











Acknowledgments

This project was a collaboration of partners that included the Williamsburg Council on Aging, the Pioneer Valley Planning Commission, Healthy Hampshire, WalkBoston, and the Town of Williamsburg.

Numerous residents, board members and staff of Williamsburg contributed to this project. Thank you to the following people for contributing their time and perspectives (in no particular order): Fred Goodhue, Daria Darienzo, Larry West, Denise Wickland, Jim Locke, Gerry Mann, Bill Turner, William Sayre, Kathy McKeown, Kim Boas, Nick Dines, David Chase, Lisa Tucker, Eric Weber, Denise Banister, Jacqueline Dufresne, Carole Gabranski, Ellen Doyle, Dave Mathers, Lisa Wenner, George Fleck, Judith Abraham, Sharon Loomis, Eric Bloomquist, Mary Dudek, Charles Dudek, Judy Stinson, Rob Stinson, Henrietta Wallace, John Merritt, Jean O'Neil, Edward O'Neil, Dean Acheson, Lee Root, Tom Benjamin, Donna Gibson, Pat Billingsley, Jennifer Westlake, Lisa Sheehy, and Charlene Nardi.

This project was made possible through a grant from the Massachusetts Association of Health Boards in partnership with Massachusetts Department of Public Health.

This report was supported by funds made available from the Centers for Disease Control and Prevention, Office for State, Tribal, Local and Territorial Support, under B01OT009024.

Disclaimer:

The conclusions of this report are those of the authors and do not necessarily represent the official position of or endorsement by the Centers for Disease Control and Prevention.



Executive Summary

Williamsburg, MA is a small rural community with a rapidly aging population. By 2025 it is projected that 40% of the Town's population will be 60 years or older. The number of older adults over 80 will likely double between 2010 and 2035. While Williamsburg benefits from engaged citizens, attractive village centers, and functioning senior services, the town's land use pattern and transportation system create challenges for healthy aging.

Housing stock in Williamsburg is generally older and larger. Many older adults are burdened by property taxes that stress their finances, home maintenance and repair needs, and homes that are difficult to access or move through due to hills, stairs, layout, etc. There are few options in Williamsburg for older adults who want to downsize to smaller or less expensive housing within town. There are very limited affordable housing options in town. There is no continuing care, assisted living, or nursing home in

Williamsburg—though there are several facilities in neighboring Northampton.

Walking in Williamsburg is constrained by numerous hills, narrow rural roads that lack safe space for pedestrians, and a heavily traveled state highway that runs through the middle of the two village centers—Haydenville and Williamsburg centers.

Older adults are able to meet some basic needs in the town—at the post office, library, two small markets, several restaurants, and a pharmacy/ hardware store—but they must travel outside of town for many needs, for example to visit most medical providers (including a dentist or eye care), or to shop at a full-size supermarket. Out of town driving presents a challenge for some older adults who are not comfortable driving long distances, or navigating the more busy small cities where those services are present. Finally, older adults are seriously concerned about what would happen

if they lost the ability to drive—they foresee that they would be profoundly isolated and unable to carry out day-to-day activities.

The main thrust of the project was to identify key

opportunities to facilitate healthy aging through community design in Williamsburg and support older adults in advocating for their needs. Key goals resulting from this project are:

- increase the diversity of housing opportunities for older adults in Williamsburg
- provide transportation options that enable older adults to carry out day-today activities in and around Williamsburg in a safe, convenient and cost effective manner
- provide older adults with additional opportunities for physical activity in Williamsburg, including active transportation, walking for recreation, organized classes, and other outdoor recreation
- rethink the delivery of Senior Services in

Williamsburg. The latest generation of older adults do not think of themselves as "seniors." They want inter-generational "community" services, as opposed to senior services. Furthermore, as older adults reach

a near majority of the town, and the older-older adult population (over 80+) increases dramatically, the scope of Senior Services is likely going to need to expand. In particular, the Town will likely need to provide more day-today support for older adults, including solving issues in day-to-day living related to housing, transportation, food access, social engagement, etc. Given constrained finances of Williamsburg, and the need to not further increase the tax burden on residents (especially low income older adults), Williamsburg should consider a distributed model

of Senior Services that takes advantage of existing resources and facilities in the Town. For example, using school facilities during offhours.

Older adults from the baby boom generation do not think of themselves as "seniors." They want intergenerational "community" services, as opposed to senior services.

We recommend that Williamsburg residents and Town government take the following actions:

Senior Services / Meeting Daily Needs of Older Adults



Expand the mission of the Senior Center to:

- Be the main point of contact and primary advocate for older adults in Williamsburg and
- Help coordinate volunteer efforts by older adults to facilitate healthy aging in Williamsburg—including working on fundamental needs related to housing, active living, and transportation and daily needs issues. This is necessary for any of the work below to advance.

Establish joint use agreements for exercise spaces, commercial kitchen, community events and Senior Center use.

- Consider a "distributed" Senior Center model that is both intergenerational and taking advantage of every space in the Town.
- Consider joint-use when planning and designing future municipal facilities. For example, if gym space or a commercial kitchen is included in the Public Safety Complex, ensure that these facilities are publicly accessible and design the facility with that in mind. Locate the joint-use spaces for public access and size them appropriately.

Create a membership-based organization to help older adults with daily needs. This organization would provide a single point of contact and reduced cost for various services including ridesharing, help with odd jobs, visiting nursing, etc. Consider a public/private partnership coordinated by Senior Center. Consider including all Hilltowns in this effort.

Regulations & Policies



Adopt Community Preservation Act (CPA)

5

Planning Board reviews all recommended housing related zoning changes, especially reduced dimensional and parking requirements in village centers, adoption of cluster zoning provisions, and increased flexibility for adaptive reuse of significant buildings.

6

Planning Board reviews all site design and parking related zoning recommendations.

7

Adopt a Complete Streets policy, create a prioritization plan that considers needs of older adults, and pursue funding

8

Adopt a policy that sets minimum standards for pedestrian and bicycle circulation in future municipal facility projects

Built Projects

Improve crosswalks in Williamsburg center

Improve connections to existing parks/public spaces in Williamsburg Center: path from bus shelter to Angel Park, path from North Street to the Library Garden, remove hedges and install benches at HEJ school

Establish walking loops with signage and maps. Use these walking loops to prioritize pedestrian improvements and municipal snow removal.

Support community gardens. Create an agreement to allow the community garden at Helen E. James school site to use water form the former school building. Create additional community gardens, as needed. Emphasize season extension and high raised beds where older adults can work without bending.





Table of Contents

| Acknowledgments | 1 |
|--|-------|
| Executive Summary | 3 |
| Table of Contents | 9 |
| Project Background | 10 |
| Health and Aging in Williamsburg | 12 |
| Williamsburg is Relatively Healthy, but | 17 |
| Planning Process | 24 |
| How are Health and Community Design Related? | 26 |
| Healthy Aging and Community Design | 28 |
| Summary of Public Input | 32 |
| Healthy Aging at the Crossroads in Williamsburg | 35 |
| Possible Improvements to Consider | 39 |
| Healthy Aging Priority Recommendations, Williamsbu | rg 67 |
| Next Steps | 70 |
| Conclusion | 71 |

Report Published: July 27, 2016

Project Background

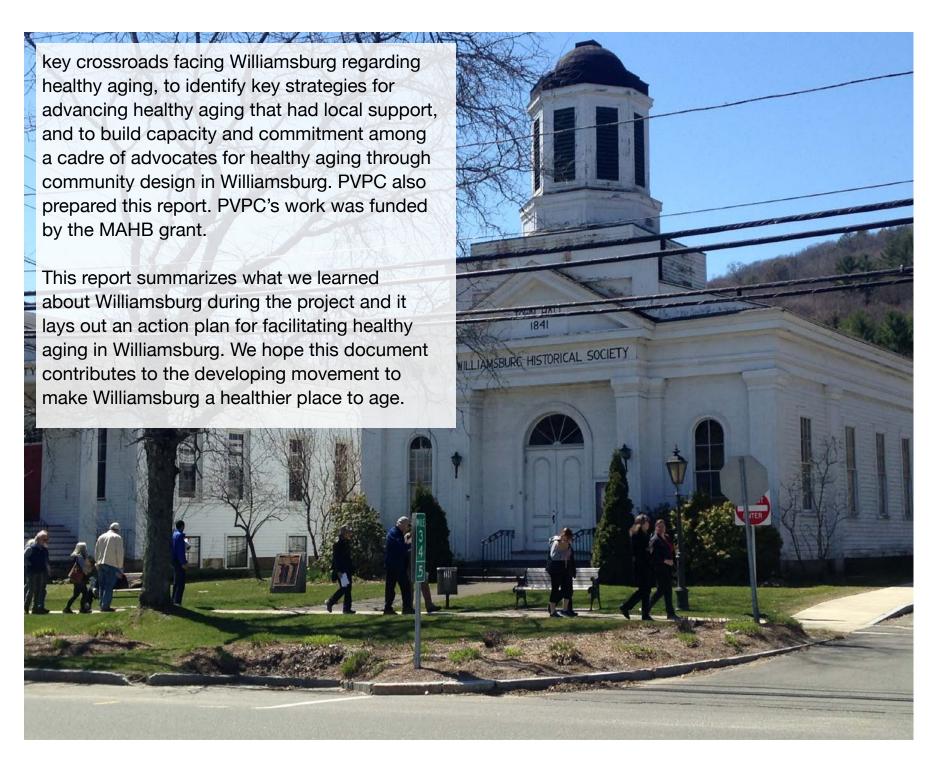
In 2016, the Massachusetts Association of Health Boards (MAHB) launched a competitive round of funding available to Massachusetts communities for the purpose of promoting healthy aging through community design. The Town of Williamsburg was awarded a grant in partnership with Pioneer Valley Planning Commission and Healthy Hampshire (a Mass in Motion program). The team began work in February 2016.

Marie Westburg, the Director of Williamsburg's Senior Center was the main point of contact for the Town. She coordinated the project, carried out outreach to older adults, coordinated meeting logistics and steered the general project direction.

Healthy Hampshire facilitated a focus group with older adults and leveraged technical assistance from Walk Boston. They were also instrumental in shaping the direction of the project. Their assistance was provided at no cost to Williamsburg or MAHB.

Walk Boston conducted a Walk Audit and a walkability training for older adults in Williamsburg Center. Their report is included as an appendix to this one.

