



Age Friendly Akron Survey Results Summary

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Executive Summary

Abstract: In May of 2019, the city of Akron in the state of Ohio was admitted into AARP's network of age friendly cities and communities. Akron has a long history of aging services initiative that date back to the 1970s. In order to provide direction for future aging initiatives an assessment of Akron current state was conducted in early 2020. A survey designed to capture information on the eight age-friendly domains was designed and mailed to 3,000 randomized individuals in Akron's ten political wards. A total of 656 individuals responded and returned the survey. Akron is rated good to excellent by older Akronites, people want to stay in their neighborhood and in their home. Most Akronites like and use their neighborhood parks, find their streets well-lit, and feel safe walking in their neighborhood. Most respondents rated transportation in Akron as good to very good, but found sidewalks good to poor. There is a high level of access to social and educational activities and a substantial opportunity to include more people. About two-thirds of respondents participate in faith-based activities, volunteer, and participate in city-sponsored events. Loneliness is not or rarely a problem for three quarters of respondents. More than 80% of respondents indicated they disagree they are disconnected from the community. There is high level of access to the internet and public WiFi in Akron and a substantial opportunity to include more people. Overall, Akron has benefitted from its historical efforts and has the opportunity to impact on more older adults as the older population grows.

1. Introduction

Beginning in the early 1970's Akron showed strong leadership and commitment to implement policies and create services that benefit older people. The Akron Metropolitan Housing Authority had already developed special housing for older adults. In 1974 the City of Akron created the Senior Citizen Commission to the Mayor and City Council. Also United Way took responsibility to oversee the development of the Area Agency on Aging with funding from the Older Americans Act. These initiatives included establishing a planning process and funding for a three-county area of which Akron was the largest city with a population of approaching 300,000 at this time.

This led to the establishment of services for older adults using existing service providers with other providers added later. This included an information and referral agency, meals-on-wheels and congregate dining, geriatric clinics by the health department, city sponsored senior recreational centers, senior on-demand transportation services, and additional senior cost-supplemented housing. Further, a multi-purpose senior center was established as a cooperative effort between the Akron Metropolitan Housing Authority and The University of Akron with funding from the Area Agency on Aging, United Way and Summit County Welfare Department. The University also launched an AARP Institute of Lifelong Learning, and free university-level credit education programming. Another agency created senior job training and job search support. The County of Summit created a response that led to the formation of a cooperative committee that then led to a Robert Wood Johnson Grant to develop a centralized computer allowing for coordinated assessment and services across over 30 agencies.

These services expanded and were maintained in spite of being constrained with a weakening regional economy and the decline in manufacturing for which Akron had become famous as the “rubber capital of the world.” Over time, political priorities and a population shrinking toward 200,000 led to a loss of the aggressive earlier support. Akron was not in a county that supported an aging services levy and over time United Way and foundations allocated less to aging services. The City of Akron for a number of years did not have an active Senior Citizen Commission. However, in recent years the Akron Community Foundation has made aging a priority and has funded services planning research and programming.

In 2016, Mayor Daniel Horrigan was elected and supported the reactivation of the Senior Citizen Commission. As the commission assessed needs and wants of older adults, a series of community listening events were conducted. During 2017, there was discussion regarding the possibility of Akron becoming part of the age friendly cities initiative. With encouragement from Ohio AARP, the idea of formally applying was carefully considered. Support from the Director of the Institute for Life-Span Development and Gerontology who also was chair of the Commission on Aging as well as the Dean of Arts and Sciences and later Interim President of The University of Akron greatly facilitated moving forward. Direction Home Akron Canton Area Agency on Aging took major leadership responsibility. In February 2019 the application to join the AARP Network of Age Friendly Communities was submitted by Mayor Horrigan.

In order to focus on aging initiatives and blend them into the general initiatives to enhance the livability of the city of Akron, an effort to guide the next era of development was organized around the AARP network of Age Friendly Cities and Communities [1-3]. The first step in the process was the establishment of a core committee made up of the members of the Commission. The partners in this process include the City of Akron, Direction Home, Akron Canton Area Agency on Aging and Disabilities, The University of Akron, and The City of Akron Senior Citizens Commission to the Mayor and City Council. Members of the Commission on Aging make up the core committee for the Age Friendly Akron initiative. A broader membership of agencies and individuals, The Advisory Committee, was invited to advise the core committee. The development of the assessment involved this group.

To guide policy and planning an assessment of the current state of the city of Akron was planned. The Age Friendly Akron survey looks at the eight aspects of age-friendly cities: 1) housing and neighborhoods, 2) outdoor spaces and buildings, 3) transportation and walkability, 4) arts, entertainment, and leisure, 5) respect and social inclusion, 6) civic participation and employment 7) communication and information, and 8) health and wellness. Additional emphasis on technology and health services availability were incorporated into the survey instrument.

2. Materials and Methods

2.1. Survey participants

There were 3000 individuals over the age of 50 randomly selected from all 10 wards in the City of Akron. Surveys were mailed along with prepaid return envelopes. A total of 656 (21.9%) individuals responded and returned the survey. Respondents were predominately female (62.7%), Caucasian (72.4%), and spoke English (88%). The average age of respondents ranged from 50-95 with an average age of 69.3 (s.d. 10) years of age. About

two-fifths (40.1%) were married, a quarter divorced (23.9%), one fifth widowed (21.8%), and remainder never married (14.2%).

2.2. Instrument

The Age-friendly Akron survey instrument is shared in Appendix A. The instrument was designed to provide a description of the state of the respondents in each of the eight domains.

Section 1 of the survey consisted of twelve (12) questions on housing. Some questions had components that consisted of multiple aspects of living situations to consider and on which to report. The overall desire to live in their home, neighborhood, and in the City of Akron were assessed using 5-point Likert scale questions.

Section 2 consisted of six (6) multipart questions on outdoor spaces and accessibility. Questions asked respondents to describe the state of city infrastructure including evaluation of street lighting, sidewalk maintenance, walkability, and access to buildings and offices.

Section 3 of the survey consisted of nine (9) questions focused on aspects of transportation and access to various kinds of alternative transportation modalities including walking. Several questions asked respondents to indicate all the transportation modalities they utilize, and the list included various on-demand services including SCAT (on demand paratransit), taxis, Uber/Lyft, and others. Several questions asked about weather's impact on transportation. The city of Akron experiences four distinct seasons and is hot in the summer and has snow in the winter.

