



Age Friendly NYC

Enhancing Our City's
Livability for Older
New Yorkers



Michael R. Bloomberg
Mayor
Christine C. Quinn
City Council Speaker



THE CITY OF NEW YORK
OFFICE OF THE MAYOR
NEW YORK, N.Y. 10007

August 2009

Dear Friends:

Over the next 25 years, New York City's population of adults over age 65 is expected to increase by nearly 50%. Changing demographics are accompanied by changing opportunities and changing needs. Our society must redefine the concept of what it means to grow older.

Older New Yorkers are leading active, healthy lives. Many remain in the workforce beyond traditional retirement age, and others are seeking new opportunities to be socially engaged.

To prepare our City for this "aging revolution," I launched the *Age-friendly NYC* initiative in collaboration with City Council Speaker Christine Quinn and the New York Academy of Medicine. *Age-friendly NYC* brings together older New Yorkers, government agencies, nonprofit leaders, members of the business community, and a variety of other stakeholders to assess New York's "age-friendliness." Together, we have challenged ourselves, and we challenge all New Yorkers, to build a city that furthers the individual and collective well-being that results when we celebrate our aging.

Many strategies and recommendations are discussed in the following pages. As you read this report, I urge you to join our progress in making New York City a vibrant, healthy, and safe place to grow older.

Sincerely,

A handwritten signature in cursive script that reads "Michael R. Bloomberg".

Michael R. Bloomberg
Mayor



CHRISTINE C. QUINN
SPEAKER

THE COUNCIL
OF
THE CITY OF NEW YORK
CITY HALL
NEW YORK, NY 10007

TELEPHONE
212-788-7210

Fellow New Yorkers:

New York City can be a wonderful and welcoming place for older adults. Access to public transit and quality health facilities, close proximity of stores and services, and the sense of community you get in our diverse neighborhoods—all these factors make our city an attractive place in which to grow older.

But we still have plenty of work to do. We've heard concerns from older New Yorkers ranging from ageism to affordable housing. And with our city expected to add roughly half a million older adults in the next twenty years, we need to start planning now to make sure we remain age-friendly.

That's why the Council has partnered with Mayor Bloomberg and the New York Academy of Medicine (NYAM) on the "Age-Friendly NYC Initiative." With the help of NYAM, the Council has met with older adults in a number of communities, and asked both what they like about living in New York City and what they would like to see changed.

We coordinated with advocates, academics, the business community, and other experts from a variety of fields to get their advice and ideas. And we especially want to thank former Senior Centers Subcommittee Chair James Vacca, and the many Members that hosted forums in their communities.

The following report outlines the goals and initiatives from the government sector in a wide range of areas that affect older adults. We think these ideas are a great start, but we want to hear your ideas as well. Because working together, we can truly make New York the model of an age-friendly city.

Sincerely,

Christine C. Quinn
Speaker, NYC Council

Maria del Carmen Arroyo
Chair, Committee on Aging

Melissa Mark-Viverito
Chair, Subcommittee on
Senior Centers

TABLE OF Contents

Executive Summary	06
Timeline and Select Initiatives	09
Introduction	12
Initiatives	26
Community and Civic Participation	28
Employment & Economic Security	32
Volunteerism	36
Cultural & Recreational Activities	38
Information & Planning	42
Housing	46
Affordable Housing Development	50
Homeowner & Renter Assistance	54
Aging in Place	58
Public Spaces and Transportation	64
Accessible & Affordable Transportation	68
Safe & Age-friendly Public Spaces	72
Planning for the Future	78
Health and Social Services	82
Wellness & Healthcare Planning	88
Assistance to At-Risk Older Adults	94
Access to Nutritious Food	100
Caregiving & Long-Term Care	106
Palliative Care & Advance Directives	114
Next Steps	118
Appendices	120
Issues and Initiatives Chart	120
Vision Statement	124
Endnotes	128
Acknowledgments	131





EXECUTIVE SUMMARY



New York City's greatest asset has always been its people, and older adults its greatest treasure. We are firmly committed to making sure that New York continues to be a vibrant, healthy, and safe place to live and work in the years to come. In Fall 2007, Mayor Bloomberg, Council Speaker Quinn, and the New York Academy of Medicine launched *Age-friendly NYC*. The goals of Age-friendly NYC are to assess our City's responsiveness to the needs of older New Yorkers, develop recommendations, and implement strategies that will allow New York to sustain and enhance its status as an "age-friendly" city.

Age-friendly NYC builds on the work of the World Health Organization's *Global Age-friendly Cities* initiative, which engaged older adults and others in 35 cities around the world in identifying the core components and features of an age-friendly city. Both Age-friendly NYC and the WHO's efforts come in the wake of demographic research indicating a population explosion of older adults in the next

several decades. The New York City Department of City Planning estimates that from 2005 to 2030, the number of New Yorkers who are age 65 and older will increase by 47%, from 922,000 to more than 1.35 million. The growth of our City's older adult population mirrors national trends. The Census Bureau estimates that the number of Americans age 65 and older will double over the next 30 years—from 40.2 million in 2010 to 81.2 million in 2040. The WHO similarly estimates that the number of people age 60 and older as a proportion of the global population will double from 11% in 2006

"The number of older persons is projected to more than triple worldwide over the next half century."

The World Health Organization
Age-Friendly Cities Guide (2007)

to 22% by 2050. As Dr. Robert Butler has described it, we are in the midst of a “Longevity Revolution.”

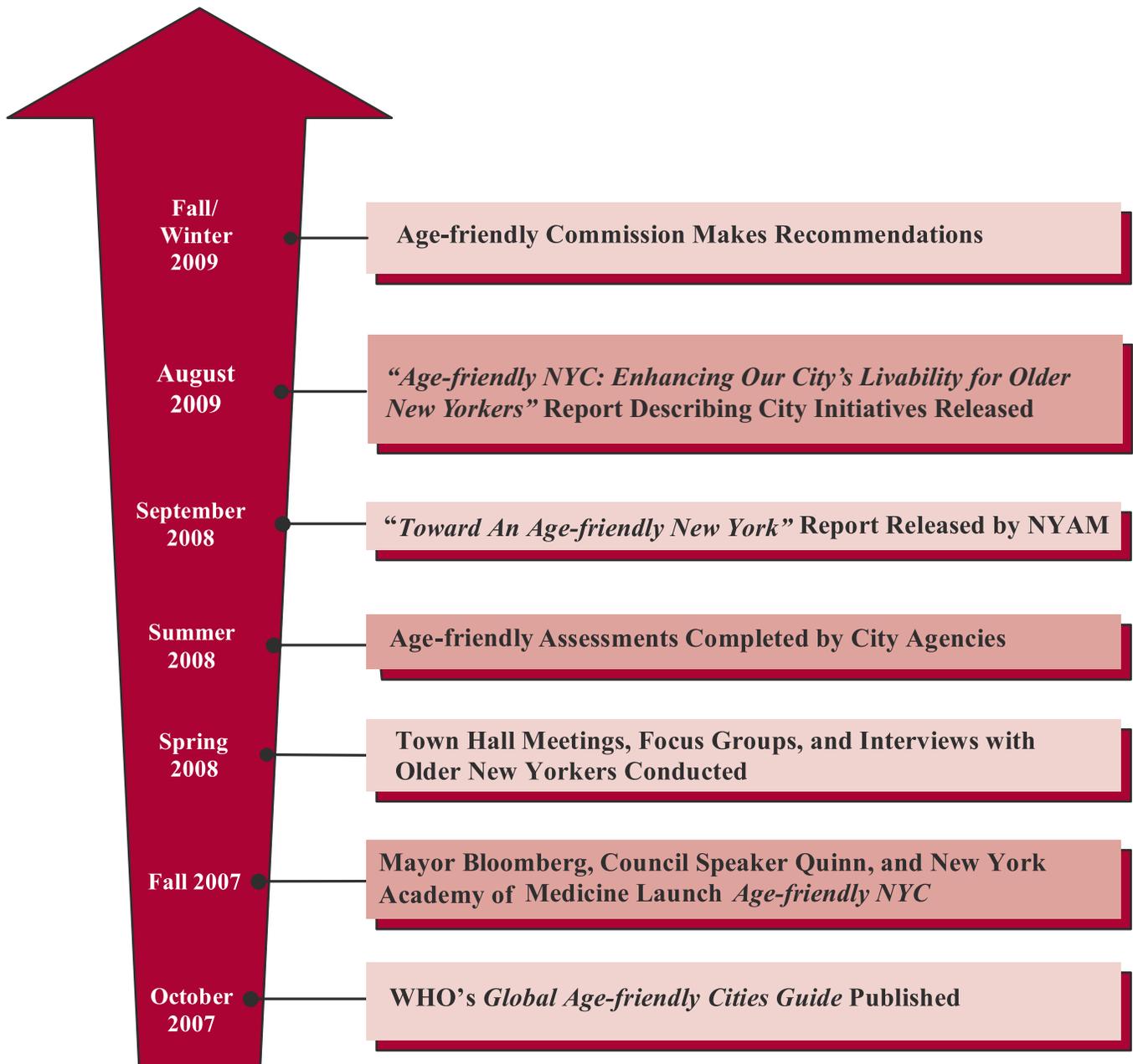
Using the Global Age-friendly Cities initiative as a framework, the City and NYAM embarked on a comprehensive assessment of the age-friendliness of New York City. The initiative began by engaging in a dialogue with older New Yorkers, as well as leaders from the private, nonprofit, and academic sectors. As part of this effort, NYAM and the City Council held town hall meetings, conducted focus groups, and obtained feedback from nonprofit organizations and the academic community. The Mayor’s Office simultaneously led an assessment of the age-friendliness of the programs and services provided by City government agencies, held meetings of key agency leaders, and conducted a series of seminars on such topics as promoting active aging and universal design. In September 2008, NYAM released a findings report that highlighted the key issues raised in the town hall meetings and focus groups, as well as in conversations with the academic and nonprofit sectors. NYAM then convened four work groups (Academia, Civil Society, Health and Social Services, and Business and Labor) to further engage representatives from these sectors.

This report represents the next stage in our work. We have identified and recommended a series of initiatives that will position New York as an age-friendly city in the decades to come in response to feedback from City agencies, community leaders, other interested stakeholders and, most importantly, older New Yorkers. While the initiatives are grouped into four main areas—community and civic participation; housing; public spaces and transportation; and health and social services—they span all domains and will benefit New Yorkers of all ages. They range from issues as public as the movement of traffic and the design of public seating to as private as managing personal health concerns and living one’s final years with grace

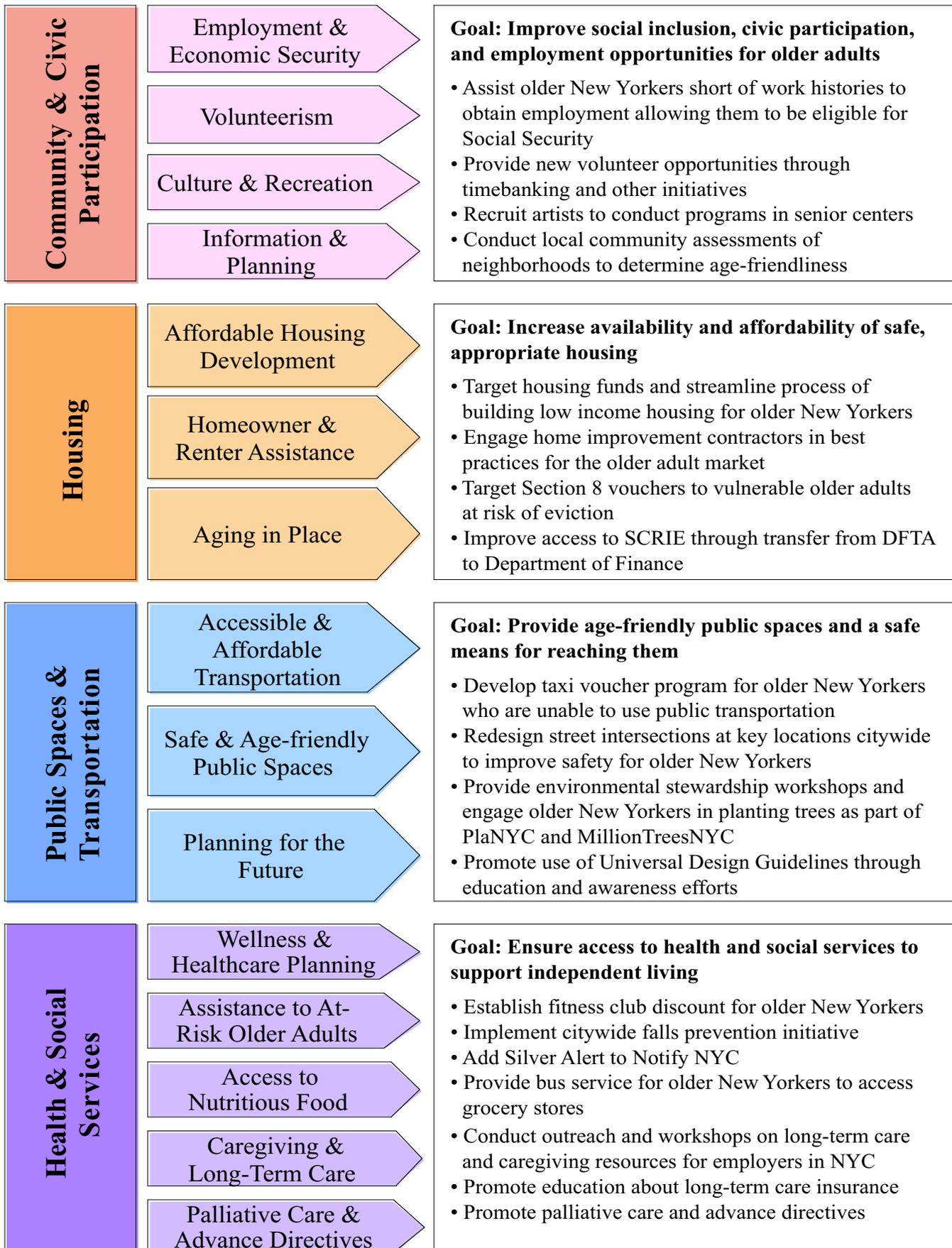
and dignity. The initiatives are described in the following pages, and a complete listing of all of them (as well as the concerns and issues that they seek to address) can be found in an appendix to this report.

In collaboration with NYAM, the Mayor's Office and City Council will work with their public and nonprofit partners to implement the recommendations included in this report. In addition, NYAM will be convening the Age-friendly New York City Commission, a group charged with ensuring that the public, nonprofit, and private sectors continue to collaborate in meeting the demographic challenges and take advantage of the opportunities posed by a rapidly increasing population of older New Yorkers. We look forward to sharing our continued successes with you as we move forward with cementing New York's position as an age-friendly city.

Age-friendly NYC Timeline



AGE-FRIENDLY NYC: Select Initiatives



INTRODUCTION





Beautiful architecture. Free summer concerts. A multitude of volunteer programs and a variety of cultural institutions. Public transportation available 24 hours a day. Neighborhoods with a sense of community and a city with a sense of fun. These are just a few of the many assets of our City that older adults highlighted when we asked them to describe what they love about New York.

Of course, New York City's greatest asset has always been its people, and older adults its greatest treasure. Our City's rich history of innovation and planning for the future has particularly touched programs, services, events, and activities designed for older New Yorkers. In 1943, for example, the nation's first senior center—the William Hodson

Community Center—opened in the Bronx. Twenty five years later, Mayor John Lindsay established the Mayor's Office for the Aging, with one of its first mandates being to conduct a landmark study of inner city older adults. And in 1986, our City was the birthplace to the country's first NORC, or Naturally Occurring Retirement Community, at the Penn South Houses—a service model that brought health and social services directly to a complex of buildings where many older adults reside.

