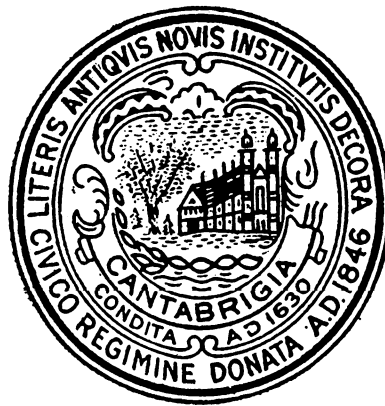


**The Senior Center Role**  
**in the**  
**Service of Cambridge Elders**



**Prepared for City Councillor Sheila Russell**  
**and the**  
**City of Cambridge**

by  
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## INTRODUCTION

The need for a city wide senior center in Cambridge has been an issue of debate for many years. In recent times, an active group of senior citizens, and the Cambridge Council on Aging, have made a strong case for establishing a central senior center in Cambridge.

During 1990, the Cambridge City Council has passed two resolutions concerning a senior center in Cambridge. The first was prompted by a petition, signed by over 1,000 Cambridge elders, asking the City Council to support the establishment of a city wide center. The second, was in response to a City Council tour of the Methuen Senior Center, and asked the City Manager to begin funding a city wide senior center by 1992. Both resolutions passed by a unanimous vote of 9 members.

Clearly the issue has progressed from "why and if" a city wide center should be established. The issue now is "how and when." The first City Council meeting of 1991 passed a resolution calling for the creation of a committee to plan a city wide senior center for Cambridge. This committee, in conjunction with the Cambridge Council on Aging, will submit a proposed plan for a central senior center to the Cambridge City Council, and the City Manger's office.

This report is meant to preface the proposal of the aforementioned committee. It's intention is to highlight the limitations of the present "fragmented service system" and outline the rational of a senior center based service system. The final goal of this report is to acquaint anyone outside of the elder service system with the process and problems of serving the elder community. It is hoped that this report will create a bridge of understanding between the City Administration and the Senior Center Planning Committee. By doing so, the process for establishing a centralized senior center in Cambridge will hopefully proceed with a minimum of difficulty.

**- THE FRAGMENTED SERVICE SYSTEM -**

Cambridge at large is a very diverse community. This is no different when speaking specifically of elders. It has been the policy of Cambridge to serve this diverse community by a diffuse or fragmented service system. The focus has been to establish a presence in the various neighborhoods in Cambridge in order to recruit and serve clients.

The Cambridge Council on Aging at 51 Inman Street serves as "headquarters" for the system. The Council Director, Assistant Director, Information and Referral Specialist, Volunteer Coordinator, and Activities Director comprise the core service organization at the Inman Street office.

There are other Council staff members placed at various locations such as the North Cambridge Senior Center. Others staff members "float" between locations, depending on where they are needed, such as the Geriatric Substance Abuse personnel.

These staff persons must then coordinate their efforts with the various community schools programs, which act independently of each other. They must also interact with private groups such as the Cambridge Committee of Elders and the Salvation Army. In addition, there are Tenant Senate Organizations in each of the Cambridge elderly housing buildings that receive a stipend from the city to use for various activities. The Cambridge Council on Aging is expected to act as assistant and liaison for each building's particular activities. The Council on Aging then must also maintain contact with various social service organizations as well as area hospitals and churches.

The Council on Aging must also coordinate efforts with other city departments when planning services. With minimal space and diffuse resources dedicated to the Council on Aging, operations such as the Hatian Elders Program must operate from a teen center, and coordinate their efforts with the Community and Youth Division of the Human Services Department. This is due to the fragmented system's focus on

yielding to the differences between various neighborhoods.

Unfortunately, this system assumes that a diverse community is a liability to service delivery. This assumption creates the need to delegate limited resources to many different areas, often resulting in each area being unable to adequately serve its clients. The fragmented service system also makes it impossible for the elders in Cambridge to either represent or consider themselves a viable city wide community. The fragmented system was originally intended to circumvent the assumed divisions in the elder community. Unfortunately, the fragmented system often fosters and perpetuates these divisions.

Effects on the Elder Community at Large:

The systematic isolation inherent in a fragmented system is often resented by the elder community. "People would like to get out of their buildings and meet other people" said one resident at the Putnam school apartments. The same sentiment was echoed at the other end of the city. "People get tired of seeing the same people all the time" said a resident of the Burns Apartments, "they would like to meet new people."

The divisive nature of the fragmented system also contributes to an adversarial atmosphere between neighborhoods. Many elders feel they must compete for their

fair share of limited resources. "People are not getting what they deserve" said a dejected resident and activities planner at the John F. Kennedy Apartments. "Many feel cheated and don't trust the city to do what they say."

