MAKING CITIES BETTER FOR AGING

Lessons from U.K. Age-Friendly Cities

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How can city and regional planners and policymakers make cities and communities better for aging? Specifically, how can planners create better public realms, transportation, and housing to address the demographic imperative of an aging and urbanizing population?

Populations are aging in many parts of the globe, and life expectancy continues to grow. At the same time, the rate and spread of urbanization is increasing, resulting in more people aging in urban areas than at any other time in our history. Under what conditions are cities better places to age in? The World Health Organization created the Global Network of Age-Friendly Cities and Communities (GNAFCC) in 2010 as the first major global policy response to aging in cities. “Age-friendly” describes places where older adults, defined as anywhere from 50+ to 65+, can “age actively.” Active is defined as a physical environment that supports older people and allows them to be independent. Perhaps most importantly, it also refers to a place that enables adults to engage with social, economic, and civic life.

As an urban and regional policy fellow at The German Marshall Fund of the United States, I chose two cities in England to research their age-friendly work. The City of Manchester was the first U.K. city to join WHO’s Global Network of Age-Friendly Cities and Communities. Manchester is an early adopter because of an interested high-level political leadership. The Age-Friendly Manchester program has a staff team solely devoted to advancing the concerns of older people. Manchester has also produced some of the best recent research and creative thinking on the topic. London was also chosen because it has many of the same challenges as Manchester, but these are further complicated by its role as a global city with huge population gains and forecasted growth. London has advanced age-friendly work not through the WHO Network or U.K. Network, but rather through mayoral leadership on making London the world’s first dementia-friendly capital.

There are eight domains to WHO’s age-friendly approach. This policy paper examines the age-friendly domains that involve the built environment: public realm, transportation, and housing.

From my research into the successes and challenges in Manchester and London, I drew a number of policy lessons on:

• Framing the debate to build support for age-friendly policies;
• Promoting positive messaging and branding of aging;
• Using the other WHO domains to inform the built environment domains in order to ensure a holistic approach to aging;
Using data, mapping, and partnerships to move policy forward; and

• Ensuring staff-level support in both the public and non-profit sectors that will help move projects forward.

I will also argue for a number of specific recommendations for U.S. urban and regional planners to move age-friendly aspirations forward to implementation. These policy recommendations include:

• Completing a region-wide assessment of age-friendliness;
• Including age-friendly recommendations in ongoing planning efforts;
• Mapping the WHO domains and adoption of age-friendly tools; and
• Partnering with AARP, state departments of transportation, and older adults as participatory researchers.

This paper is divided into five sections. In the first, I outline the growing imperative for urban planners and policymakers to create age-friendly cities. I then describe the emergence of the age-friendly movement in the United States. I next focus on the WHO domains that deal with the built environment. In the fourth section, I analyze the policy experiences of Manchester and London. I end by summarizing the lessons learned from my research and making policy recommendations for cities, and more specifically, for the Delaware Valley Regional Planning Commission.

New pedestrian-only King’s Boulevard linking King’s Cross and St. Pancras rail stations with the Regent’s Canal, London.
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opulations are aging in many parts of the
globe, and life expectancy continues to grow.
Since 1970, worldwide life expectancy has
risen by ten years for men and women. From 2010
to 2013, average worldwide life expectancy at birth
was 71 years (68.5 years for men and 73.5 years for
women). In 2013, Japan had the highest average
life expectancy of 84, while in the United Kingdom
(rank 19th) the average life expectancy was 81,
and in the United States (ranked 34th) it was 79 (76
for men, 81 for women).

In addition to gains in life expectancy, the sheer
number of people aging is significant. In the U.K.,
the number of people aged 65+ is projected to rise
by 48.7 percent in the next 17 years, to more than
16 million.\textsuperscript{1} The proportion of people aged 65+ will
rise from 17.7 to 23.5 percent in 2034.\textsuperscript{2} The number
of people over 85 in the U.K. is predicted to double
in the next 20 years and nearly triple in the next
30.\textsuperscript{3} In the United States, the baby boomers, the
largest generation in U.S. history, began to turn 65
in 2011, with the last boomers turning 65 in 2029.
Today, 40 million people in the United States are
ages 65 and older, but this number is projected to
more than double to 89 million by 2050. Although
the “oldest old” — those ages 85 and older —
represent only 15 percent of those ages 65 and older
today, their numbers are projected to rise rapidly
over the next 40 years. By 2050, the oldest old will
number 19 million, over one-fifth of those ages 65
and older.\textsuperscript{4}

The fastest growing age cohort in Pennsylvania
is the 65 and older group, which is expected to
increase by 42 percent between 2000 and 2025. The
85 and older group is expected to increase by 37
percent during that timeframe. The share of people
age 65 and older will increase from 15.6 percent of
Pennsylvania’s population in 2000 to an estimated
21 percent by 2025. Pennsylvania also has the third-
highest ratio of older adults to working age adults
in the United States, at 25 percent (2008). This ratio
is projected to increase to 38 percent by 2025.\textsuperscript{5}

At the same time, the rate and spread of
urbanization is increasing, resulting in more people
aging in urban areas. Over half of the world’s older
population lived in urban areas in 2005 (United
Nations, 2012). The percentage of older people in
urban areas was higher for developed nations than
for developing nations (United Nations, 2012).

The Philadelphia, Pennsylvania, region (the
nine-county region of Philadelphia, Delaware,
Chester, Kent, Bucks, Mercer, Burlington,
and Gloucester counties) is a good example.
Population is forecast to increase by 11 percent
between 2010 and 2040, and those over 65 will
increase by 58 percent.\textsuperscript{6} Of the ten largest cities
in the United States, the City of Philadelphia has
the highest proportion of those over age 60.\textsuperscript{7} This
number is expected to double by 2035. In many
ways, Pennsylvania and the Philadelphia region
are a preview to what the rest of the nation will
eventually face: a demographic imperative to plan
better environments for aging populations.

City and regional planners need to plan for this
aging population, but they often are not aware of
tangible ways to improve places for aging. The
Delaware Valley Regional Planning Commission

\textsuperscript{1} Age U.K. “Later Life in the United Kingdom Factsheet.”
August 2013.
\textsuperscript{2} Ibid
\textsuperscript{3} Ibid
\textsuperscript{4} Jacobsen, Linda A. et al. “America’s Aging Population.” Popula-
\textsuperscript{5} Pennsylvania Department of Human Services. “Pennsylvania
Senior Care and Services Study Commission: Final Report.”
November 2010.
\textsuperscript{6} Morris, Karin. “M. Powell Lawton Conference on Urban Aging
Presentation.” November 1, 2013.
\textsuperscript{7} Philadelphia Corporation for Aging. “Laying the Foundation
(DVRPC), the federally designated Metropolitan Planning Organization (MPO) for the nine-county greater Philadelphia region, has begun a series of studies to address safe senior mobility, human services transportation for seniors, and the rising need for a more suitable range of housing choices for seniors. However, it is clear that while the urgency of this demographic imperative is understood, solutions are less so.
Various federal agencies have been involved in promoting age-friendly efforts in the United States, perhaps most notably the U.S. Environmental Protection Agency (EPA), along with numerous national non-profits and membership organizations such as the National Association of Area Agencies on Aging (n4a). The EPA’s Aging Initiative spearheaded a multi-agency effort called Building Healthy Communities for Active Aging in 2007. The program sought to raise awareness about healthy synergies that can be achieved by communities combining Smart Growth and Active Aging concepts.

AARP is the institutional affiliate of WHO’s GNAFCC, and began their own Network of Age-Friendly Communities in 2012, targeting some of the environmental, economic, and social factors that influence the well-being of older adults living in the United States. AARP works through their state offices to identify communities for membership in the WHO Global Network. Participation in the AARP program enrolls communities in the WHO program. AARP’s process focuses on action plan development in the first two years, followed by three years of implementing the plan and monitoring its progress. At the end of five years, AARP will renew a community’s membership following a positive assessment of the progress of the plan and submission of a revised action plan. See the Appendix for more on AARP’s Livable Communities program.

The American Planning Association published the Aging in Community Policy Guide in 2014, urging the planning community to develop comprehensive approaches and mobilize resources to enhance the quality of life for the United States’ aging population. It urges a multigenerational planning approach. It calls for policies that ensure a range of affordable and accessible housing options and access to quality transportation options for older adults. It also calls for land use and zoning tools to create welcoming communities for older adults, including zoning that allows mixed use development (for co-location of facilities), transit-oriented development, accessible accessory dwelling units, cottage housing, and other creative housing designs. It also recognizes the importance of independent and assisted living communities and calls on communities to prohibit too many exactions on such development. Finally, it also recommends that zoning should allow child and elder care in residential settings, allow older adults and caregivers to reside together, and to change the definition of family in zoning codes to allow such arrangements.

Age-Friendly Philadelphia

Prior to Philadelphia’s age-friendly campaign, numerous agencies were involved with aging in the city, most notably Philadelphia’s area agency on aging, the Philadelphia Corporation for Aging (PCA), and the Mayor’s Commission on Aging (MCOA). PCA created a planning and policy model based on EPA’s Building Healthy Communities for Active Aging concept called SAFE (Supportive Age-Friendly Environment). It found statistically significant relationships between the principles of social capital, flexible housing, mobility, and healthy eating, with positive health outcomes for seniors.

In 2009, PCA began Age-Friendly Philadelphia, which has focused on seven different policy areas, including parks, transit, flexible housing, walkability, social capital, fresh food access, and next-generation education. MCOA published a strategic plan in 2011 that listed 12 priorities and 5 goals for creating an Age-Friendly Philadelphia. This led the commission to formally undertake the WHO Assessment in 2013, evaluating the city through the eight domains. The city scored highly on amount of green space, diversity of...
In response to global aging trends, WHO created the Global Network of Age-Friendly Cities and Communities in 2010. This was the first major global policy response to aging in cities.

The Delaware Valley Regional Planning Commission (DVRPC) has worked on aging issues for the last 14 years. These efforts include forecasting population growth and aging cohorts; mapping the locations of seniors as part of their Indicators of Potential Disadvantage analysis; authoring the study *The Aging of the Baby Boomers: Housing Seniors in the Delaware Valley*; recommending *Aging in Place* (MIT#12) actions for municipalities; emphasizing safe senior mobility in the *Regional Safety Action Plan*; and facilitating the *Coordinated Human Services Transportation Plan* that guides transportation services for older persons.

There is continued and growing interest in age-friendly communities in Philadelphia and the region, as evidenced by the recent Age-Friendly Philadelphia Summit in November 2015, sponsored by AARP, the Mayor's Commission on Aging, Philadelphia City Council, DVRPC, Philadelphia Corporation for Aging, and the Ralston Center, a local service provider for older adults. At the regional level, several suburban communities have begun age-friendly campaigns.

Age-Friendly Cities and Communities Movement

In response to global aging trends, WHO created the Global Network of Age-Friendly Cities and Communities (GNAFCC) in 2010. This was the first major global policy response to aging in cities, building upon the earlier United Nations Year of Older People in 1999 and subsequent work on aging by the European Union and WHO. While other frameworks have since emerged, the WHO Model is comprehensive and sets the stage for the formation of an international network of age-friendly cities.

“Age-friendly” describes places where older adults, defined as anywhere from 50+ to 65+, can “age actively.” Active is defined as a physical environment that supports older people, and this can often make the difference between independence and dependence. Perhaps most importantly, it also refers to a place that enables adults to engage with social, economic, and civic life.

GNAFCC’s mission is to connect cities with a common vision to make their community a great place to grow old in. The network provides members with information and mutual support, while communities themselves focus on action at the local level. The present network includes 258 cities and communities in 28 countries, and continues to grow.

Joining the network involves a commitment from the mayor and administration to a cycle of continual improvement. This cycle includes four steps:

1. Establishing mechanisms to involve older people.
2. Developing a baseline assessment of age-friendliness across eight domains.

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3. Developing a three-year city-wide action plan based on assessment findings (linking the plan across municipal departments).

4. Identifying indicators to monitor progress against the plan.

There are eight domains to WHO's age-friendly approach. As part of this research, I focused on the three that deal with the built environment: public realm, transportation, and housing.² These are the areas where city planners can have the most visible impact.

