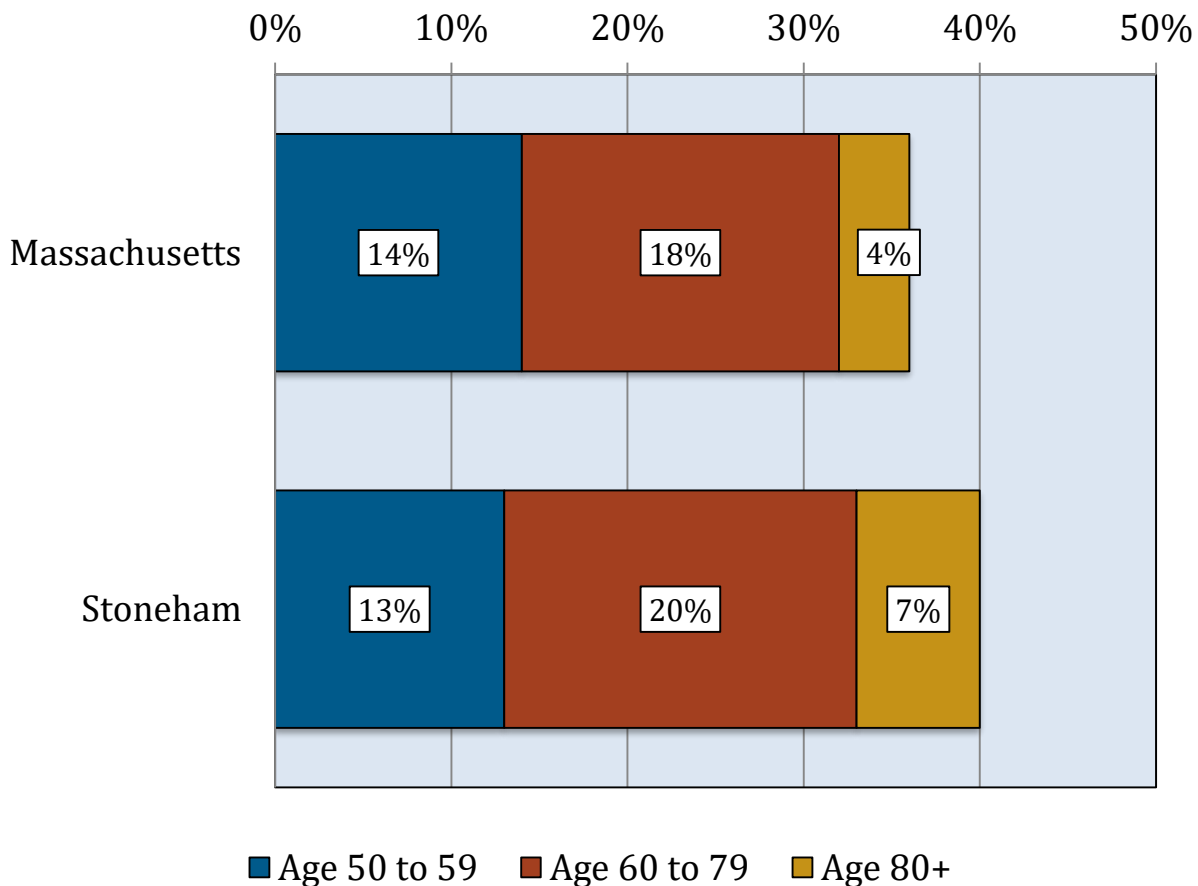
Table 1. Number and percentage distribution of Stoneham’s population by age category, 2018

Age Category	Number	Percentage
Under age 18	3,920	18%
Age 18 to 49	9,178	41%
Age 50 to 59	2,972	13%
Age 60 to 79	4,512	20%
Age 80 and older	1,562	7%
Total	22,144	100%

Source: American Community Survey, 2014-2018, Table B01001. Numbers are calculated from 5-year survey estimates.

The share of Stoneham population age 50 and older is larger than the overall state of Massachusetts (**Figure 1**). About 36% of the Massachusetts population was in the 50+ age group in 2018, compared to 41% of the Stoneham population. Compared to the Commonwealth, Stoneham had also a slightly higher portion of residents age 60 and older. However, the share of Stoneham residents age 80 and over is almost twice than the one estimated for the state as a whole. In 2018, Massachusetts residents age 60 and over comprised about 22% of the population, including 4% age 80 and over. In Stoneham, about 27% of the population was 60 or older, including 7% who were 80 years or older.