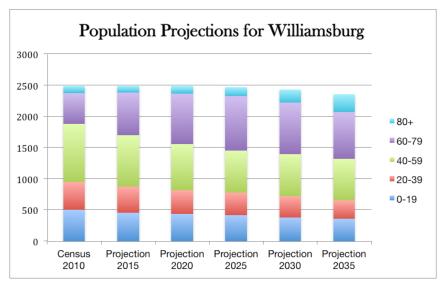
Pioneer Valley Planning Commission (PVPC) gathered existing conditions data about aging in Williamsburg including selected health outcomes of older adults in Williamsburg and demographic trends. They conducted targeted regulatory review of Williamsburg's zoning, general bylaws, and subdivision regulations that was guided by key issues highlighted by older adults throughout the project. The regulatory review was based on the Massachusetts Healthy Community Design Toolkit: Leveraging Positive Change, which can be found online at: http://www.pvpc.org/projects/ healthy-community-design-toolkit-leveragingpositive-change. PVPC conducted a public forum and a strategic planning session with residents of Williamsburg. The purpose of those public engagement sessions was to identify the

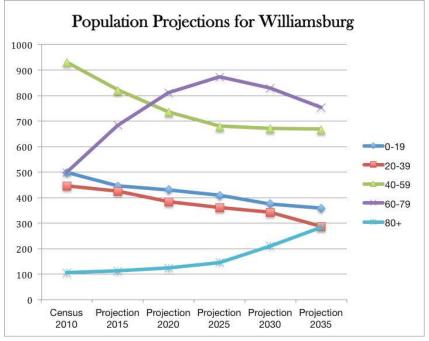


Health and Aging in Williamsburg

WILLIAMSBURG IS AGING

Williamsburg is projected to undergo dramatic changes in population over the next twenty years. The total population of Williamsburg is expected to decline by about 5% between now and 2035. This reflects broader regional trends. The populations of many Hilltown and upper Pioneer Valley towns are shrinking. The decline in population in Williamsburg, however, will not be spread evenly across all age groups. The populations of children, teenagers, young adults, and middle-aged adults are all expected to decline—generally around 30% for each age group. Meanwhile, the population of older adults (60 years old or older) is expected to increase significantly. The population of people 60 years or older is expected to nearly double—from 24.42% in 2010—the last reliable census count to 44.13% in 2035. Of this growth, the greatest increase will come from the older-older adults those 80 years old or over. The population of 80+





year olds is projected to nearly triple, from 4.27% to 12.07% over the next twenty years.

While the state as a whole is aging due to the baby boom generation entering old age, the shifts in Williamsburg are even more pronounced. Williamsburg already has a higher percent of older adults than the state as a whole (24.42% vs. 18.74%). That gap will grow over the next 20 years. The older population for the state is expected to increase by 1.53 times for the state versus a 1.81 times increase for Williamsburg. Meanwhile, the statewide population of younger people is expected to drop about 10%, significantly less than the 30% decline expected for Williamsburg.

All of these numbers add up to this: Williamsburg's population make-up will change significantly over the next twenty years. This will impact all aspects of Town life: who will be seen walking down the street, who will participate in the Town's civic life; citizens' ability to pay taxes; the type of services most needed by citizens including emergency services, schools, senior services. Williamsburg has never before had

such a large population of older adults and the community was not designed to accommodate them. As the population of Williamsburg shifts into older age, it is quite likely that Town services and the very design of the community will need to shift with them.



| Williamsburg Population Projections by Age Group | | | | | | | | | | |
|--|-------------|-----------------|-----------------|-----------------|-----------------|-----------------|--|--|--|--|
| AGE | Census 2010 | Projection 2015 | Projection 2020 | Projection 2025 | Projection 2030 | Projection 2035 | | | | |
| 0-19 | 500 | 447 | 432 | 410 | 377 | 359 | | | | |
| 20-39 | 446 | 426 | 384 | 361 | 343 | 288 | | | | |
| 40-59 | 930 | 821 | 735 | 679 | 671 | 667 | | | | |
| 60-79 | 500 | 684 | 812 | 874 | 830 | 754 | | | | |
| | | | | _ | | - | | | | |
| 80+ | 106 | 113 | 125 | 147 | 211 | 284 | | | | |
| Total | 2,482 | 2,491 | 2,488 | 2,471 | 2,432 | 2,352 | | | | |

Source: Donahue Institute

| Williamsburg Population Projections by Age Group: Shows Age Group as Percent of Total Population | | | | | | | | | |
|--|-------------|-----------------|-----------------|-----------------|-----------------|-----------------|--|--|--|
| AGE | Census 2010 | Projection 2015 | Projection 2020 | Projection 2025 | Projection 2030 | Projection 2035 | | | |
| 0-19 | 20.15% | 17.94% | 17.36% | 16.59% | 15.50% | 15.26% | | | |
| 20-39 | 17.97% | 17.10% | 15.43% | 14.61% | 14.10% | 12.24% | | | |
| 40-59 | 37.47% | 32.96% | 29.54% | 27.48% | 27.59% | 28.36% | | | |
| 60-79 | 20.15% | 27.46% | 32.64% | 35.37% | 34.13% | 32.06% | | | |
| 80+ | 4.27% | 4.54% | 5.02% | 5.95% | 8.68% | 12.07% | | | |
| Total | 2482 | 2491 | 2488 | 2471 | 2432 | 2352 | | | |

Source: Donahue Institute

| Massachusetts | Massachusetts Population Projections by Age Group | | | | | | | | | |
|---------------|---|-----------------|-----------------|-----------------|-----------------|-----------------|--|--|--|--|
| AGE | Census 2010 | Projection 2015 | Projection 2020 | Projection 2025 | Projection 2030 | Projection 2035 | | | | |
| 0-19 | 1,621,143 | 1,575,847 | 1,567,780 | 1,560,991 | 1,563,211 | 1,564,122 | | | | |
| 20-39 | 1,739,004 | 1,788,685 | 1,778,961 | 1,781,034 | 1,763,135 | 1,742,167 | | | | |
| 40-59 | 1,914,211 | 1,934,903 | 1,882,465 | 1,838,436 | 1,855,433 | 1,915,055 | | | | |
| 60-79 | 989,599 | 1,191,111 | 1,405,291 | 1,570,741 | 1,620,098 | 1,600,578 | | | | |
| 80+ | 283,672 | 302,045 | 316,171 | 354,676 | 429,249 | 497,547 | | | | |
| Total | 6,547,629 | 6,792,591 | 6,950,668 | 7,105,878 | 7,231,126 | 7,319,469 | | | | |

Source: Donahue Institute

| Massachusetts Population Projections by Age Group: Shows Age Group as Percent of Total Population | | | | | | | | | |
|---|-------------|-----------------|-----------------|-----------------|-----------------|-----------------|--|--|--|
| AGE | Census 2010 | Projection 2015 | Projection 2020 | Projection 2025 | Projection 2030 | Projection 2035 | | | |
| 0-19 | 24.76% | 23.20% | 22.56% | 21.97% | 21.62% | 21.37% | | | |
| 20-39 | 25.60% | 26.33% | 25.59% | 25.06% | 24.38% | 23.80% | | | |
| 40-59 | 28.18% | 28.49% | 27.08% | 25.87% | 25.66% | 26.16% | | | |
| 60-79 | 14.57% | 17.54% | 20.22% | 22.10% | 22.40% | 21.87% | | | |
| 80+ | 4.18% | 4.45% | 4.55% | 4.99% | 5.94% | 6.80% | | | |
| Total | 6547629 | 6792591 | 6950668 | 7105878 | 7231126 | 7319469 | | | |

Source: Donahue Institute

| Population I | Population Projections for Williamsburg Compared to Massachusetts for Key Older Adult Age Groups | | | | | | | | | |
|--------------|--|-------------|--------------------|--------------------|--------------------|--------------------|--------------------|--|--|--|
| AGE | Geography | Census 2010 | Projection 2015 | Projection 2020 | Projection 2025 | Projection 2030 | Projection 2035 | | | |
| 60+ | Williamsburg | 24.42% | 32.00% | 37.66% | 41.32% | 42.81% | 44.13% | | | |
| | MA | 18.74% | 21.98% | 24.77% | 27.10% | 28.34% | 28.66% | | | |
| 80+ | Williamsburg | 4.27% | 4.54% | 5.02% | 5.95% | 8.68% | 12.07% | | | |
| | MA | 4.18% | 4.45% | 4.55% | 4.99% | 5.94% | 6.80% | | | |

Source: Donahue Institute

Williamsburg is Relatively Healthy, but...

INTRODUCTION:

We used the Healthy Aging Community Profile for Williamsburg to evaluate how the health of older adults in Williamsburg compared to the health of older adults in state as a whole and in selected similar communities. The Healthy Aging Community Profile was produced by Tufts Health Plan Foundation and distributed by the Massachusetts Healthy Aging Collaborative. Profiles for every community in the state are available online at: https://explore-the-profiles/community-profiles/

Older adults in Williamsburg, MA are generally healthier than older adults in the state of Massachusetts as a whole. There are statistically significant differences between the health of older adults in Williamsburg and older adults in the state as a whole:

WORSE

Williamsburg's residents are less healthy than the state average for the following indicators:

- Percent of the population with 15+ physically unhealthy days (20.3% vs. 14%)*
- Ages 65-74 with ambulatory disability (21.6% vs. 12.9%)

BETTER

Williamsburg's older adults are more healthy than the state average for the following indicators:

- Rates of residents with:
 - diabetes
 - COPD
 - hypertension
 - · ischemic heart disease
 - osteoporosis
 - high cholesterol
- Percent of the population with 4+ chronic conditions
- Percent of the population with a regular doctor*

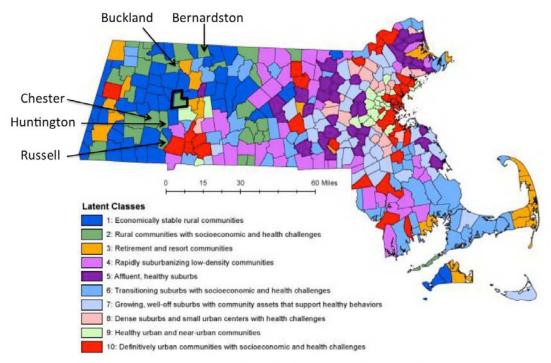
^{*}Note: Above indicators are statistically significant, C.I. = 95%

Diet and nutrition indicators are comparable to state averages. A higher percentage of older adults in Williamsburg consume 5 servings of fruits and vegetables each day, and fewer older adults have high cholesterol. These differences, however, are not statistically significant given the margin of error of the data.

Health behaviors and health outcomes are closely related to demographic and community characteristics. There are some key demographic differences between Williamsburg and the state as a whole. Comparing Williamsburg to the state, there is a much higher percentage of people over 85 in Williamsburg than in the state as whole (25.7% vs. 15.8%). Of note, Williamsburg has more older men than women. This is unusual. Statewide, 58.2% of people over 65 are female, while in Williamsburg only 46.4% are. The poverty rate among older adults in Williamsburg is higher than the state average (13.4% vs. 9.3%). All of these demographic factors impact health outcomes and should be considered when planning strategies to facilitate healthy aging in Williamsburg. For example, the high rate of olderolder adults indicates that Williamsburg may want to pay particular attention to mobility issues that generally increase with age. The high percentage of males indicates that Senior Services should

target this population with outreach and programming. The high poverty rate indicates that a large number of older adults in Williamsburg may be challenged with fundamental living expenses related to housing, food, transportation, etc.

