

1. Are you male or female?

- Male
- Female

2. What is your age as of your last birthday?

3. How would you rate Salem as a place for people to live as they age?

- Excellent
- Good
- Fair
- Poor
- Very Poor

4. How long have you lived in Salem?

- Less than 1 year
- More than 1 year but less than 5 years
- More than 5 years but less than 15 years
- More than 15 years but less than 30 years
- More than 30 years

5. Thinking about your retirement years, how likely is it that you will move to a different home?

- Extremely likely
- Somewhat likely
- Not very likely
- Not sure

6. If you were considering a move to a new home during your retirement, which of the following factors would impact your decision?

- Move to a smaller home
- Move to a less expensive home
- Move to a more urban community
- Move to a more rural community
- Move to my dream home (e.g. by a lake, mountains, etc.)
- Move to a home that is renovated/modified for older adults or those with a disability
- Want to be able to walk to stores and parks
- Want to be closer to family
- Want to live in a different climate
- Want to live in a safer or more secure area
- Want to be closer to a hospital or health facility
- Want to be in an area with better health care facilities
- Want to live in a senior community
- Want to continue working and the type of work I want/need is not available here
- Want better access to public transportation
- It will be difficult to age independently in my home

Other (please specify)

7. How important is it for you to remain in Salem as you age?

- Extremely important
- Somewhat important
- Not important

8. Do you currently have the financial means to meet your daily needs?

- Yes
- No

9. Are the costs of the following concerns for you as you age?

| | Very concerned | Not really concerned |
|--|-----------------------|-----------------------|
| Food | <input type="radio"/> | <input type="radio"/> |
| Health care | <input type="radio"/> | <input type="radio"/> |
| Heating or other utilities (gas, electric, oil) | <input type="radio"/> | <input type="radio"/> |
| Home maintenance | <input type="radio"/> | <input type="radio"/> |
| Housing | <input type="radio"/> | <input type="radio"/> |
| Medication/prescriptions | <input type="radio"/> | <input type="radio"/> |
| Personal care in the home | <input type="radio"/> | <input type="radio"/> |
| Property taxes | <input type="radio"/> | <input type="radio"/> |
| Transportation | <input type="radio"/> | <input type="radio"/> |

Other (please specify)

10. Do you feel that the opinions and thoughts of older adults are valued in Salem?

- Yes
- No
- Not sure

11. Is your home accessible such that it will be possible for you to stay there as you age, or could it need renovations such as grab bars, ramps, or a first floor bedroom/bathroom?

- Home is fully accessible
- Home may need minor renovations
- Home may need major renovations

12. How important is it to you to have the following services in your community?

| | Important | Not important |
|--|-----------------------|-----------------------|
| Contractors for major home repairs or renovations who are trustworthy, do quality work and are affordable | <input type="radio"/> | <input type="radio"/> |
| A service that recommends or reviews area contractors | <input type="radio"/> | <input type="radio"/> |
| Affordable handyman type services for minor work around our home | <input type="radio"/> | <input type="radio"/> |
| Affordable seasonal services such as lawn work or snow removal | <input type="radio"/> | <input type="radio"/> |
| Homes that are equipped with things like a no step entrance, wider doorways, grab bars in bathrooms and first floor bedrooms and bathrooms | <input type="radio"/> | <input type="radio"/> |

13. How important is it to you to be able to live independently in your own home as you age?

- Extremely important
- Somewhat important
- Not important

14. How important is it to you to have these housing options in your community?

| | Important | Not important |
|---|-----------------------|-----------------------|
| Housing options for adults of varying income levels | <input type="radio"/> | <input type="radio"/> |
| Housing options such as older active adult communities, assisted living and communities with shared facilities and outdoor spaces | <input type="radio"/> | <input type="radio"/> |
| Living in a mixed age community | <input type="radio"/> | <input type="radio"/> |
| Living in a mixed income community | <input type="radio"/> | <input type="radio"/> |
| Living in a community that is diverse racially, ethnically or by religion | <input type="radio"/> | <input type="radio"/> |
| Well maintained and safe low-income housing | <input type="radio"/> | <input type="radio"/> |
| Housing that has been renovated to allow older adults to live independently | <input type="radio"/> | <input type="radio"/> |
| good and affordable assisted living and nursing home facilities | <input type="radio"/> | <input type="radio"/> |
| Affordable home health and personal care services in your own home | <input type="radio"/> | <input type="radio"/> |