Figure 1. Age distribution in Stoneham and Massachusetts

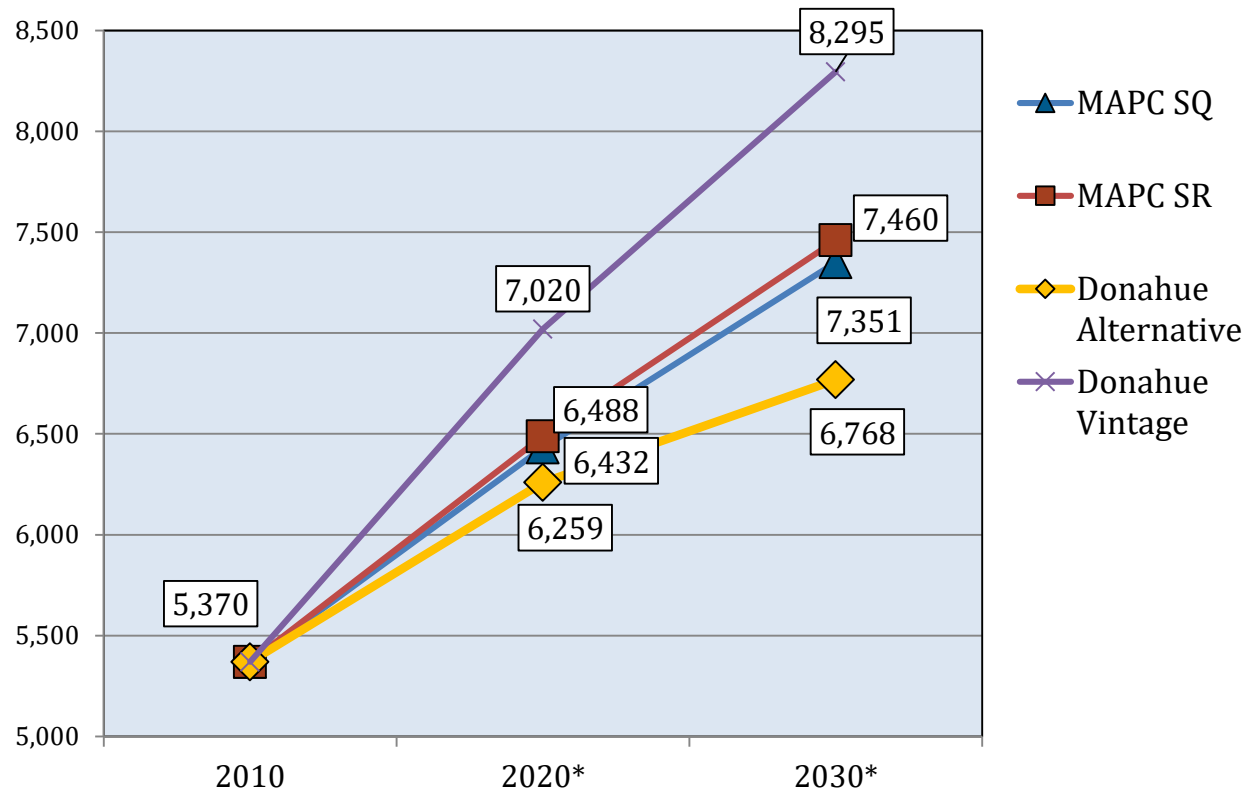


Source: American Community Survey, 2014–2018, Table B01001. Numbers are calculated from 5-year survey estimates

Population growth in both Massachusetts and the Town of Stoneham has been concentrated in older age groups. During 2000 and 2010, population of all ages increased by 24% in Stoneham as well as in the state as whole. In both, Stoneham 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 Stoneham’s population age 50 to 59 increased in size by 29%, a rate of growth higher than in Massachusetts overall (3%). The population of residents who are age 60 and older increased by 6% in Stoneham, 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 2** shows four sets of projections for Stoneham 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.

Figure 2. Alternative Stoneham projections; number of residents age 60 and older 2010 with projections to 2020* and 2030*



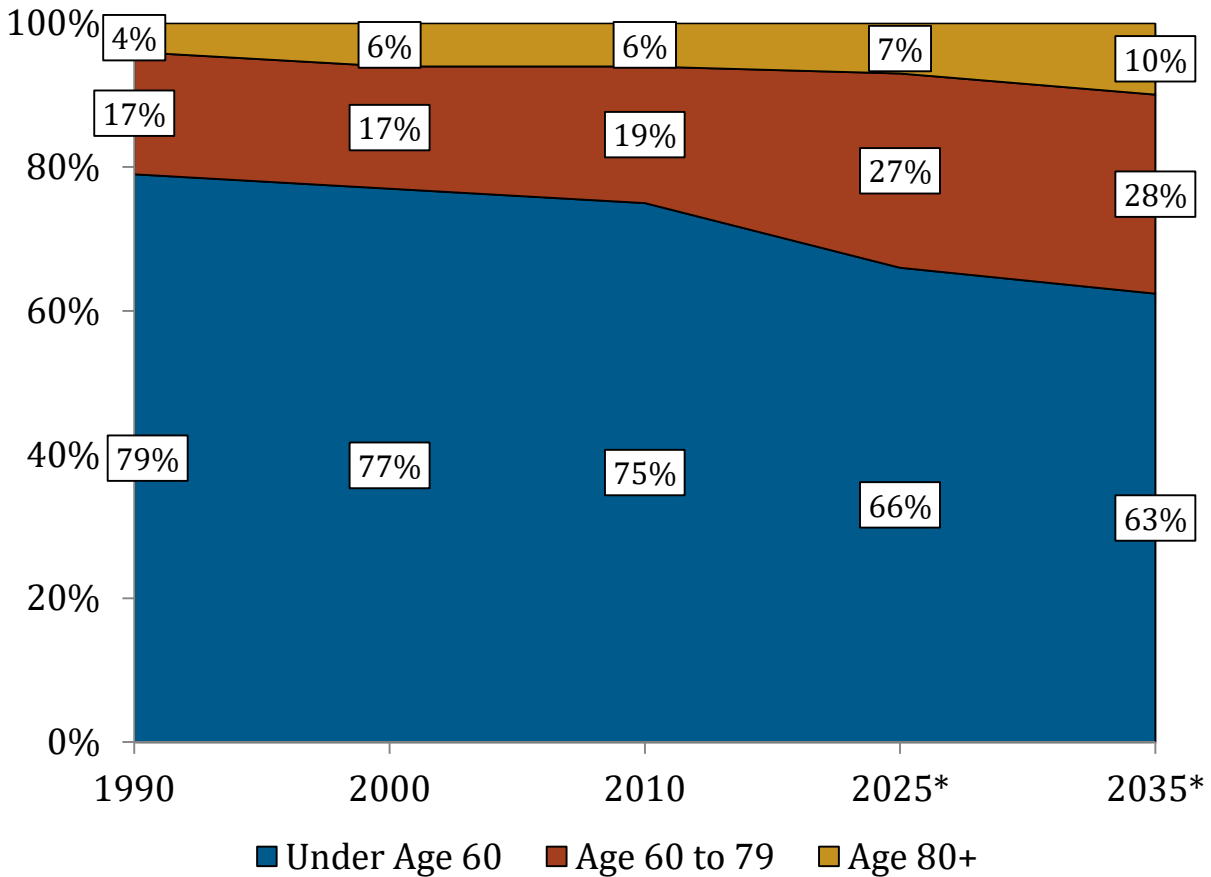
Source: Population figures for 2010 are from the U.S. Census.