Today, New York City strives to be a place that embraces older New Yorkers as vibrant contributors to the City and its communities and where older New Yorkers are supported in their endeavors to live the fullest lives possible. With local government, non-profit organizations, and private companies working together, we aim to be a model city comprised of communities that are characterized by their ability to support and engage people as they age. In fact, our City was named one of the “Top Ten Cities for Seniors” by *Sperling’s Best Places* in 2006 based on an analysis of 50 criteria that included senior living facilities, comprehensive medical care, and specialized transportation services.¹

We must continue to plan and innovate to ensure that New York will maintain its status as a vibrant, safe, and healthy place to grow older. When the World Health Organization (WHO) announced its *Global Age-friendly Cities* initiative in 2007, we were excited at the opportunity to join their efforts.

Age-friendly Cities is a comprehensive effort to prepare the world’s urban centers for an increasing older adult population. As envisioned by the WHO, age-friendly cities are ones that optimize opportunities for health, participation, and security in order to enhance quality of life as people grow older. City policies, services, settings, and structures support active aging by

- Recognizing that older people have a wide range of capacities and resources
- Anticipating and flexibly responding to needs and preferences related to aging
- Respecting the decisions and lifestyles of older adults
- Protecting the most vulnerable, and
- Promoting the inclusion in and contributions of older adults in all aspects of community life.

1943: William Hodson Community Center, the nation’s first senior center, opens in the Bronx. Gertrude Landau, a pioneer in aging services, volunteered to coordinate a room where older people could come to play pinochle, drink coffee, and listen to the radio.

The WHO initiative engaged 35 cities around the world in evaluating their communities and neighborhoods through the lens of the WHO's "Active Ageing Framework." This framework shifts city planning away from a "needs-based" approach toward a "rights-based" approach recognizing that individuals should have equal opportunity and treatment in all aspects of life as they grow older. Istanbul, London, Melbourne, Mexico City, Moscow, Nairobi, New Delhi, New York, Portland, Rio de Janeiro, Shanghai, and Tokyo were among

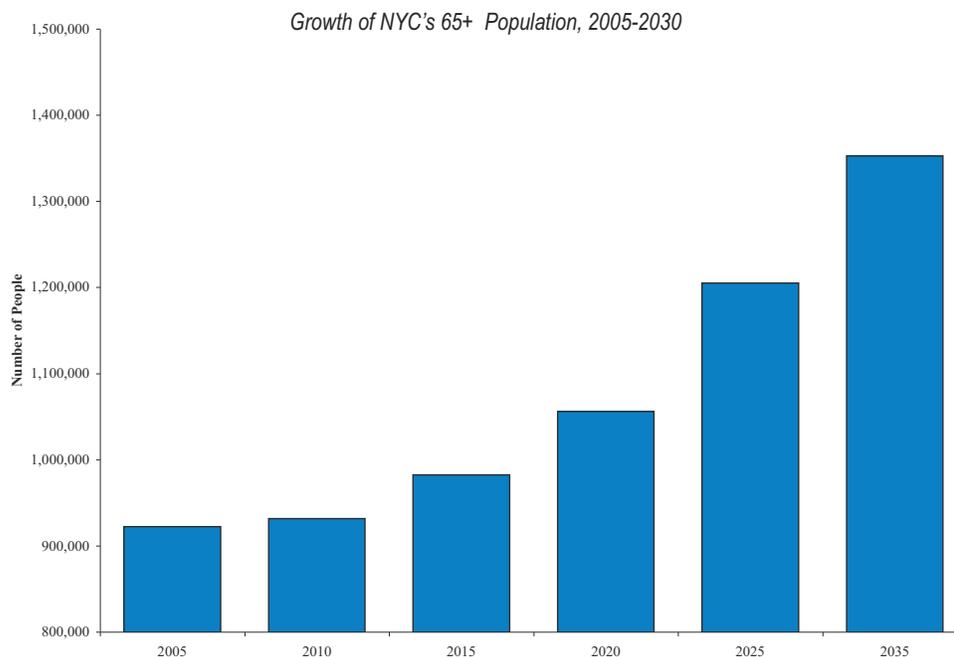
World Health Organization Age-friendly City Domains



Source: Age-friendly Cities Guide, World Health Organization (2007)

the participating cities. Participating cities surveyed older adults, caregivers, and service providers to identify the advantages and barriers faced by older adults in eight areas of city living, including transportation, housing, health services, and employment. The WHO announced its findings in the *Global Age-friendly Cities Guide*, which contains a checklist of the core components and features of an age-friendly city that cities may use to assess their age-friendliness and gauge their progress.

Changing demographics confirm that embarking on a planning process aimed at enhancing New York City's responsiveness to older adults is critical. New Yorkers are now expected to live longer than the average U.S. citizen by 15 months,² and it should come as no surprise that the population of older New Yorkers is expected to grow dramatically in the next 20 years. The New York City Department of City Planning estimates that from 2005 to 2030, the number of New Yorkers who are age 65 and older will increase by 47%, from 922,000 to more than 1.35 million.



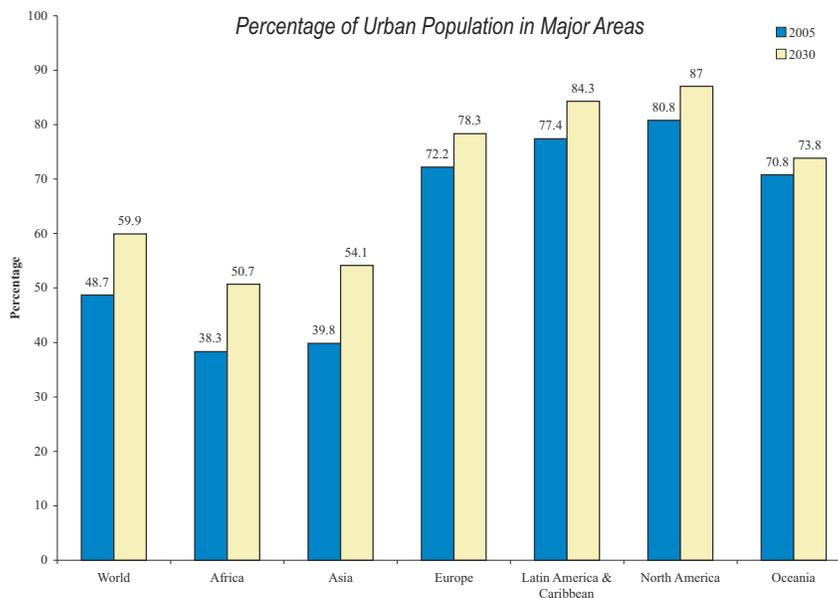
Source: NYC Department of City Planning, 2030 Report

1951: First White House Conference on Aging develops a 10-year blueprint for policies and programs to address the challenges posed by America's changing demographics.

The fastest growth is predicted for older adults ages 65 to 74, as their numbers are expected to increase by at least 60% from 2005 to 2030. The number of older adults age 80 to 84 is also expected to grow significantly (by 31%) during the same time period.³ The growth of our City's older adult population mirrors national trends. The Census Bureau estimates that the number of Americans age 65 and older will double over the next 30 years—from 40.2 million in 2010 to 81.2 million in 2040.⁴ An ever-increasing number of this growing population of older adults will be living in cities. In 2005, 48.7% of the world population resided in urban areas. This figure will rise to nearly 60% by 2030.

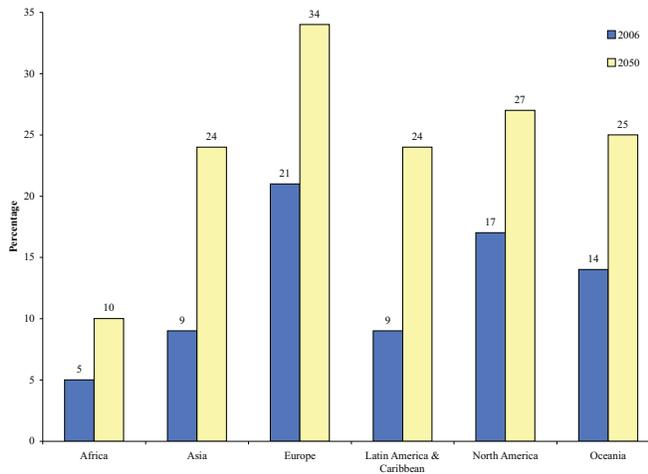
City living is becoming an increasingly popular setting for individuals to live out their older years. Individuals who have left urban life for the suburbs often move back as they grow older to be closer to their adult children, extended families, healthcare providers, and social support networks. New York City continues to be a destination of choice in this regard. In fact, 47% of older adults who leave Florida relocate to New York City.⁵

The growth of the older adult population in numbers, however, doesn't tell the full story. The age distribution of the world's population is undergoing a profound transformation. As mortality and fertility have fallen, the age



Source: *Age-friendly Cities Guide*, World Health Organization (2007)

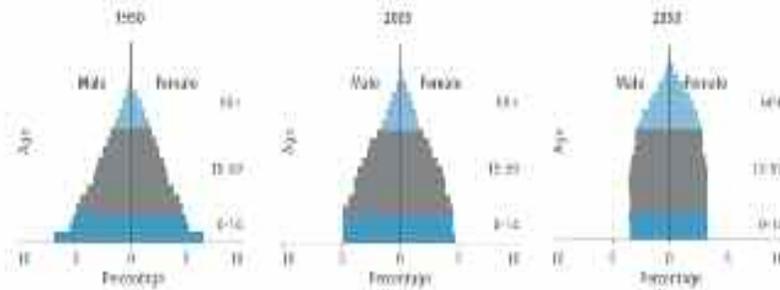
Percentage Distribution of World Population 60 or Over by Region, 2006 and 2050



Source: Age-friendly Cities Guide, World Health Organization (2007)

distribution has been shifting gradually to older ages. The number of people age 60 and older as a proportion of the global population will double from 11% in 2006 to 22% by 2050. The United Nations predicts that by 2045, the number of adults 60 years and older worldwide will outnumber children under the age of 15 for the first time.⁶ As Dr. Robert Butler has described it, our world is in the midst of a Longevity Revolution.

Percentage Distribution of World Population 60 or Over by Region, 2006 and 2050



Source: United Nations World Economic and Social Survey (2007)

1964: Older Americans Act is passed. The federal Administration on Aging and the network of community-based providers for aging services are created.

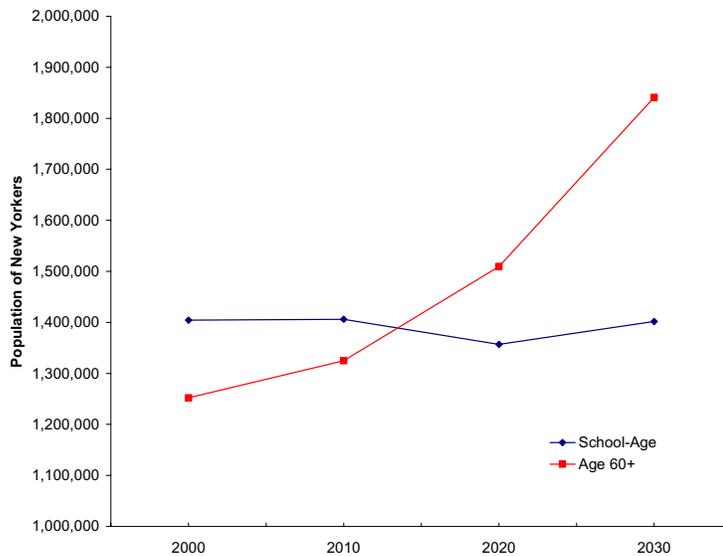
“The Longevity Revolution is a great intellectual and social as well as medical achievement and an opportunity that demands changes in outmoded mind-sets, attitudes, and socio-economic arrangements.”

Robert N. Butler, M.D.

The Longevity Revolution: The Benefits and Challenges of Living A Long Life (2008)

The Longevity Revolution has likewise taken our City by storm. According to the New York City Department of City Planning, the City’s older adult (age 60+) population will soon outnumber the population of school-age youth (ages 5 to 17).

NYC Population: School-Age Youth vs. Older Adults



Source: NYC Department of City Planning

Inspired by our City’s growing population of older New Yorkers and the WHO’s Global Age-friendly Cities initiative, Mayor Bloomberg, City Council Speaker Quinn, and the New York Academy of Medicine (NYAM) have launched *Age-friendly NYC*. The goals of this initiative are to assess our City’s responsiveness to the needs of older New Yorkers, develop recommendations, and implement strategies that will allow New York to sustain and enhance its status as an “age-friendly” city.

Through *Age-friendly NYC*, we aim to:

- Empower individuals as they age to live independently and vibrantly;
- Support communities to foster quality of life and community connectedness in a manner that meets the wide-ranging needs and preferences of older individuals and their families; and
- Ensure that City planning and City-funded programs are responsive to the needs and preferences of the most vulnerable older New Yorkers and are designed to support their lifestyles and choices.

BACKGROUND & PROCESS





Using the Global Age-friendly Cities initiative as a framework, the City and NYAM embarked on a comprehensive assessment of the age-friendliness of New York City. We began by engaging in a dialogue with older New Yorkers, as well as leaders from the private, nonprofit, and academic sectors. As part of this effort, NYAM and the City Council (a) held 14 town hall meetings across the City, (b) conducted smaller focus groups to capture underrepresented voices such as immigrant older New Yorkers, (c) obtained feedback from nonprofit groups and the academic community, and (d) convened eight expert roundtables that focused on housing development, transportation, tenant rights, business, civic engagement, outdoor spaces, health, and social services.

The Mayor's Office simultaneously led an assessment of the age-friendliness of the programs and services provided by City government agencies. City agency heads were asked to evaluate to what extent the City's policies, programs, and resources meet the needs of older adults by using an adaptation of the checklist contained in the WHO's *Global Age-friendly Cities Guide*. They were also asked to identify existing and potential initiatives—particularly those that involve the efforts of

“In collaboration with the City Council and the New York Academy of Medicine, this project will completely re-envision what it means to grow old in New York...”

– New York City Mayor
Michael Bloomberg (2008)

“Longer lives must be planned for.”

National Institute on Aging
Why Population Matters:
A Global Perspective (2007)

23

multiple City agencies and/or the nonprofit sector—aimed at meeting the needs of older adults. The Mayor’s Office collected additional feedback and recommendations by holding meetings of key agency leaders in three functional groups: health and social services; infrastructure; and civic and social participation. The Mayor’s Office also conducted a series of seminars which discussed: (a) what cities across the country have been doing to meet the needs of older adults; (b) the role of universal design (i.e. designing buildings and public spaces to be accessible for all) in creating a livable city for all ages; and (c) promoting active aging.

In September 2008, NYAM released *Toward An Age-friendly New York City: A Findings Report* (the “NYAM Report”). The report highlighted the key issues raised by older adults in the town hall meetings and focus groups, as well as the feedback gathered from the academic and nonprofit sectors. NYAM then convened four work groups—Academia, Civil Society, Health and Social Services, and Business and Labor—to further engage representatives from these sectors.

1965: Janet Sainer develops Project Serve for the Community Service Society. This Staten Island-based project has been acknowledged as the prototype for the national volunteer program pilots created for older adults.

INITIATIVES





This report represents the next stage in our work. In response to feedback from City agencies, community leaders, and a variety of other stakeholders, we have recommended a series of initiatives that will position New York as an age-friendly city in the decades to come. Most critical to these recommendations, however, have been conversations with older adults.

Older New Yorkers love New York. We celebrate and build on the strengths they've identified in our recommendations. Not shy to offer strong New York opinions, older New Yorkers also have many suggestions on how to overcome those aspects of New York City living that can be particularly daunting. The initiatives in the following pages aim to address their concerns and implement their sug-

gestions. While the initiatives are grouped into four main areas—community and civic participation; housing; public spaces and transportation; and health and social services—they span all domains and will benefit New Yorkers of all ages. They range from issues as public as the movement of traffic and the design of public seating to as private as managing personal health concerns and living one's final years with grace and dignity.

“Making cities age-friendly is one of the most effective policy approaches for responding to demographic aging.”

