

NYAM



Aging Well in the Bronx

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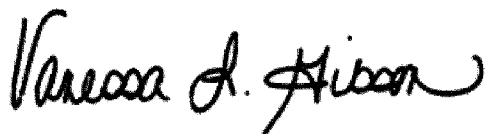
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NEW YORK
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OF MEDICINE

We are delighted to launch the first report of our *Aging Well in the Bronx* initiative—a collaboration between the Bronx Borough President's Office and The New York Academy of Medicine (NYAM). This 2023 *Aging Well in the Bronx* Survey report summarizes responses to our borough-wide survey to understand the extent to which older adults living in the Bronx have access to essential resources such as safe public transportation options, affordable housing, and high-quality health services. This report also outlines a series of recommendations and concrete action steps to improve the age-inclusivity of the Bronx and enhance the quality of life of older Bronx residents and their families and friends.

We are grateful to all of our partner organizations who recruited participants to complete the survey, including AARP, LiveOn NY, NYC Aging, SAGE, Neighborhood SHOPP, R.A.I.N. Total Care Inc., Acacia Network, The New Jewish Home, Riverdale Senior Services, Riverdale YM-YWHA, and Presbyterian Senior Services. We also want to thank Larcenia Walton and Justin Cortes of the Bronx Borough President's Office for their support throughout the entire process. This report was also made possible with the discretionary funding support of Council Member Eric Dinowitz (Bronx District 11) and Council Member Marjorie Velázquez (Bronx District 13).

Almost 700 Bronx residents participated in the survey, and we are very appreciative of their time and candor. **We are committed to using the feedback we collected to build a more equitable and age-inclusive Bronx where people of all ages can live healthy and meaningful lives.** We look forward to collaborating with representatives of multiple sectors—local businesses, arts and cultural institutions, service providers, and community residents—to enhance the age-inclusivity of the Bronx.



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EXECUTIVE SUMMARY

OVERVIEW

Through a collaborative effort between the Bronx Borough President's Office and The New York Academy of Medicine (NYAM), this report presents the results of a borough-wide survey aimed at understanding the resources available to older adults in the Bronx and outlines recommendations for enhancing age-inclusivity and improving the quality of life for the borough's older residents.

METHODOLOGY

The report draws on a 2023 survey employing the World Health Organization's Age-friendly Framework. Conducted in multiple languages, the survey targeted adults age 18 and older, with a specific emphasis on and outreach to adults 65 and older. However, study limitations, including a convenience sample and potential language barriers, should be noted.

KEY FINDINGS

Key issues for older adults in the Bronx included crime, housing affordability, and transportation accessibility. Many Bronx residents named crime and safety as their primary concern within their communities. The primary method of accessing housing by older adults in the Bronx is through renting, and most live with significant householder cost burden. Many residents report facing challenges associated with housing affordability and accessibility. Transportation issues included concerns about the utility, safety, and accessibility of public transportation. Each of these challenges brings an opportunity for improvement through community and public partnerships. Despite challenges, the survey identified key strengths of the Bronx community. Most respondents said they had reliable internet access. Many reported they had access to clean outdoor spaces, and reported being in fair, good, or very good health.

Recommendations

NYAM proposes actionable steps, including a report launch event, the formation of a Bronx Task Force to develop an action plan informed by this report, and the promotion development of Age-friendly neighborhood organizations in the Bronx using a previously published [NYAM toolkit](#). This comprehensive report serves as a roadmap for making the Bronx more age-inclusive, addressing the unique needs of its diverse older adult population and fostering a supportive and vibrant community for all.

INTRODUCTION

Older Adults Living in the Bronx

Fourteen percent of New York City's older adult population resides in the Bronx. Of its 1.43 million residents, 184,157 or 12.9% are age 65 or older.¹ By 2040, the older adult population is expected to grow to 228,000.² **Table 1** displays the Bronx neighborhoods with the highest proportions of adults age 65 and older.

NEIGHBORHOOD	POPULATION OF ADULTS AGE 65+	TOTAL POPULATION	PERCENT OF ADULTS AGE 65+
Riverdale-Spuyten Duyvil	13,102	45,247	29%
Co-op City	10,268	36,674	28%
Soundview-Bruckner-Bronx River	8,625	68,432	13%
Eastchester-Edenwald-Baychester	8,449	56,479	15%
Concourse-Concourse Village	8,252	66,082	12%
Wakefield-Woodlawn	7,634	47,668	16%
Williamsbridge-Olinville	7,364	61,452	12%
Throggs Neck-Schuylerville	7,167	47,266	15%
Pelham Gardens	6,273	29,417	21%
Bedford Park	5,948	55,702	11%

Table 1. Ten Bronx neighborhoods with the highest proportion of adults age 65 and older.

¹ Census Bureau, "Population 65 Years and Over in the United States — Census Bureau Table."

² NYC Department of City Planning, "New York City Population Projections by Age/Sex & Borough, 2010–2040."

The data sources for the findings presented here are interviews with: 1) Latine parents of young children who received services from MRNY related to one of the three target programs (n=30); 2) MRNY staff and leadership who provide direct services and/or administrative oversight related to the target programs (n=5 interviews with 10 participants); and 3) staff from four other CBOs that offer services focused on food and financial security to Nepali-, Chinese-, and Arabic-speaking immigrant families (n=5 interviews with 6 participants).

Interviews were conducted and recorded via Zoom. Recordings were professionally transcribed and coded according to pre-identified topics (e.g., “SNAP enrollment”), as well as topics that emerged from the data themselves (e.g., “documentation requirements”). Coded transcripts were analyzed by the research team to identify relevant themes and significant findings. The study protocol was approved by The New York Academy of Medicine’s Institutional Review Board. All survey and interview participants, other than MRNY staff, received a gift card honorarium in appreciation of their time.