As we said above, socioeconomic factors and community design can impact health outcomes. In an attempt to reveal what is distinct about the health of older adults Williamsburg, we compared Williamsburg to five nearby communities with similar demographic, health, and community design characteristics: Bernardston, Buckland, Huntington, Chester, and Russell. The analysis of similar communities was based on a "latent class" analysis"—the results of which can be found here: https://www.cdc.gov/pcd/issues/2014/13 0215.htm



The map shows communities in Massachusetts that are similar to each other based on demographic, health and community design characteristics.

Williamsburg is most like other communities in green. We selected five similar communities to compare to Williamsburg.

All of the towns have a recognizable village center. Bernardston and Buckland are like Williamsburg in that they are commuter towns (to Greenfield and Shelburne, respectively). Like Williamsburg, Chester, Huntington, and Russell are part of the Healthy Hampshire project area for the Mass Department of Public Health 1422 grant, while Bernardston and Buckland are within the Franklin County 1422 grant area.

Unfortunately, comparisons between the towns were hampered by small sample sizes (and thus large margins of errors) for all indicators. We present the data below because it is the best available and points toward some interesting differences between the communities, but it must be interpreted with reasonable caution. None of the findings below is statistically significant, unless otherwise noted.

| Health Indica | Health Indicators for Williamsburg Compared to Selected Communities | | | | | | | | |
|--|---|--------------|-------------|----------|------------|---------|---------|--|--|
| Population 65+: | MA | Williamsburg | Bernardston | Buckland | Huntington | Chester | Russell | | |
| % Female | 58.2 % | 46.4 | 55.7 | 57.8 | 57.8 | 57.6 | 61.6 | | |
| % over 85 | 25.1 % | 25.7 | 15.5 | 13.6 | 12.5 | 16.7 | 4.8 | | |
| % w/ College degree | 9.3 % | 33 | 13.2 | 24.3 | 10.6 | 13.3 | 17.2 | | |
| Poverty (65+) | 9.3 | 13.4% | 3.1% | 3.2% | 12.9% | 4.9% | 1% | | |
| Medicare enrollees | 21.2 | 17.7% | 28.8% | 20% | 13.3% | 19.8% | 19.8% | | |
| Walkability | 52.6 | 49 | 38 | 9 | 26 | 3 | 45 | | |
| Property crime (per 100k people) | 2259 | 1966 | 560 | 349 | 1240 | 1240 | 1240 | | |

Source: Massachusetts Healthy Aging Collaborative: Healthy Aging Community Profiles

Compared to Williamsburg, the other five comparative towns have much smaller populations of people over 85 years old, and also are closer to the state average balance of males to females. Education level and income levels are closely correlated with health indicators. Williamsburg's older adults have a high level of education. 33% of Williamsburg's population has a college degree, while 24% of Buckland's

does. Other communities range between 10.6%-17.2%. The poverty rate for older adults is higher in Williamsburg than in the five comparison communities and is also higher than the state average (13.4% in Williamsburg versus 9.3% in the state overall). Huntington's older adult poverty rate is similar at 12.9%, but the other towns have much lower rates, between 1% and 4.9%. Williamsburg's combination of both a high

college education rate and a high poverty rate likely indicates that town's older adult population is diverse in terms of education and income—residents fall on both ends of the spectrum. This was confirmed anecdotally through public input sessions during the project.

Using WalkScore as a measure of walkability, Williamsburg is about on par with the average community in the state and is significantly more walkable than most of the comparison communities.

A town's property crime rate is a useful indicator because it has both direct impacts on quality of life (and health in the case of violent crime), and indirect impacts on older adults sense of safety and their willingness to engage in community life. Violent crime in Williamsburg (not shown in table) was much lower than the state average, and also much lower than comparable communities. Property crimes, however, were the highest among the comparison communities at 1,966 crimes per 100,000 people per year. (Obviously Williamsburg does not have 100,000 people so the actual number of property crimes per year in the town is much lower!). Chester, Huntington and Russell's property crime rates were about 1/3 lower than Williamsburg's.

SELECTED HEALTH OUTCOMES COMPARED TO SELECTED COMMUNITIES

- Diet and Nutrition: Generally, daily intake of fruits and vegetables was similar across all comparison towns and higher than the state average. Prevalence of obesity (between 21.8% and 23.6%) hovered near the state rate of 22.6% and all towns had lower than average rates of high cholesterol, with Williamsburg and Buckland having the lowest rates.
- 2. Chronic disease: While rates of diseases such as diabetes, stroke, COPD, asthma, hypertension, ischemic heart disease and osteoporosis were all better than the state averages and similar to most comparison towns, there were a couple of statistically significant differences. Chester and Russell had lower stroke rates than Williamsburg, while osteoporosis rates are higher in Huntington than in Williamsburg.
- 3. Living with a Disability: Williamsburg had much higher rates of people living with a disability than the state and than of some comparison towns. Williamsburg, Chester and Russell all had over 12% of people between 65-74 living

with a hearing disability, while Williamsburg, Bernardston and Russell all have higher than average percentages of people over 75 with hearing impairment. Vision impairment was less of an issue. Ambulatory disabilities for those between 65-75 was much higher than the state average, and higher than most town rates, with 21.6% of people between 65-74 having this disability. Huntington also had a higher rate, at 23.4%. While other towns were on par with the state, Buckland was actually below the state average for this indicator with 7.3% of adults between 65-74 having an ambulatory disability. The high rate of disability

- in Williamsburg indicates that day-to-day mobility may be a challenge for many older adults in Williamsburg.
- 4. Access to health care A smaller percent of Williamsburg older adults are Medicare enrollees than the state average, and than nearby communities, with 17.7% enrolled. The only comparable community with a lower rate is Huntington. Bernardston and Buckland have 28.8% and 20% respectively. In all communities, most seniors have a regular doctor.

| Disability Indicators | | | | | | | | |
|-----------------------|------|-------|----------|----------|----------|---------|---------|--|
| | MA | Wmsbg | Bern'ton | Buckland | Hunt'ton | Chester | Russell | |
| Hearing (65- 74) | 7.4 | 12.4 | 3 | 2.9 | 6.3 | 15.4 | 14 | |
| Hearing (75+) | 21.2 | 30.2 | 43.3 | 11.5 | 15.2 | 21.1 | 28.1 | |
| Vision (75+) | 9.3 | 6.9 | 9.3 | 2.3 | 0 | 10.5 | 10.5 | |
| Ambulatory (65-74) | 12.9 | 21.6 | 15.5 | 7.3 | 23.4 | 12.2 | 14 | |

Source: Massachusetts Healthy Aging Collaborative: Healthy Aging Community Profiles

CONCLUSION

While health indicators suggest that older adults in Williamsburg are generally healthier than their cohort across the state, there are several demographic indicators that suggest they have less access to health care, and struggle with more hearing and ambulatory disabilities that

both their state and regional counterparts. There is a higher percentage of those over 85 in Williamsburg. Additionally, poverty rates are higher, while enrollment in Medicare is lower. Despite the somewhat walkable nature of the town, over 20% of those between 65 and 74 years old have an ambulatory disability. Considering that almost one-quarter of the population is over 65, this is a sizable number

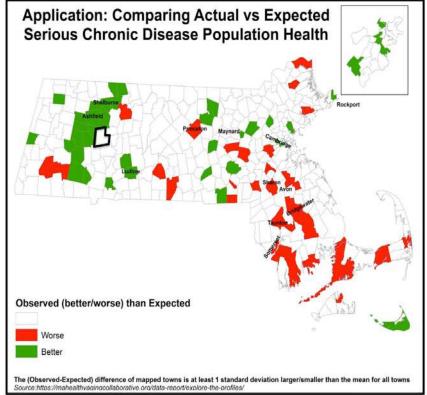
of people who are affected by issues of mobility. This should be a key consideration in future municipal efforts related to aging, walkability, and community design.

A recent study identified communities in which the chronic disease burden of older adults was significantly better or worse than the state as a whole. The map above shows the results. Williamsburg sits just east of a broad band of Hilltown communities with better than average

chronic disease outcomes.

This map, and the data above, captures the unique position of Williamsburg. As the "gateway to the Hilltowns," it shares many characteristics with Hilltown communities to its west and it also shares characteristics with the communities to its east, which have more average health outcomes. The question, then, for Williamsburg is: what

can the Town do to continue to help improve the health of its older adults, to cross over into better than average health outcomes?



Planning Process

The main thrust of this project was to carry out an open-ended planning process in which older adults of Williamsburg, supported by technical experts, would come to a consensus about the key community design issues related to healthy aging and to identify potential actions to address those community design issues.

There were four main components of this project: public outreach and engagement, an analysis of the existing conditions for healthy aging and community design in Williamsburg, the identification of key opportunities for improvement, and fostering a coalition to advocate and work toward those improvements.

Public outreach, logistics, and general project direction were provided by the Senior Center. Engagement was carried out through a focus group facilitated by Health Hampshire, a walk audit (facilitated by WalkBoston and Healthy Hampshire), a public forum facilitated by PVPC, and a strategic planning session facilitated by PVPC.

The existing conditions analysis included an analysis of walkability of Williamsburg Center (by WalkBoston), investigation of health outcomes and other relevant healthy aging indicators for Williamsburg, and a targeted review of Town plans, policies, regulations, and programs as the relate to healthy aging and community design (by PVPC).

PVPC synthesized all the information gathered through existing conditions analysis and public input. They formulated a summary of key issues for healthy aging in Williamsburg (see the Healthy Aging at the Crossroads section below) and developed an action plan to address them. These two summaries reflect extensive public participation.

Building a coalition for advocacy was accomplished through repeated engagement with a core group of older adults. Throughout the process, staff from the Senior Center, Healthy Hampshire, WalkBoston, and PVPC explained basic vocabulary and concepts for healthy aging and community design, and facilitated discussions. The Williamsburg residents who

attended meetings throughout the project listened closely, and spoke clearly and passionately. They contributed meaningful and valuable knowledge about the current state of aging in Williamsburg and what is possible and necessary to improve in the Town. They appear to be a group of people who can get things done if they continue to work together on these crucial issues.

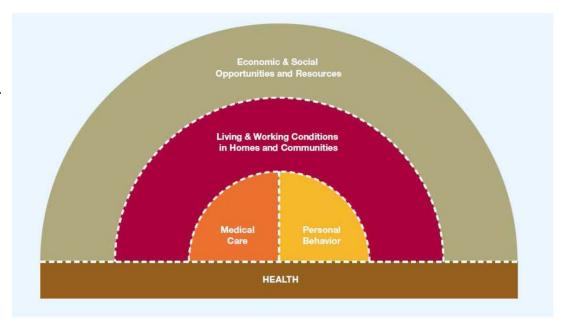


How are Health and Community Design Related?