² The other domains are social participation, respect and social inclusion, civic participation and employment, communication and information, and community support and health services. See full list and explanations in the Appendix.
Public Realm

The public realm domain examines whether the outdoor environment, namely public spaces such as sidewalks, streets, parks, and plazas, is enabling and inviting to older people. Research has shown that half of those over age 65 face problems getting outdoors, and many seniors in nursing homes or assisted living facilities get outdoors even less than seniors living in their own homes. These older adults are missing the health benefits of going outdoors, including physical activity, insomnia reduction, and social interaction. This can be referred to as a "narrowing down of spatial experience.”

Key questions include:

- Are the sidewalks flat and uncluttered, the curbs not too high, and the streetscape well maintained?
- Is there accessible street furniture and public toilets, and clear and legible signage?
- Are there changes to the outdoor environment or buildings that are unfamiliar or harder for older people to navigate, particularly those with dementia?

A lack of any of these qualities can heighten the risk of falls and diminish an older person’s ability to get around confidently. This is referred to as "amplification of impact," where many small environmental deficits can have a greater impact on older adults than younger people. Such features are items that are often overlooked in city planning, yet take on added significance as we age, and are experienced as absences or deficits with huge impacts on independence. Cities should go beyond viewing these as extras or amenities; rather they are essential features of a city. The global movement for better public spaces supports this idea, but more emphasis is needed to make pocket parks, parklets (curbside parking spaces converted into public amenities), tactical urbanism (low-cost, temporary changes to the built environment meant to improve the quality of the local public realm), and other such features age-friendly with better bench design (arm rests and higher seats for ease of getting up), public toilets, and creative uses of spaces. Such improvement in the public realm could go a long way in making a city more age-friendly.

Several European cities are already experimenting with ways they can improve these outdoor spaces. For instance, an interesting project in Griesheim, Germany, envisions a fully accessible city for

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11 Ibid
Making Cities Better for Aging

seniors by modifying existing street furniture to provide more outdoor seating. In the London Borough of Newham, the resistant sitting project has identified and mapped improvised public seating, such as low walls and bollards, in areas where formal seating is lacking. In Eindhoven, the Netherlands, the design group Denovo is investigating adapting street furniture like fences, lampposts, and benches into public gym equipment by adding minimal adaptations. Much like pop-up interventions, age-friendly features could be temporarily tested and either adopted or reconceived.

In addition, while the physical design of a space is quite important, the kind of activities that are encouraged in outdoor spaces and buildings also has a big impact. Are there activities that seniors wish to do in these spaces? In some places, there is increasing privatization of public space. These “third spaces” or “meanwhile spaces” like shopping malls and shops can be important “public” resources for all, and programming of these spaces can be creative.

Transportation

The transportation domain examines accessible modes of transportation that seniors have available to them and how the built environment supports or detracts from these choices. Research shows that older adults spend more time in their immediate neighborhoods, and some of this is due to their declining mobility in older age. Transportation plays a large role in maintaining one’s sense of self and connection with the world. Thus, examining older adults’ transportation needs in their immediate neighborhoods takes on greater importance. Walkability has been posited as a buffer against depression in older age, and physical

Variable message signs in London bus shelters provide real time passenger information on bus arrivals and departures, and thus make the trip more predictable.

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There is also a movement to adapt buildings, such as supermarkets, to be more age-friendly. The age-friendly supermarket, as exemplified by the Kaiser chain in Germany, offers shopping carts with built-in seating, higher baskets, and lockable wheels; wider aisles and larger checkout counters; non-slip floors; magnifying glasses at the end of aisles or on the shopping cart; call buttons on shelves for emergencies; lower product displays or raised platforms to reach higher-up products; larger point sizes on signage text; a cafe and meeting area; and more single-serve packages.

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activity helps with common ailments for seniors such as osteoporosis and vascular dementia.

For planners, recommendations about making the transportation choice as barrier-free as possible include features that we are already familiar with:

- Raised street crossings
- Longer pedestrian phases on traffic lights
- Lower curb heights
- Lower floor buses
- Shorter blocks
- Reduced or free transit fares
- Manageable stairs
- Better bus stop positioning for safety and visibility

Seniors also need unique options that go beyond traditional transportation thinking. These include the inclusion of personal mobility scooters in transportation planning, involving seniors in bicycling, and acknowledging the “non-essential” trips of older adults that do not fit the traditional commuting mode-share calculations in transportation modeling. Transit trips can become more than just getting from point A to point B, as transit becomes a “place” in itself where social connections can be made and maintained.14

**Housing**

The housing domain examines the quality and type of housing available to older adults, and whether it best serves their needs. One’s home plays a vital role in one’s identity, continuity, and status, and poor housing is correlated with poor health.

Because most elders want to remain in their own homes, home adaptations and repair are critical to remaining in independent living. With people living longer, the likelihood of having a disability in one’s later life rises, and the likelihood of having an unsuitable home also rises.

Though “downsizing” is one option some older adults choose, the more important factor for seniors is to relocate into a home that is more easily maintained, better designed, and adapted to their needs.15 Thus, there are opportunities to design housing in a way that is conducive to aging residents, including more space for design adaptations, in-home assistive technology, relatives


15 Ibid
and in-home caregiver, and a lifetime of possessions (even if significantly reduced).

Today’s elders also have higher expectations of retirement housing and often view senior housing in stereotypical ways.16 These negative opinions, however, could be changed through incorporating flexible and attractive adaptations to housing from the beginning, with a minimal cost to the developer. One such innovation is the U.K.’s Lifetime Homes Standard, which are ordinary homes that incorporate design features that support the changing needs of individuals and families at different stages of life.17

With continued advancement in smart technologies, in-home monitoring devices are effective tools in assisting aging residents with everyday tasks, such as prompting eating and medication schedules, while also providing additional security. Home sensors and more common life alert systems are just a few examples of advancing improvements to independent living for seniors.

16 Ibid

17 The U.K. Lifetime Homes Standard incorporates 16 design criteria that can be universally applied to new homes at minimal cost. Such criteria include an entrance-level toilet, walk-in shower, space for an elevator if needed, bathroom walls that can handle a hoist, and wider internal hallways and doorways. In the United States, some municipalities are requiring that new homes be “visitabile,” meeting three standards (zero-step entrance or accessible route in, wider interior doors, and at least a half bath on entrance floor). These are minimum standards, with many more design features included in Universal Design standards.
The U.K.’s national agencies have a long history of working on policy to encourage age-friendly communities. In 2009, the national Homes and Communities Agency released the Housing Our Ageing Population: Panel for Innovation (HAPPI) report that outlines innovative housing examples from across Europe and provides recommendations for improving the quality of life of aging populations and increasing awareness. Following this report, The House of Lords Select Committee on Public Service and Demographic Change was appointed to investigate how woefully unprepared Britain is for their aging population.18

At about the same time, the Manchester City Council partnered with Keele University and the Beth Johnson Foundation to establish the U.K. Urban Ageing Consortium in July 2012 to advance practice, research, and debate about aging in cities. In September 2012, the consortium launched the U.K. Network of Age-Friendly Cities; participating cities include Belfast, Brighton & Hove, Cardiff, Edinburgh, Glasgow, Leeds, London Borough of Camden, Manchester, Newcastle, Nottingham, Sheffield, and Stoke-on-Trent. Since then, the consortium has released two influential reports — a research and evaluation framework19 and a playful age-friendly handbook.20

Professional associations have also shown an interest in aging and the built environment in the United Kingdom. For example, the Royal Institute of British Architects (RIBA) has been a strong advocate of the need for cities to accommodate their aging populations and have called for a

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19 A Research and Evaluation Framework for Age-Friendly Cities (2014), by the U.K. Urban Ageing Consortium, is an invaluable work detailing the key facts, research, and strategies for the WHO domains. It is meant to move age-friendly from concept to reality.

20 An Alternative Age-Friendly Handbook: For the Socially Engaged Urban Practitioner (2014), by the U.K. Urban Ageing Consortium and Micra, is an age-inclusive think piece that examines modes, methods, small-scale actions, and interventions. It is a highly creative handbook meant to reframe ideas and prompt debate among creative professions like architects, designers, and artists. It makes the case that cities are conceived and structured for a younger working age demographic. As an example, it playfully reimagines some common street signs and makes them more age-friendly. One such revision takes the “old people crossing” traffic sign in the U.K. (two people with stooped backs), and redesigns it to show two straight-backed people carrying walking poles on a summit.
number of age-friendly adaptations for U.K. cities. RIBA believes the age-friendly movement will continue to grow, and that more homebuilders are realizing that aging in place is important to many customers. Senior housing in Britain is dominated by a few large development companies that deliver housing and care for those over 70. What is lacking is a different type of product for younger retirees, as well as new ways to finance care along with housing.

Similarly, the Royal Town Planning Institute (RTPI) says a change in planning policies is sorely needed, particularly around housing. Demand for better types of senior housing requires innovation, but progress has been slow. Policy is needed to encourage the building of new housing for older adults within local plans. Most local plans make generalized statements of support for senior housing but fail to allocate sites or prepare any sort of criteria to ensure local plans include senior housing.

**Case Study: Manchester, England**

The City of Manchester and its institutional partners have recently produced some of the best thinking about the movement, and are leading research and practice forward. The following section describes why Manchester is interested in becoming age-friendly, how they have implemented changes in their built environment through specific policy tools, and some of the initial successes and challenges they have faced.

**Why Are They Interested in Being Age-Friendly?**

Manchester was the first U.K. city to join WHO's Global Network of Age-Friendly Cities and Communities. In greater Manchester, the fastest-growing households are those of single adults and over-65s. While greater Manchester’s population is expected to grow by 15 percent between 2012 and 2037, the population of those aged 65+ is predicted to increase by 45 percent.

These population trends have prompted several local political leaders to invest in early age-friendly initiatives, particularly to address aging populations in disadvantaged parts of the city. According to Paul McGarry, senior strategy manager of the Manchester City Council Valuing Older People Team, the City of Manchester has a lower, but “older,” percentage of elders in comparison to the rest of England. Research suggests that a large percentage of the city’s elders are black and minority ethnic and/or are excluded, and are generally of lower economic status and suffer from illnesses at earlier stages of old age than their counterparts in other cities. City leaders saw the contrast between these portions of the elderly population and a growing younger and working age population and chose to take action.

**How Is Age-Friendly Incorporated into Policy?**

The Age-Friendly Manchester program is located in the city’s Public Health Department as part of the Valuing Older People (VOP) team of the city council. VOP began in 2003 as a collaborative between the city, the National Health Service (NHS), and voluntary organizations to improve the quality of life of residents aged 50+. VOP consists of a larger forum of older people that meets twice a year and a board of seniors (elected from the VOP Forum, nominated by city organizations, or appointed) that meets every six weeks and guides the work of the VOP staff team.

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24 Interview. Paul McGarry, Valuing Older People Team, Manchester City Council, April 21, 2015.

25 Ibid
Manchester is committed to having a staff team solely devoted to advancing the concerns of older people. This work has been focused on creating better neighborhoods for the elderly, increasing employment opportunities for seniors, increasing awareness and participation in cultural and learning activities, and improving the health and care of aging populations.

Leaders in Manchester want to make their city a destination of choice for older people, as the audacious quote on the inside cover of their plan, *Manchester: A Great Place to Grow Older 2010-2020*, states, “When I retire I’d like to move to Manchester.” While many U.K. seniors want to move out of cities to smaller towns, through its age-friendly campaign Manchester is attempting to retain and even attract older adults.

Given the pace of change in cities, an interesting idea is to involve seniors deliberatively in urban change, through creating a senior travel club that visits sites of urban development within one’s own city, or through co-designing spaces with seniors. As a method of challenging the common misconception that aging populations have inactive relationships with urban spaces, providing “borrowed” space for senior’s events and activities can help break the misconception that elderly people cannot be a part of the urban fabric.

A prime example of this is the Band on the Wall, a non-profit venue run by Inner City Music Charity in Manchester, which hosts a senior’s night for ages 50+ every few months, challenging the notion that older people cannot be a part of the vibrant nighttime economy.