District of Saanich, British Columbia
Global Age-Friendly Cities Project
Report (2008)





It is hard not to think of the words community and diversity when thinking about New York. There are 174 languages spoken in our City, and 36% of the population was born in a country other than the United States.⁷ According to the American Community Survey, our City also has the largest population of individuals who are lesbian, gay, or bisexual (LGB) of any city in the country,⁸ and the Urban Institute notes that New York is one of three states (the others being California and Florida) with the greatest number of same-sex couples who are older adults.⁹

New York's diversity contributes to an eclectic mix of neighborhoods, which provide numerous opportunities for older adults to remain socially engaged. Opportunities for lifelong learning abound. Dozens of colleges and universities, public and private, call New York City home. Many of them

sponsor courses and activities that are specially designed for older adults. For example, the City University of New York (CUNY) offers special courses for older New Yorkers that include computer, health, legal, and personal finance classes, as well as several arts and fitness programs. CUNY continuing education programs encourage older adults to participate by providing tuition discounts.



“WHAT I LOVE ABOUT GROWING OLDER IN NYC:
I love New York... the Met, the Opera, Lincoln Center,
museums. New York is the capital of culture.”

In addition to individual learning, the City offers a wealth of opportunities to volunteer. Nationwide, 60 to 70% of older adults participate in formal or informal volunteer activities.¹⁰ Older adults who volunteer demonstrate increased personal well-being, including fewer health issues with advancing age and reductions in feelings of depression, than those who do not.¹¹ Their volunteer work also benefits the community, generating an estimated \$162 billion annually for the American economy.¹² Older New Yorkers are often active participants in civic affairs through their involvement with community boards and advisory councils, as well as membership in nonprofit boards and tenant organizations. One example is the Senior Advisory Council at the City’s Department for the Aging.

In seeking to learn about volunteer opportunities, civic events, or perhaps just reviews of neighborhood restaurants, older New Yorkers and others have a variety of available resources. City government has been at the forefront of increasing New Yorkers’ access to information with the implementation of the 311 system and ACCESS NYC. With staff who speak over 170 languages, 311 is available 24 hours per day, seven days per week to answer questions and address issues concerning government services and agencies, including those that serve older adults. The rollout of the free online service, ACCESS NYC (www.nyc.gov/accessnyc), has enabled New Yorkers to identify and determine their eligibility for over 30 city, state, and federal benefit programs. These include the Home Energy Assistance Program (HEAP), the Senior Citizen Homeowners’ Exemption (SCHE), and the Senior Citizen Rent Increase Exemption (SCRIE). New York City is the ideal place for older adults who want to be involved, volunteer, or access information.



1967: The Age Discrimination in Employment Act is passed to protect individuals who are 40 and over from employment discrimination based on age, including forced retirement.

COMMUNITY & CIVIC PARTICIPATION AGENDA

Goal: Improve social inclusion, civic participation, and employment opportunities for older adults

Employment & Economic Security

- Provide job training and search assistance to older New Yorkers
- Increase number of paid job opportunities for older New Yorkers
- Assist older New Yorkers short of work histories to obtain employment allowing them to be eligible for Social Security

Volunteerism

- Promote intergenerational volunteering and learning through partnerships with schools and nonprofit organizations
- Provide new volunteer opportunities and expand resources for older New Yorkers through timebanking and other initiatives

Cultural & Recreational Activities

- Establish citywide partnership between senior centers and libraries
- Recruit artists to conduct programs in senior centers
- Provide a guide of discounted arts/cultural events for older New Yorkers

Information & Planning

- Publicize citywide opportunities for older New Yorkers through new older adult-focused NYC & Co. website
- Redesign DFTA's website to be more user-friendly and provide greater information about services
- Conduct local community assessments of neighborhoods to determine age friendliness
- Conduct cultural competency trainings on LGBT issues with the City's senior service providers



► **Issue: Employers and industries need assistance in recruiting, placing, and training older workers to meet the demands of today's economic environment.**

► **Initiative: Provide job training and search assistance to older New Yorkers.** Whether by design or need, older New Yorkers are working longer. More and more, retired workers are seeking ways to re-enter the workforce. Some people, dependent on pensions now depleted due to the economic downturn, have been forced to enter the labor force in order to supplement their income. Others are interested in contributing their skills to the labor market in order to feel a sense of fulfillment and purpose. Remaining engaged is a concept that increasingly includes participation in the labor force past retirement age. According to the U.S. Census Bureau, almost one in three Americans between the ages of 65 and 69 remains in the workforce; among those age 70 and older, one in five is either working or desires to work. New York City should play an active role in helping older New Yorkers re-engage in work. There are economic benefits to the individual as well as health benefits that result from being engaged in meaningful and purposeful work.

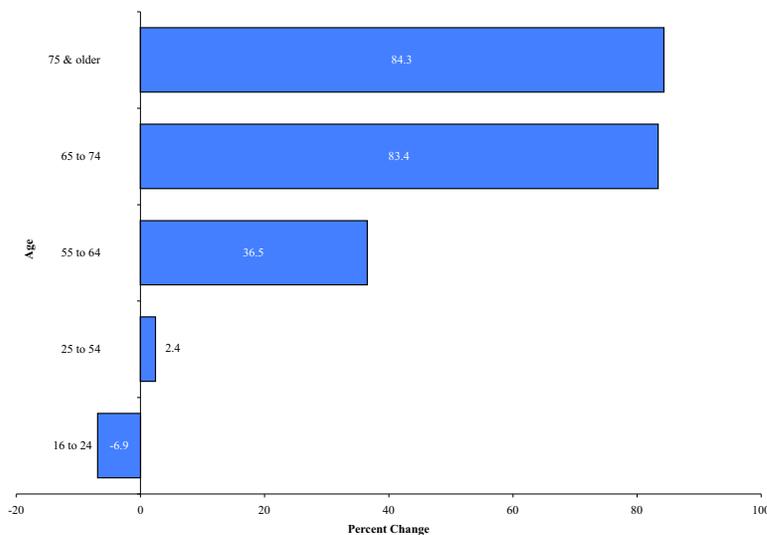
A clear area of opportunity for job training is in the field of technology. For example, many older adults who are in or wish to re-enter the workforce need assistance with using e-mail and conducting job searches through the Internet.¹³ The City will assist older New Yorkers who are seeking work by providing training in the use of technology while also providing opportunities to gain specialized skills in growth industries. The Senior Employment Services (SES) program at the Department for the Aging (DFTA) currently offers classroom training on computer applications and training in areas like customer service and employer/employee relations. The City will continue to offer these programs while looking for opportunities to partner with the myriad of workforce training providers throughout the City. Through increased linkages with the City's Department of Small Business Services and its Workforce1 Career Centers, as well as other job training providers,

1968: The Mayor's Office for the Aging is established in New York City. Among the new office's first achievements is a landmark study of inner-city older adults and their needs.



older New Yorkers will be able to access career counseling and other specialized services. The training will be tailored to the needs of older New Yorkers—for example those seeking part-time versus full-time employment, and paid employment versus unpaid—and cater to a variety of skill sets.

Percentage Change in Labor Force by Age, 2006-2016



Source: U.S. Bureau of Labor Statistics

► **Issue: Employment opportunities are important for the personal and financial well-being of older New Yorkers.**

► **Initiative: Increase number of paid job opportunities for older New Yorkers.** Because of the increasing need for older New Yorkers to work for pay, the City will explore opportunities to provide paid transitional jobs and increased access to paid employment for this growing segment of the population. The City will tap into federal and state funding streams to provide short-term paid opportunities for income-eligible older New Yorkers seeking employment. Additionally, the City will continue to partner with and expand upon programs like ReServe, through which retired professionals have an opportunity to work on short-term projects for 15 hours per week at a variety of City agencies and nonprofit organizations in exchange for an hourly stipend.

Participants include a wide cross-section of retirees, from attorneys to journalists. Participating in these types of programs will allow retirees to transition back to the workforce while supplementing their income.

► **Issue: A number of older New Yorkers, including recent immigrants and those whose employment histories are limited to informal work, are ineligible for Social Security.**

► **Initiative: Assist older New Yorkers short of work histories to obtain employment allowing them to be eligible for Social Security.** Many older Americans rely on Social Security to meet their living expenses. In fact, according to the U.S. Social Security Administration, 50% of Americans age 65 and older depend on their monthly social security checks as their only source of retirement income.¹⁴ Still, a sizable percentage of the age 65+ population nationwide, nearly 9%, receives no retirement benefits from any source, including social security.¹⁵ According to federal rules, individuals must work in the United States for a combined total of 40 quarters (i.e. 10 years) before they can become eligible for social security. Consequently, older adults who are recent immigrants—as well as those who primarily engaged in work inside the home or in informal work during their working years—may not have the quarters necessary to qualify for benefits. This issue is of particular concern in our City where, as mentioned earlier, more than one-third of our population is foreign born. One study of 2000 census data found that 28% of New Yorkers age 65+ reported no social security income.¹⁶ In fact, among older New Yorkers, reports of no social security income were twice as common among immigrants as among the native-born.¹⁷ To help address this situation, the NYC Center for Economic Opportunity, DFTA, and the City's Human Resources Administration will launch an initiative to assist older New Yorkers who have between 30 and 40 quarters of employment to secure work that would allow them to reach the 40 quarters needed to be eligible for social security. The initiative will include outreach to this population as well as partnering with employers to create and publicize work opportunities.

1974: The National Institute on Aging is established by the National Institutes of Health.



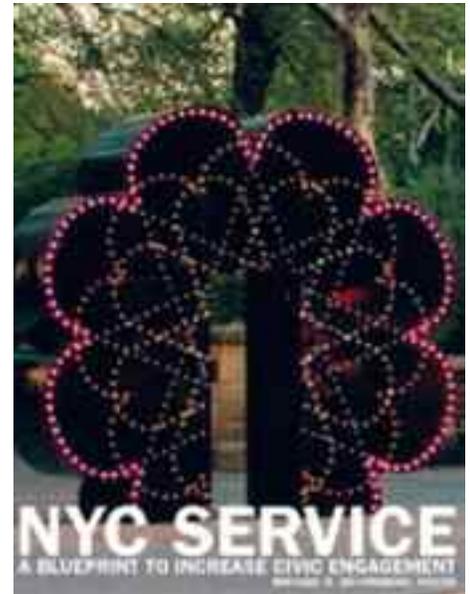
► **Issue:** Many older adults live separately from families and are at risk for social isolation; conversely, many younger adults lack contact with elders.

► **Initiative:** Promote intergenerational volunteering and learning through partnerships with schools and nonprofit organizations. Despite the growing number of older adults engaged in paid and volunteer work, improved access to these opportunities is critical. Many older New Yorkers could benefit from more comprehensive information about the volunteer opportunities available to them.¹⁸ Building upon NYC Service, the Mayor’s initiative to promote a new era of service and volunteerism in New York, the City will explore opportunities for older New Yorkers to participate in intergenerational volunteering—such as a partnership with Learning Leaders. Learning Leaders is New York City’s largest nonprofit organization dedicated to volunteerism in the public schools. An initiative to partner senior centers with local schools will allow older New Yorkers to contribute to the learning of a new generation while providing school children with extra tutoring and other supports.

► **Issue:** Older New Yorkers provide critical resources to the City and seek continued involvement in political and civic activities.

► **Initiative:** Provide new volunteer opportunities and expand resources for older New Yorkers through timebanking and other initiatives. Timebanking programs enable participants to offer and receive services in a managed exchange, wherein one person performs a service for another individual and gets a “time dollar” in exchange. This “time dollar” can then be redeemed for a service from someone else. The range of services for exchange is unlimited, but could include anything from guitar lessons to grocery shopping to snow shoveling. The Department for the Aging (DFTA) will create and manage a timebank system for New Yorkers of all ages that will include extensive outreach and partnership opportunities.

In addition, the City will continue to make a multitude of other volunteer options available through the Mayor’s NYC Service initiative. The NYC Service website, www.nycservice.org, features a database of opportunities for New Yorkers of all ages and contains a search function that highlights those volunteer activities that may be of particular interest to older adults.

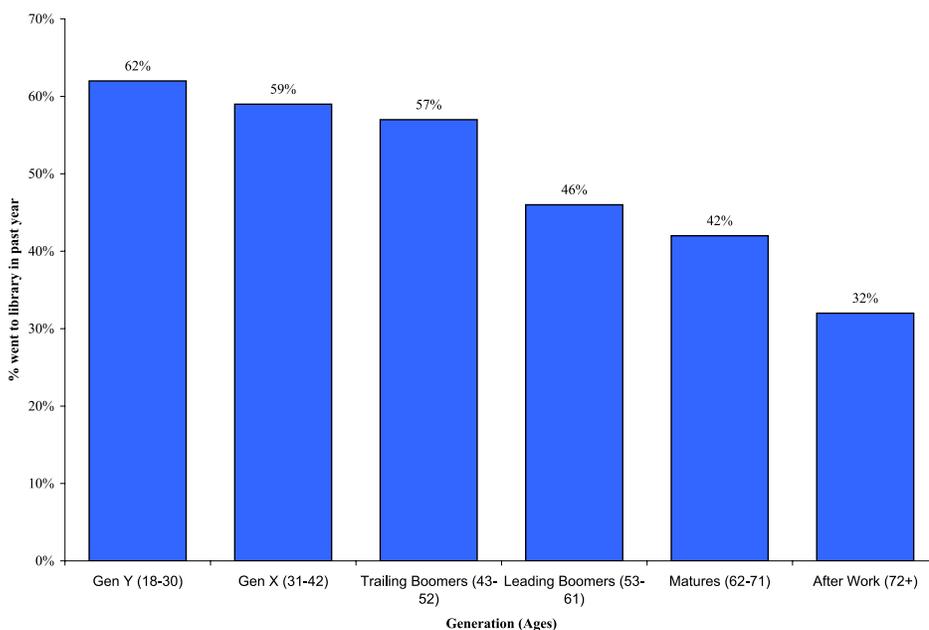




► **Issue:** Use of public libraries decreases after age 50.

► **Initiative:** Establish citywide partnership between senior centers and libraries. New York City has an impressive network of libraries that offers access to information as well as programming and services. The New York Public Library (NYPL) has 90 research and branch libraries that serve nearly 17 million patrons each year. The Queens Library serves 2.2 million people at 62 locations, while the Brooklyn Public Library operates 60 branches. Older New Yorkers should be encouraged to utilize the library system to access books, computers, events, and workshops in order to stay engaged. Public access to computers and the Internet is available citywide,¹⁹ particularly through our public libraries. The Brooklyn Public Library, for example, provides free access to the Internet at more than 850 computer stations throughout the borough, while the New York Public Library has nearly 3100 computers available for public use.

Public Library Use by Generation



Source: Pew Internet & American Life Project & University of Illinois Libraries Survey (2007)



Despite the widespread availability of public libraries, research shows that library use peaks among the young and then slowly declines, with a distinct drop off after about age 50.²⁰ Consequently, the Department for the Aging (DFTA) and NYPL will launch a citywide collaboration between the City’s network of senior centers and the libraries to encourage public library use among older New Yorkers. Through this initiative, library branch managers will partner with senior centers near the libraries to sign-up their members for library cards. Senior centers in the Bronx, Manhattan, and Staten Island have already started participating and DFTA will expand this collaboration citywide. Because a number of older adults are unable to travel or are homebound, the NYPL’s Books by Mail program is a great opportunity for them to still utilize library resources. DFTA will conduct a campaign to make older adults aware of this program and to encourage them to use it. For those older New Yorkers who frequent senior centers, DFTA will also work with the Brooklyn Public Library to establish rotating “mini-libraries” at senior centers in Brooklyn. Providing access to library resources for homebound older adults, those who use senior centers, and those who can visit a library is a critical step in ensuring the health and well-being of older New Yorkers.

► **Issue: Many older adults are interested in cultural activities and desire greater access to them.**

► **Initiative: Recruit artists to conduct programs in senior centers.** Cultural opportunities abound in our City, from the Guggenheim and El Museo del Barrio to Broadway shows and numerous ethnic festivals throughout all five boroughs. As a result, New York has an impressive array of artists who flock to the City and contribute to its status as a capital of culture. Artists often need free or low-cost space to create their art and senior centers need skilled workers and volunteers in order to have creative programs in the centers. DFTA and the City’s Department of Cultural Affairs will launch an initiative in senior centers citywide to offer “studio” space to artists in return for services such as teaching art classes to senior center members. The City will work with local arts organizations to identify artists young and old to participate in the program as a way to enrich programming in senior centers and tap into the City’s vast artistic and other cultural resources.



► **Issue:** New York offers many cultural opportunities, but affordability can be a challenge.

