

Caregiver Survey 2024

AGE+



City of Boston
Age Strong Commission

Age Strong is conducting this survey to learn more about the needs and priorities of Boston's older adults. This survey will inform the Age Strong Plan which aims to make Boston inclusive and accessible to people of all ages. This is a valuable opportunity to let your voice be heard! Your responses will help shape Age Strong's work and funding decisions in the years ahead, helping to create a Boston that we can all grow older in. **Your responses will be kept confidential and will not be shared outside of Age Strong and the Executive Office of Elder Affairs.**

****This survey is specifically for Caregivers of older adults. If you provide care for an older adult, family member or non-family member, please complete this survey. ****

1. What specific supports would help you as a caregiver? (Select all that apply)

- Respite Care:** Temporary relief from caregiving responsibilities.
- Support Groups:** Access to support groups for emotional and social support.
- Financial Assistance:** Help with costs related to caregiving.
- Training and Education:** Training on caregiving skills, dementia care, and information on managing specific conditions.
- Medical Support:** Assistance with managing the care recipient's medical needs, including access to healthcare professionals.
- Legal Assistance:** Help with legal issues related to caregiving, such as power of attorney and guardianship.
- Transportation Services:** Access to transportation for medical appointments and other needs.
- Home Modifications:** Assistance with making the home safer and more accessible for the care recipient.
- Care Coordination:** Help with coordinating care and services for the care recipient.
- Mental Health Support:** Access to mental health services for the caregiver's own well-being.
- Technology Support:** Assistance with using technology to monitor and care for the care recipient.
- Information and Resources:** Access to information and resources about caregiving and available services.
- In-Home Care Services:** Access to professional in-home care services to assist with caregiving tasks.
- Nutritional Support:** Assistance with meal planning and preparation for the care recipient.
- Work-Life Balance Support:** Resources to help balance caregiving responsibilities with work and personal life.
- Community Resources:** Information about community resources and services available to caregivers.
- Other** (Please specify): _____

Needs: Please review the list below and select your care recipient's most important needs related to aging. The examples listed under each category do not include all possible examples, so you can select a category even if you do not see your care recipient's specific need listed.

2. What are the specific needs of the person that you care for? (Select all that apply)

- Access to Services:** getting help with Food/SNAP benefits and financial services, and applying for health insurance.
- Affordable Health Care:** accessing affordable health services, insurance, managing prescription costs.
- Access to Health Care:** finding a doctor, accessing health services, attending falls prevention classes, exploring alternative medicine options, and receiving medical home visits.
- Affordable Housing:** finding affordable housing, getting on waitlists for subsidized units, and accessing rental assistance.
- Housing Accessibility and Maintenance:** finding accessible housing, and assistance with property repairs and upkeep.
- In-Home Support for Maintaining Independence:** help with aging in place, assistance with activities of daily living (such as bathing, toileting, dressing, feeding, walking, grooming), home and property maintenance (snow removal, lawn care, leaf removal), housing modifications, general tasks, balance and mobility issues, and obtaining needed devices.
- Long Term Services & Supports:** accessing home care services, better staffing at long-term care facilities, and increased case management.
- Assistance Managing Other Expenses:** assistance with non-housing and non-healthcare-related expenses, such as taxes, utilities, and food.
- Legal Services:** finding legal counsel to address concerns with income and public benefits, health care, long-term care, nutrition, housing, utilities, protective services, abuse, neglect, age discrimination, and defense of guardianship.
- Mental & Behavioral Health Support:** finding mental health classes & education, counseling, help with depression, anxiety, and stress, addressing alcohol & drug abuse.
- Nutrition Support:** access to healthy food, help with meal preparation, delivery assistance, and addressing food insecurity.
- Safety & Security:** home modifications for balance & falls prevention, coping with abuse, exploitation, mistreatment, public safety, and community safety.
- Transportation Access and Availability:** finding rides for appointments or social activities, more bus/carpool opportunities, help with public transportation, and weekend transportation.
- Workforce Development:** finding employment, flexible job opportunities, retraining opportunities, and jobs that pay well.
- Caregiver Support:** finding programs that pay family caregivers, support groups, support for people affected by dementia, educational programs, respite care, day centers & adult day health programs, and information for grandparents raising grandchildren.
- Assistance Addressing Social Isolation:** finding companionship, accessing affordable technology, phone/internet programs, regular connections, and formal & informal supports.
- Opportunities for Leisure, Recreation, & Socialization:** finding and participating in social activities, information about programs, reduced rates at sites/museums, and outdoor spaces for seniors.
- Civic Engagement / Volunteer Opportunities:** finding volunteer opportunities, older adult community involvement, and participating in neighborhood activities.