Another example of local-level action is the Take-a-Seat initiative in Old Moat, an electoral district of Manchester Withington. This initiative targeted local retail businesses to provide seating for seniors to “borrow” and rest without requiring a sales purchase. The ultimate aim was to reinforce a strong social infrastructure so to build strong relationships between local stores and their elderly customers. This creates a welcoming environment within the Old Moat community and enables seniors to feel included. Another local initiative targeting accessible seating for elderly people can be found up the road from Old Moat in Alexandra Park, where the benches have been redesigned to have higher seats and armrests to accommodate older adults.

**Public Realm and Neighborhoods**

With the growing concerns regarding the increase of aging populations and the impacts urban areas face, there is a particular need for creating “age-friendly neighborhoods,” also referred to as “lifetime neighborhoods.” Arguably, age-friendly neighborhoods are places where the “...services, infrastructure, housing, and public spaces are designed to meet everyone’s needs, regardless of how old they are.” Manchester is actively pursuing policies to promote such neighborhoods, including auditing neighborhoods on their age-friendliness, encouraging more intergenerational activities in neighborhoods and investigating how libraries and schools can host such activities, working with businesses to increase access to services and shops, improving fresh food options at convenience stores and creating mobile greengrocers.

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26 Ibid
28 The five goals of the plan are to achieve the following by 2020: create better neighborhoods for older people, increase the income and employment of older people, increase older people's participation in cultural and learning activities, improve the health of older people, and improve care and support for older people.
30 City of Manchester, 2009
developing campaigns to shop local. The city has even committed itself to adopt an age-friendly Local Development Plan and policies to assess applications for planning permission.

**Transportation**
Manchester’s transit is free for those over 60, and the city has made improvements in increasing the number of low-floor buses and bus stops with level access, as well as more door-to-door transit and improvements in road safety. Interesting recommendations moving forward to 2020 include promoting public transit for seniors to access the countryside (including listing locations of places to sit and public toilets along the way).

**Housing**
Manchester has made improvements in housing by expanding housing support services, home improvement services, and affordable housing options. The City Council’s *Living Longer, Living

Better: Housing for an Age-Friendly Manchester, Strategy Statement 2014-20 envisions how Manchester’s housing sector can contribute to age-friendliness, and how care and health services will be provided for seniors. The policy focuses on providing the right quality and choice of housing for current and future demand to ensure that seniors are able to remain in the city.

Manchester continues to follow up on its goals for being an age-friendly city, most recently with *The Age-Friendly Manchester Development Plan 2014-2016*, which presents how the city will develop its expertise, infrastructure, and capacity to create an age-friendly city. What is particularly compelling is to see a plan that is ably summarized on one page (with a fuller plan available), with a two-year — and thus highly accountable — time frame, and specific goals for each theme.

31 Manchester has organized its housing policy around the themes of Different, Better, Yours. “Different” refers to the need for more choices in housing, such as seen in Europe and referenced in the Housing an Ageing Population Panel for Innovation (HAPPI) report, including multigenerational home shares, cohousing, continuing care villages or campuses, co-location of housing and care provision, and naturally occurring retirement communities. “Better” refers to better planning, better design, and better quality housing, referring to many of the HAPPI recommendations on design adaptations and future proofing one’s home. “Yours” refers to the importance of having information about housing choices and having coordinated services offered with housing to support one’s choice.

Victoria Square, built in 1894 as Manchester’s first municipally built housing, today offers 163 attractive one- and two-bedroom apartments for older adults, managed by Northward Housing, in the regenerating Ancoats neighborhood.
Why Have They Been Successful?

Manchester's policy successes in becoming an age-friendly city result from: 1) interest on the part of high-level political leadership; 2) a focus on communications and information regarding challenging stereotypes; 3) expanding participation in cultural and community life; 4) working at the neighborhood level; and 5) grounding work in research and partnerships.

First, Manchester has benefitted from high-level political leadership and involvement in aging. What is even more impressive is the stability and enduring interest in aging for the last 15-20 years. The Manchester work and network that has evolved is based on a conceptual yet highly practical framework, not an emotional one, and that has helped the movement.

Second, from 2005 to 2010, Manchester ran a Positive Images of Aging campaign, to challenge negative stereotypes of aging by the media and the public, and to challenge agencies to revisit how they interact with older people. Ad campaigns, billboards, newsletters, a festival, and calendars were produced with such yearly themes as “Challenging Older People,” “Growing Older with Attitude,” “Older and Bolder,” “City for All Ages,” “Voices of Experience,” and “Older People and Technology.” These communication efforts complement the formal planning efforts.

Third, Manchester has also been successful in working with the cultural sector to offer opportunities for older people to take part in cultural production and planning through the Valuing Older People Cultural Offer. Beginning in 2007, VOP has worked with local cultural organizations to connect older people to the arts. In 2011, they created Cultural Champions, training more than 100 older volunteers to become ambassadors for the arts through their social networks and home communities.

Fourth, Manchester has focused on the neighborhood level by setting up networks of groups, providing small grants, and giving voice to seniors in local decision-making. One example of where these efforts have worked is in a neighborhood called Old Moat, where the city and researchers worked with local seniors on a plan called Old Moat: Age-Friendly Neighbourhood Report. The team conducted a community audit and mapped the age-friendly domains, which were then tied to specific place-based recommendations. After the exercise, the team added age-friendly signs at age-friendly businesses, made simple public realm improvement such as new benches,
and created an intergenerational garden.

The success of the collaboration in Old Moat has motivated the city to select so-called age-friendly demonstrator sites to encourage neighborhood projects for improving services for and with older people. This will enable the city to push age-friendly practices city-wide through local projects based on very local information from older adults. In Old Moat, for example, the city assumed older adults frequented buses to the city center for shopping and cultural activities. Interviews with seniors, however, revealed that most seniors took buses to other neighborhood centers, not the city center, because they see their friends on these routes. A local participatory approach is needed to reveal these often hidden patterns and inform policymakers and planners regarding what may or may not be perceived as age-friendly.

Fifth, the City of Manchester has worked closely with the University of Manchester and its Manchester Institute for Collaborative Research in Aging (MICRA) to advance research and broaden their scope across multiple disciplines including sociology, health, biology, gerontology, art, architecture, engineering, public policy, and more. The city has also worked with the School of Art at Manchester Metropolitan University to involve their students in developing design approaches for age-friendly features in specific Manchester communities.

By integrating aging into many different disciplines, the aging framework has received wider exposure.

Challenges with Implementing Age-Friendly Policies and Practices
The city has faced three types of challenges when implementing age-friendly policies, all of which are likely to be challenges that any city would face. The first is ageism. Seniors are often left out of discussions about the future of the city, particularly

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35 Interview. Dr. Stefan White, Manchester School of Architecture, April 23, 2015.
36 Ibid
37 University of Manchester researchers are developing a Manchester survey to assess age-friendly activity, experiences, and aspirations, particularly at the neighborhood level, which is so important to one’s wellbeing (Interview. Dr. Tine Buffel, University of Manchester, April 22, 2015. Interview. Dr. Chris Phillipson, University of Manchester, April 22, 2015.). This will build off earlier participatory research with older adults interviewing hard-to-reach seniors in the Manchester neighborhoods of Whalley Range, Chorlton, and Chorlton Park (Interview. Dr. Tine Buffel, University of Manchester, April 22, 2015.).
when concerning regeneration. For many cities, the urban image is rooted in youth culture. Manchester, for example, is known for its "Madchester" sound, and active nightlife and nightclub scene. Private development companies often drive regeneration and gentrification, and do not necessarily engage seniors as their target market (Phillipson interview, 2015).

Second, economic austerity presents financial obstacles when trying to procure funds for age-friendly initiatives, as the central government has bestowed significant cuts to Manchester’s public services. This has led to program cuts, particularly ones considered preventative. While this is a challenge, progress has been made in channeling resources to neighborhoods to build local support networks and targeted services. Going forward, each network or neighborhood will produce their own age-friendly action plan that will promote services, share information, and deliver more local projects.

Third, the term “age-friendly,” which Manchester has grappled with and done some of the best scholarly research around, can be restrictive or alienating to some. It could be viewed as unrealistic to focus on seniors when there are cuts to public spending and overall austerity measures. The City of Manchester has made a compelling case that age-friendly initiatives are beneficial to and include all ages, not just seniors. Manchester believes that investing in age-friendly housing and neighborhoods is a strategic approach in building “individual and community resilience” in the face of shifting demographics and reduced public spending.

**Case Study: London, England**

London is a growing global city where interest in age-friendly policies has waxed and waned, making it an intriguing case study. London also aspires to be the world’s first dementia-friendly capital. The following section describes why London is interested in becoming age-friendly, how they have implemented changes in their built environment through specific policy tools, and some of the initial successes and challenges they have faced.

**Why Are They Interested in Being Age-Friendly?**

Current population statistics report a record-high 2015 population in London of 8.63 million, and the city also faces the challenges that accompany an aging population. Recent data suggests that London’s 65 and over population is expected to
increase by 46 percent (almost 600,000), to reach 1.85 million by 2029.  

With only one London borough, Camden, signed on to the U.K. Network of Age-Friendly Cities, London's age-friendly movement has experienced its ups and downs.  

Current shifts in interest and efforts have been greatly influenced by Boris Johnson, then mayor of London, and the Greater London Authority (GLA), the administrative body and strategic authority for Greater London, through their growing commitment to become the world's first dementia-friendly capital.

GLA is responsible for The London Plan (2011), which is the spatial development strategy and integrated economic, environmental, transportation, and social framework for the development of London over the following 20 years, out to 2031. Strategic planning is shared between the mayor who heads the GLA, the Corporation of the City of London, and the 32 London Boroughs.

The London Plan's overall objective is to build an economically dynamic, business-forward world-class city while also making the city among the best in which to live. Making these complementary and not competing strategies is a challenge, especially for the city's elderly populations. The plan has an explicit goal to “Make London more age-friendly by working with London Older People’s Strategy Group.”

Formed in 2000, the London Older People’s Strategies Group (LOPSG) holds an annual assembly comprised of more than 400 organizations that deal with older people’s policy issues, including Positive Aging in London (PAIL). While LOPSG does not directly compose age-friendly policy, much of the city improvements stem from active lobbying done by the group to ensure the mayor’s commitments to the movement.

London is an inherently good place to age because it has evolved as a series of high streets and villages knit together by extensive transit networks to
form the modern city. The 32 boroughs and City of London have therefore formed a resilient structure with good connections to services and facilities. However, this physical environment can be improved to be truly age-friendly. For instance, there is an acute lack of housing supply. To tackle the housing shortage, the city has released publicly owned former brownfield land, which was followed by the mayor creating nine new housing zones in February 2015 to fast-track the building of 28,000 new dwellings. This ambitious planning and implementation reflects the housing supply crisis that London is facing, and while The London Plan sets specific targets for senior housing for London boroughs to meet, it is unclear how many of these units will be for seniors or reflect the Lifetime Homes Standard.

Beyond the borough level, individual neighborhoods in London have started their own age-friendly efforts, such as Kilburn Older Voices Exchange (KOVE), a registered charity that seeks to make Kilburn, in the Borough of Camden, more age-friendly (Tait interview, 2015). Among numerous projects, a recent effort will produce a guide titled Bench to Bench: Guide to Healthy Walks for Older People in Kilburn and West Hampstead. The guide will feature ten local walks with maps showing community seating (with some new benches thanks to KOVE), refreshments, toilets, bus stops/rail links, community centers, and points of local interest along with healthy walking tips.

**Dementia-Friendly Communities**

London’s pledge to become the world’s first dementia-friendly capital city emerged out of the prime minister’s 2012 Challenge on Dementia. The challenge called for the U.K. to drive health care improvements around dementia, to create dementia-friendly communities, and to improve dementia research. The challenge estimated that one-quarter of all hospital beds in the U.K. are occupied by someone with dementia and argues for more options of care. Evidence has shown that those with dementia need exercise, socializing, good nutrition, and hydration, all of which are often determined by the surrounding physical environment.