► **Initiative:** Provide a guide of discounted arts/cultural events for older New Yorkers. Because there is so much to do in New York City, it can often be overwhelming to know where to look. The City, in partnership with the Alliance for the Arts, will develop and publish a one-stop resource guide on arts and cultural opportunities specifically geared toward older New Yorkers. Included will be museums, galleries, theaters, and a variety of other venues that offer discounts for older adults. The guide will be made available on DFTA's website and marketed to the City's large network of aging services providers and other community groups.



► **Issue:** Older adults want to pursue their interests and interact socially while staying active and busy.

► **Initiative:** Publicize citywide opportunities for older New Yorkers through new older adult-focused NYC & Co. website. NYC & Company—New York City’s official marketing and tourism organization—recently launched nycgo.com, the Internet resource for visitors and residents to explore what to do and see in New York City. NYC & Company has offices in 18 countries and nycgo.com serves all populations worldwide. As part of an effort to address the special interests of older residents and tourists, nycgo.com created a section that highlights tours, shows, discounts, and other events for this audience in all five boroughs. Additionally, the Mayor’s Office will continue to explore new ways to promote older adult-focused activities and raise general awareness through the NYC & Company portfolio.

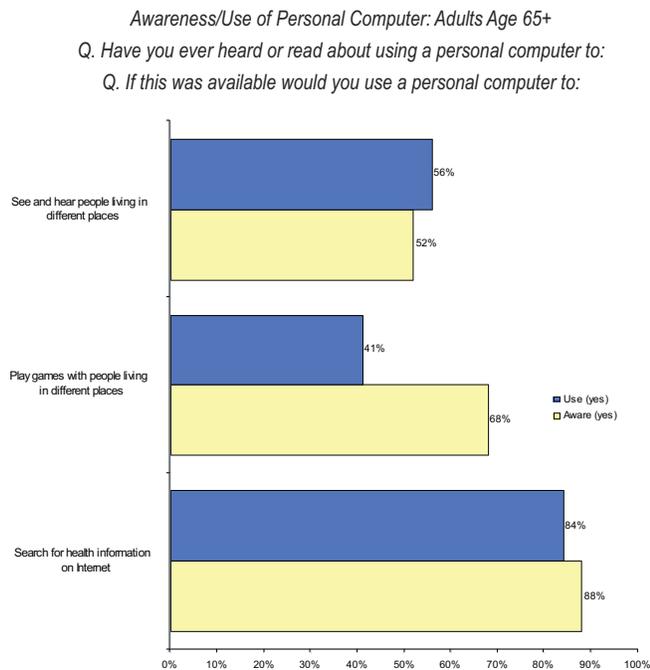
► **Issue:** Older adults desire a "one-stop shop" for information about City services.

► **Initiative:** Redesign DFTA’s website to be more user-friendly and provide greater information about services. Older New Yorkers are increasingly turning to the Internet to obtain information. However, technology is both an opportunity and a challenge.²¹ It is important that the Department for the Aging’s website and other sites to which older adults turn for information adapt to their changing needs and preferences. As a result, DFTA will redesign its website (www.nyc.gov/aging) to make it more user-friendly and more relevant to older adults, caregivers, and the general public. DFTA will create a website that is not only more aesthetically pleasing for all its audiences, but also connects users to helpful information that is easy to access. The new site will be a link to key resources and provide information on numerous City services, programs, and other opportunities for older New Yorkers.



► **Issue:** Older adults desire to be included in all levels of decision-making about their communities' needs.

► **Initiative:** Conduct local community assessments of neighborhoods to determine age friendliness. New York City offers a wealth of opportunities for older adults right in their own communities. The World Health Organization (WHO) has created a checklist of the essential features of an “age friendly city.” Further building on the WHO’s work, the Mayor’s Office, DFTA, the City Council, and New York Academy of Medicine will develop and administer a community needs assessment of the City’s neighborhoods. The purpose of the local assessment will be to determine how well neighborhoods are meeting the needs of older New Yorkers across different domains like infrastructure and social services. Vital to this process will be the investment and engagement of older New Yorkers in evaluating their communities. The assessments will help to create a benchmark to better gauge the strengths and weaknesses of communities throughout the five boroughs. They will also serve as a model for other cities across the country in planning their own responses to the Longevity Revolution.



Source: AARP Foundation, Healthy@Home Survey (2008)

► **Issue:** Some older adults who are lesbian, gay, bisexual, or transgender (LGBT) do not feel welcome in trying to access City services.

► **Initiative:** Conduct cultural competency trainings on LGBT issues with the City’s senior service providers. New York is home to one of the country’s most robust communities of individuals who are lesbian, gay, bisexual, or transgender (LGBT). Indeed, the largest urban population of individuals who identify as lesbian, gay, or bisexual live in the City,²² and New York State (along with Florida and California) is where the nation’s greatest number of same-sex couples reside.²³

Nevertheless, many LGBT New Yorkers report discrimination by peers and professional staff that makes them wary of participating in the City’s services for older adults.²⁴ They are confronted with the untenable choice of living openly but fearfully, or contending with the social isolation and emotional burden of hiding their identities behind closet doors. These older adults are particularly vulnerable because many lack caregivers; more than 90% have no children, 80% have no partner, and 20% have no one to call upon for assistance in an emergency.²⁵

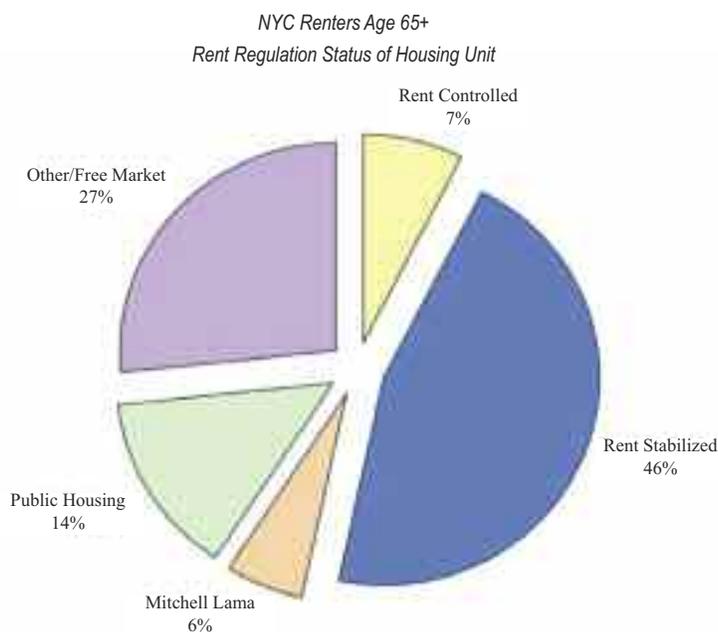
In order to ensure that LGBT older adults benefit from the City’s full range of supports, the City will facilitate LGBT cultural competency trainings across a spectrum of services for older New Yorkers. The trainings will target senior centers, home and community based caregivers, and residential facilities that will include assisted living and nursing home settings.

1976: Robert Butler’s seminal “Why Survive: Growing Old in America” wins the Pulitzer Prize in 1976. The book is an impassioned plea for changes in aging social policy that remain relevant today. Dr. Butler coins the term “ageism.”



9:30-5:00
THURS
↔

As a report by the Furman Center for Real Estate and Urban Policy indicates, New York “has long been a pioneer in housing policy.”²⁶ New York’s 8.31 million residents²⁷ live in 3.3 million housing units.²⁸ Of these, many are regulated or receive government support: 178,489 apartments are operated by the New York City Housing Authority (NYCHA),²⁹ 40,480 units are rent-controlled,³⁰ and 1.04 million units are rent-stabilized.³¹



Source: U.S. Census Bureau,
2008 NYC Housing & Vacancy Survey

New York City is home to many naturally occurring retirement communities, or “NORCS”—apartment buildings/complexes or clusters of smaller buildings that have developed over time as areas where significant populations of older adults reside. The density and proximity of older adults in NORCs create opportunities to provide services to promote healthy aging in place. In fact, many buildings and facilities where older New Yorkers reside are located close to social and other community services.³²

1982: First department of geriatric medicine in the country is founded at Mount Sinai School of Medicine.

The City is engaged in a number of ongoing efforts to address the housing needs of older New Yorkers. For example in 2005, NYCHA partnered with two nonprofit organizations, Presbyterian Senior Services and the West Side Foundation for Senior and Supportive Housing, to build the Grandparent Family Apartments—the first housing facility in the country designed specifically to meet the needs of grandparents who are caring for their grandchildren. In 2007, Mayor Bloomberg, City Council Speaker Quinn, and several nonprofit partners announced the creation of the Center for New York City Neighborhoods (CNYCN) to assist homeowners at risk of foreclosure. Since 2008, CNYCN has assisted approximately 3400 New Yorkers—including about 200 older adults—who had been in danger of losing their homes by providing legal services and counseling throughout the five boroughs.

Still, there are always new and changing concerns that can be better addressed. For example, some older New Yorkers live in housing that is too large or small to meet their needs, or is not easily accessible. More can be done to increase the supply of affordable housing as well as to allow older adults to move into appropriate housing that both meets their needs and allows them to remain in their communities, close to their social networks.

HOUSING AGENDA

Goal: Increase availability and affordability of safe, appropriate housing

Affordable Housing Development

- Target housing funds and streamline process of building low income housing for older New Yorkers
- Examine parking requirements for affordable senior housing and amend the zoning code as necessary to facilitate construction of senior housing
- Provide loans for rehabilitation and new construction of affordable housing

Homeowner & Renter Assistance

- Provide loan assistance to older New Yorkers for home repairs
- Engage NYC home improvement contractors in best practices for the older adult market
- Improve access to SCRIE through transfer from DFTA to Department of Finance
- Expand eviction prevention legal services for older New Yorkers

Aging in Place

- Provide additional supportive services to NORCs
- Target Section 8 vouchers to vulnerable older adults at risk of eviction
- Promote access to new models of housing that support aging in place



► **Issue: Demand for publicly-subsidized or financed low income senior housing (such as Section 202 units) far exceeds supply.**

► **Initiative: Target housing funds and streamline process of building low income housing for older New Yorkers.** Older New Yorkers have a significant presence in public and regulated housing. More than 35% of New York Housing Authority (NYCHA) households are headed by individuals who are over the age of 62.³³ In addition, adults age 65 and older occupy almost 60% of the City’s rent-controlled units³⁴ and nearly 15% of those that are rent-stabilized.³⁵ In fact, 73% of older adult renters in the City live in housing that is stabilized, controlled, subsidized or part of the public housing system.³⁶ As the population of older New Yorkers continues to grow, the demand for affordable housing will undoubtedly increase as well.

Approximately 250 units of housing for low income older adults are developed each year in New York City through the Section 202 Supportive Housing Program, which is funded by the U.S. Department of Housing and Urban Development (HUD). HUD provides approximately \$30 million each year in construction financing to nonprofit sponsors of senior housing in New York City, as well as rental subsidies once the units are built. Still, the amount of federal financing provided per unit (about \$135,000) is insufficient for the construction costs of studio and one-bedroom apartments in the City.

In order to ensure that housing for older New Yorkers continues to be built and to encourage developers to build more, the City’s Department of Housing Preservation and Development will launch an initiative to provide “gap financing” for HUD 202 projects through other federal funding sources. At the same time, the City will advocate for enhancements to the current HUD 202 program to provide funding for additional units and to allow housing sponsors to give preference to high-need older adults.

1986: Under the leadership of Council Speaker Peter Vallone, Sr., the New York City Council establishes its Committee on Aging. Councilmember Mary Pinkett is appointed as the Committee’s first chair.



SPOTLIGHT ON... Section 202 Supportive Housing

Funded by the U.S. Department of Housing and Urban Development (HUD), the Section 202 Supportive Housing Program is the primary federal funding stream for providing housing for low income seniors and is the only one that funds housing exclusively for this population. Section 202 provides both capital grants to developers of housing units and rental assistance to older adults living in these units. Capital advance funds support the construction, reconstruction, or rehabilitation of supportive housing. Rental assistance is paid in the form of a subsidy to the development owner to cover the difference between residents' contributions toward rent and the reasonable cost of operating the building. The monthly rent of residents in Section 202 housing is limited to 30% of their adjusted income or 10% of their gross income, whichever is greater.

According to federal guidelines, at least one member of a Section 202 household must be age 62 or older and the household income may not exceed 50% of the area median income. Sponsors applying to build housing developments with Section 202 funds must be private, nonprofit entities. After receiving an award, sponsors must form a separate nonprofit organization that will serve as the owner entity of the development.

Project sponsors must make necessary supportive services available to residents as a condition of funding. These can include meals and nutritional services, housekeeping, personal assistance, transportation aid, and health-related services. Many Section 202 units (nearly 40%, according to HUD) have a service coordinator, who assists residents with obtaining services and coordinates service delivery to maximize independent living.

As of 2006, there were approximately 6000 Section 202 properties nationwide, consisting of 263,000 households. In New York City, there were 172 Section 202 buildings with 16,425 units as of 2005. HUD data indicate that as of 2006, the median income of Section 202 residents was \$10,000 and the median age was 74.

Sources: B. A. Haley & R. W. Gray, Section 202 Supportive Housing for the Elderly: Program Status and Performance Measurement, U.S. Dept. of Housing & Urban Development (June 2008); L. Perl, CRS Report for Congress: Section 202 and Other HUD Rental Housing Programs for Low-Income Elderly Residents, Congressional Research Service (Sept. 2008); NYC Dept. of City Planning.

► **Issue: Zoning requirements for parking may be an impediment to the development of new affordable housing.**

► **Initiative: Examine parking requirements for affordable senior housing and amend the zoning code as necessary to facilitate construction of senior housing.** While many older adults receive some type of housing assistance, the availability of affordable housing remains a concern—nearly half of New York City renters age 65 and older spend at least one-third of their income on rent.³⁷ One way to encourage development is to examine the zoning code and explore ways to make changes that would further support senior housing developments. Specifically, reducing or waiving the minimum number of parking spaces required by zoning for new housing developments could make it easier for nonprofits to build senior housing. The City’s zoning code allows waivers of parking lot requirements for supportive housing and other types of projects, and it allows reduced parking requirements for non-profit residences for older New Yorkers. Some developers of housing for older adults have expressed concerns that the existing reduced parking requirements remain too high and that the cost of providing parking is an unnecessary impediment to development. Parking spaces at older adult residences are typically underutilized because many older adults do not own cars. Building unnecessary parking spots in senior housing developments adds unneeded costs, limits the number of housing units that can be built, and decreases the amount of open space around the project. The City will study this issue and explore amending the zoning code to allow for a further reduction or waiver of parking requirements for low income senior housing.

1986: A new service model emerges at Penn South Houses. This New York City Naturally Occurring Retirement Community (NORC) is the first in the nation to bring professionally staffed social and health services on-site to address the needs of older residents.