* 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 3 shows the age distribution of Stoneham’s population from 1990 to 2010, and population projections for 2025 and 2035³. In 1990, about 21% of the town’s population was age 60 and older; this percentage steadily increased by 2000 (23%) and 2010 (25%). 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, more than one out of each three Stoneham’s residents will be age 60 or older—38% of the town’s population will be between the ages of 60 and 79, with an additional 10% age 80 and older.

³ Population projections are shaped by assumptions about birth rates and death rates, as well as domestic and international in-migration and out-migration. The Donahue Institute projections used here also account for population change associated with aging of the population, which is a strong predictor of future growth and decline of population levels. For more information on the methods used to create Donahue Institute projections, see Renski, Koshgarian, & Strate (March 2015).

Figure 3. Population trends; age distribution of Stoneham 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.

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

Socio-Demographic Composition of Stoneham’s Older Population

Stoneham is less diverse than the state with respect to race. For all ages combined, about 45% of Stoneham residents report their race as White non-Hispanic, compared to 87% in Massachusetts (ACS, 2014–2018, Table B01001). However, among older adults, Stoneham is less diverse. **Table 2** displays the race and ethnicity of Stoneham residents age 65 and older. The large majority of older residents report White race and ethnicity (98%). The remaining percentage of the population 65 and older reported Hispanic (1%) and Black (1%) race and ethnicity. Less than 1% report other for race and ethnicity.

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

Race	Number	Percent
White	4,804	99%
Black	64	1%
Total	4,868	100%
Hispanic	86	1%

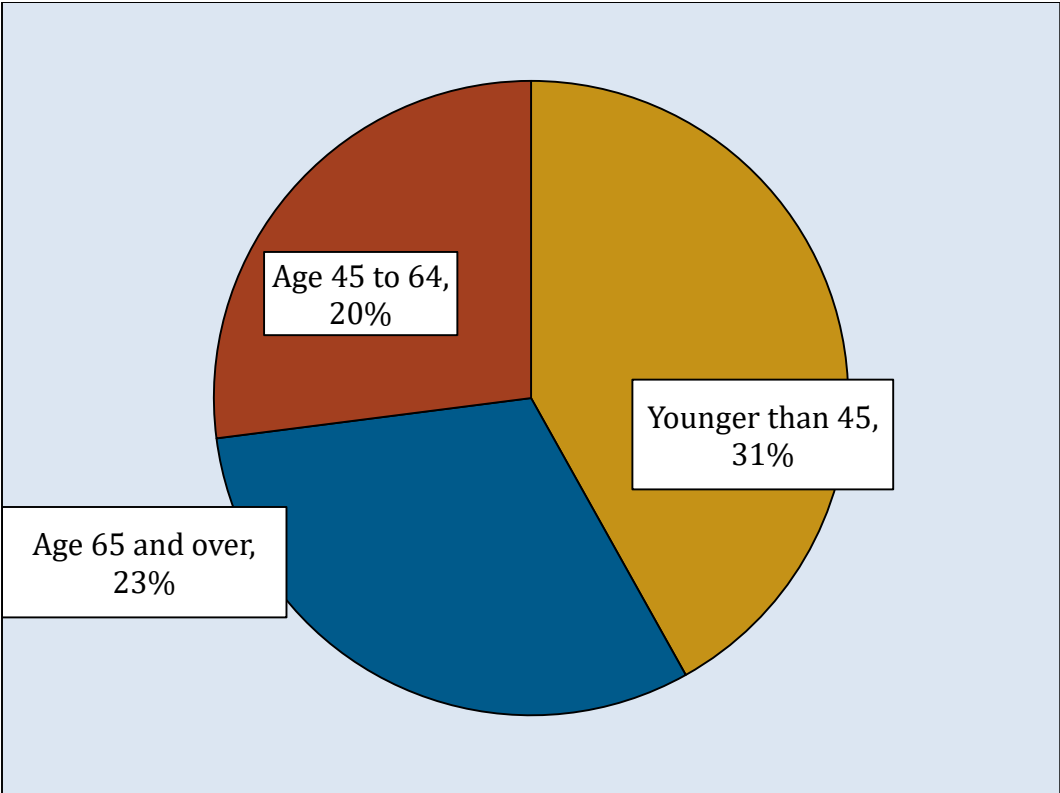
Source: American Community Survey, 2014–2018, Tables B01001A-I. Numbers are calculated from 5-year survey estimates.