Section 4 of the survey consisted of six (6) multipart questions on arts, leisure, and educational opportunities available to Akron residents. Most questions focused on usage of major facilities (museums, theaters, outdoor venues, sports facilities) as well as various festival and educational opportunities available throughout the year.

Section 5 of the survey consisted of five (5) questions on respect and social inclusion. These questions asked respondents to indicate the kinds and frequency of interactions they have and to rate the quality of those interactions. One multipart question asked for a rating of the perceived voice older persons have in the community.

Section 6 of the survey consisted of seven (7) questions on civic participation and employment. Questions ask respondents about their employment status, participation in childcare and volunteering, and quantifying access to these opportunities. A question asking about experiences with agism related to employment is also in this section.

Section 7 of the survey consisted of seven (7) questions on access to information and questions about access to and use of communication technologies that include telephony and Internet services. Questions in the section also assess confidence in knowing how to obtain information on various services and awareness of specific programs designed to support the distribution of information, and connecting older persons with available services.

Section 8 of the survey consisted of seventeen (17) questions on health and wellness. The opening question asked the respondent to rate their overall health. Questions ask about access to grocery stores, medical and pharmacy services, and other health related services such as dentistry. Other questions focus on the use of and frequency of acute challenges related to health, food availability, medical services, and mental health. Several questions focus on loneliness and relationships with others in the respondent's family and in the community. Several questions ask about the use of home modifications required to maintain independence.

A final section of the survey includes nine (9) demographic questions including gender, age, income, and marital status.

3. Results

This section may be divided by subheadings. It should provide a concise and precise description of the experimental results, their interpretation as well as the experimental conclusions that can be drawn.

3.1. Housing and neighborhoods

Respondents rate the city of Akron positively with 89% reporting a good or better rating and 34% rating it as excellent or very good. Considering the respondents in terms of their average income there are more favorable views in areas (mailing zipcodes) with higher incomes. In the three lower incomes areas unfavorable ratings are nearly twice as high (13% vs 25%, but still a minority). See Figure 1 and Table 1.

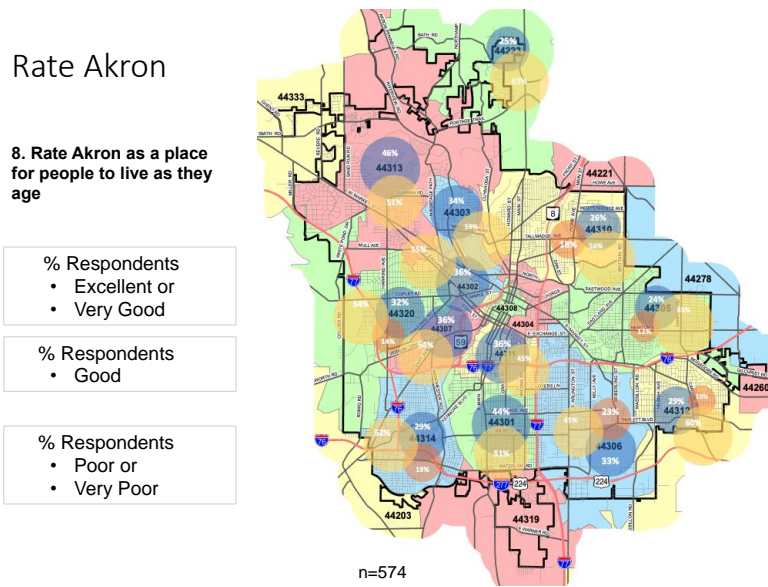


Figure 1. Ratings of the city of Akron as a place to live based on mailing zipcodes.

Table 1. Ratings of the city of Akron as a place to live based ordered by average income per mailing zipcodes.

8. Rate Akron as a place for people to live as they age

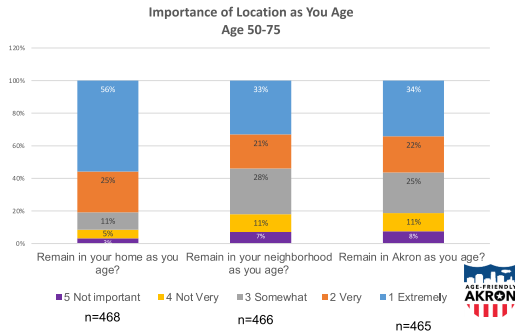
Row Labels	44223	44303	44313	44302	44312	44301	44305	44310	44320	44314	44307	44306	44311	Grand Total
1 Excellent	0%	10%	8%	0%	10%	8%	3%	5%	8%	2%	11%	8%	0%	7%
2 Very Good	25%	24%	38%	36%	19%	36%	21%	21%	23%	27%	25%	25%	36%	27%
3 Good	63%	59%	51%	55%	60%	51%	65%	56%	53%	52%	54%	45%	45%	54%
4 & 5 Poor & Very Poor	13%	7%	3%	9%	10%	5%	12%	18%	14%	19%	11%	23%	18%	11%
Total n	8	29	105	11	58	39	68	57	72	48	28	40	11	574

Ordered highest income to lowest income

Note: Zip codes with less than 8 responses were excluded from this analysis

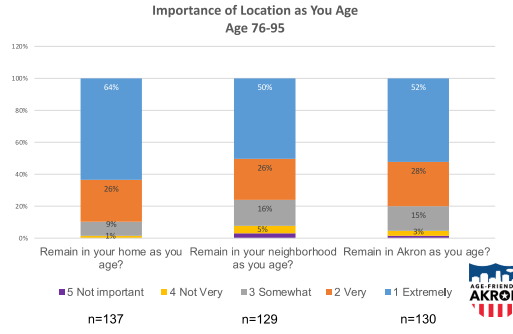
Respondents indicated they most strongly want to remain in their homes, and feel slightly less strongly about remaining in their neighborhoods and in the city of Akron. These feelings are stronger for the oldest respondents.

Remain in home, neighborhood, & Akron



(a)

Remain in home, neighborhood, & Akron



(b)

Figure 2. Respondents want most to remain in their homes, but also want to remain in their neighborhoods and in the city of Akron. (a) The reported importance of aging in place for respondents 50-75; (b) The reported importance of aging in place for respondents 76-95.