HOMEOWNER & RENTER Assistance

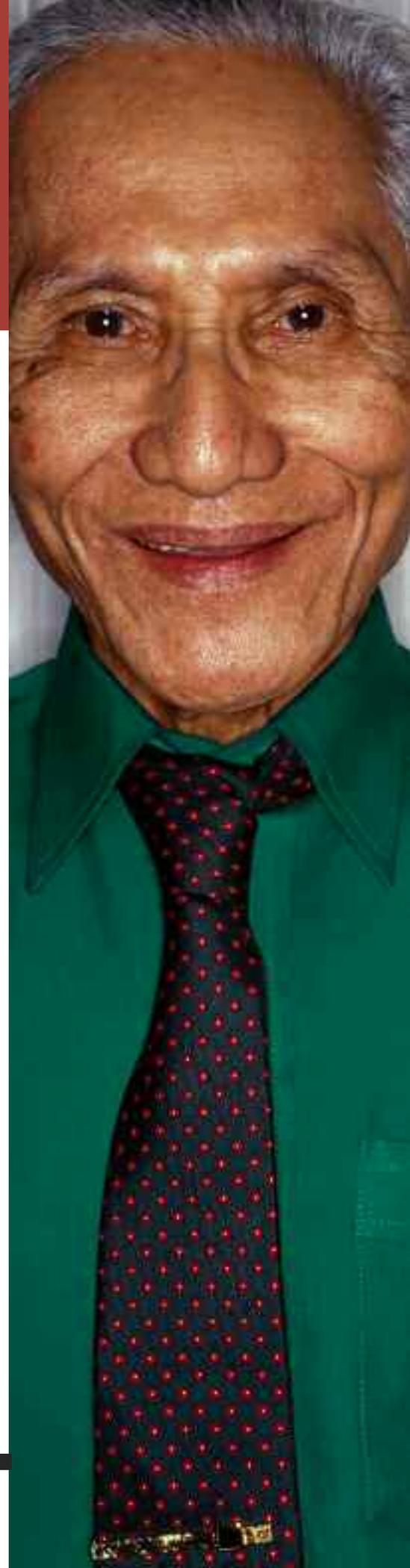
54

► **Issue: Preserving innovative, affordable, and appropriate housing is an important determinant of health for older New Yorkers.**

► **Initiative: Provide loans for rehabilitation and new construction of affordable housing.** In addition to making it less costly to build senior housing, ensuring that developers (many of which are non-profit organizations) have the funds to build such housing in the first place remains a key concern. Through the Mayor's New Housing Marketplace Plan, the Department of Housing Preservation & Development (HPD) will continue to provide loans to for-profit and non-profit developers to create and preserve affordable housing throughout the City's five boroughs, including housing for older adults. Older New Yorkers are eligible to apply for housing through all HPD programs. Information on HPD housing lotteries is available at www.nyc.gov.

► **Issue: Many older homeowners are on fixed incomes and may not have the resources to make needed repairs to their homes.**

► **Initiative: Provide loan assistance to older adults for home repairs.** Many older New Yorkers have lived in their homes or apartments for a considerable amount of time. Whether it's wear and tear or a sudden emergency, a certain amount of upkeep accompanies being a homeowner. However, those living on a fixed income can have difficulties making needed repairs. The City will continue to advertize the Senior Citizen Homeowner Assistance Program (SCHAP) to ensure that older New Yorker who need assistance receive it. SCHAP provides low or zero interest forgivable loans to New York City homeowners over age 60 so that they are able to make necessary home repairs. The vast majority of loans are 30 year loans at zero interest for which payments need not be made during the borrower's lifetime. SCHAP has assisted more than 1000 older adult homeowners since the program began in 1986. Loans are also avail-



able to assist homeowners who had received a home repair loan in the past and subsequently become victims of predatory lending schemes and/or subject to foreclosure proceedings.

► **Issue: Some older adult homeowners may have special needs and circumstances and could benefit from a contractor who is sensitive to these needs when they are seeking home repairs.**

► **Initiative: Engage NYC home improvement contractors in best practices for the older adult market.** The City’s Department for the Aging (DFTA) and Department of Consumer Affairs (DCA) will launch a program to enhance older adults’ access to, and improve the services they receive from, home improvement contractors licensed by DCA. DFTA will provide guidance on how to best address the needs of older adults by developing a checklist of best practices. DCA, in partnership with DFTA, will offer workshops for home improvement contractors. Information will be distributed to DCA’s more than 12,000 licensed home improvement contractors. DCA will also encourage home improvement contractors to offer discounted service rates to older adults.

► **Issue: Affordability of housing is a concern. Nearly half of all renters age 65 and older in NYC spent at least 35% of their income on rent in 2005.**³⁸

► **Initiative: Improve access to SCRIE through transfer from DFTA to Department of Finance.** Older adult renters face the threat of rent increases that can put their housing in jeopardy. The Senior Citizen Rent Increase Exemption Program (SCRIE) provides eligible City residents with an exemption from some or all increases in rent. The City will work to streamline the application process and increase efficiency in administering

1988 to 1996: The MacArthur Study of Successful Aging revolutionizes how we think about aging.

This landmark study showed that older people can control their aging process through lifestyle changes. It launched such positive concepts as “healthy aging,” “successful aging,” and “graceful aging.”



WHAT I LOVE ABOUT GROWING OLDER IN NYC:

In NYC, there is always something to do. Although we live in an apartment, we are able to look out the window and see people. If you are feeling down, you can step outside and you will always run into someone who will put a smile on your face. Life in NYC is happier and easier. There are many conveniences here.



Daniel Gutierrez

56

this program through a partnership between DFTA and the Department of Finance. With these efforts, the City will be able to maximize the number of older New Yorkers receiving this important benefit.

► **Issue: Older adults fear the costs of housing-related legal proceedings and often do not have the resources to defend themselves.**

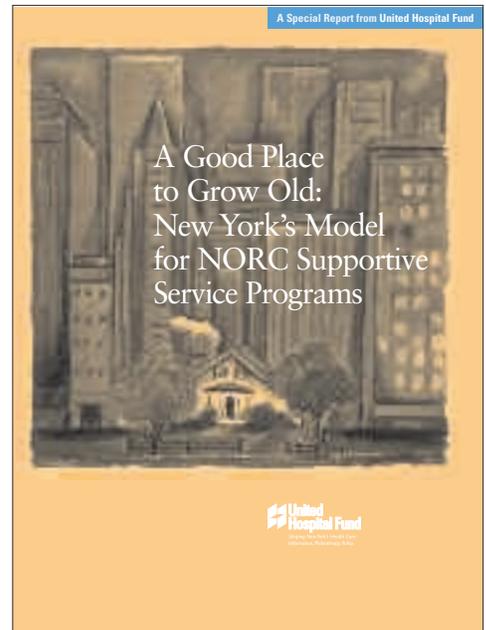
► **Expand eviction prevention legal services for older New Yorkers.** Older adults involved in Housing Court cases are an especially vulnerable population and for many, navigating an eviction proceeding in Housing Court can be very challenging. DFTA will partner with the New York City Housing Court to offer legal assistance and crisis intervention to older New Yorkers who are at risk of eviction. The City will provide not only legal representation, but also social services to address the root causes of financial distress that may have contributed to the pending eviction.



► **Issue: Older adults appreciate and benefit from living in close-knit micro-communities. Social service programs within the City's NORCs should be expanded.**

► **Initiative: Provide additional supportive services to NORCs.** A naturally occurring retirement community (NORC) is a unique housing model that allows older adults to live in the community rather than an institutional setting. Experience has shown that bringing social, health, and other services into NORCs allows older adults to age in place and delay or avoid institutional care. Through partnerships among housing unit managers, residents, and providers of health and social services, core services—such as case and health care management—are effectively provided to residents. Other services can include friendly visiting and telephone reassurance, as well as housekeeping and personal care assistance. The Department for the Aging (DFTA) will collaborate with NORCs across the City to ensure social services are being provided and to support additional services as needed.

In order to maximize the health and well-being of older New Yorkers living in NORCs, the City will partner with the United Hospital Fund to implement strategic evidence-based interventions in these communities. One example could include educating residents on the standards of practice for care of clients with diabetes or heart disease. Additionally, DFTA will continue to seek funding opportunities to promote independent living and increase healthy aging behaviors among residents of the City's NORCs.



1990s: The growing popularity of mentoring, flex-time, and part-time work begins to expand work and retirement options for Americans.

► **Issue: Frailty can lead to an inability to stay living independently in the community.**

► **Target Section 8 vouchers to vulnerable older adults at risk of eviction.** Some older adults are more vulnerable than others and are unable to care for themselves. The Adult Protective Services (APS) program at the City's Human Resources Administration (HRA) is responsible for investigating abuse, neglect, and exploitation of adults who are mentally and/or physically impaired, 60% of whom are elderly. While there are a number of tools at the disposal of APS workers to assist clients, there are few housing options available to help these residents remain in their homes. The City will pilot an initiative to provide Section 8 vouchers for vulnerable older adults who are at risk of eviction, unable to afford their rent, and part of the APS program. Through the Section 8 program, APS clients will receive a federal rent subsidy paid directly to landlords that limits tenants' share of their rent to 30% of their income.





WHAT I LOVE ABOUT GROWING OLDER IN NYC:

I was born in NYC and this City has the greatest opportunity for growth such as furthering one's education, helping other people, and raising grandchildren. The support that the NYC Department for the Aging has given us helped us greatly in raising our grandchildren and I wouldn't trade it for the world. The change in NYC is beautiful and I have seen changes in the architecture and planning for the City that will help us grow. It's services like these that show how great our City is.



Vivian Gordon

60

► **Issue:** While there is an increased demand for alternatives to nursing home care, such models can be prohibitively expensive to develop and difficult for older adults to access.

► **Initiative:** Promote access to new models of housing that support aging in place. A growing preference for aging in place—receiving care in a home/community setting in lieu of an institutional setting in response to increased medical and other needs—has accompanied growth in the senior population. Increasing supports to better facilitate paid and family caregiving, an issue discussed in the final section of this report, has been one component of supporting the aging in place movement. Another has been increasing the number of and access to assisted living facilities as an alternative to nursing home care. Assisted living facilities allow residents to age in place by providing support for activities of daily living (ADLs) and instrumental activities of daily living (IADLs). ADLs include activities such as eating, getting dressed, and using the lavatory. IADL assistance includes help with traveling to medical and other outside appointments, taking medications, and paying bills.³⁹ While older adults prefer assisted living and other forms of noninstitutional care to nursing homes, they are afraid of how they will be able to meet the cost. In fact, in a 2007 survey conducted by the AARP of New York state residents age 50 and older, more than half of those polled indicated that they were not very or not at all confident that they would be able to pay for assisted living or nursing home care for three years.⁴⁰

One option that has been proposed to address the needs of low income older adults who may need assisted living is to create “hybrid” Section 202 housing projects—i.e. developments with some units for older adults who need assisted living and the remainder for those who don't. However, Section 202 funds that are available to fund the extra costs of assisted living units are very limited. This has led some sponsors of Section 202 projects

in New York State to seek Medicaid funding for assisted living beds through the state Department of Health (SDOH) in conjunction with Section 202 funding from HUD. Unfortunately, the process of applying for assisted living beds to SDOH while simultaneously seeking Section 202 funds is quite cumbersome—the process is lengthy and costly, and deadlines and requirements for one program may conflict with those of the other. To date, only one Medicaid assisted living/Section 202 project has been built in New York City (an additional project is in construction). Consequently, the City will work with community-based organizations, SDOH, the federal Department of Housing & Urban Development, and other stakeholders to streamline the process of building Section 202 housing developments that contain assisted living units. Initiatives that will be considered include improving coordination of application deadlines and other requirements, increasing communication among city, state, and federal agencies, and providing support to “beginner” organizations seeking to build Section 202/assisted living projects.



PUBLIC SPACES & Transportation

64

New York City's public transportation system, operated by the Metropolitan Transportation Authority (MTA), is North America's largest⁴¹—serving more than 7.4 million passengers on an average weekday through a network of buses, subways, and trains.⁴² The MTA network is complemented by over 13,000 yellow taxis and additional for-hire vehicles overseen by the City's Taxi and Limousine Commission.⁴³ Many older New Yorkers believe that the City's public transportation system is affordable and serves numerous parts of the City,⁴⁴ making health, social, and other services widely accessible.⁴⁵ New York is also known for its 13,000 miles of sidewalks which make parks, landmarks, businesses, and other services easily accessible on foot.

Thanks to New York's transportation network and accessibility, our City has no shortage of places to go and things to see. These include our parks, which older New Yorkers in particular have singled out as a crown jewel of the City.⁴⁶ The City's Department of Parks and Recreation manages more than 29,000 acres;⁴⁷ New York has more than 1,700 parks, playgrounds, and recreational facilities across the five boroughs.⁴⁸

Making buildings more accessible to individuals of all ages has also been on the forefront of the City's agenda to enhance New York's status as a livable city. In July 2008, a new construction/building code developed by the City's Department of Buildings in consultation with the Mayor's Office for People with Disabilities went into effect.

Still, there are challenges that can be addressed to make our City even more accessible for individuals of all ages. Some older adults, for example, note that work remains to be done in making more subway stations accessible to individuals with impaired mobility.⁴⁹ In addition, older New Yorkers have voiced their concerns about sidewalk and roadway safety, including issues such as lighting, maintenance, and overcrowding.⁵⁰ The City is aware of their concerns; 40% of severe injuries and fatalities suffered by pedestrians involve pedestrians who are older adults.⁵¹ Older New Yorkers have also expressed concerns about the lack of benches and other places to rest on many sidewalks and other walkways,⁵² as well as the absence of public restrooms throughout the City.



1994: Senior Corps is incorporated into the Corporation for National and Community Service. Senior Corps brings together the Foster Grandparent, Senior Companions, and Retired and Senior Volunteer Program (RSVP) initiatives that had been pioneered in the 1960s and later authorized by Congress.

PUBLIC SPACES & TRANSPORTATION AGENDA

Goal: Provide age-friendly public spaces and a safe means for reaching them

Accessible & Affordable Transportation

- Improve elevator and escalator service and enhance accessibility of subway stations
- Improve efficiency of Access-A-Ride by equipping vehicles with GPS devices and implementing phone notification system
- Match accessible taxis with users who need them
- Develop model accessible taxi
- Develop taxi voucher program for older New Yorkers who are unable to use public transportation

Safe & Age-Friendly Public Spaces

- Increase seating in bus shelters
- Install public restrooms at key locations citywide
- Create new, pedestrian friendly public spaces while calming traffic
- Redesign street intersections at key locations citywide to improve safety for older New Yorkers
- Identify age-friendly parks and encourage older adults to utilize them

Planning for the Future

- Provide environmental stewardship workshops and engage older New Yorkers in planting trees as part of PlaNYC and MillionTreesNYC
- Conduct study to better address the mobility needs of older New Yorkers
- Promote use of Universal Design Guidelines through education and awareness efforts



ACCESSIBLE & AFFORDABLE Transportation

► **Issue:** Half of New Yorkers regularly use mass transit, but not all subway stations are accessible. Older adults desire information regarding the status of elevators in subway stations before making a trip.

► **Initiative:** Improve elevator and escalator service and enhance accessibility of subway stations.

New Yorkers rely on the subway for fast and cost efficient travel across the City. In fact, many older New Yorkers depend on the subway system as their primary means of navigating the City, and a number of retirees relocate to New York in part because of a desire to reduce their dependence on driving. To meet the needs of customers with visual, hearing, and mobility impairments, the Metropolitan Transportation Authority (MTA) is working to improve accessibility of stations across the New York City subway system and Staten Island Railway. The MTA recognizes the importance of having not only ramps and handrails so all people can physically access the trains, but also accessible Metrocard vending machines and other amenities.

One of the most critical areas to enhance the accessibility of the subway is increasing the reliability of station elevators and escalators. The MTA has launched a program to improve these entry points that includes conducting multiple daily inspections and installing electronic monitors that alert personnel if an escalator or elevator stops working. To address temporary delays in function, the MTA will also develop a subscription program for customers to receive an e-mail advisory for disruptions in elevator and escalator service at specific stations. These customers may elect to use bus service; MTA buses in the New York City fleet are accessible to individuals in wheelchairs. Using the latest in technology, New York City is striving to make public transportation as accessible and efficient as possible.

► **Issue:** Some older adults have reliability and efficiency concerns regarding Access-A-Ride.

► **Initiative:** Improve efficiency of Access-A-Ride by equipping vehicles with GPS devices and implementing phone notification system. For those who are unable to use public transportation, Access-A-Ride (AAR) allows them to affordably travel throughout the City. AAR is a federally-mandated service for peo-

ple who cannot use public transit, usually due to mobility impairments. AAR operates 24 hours/day, seven days/week, and provided 4.7 million trips in 2005.⁵³ In order to maximize the efficiency of this valuable resource, the MTA will equip Access-A-Ride vehicles with GPS devices. Once a vehicle has the GPS device, its driver can locate addresses more quickly. Another technology to be introduced as an additional way to better serve riders will send advance notification to the phones of AAR customers when the vehicle is 15 minutes away from the pickup location. These initiatives will lead to service for more clients, reduce wait time, and maximize the amount of time that the client would be waiting in a comfortable location before meeting the vehicle.