15. How important is it to you to have the following public facilities in your community?

| | Important | Not important |
|---|-----------------------|-----------------------|
| Well maintained and safe parks within walking distance from my home | <input type="radio"/> | <input type="radio"/> |
| Public parks with benches, shade, smooth walking paths, etc. | <input type="radio"/> | <input type="radio"/> |
| Sidewalks in good condition | <input type="radio"/> | <input type="radio"/> |
| Well maintained public buildings and facilities that are accessible to people of different physical abilities | <input type="radio"/> | <input type="radio"/> |
| Separate pathways for bicycles and pedestrians | <input type="radio"/> | <input type="radio"/> |
| Easily accessible and well maintained public restrooms | <input type="radio"/> | <input type="radio"/> |
| Neighborhood watch program | <input type="radio"/> | <input type="radio"/> |
| Outdoor sports opportunities | <input type="radio"/> | <input type="radio"/> |
| Natural areas near by | <input type="radio"/> | <input type="radio"/> |
| Senior center or community center programming for seniors | <input type="radio"/> | <input type="radio"/> |
| Cultural events, such as theater or music | <input type="radio"/> | <input type="radio"/> |

16. How do you normally travel when doing things like going shopping, visiting the doctor, running errands or going other places?

- Drive yourself
- Have a family member drive you
- Have a non-family member drive you
- Walk
- Ride a bike
- Use public transportation
- Take a taxi or cab
- Use a special transportation service, such as one for seniors or persons with disabilities

Other (please specify)

17. how important is it to you to have the following things related to transportation in your community?

| | Important | Not Important |
|---|-----------------------|-----------------------|
| Accessible, convenient, affordable and reliable public transportation | <input type="radio"/> | <input type="radio"/> |
| Special transportation services for older adults and people with disabilities | <input type="radio"/> | <input type="radio"/> |
| Well maintained streets and safe intersections | <input type="radio"/> | <input type="radio"/> |
| Easy to read traffic signs | <input type="radio"/> | <input type="radio"/> |
| Enforced speed limits | <input type="radio"/> | <input type="radio"/> |
| Public parking lots, spaces and areas to park | <input type="radio"/> | <input type="radio"/> |
| Affordable public parking | <input type="radio"/> | <input type="radio"/> |
| Audio/visual pedestrian crossing | <input type="radio"/> | <input type="radio"/> |
| Driver education/ refresher courses | <input type="radio"/> | <input type="radio"/> |

18. Which of the following do you use, attend or participate in? If you do not currently participate, please indicate if you would like to in the future.

| | Yes | No | Would like to |
|---|-----------------------|-----------------------|-----------------------|
| Local library | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Local senior center | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Meals at your local senior center | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Exercise programs/fitness classes for older adults | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Exercise programs/fitness classes not specifically for older adults | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Gym, health club or other fitness facility | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Outdoor recreation such as hiking, biking, swimming | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cultural events, such as theater, music or lectures | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Osher Lifetime Learning Institute (OLLI) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Classes, lectures or other programs at a local college | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Local government | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Meals on Wheels | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Home health or personal care services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Elder care attorneys | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Church, synagogue or other religious activity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

19. If you answered that you do not currently use a service, but would like to, what are the reasons for not using it currently?

- Still working, do not have time
- Do not have time for other reasons (not work)
- Cost
- Transportation
- Do not feel welcome
- time of the activity is not convenient
- Waiting list
- Inconvenient location
- Health problems
- Just don't feel up to it

Other (please specify)

20. Do you encounter accessibility issues, such as no elevator or steep stairs, in public buildings such as the library, city hall, etc.?

- Yes
- No
- Sometimes

21. Do you participate in community activities such as serving on a city board, going to fairs, volunteering etc., that make you feel engaged in and part of your community?

- Yes
- No

22. In general, when compared to most people your age, how would you rate your health?

- Excellent
- Good
- Fair
- Poor
- Very Poor

23. How often do you engage in some form of physical exercise (such as walking, biking, running, swimming, training, yoga, stretching)?

- Every day, or almost every day
- Several times a week
- About once a week
- Once every few weeks
- About once a month
- Less than once a month
- Never

24. If you engage in regular physical activity (more than once a month) what are those activities?

- Biking
- Dancing
- Fitness video or DVD
- Gardening
- Gym or health club
- Hiking
- Kayaking/canoeing
- Running
- Strength training
- Swimming
- Tai Chi
- Walking
- Yoga
- Fitness class for all ages
- Fitness class for older adults

Other (please specify)

25. How important is it to you to have the following health and wellness services in your community?

| | Important | Not important |
|--|-----------------------|-----------------------|
| Health and wellness programs in areas such as nutrition, smoking cessation, weight control, chronic disease management | <input type="radio"/> | <input type="radio"/> |
| Fitness activities geared to older adults | <input type="radio"/> | <input type="radio"/> |
| Conveniently located health and social services | <input type="radio"/> | <input type="radio"/> |
| A service that helps seniors find and access health and supportive services | <input type="radio"/> | <input type="radio"/> |
| conveniently located emergency care centers | <input type="radio"/> | <input type="radio"/> |
| Easy to find information on local health and supportive services | <input type="radio"/> | <input type="radio"/> |
| Affordable home care services including health and supportive services | <input type="radio"/> | <input type="radio"/> |
| Well maintained hospitals/ health care facilities | <input type="radio"/> | <input type="radio"/> |
| A variety of health care professionals including specialists | <input type="radio"/> | <input type="radio"/> |
| A supportive primary care physician | <input type="radio"/> | <input type="radio"/> |
| Respectful and helpful hospital and clinic staff | <input type="radio"/> | <input type="radio"/> |
| Respite caregiver or adult day care services | <input type="radio"/> | <input type="radio"/> |
| Access to mental health services | <input type="radio"/> | <input type="radio"/> |

26. How frequently do you interact with friends, family or neighbors by phone, in person, by email, or on social media like Facebook?