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."—World Health Organization

Many people equate health with medical care. In reality, health is shaped by a complex set of social, behavioral and environmental factors. The graphic below shows major contributors to health.

Personal behavior is obviously important—whether a person gets exercise, eats well, etc. Less often considered, but equally important is the living and working conditions that shape a person's day-to-day life. Economic & social opportunities and resources have the most powerful influence on health—more powerful than medical care, or behavior.



Source: The Robert Wood Johnson Foundation, "Social Determinants of Health Diagram - RWJF," Lake Union Laboratory/ LULab, accessed July 1, 2016, http://lulab.be.washington.edu/omeka/items/show/1007.

Community design has an influence on all of these factors. It directly shapes living and working conditions. For example, zoning regulations (a fundamental force of community design) shape where housing is located, what kind of housing is available, and what kinds of work places are present in a community and where they are located. Community design influences personal behavior. For example, street and sidewalk design impacts whether a person chooses to take a walk to the store, or jump in the car. And community design shapes long-term economic and social opportunities through links to quality of education, access to jobs, cost of living, opportunities for social engagement and networking, etc.

Communities are largely planned and designed at the local level. Town governments build roads, water and sewer lines parks, schools, and other municipal facilities. This infrastructure is the skeleton around which private-sector housing and businesses grow. Furthermore, local plans, regulations, policies, and programs guide private and non-profit sector developers.

Each of the following has a deep influence on community design:

- Community Plans: Master Plan, Open Space and Recreation Plan, Pedestrian & Bike Plan, Housing Plan
- Regulations: Zoning, Subdivision Regulations, Stormwater Regulations
- Policies: Complete Streets Policy, Siting requirements for municipal buildings, Sidewalk Maintenance Policy
- Programs: Community garden efforts, Walking School-bus

In Massachusetts, all of these municipal plans, policies, regulations, and programs are established at the local level. They are the result of democratic decisions. Citizens, then, have a profound power over how communities are designed and how they are built out over time.

Healthy Aging and Community Design

The following section is adapted from the Healthy Community Design Toolkit, which was produced by PVPC for the Massachusetts Department of Public Health and Massachusetts Association of Councils on Aging.

As people age, the built environment of their immediate home and neighborhood has an increasing effect on them. This is the result of two factors. First, a person's daily travel radius tends to shrink. Second, aging is a dynamic process. It responds to an older person's behavior, their nutrition, their level of engagement, whether they experience significant injury, etc. All of these factors are, in turn, impacted by the built environment in which an older person carries out their daily life.

There is an optimal level of fit between a person's physical and mental competence and

their environment. If the environment does not challenge the person enough, it can lead to boredom and loss of capacity. If the environment is too stressful, the person may be physically stressed or injured or may change their behavior in maladaptive ways. For example, if a busy intersection between home and the grocery store exceeds an older person's driving competence level, he may adapt by shifting from buying fresh, perishable fruits and vegetables to non-perishable foods so that he can reduce how often he needs to brave the intersection. Maladaptive behavior can in turn reduce competence, resulting in a downward spiral.²

Supportive community design can help an older person maintain optimal functioning for as long as possible, while community design that presents excessive obstacles can hasten decline.

The implication for our communities is that if communities can provide a supportive built environment for older adults, the community

^{1.} Hans-Werner Wahl, Susanne Iwarsson, and Frank Oswald. *Aging Well and the Environment: Toward and Integrative Model and Research Agenda for the future.* The Gerontologist Vol 52, No. 3, 306-316.

^{2.} M.P. Lawton and L. Nahemow. "Ecology and the Aging Process," in *The Psychology of Adult Development and Aging*, ed. C. Eisdorfer and M.P. Lawton (1973). Washington, D.C.: American Psychological Association.

will benefit from a healthier, more self-reliant population. On the other hand, poor community design can result in reduced quality of life for older adults, deteriorating health outcomes, decreased independence, shorter life spans, increased health care costs, and crippling demand on service providers, community organization, and family care givers.

As Deborah Howe, chair of the Department of Community and Regional Planning at Temple University says, "If community livability is defined as a safe, engaging and healthy environment that allows us to carry out our daily activities, then senior citizens are shortchanged in most American communities." Since World War II, the development of American neighborhoods and communities has been largely been designed for able-bodied young families with children who drive everywhere. Housing has been segregated from businesses and workplaces. Variety in housing types and lot sizes has been reduced and standardized, often resulting in economic and age-based segregation. In many communities,

including Williamsburg, there is an undersupply of small houses or apartments single-people or couples. There is also an undersupply of accessible housing. A single mode of transportation—the personal car—has dominated transportation and land use planning for a century. For older adults, including in Williamsburg, this means their range of options is limited.4 The neighborhoods where many older adults set down roots as young people with families do not necessarily meet their needs as older adults. The house and yard may require too much maintenance, or have excessive expenses. Main roads may be too heavily trafficked and/or too fast moving and feel unsafe. The distance to desirable destinations and/or inadequate sidewalks may limit walking options.

While we have been building "one size fits all" communities, older adults are diverse. The age range itself covers 40 or more years!⁵ Older adults come in all shapes and sizes. Some are

4. Sarah Heaton Kennedy and Andrew L. Dannenburg. *Livability, Healthy, and Community Design* in Fritz

Wagner and Roger Caves. Eds. *Community Livability: Issues and Approaches to Sustaining the Well-Being of People and Communities* (2012). Routledge.

5. Older adults are sometimes defined as those over 55+, 60+ or over 65+. We use the latter two age ranges in this report.

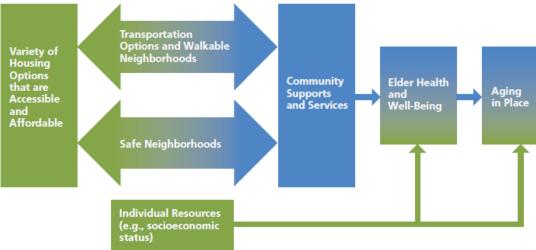
^{3.} Deborah Howe. *Aging as the Foundation for Livable Communities* in Fritz Wagner and Roger Caves. Eds. *Community Livability: Issues and Approaches to Sustaining the Well-Being of People and Communities* (2012). Routledge.

fit as a fiddle: others have multiple disabilities that affect daily life; most are somewhere in between. Some are rich: some are poor. This leads us to the important conclusion that communities should pursue a diverse set of interventions to improve community design—so that our communities can better meet the needs of a wide range of people.

At the same time, we must acknowledge that aging is often accompanied by declines in physical capabilities and that those declines can have far reaching impacts on the individual. For example, strength typically declines by about 10 percent a decade after age 25 and declines by 15-30 percent per decade after age 50. Vision, hearing, stamina, balance and response time also often decline.6 If these declines become significant enough, then small impediments

Figure 1: Livable Communities and Aging in Place

Liveable Community Characteristics



in the built environment can result in a loss of competence for healthy daily living. For example, a loss in strength can result in an inability to carry groceries, or to step up a curb. So while we are planning diverse communities that meet people across the "life arc"—as one focus group participant described it—we should also prioritize the needs of the most vulnerable among us, and acknowledge that older adults often fall into that category.

So how do we begin to plan communities for healthy aging? Met Life in its report *Livable*

⁶ Greenhouse, Esther. The Home Environment and Aging in Henry Cisneros, Margaret Dyer-Chamberlain, Jane Hickie (Eds). Independent for Life: Homes and Neighborhoods for an Aging America. (2012). Austin: University of Texas Press.

Community Indicators for Sustainable Aging in Place, lays out a framework for Livable Communities and Aging in Place. They identify four key aspects of the built environment that must be in place for Livable Communities for older adults. The first is a variety of housing options that are accessible and affordable. The second is there must be adequate community supports and services to meet the needs of older adults. Housing and community supports and services must be linked by diverse transportation options and walkable neighborhoods. And finally,

underlying all of this there must be both the reality and the perception of **safety** for older adults and the **individual resources** that make it possible for an older person to meet his or her needs in the community.⁷

This framework—which actually applies equally well to any population—helps us evaluate the needs of older adults and identify potential actions to facilitate healthy aging through the kinds of community plans, policies, regulations and programs that we identified above. In this project, we focused on housing, transportation, and destinations. Public safety and individual resources were beyond our scope, except insofar as they are influenced by community design.



^{7.} Livable Community Indicators for Sustainable Aging in Place. (2013). Met Life Mature Market Institute.

Summary of Public Input

Detailed notes from public meetings are included in the appendix to this report. What follows are a set of key themes that were expressed repeatedly by residents of Williamsburg along with representative quotes. We have organized them by three dimensions of community design: Housing, Transportation, Community Supports and Services.



HOUSING

Key issues identified by Williamsburg older adults:

- High cost of property taxes in Williamsburg, especially for those on fixed-incomes and low incomes.
- Stairs and hills make daily mobility challenging. This includes both stairs leading up to houses and stairs within houses.
- Limited rental properties
- Limited housing diversity: no senior housing, few small houses on small lots, no senior co-housing
- Lack of specialized senior housing: life care, assisted living
- Challenge keeping home in good repair.
 Difficulty finding handymen, affording repairs and managing the projects.

"My family and I have a great house...
and I don't want to leave home, but
living in our house is becoming harder
because of the stairs. It would be great to
think about ways that people can stay in
their homes..., like universal design for
accessibility, but also make it easier to
afford taxes."

TRANSPORTATION

Key issues identified by Williamsburg older adults: Walking:

- Cracks in sidewalks/tripping hazards
- Lack of sidewalks
- Snow/ice removal
- Crossing Route 9
- Speed of cars
- Lack of relatively flat, smooth hiking paths
- Too many curb cuts on parts of Route 9

Driving

- · Don't always see walkers in the road
- Feel like I need to re-park my car when I go from library to post office or market
- Busy roads in neighboring communities can be intimidating, dangerous

Public Transit

End of the line, limited schedule, commuter hours-only

"Living where I live, I wouldn't be able to get anywhere if I couldn't drive."



"I walk the roads a lot, and I mean a lot...traffic on side roads is very reasonable, hardest part is on Route 9 where sidewalks discontinue. Can walk or bike to Haydenville, but you'd better do it on Adams Road, which is very hilly so the challenge is different, and as you get older, who wants to do those hills?"

COMMUNITY SUPPORTS AND **SERVICES**

Key issues identified by Williamsburg older adults:

- No dentist or eye doctor
- Need more home health services
- Want more places to exercise--gym, more exercise classes
- Would like a dedicated performing art space (accessibility and bathroom issues at Grange)
- People would come to the senior center for community meals if it weren't called a senior center. Call it a community center with a café or cafeteria
- Need network building—expand the network from a trusted person.
- Need a structure for community members to check in on each other. Happens now, but needs to be broader.
- Better communication about community events--use technology
- Want designated walking loops—make maps, publicize them (include where to go, mileage, when to turn around, destinations, etc.).
- Public green spaces are hidden gems

"The library has many programs all the time and you can volunteer there and that would keep you active."