The fragmented service system often causes charges of favoritism to be leveled at the Cambridge Council on Aging. This makes it difficult for the Council on Aging to address a particular group without seeming to alienate another. This atmosphere hampers the Council on Aging's ability to establish effective outreach efforts.

Effects on the Minority Community:

The fragmented system has taken a heavy toll on the Council on Aging efforts to serve the minority elder communities. Non-English speaking elders are unable to understand the complex service bureaucracy. Some members of the minority communities enlist the support of an outside agency such as the Cambridge Organization of Portuguese Americans. Others may try to seek service through a church group. Although well intended, these organizations are just as unfamiliar with the system as their prospective clients and simply add another link in an already long and involved chain. The most common result of these efforts is frustration and increased isolation. This only increases the difficulty of the Cambridge Council on Aging to deliver

services effectively. Many potential clients fall through the cracks due to the bureaucracy of the fragmented system.

Effects on the Council on Aging:

Cambridge Council on Aging staff persons are also systematically separated from their clients. The Inman Street offices of the COA staff are inaccessible to most elders in Cambridge. Those elders able to access the staff at Inman Street find only a limited number of services offered there. Often elders must travel to several places to utilize desired services, a process most elders find prohibitory.

The constricted personal interaction of the fragmented system takes its toll on COA Staff as well. "The service structure is simply too diffuse to offer efficient effective service" says Anita Shipman, Assistant Director of the Cambridge Council on Aging. The ability of the staff to identify problems, offer assistance and advocacy is severely curtailed when they are forced to do most of their work over the phone. Personal contact is an indispensable resource for service providers to assess the needs of clients. It is relatively non-existent in Cambridge.

Most service providers in Cambridge agree that the fragmented system also fosters a duplication of effort among

agencies. Although the Somerville-Cambridge Inter-agency task force has been successful in managing this problem, the diffuse nature of the fragmented system does not lend itself well to a coordinated service effort. A relatively high percentage of a service provider's time is needed to address the administrative details of the fragmented system.

Effects on Frail and Homebound Elders:

The limitations of the fragmented service system are most severe in the service of frail and homebound elders. "Right now there is no resource for identifying home-bound or isolated elders (in Cambridge)" according to Janice Taylor, Director of the Stride Rite Adult Day Health Program in Cambridge. The confusing array of service categories and their various locations discourage frail and isolated elders from seeking assistance. There is no entity in Cambridge that is thought of as "the place to call" when assistance is needed. "There is a real knowledge deficit in our clientele pertaining to medical care" says Peggy Larkin, Director of the Cambridge Visiting Nurses. "There are a lot of programs out there, but keeping track of them is difficult, most people don't have the concept of any agency that is the place to call for help." Dr. Katherine Hess, Geriatrician at Mt. Auburn Hospital agrees. "Cambridge has an amazingly rich community of services, but fragmentation

make access difficult."

The fragmented system simply can no longer meet the needs of clients or service providers in Cambridge. It is administratively top heavy in a time when budget restraints and a growing elder population require a more efficient approach to service. It fosters divisions within the elder population and prohibits the creation of a healthy, supportive elder community. It limits and distorts information needed by service providers and hampers their efforts to provide effective service. The fragmented service system must be completely restructured if Cambridge is to meet the future needs of its elder community.

**- THE SENIOR CENTER SERVICE SYSTEM -**

Jim Sykes, Gerontology professor at the University of Wisconsin, and Chairperson of the National Council on Aging believes "fragmentation can no longer meet the needs of the growing population (of elders.) Community is necessary to handle the burden."

Contrary to the fragmented system, the Senior Center based system does not view demographic differences in the elder community as a liability to service delivery. "Aging itself is a common denominator" according to Dr. Allen Abrams, Geriatrician at Cambridge City Hospital, "as people

age, they become more like each other socially." This basic principal underscores the approach of a senior center based service system.

Effects on the Elder Community at Large:

Dr. Abrams stresses that the issues of income, race, and religion etc. that are important to younger adults fade significantly with age. "Reduced income, constricted life space and the loss of role that defines the self and provides the structure of daily living; loss through death or relocation of significant others; reduction of the opportunities for mastery; increasing vulnerability to health problems; fears of further incapacity and dependence" all are forces that naturally bring older people together. A senior center uses the realities of aging to bring people of different backgrounds together to supply mutual support for mutual problems. Not only is a senior center capable of allowing people to deflect what can become overwhelming problems, it also enriches life by perpetuating a natural, multi-cultural exchange often not considered earlier in life.