- More than once a day
- About once a day
- Less than everyday but more than once a week
- Less than every week but more than once a month
- Once a month or less
- Never

27. Do you have friends or family in the area you can count on in an emergency?

- Yes
- No
- Not sure

28. Do you feel there are enough social activities and events in your community?

- Yes
- No
- Not sure

29. How important is it to you to have the following social opportunities in your community?

| | Important | Not important |
|---|-----------------------|-----------------------|
| A range of volunteer activities | <input type="radio"/> | <input type="radio"/> |
| Volunteer training opportunities to help people perform better in volunteer roles | <input type="radio"/> | <input type="radio"/> |
| Opportunities for older adults to participate in decision making bodies such as municipal or private boards or committees | <input type="radio"/> | <input type="radio"/> |
| Easy to find information on available volunteer opportunities | <input type="radio"/> | <input type="radio"/> |
| Transportation to and from volunteer activities for those who need it | <input type="radio"/> | <input type="radio"/> |
| Ways to be engaged in my community | <input type="radio"/> | <input type="radio"/> |

30. Which of the following best describes your current employment status?

- Self - employed, part time
- Self - employed, full time
- Employed, part time
- Employed, full time
- Unemployed, looking for work
- Retired, not working at all
- Not working due to disability
- Not working for other reasons

31. If you are still working, is it likely you will put off retirement and work as long as possible? (Skip this question if you are retired)

- Extremely likely
- somewhat likely
- Not likely
- Not sure

32. Is it important to you to have the following job related opportunities in Salem?

| | Important | Not important |
|---|-----------------------|-----------------------|
| A range of job opportunities for older adults | <input type="radio"/> | <input type="radio"/> |
| Flexible jobs for older adults | <input type="radio"/> | <input type="radio"/> |
| Job training for older adults who want to learn new skills | <input type="radio"/> | <input type="radio"/> |
| Jobs that are adapted to meet the needs of people with disabilities | <input type="radio"/> | <input type="radio"/> |

33. Which of the following services would you turn to if you, a family member or a friend needed information about services such as care giving services, home delivered meals, home repair, medical transport or social activities? (check all that apply)

- AARP
- Your local Council on Aging/Senior Center
- Council on Aging/Senior Center in another town
- Other local municipal employee or department
- Elder services
- Your church, synagogue or other faith bases group

Other (please specify)

34. Do you rent or own your home or have another type of living arrangement?

- Own
- Rent
- Live with a friend or housemate in their home
- Live in assisted living or other congregate living arrangement
- Live with a family member

Other (please specify)

35. what type of home is your primary home?

- Single family home
- Mobile home
- Townhouse or duplex
- Apartment
- Condominium or co-op
- Retirement community
- Assisted living

Other (please specify)

36. What type of home do you expect to live in as you age?

- Single family home
- Mobile home
- Townhouse or duplex
- Apartment
- Condominium or co-op
- Retirement community
- Assisted living

Other (please specify)

37. What is your current marital status?

- Married
- Married but not living with spouse due to health reasons
- Separated or divorced
- Widowed
- Not married, living with partner
- Never married

Other (please specify)

38. In addition to you who else lives in your home? (check all that apply)

- No one else lives in my home
- Spouse or partner
- Child/children under 18
- Child/children over 18
- Child/children away at college
- Other relative under 18
- Other relative over 18
- Friend or roommate over 18
- Live in caregiver

Other (please specify)

39. What is the highest level of education you have completed?

- Less than a high school diploma
- HS Diploma or GED
- some post-high school education/training (no degree)
- 2 year college degree
- 4 year college degree
- Graduate or professional degree

40. In general, how often do you use the Internet for things like email, getting news, paying bills or buying products? this includes going online at home or someplace else or a mobile device?

- Several times per day
- About once per day
- 3-6 days per week
- 1-2 days per week
- Once every few weeks
- Once a month or less
- Never

41. What is your annual household income, before taxes, from all sources last year?

- Less than \$20,000
- \$20,000 - \$40,000
- \$40,000 - \$60,000
- \$60,000 - \$80,000
- \$80,000 - \$100,000
- \$100,000 or more
- Not sure

42. Please use this space to specify an services or other items that you think are important to have in your community as you age, or any other concerns or suggestions you would like planners to think about to make Salem more friendly to older adults.