As a result of the challenge, the Church of England has developed a booklet about making churches

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41 Similarly, the U.K.’s (and Europe’s) largest current infrastructure project, Crossrail, will create a new rail line crossing London that will add 10 percent to rail capacity, 40 new stations (10 of which are in central London), and effectively open up new areas to commuting distance of London. Crossrail effectively meets The London Plan’s dual goals of strengthening a world-class city and making it one of the best cities in which to live, by increasing housing choices for commuters by shortening commute time to central London. In addition, compared to many other global cities, London is not very dense; there are opportunities to build higher rather than just farther out.
dementia-friendly, many primary and secondary schools are incorporating it into their curriculums, and sports clubs, railway companies, and financial service companies are making it part of their training.42

This level of political support and exposure has helped catalyze a dementia-friendly movement that aligns with the age-friendly movement, though many argue the two are separate movements facing distinct issues. If age-friendly seeks to move away from a health focus and instead concentrate on rights and access to the city, dementia-friendly is firmly rooted in health and thus may distract from wider age-friendly efforts. Both approaches offer insights on how to improve places for aging.

The Alzheimer's Society defines a dementia-friendly community as “one in which people with dementia are empowered to have high aspirations and feel confident, knowing they can contribute and participate in activities that are meaningful to them.”43 An alternative definition by the U.K's Dementia Services Development Centre (DSDC) is “a community which prevents unnecessary dependence and stress for those with dementia and their caregivers.”44

Dementia-friendly offers very specific design interventions. U.K. researchers developed a checklist for creating dementia-friendly outdoor environments in 2004, which was further refined in 2012 by Housing LIN.45 These offer preliminary guidance to designers, where style is less important than clarity in function and use. The findings in the checklist include that those with dementia will go out for undemanding tasks like walking, shopping, and sending mail; will only use transit or cars with a companion; are less aware of physical and social dangers; experience anxiety and confusion in crowded or complex places and find loud noises startling; cannot always interpret clues for entrances or uses of a building; and use landmarks rather than maps or written directions to orient themselves. Therefore, environments should be familiar, legible, accessible, distinctive, comfortable, and safe. For urban planners, this indicates that change is best if it is incremental and slow, to maintain local character and familiarity. (See the Appendix for 17 key design features for new neighborhoods to be dementia-friendly, and 20 design features for retrofitting existing neighborhoods).46

Dementia-friendly housing goes beyond the Lifetime Homes Standard, which only addresses

42 United Kingdom Department of Health. “Prime Minister's Challenge on Dementia: Delivering Major Improvements in Dementia Care and Research by 2015.” 2012.


44 Ten areas communities can focus on to become dementia-friendly include 1) involve people with dementia to understand their needs and aspirations, 2) challenge stigma and build understanding, 3) make community activities accessible, plus offer activities targeted to those with dementia, 4) acknowledge potential of those with dementia to contribute, 5) ensure an early diagnosis through better integration of health and social care, 6) give practical support to engage in community life, such as through befriending services, 7) offer community-based solutions such as enabling people to live longer in their own homes, 8) provide reliable travel options, 9) provide easy-to-navigate environments, and 10) ensure respectful and responsive businesses and services through staff training and strategies to allow those with dementia to continue to shop and access services.


46 There is a nice crossover with new urbanism and neotraditional town building (and in general, good urban planning) with some of the criteria. Those under "familiarity" include buildings designed to reflect uses. Legibility can be achieved through small block sizes, a hierarchy of street types including shopping and residential streets, obvious entrances to buildings, and landmarks and environmental cues. Accessible criteria that new urbanists would support include the mixing of land uses. Distinctive can be achieved through varied architecture and urban form that reflects local character, and features at junctions such as street trees or furniture. Comfortable can be enabled through frequent public seating, and safe through frequent pedestrian crossings with audible and visual cues. This research is still in its infancy, so some felt that caution should be shown in applying it.
physical challenges, to include sensory and cognitive challenges. From the 1970s through the 1990s, dementia care homes were designed to reduce challenging behaviors, support physical impairments, and ensure safety. More recent research recommends supportive and therapeutic environments that enhance abilities, and well-being and meet emotional needs, while supporting the right of that person to go out into the community. This can be accomplished either through creating continuing care villages like the Belong model, where the village is close to shops but also houses its own bistro, gym, salon, and café, all of which are shared spaces, inclusive to the surrounding community and open to the public.

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48 Ten design components that architects and developers should consider for dementia-friendly housing include 1) generous space standards and flexible layouts, 2) maximized natural light through placement, size, and detail of windows, 3) building layouts that provide large balconies or patios but avoid internal corridors (which can be confusing) and single aspect flats (those that only have windows on one side), 4) homes adaptable to new technology, 5) layouts that promote circulation areas for social interaction, 6) multipurpose space for a range of activities, 7) homes designed to be part of the street, 8) energy-efficient and well-insulated, 9) adequate storage, and 10) shared sidewalks and paths that give priority to pedestrians. Presently, most housing with care provision is not designed specifically for dementia, but that is changing. New models do not segregate elders but combine the best features of senior housing with an interaction between residents and the community.

Dementia has become a political issue, with much political will behind it. Age U.K. feels dementia work should tie in with age-friendly work, particularly since there is no one easy diagnosis for dementia and thus we are all in this together, whether one’s primary interest is aging or dementia. Age-friendly could build on the political support and exposure that dementia-friendly brings, and could catalyze useful partnerships between the aging and health communities.

How Have They Incorporated Age-Friendly into Policy?

Prior to London Mayor Boris Johnson’s re-election in 2012, Age U.K. London published an Older People’s Manifesto for 2012-2016, which outlines actions the mayor should take to improve London for adults age 50 and over. Foremost is to factor older adults into major developments in London and to improve senior housing options. The manifesto advocates for intergenerational activity,

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more community policing, staffing at parks, and more street lighting to improve overall safety. It also called for improvements in mobility, including using the Olympics legacy to promote fitness for older people.

The mayor and GLA responded by pledging to improve London for older people in the Assessment of the GLA’s Impact on Older People’s Equality Update in 2013. For the public realm, Johnson pledged to create 100 pocket parks across Greater London, and protect existing green space and the presumption against development of back gardens in The London Plan. The mayor and GLA are also working on Lifetime Neighborhoods (The London Plan Policy 7.1), “a good quality environment in an active and supportive local community with the best possible access to services, infrastructure and public transport” and “designed to meet the needs of the community at all stages of people’s lives.” The GLA indicates that the next London Plan will have more of an emphasis on Lifetime Neighborhoods (Miller and Parkinson interviews, 2015).

Recently, the GLA commissioned an independent review of progress on age-friendly efforts in London since 2005. The top improvements since 2005 center around a better public realm and enhanced transit network (two of the three built environment domains). There has been a positive change in both attitudes and resources devoted to age-friendly policy, though the economic downturn since 2005 has placed a significant burden on the GLA and London boroughs.

Public Realm and Neighborhoods
The city has adopted a policy framework called the All London Green Grid (ALGG) to create a vast network of green infrastructure across London and connect town centers with the Thames River and out to the green urban fringe. This has been accompanied by major investments in public space (such as the senior playground in Hyde Park), shared road space (shared streets in Shoreditch and Kensington, for instance), and promoting community toilet schemes (such as in Richmond and Lambeth Boroughs).

Transportation
Since 2005, London has made great strides in reducing vehicle emissions, thereby helping...
A shared space street, without curbs, in Hackney, London, is designed to slow automobiles as they enter the low-traffic junction, and give priority to pedestrians and bicyclists.

Several London boroughs, such as Camden and Islington, have introduced 20-mph speed limits across their entire boroughs, making the areas safer for senior pedestrians.

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seniors who suffer more from poor air quality. The Congestion Charge Zone, a fee charged on most motor vehicles operating within Central London between 7:00 AM and 6:00 PM Monday through Fridays, began in 2003 and led to reductions in vehicle emissions. The city’s Low Emission Zone (LEZ), a traffic pollution charge on diesel-powered commercial vehicles, has further reduced bus emissions since its introduction in 2008, while an Ultra Low Emission Zone (ULEZ) has been proposed for central London coterminous with the Congestion Charge Zone that would further reduce emissions.

London is also working to move more deliveries of heavy goods to rail, further reducing emissions, congestion, noise, and road damage caused by trucks.

Several London boroughs, such as Islington, have also introduced 20 mph speed limits across their entire boroughs, which have been shown to cut collisions and deaths by 40 percent. Slower speeds and calmed traffic help all pedestrians but particularly seniors, who may need more time to cross the street. Slower travel speeds also prevent injuries if crashes do
occur. These zones have proved to be so popular that many residents want them extended into other boroughs.\(^\text{51}\)

There has also been an expansion of pedestrian countdown clocks at street crossings, with more to come.

London’s bicycling environment has improved through the creation of public bike hire and cycle superhighways that segregate bike traffic on main roads. London will have Europe’s longest segregated cycleways, eventually numbering 12 different routes; a few are already built and more are under construction. The city also plans to create seven “quietways,” debuting in 2016, which will be a network of well-signed radial and orbital routes following back streets with less traffic.\(^\text{52}\) These routes follow tree-lined streets, often passing through parks and by waterways, which are far more likely to attract older people who might otherwise not have the confidence to bike in the city.

Access to public transit for seniors has also been greatly improved in London. Transport for London (TFL) has made one-quarter of the Underground stations and half of the Overground stations step-
More bus stops are now accessible, with a goal to make 95 percent of them accessible by 2016. London’s Dial-a-Ride program, a free door-to-door service provided by TFL frequently used by seniors, features low-floor minibuses as the new standard. Hugely popular is the Freedom Pass, which offers free transit for those over 60. Age U.K. hails the Freedom Pass for its financial and psychological benefits — having the freedom to move around town without worrying whether the trip is worth the cost or effort of figuring out payment systems. TFL also created Legible London, a citywide wayfinding system of 1,300 signs that greatly improves the ability of Londoners and tourists to find their way to key destinations. TFL should also pursue updating the Legible London signs with wheelchair-accessible routes.

**Housing**

A significant portion of the older adult population in London live in privately owned homes, which contrasts sharply with the younger “Generation Rent” who largely cannot afford to buy in London. Since 2005, London has pursued a number of innovative housing schemes meant to provide greater stability and options for the city’s aging population. London Housing Design Guide Standards have been adopted and includes minimum space per person that is 10 percent higher than previous social housing standards, and encourages full accessibility, long-term adaptability, and generous balconies if no garden is provided. The mayor’s Design Advisory Group hopes to continue to examine better housing design for seniors. All new London housing must meet the Lifetime Homes Standard, though through interviews it is clear that developers can get around this requirement in some cases.

For those seniors that do rent, one of the remaining challenges includes housing affordability, as the median private rent in London is £1,300 per month. This is double the amount of the state pension, which lacks any sort of “London weighting” to offset the much higher cost of renting in London versus the rest of the country. One of the largest challenges facing London housing is the lack of older adult housing. The GLA has assigned

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54 Sixty-six percent of older adults in London live in privately owned homes, while 5 percent live in privately rented homes and 29 percent live in socially rented homes. (Ginn, Dr. Jay, and Tinker, Dr. Anthea. King’s College London. “An Age Friendly City: How Far Has London Come?” 2015.)


56 Affordable housing is defined as 80 percent of the market rent, which is still unaffordable to many. There are currently 800,000 Londoners, not just older adults, on the social-rented housing waiting list, which is an 84 percent increase since 2004.
benchmarks to London boroughs on how much older adult housing they must build, but it is unclear whether that policy has teeth, particularly in times of government budget cuts that make it difficult for boroughs to build new housing or retrofit existing housing. Local authorities and housing authorities need more land at low prices with easier borrowing limits to build more social housing.

Many of these housing challenges are directly affected by London being an international city, with

### Two Senior Housing Innovations: Senior Cohousing and Elderflowers

There are two models of seniors in and near London working on creating their own senior housing communities that provide mutual support. The first is cohousing. This model has been more popular in other parts of Europe but interest has been growing in the U.K. since the late 1990s through the U.K. Cohousing Network. Cohouses are intentional communities, created and run by their residents, with each household having a self-contained, private home. Residents come together to manage their community, share activities, and eat together, often in common houses with kitchen and dining facilities, laundry rooms, meeting spaces, guest rooms, and shared outdoor space.