Several issues in the survey related to housing noted concerns either by absence (e.g. don't have access) or uncertainty (e.g. not sure). These issues included access to affordable housing (29.35% not sure / 15.92% no), pedestrian crossing timings (15.92% not sure / 24.21% no), access to snow removal services (19.34% not sure / 22.74% no), access to lawn services (19.04% not sure / 25.50% no), well maintained side walks (5.94% not sure / 48.75% no), and access to a reliable handyman (23.31% not sure / 30.08% no). There were no geographic differences in the accessibility of sidewalks and concerns were citywide.

13. Do you have access to the following?

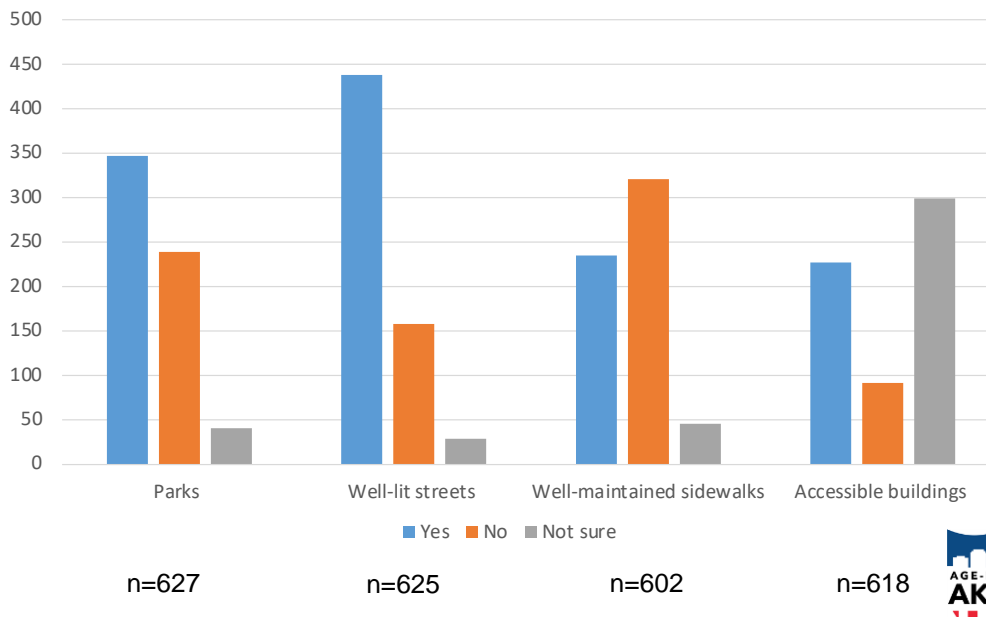


Figure 3. A majority of respondents indicated they have access to parks, well-lit streets, and accessible buildings. In contrast, access to well-maintained sidewalks were a concern.

3.2 Outdoor spaces and buildings

Respondents indicated that public parks were extremely (42.97%) or very important (34.88%) and 74% of respondents indicated public parks in the neighborhood were good, very good or excellent. About 10% indicated that parks in their neighborhood were poor and 15% indicated they did not have them.

Access to park benches (86.24%), a park with accessible trails (66.98%), pathways for bikes and people (70.06%), parks that are maintained in the winter (78.96%) where all generally viewed as available for a majority of respondents.

Buildings were also viewed favorably with accessible front doors (81.37%) , having automatic door openers (53.35%), and large enough restrooms (46.61%), all or most of the time.

All figures and tables should be cited in the main text as Figure 1, Table 1, etc.

3.3 Transportation and walkability

Respondents indicated an overwhelmingly positive view of public transit in the city of Akron with more than half rating the transit system good (58%), very good (23%), or excellent (7%). Regardless of age, driving themselves was the most frequent mode (83%) and being driven the next most frequent mode (9%). There was a three-fold increase in those respondents reporting being driven for those 50-75 (5%) versus those 76-95 (16%) years of age. See Figure 4. As driving is the major mode of transit it is positive that streets signs are perceived as legible (85.66%). Awareness of driver refresher courses, however, is low at only 13.54%.

Akron has both a public fixed route bus system as well as a dedicated on-demand bus service known as SCAT. Both services are utilized more by those 75 and under and by a very small percentage of older adults (5% combined).

19. What is your usual way of traveling to appointments, errands, events, or community locations? (by age)

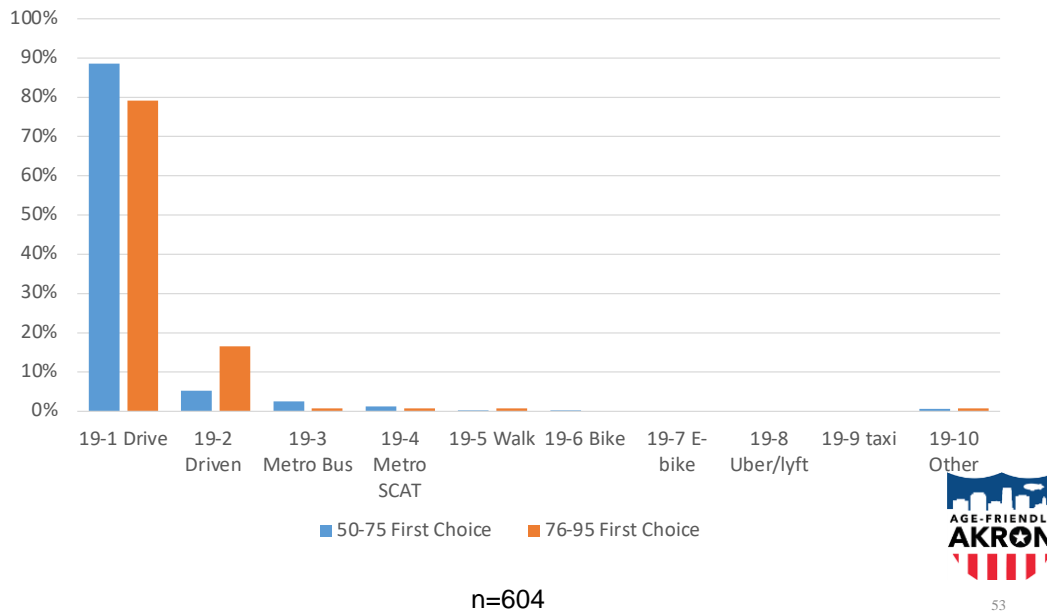


Figure 4. Respondents indicated that a vast majority of travel is done by driving themselves or being driven in a car. This is a small number of standard public bus usage (Metro) and public on-demand services (SCAT) as well as walking.