### A Well Established Focal Point:

"A senior center is a well established focal point in the community" according to Barbara Ciampa, Director of the Winchester Council on Aging. This image aids the service staff in recruiting, monitoring, and serving clients. The senior center is known as "the place to call" regardless of the particular problem. Simplifying the access to services removes the apprehension often experienced by elders when requesting service. "The development of a trusting relationship between service providers and clients is essential" says Anita Shipman, Assistant Director of the Cambridge COA. "Trusting relationships develop more readily when the perception of a unit structure is more apparent."

Anita also points out that "active recruitment of new clients depends on having something for them to be recruited to." A senior center that combines recreational and social activities with medical and health services experiences increased overall participation in programs. The senior center's "one stop shopping" attracts seniors to a variety of programs rather than a single program. Most seniors in need of service require an array of different services. Once in the center, elders can be introduced to a broad range of services designed to meet their changing needs. This makes the senior center's multi-service atmosphere more attractive to a wider range of people.

Senior Centers also offer an umbrella of anonymity for certain personal services such as mental health or alcoholism programs. The Kit Clark House in Dorchester attribute the success of their mental health and alcoholism programs to the senior center's ability to offer these programs discretely among other services. The center allows the participants to avoid the stigma attached to these types of services.

The vast majority of Geriatric professionals caution against categorizing services as "social" or "medical" and comparing their necessity. Both types of services are equally important for maintaining an acceptable quality of life. Social isolation among the elderly is the greatest barrier to adequate medical care. "I would come to the recreation room every day if I could play bridge" said one Cambridge elder. "But there is no one in this building that can play." Senior centers avoid the divisions that foster isolation by offering activities that are not practical elsewhere. This attraction makes it easy for service staff to introduce new clients to co-located medical facilities.

Linda Crew-Vine, Director of the Lexington Senior Center states that "people identify with a center in an evolutionary manner." We must remember that the healthy bridge players will eventually become frail. Isolation is inevitable unless the available services are introduced and known to the client

before the aging process becomes too restrictive.

Effects on Preventive Medicine:

A senior center system greatly increases the efforts of preventive medicine. Linda Chin, head of Planning and Development at Cambridge Hospital believes a senior center will improve medical service to Cambridge elders. "Seniors would be more likely to use a clinic they recognize as their own" she says. Participation in health screenings and other health programs will increase when they are conveniently co-located with recreational programs. The increased participation of a mostly elder clientele also makes it possible for medical personnel to address problems specific to elders. Many of these problems often cannot be accommodated in a general clinic that must serve a wider age group of clients.

Senior centers also re-introduce the frail and isolated to active society. The large scale activities and the on-site medical facilities make it possible to incorporate adult day care and other frail clients into activities while still maintaining a vibrant, active atmosphere. Since the center fosters a communal atmosphere among the elder population, virtually all centers come to rely on the volunteerism of the active clients to help serve frail clients.

## Volunteerism in the Senior Center:

Volunteerism in a senior center is often the most valuable resource a service system can possess. Its value is often sorely underestimated. The barriers that prevent elders from participating in programs are often the same barriers that prevent potential volunteers from supporting programs. The convenience of co-located services, and the sense of proud identity in a senior center greatly increases volunteerism. The Methuen Senior Center programs are operated mainly by volunteers. The active members of the aerobics classes are the same people that prepare the "meals on wheels" lunches for the frail clients of the Methuen Council on Aging. Volunteers also operate the gift shop, thrift shop, and wood-working shop. The Lexington Senior Center operates an impressive library exclusively for elders. Donated books and video tapes are cataloged and offered to clients of the center. The library also catalogs self help and medical articles clipped from periodicals by center clients. These are made available to senior center clients needing information on specific problems. This impressive operation was created and is maintained by two retired librarians that were given the opportunity to use their expertise.

Service providers often see volunteerism as a therapy in itself. Like all people, healthy, active elders can become

victims of social isolation if they lose their sense of purpose. It is important that services offered to elders include the ability for clients to maintain a high level of self esteem. The sense of pride and community in a senior center reenforces the self- respect of the volunteers as well as maintains the dignity of the clients.

The volunteerism of a senior center also removes a great amount of responsibility from service staff. This allows the staff to concentrate on expanding other service areas. "Senior centers provide the impetus for service development" according to Jim Sykes, "because they have the resources for service." Senior center volunteers are often the most valuable of any resource.

#### The Senior Center and Home Care:

Senior centers also serve as a "well established focal point" beyond the elder community. Children with aging parents need an easily recognized reference point when planning to care for their parents. When a senior center is recognized "as the place to call" by those outside the elder community, family, friends and neighbors of elders automatically become part of the service system.