Additionally, almost 10% of older Stoneham residents speak a language other than English at home (ACS, 2014–2018, Table B16004). Those who speak another language other than English at home most commonly speak an Indo-European language (8%) followed by an additional 2% who speak an Asian and Pacific Island language. The remaining 3% of the population who speak a language other than English speak Spanish or other language.

A moderate amount of Stoneham’s 9,241 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 age 45 and older are householders of 43% of all households in Stoneham⁴ including 20% of those who are age 65 and over (**Figure 4**).

⁴ Many available Census data on the older population of Stoneham are based on ages 45 and 65 as reference points rather than ages 50 and 60, as are used elsewhere in this report.

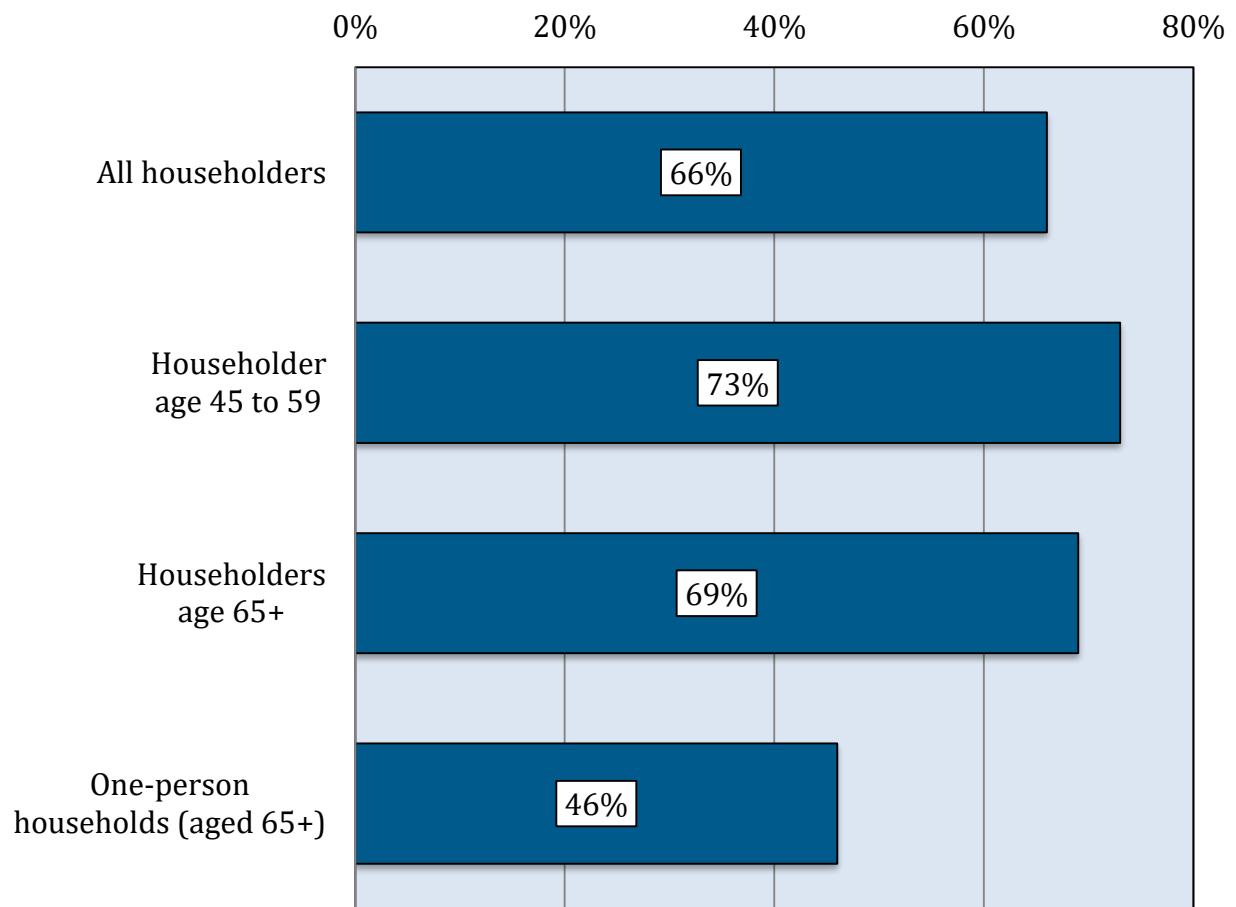
Figure 4. Age structure of Stoneham householders



Source: American Community Survey, 2014–2018, Table B25007. Numbers are calculated from 5-year survey estimates.