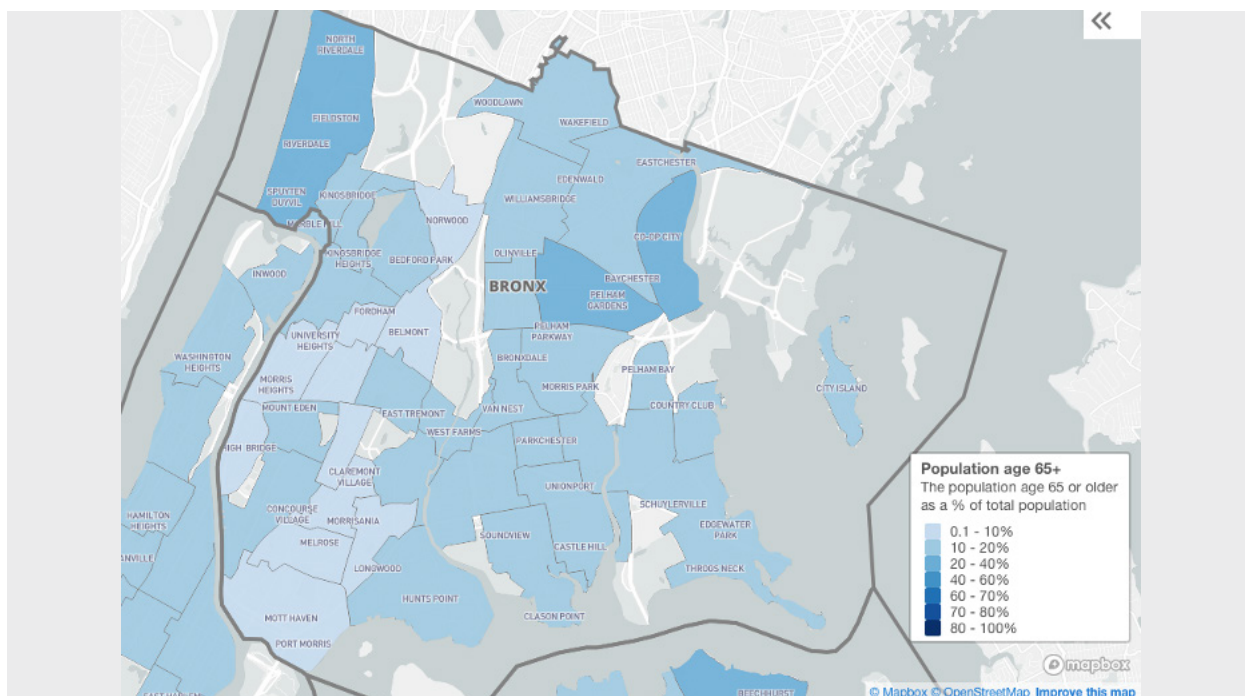


Figure 1. Population age 65 and older derived from IMAGE:NYC Interactive Map of Aging.

DEMOGRAPHIC CHARACTERISTICS OF OLDER ADULTS IN THE BRONX

In the Bronx, 60% of the older adult population are women. More than 45% of older adults are Hispanic or Latino of any race. The two largest older adult racial groups in the Bronx are white (34%) and Black (32%). The Bronx, like much of NYC, is home to many immigrants; 41% of residents, or 77,000, are immigrants. This is the third highest proportion of foreign-born immigrants in New York City. A majority

(53%) of older adults speak a language other than English at home. For example, 81.7% of older adults speak Spanish in the Bronx, compared to 42.6% in New York City as a whole. In addition, a higher percentage of low-income older adults live in the Bronx compared to the other four boroughs. As of 2020, more than 35% are living below 150% of the poverty line. Sixty percent of older adults are living in rented housing. Of those 65 and over who are renting their home, nearly two-thirds of them spend more than 30% of their annual household income on monthly rent payments.

Background on NYAM's Age-friendly Boroughs Work

NYAM'S AGE-FRIENDLY EFFORTS IN NYC

Having successfully piloted initiatives across different neighborhoods and boroughs, NYAM is currently working to spread, scale, and sustain its age-friendly efforts of the past 16 years. To do this, we have developed a strategy leveraging the City's five borough presidents' offices and 59 community boards to create a model for an age-friendly borough that works to:

- Regularly solicit feedback from older people about their quality of life to inform neighborhood planning processes.
- Create new opportunities for health and well-being.
- Increase social, physical, and economic participation.
- Better connect older people with information and resources.
- Mobilize older people and their service providers to advocate for local age-friendly improvements.

AGE-FRIENDLY BROOKLYN AND MANHATTAN

Starting in 2017, NYAM developed and implemented the Age-friendly Brooklyn and Age-friendly Manhattan initiatives. Building on this work, the current report summarizes the results of NYAM's *Aging Well in the Bronx* initiative.³ The Age-friendly Brooklyn survey was administered to 1,895 Brooklynites between May and September 2018. The results of this survey, including 33 recommendations to make the borough more age-inclusive, were **published in a report** in October 2019. Following the report's dissemination, NYAM convened the **Age-friendly Brooklyn Task Force**—made up of 30 Brooklyn-based organizations that interact and intersect with older adults—to develop an action plan for implementing the top 10 recommendations from the original report. With similar aims, NYAM's Age-friendly Manhattan survey was completed by 1,100 adults in Manhattan between October 2019 and March 2020. The results of this survey, including 35 recommendations, were **published** in February 2021.

³ Aligned with recent trends toward more inclusive language, NYAM's Center for Healthy Aging renamed the report (from previous reports completed in other boroughs) to *Aging Well in the Bronx*.

WHO Age-friendly Framework

Aging Well in the Bronx uses a framework developed by the World Health Organization (WHO) that centers the eight interconnected domains of urban life.⁴ The domains are used globally to identify and address barriers to well-being and participation in older people. The domains include transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, community support and health services, and outdoor spaces and buildings.

The current report summarizes findings of a 2023 survey that drew on the domains of livability to explore residents' experiences of living in the Bronx with respect to the age-inclusivity of outdoor spaces, health services, social engagement opportunities, and more.



Figure 2. The World Health Organization's Age-friendly Framework.

⁴ World Health Organization, "Global Age-friendly Cities: A Guide."

METHODS

TARGET POPULATION

The target population included all adults age 18 and older who live, work, or take part in activities in the Bronx, with a specific focus on those age 65 and older.

RECRUITMENT

Participant outreach was conducted in partnership with aging service providers, New York City Council Members, the Borough President's office, and local community boards serving residents of the Bronx. In addition, outreach was conducted via digital platforms, including listservs, newsletters, and social media by NYAM, AARP, LiveOnNY, and the NYC Department for the Aging (NYC's Area Agency on Aging). Community-based organizations—including SAGE, Neighborhood SHOPP, R.A.I.N. Total Care Inc., The New Jewish Home, Riverdale Senior Services (RSS), Riverdale YM-YWHA, and Presbyterian Senior Services (PSS)—facilitated recruitment of their older adult clients to complete the survey. In addition, printable versions of the survey were sent to community partners with an address included for respondents to mail hard-copy versions of the completed survey.

The survey was available in English, Spanish, Chinese, Bengali, Russian, and Italian, in hard copy and online, from March to August 2023.

SURVEY QUESTIONS

The survey was self-administered by respondents. The *Aging Well in the Bronx* survey included questions about basic demographics and health status; the availability, accessibility, and proximity of jobs, services, and resources for older people; attitudes toward technology; and built environment features. (See Appendix A for a copy of the survey.)

MISSING DATA

Surveys were included in the sample when less than 50% of the questions were left unanswered, which we will hereafter refer to as “missing” data. However, many surveys that were included in the sample still had some missing data (though still less than 50%), and therefore we reported percentages of missing data for each of the question items.

DATA ANALYSIS

The survey data were analyzed to determine basic descriptive statistics, and these data were contextualized using [**IMAGE:NYC Interactive Map of Aging**](#), an open-source map of New York City's current and projected population age 65 and older with overlays of age-friendly resources, services, and amenities by neighborhood. IMAGE: NYC maps were used to inform survey findings, such as understanding householder cost burden in neighborhoods in the Bronx, to give context to survey findings around access to affordable housing. Population characteristics are mapped at the neighborhood level using the NYC Department of City Planning's neighborhood tabulation areas (NTAs). NTAs represent aggregations of census tracts and are easily recognizable in that they generally correspond to historical neighborhood areas in NYC.

STUDY LIMITATIONS

This study recruited a convenience sample, which may not accurately represent the entire population of individuals living in the Bronx. Recruitment of survey participants through digital outlets and outreach by community-based organizations likely omitted homeless older adults and those who are unconnected to social services or do not have access to the internet. The written survey format

may also have presented challenges for individuals with cognitive and vision impairments. While our survey was translated into and distributed in English, Spanish, Chinese, Bengali, Italian, and Russian, some older adults who do not speak these languages were most likely excluded from the study. We only received responses in English and Spanish, which may also reflect the limitations of our recruitment strategy (e.g., partnering with organizations that serve mostly English and Spanish speakers).