Cohousing in London faces many barriers. Land can be hard to acquire and the U.K. government lacks any policies to set aside land, as is done in other parts of Europe. Obtaining local planning permission is difficult, as the local government may think senior cohousing will add to their social care budget. In reality, most cohousing is for 40 or fewer people, so the impact is negligible. Senior housing, not just cohousing, can face hurdles with local approval, with many projects going to appeal. Working with a housing developer, even a progressive one, can be difficult when the cohousing members want a more collaborative design process. Often it is the first time the housing developer is attempting this type of product. Replicability will help the movement, while the perception of infeasibility will hinder it. Scaling up the size of the project is also difficult, as the ideal size for cohousing is 24-30 units for as many as 45 people (Brenton interview, 2015). This scale encourages intimacy, beyond which the collaborative nature of the community may be lost. In addition, a lot of work goes into self-organizing and building the group, even more than design and construction.

The Older Women’s Cohousing (OWCH) group in London has been at the forefront of this movement. OWCH has been planning a cohousing development called New Ground Cohousing for 16 years, 5 of which were spent finding a site. When the development opens in 2016 on the site of a former school, it will be the first cohousing development for older women in the United Kingdom and will feature 25 homes, 8 of which will be social-rented flats and 17 privately owned. A second senior women’s cohousing community with 30 households has received planning approvals in northern London on the site of a former hospital.

A second housing model called Elderflowers believes in creating intentional, resident-led older adult communities but at a slightly larger scale and without the extensive community building prior to launch. It appears most similar to the cooperative housing model in the United States. Elderflowers Projects Company Ltd. describes itself as a new type of housing for active, independent, older people, starting as young as 50, given that there is a shortage of affordable, suitably sized and accessible housing for older people not living in care housing. Thus, many people remain in their large houses as they age, in essence under-occupying the space. Most units would be privately owned, with some affordable rentals or shared ownership units. Residents would collectively own the communal facilities and manage the housing, thereby reducing service fees that can be a large cost in any housing with a care component. Elderflowers is in the process of working with a housing association (similar to U.S. non-profit developers) to build their first project with 160 housing units in the center of Milton Keynes, 45 miles northwest of London. Similar to cohousing their biggest challenges are in obtaining land and working with a developer. (Interview. Carol Barac, Elderflowers Inc, May 8, 2015.)
Success has come through the involvement and lobbying of numerous seniors and allied groups.

global capital and investments creating inequitable market impacts. How much London is willing and able to regulate this market in service of being an age-friendly city remains to be seen.

Why Have They Been Successful?
London's policy successes in becoming an age-friendly city result from: 1) mayoral leadership; 2) involvement of seniors and allied groups; and 3) commitment to becoming the first dementia-friendly world capital.

First, then Mayor Boris Johnson has shown commitment to age-friendly efforts through the GLA's The London Plan policies, such as setting specific targets for senior housing for each borough, and by focusing on lifetime neighborhoods. The GLA also was bold enough to commission an independent review of progress to date on age-friendly efforts in London.

Second, success has come through the involvement and lobbying of numerous seniors and allied groups, such as the 400+ organizations that make up the London Older People's Strategies Group, and through explicit concerns expressed through publications such as Age U.K. London's Older People's Manifesto. Other local efforts in Camden Borough and through the Older Women's Cohousing Network demonstrate commitment from individuals and groups to move progressive ideas to fruition even absent specific policy support.

Third, London's commitment to becoming the world's first dementia-friendly capital has garnered significant attention. This has highlighted the need for more coordination among those who work in aging and health, as well as the need for better designed and more supportive communities, whether they are called age-friendly or dementia-friendly.

Challenges with Implementing Age-Friendly Policies and Practices
The biggest challenges to moving age-friendly forward in London are austerity, ownership of the agenda, population growth, housing affordability, and embedding age-friendly in decisions.

First, with austerity, cuts to public funding continue, which has caused public authorities to emphasize the role of the private sector. This has led to a relaxing or removal of national targets for lifetime homes, accessibility, and sustainability. The free market will have to finance additional private housing, but will it be housing that includes care provisions or adaptable homes? There is a huge economic opportunity in the "silver economy," and some developers are beginning to embrace it. While many older adults now moving into London are well off, keeping these older adults and attracting all economic classes will be difficult if London is not seen as a good place to age. Older adults may choose to take their money elsewhere. Austerity can also lead to ageist attitudes, and London should do more to protect vulnerable populations.

Second, with ownership of the agenda, there appears to be no administrative home for age-friendly London efforts, with work divided between GLA, Age U.K. London, and Positive Aging in London. The age-friendly movement would be more powerful with London officially on board, given the city's range of expertise and ability to affect national policy. Most people I interviewed felt London will join and were hopeful that London will support an age-friendly agenda more explicitly over the next five years.

Third, London will also have to deal with rapid population gains and the attendant pressures it places on all city systems, from housing, to roads, parks, transit, and health care. Many feel that

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57 Interview. Professor Anthea Tinker, King's College London, May 6, 2015.
London has always struggled with these challenges since its birth and responded well to them, and must do so again.\textsuperscript{58} However merely increasing the number of homes built or the number of parks built will not solve the issue of population growth in and of itself; rather it is the quality, variety, and design of infrastructure and what effect it has on people and their communities that will matter.

Fourth is housing affordability given high land costs and a lack of housing choices, with a shortage of new homes and the building of housing that will be obsolete and not fit for an aging population. How can age-appropriate housing be built to meet the current shortfall and even greater shortfall in years to come?

Finally, London could do more to embed age-friendly in planning decisions, as well as targeting interventions on a more local specific neighborhood scale. Much of what London has done for age-friendly is of benefit for the city as a whole.\textsuperscript{59}

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Lessons Learned

My Urban and Regional Policy fellowship provided insight into the many tangible ways that planners and policymakers can improve the built environment for aging. Some of the best solutions are those that make a city more livable for everyone, such as shared road space, quietways, legible wayfinding, lifetime homes, cohousing, community toilet schemes, and age-friendly businesses. The fellowship also provided several cross-cutting lessons, from conceptual to practical:

1. Framing the Debate: How the concept is explained matters. Manchester has made a concerted effort to frame age-friendly from an equality and “rights to the city” perspective. Aging efforts typically have a health and services focus, with the elder as a patient or customer, while Manchester views older adults as citizens first, with inherent rights. These include the right to appropriate urban space; the right to participate in decision-making in the production of urban space; and the right to shape strategies for urban planning. Central to this idea is that cities are drivers of economic and social success but often to the detriment of those outside the labor market. Growth should offer opportunity for all and thus greater equality. Older adults should be able to take advantage of all the benefits that living in an urban area affords. Engagement and involvement of seniors in meaningful ways drives Manchester’s approach. Particularly prized is the accumulated local knowledge of seniors and how this knowledge can shape urban planning strategies. Efforts are underway to involve seniors as “co-investigators” in projects examining the age-friendliness of their neighborhoods. Rather than characterize certain seniors as “disadvantaged,” Manchester prefers the term “socially excluded,” again to emphasize that seniors have rights to participate in the social, civic, and political life of the city as equals.60

In addition, both Manchester and London believe that age segregation is better envisioned as age affinity, but an even better approach is intergenerational exchange and a shared fate across generations. Age-friendly includes and can benefit all ages, not just seniors. This approach recognizes the universality of aging.

2. Role of Messaging and Communications: How age-friendly is branded makes a difference. Age U.K.’s vision of “a world where everyone can love later life” was created to make people think differently about getting older and challenge negative stereotypes about aging. Similarly, WHO’s “adding life to years” is a positive message, similar to Manchester’s Positive Images of Aging. While this may seem not as important as improving the built environment, changing the images and attitudes about aging through messaging and branding is critical. As discussed in the WHO domain of respect and social inclusion, there is a prevalence and acceptance of negative attitudes about older people, even among older people themselves, that can reinforce inequality. How aging is represented in the media and advertising matters. What is needed is a realistic portrait of aging, with its challenges and rewards, and care should be taken not to express it negatively. Nor should we relentlessly focus on “active aging” or that only seniors that are productive, “keep busy,” or are super active are aging appropriately. Bill Thomas, an international expert on elderhood, laments that the only aging experts we hear about

60 Interview. Dr. Chris Phillipson, University of Manchester, April 22, 2015.
in the United States are those experts that hawk anti-aging products. Talk about a culture in denial!

It could be argued that London is doing just as much as Manchester, but they are just not branding it as age-friendly, which could get them more buy-in, political mileage, international exposure, and goodwill. Such branding and messaging are perhaps even more important in cities that are rapidly changing and facing development pressures.

Beyond messaging, overall communications is a key component to success. Age-Friendly Manchester has also done excellent work hosting a page on the city’s website (www.manchester.gov.uk/olderpeople) with weekly or more often updates on age-friendly milestones and events. Manchester also does an annual progress statement, all of which adds accountability, reliability, and shows dedication of the city to the effort. London does not have a similar city-hosted website or explicit branding as age-friendly, though there are many organizations and city efforts around aging, and it is not entirely surprising given London’s size and its numerous aging organizations. It would be beneficial for London to pursue outright branding.

3. Role of Other WHO Age-Friendly Domains: The other domains matter and can influence the built environment domains. Most urban planners and design professionals want to know about what they can do or change to make built environments better for aging. A more in-depth knowledge of the other domains will also serve a planner well, as the domains influence the built environment in their own ways. These other domains are social participation, respect and social inclusion, civic participation and employment, communications, and community and health services. Especially relevant for a changing urban context is social participation, given that seniors generally have smaller social networks than younger people and risk isolation if they can no longer participate in meaningful social activities. For the planner, this can

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Many pubs in London have been converted into housing, which in some cases may mean a local gathering place for older adults is lost.
mean paying attention to the changing built environment and what impact that may have on seniors participating and socializing. Does a new development result in the closing of a local pub or cafe where many seniors gather? Does a new development seem welcoming to older adults? With respect and social inclusion, it is good to question the disparity in how the young in our culture are supported to fulfill their potential, while the old are supported to maintain their independence and autonomy instead.62

4. From Aspiration to Reality: How to move age-friendly policies into implementation. The WHO age-friendly movement benefits from a low bar to entry, namely a pledge from a city or community to become more age-friendly, followed by an assessment and plan of action. This is beneficial to attract interest in the program and start cities down a path toward improvement. The assessment requires time and attention to complete, but could benefit from better data and metrics. Both London and Manchester have ably collected a good deal of data on the built environment, such as the number of accessible bus stops, the number of senior housing units, and access to open space. What is often lacking is better data on the other WHO domains, which are often more qualitative and harder to quantify. This is where researchers at MICRA in Manchester and Age U.K. (Camden and national offices) are contributing with new measures for the social environment, such as indices on isolation and loneliness among older adults. Researchers in Manchester are also examining sociologists’ urban ethnography methods for developing new data and metrics.63

The movement would also benefit from more maps identifying age-friendly features and deficits. Maps make visual unseen barriers and add accountability to a city’s efforts. The Old Moat maps created in Manchester located recommendations in a specific place rather than just espousing overall policy for an area. Improvements were then made at specific locations.

The movement would also be far less successful without partnerships. Partnerships embed the goals and ethos into multiple city departments, non-profit organizations, and universities. This is evidenced in the multi-sector partnerships in both Manchester and London, though Manchester’s Age-Friendly team tackles this more directly. In many ways, Manchester’s approach is a collective impact model, defined as the commitment of a group of important actors from different sectors to a common agenda for solving a specific problem. It is a response to the belief that large-scale social change requires broad cross-sector coordination, and that the social sector’s continued focus on isolated interventions by individual organizations limits its ability to achieve higher levels of impact. Since multiple organizations have taken up the charge, this also protects the movement from political shifts.

5. Politics matter, to some extent: Political leadership helps but staff dedicated to the specific task is just as crucial. Manchester says their approach was one of “middling out,” meaning it was neither top down nor bottoms up. Rather it was strong top-level support and grassroots bottom-up involvement that met in the middle with dedicated staff to shepherd the project forward.64

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63 Interview. Dr. Chris Phillipson, University of Manchester, April 22, 2015.

64 Interview. Paul McGarry, Valuing Older People Team, Manchester City Council, April 21, 2015.
Being too closely tied to one political party does not help the age-friendly movement, and care should be taken to emphasize the universality of age-friendly across political philosophies.

**Applications to Policy/Recommendations**

The first set of policy applications are ways that planners and/or regional planning agencies like DVRPC can apply the five lessons learned. The second set is a brief listing of the types of policies, features, and programs that municipalities should consider to become more age-friendly, all of which are discussed earlier in this paper.