The perceptions about public transit are overwhelmingly positive, though there is a substantial number of respondents indicating uncertainty or no opinion. Rating on access to transport for those with disabilities (61.32% yes / 3.35 no / 35.30% not sure) and access to reliable transit (71.52% yes, 7.84% no / 20.64% not sure) reflect this trend. Concerns are higher with respect to perceptions of lighting at public transit stops (34.56% all or most / 65.44% some, few, or none), public transit stops have seating (25.52% all or most / 74.48% some, few, or none), and shelters from the weather (21.45% all or most / 79.55% some, few, or none).

3.4 Arts, entertainment and leisure

Akron has historically had a rich cultural environment with The University of Akron as its center with a strong art, dance, and theater program, as well as the Akron Symphony, professional and amateur dance companies, active music scene, numerous live theaters and outdoor concert venues, and a well-respected Museum of Art with a focus on modern works as well as an arts district and monthly art walk. Akron is also home to a downtown baseball stadium for the minor league baseball team as well as stadiums for The University of Akron football, baseball, basketball, and track and field teams. Crisscrossing Akron are the historical locks and canals of the Ohio and Erie canal and the tow path trail which connects with walking and bike paths that connect parks and greenspaces throughout the city and along the Cuyahoga River and Summit Lake. Akron also is home to the Akron Zoological Park, Stan Hywet Hall and Gardens, several historical cemeteries, the Akron Toy Museum as well as many city-sponsored and neighborhood art, cultural, and music festivals throughout the year.

ArtsNow hosted a listening event targeted towards older adults as they were developing their Akron Cultural Plan. ArtsNow understood the importance of including people of all ages and abilities. Almost seventy-five older adults convened for an afternoon at Stan Hywet to share their thoughts on accessibility to the arts and the importance of creating space and forums appropriate to their needs.

Respondents indicated they have access to social activities (70.3%), educational events (62.74%), and public events (78.89%). See Figure 5.

Questions about participation gauge usage rather than perceptions of access. Respondents were asked how often they participate in events with one quarter (26.60%) participating every other week or more, less than a fifth participating monthly (18.95%), and remaining majority (54.54%) participating less than monthly (29.58%) or never (24.96%). However, there was an indication that more frequent participation was desired with a third of individuals (32.36%) wanting every other week or more, about a third (30%) wanting monthly event participation, and the remaining quarter interested in less than monthly participation (15.40%), or no participation at all (11.90%).

28. Do you have access to the following events & information in Akron?

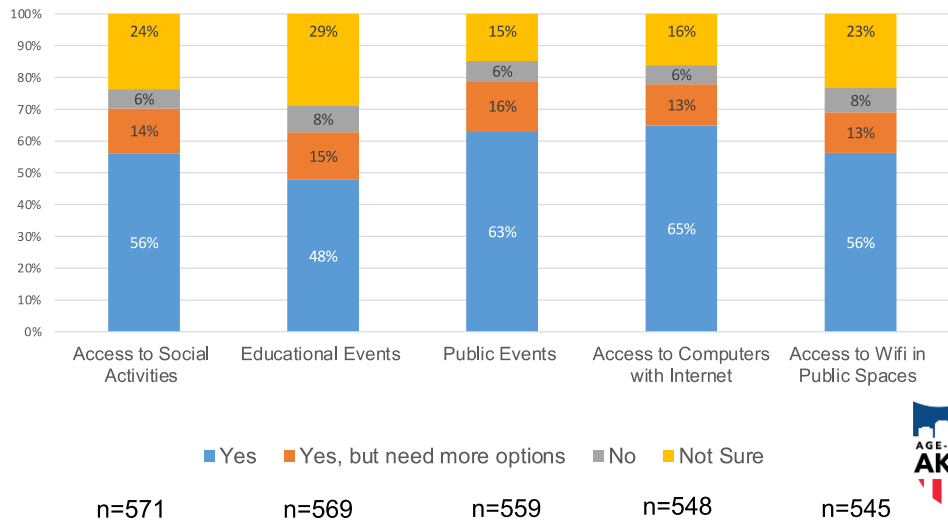


Figure 5. A summary of access social, educational and public events as well as access to computers and WiFi networks.

How often do you participate in social/community events? (by income)

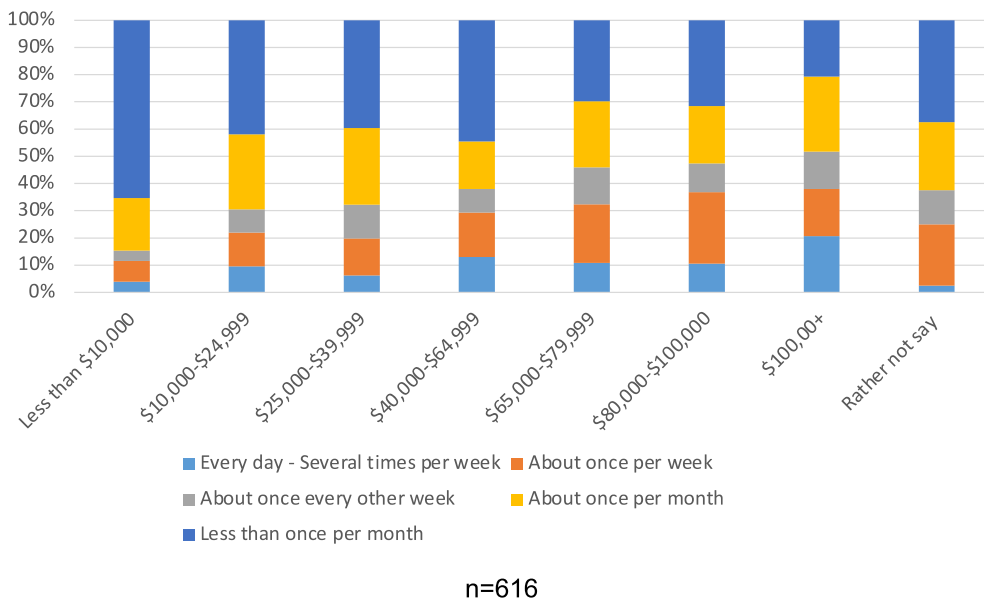


Figure 6. Income is positively related to the amount of activities in which older adults participate.

Respondents were asked if they participate in museums and the zoo. About half (50.24%) indicated yes, while about a sixth (17.34%) indicated they do not but would like to, nearly a quarter (23.82%) indicated they do not but had in the past, and remainder do not participate and have no interest in doing so (8.59%). A similar

pattern is found with live theater, slightly more participation with city-sponsored events, and slightly less participation in sporting events.