We conducted analysis of the geographic distribution of survey participants living throughout the Bronx (see Appendix C). Most study participants lived in the northwest Bronx, including Riverdale (23%) and Fieldston (9%), followed by the southwest Bronx, including Highbridge (8%), Melrose (6%), and Bathgate (5%), and other parts of the northwest Bronx, including Van Cortlandt Park (6%) and Jerome Park (6%). An additional 6% of participants lived in the northeast Bronx in Co-op City. As a result, the sample and corresponding results may not be representative of all neighborhoods in the Bronx. In addition, we did not ask questions about individual socioeconomic status (SES) so we were unable to provide information about the income levels of our participants. In addition, the majority of participants (77%) reported their gender as female, further limiting the generalizability of the sample.

Some survey questions had large proportions of missing data, including demographic questions such as sexual orientation (32% missing) and technology use (10% missing). Other questions in the survey had large proportions of missing data such as advance care planning (10%), mental health access (19%), and access to volunteer opportunities (19%). These missing data may bias our results and limit the generalizability of findings.

Survey questions about Medicaid benefits, health status, and dependency likely introduced social desirability bias into our results. Survey participants, for example, may have denied receiving Medicaid benefits out of reluctance to report that they rely on government support. In addition, given that the study was cross-sectional by design, we cannot infer a causal relationship between study variables. Finally, because the study is based on self-reported data, it is vulnerable to measurement bias.

RECOMMENDATIONS

The Center for Healthy Aging team at NYAM met multiple times to discuss the implications of study findings. To form recommendations, NYAM drew on the results of the study, knowledge of existing aging-focused programs and services, and relevant recommendations from the Brooklyn and Manhattan reports.

RESULTS

DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLE

Descriptive statistics of the study sample are displayed in **Table 2** (Appendix B). We received a total of 679 complete responses (e.g., defined as <50% missing). The majority of participants identified as Hispanic (34%) and non-Hispanic Black (31%), followed by non-Hispanic white (28%), mixed race (3%), and Asian (2%). An additional 3% of participants did not complete the question about racial identity. Most of the sample were female (77%), while 21% were male, and 1% were nonbinary, and 2% were missing. Most survey respondents were older adults—in line with our focused recruitment strategy on older residents of the Bronx—as 37% were aged 65 to 74, 35% were 75 to 85, and 11% were 85 and older. An additional 5% were age 18 to 54, 11% were 55 to 64, and 2% were missing. In terms of sexual orientation, 65% identified as heterosexual,

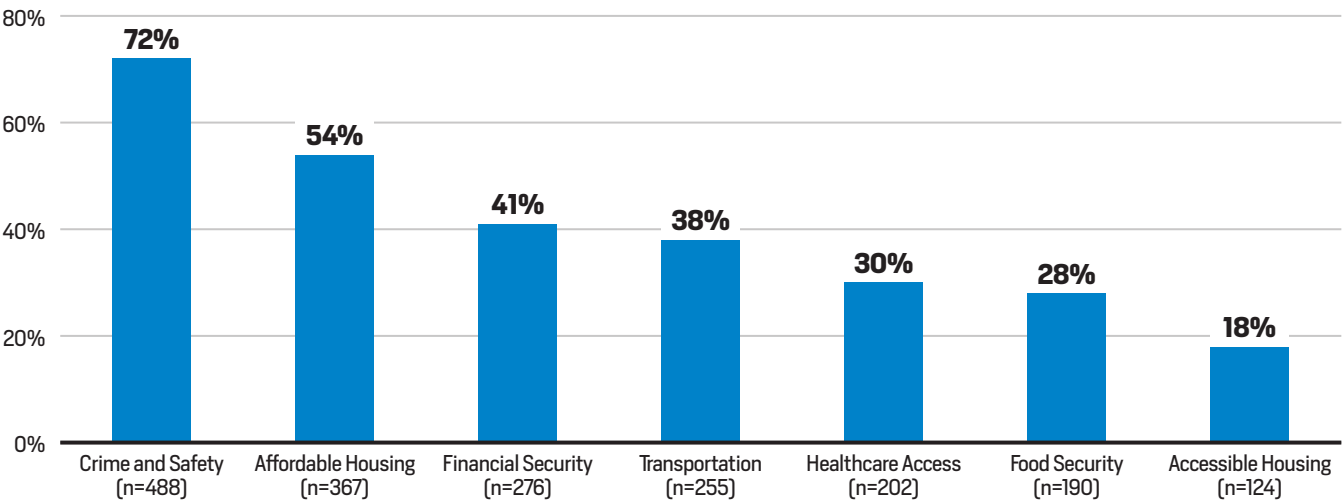
2% were homosexual, 1% were bisexual, and 32% were missing. The majority of respondents in the sample were living alone (60%). Of those who were sharing their living space with someone (38%), 50% were living with one person, 22% with two people, 9% with three people, 8% with four or more people, and 10% missing.

Most participants in the sample did not provide informal care to others (82%), while 13% did provide care, and 5% were missing. Approximately 22% of participants depended on family to meet their needs, while most participants did not (74%), and 4% were missing. Approximately 87% of the sample reported that they will most likely be living in the same place in one year (87%), while 10% said they would not, and 3% were missing. While most of the sample had internet access (71%), approximately 22% did not have access, and 7% were missing. In addition, 90% of participants reported the ability to use technology.

Top Concerns in the Bronx

The majority of participants reported that crime and safety was a top concern in the Bronx (72%), followed by affordable housing (54%), financial security (41%), transportation (38%), healthcare access (30%), food security (28%), and accessible housing (18%).

What are top concerns for older adults living in the Bronx?

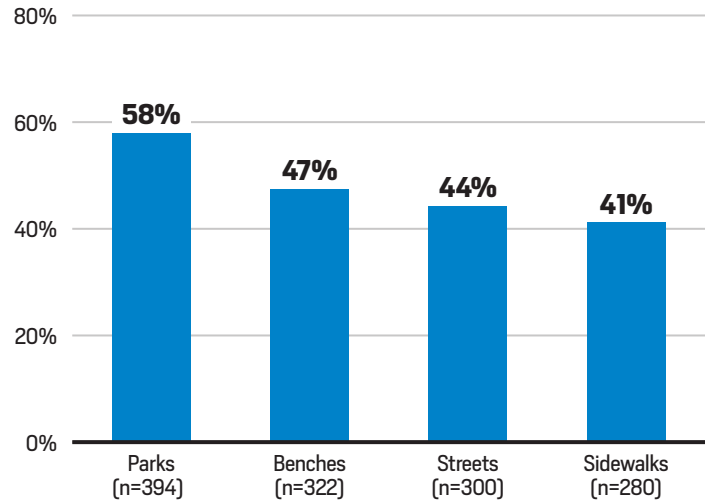


Outdoor Spaces and Buildings

When asked if resources and services related to outdoor spaces were available in their communities, most participants shared that clean parks were very available or available (63%), followed by benches for resting and sitting (51% very available or available), safe and well-lit streets and intersections (48% very available or available), and clean and well-maintained sidewalks (45% very available or available).

Regarding their perceptions on outdoor spaces, respondents provided qualitative feedback, such as “help is needed for public places to congregate and socialize” as well as “more benches on the streets would be appreciated.”

Which outdoor amenities are available in your community?