Most of all Stoneham residents live in homes that they own or are purchasing (66%; **Figure 5**). Nearly 57% of residents age 45 to 64 own their homes, and 51% of householders 65 and older own their homes. A sizeable share of Stoneham residents who are 65 and older and live alone, also own their home (46%). 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 5. Percent of Stoneham householders who are homeowners by age category

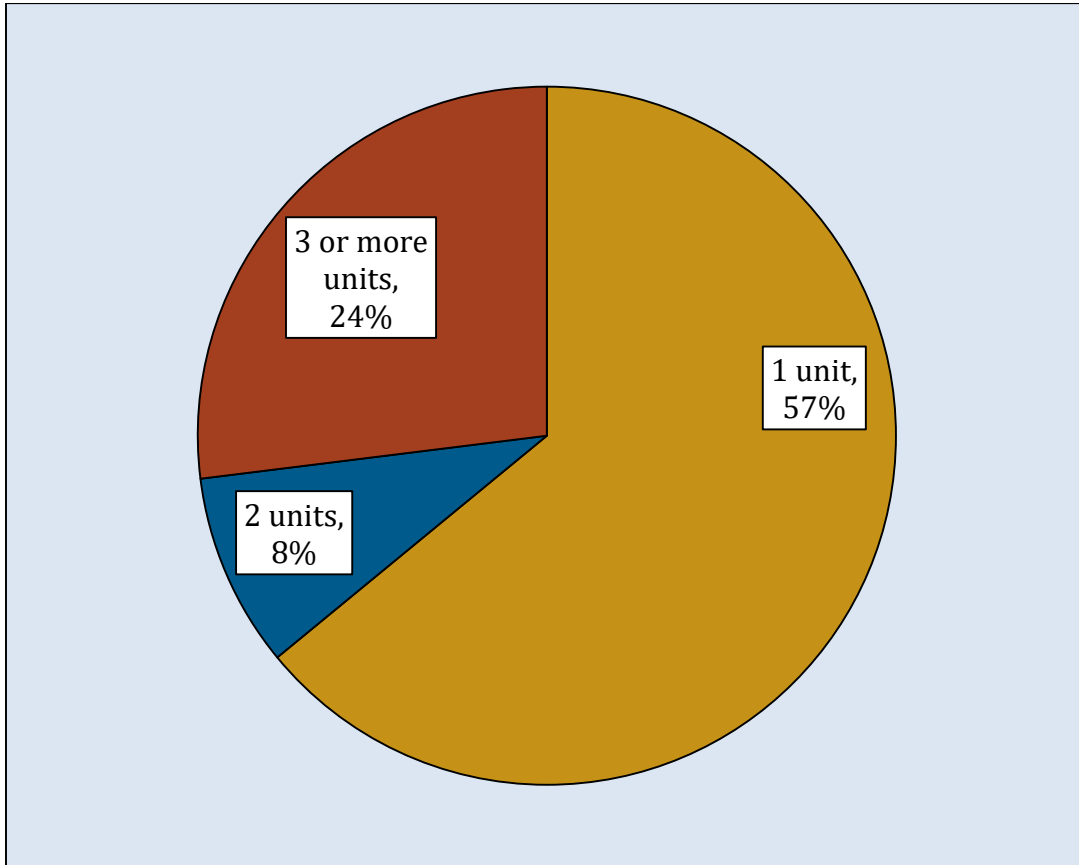


Source: American Community Survey, 2014–2018, Tables B25007 and B25011. Numbers are calculated from 5-year survey estimates.

Additionally, 44% of Stoneham’s 9,445 households have at least one individual who is age 60 or older (ACS 2014–2018, 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 9,445 housing structures in Stoneham (**Figure 6**), 57% are single unit structures and the remaining 32% are housing structures that contain two or more housing units, which include apartment complexes.