The growing elder population combined with longer life spans has contributed to a shortage of long term care

facilities for elders. Long term home care is now the preferred alternative. However, modern families already face overwhelming demands in today's society. Cambridge must make access to information and service options easily available to these families. This is critical to a successful long term home care effort. The senior center, as a focal point in the community, quickly establishes itself as a vital service aid for families caring for elders.

The burdens of long term home care are different for each family. Service providers must have the flexibility and convenience of co-located services to meet the needs of home care families. Joan Butler West, Director of Minute Man Home Care, states that "nursing home pre-admission services, when co-located with other support services, often leads to successful alternatives to institutionalized care." Co-located services easily fosters creative solutions to long term home care challenges.

"Agencies have a responsibility to inform those outside the elder community about service options available in dealing with elders," according to Jim Sykes. Fear and ignorance are the most common factors that lead to institutionalization over home care. The senior center is a beacon that gives families the courage to consider other care options for their elders.

The senior center system is the only service vehicle that can meet the future needs of the elder community. It fosters and sustains a vibrant and healthy atmosphere that binds the elder community together. It also provides an indispensable link to the community at large. The co-located services greatly reduce the administrative details of service and dramatically increases the efficiency of service staff. The senior center also removes the indignation often associated with accepting service. The volunteerism and community in a senior center offers elders the chance to invest in themselves, and dispel the myth of being a burden to society.

Cambridge is recognized around the world as a city of great history, prestige and ability. We must realize that great stores of our city's potential is gathered in the lifetimes of our elders. It is necessary in these pressing times to unlock that potential and regard the elder community for the wealth it possesses. It is apparent that the present system overestimates the ability of service personnel to adequately serve their growing clientele. When considering a change, however, we must admit that we have also underestimated the will and ability of the elder community to serve itself.

**- TRANSPORTATION IN A SENIOR CENTER SYSTEM -**

The transportation problems that elders encounter every day are well documented and easily imagined. The availability of satisfactory transportation often is the only difference between isolation and interaction for many elders. The ability of elders to travel with ease to a city wide senior center is crucial to the success of a senior center system.

Cambridge must make full use of the public transportation available in the city. The MBTA is the only practical transportation available to most elders. Ideally the center should be located where a large number of MBTA service lines from a wide variety of locations intersect. Limiting the need to transfer from one line to another will significantly increase the role of public transportation in a senior center system. Although the Inman Street office of the Council on Aging is located on a bus line, most elders must make a number of line transfers to reach the office. Inadequate public transportation is the single most important cause of the inaccessibility of the Council on Aging office.

Caution must be used when predicting transportation needs for a centralized senior center in Cambridge. Most elders in Cambridge remain unaware of the size and scope of a centralized senior center. It is unfair to ask elders to

compare the two service system options if they are not fully aware of the details of each system. Although transportation is a major concern in any system, there are vast differences between the fragmented service system and a centralized service system in respect to transportation issues.

Most elders that initially express reservations over traveling to a central senior center reconsider their position when the details of the system are outlined. Almost all elders are willing to travel further for co-located services. Elders in senior center systems spend up to three times as much time at a large center versus neighborhood centers due to the high quality and variety of services available. "Neighborhood centers are not necessarily better than central centers when it comes to participation" according to Sandra Albright, Director of the Kit Clark House in Dorchester. "Attraction to the place is important in the motivation for using services."

There are other factors in a senior center system that reduce transportation concerns. John Long, Director of SCM Transportation Services, the company that provides transportation service to Cambridge elders says "it is obviously easier for us to provide better transportation when everyone is going to the same place." Senior center systems increase the efficiency of available transportation options. A senior center community can foster taxi sharing and car

pooling efforts in elderly buildings. Many elders in Cambridge have also said they would use public transportation if they had a companion.

A well placed senior center with an earnest public relations effort and a wide variety of attractive, high quality services will over-ride transportation concerns of well elders. This will allow a higher percentage of transportation resource to be dedicated to the needs of frail and handicapped clients.

#### Transportation for the Mobility Impaired:

Cambridge will have to augment the available transportation to accommodate frail and handicapped elders in a senior center system. However, service providers and clients alike agree that the present availability of transportation for frail and handicapped clients does not adequately meet the demand.

In addition, handicapped and frail elders do not benefit from the dispersed operation of the fragmented system. The distance to a service center is usually irrelevant to mobility impaired clients. A wheel chair car or other aid is often indispensable whether the distance to the service center is 10 yards or 10 miles. Local centers frequently do not have the resources necessary to meet the needs of frail and handicapped clients.