Recommendations

- Ensure clean and well-maintained sidewalks and well-lit intersections around bus stops.
- Build on existing efforts to extend time that pedestrians have to cross the street, such as additional countdown timers.
- Install more city benches throughout the borough, prioritizing neighborhoods with large concentrations of older people reporting ambulatory difficulty.
- Work with Bronx business improvement districts (BIDS) to install more benches in their corridors.⁵

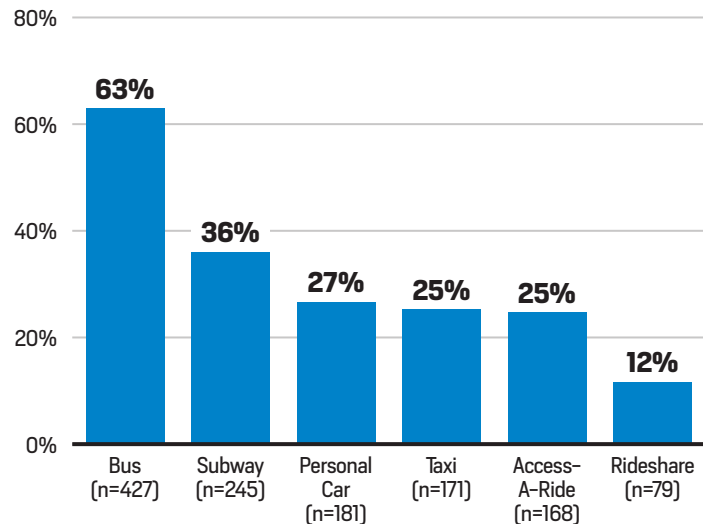
⁵ NYC Department of Small Business Services, “BID Directory.”

Transportation

The majority of respondents (68%) reported that they used the bus regularly, followed by the subway (39%), their own car (29%), taxi (27%), Access-A-Ride (27%) and ride-sharing apps like Uber and Lyft (13%).

When asked to comment on how public transportation in NYC can be improved for older adults, participants shared concerns about physical safety around buses. For example, one participant stated, “drivers should be willing to pull to the curb to make it easier to get on and off [the bus]” and “bus drivers should lower the platform to all older adults whether they have a wheelchair or not, [because] some older adults have difficulty getting on and off the bus.” Secondly, participants commented on the accessibility of public transportation; as one respondent stated, “It requires a lot of physicality to get into and out of the [subway] stations...station accessibility can be improved.”

Which modes of transportation do you typically use?



Recommendations

- Institute additional bus routes to make transportation more accessible in the Bronx.
- Conduct age-friendly trainings with bus drivers (e.g., stopping at the curb; lowering platforms for people to get on, etc.).
- Expand dedicated bus lanes.
- Conduct a marketing and education campaign geared toward older adults about MTA's OMNY program—the new, contactless fare payment system for public transportation.⁶
- Expand Fair Fares, the half-price discount for MTA bus or subway fare for New Yorkers who are at or below 100% of the federal poverty level, to include Access-A-Ride.
- Increase the number of ADA-compliant subway stations in the Bronx.

⁶ Metropolitan Transportation Authority, “OMNY for Reduced-Fare.”

Housing

While affordable housing is an issue for many New Yorkers, cost-burdened households are commonly defined as those spending more than 30% of their income on rent or mortgage payments. Such households have higher eviction rates and increased financial fragility; they also have less money to pay for other essential needs, like food and medicine. Within the Bronx, the highest proportion of older adults experiencing householder cost burden is in South Bronx, with areas like Hunts Point with 80% or more of older adults living with householder cost burden.

Survey respondents voiced concerns about the accessibility of affordable housing. Even if one has access to programs like [SCRIE](#), the NYC rent freeze program for adults 62 and older, older adults with mobility issues may have to vacate their long-term homes to find other options. Many homes in the Bronx that have accessibility features, such as elevators, still require steps to access them. One resident stated, “It is difficult to walk steps to the elevator especially carrying groceries or laundry.” These types of barriers may inhibit older adults from being able to age safely in place.

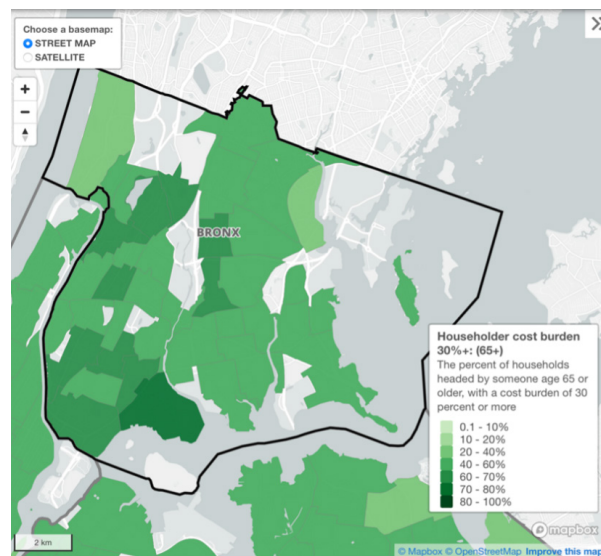


Figure 3. Proportion of Householder Cost Burden for Older Adults in the Bronx.

Recommendations

- Educate older adults about [SCRIE](#) and [DRIE](#) programs that freeze rents for eligible older and disabled adults.⁷
- Improve accessibility of older adults' homes by installing ramps, railings, and stairs.
- Promote home-sharing options for older adults.
- In case of a disaster or emergency, establish safety procedures within buildings, such as floor captains and a designated resident or staff member to contact in case of an emergency. For more information about disaster preparedness and response, please see this [2023 NYAM report](#).⁸

⁷ NYC Department of Housing Preservation & Development, “SCRIE/DRIE.”

⁸ Scher et al., “Strengthening Community Resilience: Supporting Older Adults Through Emergency Preparedness and Response in a Post-COVID Era.”