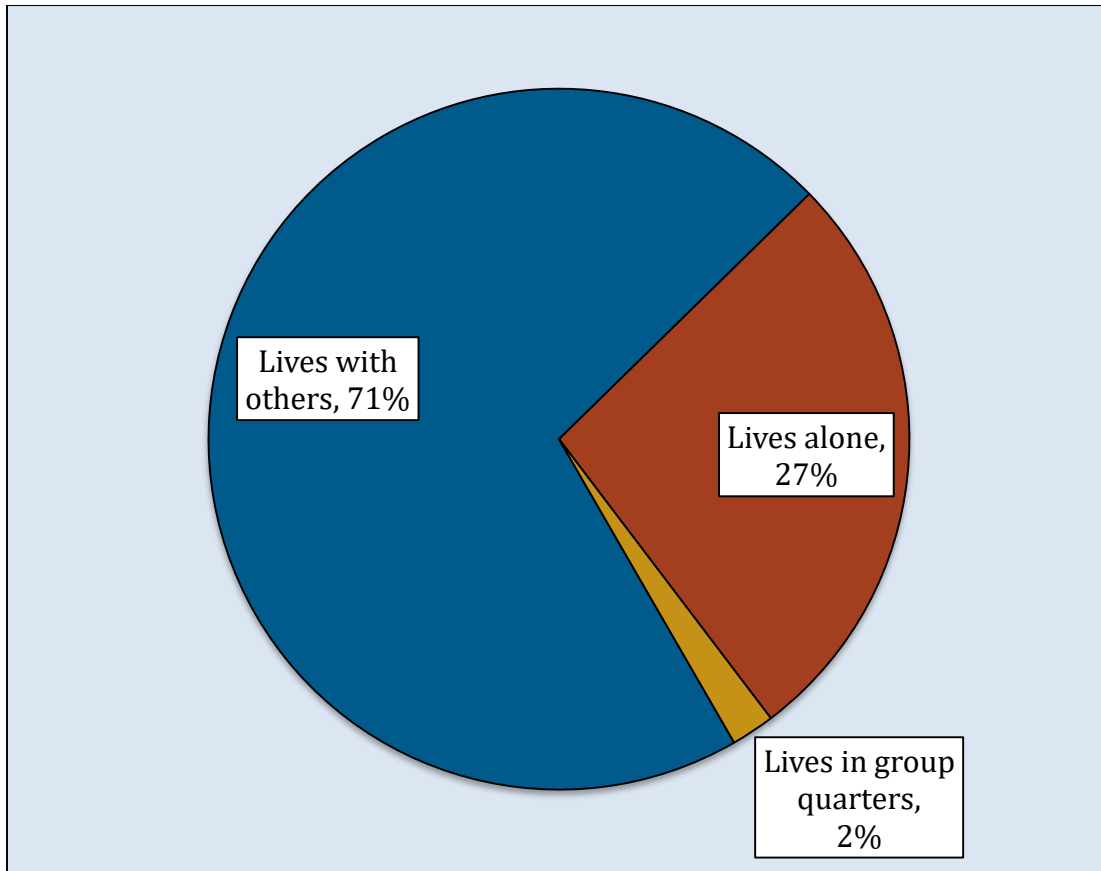
Figure 6. Number of units in Stoneham housing structures



Source: American Community Survey, 2014–2018, Table B25024. Numbers are calculated from 5-year survey estimates.

A large proportion of Stoneham residents who are age 65 and older (27%) live alone in their household whereas 71% live in households that include other people, such as a spouse, parents, children, or grandchildren (**Figure 7**). Additionally, around 2% of older Stoneham residents live within group quarters.

Figure 7. Living arrangements of Stoneham residents, age 65 and older



Source: American Community Survey, 2014–2018, Table B09020. Numbers are calculated from 5-year survey estimates.

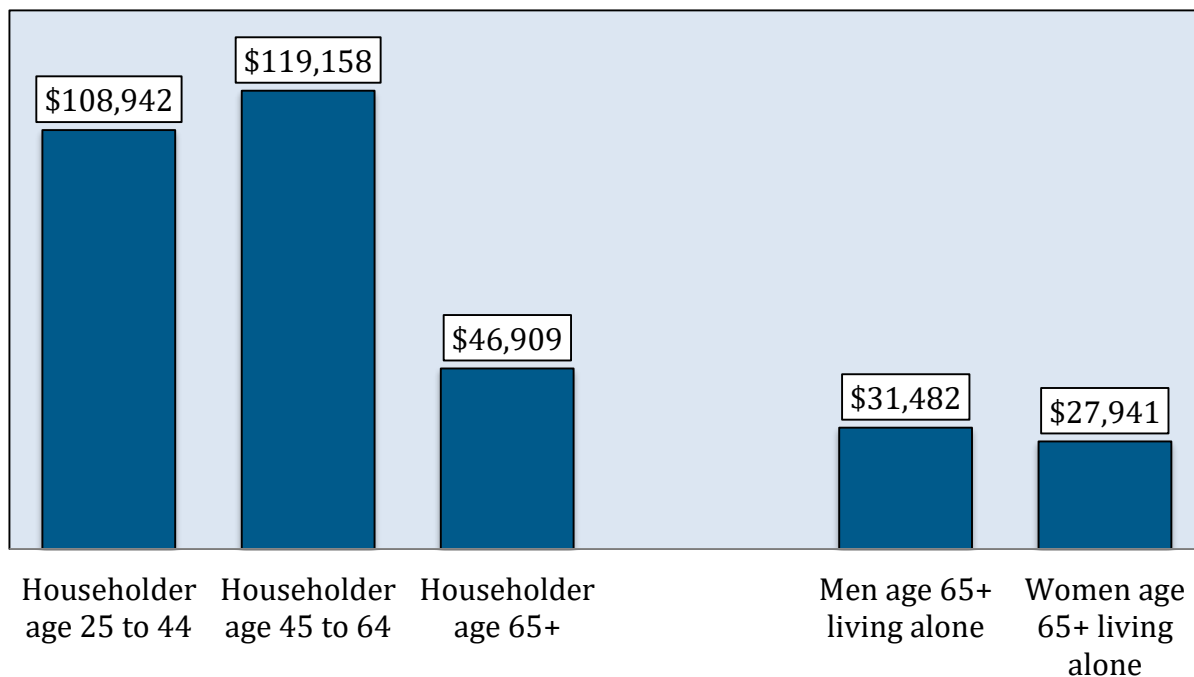
American Community Survey estimates on education suggest that Stoneham residents are well educated on average. About 31% of persons 65 and older have either a bachelor’s degree (60%) or a graduate/professional (40%; ACS, 2014–2018, Table B15001). This educational profile contributes to the vitality and 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 Stoneham residents aged 65 and over remain in the workforce. Almost 34% of adults age 64 to 74 are participating in the labor force. Of those age 75 and older, nearly 8% remain in the workforce (ACS, 2014–2018, Table S2301).