Any transportation service used to meet the needs of frail and handicapped clients will operate more efficiently and effectively under the senior center system. Frail and handicapped clients are extremely susceptible to isolation and usually require a wider range of services than other clients. The percentage of mobility impaired clients using a transportation service will increase when many of their needs can be met with one trip. The variety of activities will increase regular involvement for mobility impaired clients.

The importance of reliable transportation in a senior center system cannot be underestimated. However, the desire of elders to be part of a vibrant community also must not be underestimated. "People would go across town if it was worth the trip" said a group of residents at the LBJ Apartments, "if they had services that made it worth the trip."

**- LOCATING A SENIOR CENTER IN CAMBRIDGE -**

Locating an acceptable site for a city wide senior center in Cambridge will be a difficult process. There are a number of suitable locations, each possessing various degrees of problems as well as possibilities. Each location must be studied carefully and weighed for assets and liabilities. There is no perfect site. Ultimately, the success or failure of securing a suitable site for a central senior center in

Cambridge will depend on the city's will to do so.

It is not the province of this report to outline the prospective services of a central center in Cambridge. However, there are some basic characteristics that are favorable to any senior center operation. The location in Cambridge must give priority to the issue of transportation when sighting a center. The "elongated butterfly" geography of Cambridge requires a transportation centered site more than a geographically centered site. (Please note comments on public transportation, page 16.)

A senior center in Cambridge that includes Council on Aging offices along with recreational and health facilities to serve a 15 thousand person population requires approximately 20-25 thousand square feet of space. It is also desirable to have the space on one level, although office space may be located on a separate level. This allows more flexibility in modifying the programming to meet changing needs. A Senior Center must give particular attention to the traffic flow between different areas. This is critical to the center's ability to avoid the logistical segregation of frail and handicapped clients. A double or multi-level site can severely limit this needed flexibility.

It is also desirable to have the space on ground level. This greatly reduces risk in the event of emergency. It is

also important to the center's appearance of accessibility. A ground floor location contribute greatly to a center's inclusive image. Both for the elders, and the surrounding community at large.

Central, Harvard, and Porter Squares have been considered the most feasible locations for establishing a city wide center. Other less central locations have also been considered possible. The final choice should rest on two main criteria: How well the site meets the requirements of a central senior center; and how easily the city is to compensate for it's deficiencies.

#### Central Square:

The Tophias building in Central Square, located on the corner of Massachusetts Avenue and Prospect Street has excellent qualities for a senior center. The building section bordering Bishop Allen Drive is expansive and offers great planning flexibility. Extensive space is available on the ground floor.

The building is esthetically very pleasing. It is well maintained and features large windows that help establish a prominent and easily recognized presence in the area. The building has a contained, but respectable amount of well maintained open space. It is also located near recreational

facilities that may possibly be utilized by center clients.

The building's entrance is no more than 40 yards from the outbound red line stop. It is also no more than 80 yards from the inbound stop, and the numerous bus lines that converge in Central Square. Public transportation access in Central Square is second only to Harvard Square in Availability. The building also offers ample off street parking.

There are two major food stores, and a variety of specialty shops and restaurants within 200 yards of the building. The area also has a high elderly population. The Manning and JFK elderly housing complexes are both only two blocks away. The LBJ Apartments are also a reasonable walking distance for many residents.

However, the Central Square area has long been considered a relatively depressed area to other neighborhoods. It carries a formidable reputation for crime and is considered unsafe by a large percentage of elders living outside the area. The two shelters in the area contribute to a high homeless and indigent population in Central Square. These facilities are absolutely necessary, but are considered inadequate to control the present need in the area. This problem is particularly detrimental to establishing a city wide senior center in Central Square.

The success of a senior center in Central Square cannot be completely ensured without a plan to adequately meet the needs of the indigent and homeless population.

Even when these problems are adequately addressed, the reputation of Central Square will have to be countered with an aggressive public relations campaign to attract clients from areas outside the square. Of course, the senior center system lends itself well to this type of effort. There is no doubt that a well appointed center, combined with the logistical advantages of the Tophias building would create a successful effort. Success hinges almost completely on the ability of the city to revitalize Central Square.

Harvard Square:

Harvard Square's main asset as a senior center location is its overwhelming public transportation access. It also offers an extreme variety of specialty shops and services. It is generally considered the Hub of Cambridge and is a vibrant, active area.

The dense development of the Harvard Square area greatly limits the ability to find adequate available space. The only possibilities are located at the fringe of the square area. It is not likely that single or ground level space could be utilized. The logistics of any space available in

this area is apt to severely restrict the flexibility of program planning.