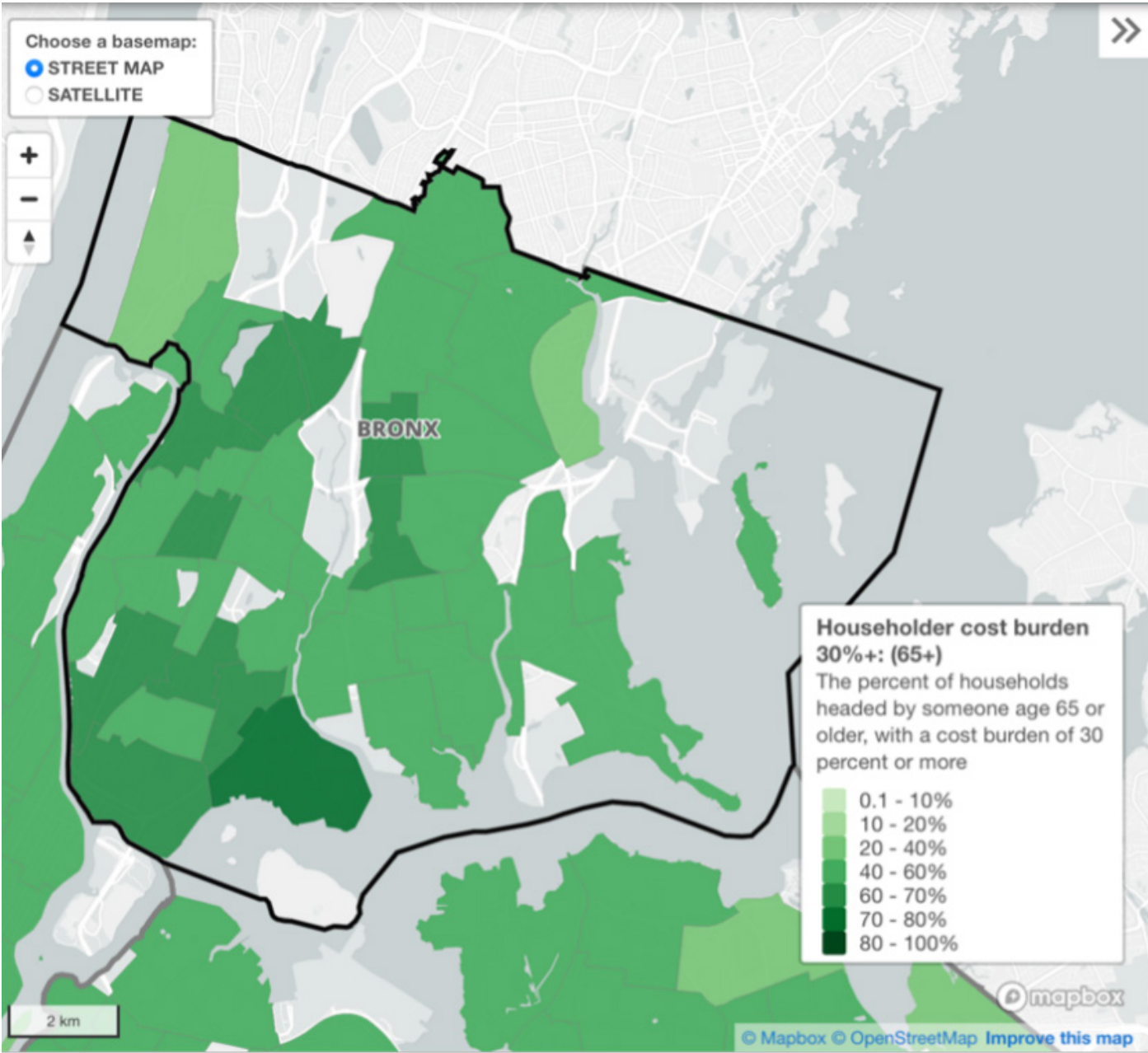


Figure 3. Proportion of Householder Cost Burden for Older Adults in the Bronx.

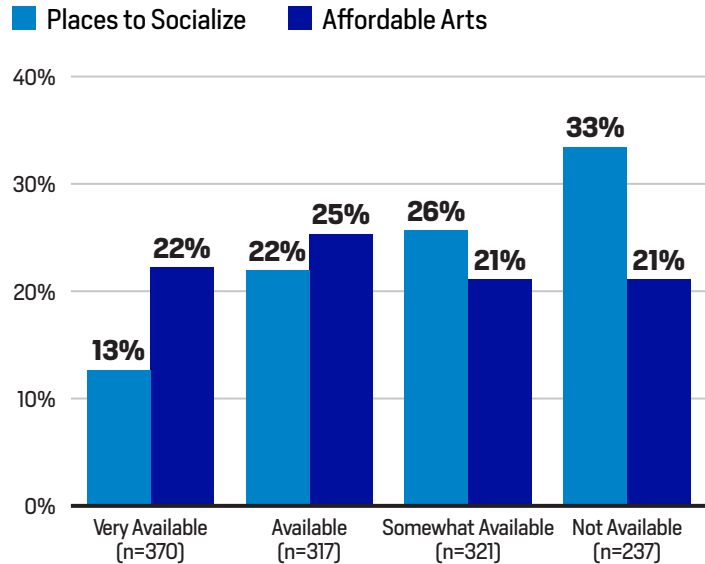
Respect, Social Inclusion, and Social Participation

Among survey respondents, 46% reported having “available” or “very available” access to affordable arts.

Having opportunities for social connection is integral to aging well in one’s community. The association between social isolation and worse physical and mental health outcomes is well-documented. Throughout the Bronx, there are a variety of options for older adults to engage in social activities, including older adult centers, restaurants, religious institutions, and planned entertainment activities. For example, the JASA Van Cortlandt Senior Center, Parkchester Jame Masjid Senior Center, and Co-op City Senior Center offer a range of activities such as fitness classes, group outings, and educational workshops.

However, only approximately 35% of survey participants said that places to socialize that are accessible and welcoming (like community centers, religious organizations, or coffee shops) were “very available” or “available.”

How available are places to socialize and affordable arts in your community?



Recommendations

- Spread awareness of discounted arts and cultural opportunities, such as the Theater Development Fund’s discounted tickets to Broadway shows and free entrance to museums through New York Public Library cards.⁹
- Partner with local businesses to establish discounts or designated activities for older adults.
- Encourage local businesses to establish an “adopt an older adult center” program through public and private partnerships.¹⁰
- Invest in older adult centers providing critical services to older adults in the Bronx such as R.A.I.N. Total Care Inc., Neighborhood SHOPP, and Casa Boricua.
- Older adult centers and other housing developments should hire bilingual staff to improve outreach to older adults who speak languages other than English.

⁹ New York Foundation for Senior Citizens, “Senior Theatre Enrichment Program.”

¹⁰ Kieffer and Rubano, “Age-friendly Brooklyn Task Force Report.”