- Learning & Development Opportunities:** finding educational programs, learning new skills (such as using emails, internet, apps, etc.), and digital technology training.
- Staying Active / Wellness Promotion:** finding classes on healthy aging, information on physical wellness, fitness programs, exercise classes for older adults, and support for caregivers.
- Addressing Ageism and Age Discrimination:** preventing negative stereotyping, prejudice, and discrimination based on age.
- Overcoming Language / Communication Barriers:** finding interpreting/translation services, finding information about services and resources in different languages, and enrolling in ESL classes.
- LGBTQIA+ Support:** finding providers who understand Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual/Ally, and other identities issues, integrating into the community, and receiving support for dealing with bias.
- Spirituality Support:** finding faith-based activities, developing opportunities for spiritual growth, and addressing missing in-person services.
- Other** (Please specify): _____

3. Ranking Needs: *Please rank the top 3 needs you selected in the list above, based on their importance to your care recipient.*

To rank the needs, return to the Question 2 list you just completed and write a '1' next to the need that is most important to your care recipient, a '2' next to the second most important need, and a '3' next to the third most important need.

4. Which of the following currently apply to your care recipient *(Select all that apply):*

- Experience issues with abuse, neglect, or exploitation
- Live with Alzheimer's or dementia
- Experience memory or thinking problems
- Need access to cultural or social activities (such as cultural events, religious services, social groups)
- Live with vision loss
- Live with hearing loss
- Live with physical disabilities (including mobility impairments and chronic physical health issues)
- Are in frail or weak health
- Are a grandparent raising grandchildren
- Have housing concerns (such as trouble affording rent, unsafe living conditions)
- Often feel lonely or isolated (such as limited social interactions, lack of companionship)
- Need legal services (such as help with housing issues, government benefits, power of attorney, and legal advice)
- Are part of the LGBTQIA+ community
- Have mental or emotional health issues (such as anxiety, depression, stress)
- Need help with meals or nutrition (such as difficulty cooking, need for meal delivery)
- Have employment or job-related needs (such as job search assistance, workplace accommodations)
- Other (Please specify): _____

Demographic Information

1. What Boston neighborhood does the person you care for live in?

- Allston Brighton Back Bay Beacon Hill Charlestown
- Chinatown/
Leather District Dorchester (North
of Park Street) Dorchester (South
of Park Street) Downtown East Boston
- Fenway Hyde Park Jamaica Plain Mattapan Mission Hill
- North End Roslindale Roxbury South Boston South End
- West End West Roxbury Other_____

2. What is your age? (write-in)_____

3. What is the age of the person you care for? (write-in)_____

4. What is the gender identity of the person you care for?

- Woman Man Non-binary, genderqueer,
gender non-conforming I'm not
sure Prefer not
to answer Other_____

5. Their racial/ethnic identity is... (Select all that apply. Note, you may report more than one group.)

- American Indian or Alaska Native Asian Black or African
American Hispanic or
Latine/o/a Middle Eastern or
North African
- Native Hawaii or
Pacific Islander White Prefer not
to answer Other _____

6. Do they speak a language other than English at home? Yes No

7. If yes, what other language(s) do they speak? _____

8. How well do they speak English? Very well Well Not well Not at all

9. Is their total annual household income less than \$20,000? (Optional)

- Yes No Prefer not to answer

10. Are they currently a MassHealth member?

- Yes No I don't know

11. Do you have any additional input or thoughts you'd like to share with us?

Want to join the Age Strong email list? _____ Email address _____ Zip code _____

**All information on this survey is confidential. If you choose to sign up for our email list, your email address, name, and any other identifying information will not be linked to your responses to this survey. **

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