► **Issue: Many taxis are not wheelchair accessible or easy to get in and out of.**

► **Initiative: Match accessible taxis with users who need them.** Taxis provide more than half a million people service every day. It is important that these taxis are accessible to as many people as possible. In this regard, the City's Taxi & Limousine Commission (TLC) is exploring how to best provide accessible service to individuals using wheelchairs. The TLC's long-term plan will likely build upon a pilot program currently in operation through which riders can call 311 and one of the City's 240 wheelchair accessible yellow cabs is dispatched to their location. Any program would include training for drivers on how to assist wheelchair and scooter users in boarding and exiting taxis. Creating opportunities for all individuals to easily access taxis will reinforce the development of New York as an accessible City for residents and visitors alike.

► **Issue: A goal to strive for in the future is assuring that all taxis purchased for use in the City are wheelchair accessible.**

► **Initiative: Develop model accessible taxi.** Our City prides itself on being a pioneer in using innovative technology, particularly when it produces environmentally friendly results. In order to provide aided mobility for all

1999: The New York City Council, under the leadership of Speaker Peter Vallone, Sr., first provides funding for NORCs.

“

WHAT I LOVE ABOUT GROWING OLDER IN NYC:

In New York City, there are more opportunities for seniors and you can get around more easily by public transportation.

”

Joyce Smith

70



passengers with vehicles that are environmentally sound, the TLC will look to develop an “iconic” model taxi. This “Taxi of Tomorrow” would provide universal accessibility for all passengers, including passengers in wheelchairs. The TLC also values the safety of its passengers and would ensure that the model taxi meets the highest safety standards. Having a smaller environmental footprint and enhanced accessibility will allow this new, cutting-edge taxi to benefit all New Yorkers.

► **Issue:** There are large sections of the City not well-served by bus or subway routes.

► **Initiative:** Develop taxi voucher program for older New Yorkers who are unable to use public transportation. Residents of New York enjoy traveling to different parts of the City, and do not want to lose their mobility in the event that public transportation becomes more difficult to access as they age. In order to ensure that residents maintain mobility, the City will work to establish a transportation voucher program. This program will focus on mobility-impaired individuals and those who are low-income and unable to access the City’s subway and bus network. Working to ensure that all individuals can travel throughout the City will benefit not only the program’s users, but also the businesses, cultural institutions, and other venues that are frequented by these individuals.



SAFE & AGE-FRIENDLY Public Spaces

72

► **Issue: Many bus stops lack seats or shelter.**

► **Initiative: Increase seating in bus shelters.** Many older New Yorkers seek places to sit while traveling between destinations. Bus shelters are one resting place, not only for individuals waiting to take the bus, but also for individuals walking down the street who need a place to rest. The City's Department of Transportation (DOT) recognizes the importance of increased seating and has launched a program to replace all 3300 bus shelters throughout the five boroughs with a new design that includes benches. This program will have no cost to the City because a franchisee will install and maintain the shelters in exchange for the right to advertise on the shelters and other street furniture. The initiative will implement a progressive bus shelter design that will benefit older New Yorkers and at the same time, result in cost savings to the City.

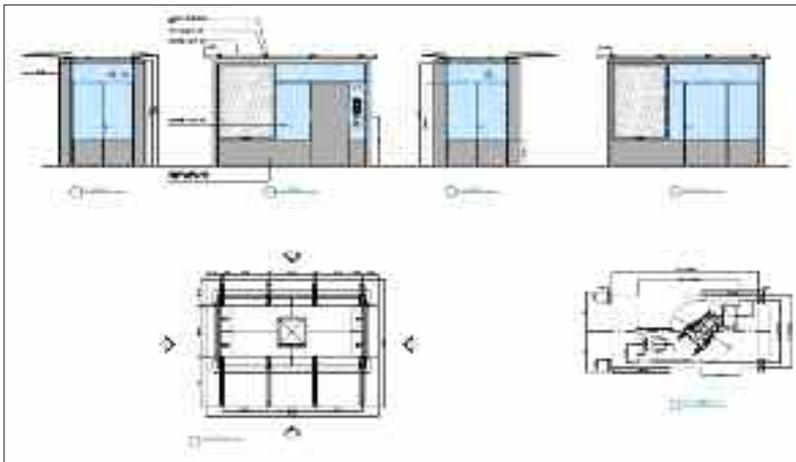


► **Issue: Unexpected delays in transit and poor weather can make access to restroom facilities difficult for older adults.**

► **Initiative: Install public restrooms at key locations citywide.** Considering the many parks, historical sites, and other public destinations within New York City, there should be easily accessible restrooms for the public. In order to address this need, DOT is installing automatic public toilets (APTs) at key locations in all five boroughs. The City places a premium on the safety of users, and the toilets have tamper-proof automatic doors that open from the inside. The APTs will be installed at no cost under



the same franchising agreement as with the bus shelters. Because they are accessible and comply with the Americans with Disabilities Act, it is our hope that these public restrooms will allow individuals with limited mobility to more conveniently and easily enjoy public events and travel throughout the City.



► **Issue:** There are few places to sit and some sidewalks are crowded and have various obstacles.

► **Initiative:** Create new, pedestrian friendly public spaces while calming traffic. New York City has fabulous parks, but traffic congestion often interferes with the ability of residents and visitors, particularly those with limited mobility,

to enjoy them. DOT is tackling this issue by creating inviting public spaces around the City and working to reduce congestion and calm speeding traffic. The most significant project in this area is a pilot program called “Green Light for Midtown.” Ending vehicular traffic on Broadway near Times and Herald Squares will allow for safer pedestrian crossings and likely reduce travel time for pedestrians. Pedestrians who wish to rest and enjoy the vista from Broadway will be able to do so with the creation of several new pedestrian plazas. This newly designed public space will encourage a more relaxed enjoyment of Midtown that is truly age friendly.

► **Issue: Pedestrian safety is a concern for older adults.**

► **Initiative: Redesign street intersections at key locations city-wide to improve safety for older New Yorkers.** The bustling foot and vehicular traffic of New York can intimidate and sometimes endanger individuals with limited mobility and slower walking speeds. The City recognizes the need to make streets more user-friendly for these individuals, particularly older New Yorkers. DOT will aggressively implement safety improvements to reduce pedestrian fatalities and injuries at identified areas with a higher than average density of severe injuries among older adult pedestrians. Safety improvements include pedestrian refuge islands, curb extensions, upgraded and improved signage, and extended signal timing to provide more time to cross at intersections. DOT will also continue to make progress toward full compliance with the Americans with Disabilities Act on pedestrian ramps at street corners. Older adults should be able to safely navigate their neighborhoods and this program helps to advance this goal.

► **Issue:** Some older adults feel that certain parks are at times too crowded and their programs geared to the younger population.

► **Initiative:** Identify age-friendly parks and encourage older adults to utilize them. Many older New Yorkers are frequent visitors to our City's parks and value them as a place to take a walk, meet up with friends, or simply to enjoy a Sunday afternoon. However, some older adults feel that certain parks are at times too crowded and their programs geared to the younger population.⁵⁴ To this end, the City will evaluate its parks to identify which ones are best-suited to serve older New Yorkers. Criteria for an age-friendly park can include having ramps, grade level entrances, or minimal steps into a park; benches with backs or armrests; accessible public restrooms; and for those parks with pools, lifts to assist entering and exiting the water. The City will also identify parks that have recreation centers with programs for older adults as well as other activities geared toward older New Yorkers.



City of New York
Parks & Recreation



► **Issue:** More opportunities should be created for older adults to engage in volunteerism with issues they feel passionate about.

► **Initiative:** Provide environmental stewardship workshops and engage older New Yorkers in planting trees as part of PlaNYC and MillionTreesNYC. Older New Yorkers often lead by example in maintaining public gardens and other amenities that beautify their neighborhoods. In order to capitalize on this interest and skill-set, the Parks Department and Department for the Aging will work to increase older New Yorkers' participation in tree planting and environmental stewardship campaigns. Tree planting and tree stewardship will be coordinated by MillionTreesNYC, which is part of the Mayor's PlaNYC sustainability plan. One PlaNYC initiative calls for the Parks Department to ensure that every New Yorker lives within a 10-minute walk of a park. Over the last five years, the City has added more than 300 acres of new parkland and additional parkland will be added through the PlaNYC initiative. The City has also planted almost 250,000 trees in the nearly two years since the MillionTreesNYC initiative began.

MillionTreesNYC is looking towards the future by engaging older New Yorkers in street tree care as part of our citywide "Stewardship Corps." Older adults will be encouraged to participate in street tree stewardship workshops that empower citizens to care for the newly planted trees, commit to watering and mulching schedules for trees in their communities, and become trainers of future tree stewards themselves. Older New Yorkers will also be enlisted in helping to identify sites for tree planting opportunities, including senior centers, housing developments, religious institutions, and City streets. The engagement of older New Yorkers in environmental issues will promote their participation in the City's various "green" activities, allow them a greater degree of involvement within their own communities, and lead to involvement in other activities and social networks.



Spotlight On... PlaNYC

Unveiled by Mayor Bloomberg in April 2007, PlaNYC is a 127-point plan designed to create the first environmentally sustainable 21st Century city. PlaNYC focuses on every facet of New York's physical environment—its transportation network, housing stock, land and park system, energy network, water supply and air quality—and sets a course to achieve 10 aggressive goals to create a more sustainable New York by the year 2030.

To keep NYC as open and welcoming as ever:

- Create enough housing for almost a million more people, and find creative ways to make housing more affordable.
- Ensure that every New Yorker lives within a 10-minute walk of a park.
- Add to the capacity of NYC's regional mass transit system.

To maintain NYC's current and future infrastructure:

- Develop critical back-up systems for NYC's water network, ensuring a dependable source of water into the next century.
- Reach a full "state of good repair" for NYC's roads, subways, and rails for the first time in history.
- Provide cleaner, more reliable power for every New Yorker by upgrading NYC's energy infrastructure.

And to preserve and improve NYC's environment:

- Reduce NYC's global-warming emissions by more than 30% by 2030.
- Achieve the cleanest air quality of any big city in America.
- Clean up all contaminated land in NYC.
- Open 90% of NYC's rivers, harbors, and bays for recreation by reducing water pollution and preserving natural areas.

► **Issue: The needs of older people and individuals with disabilities should be incorporated into transportation and related planning efforts.**

► **Initiative: Conduct study to better address the mobility needs of older New Yorkers.** The City must better address the mobility needs of its growing older adult population. To meet this goal, the Department of City Planning will undertake a study called *Best Practices in Mobility for an Aging Population* that will seek to understand the trends and travel patterns of older adults. This study will identify worldwide best practices in transportation, mobility, and accessibility for an aging population. It will then analyze data about existing transportation practices in other world cities. New York City will learn from the successes of and challenges facing other cities, and use this information to adopt potential mobility solutions for our City.

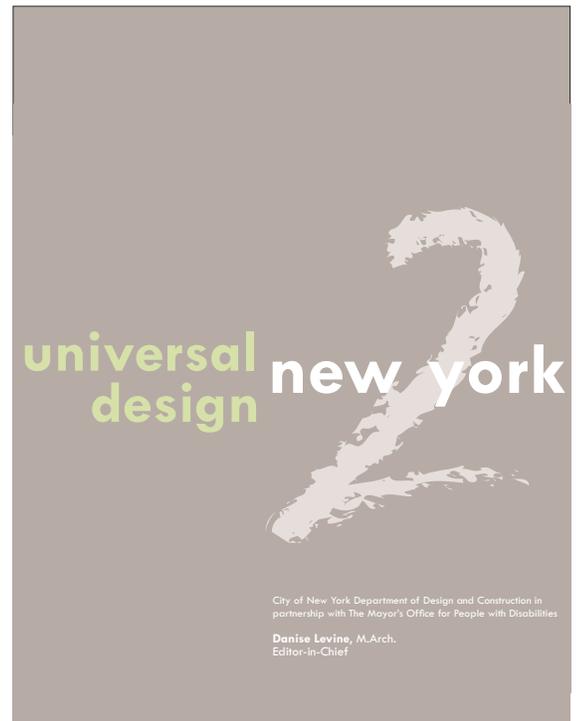
► **Issue: Participation in the life of the City could be made easier with fewer architectural and physical barriers.**

► **Initiative: Promote use of Universal Design Guidelines through education and awareness efforts.** According to the Center for Universal Design at North Carolina State University, universal design is the “design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design.” For example, accessible design may call for making the main entrance to a building accessible for all individuals rather than providing a ramp at a separate entrance, which can be stigmatizing to individuals with disabilities.

The Mayor’s Office for People with Disabilities is developing a publication on universal design called “Inclusive Design Guidelines, New York City” to accompany the City’s new building code that was implemented

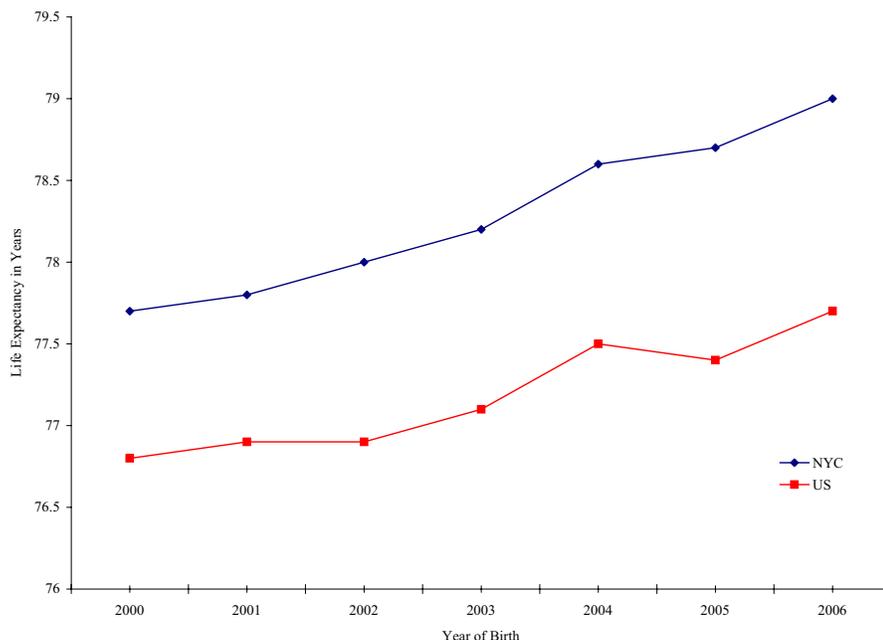
last year. This book will offer recommendations to produce inclusive environments and is intended for use by professional designers, educators, and advocates. Detailed technical guidance in the book will be coordinated with sections of the new code, making it easy to compare the voluntary recommendations to actual legal requirements. New Yorkers recognize universal design as innovative and release of the book will be part of a broader campaign that will encourage the use of universal design in rehabilitations and new buildings constructed within the five boroughs.

Mobility is an important contributor to healthy living, particularly among the older adult population. The City will launch an additional project to promote mobility in urban and building design. The Department of Design & Construction, in conjunction with the Department of Health and Mental Hygiene and other City agencies, will develop "Active Design" Guidelines. Older New Yorkers will benefit from these projects to remove barriers and promote design that encourages increased mobility in streets, parks, and buildings.