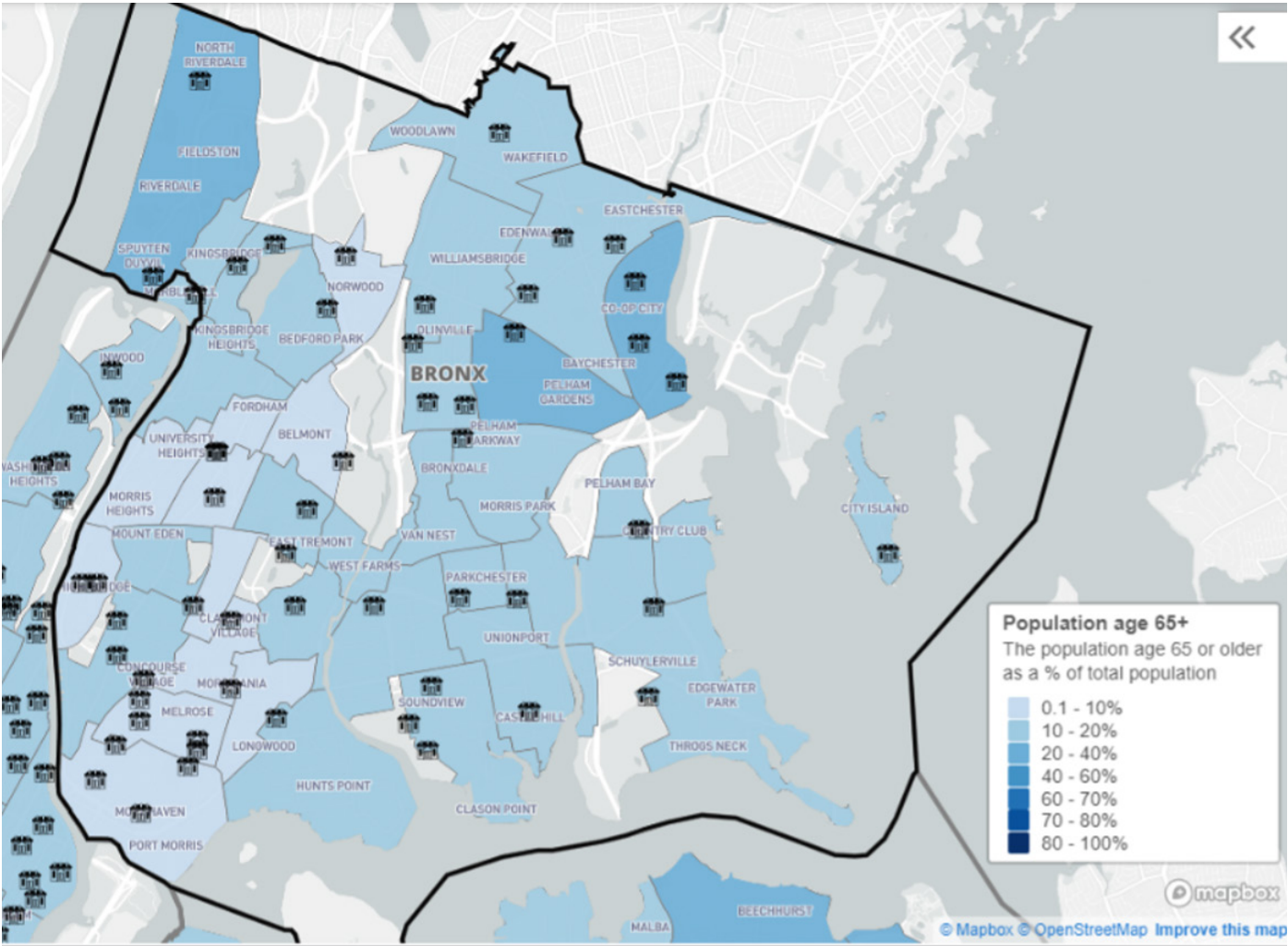


Figure 4. Locations of Older Adult Centers in the Bronx.

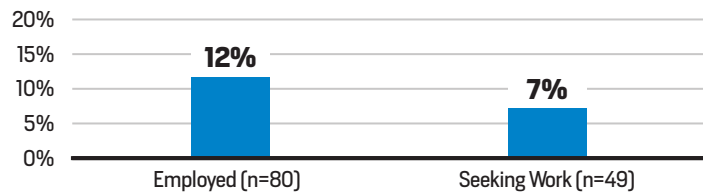
Civic Engagement and Employment

The majority of participants were not employed (85%), while 12% were employed, and 3% were missing. In addition, most participants were not seeking work (89%), while 7% were seeking work, and 4% were missing.

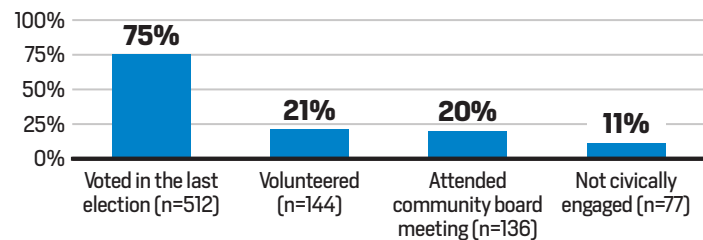
Overall, most participants (81%) were civically engaged in some way, including reporting that they engaged in one of the following activities: voted in the last election, volunteered at a local organization, or attended a community board meeting.

About 75% of participants voted in the last election, while 21% volunteered at a local organization, and 20% attended a community board meeting. Approximately 11% of participants were not civically engaged in the last year, and 6% were missing.

Are you currently employed or seeking work?



Were you civically engaged during the past year?



Recommendations

- Educate older adults about job training and employment opportunities, such as those available through the Mid-Bronx Senior Citizen Council.¹¹
- Utilize IMAGE:NYC to find low-voter-turnout areas and plan outreach campaigns for voter registration.
- Coordinate with the NYC Department of Education in creating intergenerational learning opportunities between older adults, adolescents, and children in the Bronx.
- Cultivate and promote opportunities for volunteerism, including but not limited to City Meals on Wheels and AmeriCorps Seniors.
- Advocate for companies to hire and retain older adults.
- Partner with organizations that employ older people, such as ReServe, to expand their programming into or throughout the Bronx.
- Increase cross-agency promotion for programs currently increasing access to employment for older adults, such as [**NYC Aging's Silver Stars and Silver Corps**](#).

¹¹ Mid-Bronx Senior Citizen Council, "Employment Opportunities."

Community Support and Health Services

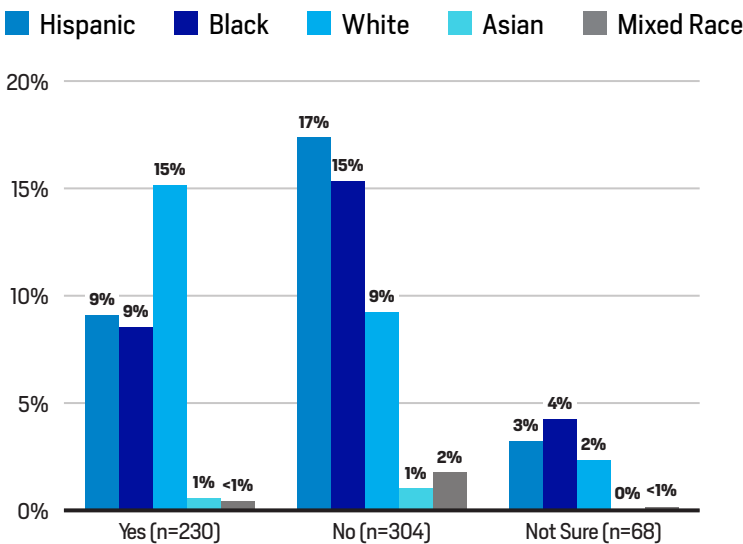
In the following section, several topics with respect to community support and health services will be discussed, including advance care planning, self-rated health, caregiving considerations, Medicare/Medicaid, and supportive services.

ADVANCE CARE PLANNING

Participants were asked, “Have you signed a document in front of two witnesses to appoint someone to make medical decisions for you should they be in a situation where you cannot make medical decisions for yourself?” In response, 237 said yes (35%), 313 said no (46%), 68 said not sure (10%), and 61 were missing (9%).

Most participants who said they had advance care plans identified as white (45%), followed by Hispanic (30%), and Black (25%). In contrast, among participants who said they did not have advance care plans, most identified as Hispanic (39%) and Black (34%).

Do you have access to advanced care planning?



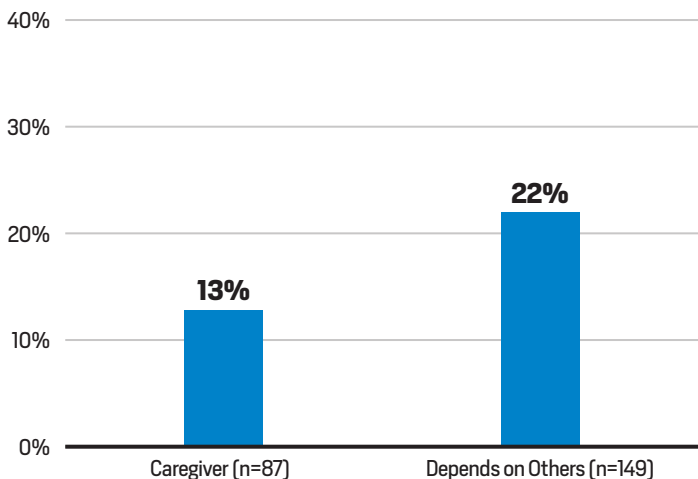
CAREGIVING

When asked if participants provided care for a family member or friend on a regular basis, most participants said no (82%), 13% said yes, and 5% were missing.

DEPENDS ON FAMILY

When asked if the participant depended on a family member, friend, or home care worker to help with daily activities on a regular basis, most participants (74%) said no, while 22% said yes, and 4% were missing.

Do you provide regular care to others or depend on others to receive daily care?



SELF-RATED HEALTH

The majority of participants reported being in fair (30%), good (31%), and very good health (25%).