First, on framing, sustainability is an age-friendly framework that would resonate with planners, architects, and developers. Broadly speaking, sustainability refers to how biological systems remain diverse and productive. Such systems should include sustainability across the human life course. No plan that addresses the sustainability of a place or region should ignore the sustainability of the people in that place. Aging in place and age-friendly cities, communities, and regions are good terms because they include place, so that while we as planners cannot change aging per se, we can change the places and communities we create to age in. What will happen to age-restricted communities over time, and will we retrofit them better for aging? Would these communities benefit from allowing more ages into the development for intergenerational support, or should they stay age-restricted but offer additional services and better integration of transit and different types of housing with care provisions?

Second, planners should learn to communicate effectively about age-friendly by distilling the message. The movement needs to do better on the “why bother” question, particularly when there are so many policy challenges to address. The eight WHO domains provide an analytical approach but are less useful for messaging. There is still a gap in influencing planners and developers to incorporate more age-friendly features, so a tighter compelling message is needed. I recommend focusing on a few key points, such as examining whether the public realm, transportation, and housing is accessible, affordable, flexible, and supportive for older adults.

In addition, planners should embrace the economic competitiveness angle, particularly that cities that are good for aging are also good for business. Cities and regions should position themselves as great places to age, as the media love to make lists of best places to retire, which usually focus on cost of living and quality of life. What if these lists focused on the age-friendly design features of public spaces, housing, and transportation? What if these lists focused on the untapped labor and volunteer market that older adults bring to a city, rather than focusing only on retirement? Cities and regions that do this can get out ahead of the “silver economy,” a huge untapped market for age-related goods and services.

Also, planners and plans should use stories, as most people have someone in their life, or themselves, that is older and wants to remain independent for as long as possible. A planner can tell a story about his or her parent, grandparent, or neighbor and how they negotiate his or her daily tasks — going out for a cup of coffee, picking up one’s mail, commuting to work or volunteering, or shopping for groceries — and how the built and social environment along that daily route either helps or hinders. This can be far more effective than listing features of an age-friendly environment.

Third, planners and plans should become more informed about the other WHO domains that influence the built environment, as it will only enrich their understanding of aging, and inspire action. Regarding civic participation and employment, rarely are older people ever...
asked about their potential or their future goals. Rather than awarding just the “40 under 40” in professional fields (top 40 people under the age of 40 in a certain field), our society should do a “70 over 70” to highlight older adults’ contributions and potential. With public participation, seniors should be viewed as “expert citizens,” particularly those that have lived in the same neighborhood a long time. Seniors also need legitimate access to urban planning decisions, and it should be recognized that most seniors prefer familiar, regular, and established forms of communication, such as via newspapers and word of mouth through their trusted networks. It is also important that planners are sensitive to ensuring communication is clear and understandable for those with vision, hearing, and cognition problems.

Fourth, politics matter to some extent, but staff is also important to “middle out” the approach. By incorporating age-friendly into more policies and plans, the concept becomes more embedded and less prone to shifts in political power. Both officials and staff can show leadership through learning more about age-friendly and incorporating it into existing and future work programs and plans.

Fifth, regional planners and DVRPC can incorporate age-friendly concerns into key plans, policies, and programs through better data, metrics, maps and partnerships in order to move aspirations to reality, as detailed further below.

Data recommendations include:

1. Update DVRPC’s Analytical Data Report #13: Aging of the Baby Boomers (2007) with 2010 census data, while also expanding the age range to look at those age 50 and above. The analysis, similar to the earlier version, should include growth in the senior population by region, county, and municipality; and characteristics of the current senior population including population size and percentage, density, and socioeconomic characteristics such as income, poverty, homeownership, and percentage of income spent toward housing costs.

2. Do a region-wide assessment of age-friendliness, using data that is already available (and similarly tracked in municipal WHO Assessments). There may be large amounts of data that is hard to gather at a regional level. The following, however, could be compiled (or are already tracked by regional agencies) and summarized together: amount of open space; number of senior centers, senior housing units, accessory dwelling units, nursing homes, adult day cares, bus shelters, and accessible transit stations; and percent of seniors registered for free transit, those living alone, those with limited English proficiency, and those employed, among other measures.

3. Use the existing AARP online livability scorecard (http://livabilityindex.aarp.org) to compare towns and counties in the region. The scorecard rates a community on housing, transportation, health, opportunity, neighborhoods, environment, and engagement.

 Metrics recommendations include:

1. Expand the age-friendly discussion in the region’s next Long Range Plan. The current language recommends aging in place by reinvesting in the region’s 100 centers with affordable and accessible housing and transit-oriented development. This is still applicable, but could be expanded to include the challenges of those aging in our growing suburbs or rural areas, and in age-restricted communities that may not fit their future needs. The Long Range Plan should include the challenges and opportunities for
aging in each of the community types of Core City, Developed Community, Growing Suburb, and Rural Area.

2. Track age-friendly data in the Regional Indicators report. Regional indicator data is used to highlight successful initiatives and to identify which issue areas should receive priority attention in the Long Range Plan update.

3. Track progress on older adults’ access to services through the region's Coordinated Human Services Transportation Plan (CHSTP), which prioritizes transportation services for persons with disabilities, older adults, and individuals with low incomes.

4. Use the most recent household travel survey, which collects data about the daily travel behaviors of residents, to investigate how senior trips differ from trips of those who are younger, to understand the impact the aging population will have on the transportation system. Seniors’ travel behavior differs from the typical home-work-home travel patterns, and they can have mobility impairments that complicate their travel choices.

Mapping recommendations include:

1. Expand DVRPC’s Indicators of Potential Disadvantage analyses to map older adult populations, beyond the existing analysis of those aged 75+. The cohort of 75 and above was chosen as a deliberately high threshold to map for the region; otherwise, almost every census tract would exceed the regional average for aging. However, if the region is to fully acknowledge and better plan for aging, maps of areas with higher concentrations of older adults below age 75 should be created. A series of maps showing higher than regional average concentrations of age 50+, 65+, 75+, and 85+ should be created. An additional map series could show population aging forecasts to illustrate further needs for age-friendly planning.

2. Map those towns in the region that are part of AARP network or have an age-friendly program independent of AARP.

3. Encourage the mapping of the eight WHO age-friendly domains in the local plans DVRPC undertakes.

4. Create a map series on municipal adoption of age-friendly tools, such as zoning for shared housing, age-friendly business outreach, discussion of aging in comprehensive, or master plans, among other tools.

Partnerships recommendations include:

1. Work with AARP state offices to attract more towns to become part of their age-friendly network, or if not part of a formal program, to commit to being more age-friendly. Host a forum to introduce more municipalities to the concept.

2. Work with state DOT partners to consider funding municipal age-friendly assessments through DVRPC’s Transportation and Community Development Initiative (TCDI) grant program.

3. Collaborate with Area Agencies on Aging on grants and/or research around age-friendly transportation, housing, and public spaces.

4. Engage older adults as partners in outreach and participatory research. In future place-based studies, consider reaching out to seniors directly as sources of local knowledge and community connections. With growing use of social media in public participation, care should be taken not to inadvertently overlook senior input, so planners should be extra vigilant about offering paper
surveys, in-person meetings and events, and other means of input. Consider reaching out to local universities to assist with substantiating this participatory research.

**Conclusion**

As the actress Bette Davis famously said, “Old age ain’t no place for sissies.” Indeed, aging requires endurance, courage, and resources. Moreover, the places we choose to age in can determine so much about how well we age. My research into the age-friendly policies and practices in Manchester and London has revealed that city and regional planners have an important role to play in improving places for aging. The built environment is shaped through policy, funding, and design decisions. Such decisions can benefit everyone or specific groups disproportionately. The best cities and places are those where everyone, regardless of age, can find housing and transportation that suits their aspirations and changing needs, and a public realm that is flexible and welcoming in design and functionality. The best places provide opportunities for both independent living and mutual support. Applying an age-friendly lens to planning ensures that everyone can participate in the social, economic, and civic life of the places we help create.


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Eight Domains of WHO Age-Friendly Cities and Communities

Source: WHO

1. Outdoor spaces and buildings, also called Public Realm: Outdoor environments have a major impact on older people's mobility and independence, and features to assess include sidewalks and crosswalks, quality of pavements, access to green space, security, cleanliness, seating, public toilets, and age-friendly buildings.

2. Transportation: The ability to get around and maintain one's connections to the world affects health and wellbeing in older age. Features to assess include transit availability, affordability, reliability and frequency, travel destinations, age-friendly vehicles, specialized services for older people, priority seating and passenger courtesy, transit drivers, safety and comfort, transit stops and stations, taxis, community transport, information, driving conditions, courtesy towards older drivers, and parking, among others.

3. Housing: Housing affects quality of life and poor housing is linked to chronic disease. Factors to evaluate include affordability, essential services, design, modifications, maintenance, community integration, housing options, and living environment.

4. Social participation: Participating in leisure, social, spiritual, and cultural activities in the community allows older people to maintain and create new relationships. Features to assess include the accessibility, awareness, affordability, and range of events and activities; facilities and settings; and efforts to address isolation and integrate communities across generations and cultures.

5. Respect and social inclusion: Negative attitudes about seniors are often widespread and accepted, and can reinforce inequality. Features to assess include respectful and inclusive services, public images of aging, intergenerational and family interactions, public education, community inclusion, and economic inclusion.

6. Civic participation and employment: An age-friendly community provides options for older people to continue to contribute to their communities, through paid employment, volunteer work, and the political process. Factors to consider include employment and volunteer options, training, accessibility, support for civic participation, valued contributions, and entrepreneurship.

7. Communication and information: Older people rely on information that is readily accessible, and failure to access such information can contribute to social isolation. Factors include widespread distribution, oral and printed communication, plain language, automated communication, and computer and internet access.

8. Community support and health services: Health and support services are important to maintaining independence and being able to age in place. Factors include services offered (including home care and residential facilities), service accessibility, voluntary support, and emergency planning and care.
How Municipalities Can Incorporate Age-friendly Concerns into Key Plans, Policies, and Programs

Source: Karin Morris, DVRPC

Land Use Policies: Has your municipality adopted the following land use policies?

- Comprehensive/Master Plans: Does your comprehensive or master plan mention the demographics of aging in your community? Does it forecast how the current population will age in the next 10 to 25 years? Does it discuss or assess age-friendly readiness? Does the plan have an explicit goal to make your city or town age-friendly? By having specific language in the comprehensive or master plan, this gives legal support to zoning or land development ordinances that include age-friendly features.

- Zoning and Subdivision and Land Use Ordinances (SALDO): Does your zoning and SALDO allow for, or at least not expressly prohibit, the following age-friendly features?
  - Accessory Dwelling Units: Allows small secondary units built on single-family lots, either as accessory apartments or as separate unattached dwelling units.
  - Shared Housing: Allows unrelated people to share a house.
  - Adult day care centers: Allows adult day care centers, which are designed for older adults who can no longer manage independently or who are isolated to receive social and health-related services, and to give caregivers daytime breaks.
  - Long-term care facilities: Allows long-term care including nursing homes, assisted living, and continuing care retirement communities.

- Lower parking requirements for senior housing: Allows for flexibility in parking requirements for senior housing, acknowledging that seniors often own fewer cars because of smaller households or having given up personal automobiles. Makes senior housing more financially feasible since parking requirements can drive up the cost of housing.

- Visitability: Requires that the housing unit should have a zero step entrance, wider hallways and at least a half-bath on entrance floor. Municipalities could require this for all newly built or significantly renovated housing, and/or for public, private, or all housing, or for some percentage of housing units in new developments.

- Sidewalk requirement in SALDO: Requires the provision of sidewalks and sidewalk connectivity in land development projects.

- Home-based offices: Allows for home-based offices, so seniors and retirees can remain independent and productive as they age in place.

Transportation Policies: Has your municipality, transportation or transit agency adopted the following policies or practices?

- Complete Streets: Policy or resolution designed to enable safe access for all users, including walkers, bicyclists, motorists, and transit riders of all ages and abilities.

- Lower Speed Limit Zones: Lower speed limits in certain areas to calm traffic and improve the safety of everyone.

- Accessible Transit: Efforts to make all transit stations and vehicles accessible, as well as
programs offered to seniors such as transit instruction (how to ride transit).