Harvard Square's dense environment also poses other problems. The attraction of extensive public transportation is offset by the lack of other necessary transportation options. Parking in the Harvard Square area is extremely limited. The surrounding streets are often congested with traffic. A transportation company's ability to service a senior center in Harvard Square would be relatively limited. Those using public transportation would also encounter difficulty in Harvard Square. Many elders have expressed concern about crossing the very busy streets, and navigating the often congested sidewalks.

Porter Square:

Porter Square is generally considered an agreeable area for a city wide senior center. It offers an attractive mixture of "essential shopping" establishments such as Star Market and a selection of specialty stores that rivals Harvard Square. It has service from two bus lines and the red line train. The area is frequented by many elders, and is generally considered safe.

However, the existing buildings in Porter Square offer very limited ability to meet the design needs of a senior

center. The Porter Exchange building at 1815 Massachusetts Avenue has approximately 40 thousand square feet available on it's third and fourth floors. Much of the space has never been built out. However, the building structure does not allow for required open space. Support pillars would have to be removed to meet open space requirements. Even if theoretically possible, costs would most likely be prohibitory. Adapting program planning to conform to the existing structure would be severely limiting. Other available structures in the area would require extensive renovation or replacement.

There is some undeveloped land in the Porter Square area. However, a new structure dedicated entirely to a senior center would most likely require a prohibitory capitol investment. In addition, a substantially higher percentage of resources would have to be dedicated to operational costs, limiting program options when compared to other possible locations.

Other sites:

The building located at 950 Cambridge Street was investigated as a possible location. The building has just recently been completed. It consists of 30 thousand square feet over several levels. The ground floor space is dedicated to parking. Public Transportation is limited, and

travel from west or north Cambridge would be prohibitory. The immediate area is also not considered safe by many elders.

The former Midland-Ross building site was also examined. Located at 445 Concord Avenue, the available lot is over 100,000 square feet. The present structure consists of one ground level story building and an adjacent parking lot. The feasibility of the present structure is questionable at best.

The entire location is available at well below the market value since the lot is registered as a non-priority hazardous waste site by the Massachusetts Department of Environmental Protection. The site suffers ground water and soil contamination from several volatile organic compounds and petroleum products. These were traced to common industrial solvents used by a former manufacturing facility. Soil vapor extraction and ground water aeration remediation have significantly lowered contamination levels. Remediation efforts continue, and a full clean up is expected. Contamination levels still exceed recommended levels as of June, 1990 however.

The possibility of procuring the site for a combined housing and senior center project has been proposed. It has been suggested that outside funding options may be available for a combined effort. The lot borders Danehy Park and Fresh

Pond in a mostly residential neighborhood.

The site is far removed from much of the city, however. Public transportation is minimal, and travel from East of Harvard Square is prohibitory. Although the Fresh Pond Shopping Mall is a short distance away, the roadways are not designed to accommodate foot traffic and the Mall cannot be considered accessible to elders. Although the site's contamination is considered minor, the ability to overcome the accompanying stigma must be considered.

The Real Estate Office of the Archdiocese of Boston was contacted about several east Cambridge sites that proved unavailable. Several buildings owned by the Archdiocese were investigated at the site of the former Immaculate Conception School in North Cambridge. The buildings are well over 100 years old and require extensive renovations. The Archdiocese is only willing to lease the buildings. The location is at an extreme geographically and travel from the majority of Cambridge would be prohibitory.

The former hospital site on Otis Street in east Cambridge was approached, but no hard information was collected. The present building would require multi level use to meet space requirements. Public transportation is minimal. The location is at an extreme geographically and

travel from the majority of the Cambridge would be prohibitory.

Other investigations included the former Simones building on Sherman Street, the open lot at 17 Concord Avenue, and the former Crate and Barrel store on Huron Avenue. Although not impossible, these possibilities are highly exclusionary for a number of reasons. Limited information was available about their dispositions.

**- FINANCES IN A SENIOR CENTER SYSTEM -**

Jim Sykes, who help start one of the first senior centers in the country, was asked how they dealt with the financial burdens of operating a center. He replied, "We had more allies in the community than we realized when we effectively presented our case." The senior center's position as a "well established focal point in the community" opens many avenues to finance programming. Public awareness is indispensable to gaining public support.

**A Joint Venture:**

Most successful senior centers operate through a joint venture between a municipally funded Council on Aging, and a non-profit organization commonly call the "Friends of the

Council on Aging." When carefully implemented, this relationship is very successful. Each segment of the union has funding sources unavailable to the other, yet their collective resources can be pooled to into the same programs. The Council on Aging Director can maintain control over program funding without jeopardizing the non-profit status of the "Friends" organization. The "Friends" organization is often the cornerstone of elder participation in the service system, and fosters the sense of community involvement in the programing.