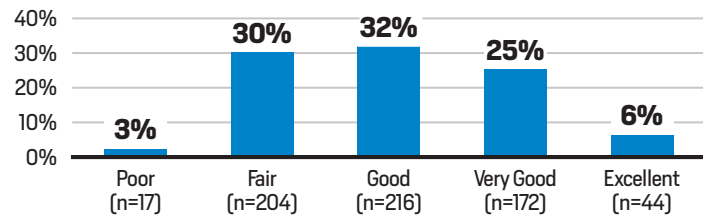
MEDICARE AND MEDICAID

Approximately 80% of the sample have Medicare, aligned with the fact that our sample was mostly made up of adults 65 and older (83%). About 31% of the sample also have Medicaid.

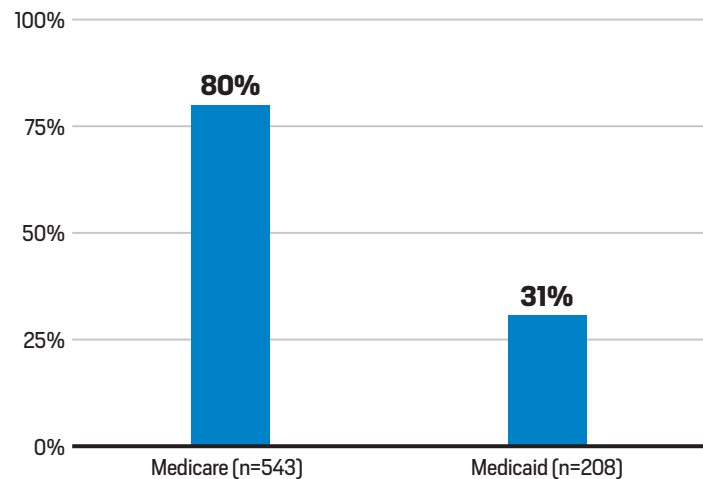
SUPPORTIVE SERVICES

One participant shared a need for programs within older adult centers in the Bronx to support people living with dementia and their care partners, suggesting the importance of “increased partnership with organizations like Alzheimer’s Association, CaringKind, nursing schools or home health care agencies to provide assistance and support in existing older adult centers.”

How would you describe your health?



Do you receive Medicare or Medicaid?



Recommendations

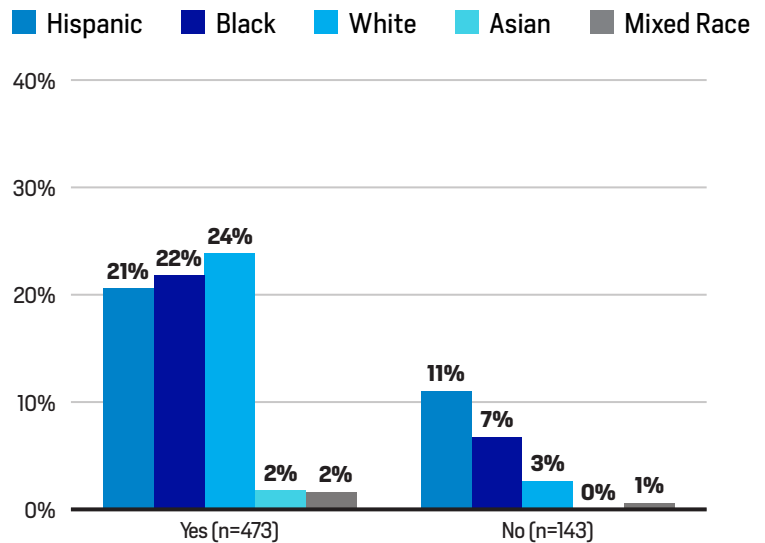
- Work with the Task Force on Racial Inclusion and Equity (TRIE) to incorporate age-friendly considerations into its work with respect to COVID-19.
- Educate older adults—with an emphasis on reaching ethnoracially minoritized communities—about the benefits of advance care planning, which are available through organizations like The Conversation Project.
- Create resources with information about enrollment and coverage under Medicare and Medicaid.
- Create more dementia-friendly programming in older adult centers.

Technology

Technology has the potential to increase social participation and connectedness among older people. However, many older people may have difficulty learning to use technology without assistance. The findings from *Aging Well in the Bronx* indicate the opportunity for impact in digital access and literacy in the Bronx.

Seventy-one percent of *Aging Well in the Bronx* survey respondents said the internet access in their home met their online needs, while 22% said it did not. Internet access in households varied by ethnicity and race. Black respondents were approximately twice as likely—and Hispanic respondents approximately three times as likely—to report inadequate internet access compared to white respondents. Respondents also reported primarily using smartphones for internet access.

Does the internet access in your home meet your online needs?



Recommendations

- Work to improve internet access for Bronx older adults—and especially ethnoracially minoritized older adults who are more affected.
- Expand computer and technology classes for older adults in the Bronx, with partners such as OATS.
- Educate older adults about the Federal Communications Commission's affordable connectivity program, which provides discounts on monthly internet bills and access to laptops, desktops, and tablets.¹²

¹² New York Public Library, "Affordable Connectivity Program."

NEXT STEPS

To address the challenges and opportunities identified in this report, NYAM is motivated to take the following concrete action steps—with the support and partnership of the Bronx Borough President’s Office and the New York City Council—toward improving the age-inclusivity of the borough:

- Schedule a full briefing of this report through a launch event to disseminate findings and recommendations to interested stakeholders in the Bronx (e.g., aging service organizations, nonprofit organizations, borough liaisons, the City Council Committee on Aging, community boards, older adults, etc.).
- Develop a Bronx Task Force with the goal of convening representatives from several Bronx-based organizations in order to develop an action plan for implementing the recommendations set forth in this report. (See a [previously published report](#) summarizing the work of a similar task force led by NYAM in Brooklyn.)¹³
- Drawing on recommendations from a previously published [NYAM toolkit](#), develop at least three Age-friendly neighborhood organizations in the Bronx, with a specific emphasis on engagement with Spanish-speaking organizations.¹⁴
- Educate older adults in the Bronx about the importance of completing the Census.¹⁵

¹³ Kieffer and Rubano, “Age-friendly Brooklyn Task Force Report.”

¹⁴ Kieffer and Kies, “How to Thrive Together: A Toolkit to Sustain, Grow & Fund Your Age-friendly Neighborhood Organization.”

¹⁵ Kieffer, Kies, and Goldman, “Get Out the Count: Strategies for Optimizing 2020 Census Participation Among Older People.”

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Appendix A: Aging Well in the Bronx Survey



**THE
NEW YORK
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Aging Well in The Bronx: A Survey

Please complete this form to help us learn about your community. Feedback is being collected by The New York Academy of Medicine and the Bronx Borough President's Office. The information that you share is important to help the City better serve its diverse communities and make our neighborhoods more inclusive from the perspective of older adults. **All the information provided will be kept anonymous.**

Please rate each of the following resources or services on whether they are available in your community based on the following scale:

Very Available	Available	Somewhat Available	Not Available
1	2	3	4

Circle the most appropriate number or mark the "Don't Know" box. Specific comments on resources or services should be made at the end of this survey.