Questions were also asked about other activity interests. About half of respondents indicated participation in faith-based activities (50.75% yes, 9.05% no but would like too), volunteer activities (34.66% yes, 23.28% no, but would like too), and family gatherings (74.42% yes, 7.26% no, but would like too).

Leisure activities also include continuing education and physical recreation participation. These appear to offer opportunities for capturing great interest from the community. Only 13% of respondents indicated they currently participate in continuing education opportunities, while 34.85% of respondents said they did not participate but would like too. With regard to physical recreation a larger group (33.44%) indicated they do participate and a similar size group (34.43%) said they do not participate but would like too.

3.5 Respect and social inclusion

The degree of voice that older persons perceive in the community is an important measure of the respect they feel. Their wellbeing is also connected to the amount of social interaction they experience. These are the focus of the questions related to respect and social inclusion.

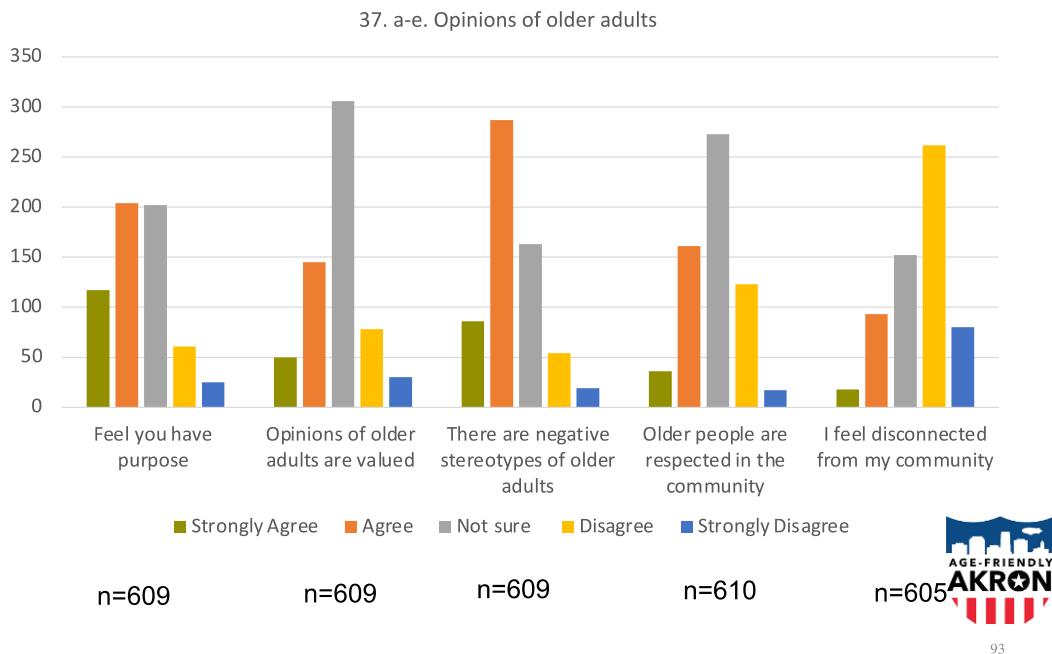
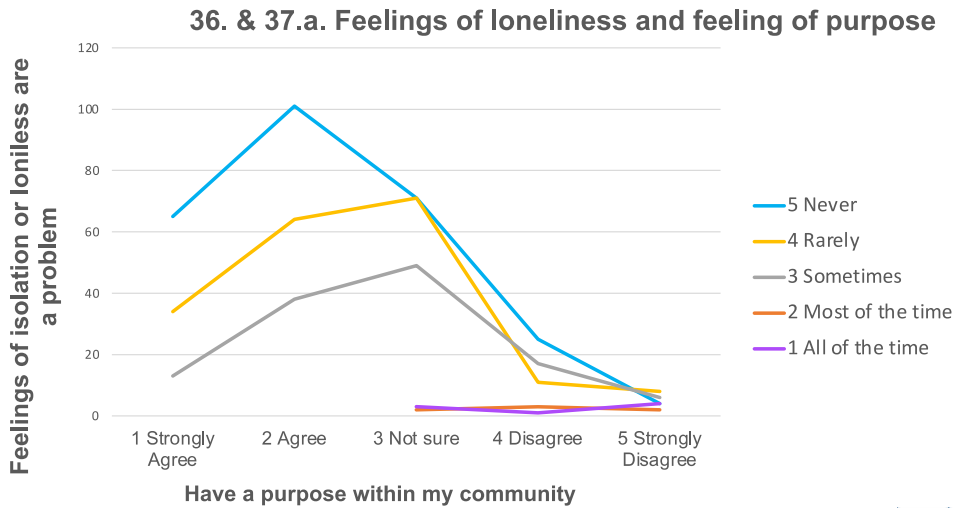


Figure 7. A majority of older adults report having purpose, while a minority indicate their opinions are valued and they are respected in the community. Encountering negative stereotypes of older adults as well as feeling disconnected are reported by a significant minority of respondents.

3.5.1 Community Interactions

Most (70.66%) older adults interact with friends and family on a daily basis and another 7.26% interact at least monthly. Only 3% report highly infrequent contact or have no friends and family. A majority of survey respondents report engaging with other age groups either daily (39.75%), weekly (25.61%), or every other week (8.74%). About one fifth engage with other age groups once per month (9.51%) or less than monthly (8.44%), with 8.41% indicating that they never do so.



36. Are Feelings of isolation or loneliness a problem for you?
37.a. I feel that I have a purpose within my community.



n=594

Figure 8. Feelings of purpose and loneliness are negatively related with greater purpose and less loneliness being the most reported state.

About one third (32.02%) of respondents indicated that opinions of older people are valued, while half (50.25%) were not sure, and 17.74% indicated they did not think opinions were valued. Similarly, when respondents were asked if older people were respected by the community 5.90% strongly agreed and 26.39% agreed, while 44.75% were not sure, and 20.16% disagreed and 2.79% strongly disagreed. When respondents were asked if they feel disconnected from the community a majority strongly disagreed (13.22%) or disagreed (43.31%) with the statement. One quarter (25.12%) of respondents were not sure if they felt disconnected, with 15.37% indicating they agree with feeling disconnected and 2.98% strongly agreeing. See Figure 8.