New York is arguably the best City in which to age. It has some of the most progressive public health policies which connect health outcomes to lifestyle choices. By living a healthy lifestyle, New Yorkers can increase the quality of their lives as well as their lifespan. In 2002, the New York City Department of Health and Mental Hygiene launched *Take Care New York*, a comprehensive health policy initiative that enlists health care providers, City agencies, businesses, and individuals alike to achieve 10 key goals. The goals range from maintaining a healthy weight and diet to being tobacco free to living in a home that is free from violence and environmental hazards. Significant progress has been made in achieving these goals, including: over 300,000 fewer smokers, 364,000 more New Yorkers having a regular doctor, and a 48% increase in colonoscopy screening rates from 2003 to 2007.⁵⁵ Due in part to these efforts, it is not surprising that New Yorkers are leading longer lives. In 2006, the average life expectancy for a City resident at birth was 79 years, an increase of 15 months since 2001 and one that significantly exceeds national gains.⁵⁶

Life Expectancy at Birth



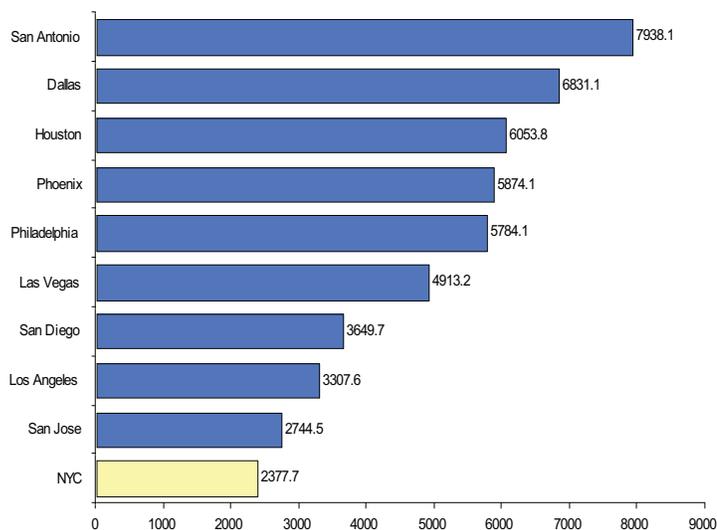
Sources: U.S. Centers for Disease Control & Prevention, NYC Department of Health & Mental Hygiene



Health and social services in a variety of areas are conveniently located and accessible by public transportation.⁵⁷ Older adults have praised the City's healthcare system. The City's Health and Hospitals Corporation (HHC) operates the largest municipal hospital and health care system in the country, serving more than 1.3 million New Yorkers each year. HHC's network of 11 acute care hospitals (as well as nursing homes, treatment centers, and more than 80 community-based clinics) is complemented by more than 60 voluntary hospitals. In February 2009, HHC opened the Geriatric Wellness Center at Woodhull Hospital. The Center offers one-stop medical and behavioral health services that include screenings for dental, eye, and podiatry care, as well as prevention for chronic conditions including diabetes, hypertension, cardiac, and respiratory disease. The Center also provides older New Yorkers with comprehensive social service evaluations and assistance with obtaining homecare and home delivered meals.

Increasing safety has been a top priority as well. According to the FBI's preliminary Uniform Crime Report for 2008, New York is our country's safest big city. Of the 261 U.S. cities with populations larger than 100,000, New York's crime rate ranked 246th, placing it between Torrance, California and McKinney, Texas.

*FBI Total Index Crime Rate Per 100,000 Population
10 Largest U.S. Cities* – Calendar 2008*



* Excludes Chicago because reporting methods differ from FBI standards.

Source: Calendar 2008 FBI Uniform Crime Report (preliminary report)



WHAT I LOVE ABOUT GROWING OLDER IN NYC:

I think that NYC is the best city to grow old in because we have so many different benefits. There are so many different cultural activities that children and adults can participate in. There are so many services, [including] mental health services and services for specific diseases such as Alzheimer's and diabetes.



Carmen Manon

84

A rich array of social service providers complements New York City's public health efforts and initiatives. The City's nonprofit sector boasts 40,000 nonprofit organizations, 490,000 employees representing 15 percent of the City's non-government workforce, and a payroll of more than \$20 billion.⁵⁸ Both City agencies and nonprofits offer services to New Yorkers. In addition to traditional safety net services like public assistance, Medicaid and Medicare, our City also offers benefits specifically for older adults and vulnerable populations. Adult Protective Services (APS) is just one example. Operated by the New York City Human Resources Administration, APS provides support to older adults and others who are physically or mentally impaired, unable to care for themselves, or are in hazardous situations. Services can include referrals for health and mental health care, assistance with obtaining benefits, and referrals to law enforcement authorities in cases of alleged exploitation and abuse.

Given the various social opportunities that exist and the supports that are in place, it is expected that many older adults feel that New York is a great place to grow old.⁵⁹ Still, changing demographics provide an opportunity to focus on the needs of older adults in different family situations and new roles. For example, more grandparents are assuming the parental role for the second time by serving as the primary caregivers for their grandchildren. According to the Census, 83,946 New York City grandparents were responsible for the care of their grandchildren in the year 2000, and newer data indicate that approximately 250,000 children in our City are being cared for by a grandparent or other relative.⁶⁰ More can be done to ensure that social services and other programs are able to adapt to the changing needs and circumstances of today's older adults.

Similarly, while New York is on the path toward becoming a healthier city, more can be done to promote health and wellness among older adults and increase positive outcomes. Nearly 70% of New Yorkers age 60 and older are overweight or obese and nearly 64% have high blood pressure/hypertension.⁶¹ Many older adults are concerned about the costs of prescription drugs and other out-of-pocket health care expenses.⁶² Similarly, as adults increasingly wish to "age in place" by remaining in their homes as they grow older, a paradigm shift is needed to bring a greater focus on community and home-based care.

2005: Jack Rosenthal and Herb Sturz, two New York residents deeply engaged in philanthropic activities, create ReServe to increase the availability of post-retirement public service opportunities for retired professionals.

HEALTH & SOCIAL SERVICES AGENDA

Goal: Ensure access to health and social services to support independent living

Wellness & Healthcare Planning

- Increase HIV awareness and health literacy among older New Yorkers
- Redesign senior centers to focus on wellness and develop health outcomes
- Establish fitness club discount for older New Yorkers
- Increase awareness about health insurance options through DFTA's HIICAP program

Assistance to At-Risk Older Adults

- Implement citywide falls prevention initiative
- Provide free air conditioners to at-risk older New Yorkers
- Conduct outreach to older New Yorkers at risk of social isolation
- Add Silver Alert to Notify NYC
- Expand "Savvy Seniors" campaign to educate older New Yorkers about identity theft and fraud

Access to Nutritious Food

- Improve older New Yorkers' access to food stamps by implementing telephone application process and outreach campaign
- Implement NYC Green Cart program and form supermarket commission to address needs of neighborhoods underserved by supermarkets
- Provide bus service for older New Yorkers to access grocery stores
- Increase efficiency in City's case management and home-delivered meals programs

Caregiving & Long-Term Care

- Provide counseling and support services to grandparents raising grandchildren
- Expand educational materials and supports available to family caregivers
- Explore policies that would allow more New Yorkers to take family leave when needed
- Conduct outreach and workshops on long-term care and caregiving resources for employers in NYC
- Increase access to community-based care
- Expand training opportunities and other supports for paid caregivers
- Promote awareness and education about long-term care insurance

Palliative Care & Advance Directives

- Promote palliative care
- Expand existing HHC palliative care programs
- Promote advance directives
- Advocate for State legislation authorizing family members or domestic partners to act as surrogates to make health care decisions on behalf of an incapacitated adult



► **Issue:** The number of older New Yorkers with HIV/AIDS is on the rise.

► **Initiative:** Increase HIV awareness and health literacy among older New Yorkers. According to the New York City Department of Health and Mental Hygiene, one-third of the City's 100,000+ people living with HIV are over the age of 50, and the number is expected to rise to almost 50% in ten years. Unfortunately, the specific needs of older adults with HIV have not been adequately addressed. Research indicates that people with HIV will continue to live longer and HIV-negative aging baby boomers will present a new at-risk population as they interact with their HIV-positive peers. In response to the rapidly growing HIV-positive older adult population, the City Council convened a working group in 2006 that recommended the creation of the HIV Prevention and Health Literacy Initiative for Older Adults. With the support of city and state funds, the City launched an initiative in partnership with the AIDS Community Research Initiative of America to develop an HIV awareness and health literacy curriculum, as well as implement it through older adult peer leaders citywide. To date, trainings have occurred in 95 sites including senior centers, NORCs, and faith based institutions impacting almost 20,000 older adults. The City is currently collaborating with AIDS service organizations to enhance and expand the program so that it is able to reach additional older New Yorkers. In addition, the program is being considered by the U.S. Centers for Disease Control and Prevention (CDC) as a model for national replication.

SPOTLIGHT ON... Healthy & Active Aging

According to the International Longevity Center – USA:

- 80% of older Americans are healthy enough to engage in normal activities
- 64% of Americans age 65+ report no limitation in major activities
- Only 20% of Americans age 65+ report that they need assistance with basic daily activities
- Rates of disability are continuing to decline for persons 65 and older
- Studies have shown that people who continue to learn and regularly exercise are more likely to maintain cognitive abilities than those who do not

Source: N.S. Dahmen & R. Cozma, eds., Media Takes: On Aging, International Longevity Center – USA & Aging Services of California (2009)



► **Issue:** Studies show that older adults using senior centers desire a greater variety of programs and activities.

► **Initiative:** Redesign senior centers to focus on wellness and develop health outcomes. New Yorkers are living healthier and longer than ever before. As a means both to facilitate and support this trend, the City plans to reposition senior centers as healthy aging centers, where everyone is welcome, opinions are heard, and a variety of programs that promote health, community involvement, and personal fulfillment are available. The City's network of over 300 senior centers and programs supported by the Department for the Aging (DFTA) allows for older adults to spend time with their peers and participate in a variety of activities that range from tai chi and yoga to language classes and museum visits. The City will engage in a collaborative process with both community partners and relevant City agencies to reach consensus on the direction for the City's senior center network. Helping the City's older adults live healthy and active lifestyles will be a strong priority of this effort. Another goal of the process will be to support the creation of a network of centers that is consumer-focused and responds to the needs and preferences of a rapidly growing and diversifying population of older adults. Key to the senior center redesign will be enhancing the programs and activities offered by the senior centers and ensuring that the centers have the necessary facilities and other physical infrastructure in place to serve New York's growing older adult population for decades to come.

Some examples of enriched programming that a senior center could offer include: technology training, employment assistance, health screenings and disease prevention programs, physical activity (dance, yoga, weight training)



and mental activity (book clubs, discussion groups), access to the arts (jewelry making, painting), culture (lectures, writing classes) and recreational trips to museums, theaters, or sports events. In collaboration with its community partners, DFTA will explore new models of funding for the enriched programming and seek additional funds to support this effort.

Also, a number of DFTA senior center programs operate in less than optimal facilities. Some are in need of upgrades to their capital plants (including plumbing and electrical upgrades) or modifications that would allow them to be accessible. Other centers are housed at inappropriate sites and should be relocated to physical plants that are able to house the full complement of services of a quality senior center. DFTA does not have access to the capital funds necessary to improve its physical stock of senior centers or to provide regular on-going maintenance. Consequently, DFTA is proposing the creation of a capital funding stream to address both one-time facility upgrades and the costs of relocation, increase in rents due to relocation, and on-going regular maintenance for DFTA's portfolio of senior centers. Improved capital funding for senior centers will help the Department and its community partners create a network of centers that is more attractive and accessible to consumers, as well as better able to accommodate a myriad of activities and services.

► **Issue: A significant percentage of older adults does not engage in regular physical activity.**

► **Initiative: Establish fitness club discount for older New Yorkers.**

Promoting and maintaining a healthy lifestyle through regular exercise is important for everyone, including older adults. Engaging in activities that promote healthy aging can produce a variety of long-term health benefits. Building on Take Care New York's efforts to promote a healthy lifestyle, the City will partner with New York Sports Clubs to encourage older New Yorkers to participate in a discounted membership plan for older adults and provide pro-bono personal training staff to teach fitness classes in senior centers in underserved communities.

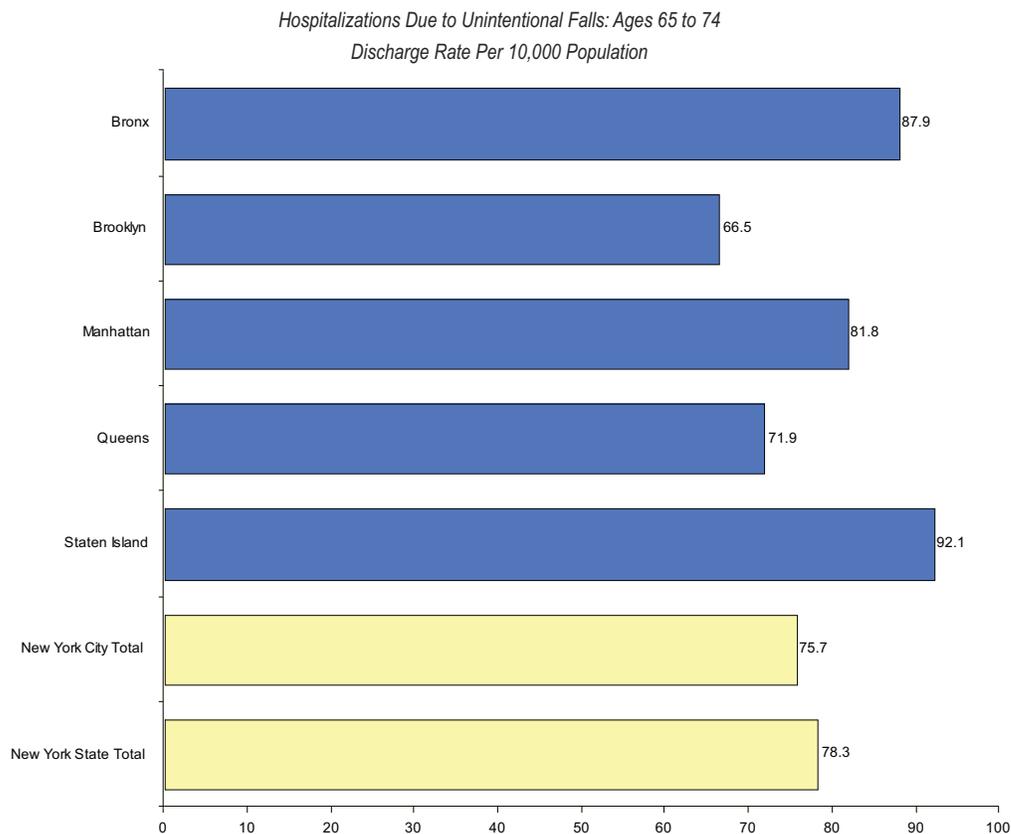
► **Issue: Older New Yorkers desire assistance with understanding the intricacies of various health plans.**

► **Initiative: Increase awareness about health insurance options through DFTA's HIICAP program.**

As the City's population grows, we must work to ensure that all New Yorkers, both young and old, are provided with access to information on health care. It is imperative that all New Yorkers better understand their health care coverage options, including, but not limited to, Medicare, Medicaid, Medicare Savings programs, Medicare Advantage plans, Medigap insurance, long-term care insurance, and Medicare Part D prescription drug plans. Through DFTA's Health Insurance Information Counseling and Assistance Program (HIICAP), the City will help to ensure that older New Yorkers are fully aware of the insurance and related options that affect their health and wellness. Continued outreach to senior groups, caregivers, and health professionals will allow HIICAP to ensure that older New Yorkers are provided with the tools necessary to make informed decisions regarding their health.



ASSISTANCE TO AT-RISK Older Adults



Source: NYS Department of Health (2008)

► **Issue:** Falls are the leading cause of morbidity and mortality from unintentional injury among older individuals.

► **Initiative: Implement citywide falls prevention initiative.** In New York City, from 2002 to 2006, falls were the leading cause of deaths resulting from unintentional injury among New Yorkers above age 65. National data suggest that 35 to 40% of people age 65+ fall each year and that those who fall are two-to-three times more likely to fall again. About 15% of falls cause serious injuries and cost approximately \$20 billion annually in emergency room visits, hospitalizations, and nursing home admissions. Falls are caused by a multiplicity of risk factors, including general muscle weakness, balance and gait deficits, a fear of falling (especially because of a previous fall), vision problems, incorrect use of assistive devices such as canes and walkers, and being on multiple medications. The likelihood of falling increases dramatically with each additional risk factor.

Because falls prevention requires the combined efforts of older adults, their families, communities, the health care system, and agencies and organizations serving older individuals, the Department for the Aging (DFTA) and the Department of Health and Mental Hygiene (DOHMH) will jointly convene a citywide falls prevention coalition to identify and address the problem of falls among older individuals. This coalition's activities will include (a) conducting research and data collection, (b) identifying and distributing best practices for falls prevention, such as tools for assessing and remediating fall hazards in the home and community, and (c) creating informational and educational materials and programs for a variety of audiences including physicians, home visiting programs, organizations that serve older adults, and City agencies.