#### Spreading the Burden:

Many centers also spread the financial burden between several agencies. Leasing space to already established programs offers the benefits of service integration while offsetting a percentage of operating cost. Private businesses can also be successfully integrated into a senior center. Banking services, beauty shops, etc. can provide convenient service to Elders, while offsetting a portion of the operating costs. Since the Cambridge Senior Center will most likely be locate in or near one of the commercial squares, this option could prove quite successful.

Elders are the fastest growing segment of our population. It is necessary to consider the long term cost avoidance experienced when implimenting a more efficient,

effective service system. Centralization eliminates the need for computers, copy machines and other equipment to be supplied to several locations. Space is also better utilized in a senior center system. The meeting rooms at the Kit Clark House in Dorchester are multi-purpose rooms, used for administration purposes as well as programming.

Other Funding:

Senior center systems have been proven more efficient and effective than fragmented systems in numerous municipalities across America. The National Council on Aging has long recognized the senior center's "capacity to provide a broad array of educational, health and social services to help older persons- both the more able and the impaired-maintain their independence in the community." The senior center system is recognized at all levels of government as the most desirable way to serve the elder community.

Establishing a senior center based service system can increase the ability of Cambridge to compete for outside funding. "Service provision in the same mold or system that is consistent with federal or state programs offers better funding possibilities" according to Joan Butler West. Chet Jecubiak of the Massachusetts Executive Office of Elder Affairs re-enforced this conclusion. "Municipalities that

have senior center programs are more likely to make a better impact of federal money than municipalities that don't (have centers.)"

Famous Last Words:

As stated in the introduction, the purpose of this report is to highlight the limitations of the fragmented service system, and outline the rationale of a senior center system. Therefore, a great contrast has been draw between the effectiveness of these two service systems. In closing this report, however, it seems prudent to temper some of it's conclusions.

It should not be assumed that the fragmented service system has been a total failure. Certain parts and programs are very effective, and should be maintained in a senior center system. Indeed, the ideal senior center system in Cambridge will retain some elements of the fragmented system.

It would be incorrect to assume that a senior center would move all elder programing in the city to one location. Which services to offer in a senior center, and which to offer in "satellite" locations depends on many factors. The senior center program plan, the changing service requirements, and the final location of the center will all effect the decision process.

The senior center will contain the lion's share of elder services in Cambridge. However, it should not be considered the single "service fortress." The Tenant Senate programs in the elderly buildings should continue, as well as many of the community schools and other programs. These programs should view the center as a valuable resource. The senior center should view these programs as valuable outposts for outreach and information and referral.

Cambridge, like many communities in Massachusetts, faces growing uncertainty about the future of service programs. The instability of the economy, and Governor Weld's promise of "entrepreneurial government" will force municipalities to play a greater role in caring for their own. The senior center system will not eliminate any of these uncertainties. Yet a strong senior center system will create a strong team spirit in Cambridge. One that will help afford a bright, secure future for our elders, our families, and our community.



# City of Cambridge

1.  
IN CITY COUNCIL

January 7, 1991

COUNCILLOR RUSSELL

WHEREAS: This City Council has unanimously passed two resolutions supporting the creation and funding of a city wide Senior Center in Cambridge; and

WHEREAS: The Cambridge Council on Aging is creating a Planning Committee as well as an Advisory Committee to formulate a Senior Center plan for Cambridge; and

WHEREAS: The City Manager's Office has long considered the possibility of centralizing the various city offices in one location; and

WHEREAS: The convenience of co-locating a Senior Center with other essential city services would greatly benefit the Elders of Cambridge; now therefore be it

RESOLVED: That this City Council urges the City Manager to consider including a Senior Center in any plan or proposal to centralize the city offices; and be it further

RESOLVED: That the City Manager's Office is requested to work with the Cambridge Council on Aging to help establish the aforementioned committees; and be it further

RESOLVED: That the findings and plans of said committees should be taken into consideration by the City Manager's Office to predict space, cost and program requirements for the new Cambridge Senior Center; and be it further

RESOLVED: That the City Manager should report back to the City Council on the progress of said committees in one months time.

In City Council January 7, 1991.  
Adopted by the affirmative vote of nine members.  
Attest: Joseph E. Connarton, City Clerk.

A true copy;  
ATTEST:

Joseph E. Connarton, City Clerk



# City of Cambridge

36.