"The hardware store and pharmacy will deliver, so that is one piece of getting old that's reassuring."

"The Senior Center newsletter keeps people connected to what's going on at the school and services/programs and where I can help."

"Even though it's a small town with lots of country and open space, we also have a central town environment that a lot of small towns in the hills don't have with a market and a library and a country store and several restaurants and some banks and everything is pretty localized so if we don't want to go further, we don't have to."

Healthy Aging at the Crossroads in Williamsburg

INTRODUCTION

The public input above reveals specific ways in which Williamsburg helps or hinders health aging. But how do we know which of these issues are most important? How do we know if any of these problems is significant enough that residents of Williamsburg, supported by Town government, are willing to put in the effort required to make changes? How do we separate the "must-haves" from the "it would be nice ifs?"

To what extent is Williamsburg willing and able to accommodate the needs of older adults in the coming decades?

Over the course of this project, we asked this question at a series of events:

What is the crossroads that Williamsburg stands at with regards to healthy aging? What is changing about the community? What needs to change? What really matters right now?

In response Williamsburg residents expressed a range of deep appreciation for the town, specific challenges they face, and concerns about the future of older adults in Williamsburg. The points below summarize the key themes we heard—the *crossroads* that Williamsburg faces with respect to older adults. The *crossroads* below are a distillation of the fundamental identity and policy decisions related to healthy aging that Williamsburg must make as a community.

1. "STAY OR GO?" HOUSING

Many older residents of Williamsburg live in housing that does not meet their needs. Older adults name challenges including the high cost of property taxes and utilities, difficulties keeping up with property maintenance, isolation, and hills and stairs that make daily life challenging. Some older adults have attempted to move to more suitable housing in town, but have found that there is no other housing available in Williamsburg that would better suit their needs. They are faced with a choice: stay in the community they love but continue to live in unsuitable housing, or move out of town to more suitable housing.

Meanwhile, the population of younger people in Williamsburg is shrinking. Over the next twenty

years, there will be fewer and fewer children, young adults and middle aged adults living in Williamsburg. This will impact the Town's ability to support its businesses, fill its school, carry out its civic life (for example, staffing boards or recruiting volunteer firemen), and afford its municipal expenses (shrinking population of working-age taxpayers). There are many reasons for the shrinking number of younger people in Williamsburg—a lack of available housing is likely one of them.

Williamsburg produces very little new housing. Over the past five years, Williamsburg has built an average of 1 new dwelling unit built per year. There are currently 1,183 dwelling units in town, so the number of units Williamsburg is growing at .08% per year—assuming no units are lost to fire, demolition, etc. Compare that to Williamsburg's neighbors which are producing a greater percent of new units per total units each year: Hatfield (.39%), Westhampton (.49%), and Southampton (.92%).

If Williamsburg was able to build new housing that was suitable for older adults, more of them might move, which would free up their housing for people of other ages. Furthermore, building more housing units could spread the cost of town services over more residents, which could slow increases in property taxes.

The crossroads:

Is Williamsburg okay with older adults needing to move out of town because housing does not meet their needs? Is Williamsburg okay with younger people not being able to stay or settle in town?

What is Williamsburg willing, and able, to do to ensure that people of all ages who want to live in town can do so?

2. "I WANT TO BE PHYSICALLY ACTIVE BUT..." COMMUNITY SPACE

& WALKABILITY

Older adults know they can maintain their health better if they move their bodies more, but the town's built environment makes it difficult to stay active and engaged. There is no gym, limited outdoor exercise space, and relatively few places to walk that are safe from traffic, reasonably flat and free of tripping hazards.

The crossroads:

Will Williamsburg commit to providing more opportunities for physical activity for older

adults so that older adults can stay as fit and active as possible?

3. "WHAT IF I COULDN'T DRIVE?" TRANSPORTATION, DAILY NEEDS, ISOLATION

Older adults are deeply worried that life without a car would be untenable in Williamsburg. There is limited public transportation and limited options to walk for daily needs. Older adults fear that if they lose the ability to drive they will be unable to carry out daily activities and would be profoundly isolated. Some older adults already limit their trips out of town because driving in larger communities is intimidating (and possibly unsafe for some). This limits their access to healthy food, medical providers, etc.

The crossroads:

Williamsburg is largely a car-dependent community. A growing portion of the population is likely to be unable to drive at some point in their life. They will either need some form of support or they will experience profound challenges with daily life. To what degree does Williamsburg want to take responsibility for people who are unable to drive? To what

extent will Williamsburg work to create an alternate transportation system and a network of community support so that older adults who cannot drive are not isolated?

4. "WE WANT TO IMPROVE WILLIAMSBURG, BUT WE DON'T WANT TO LOSE WHAT WE VALUE." RURAL TO BEDROOM-COMMUNITY TRANSITION

Over the past decades, Williamsburg has been transitioning from a rural community to a suburban bedroom community. This transition has far reaching impacts on which people live in the town, as well as on the Town's culture, character, and economics.

The town's identity has long been shaped by having two village centers surrounded by rural and working lands. The Town has made significant investments in both village centers including sidewalk networks, municipal buildings, sewer and water service, and an existing density of housing that can support some businesses and community life. Williamsburg Center has seen several positive changes in recent years including major improvements to the Library, Dunphy School, the creation of Angel Park, and the continued beautification of the village center. Haydenville Center has not seen the same level of continued development and has struggled to hold onto businesses (Blue House cafe, Hilltown Charter School). Meanwhile the area between the two village centers continues to slowly develop. New businesses including Local Burgy, Elbow Room, and the relocated Williamsburg Snack Bar have settled in between the village centers. The Cumberland Farms expanded. Route 9 between the two village centers is not currently developing in a pattern that will provide the same level of walkability and opportunities for community life that the village centers have developed over time.

Williamsburg wants to maintain the character and the culture that make it so desirable to both long-term residents and newcomers. Williamsburg is proud of who and what it is. In a world of placelessness, Williamsburg is a beloved place whose identity is rooted in a slow changing landscape and culture. Yet trends in the outside world continue to impact the character and economy of Williamsburg. While it tries to retain its village centers and its rural character, it faces regional trends: a decline in small retail as a result of increased online and auto-oriented retail, rising

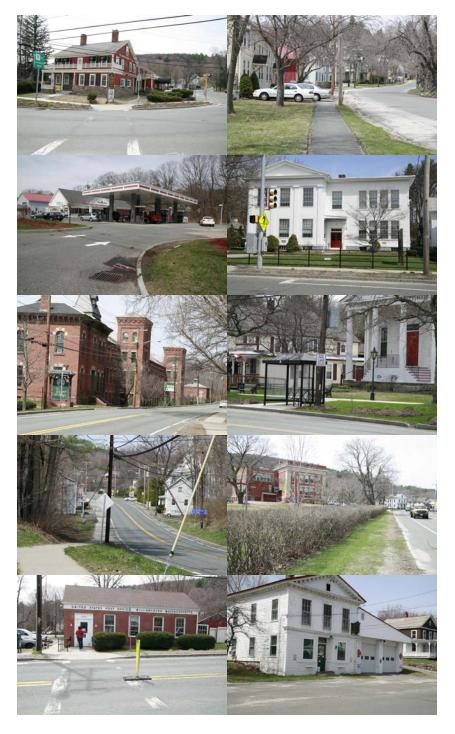
costs of housing, an aging population, rising costs of municipal services, likely increased flood events, and the aging of key historic buildings in town.

The crossroads:

Williamsburg wants to retain the village and rural character that defines it. Williamsburg has adopted a policy of limiting growth and change as reflected by zoning requirements that limit the establishment of businesses and require large lot sizes both in the village center and the rural areas. That is likely slowing change in the Town. It also limits the town's tax base. limits the availability of housing that suits changing household characteristics (including an aging population), drives up housing costs and tax bills, and makes it more difficult for Williamsburg to take advantage of new economic opportunities. What kind of town does Williamsburg want to be for the next 20 years? What is the best model for future business and housing development in Williamsburg? What is the desired balance of productive rural economy vs. a bedroom community vs. a village-centered community? Will Williamsburg maintain two distinct village centers, blur them into one corridor, or focus its attention on just one village center?

Possible Improvements to Consider

The crossroads give a sense of the big picture healthy aging issues that Williamsburg faces, but what can they do to make improvements? PVPC developed the following table which presents key healthy aging issues in Williamsburg and improvements to consider. The key issues were identified through public input, discussion among the project team, the WalkBoston walk audit, and PVPC's targeted analysis of Williamsburg's zoning, subdivision regulations, and general bylaws. Recommended improvements are based on best practices for facilitating healthy aging through community design—customized to what seems possible and appropriate to Williamsburg.



WILLIAMSBURG HEALTHY AGING & COMMUNITY DESIGN AUDIT KEY ISSUES AND POSSIBLE IMPROVEMENTS TO CONSIDER

HOUSING

| Issue | Improvement to Consider | Partners |
|---|--|-----------------|
| Regulatory barriers may be slowing provision of new housing | Consider reducing dimensional requirements, including frontage, lot size, front and side setbacks, especially in Village Mixed Use and Village Residential Districts. Consider refining boundaries of zoning districts and establishing a new zone that covers Route 9 outside of the two village centers. New zone should reflect the different character (existing and desired) of Route 9 outside the village centers. | -Planning Board |
| Regulatory barriers to converting existing houses to multiple units | Dimensional Requirements Reduce lot size requirements for two-family and multifamily dwellings (especially in Village Mixed Use and Village Residential Districts). Reduce required frontage and setbacks to match historic character, especially in Village Centers. Accessory Apartments Allow accessory apartments by right or by Site Plan Review. Allow detached accessory apartments. Reduce setback requirements for conversion of accessory structures (e.g. garages, carriage housesincluding pre-existing nonconforming accessory structures) to detached accessory apartments. Increase maximum allowed size of an accessory apartment | -Planning Board |

| Issue | Improvement to Consider | Partners |
|--|---|-----------------|
| Regulatory barriers to house- sharing | Revise definition of Dwelling (and its variants) to eliminate the term "family" and replace it with "household". See zoning for Amherst MA for a definition of "Family (Household)" | -Planning Board |
| Regulatory barriers to various forms of specialized senior housing (including nursing homes, assisted living, continuing care facilities). | Consider allowing these uses by Special Permit with Site Plan Review. See PVPC fact sheet at: http://www.pvpc.org/sites/default/files/files/PVPC-Housing%20for%20Older%20Adults.pdf Explore revising Age Restricted Housing Community provisions to encourage greater use of them. Consider allowing in parts of town that are not currently served by existing sewer/water if developer will pay for a significant portion of expansion of the services and the town's water/sewer facilities can handle additional demands | -Planning Board |
| Regulatory barriers to senior co- housing | Consider allowing multiple units on a lot (zoning and subdivision regulations) Consider allowing cluster zoning (aka Conservation Development; Open Space Residential Development). See PVPC fact sheets and model bylaws at: http://www.pvpc.org/content/smart-growth-individual-fact-sheets-and-bylaws | -Planning Board |

