

307 Waverley Oaks Road, Suite 205, Waltham, MA (617) 926-4100 www.springwell.com

## Springwell, your local Area Agency on Aging, wants to hear from you!

Do you need information or assistance with any of the following?

(Please circle your top 3 needs from the list below)

- Access to social assistance services
  i.e. health insurance & other benefits
- Accessing educational programs for caregivers
- Finding work and/or volunteer opportunities
- Integrating into the community as a LGBTQ+ individual
- Managing finances
- Accessing health care i.e. medical, dental, etc.
- Securing affordable housing
- Using digital technology
- Overcoming language and/or communication barriers
- Securing home care services
- Accessing home safety modifications
- Finding support group(s)
- Respite from caregiving
- Other, please explain:

- Accessing affordable housing
- o Removing clutter
- Securing legal services
- Accessing transportation to medical appointments
- Accessing transportation to social events
- Coping with memory loss/confusion
- o Preparing nutritious meals
- o Accessing healthy foods/meals
- Accessing affordable counseling services
- Coping with alcohol, tobacco or other substance use
- Finding support group(s)
- Respite from caregiving
- Coping with abuse, neglect or exploitation
- o Removing clutter

## Please tell us a little bit about yourself

## 1) Please circle the community you live in Weston Belmont Brookline Waltham Needham Watertown Newton Other Wellesley 2) Please circle your gender identity o Male Female-to-male (FTM)/transgender Female male/trans man Male-to-female (MTF)/transgender Genderqueer, neither exclusively male nor female female/trans woman Prefer not to answer Other 3) Please circle your sexual orientation Homosexual or Straight Not Sure Other Lesbian, Gay or Homosexual Bisexual Prefer not to answer 4) Please circle your age range o Under 60 75-84 0 60-74 0 85+ 5) Please circle all that apply as what best describes your ethnic, racial or cultural identity o Caucasian/White Latino Black Native Hawaiian/Pacific Islands Asian American Indian/Alaskan Native Other: Hispanic 6) Please circle your primary language o English Italian Spanish Farsi o Portuguese French Cantonese or Mandarin Polish Russian Armenian Haitian Creole Not listed, please specify: 7) Please circle your annual (individual) income o Below \$25,000 Unsure

Above \$25,000