- Free or Low-cost Transit Passes for Older Adults: Enables greater mobility and independence for seniors by eliminating the cost burden of transit and increasing its ease of use.

- Wayfinding and Legible Signage: Signage system that orients the user to his or her location and can assist in choosing a route. Age-friendly features can include larger more legible fonts, identification of wheelchair-accessible routes and topography, and location of public toilets.

- Low Emission Zones: Traffic pollution fee or charge on diesel-powered commercial vehicles, in certain zones, to reduce air pollution, which affects older people more than younger.

- Senior Pedestrian Zones: Designated zones near senior amenities or where many seniors live that could include enhanced crosswalks, longer pedestrian crossing times, crossing flags, or other features to improve senior pedestrian safety.

- Programs for Older Cyclists: Educational or training programs for older cyclists to become more confident on a bicycle.

**Public Realm Policies:** Does your municipality have the following?

- Bus Shelters: Bus shelters provide protection from weather, and as a fixed structure, legibility to the transit system.

- Benches: Providing places to sit allows an older person greater freedom to go out confidently, enabled by a place to rest or socialize along the way.

- Public Toilets: Public toilets, whether provided by the municipality or through a partnership with area businesses, are an important resource for older people to be able to navigate their environments. Maps of locations of toilets are also a useful resource for older people, mothers with small children and everyone else!

- Senior Playgrounds: Playgrounds exclusively for older adults that offer low-impact equipment designed to promote balance and flexibility, as well as socialize and have fun.

- Age-Friendly Businesses: Municipal program that helps businesses attract, engage and retain older adults as customers by considering the age-friendly features of the business. Low and no cost changes include improving access, such as places to rest and putting products within reach, to improving the overall experience, like minimizing excessive music or noise, providing well-lit displays, offering home delivery, and training staff on how to assist those with vision, hearing or cognitive issues.

- Aging Improvement Districts: Concept being tested in three New York City neighborhoods, to improve those neighborhoods for seniors at low or no cost, based on input from local older adults and partnerships between businesses, nonprofits, city agencies, and area institutions.

**Housing Policies:** Does your municipality have the following policies, programs or types of housing available?

- Lifetime Homes/Visitability/Universal Design: Requirements or incentives to build new (or adapt existing) housing to make the home as adaptable to changing needs as possible.

- Cohousing: Intentional communities created and managed by their residents, with private homes but shared activities and facilities such
as outdoor space, guest rooms, a communal kitchen, and meeting spaces.

- Cottage housing: Grouping of small, single family dwelling units clustered around a common area and developed with a coherent plan for the entire site. They often have shared amenities and be can less expensive than single-family homes, and are an attractive option for seniors.

- Naturally Occurring Retirement Communities Supportive Services Program (NORC-SSP): Model for aging in place that provides supportive services, such as health care, social work, and social activities, to naturally occurring retirement communities, which are often market-rate apartment buildings predominantly occupied by seniors.

- Villages: Grassroots membership organizations that coordinate access to affordable services and social support for older adults through vetted providers, often members themselves, to enable seniors to remain in their homes and communities.

- Grandfamilies Housing: Model of senior housing that allows grandparent caregivers to live with grandchildren and not violate rules of age-restricted senior housing. They combine features of senior housing with on-site services such as after-school education, youth activities, and case management.

**Involvement:** Does your municipality involve older adults in making planning decisions?

- Older Persons Forum: Established group that meets on a regular basis to review issues of aging in the community along with overall development of the community.

- Using Older Adults as Co-researchers: Older people are often invaluable connectors to other older adults in their community and could assist with studies or participatory research.
Making Cities Better for Aging

AARP Network of Age-Friendly Communities Tool Kit

The Selection Criteria: How AARP staff and others can help communities join the age-friendly network

Source: AARP

Each community — depending on its size, resources, socioeconomic conditions and cultural diversity — is going to have different ways of approaching the opportunity to join the AARP Network of Age-Friendly Communities.

To determine if a particular community should begin the process of joining the network, AARP state office staff will consider a variety of factors related to a community's leadership and overall readiness. For instance:

- Is there political acceptance — from elected leaders (the mayor, city or town council members) and buy-in from community stakeholders — that age-friendly improvements are needed?

- Is the community currently involved in a public project or initiative? Encouraging a community to think about how it will incorporate projects into existing funded projects or future capital expenditures can help address financial concerns. It's also important to assess the community's capacity and political will to actually take action, not just conduct studies or develop plans.

Other examples of leadership or readiness include:

- An elected official raises concerns about the community's preparedness for its aging population

- Existing non-governmental organizations or grassroots activism organizations are championing the issue

- The community is a grant recipient from, for example, the Environmental Protection Agency (EPA), the Centers for Disease Control (CDC), Safe Routes to School, local foundations, etc.

- Master plans or bicycling/pedestrian plans have been developed but not yet implemented

- There's an acknowledged need for economic development, such as downtown or Main Street improvements or supports to local businesses

- There are transportation concerns, such as pedestrian safety issues or high traffic fatalities

- The community has bike paths or lanes

- There's Safe Routes to School potential (i.e. programs that promote walking and biking to schools)

- The community has sizable age 50+ population

- There is an acknowledgement of infrastructure issues

- There are known walkability problems (e.g. poor quality sidewalks)

- There's an acknowledged need for traffic calming

- The community recognizes that it is underutilizing its assets, such as trails, parks, community centers and health facilities

- Local colleges or universities are present but not fully integrated into the community

- There are health issues within the community, such as high rates of obesity and diabetes, low physical activity rates, poor nutrition or food deserts (i.e. limited or no access to healthy food sources)
• There are safety and security issues

• There are new development opportunities in the works, such as a new stadium or similar being built, or neighborhood redevelopment or gentrification projects
World Health Organization’s Checklist of Essential Features of Age-friendly Cities

This checklist of essential age-friendly city features is based on the results of the WHO Global Age-Friendly Cities project consultation in 33 cities in 22 countries. The checklist is a tool for a city’s self-assessment and a map for charting progress. More detailed checklists of age-friendly city features are to be found in the WHO Global Age-Friendly Cities Guide.

This checklist is intended to be used by individuals and groups interested in making their city more age-friendly. For the checklist to be effective, older people must be involved as full partners. In assessing a city’s strengths and deficiencies, older people will describe how the checklist of features matches their own experience of the city’s positive characteristics and barriers. They should play a role in suggesting changes and in implementing and monitoring improvements.

Outdoor spaces and buildings
- Public areas are clean and pleasant.
- Green spaces and outdoor seating are sufficient in number, well-maintained and safe.
- Pavements are well-maintained, free of obstructions and reserved for pedestrians.
- Pavements are non-slip, are wide enough for wheelchairs and have dropped curbs to road level.
- Pedestrian crossings are sufficient in number and safe for people with different levels and types of disability, with non-slip markings, visual and audio cues and adequate crossing times.
- Drivers give way to pedestrians at intersections and pedestrian crossings.
- Cycle paths are separate from pavements and other pedestrian walkways.
- Outdoor safety is promoted by good street lighting, police patrols and community education.
- Services are situated together and are accessible.
- Special customer service arrangements are provided, such as separate queues or service counters for older people.
- Buildings are well-signed outside and inside, with sufficient seating and toilets, accessible elevators, ramps, railings and stairs, and non-slip floors.
- Public toilets outdoors and indoors are sufficient in number, clean, well-maintained and accessible.

Transportation
- Public transportation costs are consistent, clearly displayed and affordable.
- Public transportation is reliable and frequent, including at night and on weekends and holidays.
- All city areas and services are accessible by public transport, with good connections and well-marked routes and vehicles.
- Vehicles are clean, well-maintained, accessible, not overcrowded and have priority seating that is respected.
- Specialized transportation is available for disabled people.
- Drivers stop at designated stops and beside the curb to facilitate boarding and wait for passengers to be seated before driving off.
Transport stops and stations are conveniently located, accessible, safe, clean, well-lit and well-marked, with adequate seating and shelter.

Complete and accessible information is provided to users about routes, schedules and special needs facilities.

A voluntary transport service is available where public transportation is too limited.

Taxis are accessible and affordable, and drivers are courteous and helpful.

Roads are well-maintained, with covered drains and good lighting.

Traffic flow is well-regulated.

Roadways are free of obstructions that block drivers’ vision.

Traffic signs and intersections are visible and well-placed.

Driver education and refresher courses are promoted for all drivers.

Parking and drop-off areas are safe, sufficient in number and conveniently located.

Priority parking and drop-off spots for people with special needs are available and respected.

Housing

Sufficient, affordable housing is available in areas that are safe and close to services and the rest of the community.

Sufficient and affordable home maintenance and support services are available.

Housing is well-constructed and provides safe and comfortable shelter from the weather.

Interior spaces and level surfaces allow freedom of movement in all rooms and passageways.

Home modification options and supplies are available and affordable, and providers understand the needs of older people.

Public and commercial rental housing is clean, well-maintained and safe.

Sufficient and affordable housing for frail and disabled older people, with appropriate services, is provided locally.

Social Participation

Venues for events and activities are conveniently located, accessible, well-lit and easily reached by public transport.

Events are held at times convenient for older people.

Activities and events can be attended alone or with a companion.

Activities and attractions are affordable, with no hidden or additional participation costs.

Good information about activities and events is provided, including details about accessibility of facilities and transportation options for older people.

A wide variety of activities is offered to appeal to a diverse population of older people.

Gatherings including older people are held in various local community spots, such as recreation centres, schools, libraries, community centres and parks.

There is consistent outreach to include people at risk of social isolation.
**Respect and Social Inclusion**

- Older people are regularly consulted by public, voluntary and commercial services on how to serve them better.
- Services and products to suit varying needs and preferences are provided by public and commercial services.
- Service staff are courteous and helpful.
- Older people are visible in the media, and are depicted positively and without stereotyping.
- Community-wide settings, activities and events attract all generations by accommodating age-specific needs and preferences.
- Older people are specifically included in community activities for “families”.
- Older people are recognized by the community for their past as well as their present contributions.
- Older people who are less well-off have good access to public, voluntary and private services.

**Civic Participation and Employment**

- A range of flexible options for older volunteers is available, with training, recognition, guidance and compensation for personal costs.
- The qualities of older employees are well promoted.
- A range of flexible and appropriately paid opportunities for older people to work is promoted.
- Discrimination on the basis of age alone is forbidden in the hiring, retention, promotion and training of employees.
- Workplaces are adapted to meet the needs of disabled people.
- Self-employment options for older people are promoted and supported.
- Training in post-retirement options is provided for older workers.
- Decision-making bodies in public, private and voluntary sectors encourage and facilitate membership of older people.

**Communication and Information**

- A basic, effective communication system reaches community residents of all ages.
- Regular and widespread distribution of information is assured and a coordinated, centralized access is provided.
- Regular information and broadcasts of interest to older people are offered.
- Oral communication accessible to older people is promoted.
- People at risk of social isolation get one-to-one information from trusted individuals.
- Public and commercial services provide friendly, person-to-person service on request.
- Printed information – including official forms, television captions and text on visual displays – has large lettering and the main ideas are shown by clear headings and bold-face type.
- Print and spoken communication uses simple, familiar words in short, straightforward sentences.
☐ Telephone answering services give instructions slowly and clearly and tell callers how to repeat the message at any time.

☐ Electronic equipment, such as mobile telephones, radios, televisions, and bank and ticket machines, has large buttons and big lettering.

☐ There is wide public access to computers and the Internet, at no or minimal charge, in public places such as government offices, community centres and libraries.

**Community and Health Services**

☐ An adequate range of health and community support services is offered for promoting, maintaining and restoring health.

☐ Home care services include health and personal care and housekeeping.

☐ Health and social services are conveniently located and accessible by all means of transport.

☐ Residential care facilities and designated older people’s housing are located close to services and the rest of the community.

☐ Health and community service facilities are safely constructed and fully accessible.

☐ Clear and accessible information is provided about health and social services for older people.

☐ Delivery of services is coordinated and administratively simple.

☐ All staff are respectful, helpful and trained to serve older people.

☐ Economic barriers impeding access to health and community support services are minimized.

☐ Voluntary services by people of all ages are encouraged and supported.

☐ There are sufficient and accessible burial sites.