| Issue | Improvement to Consider | Partners |
|---|--|-----------------|
| Barriers to adaptive reuse of townowned, historic, and/or significant buildings for housing. Multi-family dwellings are currently limited to 4 units. | Consider revising zoning to allow more than four dwelling units within adaptive reuse buildings. This could apply to excess municipal properties (for example, Helen E. James School if town decides to sell property). It could also apply to the Brassworks. Consider allowing live-work in adaptive reuse buildings Consider reducing lot size requirements for adaptive reuse of existing buildings (especially those that are town owned and/or have historic significance) | -Planning Board |
| Lack of small units, ground floor units and High cost of property taxes | Consider allowing smaller lot sizes, reduced dimensional requirements and encouraging smaller units in selected locations in Williamsburg. For example, smaller units can be incentivized through density bonuses in a cluster zoning provision. Consider allowing cottage housing (small single family cottages, clustered around a common open space on a single lot)typically in a village center location with a higher density than would be allowed for single-family dwellings on their own lots. Explore role parking requirements are playing in limiting residential development Eliminate ban on overnight on-street parking in Village Centers, replace with a maximum parking duration (24 hours), Reduce off-street parking requirements for residential use in Village Center | -Planning Board |

| Issue | Improvement to Consider | Partners |
|--|--|--|
| Lack of senior housing and affordable housing | Adopt Community Preservation Act to fund affordable housing projects | -Town Voters |
| Conflicts over need for housing particularly small units in walkable locations vs. desire to preserve "character" of Town | Develop a Town Master Plan. This can be done by the Planning Board, or by consultants or by a combination. The typical cost for planning consultants to create a full Master Plan is \$100,000-\$250,000. PVPC often uses DLTA funds to work on a Master Plan for a community. DLTA funds can typically pay for one of the required chaptersusually the Land Use or the Housing chapter. | -Planning Board (and likely consultants) |

PHYSICAL ACTIVITY & ACTIVE RECREATION

| Issue | Improvement to Consider | Partners |
|---|---|--|
| Outdoor spaces for physical recreation are not visible and/or lacking: • Athletic fields at Ellen Ames Field (off of Myrtle Ave/Fairfield Ave) are out-of-sight, and have limited accessibility by foot or bicycle. Also lack picnic tables and benches. • Athletic fields at Anne T. Dunphy School are out-of-sight. It is unclear whether they are open to public or not. Pedestrian and bicycle access issues are described elsewhere. • Limited public tennis courts and basketball courts • No public track, or fitness trails | Prioritize improvements to sidewalk and bike networks that serve active recreation destinations Install resting spaces (benches/tables) at active recreation spaces Identify locations for additional active recreation spaces, as prioritized by Town residents. Consider installing fitness trail or "senior playground" Adopt Community Preservation Act to fund Outdoor Recreation Projects | -Town Highway/ Selectmen -Volunteers/ Selectmen -Town Voters |

| Issue | Improvement to Consider | Partners |
|---|---|--|
| Older adults want more indoor spaces for exercisegym, class | Work with YMCA or other community partners to develop a gym | Volunteers |
| space | Consider providing community accessible spaces for exercise classes and/or gym in future municipal facility projects (for example, if Public Safety complex has gym in it). Establish joint use agreements for existing municipal spaces | -Selectmen/ Facilities Master Plan Committee |
| | that could be used for exercise. | -Selectmen/Healthy Hampshire/Senior Center |

ACTIVE TRANSPORTATION (WALKABILITY, BIKE COMFORT, WHEELCHAIR ACCESS, ETC.)

Note: in this section, all recommendations are by WalkBoston except those indicated by "Additional Recommendations"

| Issue | Improvement to Consider | Partners |
|---|---|------------------------------------|
| Some residents of Williamsburg would like the community make efforts to become more walkable and bikeable, but there is not a community consensus about how much of priority walkability/bikeability should be, which areas of town to prioritize and how much of the town budget should be allocated to paying for improvements. | Establish a municipally recognized bicycle/ pedestrian committee or task force. Depending on its capacity and members' interest, the Mill River Greenway Committee could fulfill this role. Membership on this committee could include representatives from town departments, school system, chamber of commerce (or equivalent organization), first responders, council on aging, and advocates. Determine if pedestrian safety is a priority issue for Williamsburg citizens. If it is a top priority, then examine the town budget and commit funds to building, re-building, and maintaining a sidewalk network in town. Draft and adopt a complete streets policy to qualify for the MassDOT Complete Streets Funding program. | Selectmen/Volunteers/ Town Highway |

| Issue | Improvement to Consider | Partners |
|--|---|----------|
| Traffic speeds, volumes and noise levels are high on Route 9 through the village centers | Introduce clues that vehicles are entering the village center such as village center signage, sculpture, or other public art • Work with the police on periodic enforcement of village speed limits using both speed trailers and officer patrols • Investigate the possibility of narrowing travel lanes by changing location of fog lines along Route 9. The travel lanes now measure 11' (standard width), but a design exception could be pursued. • Enhance pedestrian road crossings with advance crosswalk signage and more robust crosswalk painting (ladder or continental design). Install yield lines prior to the crosswalks in accordance with MUTCD Section 3B.16. • Reprogram or repair school zone flashing beacon to operate when school is in session and at peak arrival and dismissal times. Investigate the possibility of installing a second school zone pavement marking before the crosswalk. • Study feasibility of adding Rectangular Rapid Flash Beacons (RRFBs) at locations described below. | |

| Issue | Improvement to Consider | Partners |
|---|--|----------|
| Crossing Route 9 feels unsafe even on marked crosswalks | Enhance the crosswalk pavement markings from the two parallel lines to a ladder or continental crosswalk pattern. Install yield lines prior to the crosswalks in accordance with MUTCD Section 3B.16. Place an in-street pedestrian sign in the crossing permanently. These signs have been proven to reduce speeds due to a perceived narrowing of travel lanes. Given the volumes of truck traffic, these signs can sustain some damage. However, they are a low cost solution to slowing traffic and protecting people crossing. (See Appendix for example of in- street pedestrian sign). | |

| Issue | Improvement to Consider | Partners |
|-------|---|----------|
| | Williamsburg Market/Brew Master Pub crossing | |
| | Enhance the crosswalk pavement markings from the two | |
| | parallel lines to a ladder or continental crosswalk pattern. | |
| | Install yield lines prior to the crosswalks in accordance with | |
| | MUTCD Section 3B.16. | |
| | Place an in-street pedestrian sign in the crossing permanently. | |
| | Install Rectangular Rapid Flashing Beacons at the existing | |
| | crosswalk location on Route 9. The Federal Highway | |
| | Administration (FHWA) allows for the use of RRFBs "to | |
| | supplement standard pedestrian crossing warning signs and | |
| | markings at either a pedestrian or school crossing; where the | |
| | crosswalk approach is not controlled by a yield sign, stop | |
| | sign, or traffic- control signal" (source:http://mutcd.fhwa. | |
| | dot.gov/resources/interim_approval/ia11/ fhwamemo.htm). | |
| | Approximate cost: \$15,000 | |

| Issue | Improvement to Consider | Partners |
|-------|---|----------|
| | South Street and Route 9 crossing Enhance the crosswalk pavement markings from the two parallel lines to a ladder or continental crosswalk pattern. Install yield lines prior to the crosswalks in accordance with MUTCD Section 3B.16. Place an in-street pedestrian sign in the crossing permanently. These signs have been proven to reduce speeds due to a perceived narrowing of travel lanes. Given the volumes of truck traffic, these signs can sustain some damage. However, they are a low cost solution to slowing traffic and protecting people crossing. Consider shortening the curb radius on both sides of the South Street/Route 9 intersection to reduce the crossing distance and calm turning traffic. | |
| | Additional Recommendations Consider providing high visibility flags that people can carry across crosswalks Set town crosswalk standard for higher visibility crosswalk markings and require from MassDOT and local highway When MassDOT does work on Route 9, advocate for high visibility crosswalks; provide town funding to pay for incremental difference between what MassDOT will provide and what Town feels is necessary | |

| Issue | Improvement to Consider | Partners |
|---|---|----------|
| Quality of walking environment along Route 9 needs enhancement. | Inspect and repair sidewalks along the entire corridor Review the Town of Williamsburg curb cut permitting rules and revise to minimize the frequency and the width of curb cuts Work with property owners along the Route 9 study area to reduce the width of curb cuts, where practicable. Identify areas where plantings, trees and benches could be added along the corridor to replicate the street treatment on the south side of Route 9 in front of historic properties and general store. | |

| Issue | Improvement to Consider | Partners |
|---|---|----------|
| Parking spaces are limited and current parking polices discourage | Recommendations to address parking in the Burgy village center: | |
| "park once" strategies. | Conduct a parking study to determine the existing supply and pent up demand in the Burgy village center Work with the business owners to better understand the parking issues they wrestle with and consider adopting a shared parking strategy for the village center Consider formalizing the parking space layout in and around Florence Bank, Williamsburg Market, and Cichy's Garage. Delineate a pedestrian zone (with paint if other alternatives prove too expensive) where drivers can expect people walking across the parking lot driveways | |
| | Additional Recommendations Allow public parking at Dunphy school when school is not in session and publicize/provide wayfinding signage Revise parking regulations (zoning) to allow shared parking and off-site parking Reduce parking requirements, within Village Centers (parking requirements may be slowing establishment of businesses and/or additional housing within walkable centers). | |

| Issue | Improvement to Consider | Partners |
|------------------------------------|--|----------------------|
| Streets leading to the town center | Recommendations to make targeted pedestrian infrastructure | |
| need pedestrian infrastructure | improvements: | |
| improvements. | Identify priority walking routes | Volunteers/Senior |
| | Priority walking routes may include connections to | Center/ Healthy |
| | schools, senior housing, residential neighborhoods | Hampshire/ Consider |
| | with sufficient density, and parks or trailheads | partnering with Mill |
| | Walking loops could also be considered priority | River Greenway and |
| | routes. The loops could be identified on a map or with | Greenway and Trails |
| | small trailblazers marking the route. These loops could | Program. |
| | feature many of the historic and natural features that | |
| | make Burgy distinctive, and help to create a better | |
| | sense of place for the village center. | |
| | Maps or signs could indicate distances and clear | |
| | directions about where to go/when to turn around. | |
| | Direct sidewalk maintenance and reconstruction funds to | |
| | making improvements on priority routes | |
| | Study the traffic pattern at the N Main Street/ North Street/E | |
| | Main Street intersection to determine if a 4-way stop would | Selectmen/Town |
| | improve safety | Highway |
| | Consider shortening the curb radii on both sides of E Main | Selectmen/Consultant |
| | Street | |
| | | Selectmen/Town |
| | | Highway |
| | | riigiiway |