3.5.2 Purpose and Loneliness

Respondents strongly agreed or agreed that they feel they have a purpose 52.71%, while one third (33.17%) reported not being sure, and 14.13% disagreed or strongly disagreed. Feelings of loneliness is never (44.72%) or rarely experienced by most (31.06%) older adult respondents. However, feelings of loneliness are reported sometimes by about one fifth (21.30%) of respondents. Of most concern are the respondents that report loneliness is experienced most (1.14%) or all of the time (1.14%). Spearman's rho shows a statistically significant correlation between feelings of purpose within a community and feelings of loneliness ($r_{s[594]} = -2.14, p < .001$). This correlation is small. See Figure 8.

45. Do you have access to the following in Akron?

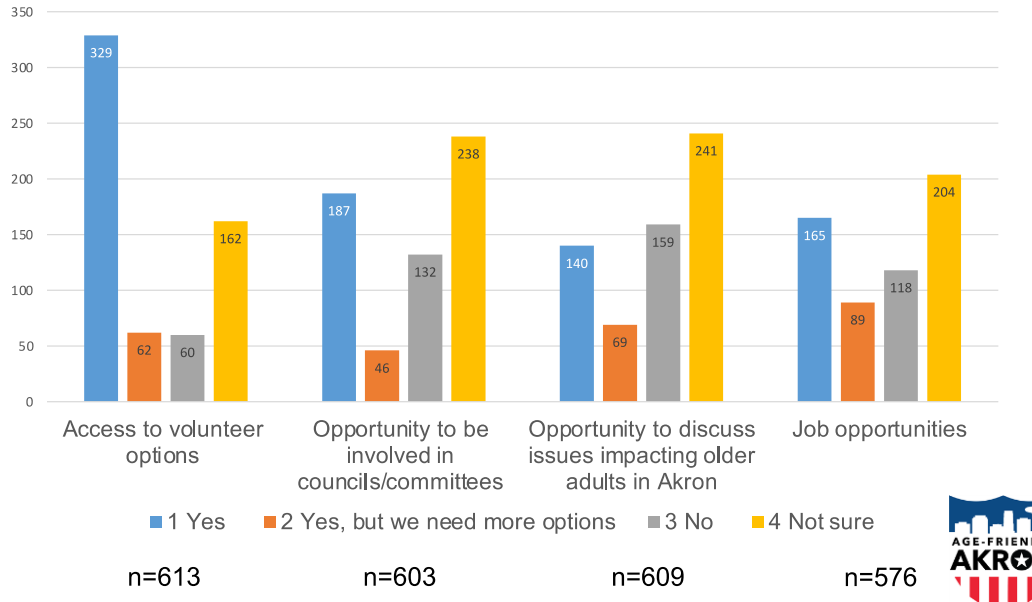


Figure 9. A majority of respondents had access to volunteer opportunities and opportunities to be involved in committees. A considerable number of respondents are not sure about various opportunities which is an opportunity for improving awareness.

3.6 Civic participation and employment

About one fifth of respondents reported working full time (19.16%), with 4.83% working part-time, and 1.81% reported themselves as self-employed. When those reporting retired and working (8.21%) are added in, this is about one third of respondents. This is in line with the percentage of 50-67 year olds who are below the standard retirement age to receive social security. Of those working 11% indicated enjoying working, 9% indicated they could not afford to retire, 4.3% were working to maintain healthcare coverage, and 6.7% said they were not yet of retirement age.

There are a group of respondents who reported themselves as unemployed and seeking work (1.61%), retired and seeking work (6.28%), or underemployed and seeking more work (.16%). This would be about 50% higher than the unemployment rate for the city of Akron at the time of survey (4.0%) [4]. Some respondents reported providing unpaid childcare (8.17%) and unpaid eldercare (6.56%).

The majority of respondents (55.72%) reported being retired and not looking for work. Three quarters (73.29%) of respondents indicated they chose to retire, while the remainder (26.71%) reported they did not choose to retire.

3.7 Communication and information

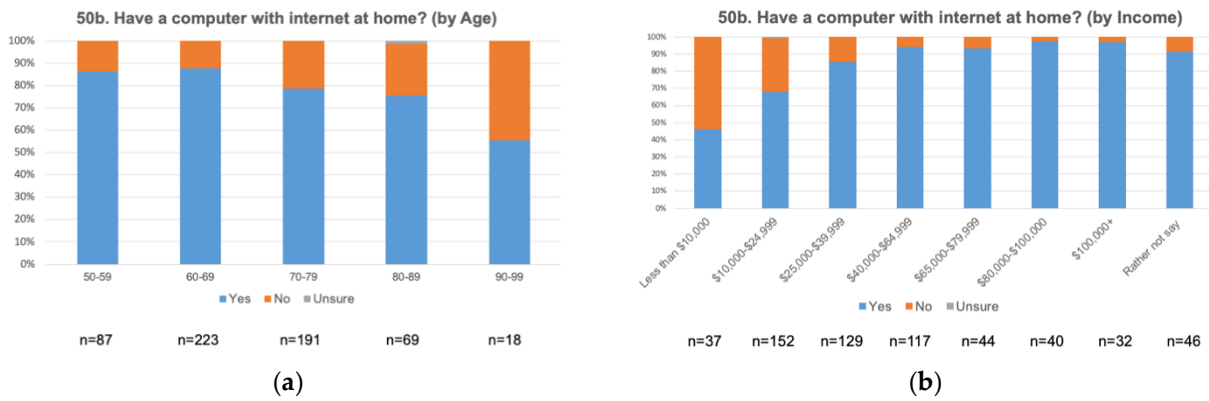


Figure 10. Respondents generally have computers with internet in the city of Akron. (a) Having a computer at home with internet is negatively correlated with age ($rs[588] = -.135, p < .001$); (b) and positively correlated with income ($rs[597] = .329, p < .001$).

Finding information that is needed and being proactive about seeking information are reported by a large majority of respondents. Less than 5% of respondents indicated they were rarely or never able to do so and less than 8% were rarely or never proactive about doing so. When asked specifically about assistance with housing 12.48% indicated they were always able to and 33.99% were able to find assistance most of the time. More concerning was that respondents reported they found assistance with housing sometimes (25%), rarely (13.96%) or never (15.27%). Similarly when asked specifically about knowing where to go for assistance with healthcare 25.16% of respondents always know where to go and 38.61% knew where to go most of the time. However, 21.12% only knew where to get assistance with healthcare sometimes, 8.08% rarely, and 9.03% never.

