

# MY NEIGHBORHOOD – A VISION OF RETIREMENT

This survey focuses on the highlights, concerns and challenges for persons who are retired or reaching retirement age. The survey is sponsored by a collaboration of agencies that are working towards the goal of:

- a) Helping seniors remain independent in the home of their choice by linking them to information and resources; and
- b) Initiating and supporting the creation of new opportunities for needed resources in the neighborhood to ensure that residents can successfully “age in place”.

Please answer these questions for yourself OR, to assist us in understanding the needs of seniors, you may answer for a senior whom you know was not able to attend.

**\*ANSWERS ARE CONFIDENTIAL AND NOT PERSONALLY IDENTIFIED\***

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*To help us know you better please share the following information with us:*

Age:  18-50     50-65     65-75     76+      Gender: \_\_\_\_\_

Primary Language \_\_\_\_\_ Neighborhood \_\_\_\_\_ Zip Code \_\_\_\_\_

Racial/Ethnic Group:  African     American Indian/Alaska Native     Asian

Black/African-American     Hispanic       Native Hawaiian or Other Pacific Islander

White       Self Identify \_\_\_\_\_

.....  
1. Name **the three most important** elements that make your current neighborhood an excellent place for retirees and seniors to live? \_\_\_\_\_

\_\_\_\_\_

2. Name the three most important needs of retirees and seniors that you believe are **not being met** in your neighborhood? \_\_\_\_\_

\_\_\_\_\_

3. What social, recreational, spiritual or religious activities are you involved in? \_\_\_\_\_

\_\_\_\_\_

4. Choose the **three best ways** to provide you information about resources.

Community meeting     Flier to home     Flier at place of worship     Internet

Television ad     Coupon booklet     Newspaper (name) \_\_\_\_\_

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5. Which of these services might you need assistance with to successfully live in your neighborhood during your senior years? Check all that apply.

- Financial Help  Preparing Forms  Legal/Insurance  Medical/Dental Care  
 In-Home Health Care  Food Preparation  Caregiver Planning/Training  
 In/Outdoor Chores  Transportation  Home Improvement Contractor Oversight  
 Support Group:  Disability  Caregiver/Family Issues  GLBT  Grief  AA/GA  
 Other \_\_\_\_\_

6. What activities/classes might you get involved in if they were close to home or you had transportation? Check all that apply.

- Exercise/Fitness  Arts/Cultural  Computer Classes  
 Nutrition/Wellness  Home Decorating/Improvement  Part-time employment  
 Volunteering, such as \_\_\_\_\_  
 Other, such as \_\_\_\_\_

7. What are the **top three resources** that seniors need to successfully “age in place” in their neighborhood? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Is there anything else you would like to share about what makes a successful community where you can remain through retirement? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you – we appreciate your thoughts!

Please share your contact information so that we can keep you informed of upcoming events and ways that you could be involved in increasing the resources available to seniors who wish to “age in place” in their neighborhoods.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip code \_\_\_\_\_

Email \_\_\_\_\_