| Issue | Improvement to Consider | Partners |
|---|--|----------|
| Public green spaces are hidden assets in and around Burgy village center. | Continue the planning of a proposed walking trail along the Mill River behind Florence Bank and Williamsburg Market Highlight public green spaces on walking loop maps. Maps could be made available in the library, post office and local retail establishments. Consider signage program to direct residents and visitors to local landmarks and parks Increase programming in the public open spaces to increase use and attachment to the village green spaces and center Consider further study of access and circulation to public green spaces. | |
| Recommendations below are from PVPC | | |

| Issue | Improvement to Consider | Partners |
|---|--|---|
| Private Site design, pedestrian and vehicle circulation | Parking Requirements Limit front parking Reduce parking requirements and/or set maximums Allow shared parking, off site parking Site Plan Review/Special Permit in Zoning Encourage shared parking Encourage cross connections between parking lots Set a maximum curb cut widths and maximum curb radii Require that driveway grade rises up to the grade of the sidewalk rather than sidewalks dipping down to the grade of a driveway Require that all buildings that are visible from a public way have a front door that faces the public way Require an unobstructed pedestrian path from the sidewalk to the front door of public buildings. If that path crosses a motor vehicle travel lane, require that it be designated with a raised crosswalk and/or high visibility crosswalk Require bicycle parking Require street trees Set minimum sidewalk design requirements Set special permit criteria for businesses with drive-thrus Require pedestrian and bicycle easements to connect to any planned future paths or trails adjacent to properties | -Planning Board |
| Public Site design, pedestrian and vehicle circulation | Develop and adopt policy to shape pedestrian and bicycle accommodations for future municipal site designs | -Selectmen/Facility Master Plan Committee |

| Issue | Improvement to Consider | Partners |
|--|---|---|
| Pedestrian safety concerns on rural roads | Investigate options for low cost side paths. Wetlands and steep side slopes will likely be major problems. Concentrate on key loops and access to green spaces in places without significant constraints (wetlands and steep side slopes). Pursue education and cultural shift among drivers (slow down) and pedestrians and bicycles (walk facing traffic, wear high visibility clothing, carry lights) Consider zoning changes to limit rural development to slow traffic volume increases | Selectmen/Town Highway/Volunteers |
| Some site designs on Route 9 between Burgy and Pharmacy do not support walkability | Further explore what kind of development Williamsburg wants in this section of Route 9. It appears to be the town's growth area for businesses and it is developing in a predominantly auto-oriented pattern. Explore development of more riverside access in partnership with business owners. Visually connect this with signage/cross walks planned for crossing from greenway over Rt. 9? | Volunteers/Planning Board Volunteers/Business Owners |
| Poor maintenance of roads and sidewalks in winter | Adopt a regulation requiring snow removal from sidewalks (if the Town doesn't have one) Designate key sidewalks that Town will shovel Create Village Center Neighborhood Association(s) or BID that will take on responsibility for snow removal. (This organization could also take responsibility for the Lily Beds along Route 9, Angel Park, etc.) | Selectmen Volunteers/Business Owners |

OPEN SPACE, TOWN GATHERING SPACES, MUNICIPAL FACILITIES

| Issue | Improvement to consider | Partners |
|---|--|--|
| Lack of visibility of, and connections to, greenspaces behind buildings in Burgy Center (Angel Park, Dunphy School, River, Library back yard, James School) | Improve connection between Route 9 and Angel Park. Create a path from bus stop to Angel Park. The path would run between Old Town Hall and Grange. There is an opportunity to extend Angel Park into space between two buildings. Consider placing movable tables and chairs here and adding plants. Consider stringing overhead decorative lights between two buildings. Improve connection between North Street and garden behind Meekness Library. Install path (paved or stone dust) along fence along river. This path would improve visibility and knowledge of river and of Library garden. Consider adding a bench or two along the path facing the river. Consider adding additional bike racks on concrete pad along North Street or removing bike rack and replacing with sculpture or park benches. Remove hedges at Helen E. James School to improve visibility of building and green space. Improve small park in front of Helen E. James school with benches, picnic tables, or similar. Consider temporary improvements, as fate of school is unknown. | -Volunteers/ Selectmen/Mill River Greeenway? |

| Issue | Improvement to consider | Partners |
|--|--|-------------------------|
| Lack of accessible green spaces-especially • greenspace that is relatively flat, smooth-surfaced, accessible, and appropriate for walking • Space for active recreation • Town Green that is highly visible, and provides a "gathering place" | Adopt CPA to fund outdoor recreation and open space efforts Potential interest for Town Green for Community Gardens, recreation and greenway access | -Town Voters |
| Town Office Building does not fully support access by foot or bicycle, especially for older adults and people with disabilities • Sidewalk network within walking distance has some gaps • No bicycle facilities nearby • No designated sidewalk from High St to back door of building or to greenspace behind building | Prioritize construction of sidewalks to close key gaps. Provide safe crossings at reasonable intervals where sidewalks are available on only-one side of street Study possibilities for adding bicycle facilities within proximity to Haydenville Center Improve site designprovide a dedicated pedestrian path from High Street to back door and greenspace | -Selectmen/Town Highway |

| Issue | Improvement to consider | Partners |
|--|---|------------------------|
| Future uses of HEJ Building and | Develop a municipal facilities master plan (initial work | -Selectmen/ |
| lot are unknown | underway by PVPC; also site will be studied through USDA/ | Facilities Master Plan |
| | SGA technical assistance). | Committee |
| Long-term future of Grange and Old Town Hall | Adopt Community Preservation Act to fund historic preservation. | -Town Voters |
| These two historic structures | Seek other grants to fund historic preservation (Mass | -Selectmen/Historical |
| are key features of Williamsburg | Preservation Projects Fund) | Comm./Historic |
| Village Center. They define the | Continue to use and support the Grange | Society |
| character of the center. The | Plan for long-term re-use of Old Town Hall (and how that may | Volunteers |
| Grange is a key gathering place | relate to Grange building) | -Selectmen/ |
| for older adults | | Facilities Master Plan |
| The Old Town Hall contains | | Committee |
| the collections of the historical | | |
| society, is an unsuitable location | | |
| for the collection (unheated) and | | |
| is in poor repair. The Grange also | | |
| requires updates and renovations | | |
| as well as continued volunteer | | |
| efforts to take advantage of the | | |
| space and build community. | | |

DAILY NEEDS--ACCESS TO GOODS AND SERVICES IN TOWN

| Issue | Improvement to Consider | Partners |
|-------------------------------------|---|--------------------|
| A large number of town residents | Establish a community-based alternative transportation network. | Volunteers, Senior |
| live in locations that are entirely | Consider a distributed "sharing-economy" model similar to Lyft or | Center, Selectmen |
| car-dependent. | Uber where citizens can provide transportation to others using their | |
| If they cannot drive, residents | own vehicles. This model could be fee-based, membership based, or | |
| of Williamsburg are at risk of | a hybrid non-profit/Town effort. For example, ride-providers could be | |
| significant isolation and inability | compensated through a "time bank", through membership fees, or | |
| to carry out necessary daily | via property tax work off program. | |
| tasks like getting food or visiting | For an example of time bank see Valley Time Trade: https:// | |
| a doctor. This risk could affect | valleytimetrade.wordpress.com/ | |
| any resident of Williamsburgfor | For an example of membership-based aging support see Vineyard | |
| example, if a car breaks down, | Village at Home (http://www.vineyardvillage.org/indexff.html) | |
| or a person is temporarily or | | |
| permanently injured). The risk | | |
| is most acute for older adults, | | |
| especially those who live alone, | | |
| those who have a low income, | | |
| and/or those with mobility, sight, | | |
| or hearing impairments. | | |

| Issue | Improvement to Consider | Partners |
|--|---|--|
| Residents would like to have additional businesses in Town, including restaurants, dentist, eye care, gym, daycare, and laundromat. Meanwhile, some existing spaces for businesses are vacant or have high turnover. | Convene a roundtable of existing business owners to identify current challenges of maintaining and/or expanding a business in Williamsburg. Survey/Assess which services/amenities people feel are needed in Williamsburg. Follow up with market studies to determine which might be economically viable. Focus town efforts on economic development Consider which, if any, town-owned properties would be appropriate to redevelop for business use and/or increased amenities | -Volunteers/business owners/Selectmen -Selectmen/ Facilities Master Plan Committee/Planning Board/Voters |
| Lack of laborers available and willing to do odd jobs for older adults | Expand Veteran/Senior tax work-off program (all 10 slots are full). Connect older adults to people who do odd jobs. Explore development of a volunteer task force | -Selectmen/Senior Ctr. -Volunteers/Senior Ctr. -Volunteers/Senior Ctr. |
| Residents would like additional opportunities for cultural events in Town (events, arts, music, theater, dance). | Support use of town facilities for cultural events. Establish joint use agreements as needed Support efforts by others (not by the town) to create cultural spaces and organizations | -Selectmen/Healthy Hampshire -Volunteers/ Selectmen |

DAILY NEEDS-HEALTHY FOOD ACCESS

| Issue | Improvement to Consider | Partners |
|---|--|---|
| Need to go outside community to access some healthier options for groceries. This is particularly a problem for people with limited access to a car and/or limited comfort driving. | Increase utilization of Senior Center's transportation programs to bring older adults to grocery stores and other locations that sell healthy food. Advocate for age-friendly transportation and site design in adjacent communities where older adults would shop for healthy food (Northampton, Greenfield, etc.). | -Volunteers/Senior Center -Volunteers |
| Lack of publicly accessible adequate commercial kitchens in town. Issues: most commercial kitchens are not fully up-to-code (schools are exception); access to existing kitchens is limited; lack of long-term storage space in existing kitchens for repeated/ continuous use. Senior Center is currently limited to serving 30 meals a day because of the lack of a commercial kitchen. | Develop shared use agreements for use of existing school or business kitchens Include a publicly-accessible commercial kitchen when a significant municipal facility construction project occurs. Could possibly be rented out to generate revenue. Develop a community center (government or non-profit) with shared commercial kitchen | -Selectmen/School/ Businesses/Healthy HampSelectmen/ Facilities Master Plan Committee -Volunteers |

| Issue | Improvement to Consider | Partners |
|--|---|--|
| Some older adults cannot afford cost of healthy food | Support people who want to grow their own food by expanding community gardening: Expand use of existing community gardens (behind Town Offices, at James School, at Dunphy School) and developing additional community gardens as necessary. Focus on developing high raised beds for older adults and people with disabilities that make bending down to the ground level difficult. Focus on season extension including high tunnels and greenhouse space. Establish a protocol for use of town water at Helen E. James School. Increase number of plots available at Nash Hill-especially high raised beds Support education about how to grow one's own food (consider establishing a mentoring program that pairs older experienced gardeners with younger ones) | -Volunteers/Healthy Hampshire/Senior Center(?) |

| Issue | Improvement to Consider | Partners |
|---|--|--|
| | Support produce sharing (e.g. free farm stand at Cummington Creamery) Work with area farmers and local businesses to explore expanded distribution of local farm goods in Williamsburg. Possibilities to explore include: expanded distribution to existing stores, a mobile market, a shared farm stand, and/or a CSA pickup location in Williamsburg Support people in applying for SNAP. Work to eliminate stigma associated with accepting help. | |
| Access to food pantries can be a problem for people with limited access to a car and/or limited comfort driving | Coordinate transportation to food pantries for older adults Explore the feasibility of establishing a food pantry in Williamsburg | -Senior Center Volunteers/Senior Center(?) |