Respondents indicated most still have a landline, but a greater number have computers, a smartphone and wifi at home. See Figure 11.

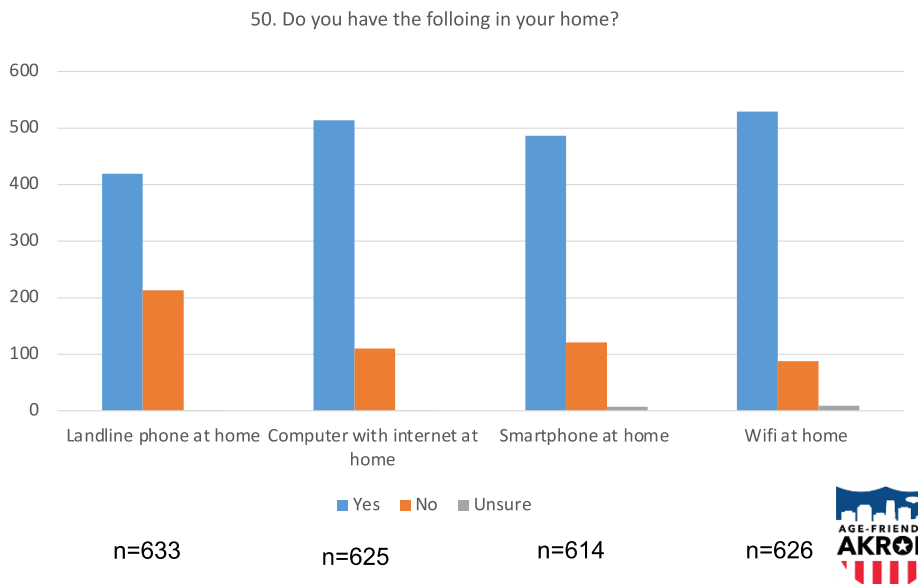


Figure 11. Respondents want most to remain in their homes, but also want to remain in their neighborhoods and in the city of Akron. (a) The reported importance of aging in place for respondents 50-75; (b) The reported importance of aging in place for respondents 76-95.

3.8 Health and wellness

The Health and wellness portion of the survey assessed not only respondents' overall health and mental health, but also other factors that contribute to health outcomes such as food security, healthcare affordability, access to healthcare services and providers, and health insurance. Overall, 70% of respondents rated their overall health as very good or good, 24% responded with fair health, and 6% rated their health poor or very poor.

Additional insight into health can be gained by examining location, access to food, pharmacies, and fitness centers, and affordability. A decreasing number of respondents with very good and good health, and an increasing number of those with fair, poor, or very poor health is observed when zip codes are ordered by highest income to lowest income, as seen in Figure 12 (a).

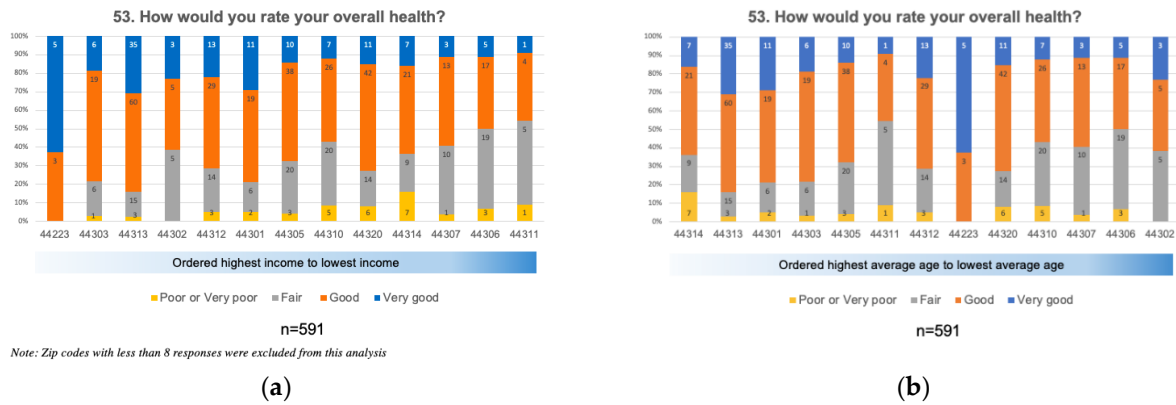


Figure 12. Respondents rate their overall current health status. (a) represents overall health ordered by zip code from highest to lowest incomes of the survey respondents and (b) represents overall health ordered by highest average age to lowest average age of respondents.

Access to a full-service grocery, convenience store, and pharmacy in Akron was indicated by 87% or more of respondents in all three categories. The need for more options was highlighted in regard to Healthcare facilities and Urgent care centers (32% and 33% of respondents, respectively).

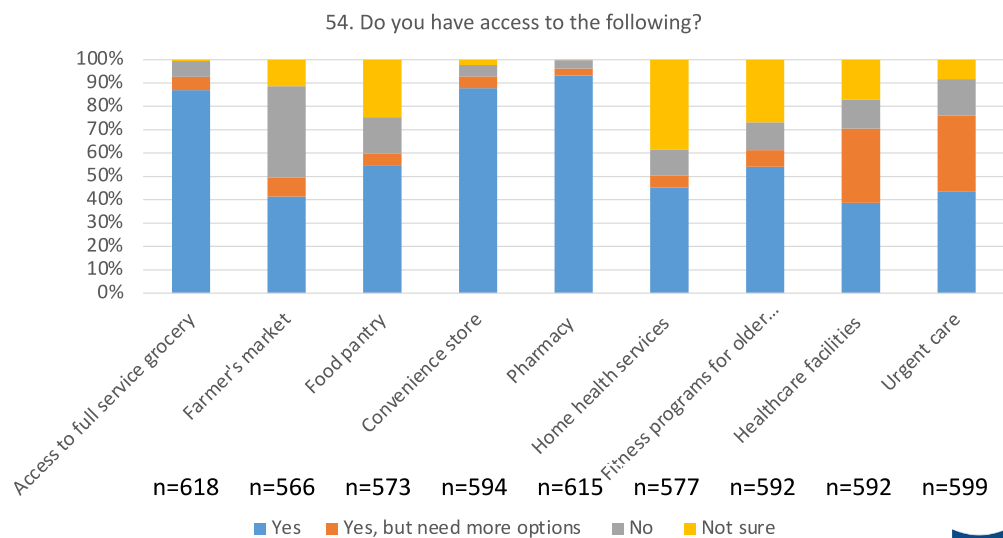


Figure 13. The majority of respondents indicated access to a full-service grocery, convenience store, or pharmacy. This figure represents' ability to access food, fitness, and healthcare centers in the Akron area.