☐ Community emergency planning takes into account the vulnerabilities and capacities of older people.
At a Glance: a Checklist for Developing Dementia Friendly Communities

Edited for the Housing Learning & Improvement Network by Jeremy Porteus

This 'At a Glance' offers useful checklists on designing dementia friendly communities. It summarises some of the key design points set out in the recent Housing LIN Viewpoint Breaking New Ground: The Quest for Dementia Friendly Communities, by Dr Lynne Mitchell at the University of Warwick (Viewpoint No.25, Housing LIN, 2012).

Introduction

The term ‘dementia friendly communities’ has emerged in recent years as policy makers and practitioners seek new ways to address the steady rise in numbers of people with dementia as the population ages. It reflects a growing movement to remind society that people with dementia have the same rights as everyone else to be treated with dignity and respect, to lead independent, autonomous lives and to continue to be active citizens in society whose opinions are heard and acted upon.

The quest for dementia friendly communities recently received a boost from the Prime Minister’s Challenge on dementia,1 launched alongside Alzheimer’s Society’s Dementia 2012: a national challenge.2 The Prime Minister’s three key areas of driving improvements in health and care; creating dementia friendly communities that understand how to help; and better research will, if adequately met, help to improve the lives of people with dementia and their carers. Alzheimer’s Society, working with the Dementia Action Alliance in supporting the development of dementia friendly communities, stresses the need to tackle the stigmatism, exclusion, loneliness, and lack of control and empowerment people with dementia currently experience but at this early stage is not prescriptive about the specifics of what constitutes a dementia friendly community.

Seeking dementia friendly communities

With people aged 65 and over making up the largest number of households in the future, the importance of ensuring that all types of housing provide a flexible, adaptable living environment to meet people's changing needs throughout the life-course is apparent. Future proofing all housing would give people more housing choice and less likelihood of having to face disruptive adaptations or unwanted moves when circumstances change. And for housing to be both inclusive and dementia friendly they also need to address sensory and cognitive challenges.

Designing dementia friendly environments

The most useful design principles and recommendations currently available include:

1. Familiar environments which people with dementia recognise and understand:
   - Non-institutional buildings, rooms and spaces that meet older people's expectations of what such rooms look like in terms of scale, layout, fittings, décor, furniture and furnishings
   - Designs that are recognisable and familiar to people with dementia; features should be designed so their use is obvious and unambiguous – this is not a case of traditional versus modern or using a particular style or historical era but clarity of good design

2. Legible environments which give clues to help people with dementia understand where they are, what is expected of them in that space and which way they need to go:

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• A clear hierarchy of spaces including private, semi-private, semi-public and public spaces helps residents identify different spaces and helps protect their privacy and sense of home.

• Plenty of views of the outside provide interesting views, natural light and ventilation. Being able to see outside helps orientation and wayfinding and a sense of connection to the wider world.

• A minimum of wide, short corridors, single banked to allow natural light and views of the outside, no dead ends or blind bends and with views along them to functional destinations and interesting wayfinding cues, while avoiding clutter and trip hazards.

• Where it is impossible to avoid having a number of corridors, a hierarchy of corridors helps to delineate private and public spaces.

• There is conflicting evidence about the effectiveness of signs and colour coding. But large, realistic graphics in clear, colour contrast to the background on essential destinations, such as toilet doors; and contrasting colours, for example between different doors or corridors, can be useful.

• ‘Memory boxes’ of possessions are useful for wayfinding and orientation and also help people maintain their sense of identity, self and belonging.

3. Distinctive environments, spaces and features help capture people’s attention and concentration and enhance their living environment while helping them to find their way around:

• Separate distinctive rooms e.g. living room, dining room and activity room rather than one large generic shared space.

• Attractive and interesting wayfinding cues, such as art work, potted plants, ornaments, placed at strategic spots.

• Features to give clues to the use of a room, e.g. a fireplace and comfortable chairs in the living room, a dining table and chairs in the dining room ...

• Visual access, e.g. a clear view of the en-suite toilet from the bed.

• Plain, clear colour contrasts between walls and floors, handrails and walls, doors and walls, sanitation ware and walls and floors, toilet seats / flush handles and toilets, taps and basins, furniture and walls / floors ...

4. Accessible environments that enable people to reach, enter, use and move around the places and spaces they need or wish to visit, regardless of any physical, sensory or cognitive impairment.

• Location close to services, facilities, community activities and open space.

• Access to the outdoors, especially natural environments, is essential regardless of the severity of the dementia to enhance health and wellbeing and reduce stress. Sunlight is important for the production of serotonin, a mood-enhancing hormone and the absorption of vitamin D which reduces the risk of osteomalacia, osteoporosis and respiratory infections. Natural light and being able to see the cycle of day and night and the seasons can reduce ‘sundowning’ and sleep disorders.

• High-intensity levels of natural light indoors can positively affect sleep, mood and behaviour: large windows, glazed doors, roof lights, atria, light tunnels.
• Curtains, blinds and anti-glare, non-reflective glass to avoid glare, shadows and frightening reflections
• Indirect artificial light adequate enough to provide the three to five times more light that older people need compared to younger adults
• Flooring and pathways that are plain, non-reflective, wide, flat, smooth and non-slip, in clear colour and textural contrast to walls, doors etc
• No changes in level, but if unavoidable a choice of steps and ramp with max. gradient 1:20, clearly marked and well lit with handrails and non-slip, non-glare surfaces

5. Safe environments so people can independently use, enjoy and move around places and spaces freely without fear of coming to harm

• Important not to let safety concerns overrule issues of independence any more than necessary
• No trip hazards
• Flush thresholds
• Flat, plain, non-slip flooring & paving
• Handrails in clear colour contrast to walls
• Camouflaged doors can prevent residents from entering unsafe areas
• Outside enclosed spaces that are easy to navigate, overlooked and with flat, nonslip, plain paving, raised beds, seating and shelter, flat topography and no trip hazards

6. Comfortable environments so people feel at ease and are able to visit, use and enjoy places and spaces of their choice without physical or mental discomposure. Meeting the other five principles contributes to comfort but also:

• Quiet, calm surroundings
• Soft furnishings to deaden noise
• Discreet alarms
• Planting to buffer traffic noise
• Large windows with low sills and nearby seating as attractive or interesting views, especially of nature, can have a therapeutic effect and can reduce blood pressure and stress levels

**Extra Care Housing and dementia**

Housing with care, such as extra care and continuing care housing, is becoming a preferred alternative amongst commissioners of adult social care to care homes for people with dementia. Research suggests that many people with dementia can lead good quality lives in extra care housing, at least in the mild to moderate stages, but they often experience loneliness and social isolation and a lack of acceptance by other residents.3, 4 For example, Midland Heart’s research found that the needs of some people with severe dementia are better met in residential care.

Although specialist housing is designed to meet the needs of older people who need some support and care, it is not generally specifically designed to be dementia friendly, although this is beginning to change. The Housing LIN *Design principles for extra care factsheet* stresses that design for dementia

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principles must be incorporated into the design of extra care housing and points out that these will benefit all users of the housing.

Although not specifically related to design for dementia, the *Housing our Ageing Population: Panel for Innovation* report (HCA, 2009) has been influential in encouraging housing providers and developers to rethink how they design their properties. The report recommends 10 design components for housing for older people derived mainly from their study tour of 24 schemes in 6 countries:

1. generous internal space standards and flexible layouts
2. maximising natural light through the placement, size and detail of windows
3. building layouts that avoid internal corridors and single-aspect flats and provide large balconies, patios or terraces
4. adaptable homes in which new technologies can be easily installed
5. building layouts that promote circulation areas as shared to encourage interaction
6. multi-purpose space accommodating a range of activities
7. designing homes to be part of the street and public realm and nurturing the natural environment
8. energy-efficient and well insulated
9. adequate storage
10. shared external surfaces that give priority to pedestrians

We are now beginning to see private development companies in the sector incorporating these components into new build and looking into how to adapt existing properties but they have found that innovative solutions are sometimes required to ensure that the resulting design fits into the local character of the street.

**Designing dementia friendly neighbourhoods**

In terms of making neighbourhoods more dementia friendly, much can be done at the design level. Indeed, the design of the environment can make a big difference to their level of independence and ability to use and find their way around the neighbourhood. Importantly, in *Streets for Life* (Burton & Mitchell, 2006), the authors identified 6 principles of dementia friendly environments, namely: familiarity, legibility, distinctiveness, accessibility, safety and comfort and made over 70 recommendations. From those recommendations the following 17 key design features of new dementia friendly neighbourhoods stand out:

1. Small blocks laid out on an irregular (deformed) grid with minimal crossroads
2. A hierarchy of familiar types of streets, including high streets and residential side streets
3. Gently winding streets
4. Varied urban form and architecture that reflects local character
5. A mix of uses, including plenty of services, facilities and open space
6. Permeable buffer zones, such as trees and / or grass verges, between busy roads and footways
7. Buildings and facilities designed to reflect uses
8. Obvious entrances to buildings
9. Landmarks and environmental cues
10. Special / distinctive features at junctions, e.g. street furniture, trees

11. Wide, flat, smooth, plain, non-slip footways separate from cycle lanes

12. Frequent pedestrian crossings with audible and visual cues suitable for older people

13. Level changes only when unavoidable, clearly marked with handrails

14. Clear signs throughout

15. Frequent sturdy public seating in warm materials, with arm and back rests

16. Enclosed bus shelters, with seating and transparent walls or large, clear windows

17. Ground level public toilets

Where no new development is planned, the following improvements are likely to be helpful for people with dementia:

1. Add landmarks, distinctive structures, open spaces or places of activity

2. Add special features (e.g. post boxes, telephone boxes, trees, statues) at junctions, particularly complex ones

3. Add porches, canopies and clear signs to make entrances to public buildings obvious

4. Increase the widths of footways (e.g. by reducing the widths of roads)

5. On busy roads, create a green buffer zone between pedestrians and cars

6. Move cycle lanes from footways to roads

7. Increase the frequency of pedestrian crossings

8. Where there are steps, provide a slope or ramp (no more than 1 in 20) as well

9. Add handrails to steps or ramps, if they don't have them

10. Fix clear signs and symbols (where existing ones are poor) to publicly accessible buildings, preferably perpendicular to walls

11. Remove all unclear and unnecessary signs

12. Replace all unclear road and directional signs with clear ones

13. Increase variety in the existing built form (e.g. by painting doors and windows different colours and adding details such as window boxes)

14. Add trees and street furniture where possible

15. Make sure there are public seats, toilets and bus shelters that are suitable for older people

16. Make sure gates and doors only require up to 2kg of pressure to open

17. Improve audible cues at pedestrian crossings where necessary and increase crossing times

18. Replace cobbled, rough or patterned footways with smooth, plain ones

19. Reduce street clutter (e.g. boards, adverts, signs)

20. Increase the amount of street lighting where necessary

Work conducted with people with dementia by Alzheimer’s Australia NSW® has also identified the following as the most important outdoor design features:

- wide, flat, bicycle-free footways

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• drive in / drop off points outside important venues
• clusters of shops
• non-slip, non-reflective paving
• clearly marked glass doors
• plenty of seating with arm and back rests
• good lighting
• dementia friendly signs and symbols
• sheltered bus stops with handrails and seating
• frequent pedestrian crossings
• handrails at crossings, bus stops, safety islands and corners

All these design for dementia recommendations complement those for making neighbourhoods more age friendly including Help the Aged’s (now Age UK) manifesto for lifetime neighbourhoods,7 the World Health Organisation’s global age-friendly cities guide,8 the Lifetime Neighbourhoods report and the Inclusive Design for Getting Outdoors (I’DGO) consortium.9

Conclusions
In conclusion, a dementia friendly community should provide a good choice of different types of housing with care and general housing with home-based health and social care services and ensure that the design of housing and neighbourhoods supports and enables people with dementia.

A key recommendation in Dementia 2012 is for Alzheimer’s Society to develop an understanding of what makes a dementia friendly community. They are gathering information and evidence on all the elements important to dementia friendly communities and believe that design and housing are likely to play a key role. Their report on housing and dementia, due out soon, begins to examine this role but they are very keen for people working in housing and design to share what evidence they have to help shape the development of the concept of dementia friendly communities and the role housing and design can play.

To read the full viewpoint by Dr Lynne Mitchell, Breaking New Ground: The Quest for Dementia Friendly Communities, go to:

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