DAILY NEEDS-ACCESS TO HEALTH CARE

| Issue | Improvement to Consider | Partners |
|---|--|-------------|
| Lack of certain medical services, such as dentistry and eye care, in town | Consider establishing a membership-based organization to coordinate group purchase of health services and advocate for establishment of medical offices in Williamsburg (see | -Volunteers |
| Lack of home health services | Beacon Hill Village example) | |

DAILY NEEDS-SENIOR SERVICES

| Issue | Improvement to Consider | Partners |
|---|---|--|
| Senior Center needs additional space in order to maintain and expand program offerings. | Provide additional space for senior center. As part of a comprehensive evaluation of municipal facilities, consider: expanding the space available to the Senior Center in the existing Town Offices relocating the Senior Center to another town-owned property (e.g. Old Town Hall, Helen E. James school), or expanding it in the current Town Offices if other municipal services are relocated from that building) Developing a facility that satisfies both senior center needs and other town needs, i.e. a multi-use and multi-age community center exploring a partnership with YMCA or a senior housing developer, etc. to develop a new facility. Develop shared use agreements to fill needs | -Selectmen/ Facilities Master Plan Committee/Senior Center -Senior Center/ Healthy Hampshire/ Selectmen |
| Many seniors are more amenable to participating in "community" events rather than "senior" events, even if many participants are older. | Coordinate senior center services with the Grange, school, and other community organizations that serve all ages. Also see shared-use space recommendations above. | -Volunteers/Senior Center |

| Issue | Improvement to Consider | Partners |
|---|--|---|
| Seniors are not fully informed about the services available to them | Consider ways that the senior center could coordinate and disseminate information about services that are accessible to seniors and others who need help - people would like to see a clearinghouse for this. | -Senior Center/ Town Website/Town Administrator (?) |
| Older Adults needs services (and support and advocacy) that isn't traditionally provided by Senior Center | Consider expanding the mission of the Senior Center to address fundamental housing, transportation, and social support functions. Recast Senior Center as the coordinator for all healthy-aging related efforts in town (which means addressing needs of 40% of Town in coming years). | Senior Center/ Selectmen |

Healthy Aging Priority Recommendations, Williamsburg

GOALS FOR HEALTHY AGING IN WILLIAMSBURG

During the project, the following key goals related to healthy aging in Williamsburg emerged:

- increase the diversity of housing opportunities for older adults in Williamsburg
- provide transportation options that enable older adults to carry out day-to-day activities in and around Williamsburg in a safe, convenient and cost effective manner
- provide older adults with additional opportunities for physical activity in Williamsburg, including active transportation, walking for recreation, organized classes, and other outdoor recreation
- rethink the delivery of Senior Services in Williamsburg. The coming wave of older adults does not think of themselves as "seniors." They want inter-generational "community"

services, as opposed to senior services. Furthermore, as older adults reach a near majority of the town, and the older-older adult population (over 80+) increases dramatically, the scope of Senior Services is likely going to need to expand. In particular, the Town will likely need to provide more day-to-day support for older adults, including solving issues in dayto-day living related to housing, transportation, food access, social engagement, etc. Given constrained finances of Williamsburg, and the need to not further increase the tax burden on residents (especially low income older adults), Williamsburg should consider a distributed model of Senior Services that takes advantage of existing resources and facilities in the Town. For example, using school facilities in off-hours.

PRIORITY RECOMMENDATIONS

The following recommendations are based on the project team's understanding of:

- Strategies that citizens of Williamsburg expressed a need for, and an interest in working on
- Strategies that are likely to significant positive health impacts related to healthy aging
- Strategies that are likely to have co-benefits (economic benefits, environmental benefits,

- social benefits, mental health benefits, injury-prevention)
- Strategies that appear to be viable in Williamsburg—given its politics, culture, and economics
- Strategies that are timely—they relate to current efforts in Williamsburg or broader regional or state efforts.

They are organized by category and numbered below, but the numbering is not intended to indicate priority level. All strategies are equally important.

Senior Services / Meeting Daily Needs of Older Adults

- 1. Expand the mission of the Senior Center to:
 - a. be the main point of contact and primary advocate for older adults in Williamsburg and
 - b. help coordinate volunteer efforts by older adults to facilitate healthy aging in Williamsburg—including working on fundamental needs related to housing, active living, and transportation and daily needs issues. This supports #2 and #6 below. It also is necessary for any of the work below to advance.

- 2. Establish joint use agreements for exercise spaces, commercial kitchen, community events and Senior Center use.
 - a. Consider a "distributed" Senior Center model that is both intergenerational and taking advantage of every space in the Town.
 - b. Consider joint-use when planning and designing future municipal facilities.
 For example, if gym space or a commercial kitchen is included in the Public Safety Complex, ensure that these facilities are publicly accessible and design the facility with that in mind.
 Locate the joint-use spaces for public access and size them appropriately.
- 3. Create a membership-based organization to help older adults with daily needs. This organization would provide a single point of contact and reduced cost for various services including ride-sharing, help with odd jobs, visiting nursing, etc. Consider a public/ private partnership coordinated by Senior Center. Consider including all Hilltowns in this effort.

Regulation/Policy

- 1. Adopt Community Preservation Act (CPA)
- 2. Planning Board reviews all recommended housing related zoning changes, especially reduced dimensional and parking requirements in village centers, adoption of cluster zoning provisions, and increased flexibility for adaptive reuse of significant buildings.
- 3. Planning Board reviews all site design and parking related zoning recommendations.
- 4. Adopt a Complete Streets policy, create a prioritization plan that considers needs of older adults, and pursue funding
- 5. Adopt a policy that sets minimum standards for pedestrian and bicycle circulation in future municipal facility projects

Built Projects

- 1. Improve crosswalks in Williamsburg center
- 2. Improve connections to existing parks/public spaces in Williamsburg Center: path from bus shelter to Angel Park, path from North Street to the Library Garden, remove hedges and install benches at HEJ school
- 3. Establish walking loops with signage and maps. Use these walking loops to prioritize pedestrian improvements and municipal snow removal.

4. Create an agreement to allow community garden at Helen E. James School to use water. Create additional community gardens, as needed. Emphasize high raised beds where older adults can work without bending and season extension.

Next Steps

In order to advance healthy aging, residents of Williamsburg will need to continue to work together to take concrete actions—such as planning a walking loop—and to advocate for their needs. A core group of participants in the project has expressed a strong desire to continue the work.

We recommend that the Senior Center, supported by Healthy Hampshire, continue to work with these residents to build and sustain a long-term health aging effort.

An immediate next step would be for that group to review this report, particularly the table of possible recommendations and the priority recommendations. We then recommend that they make an action plan for moving forward with key recommendations, assigning specific tasks, and roles and setting a timeline for their goals. There are several recommendations that the Town and its boards can take on. These include:

- Adopt a complete streets policy and participate in the MassDOT complete streets funding program (if needed, request local technical assistance from PVPC)
- Bring CPA up to a vote (if needed, request local technical assistance from PVPC)
- Establish joint use agreements (work with Healthy Hampshire)
- Adopt a policy that sets minimum standards for pedestrian and bicycle circulation in future municipal facility projects (if needed, request local technical assistance from PVPC)
- Consider recommended zoning changes (if needed, request local technical assistance from PVPC, or apply for PVPC's District Local Technical Assistance in late 2016, or apply for PVPC's Sustainability Strategies technical assistance in late 2016)

Conclusion

Williamsburg has a history of Town government and individuals working together to achieve improvements in the Town. Williamsburg center greatly benefits from several small parks and roadside gardens built and maintained by individuals with Town support. The Commons Co-working Space is a marriage of the Town's need for an occupied building to reduce insurance costs with a citizen group's need for office space within Williamsburg. The result supports the growth of local office-based businesses, eases stress on working parents (the office space is adjacent to the elementary school), and very likely increases sales for retail and restaurant businesses in the Williamsburg center (co-workers are more likely to go out for lunch or shop at a market after work, than they would if they needed to commute out of town to a distant office space).

Given the town's already stretched resources, and its relatively high taxes it is likely that positive change for healthy aging will depend on similar coalition of volunteers, organizations, and Town government working together—a coalition in which town government provides a platform of support for individual actions rather than carrying out programs or making improvements itself. The Town's Senior Tax Work-off program is an example of the kind of program that could be expanded to leverage the available resources of volunteer (or low-cost) efforts by town citizens to meet the needs of others.

Williamsburg's residents describe their community as the kind place where neighbors support neighbors. We encourage Williamsburg to build on its spirit of neighborliness to build a peer-to-peer network that provide day-to-day support for older adults, for example providing ride-sharing, organizing drop-in visits for older adults with limited mobility, or volunteering to continue to improve the Town's community gardens and public spaces.

At the same time, we encourage all residents of Williamsburg to advocate for community design that supports health for the long-term. That means wrestling with fundamental questions about land use, transportation, taxes, and community identity. And once consensus has

been reached—encoding the town's decisions in plans, policies, regulations and programs that will shape the community for years to come.

During this project, we have seen that residents and the leadership of Williamsburg are intelligent, mature, and able to communicate respectfully. We are confident that they can work together to ensure that Williamsburg is a town where all people can age well.

Image Credits:

Cover: Dillon Sussman; inside cover: Healthy Hampshire; page 2: Massachusetts Office of Travel and Tourism via Flickr; page 7: Fairfax County Health Department via Flickr; page 8: PVPC; page 11: Healthy Hampshire; page 13: Marie Westburg; page 19: MAPC; page 23: see credit on map; page 25: Healthy Hampshire; page 26: Robert Wood Johnson Foundation; page 30: Met Life; page 31: PVPC; page 32-33: PVPC; page 39 (all): PVPC; Page 73: PVPC; back cover: PVPC