Affordability of medications, dentures, glasses/contacts, and hearing aids is considered vital to accessing these items and thereby maintaining low risk of other health issues related to medication adherence, falls, depression, nursing home stays, and dependence on family caregivers [5-6]. Generally, health insurance plans available to older adults including the federally funded Medicare plans for those 65 years and above or disabled do not cover dental, vision, and hearing; these items will often be paid for out of pocket.

Seventy-eight percent or more of respondents indicated they can afford regular medications and glasses/contacts always or most of the time (88% medications, 78% glasses/contacts). Over 53% of respondents do not need dentures or hearing aids. Of those that do need these items, approximately 60% reported they could afford them always or most of the time.

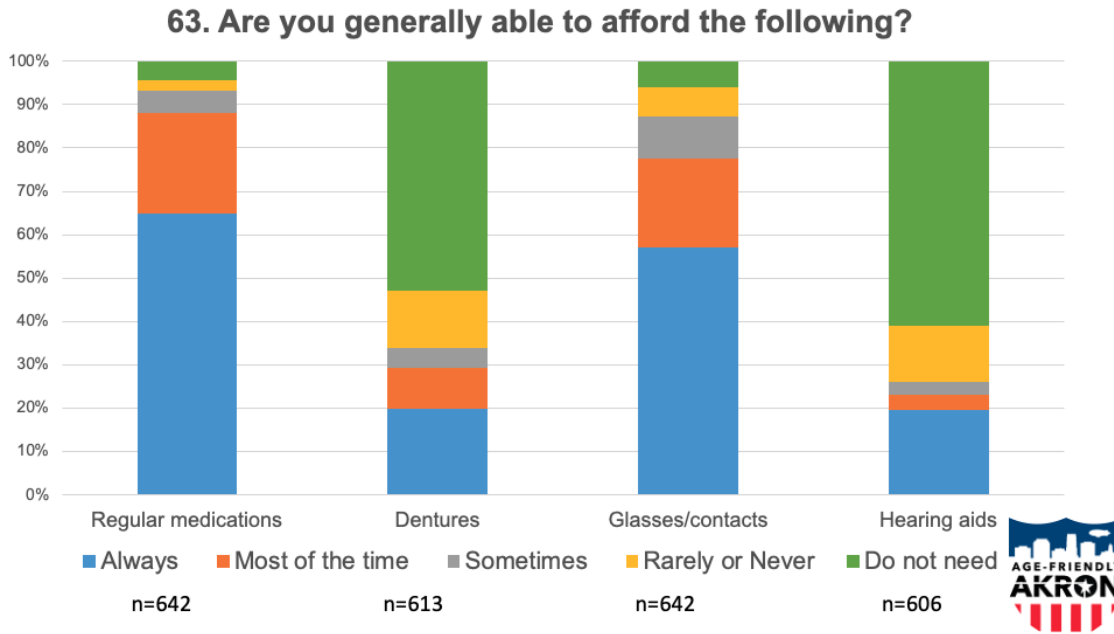


Figure 14. Affordability of regular medications, dentures, glasses/contacts, and hearing aids is reflected in this figure. The majority of respondents can afford regular medications and glasses/contacts always or most of the time. Around 60% of respondents do not need dentures or hearing aids currently.

4. Discussion

Over many years the planning process of the Area Agency on Aging was the major source of information regarding service needs of older adults. This was an appropriate focus on individuals with greatest needs. The Age Friendly City approach to looking at a community focusing on the eight domains gives the first multidimensional look at citizens over 50 and their assessment of the city. This is the first time that the city has been looked at in depth in terms of perceptions of positives and negatives by people 50+. The very process of designing and carrying out the survey and the analyses has provided important information for focusing on priorities and possible intervention strategies. This information was collected pre-COVID 19. In order to take recent experiences into account, Focus Groups will be conducted in each ward of the city to determine what additional issues need to be considered in planning and priority setting.

One of the key findings was that older adults feel that they need to have greater involvement in decision making and their opinions need to be considered by community leadership. This speaks to why the assessment process as a precursor to priority setting is so important. Taking the time to fully explore the results and to engage committees to discuss priorities in each of the eight domains is an important part of the process.

Another key finding is the importance of staying in one's home is a very high priority for Akron residents, higher than the national average for this item. This also leads to a focus on the quality of the neighborhood on many dimensions such as safety, access to grocery shopping, access to health care and the type of supports such as transportation and home services that are available. It is apparent that not all areas of the city provide the same experience and how to intervene in selected areas will need to be determined.

Most important are the identification of gaps in needed services, need for alternative housing options and the importance of having access to needed information for services when they become needed. There are disparities that need to be focused on such as key sources of information for needed services. Results showed that relatively small numbers of individuals were accessing the most helpful information sites and services. Yet individuals felt that they were able to find information and felt that they were proactive when it is well known that individuals do not know what they need and only really look for information when there is a problem.

Another important area that was assessed is the quality of the living experience in terms of parks and recreations opportunities, opportunities to attend theater and concerts, attend sports events, engage in educational activities and ability to have access to jobs and volunteer activities. It becomes very important to carefully explore the areas that need to be addressed first.

5. Conclusions

To further support older adults in Akron aging in place, several community resources guides have been compiled. Notably, the Senior Citizen Information Booklet, produced in Summit County and available online [], the Summit County Resource Guide, developed by Getting Wiser and Summit County 2-1-1 [], and the Akron Resource Directory, and online resources such as the 2-1-1 Summit County Resource Database.

Many agencies and resources referenced in these guides have found innovative ways to continue their work supporting older adults despite the COVID-19 pandemic. Programs offering minor home repairs at no cost such as Rebuilding Together of Northeast Ohio and Lift Up Ministries continue to provide valuable assistance with repairs around the home including roof/gutters, plumbing, electrical, porch stairs, and furnace. Though many adult day services have been temporarily suspended, organizations such as the Benjamin Rose Institute on Aging have been making telephonic wellness calls to residents they support. A plethora of meals programs, while with increased safety precautions have continued their work delivering food to Akronites. In particular, Mobile Meals, Vantage Meals on Wheels, and others have been maintaining vital efforts in meal provision and delivery. As the city pivots to the future, it will be leveraging its strong, growth-ready programmatic infrastructure on which to build.

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