IN CITY COUNCIL

NOVEMBER 5, 1990

COUNCILLOR RUSSELL  
 COUNCILLOR TOOMEY  
 COUNCILLOR SULLIVAN  
 COUNCILLOR WALSH

- WHEREAS: The City Council has passed numerous resolutions, and had considerable dialogue about the establishment of a city-wide Senior Citizen Center in Cambridge which would insure a high quality of life for the growing number of elders in our city; and
- WHEREAS: This City Council, along with members of the Council on Aging and other Cambridge Service Organizations, had the opportunity to visit the Methuen, MA Senior Citizen Center; and
- WHEREAS: The spirit and pride of the Seniors for maintaining and operating their center was surpassed only by their enthusiasm for using the center to serve the frail and homebound elders of Methuen; and
- WHEREAS: The Seniors of Methuen have inspired us with their ability to work with the Methuen Council on Aging to ensure the success of Recreation, Health Care and Senior Advocacy programs offered in Methuen; and
- WHEREAS: The information collected from interviews with Health Care and Social Service Professionals, as well as many of the Senior Citizens in Cambridge reinforces the need for a city-wide center in Cambridge; now therefore be it
- RESOLVED: That the City Manager initiate talks with the local trade unions, as well as MIT and Harvard University in order to enlist their support for the efforts of the Cambridge Seniors; and be it further
- RESOLVED: That this City Council, realizing that the time for talk is long past, urge the City Manager to expedite the process for establishing a city-wide center in Cambridge by including the necessary funding for such a center in the FY 1992 budget.

In City Council November 5, 1990.

Adopted by the affirmative vote of nine members.

Attest:- Joseph E. Connarton, City Clerk.

A true copy;

*Joseph E. Connarton*

ATTEST:-

Joseph E. Connarton  
 City Clerk



# City of Cambridge

53.

IN CITY COUNCIL

July 30, 1990

VICE MAYOR REEVES  
COUNCILLOR CYR  
COUNCILLOR RUSSELL

- WHEREAS: The people of Cambridge hold their elder citizens in high regard, and share a concern for their comfort, safety, and quality of life; and
- WHEREAS: The Cambridge Council On Aging has provided the City Council with the preliminary results of a survey of the needs of Cambridge's elder citizens; and
- WHEREAS: These results indicate that the City of Cambridge is serving only twenty percent of its elderly population at a few disparate sites throughout the City; and
- WHEREAS: The Council on Aging, the Cambridge Committee of Elders, and various senior citizen advocates throughout the City have voiced their strong support for the establishment of a citywide senior citizens center which will serve as a multi-service center to provide for the needs of Cambridge elder citizens; and
- WHEREAS: The recent study of Cambridge's future housing needs—the Getz Study—indicates the population of Cambridge is a rapidly aging one and that the future needs of Cambridge's elder citizens cannot be underestimated. Based upon these, and other considerations; now therefore be it
- RESOLVED: That the Cambridge City Council request that the City Manager immediately move to investigate suitable sites with the potential for purchase and construction of a citywide senior citizens center, and that he use all resources at his disposal to conduct a senior citizens center needs assessment, which will help determine programming and thus assist in the selection of the appropriate location; and be it further
- RESOLVED: That the desired facility is a spacious one, and has sufficient room to accommodate both large and small group activities; that particular attention be paid to the availability of sunlit spaces, and to landscaping which will provide for outdoor activities; and be it further
- RESOLVED: That the City Manager also assess the City's capability to provide transportation—such as a Senior Shuttle—from various sites throughout Cambridge to the proposed Center.

In City Council July 30, 1990.  
Adopted by the affirmative vote of nine members.  
Attest:- Joseph E. Connarton, City Clerk.

A true copy;

ATTEST:-

*Joseph E. Connarton*

Joseph E. Connarton, City Clerk.



# CAMBRIDGE CITY COUNCIL

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139

(617) 498-9094


Sheila T. Russell  
City Councillor

February 27, 1991

The Honorable, The City Council:

Enclosed please find for your review a copy of a document entitled **The Senior Center Role in the Service of Cambridge Elders.**

Sincerely,

  
Sheila T. Russell  
City Councillor

s

enclosure

1. S-341

COMMUNICATION AND REPORTS FROM CITY OFFICERS

Communication from Joseph E. Connarton, City Clerk, transmitting a communication from Councillor Sheila T. Russell transmitting a document entitled "THE SENIOR CENTER ROLE IN THE SERVICE OF CAMBRIDGE ELDERS".

In City Council,

March 4, 1991.

*Referred to the  
Elder Affairs Comm.  
Copy sent to Elder  
Affairs Comm. 3/8/91 (dc)*