Nearly 47% of men age 65 and older report veteran status (ACS, 2014–2018, Table B21001). As a result, many of the town’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 of some older residents in Stoneham (Figure 8). Stoneham residents’ median household income is considerably higher than the one estimated for Massachusetts as a whole, \$94,835 compared to \$77,378. Among Stoneham’s householders those aged 45 to 64 have the highest median income at \$119,158—which is also greater than the statewide median for this age group (\$96,031). Among householders 65 and older, the median income is \$46,909, lower than the statewide median for this age group (\$47,486), and much lower than the median income of younger Stoneham householders. Older residents living alone, especially women, are at the greatest disadvantage in terms of household income. Given that about 27% of older residents age 65 and older live alone in Stoneham, these figures suggest that a sizeable number of residents are at risk of economic insecurity.

Figure 8. Median household income in Stoneham by age and living situation of householder (in 2018 inflation-adjusted dollars)



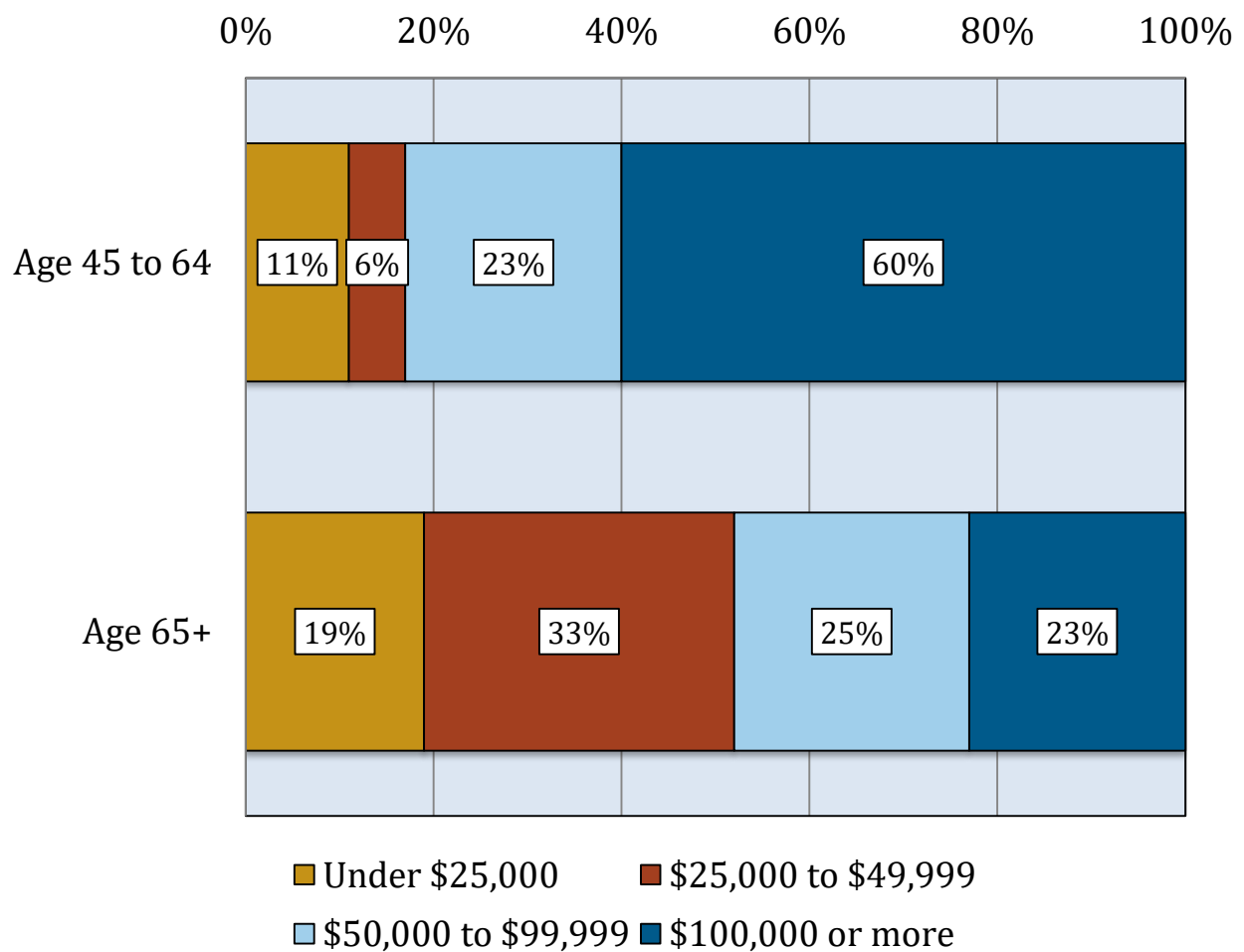
Source: American Community Survey, 2014–2018, Tables B19049 and B19215. Numbers are calculated from 5-year survey estimates.