Community resources or services		Very Available				Not Available	Don't Know
		1	2	3	4		
1.	Accessible and clean parks and public areas	1	2	3	4		
2.	Benches for resting and sitting	1	2	3	4		
3.	Clean and well-maintained sidewalks	1	2	3	4		
4.	Safe and well-lit streets and intersections	1	2	3	4		
5.	Stores and restaurants that are easy to enter and move around in	1	2	3	4		
6.	Fresh fruits and vegetables that you can buy in your neighborhood	1	2	3	4		

Appendix A: Aging Well in the Bronx Survey

Community resources or services		Very Available				Not Available	Don't Know
7.	Housing that you can afford to live in	1	2	3	4		
8.	Places to get information about public benefits	1	2	3	4		
9.	Health services, like primary care and specialty care	1	2	3	4		
10.	Mental health services, for issues like depression	1	2	3	4		
11.	Places to socialize that are accessible and welcoming, like community centers, religious organizations, or coffee shops	1	2	3	4		
12.	Free or affordable fitness activities	1	2	3	4		
13.	Free or affordable opportunities to attend arts and cultural events	1	2	3	4		
14.	Places to volunteer	1	2	3	4		

The following questions are to help us learn a little bit about you. We hope you will choose to answer them.

15. Age: ☐ over 85 ☐ 80 - 85 ☐ 75 - 79 ☐ 70 - 74 ☐ 65 - 69 ☐ 60 - 64
☐ 55 - 59 ☐ 50 - 54 ☐ 45 - 49 ☐ 40 - 44 ☐ 35 - 39 ☐ 30 - 34
☐ 25 - 29 ☐ 18 - 24

16. Gender:
☐ Male
☐ Female
☐ Non-binary

☐ Prefer to self-describe:

17. Race/Ethnicity: (check all that apply)

☐ Asian
☐ Black/African American
☐ Latino/Hispanic

☐ White
☐ Prefer to self-describe:

Appendix A: Aging Well in the Bronx Survey

18. Which five-digit zip code do you live in? _____
19. Do you think you will be living in the same place a year from now? ☐ Yes ☐ No
20. Do you share your living space with anyone else? ☐ Yes ☐ No
21. If yes, please select the number of individuals sharing your space:
- | | |
|----------------------------|------------------------------------|
| ☐ 1 | ☐ 3 |
| ☐ 2 | ☐ 4 or more |
22. What do you think are the top **three** concerns for older adults living in the Bronx?
- | | |
|---|--|
| ☐ Finding affordable housing | ☐ Safety |
| ☐ Finding accessible housing | ☐ Transportation |
| ☐ Food security | ☐ Financial security |
| ☐ Other: _____ | ☐ Access to healthcare/services |
23. What types of transportation do you typically use? (Check all that apply)
- | | |
|--|---|
| ☐ Subway | ☐ Taxicab |
| ☐ Bus | ☐ Rideshare (Uber, Lyft, etc.) |
| ☐ Access-A-Ride | ☐ Personal car |
24. How do you think public transportation in NYC can be improved for older adults?
-
25. Does the internet access in your home meet your online needs?
- ☐ Yes ☐ No
26. Which types of technology do you use on a regular basis? (*check all that apply*)
- | |
|---|
| ☐ Smartphone |
| ☐ iPad/tablet |
| ☐ Computer |
| ☐ Wearable technology (FitBit, AppleWatch, etc.) |
27. Are you currently employed? ☐ Yes ☐ No
28. Are you currently looking for work? ☐ Yes ☐ No

Appendix A: Aging Well in the Bronx Survey

29. In what ways were you civically engaged in the last year? (check all that apply)

- ☐ I voted in the most recent election
- ☐ I volunteered at a local organization
- ☐ I attended Community Board meetings
- ☐ Other _____
- ☐ I was not civically engaged in the last year

30. If you receive Medicare, please check all Parts of Medicare that you receive:

- ☐ Part A ☐ Part D
- ☐ Part B ☐ Do not receive Medicare
- ☐ Part C

31. Do you receive Medicaid? ☐ Yes ☐ No

32. Which of the following housing benefits do you receive? (Check all that apply)

- ☐ Senior Citizen Rent Increase Exemption (SCRIE)
- ☐ Disability Rent Increase Exemption (DRIE)
- ☐ Section 8 voucher
- ☐ Section 202 or Section 8 Housing

33. Do you experience any difficulties navigating your home and/or entryways to your building?

34. How would you describe your health?

- ☐ Excellent ☐ Very good ☐ Good
- ☐ Fair ☐ Poor

35. Do you depend on a family member, friend, or home care worker to help you with your daily activities on a regular basis? ☐ Yes ☐ No

36. Do you provide care for a family member or friend on a regular basis?

- ☐ Yes ☐ No

37. Have you signed a document in front of two witnesses to appoint someone to make medical decisions for you should you be in a situation where you cannot make medical decisions for yourself?

Appendix A: Aging Well in the Bronx Survey

☐ Yes ☐ No ☐ Not Sure

38. How would you describe your sexual orientation?

- ☐ Heterosexual
- ☐ Homosexual
- ☐ Bisexual

- ☐ Prefer to self describe: _____
- ☐ Prefer not to say

Anything else you think we should know?

Mail original or email scanned forms to:

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If you have any questions about this survey, please contact:

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This survey was approved by The New York Academy of Medicine Institutional Review Board (IRB), a committee that reviews research methods on human subjects to ensure ethical standards.

Appendix B: Demographic Characteristics of the Study Sample (N=679)

	n	%		n	%
Race			Number of people living with		
Hispanic	232	34%	1 person	137	50%
Black	208	31%	2 people	59	22%
White	190	28%	3 people	25	9%
Mixed Race	18	3%	4+ people	23	8%
Asian	12	2%	Missing	28	10%
Missing	19	3%	Provides care		
Gender			No	557	82%
Female	521	77%	Yes	87	13%
Male	141	21%	Missing	35	5%
Nonbinary	5	1%	Depends on family		
Missing	12	2%	No	500	74%
Age			Yes	149	22%
18–54	35	5%	Missing	30	4%
55–64	73	11%	Same place in one year		
65–74	248	37%	Yes	590	87%
75–85	235	35%	No	69	10%
85+	77	11%	Missing	20	3%
Missing	11	2%	Internet access		
Sexual orientation			Yes	485	71%
Heterosexual	442	65%	No	149	22%
Homosexual	11	2%	Missing	45	7%
Bisexual	9	1%	Technology use		
Missing	217	32%	Yes	613	90%
Shares living space			No	66	10%
No	407	60%			
Yes	255	38%			
Missing	17	3%			

Table 2. Demographics of the study sample (n=679)

Appendix C: Classification of Bronx Geography in the Study Sample

Northeast Bronx

Zip codes: 10465, 10466, 10469, 10470, 10475

North Baychester, Co-op City, Eastchester Bay, Pelham Gardens, Wakefield

Northwest Bronx

Zip codes: 10458, 10463, 10467, 10468, 10471

Belmont, Jerome Park, Kingsbridge, Van Cortlandt Park, Riverdale, Fieldston

Southeast Bronx

Zip codes: 10435, 10461, 10462, 10472, 10473, 10474

Throggs Neck–Edgewater Park, Van Nest, Soundview–Bruckner, Westchester Square

Southwest Bronx

Zip codes: 10451, 10452, 10453, 10454, 10455, 10456, 10457

Bathgate, Longwood, Melrose, Mott Haven, Morris Heights, Highbridge, Hunts Point

NYAM

The New York Academy of Medicine (NYAM) is a leading voice for innovation in public health. Throughout its 177-year history, NYAM has uniquely championed bold changes to the systems that perpetuate health inequities and keep all communities from achieving good health. Today, this work includes innovative research, programs, and policy initiatives that distinctively value community input for maximum impact. Combined with NYAM's trusted programming and historic Library, and with the support of nearly 2,000 esteemed Fellows and Members, NYAM's impact as a health leader continues.

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