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

The economic profile of older Stoneham residents relative to younger residents is further illustrated in Figure 9, which shows that the older adult population lives on a modest income.

Almost a quarter of Stoneham residents age 65 and older report incomes of \$100,000 or more. By comparison, 60% of households headed by younger residents report this level of income. Nevertheless, a large share of households headed by someone age 65 and older (19%) report annual incomes under \$25,000. This compares with just 11% of households headed by individuals age 45 to 64 having incomes under \$25,000. Thus, there is a sizeable segment of Stoneham’s older population that is at risk of financial insecurity or economic disadvantage.

Figure 9. Household income distribution in Stoneham by age of householder (in 20XX inflation-adjusted dollars)



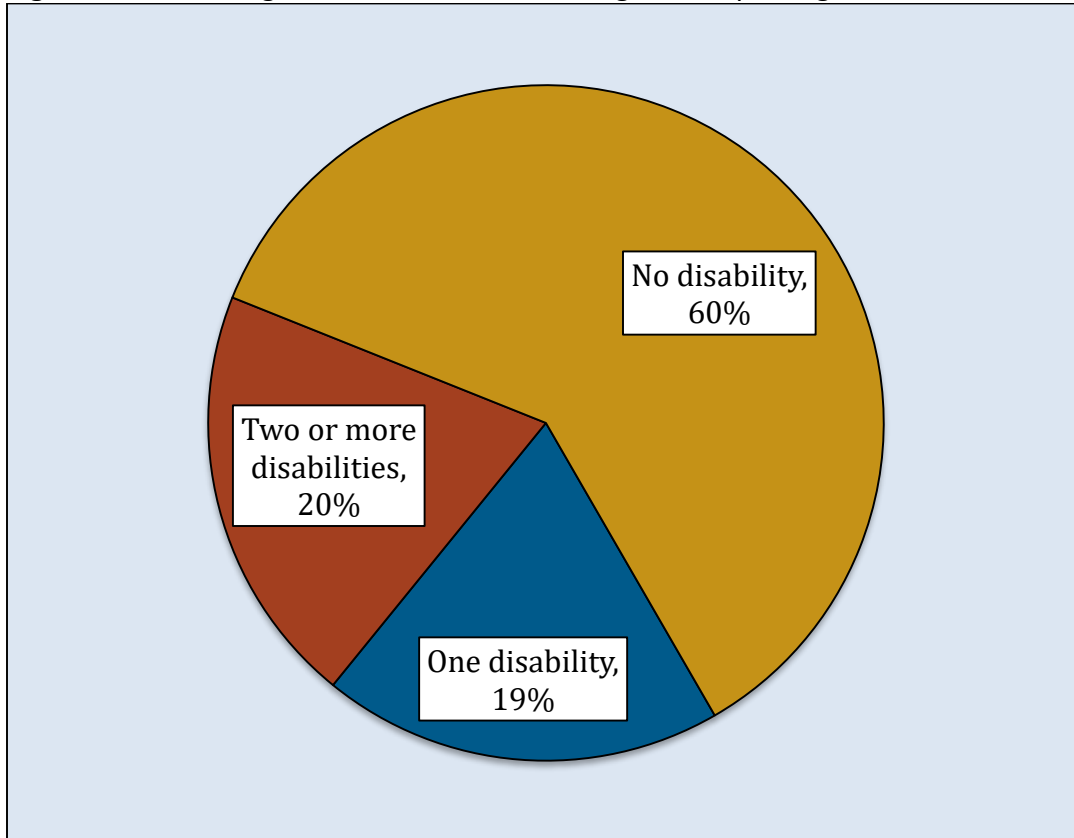
Source: Source: American Community Survey, 2014–2018, Table B19037. Numbers are calculated from 5-year survey estimates.

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 Stoneham’s residents age 65 and older experience some level of disability that could impact their ability to function independently in the community. About 19% of Stoneham’s residents age 65

and older have one disability, and nearly 20% report two or more disabilities (**Figure 10**). Among the different types of disability that are assessed in ACS, the most commonly cited by older Stoneham residents 65 and older were ambulatory difficulties-difficulty walking or climbing stairs-, independent living limitations-difficulty doing errands alone, such as visiting a doctor's office or shopping-, and hearing problems. Each difficulty was reported by 73% of the older population in Stoneham (ACS 2014–2018, Table S1810). Other disabilities experienced by older Stoneham residents include cognitive difficulty (8%), self-care difficulties (6%), and vision difficulties (4%).

Figure 10. Percentage of Stoneham residents age 65+ reporting at least one disability



Source: U.S. Census Bureau; American Community Survey, 2014–2018, 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.