► **Issue: Older New Yorkers are especially at risk for health problems related to heat.**

► **Initiative: Provide free air conditioners to at-risk older New Yorkers.** Older New Yorkers are especially at risk for heat-related illnesses, such as heat stroke and heat exhaustion, worsening of chronic medical conditions, and possibly death during heat waves. Older adults are at an increased risk for morbidity or mortality during heat waves because of chronic health conditions, taking certain medications, social isolation, decreased mobility, and a decreased physiological response to heat with aging. In an effort to combat such problems, DOHMH will work closely with DFTA to help older New Yorkers fight the heat. In addition to launching education and outreach efforts on the prevention of heat-related illnesses, the City will work to provide free air conditioners for low-income older adults in New York City who are at increased risk for heat-related illness or exacerbation of a chronic health condition.

2006: In March, the passage of the National Family Caregiver Support Act recognizes family caregivers and provides federal support for the first time. The Act gives grants to states to provide information and referral, training, counseling, respite care, and other supportive services to people caring at home for older adult relatives who are chronically ill or frail.

► **Issue: A sizable percentage of older New Yorkers lives alone and nearly 17% are at risk for social isolation.**

► **Initiative: Conduct outreach to older New Yorkers at risk for social isolation.** More older adults than ever before are living alone. In 2003, according to the U.S. Census Bureau, nearly 30% of women ages 65 to 74, almost 48% of women ages 75 to 84, and 57% of women ages 85 and older were living alone; the corresponding figures for men were approximately 16, 21, and 30%, respectively.⁶³ The Census Bureau also notes that from 1980 to 2000, the number of women age 85 and older who were living alone more than doubled.⁶⁴ The trend has not bypassed our City; a study of census data concluded that in New York, more than one third of the 75 and older population lives alone. Living alone increases the chances that an older adult will be socially isolated, a condition that is associated with depression, poverty, premature mortality, and other negative health effects.⁶⁵ According to the 2007 Community Health Survey conducted by the City's Department of Health and Mental Hygiene, 16.9% of New Yorkers age 65 and older (or about 143,000 people) are at risk for social isolation.

DFTA will develop partnerships through which socially-isolated and other vulnerable older adults who are in need of assistance may be identified and provided with the services they need. For one, DFTA will launch a program as part of NYC Service through which volunteers will make telephone calls to older adults who live alone and provide reassurance and support. City employees will be encouraged to participate, and the City will recruit corporate partners so that their workforce may be part of the effort. DFTA will also expand a social isolation education and training program in conjunction with the Hebrew Home for the Aged and the Service Employees International Union Local 32BJ—which represents superintendents, doormen, and other building service workers. Through the program, union members will be trained how to identify and access help for socially isolated older New Yorkers who need assistance.

► **Issue:** Alert systems should be adopted to protect older people living alone.

► **Initiative:** **Add Silver Alert to Notify NYC.** As more New Yorkers age, services dedicated to ensure their safety and protection are critical to promoting a safe and healthy city. To help promote the safety of older New Yorkers, most especially those who suffer from Alzheimer's, dementia or other cognitive impairments, the City is planning a citywide Silver Alert program that would be added to Notify NYC, the service that allows New Yorkers to sign up to receive notifications about emergency events by text message, recorded telephone message, or email. Silver Alerts will be sent, to New Yorkers who sign-up for the service, when an older New Yorker is reported missing. Routine alerts to hospitals, NYPD precincts, and officials at the Office of Emergency Management would supplement the Notify NYC alerts. The Silver Alert initiative will build on a program called Safe Return funded by the City Council which provides identification bracelets, wallet cards, and other important identification free of charge to assist in the safe return of individuals with Alzheimer's and related dementias in the event that they wander and become lost.

► **Issue:** Older adults are worried about being cheated or robbed in financial schemes.

► **Initiative:** **Expand "Savvy Seniors" campaign to educate older New Yorkers about identity theft and fraud.** Sadly, older New Yorkers are all too often targets of consumer scams and exploitation. In New York City, DFTA estimates that there are 50,000 cases of elder abuse—including neglect as well as physical, psychological and financial abuse—each year, with only a fraction of these cases reported. In partnership with DFTA, the New York City Department of Consumer Affairs (DCA) and its Office of Financial Empowerment (OFE) have implemented a broad outreach program called the "Savvy Seniors" campaign to help protect older adults from identity theft, frauds and scams, and deceptive advertising practices. The "Savvy Seniors" program is rooted in education and prevention, the two best defenses against this deplorable form of elder abuse.



DCA will expand the “Savvy Seniors” campaign to include targeted information and materials about financial education, counseling, and coaching. Drawing on the expertise of OFE, presentations may include such topics as budgeting, reverse mortgages, tax credits, credit cards, safe banking opportunities, concerns about debt, and most importantly, how to get trusted financial help and advice. The campaign will make older New Yorkers aware of two unique tools the City offers to provide meaningful assistance to those with financial concerns: the Financial Empowerment Centers located throughout the City which provide free, confidential, financial coaching and counseling, in English and Spanish; and the Financial Education Network—a database of providers of financial education classes, courses, and workshops available free or at low cost in the five boroughs, accessible by calling 311 or on the web at www.nyc.gov/ofe.



ACCESS TO Nutritious Food | 100

► **Issue:** Access to affordable and nutritious food is a concern among older New Yorkers.

► **Initiative:** Improve older New Yorkers' access to food stamps by implementing telephone application process and outreach campaign. The City's Human Resources Administration (HRA) is making it easier for older New Yorkers who are eligible for food stamps to receive and be recertified for this benefit. Interviews for individuals applying for food stamps who cannot travel can often be done over the phone. In certain cases for older adult families without children, recertification can be done at any time of day through a touchtone phone. HRA is launching an initiative through which the agency will identify and conduct outreach to older New Yorkers who are receiving Senior Citizen Rent Increase Exemption (SCRIE) program benefits but are not receiving food stamps. These older adults will be encouraged to apply for benefits at HRA's local food stamp offices, where they will be able to complete their application electronically with the assistance of staff members from the Food Bank of NYC. In addition, HRA plans to conduct a program through which DFTA staff and other volunteers will be trained to assist Spanish-speaking older adults with completing their food stamp applications.

► **Issue:** About three million New Yorkers do not live near grocery stores. Older adults are concerned about the closing of affordable supermarkets as a significant loss to their neighborhoods and to their well-being.

► **Initiative:** Implement NYC Green Cart program and form supermarket commission to address needs of neighborhoods underserved by supermarkets. Access to healthy foods varies widely throughout New York City, and in many lower-income neighborhoods, supermarkets are few and far between. There is demand for fresh fruits and vegetables in these neighborhoods and



October 2007: The World Health Organization (WHO) releases *Global Age-friendly Cities: A Guide*, which was developed to assist cities in mobilizing stakeholders to assess the age-friendliness of their social services and infrastructure as they relate to older adults. The guide was released at the United Nations during the 17th annual commemoration of the International Day of Older Persons.

the City plans to take the steps necessary to help fill the current void. The Mayor's Office, City Council, and the Department of Health and Mental Hygiene recently launched the Green Carts program, through which the City will issue 1000 new permits for vendors to sell fresh fruits and vegetables in neighborhoods where their availability is limited.

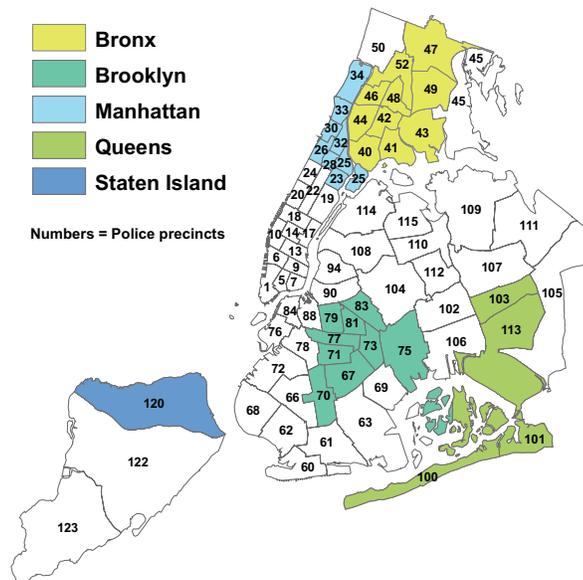
The City is also working diligently to address the need for grocery stores in underserved areas. Last year, the Mayor's Office, The Food Trust, Food Bank for New York City, Food Industry Alliance, and United Way of New York City convened the New York Supermarket Commission. The Commission brings together health and child advocates, government representatives, and supermarket industry executives to create a set of public policy recommendations that will bring affordable, nutritious food to underserved communities across the state. In May 2009, the Commission issued nine key policy recommendations, including customizing existing economic development incentives to meet

NYC Green Cart

Green Carts are only allowed in these designated areas

- Bronx
- Brooklyn
- Manhattan
- Queens
- Staten Island

Numbers = Police precincts



the needs of supermarkets and developing a financing program for supermarkets. Furthermore, the City plans to hire a coordinator who will conduct market research to attract supermarkets, as well as assist the markets with using these incentives and navigating the process for required government approvals and permits.

► **Issue: The need to travel for nutritious food is burdensome to older adults with disabilities.**

► **Initiative: Provide bus service for older New Yorkers to access grocery stores.** Continuing its efforts to ensure that all New Yorkers have access to healthy and fresh foods, the City will provide transportation for older adults from senior centers and naturally occurring retirement communities (NORCs) to supermarkets throughout the five boroughs. Department of Education school buses, when they are not needed to transport students, will be available to older New Yorkers at no charge. The initiative began with a pilot in Brooklyn that will inform city-wide expansion. Through the pilot, senior centers and NORCs have transported an estimated 1,800 older New Yorkers to supermarkets and other food-related venues.

► **Issue: An ever-increasing demand for home-delivered meals and other supports requires fine-tuning and streamlining delivery of services.**

► **Initiative: Increase efficiency in City's case management and home-delivered meals programs.** Through its case management program, the Department for the Aging (DFTA) supports a network of social workers and other case managers that assists older adults in their efforts

to age in place. For each case management client, case managers conduct a comprehensive in-home assessment to determine the client's need and eligibility for various city, state, and federal benefit programs as well as coordinate the delivery and monitor the quality of services. The City has launched a redesign of the case management system that has created distinct service areas for each case management provider and established case managers as the point of access for determining eligibility for home-delivered meals, homecare, and an array of other benefits and entitlements. This new model of case management, which DFTA is continuously working to enhance, serves 22,000 older New Yorkers.

Through DFTA's home-delivered meals program, approximately 17,000 older adults citywide receive a meal on each weekday. Until recently, DFTA had more than 90 contracts with more than 70 different providers to prepare and deliver the meals, with the number of meals served annually ranging from 1,200 to more than 200,000 per provider. The City is adjusting the home-delivered meals program to provide for greater coordination between home-delivered meals and case management providers while ensuring that all home-delivered meals clients receive comprehensive assessments of their needs. The changes will also make service areas more rational and efficient.



► **Issue:** While the increasing role of grandparents as parents is a phenomenon that has gained visibility in recent years, their role is not well-acknowledged in some social service systems.

► **Initiative:** Provide counseling and support services to grandparents raising grandchildren. An increasing number of grandparents are raising their grandchildren. Many grandparents face legal, educational, and financial challenges in their second stint caring for a younger generation. Services geared toward offering guidance and support for grandparents raising their grandchildren can prove to be an incredibly helpful resource. Recognizing this fact, the Grandparent Resource Center at the Department for the Aging (DFTA) will provide information and assistance to grandparents who are raising grandchildren or other young relatives, and are in need of support in this role. Resource specialists will offer advocacy and case assistance, and workshops on a variety of issues will be held at the Center to increase the support network for grandparents. These resources—coupled with community support groups and training for staff of City agencies and community-based organizations—will enable New Yorkers to better understand the circumstances of and the resources available to grandparent caregivers. The Center will also maintain a close working relationship with the New York City Kincare Task Force, a group comprised of representatives from the aging, child welfare, legal, and other sectors which strives to promote policies and comprehensive services that address the evolving challenges faced by kincare families.

► **Issue:** More than one million NYC residents provide care to older family members with chronic illnesses. Informal caregivers need more support in confronting care needs for relatives.

► **Initiative:** Expand educational materials and supports available to family caregivers. More than one million New York City residents provide care to older family members with chronic illnesses, and this number is expected to increase




WHAT I LOVE ABOUT GROWING OLDER IN NYC:

I am very happy and thankful for the social services for the elderly, free programs, access to Russian speaking professionals, services for my special needs grandson, the Department for the Aging's Grandparent Resource Center, classes at my senior center, and other cultural events that New York City has to offer.

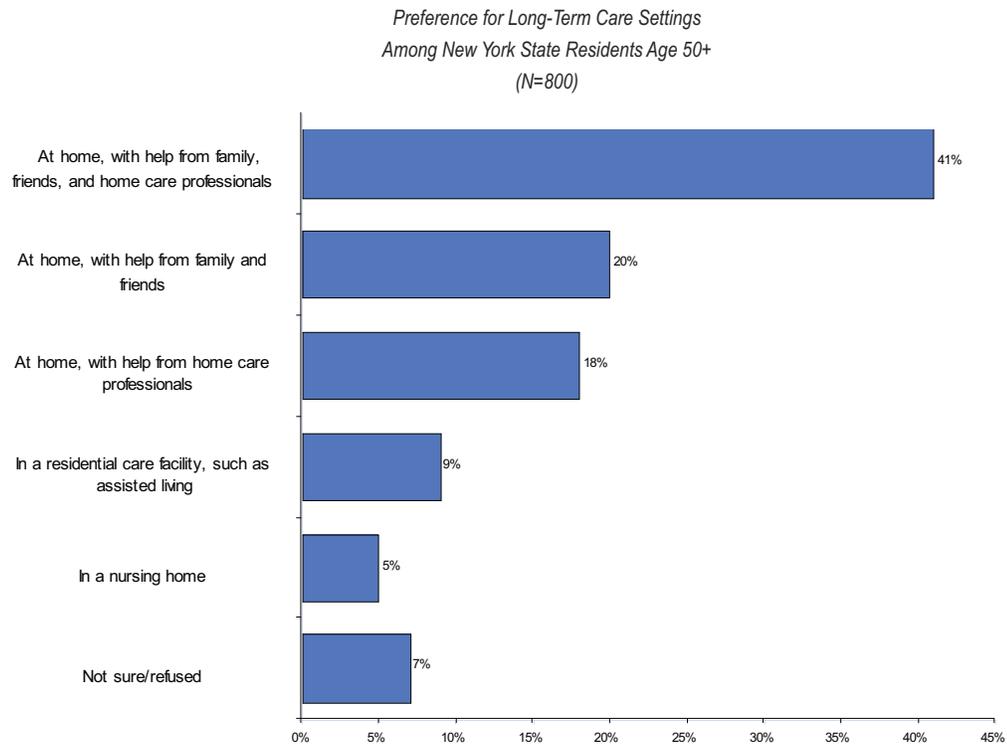


Inna Panova

as the City and nation age. While institutionalized care may have been the norm for previous generations, many older adults today desire to age in place, in their own homes, with assistance from family, friends, and supportive resources. Educating unpaid caregivers and health professionals alike on meeting the needs of and resources available to older adults in need of care is critical. To support family caregiving, DFTA's Alzheimer's and Caregiver Resource Center will provide counseling, education, training, and referral to appropriate resources such as respite care services. The Center, which oversees the National Family Caregiver Support Programs for New York City, will conduct training sessions on a wide array of topics concerning caregivers. Sessions will cover caregiving, Alzheimer's disease, residential alternatives, and other aspects of long-term care. Trainings will be designed for caregivers, older adults, professionals, and the general public. Specialized populations including Chinese, Russian, and Spanish speaking immigrants, gay and lesbian caregivers, grandparents with sole responsibility for their grandchildren, and Chinese and Korean speaking caregivers will receive targeted services.

As part of its "Next Step in Care" campaign, the United Hospital Fund of New York City will partner with the City's Health and Hospitals Corporation to produce and make available guides and other resources that provide critical information and guidance to family caregivers and health care providers that can help improve the safety and efficiency of patient transitions, increase family caregiver confidence and competence, and enhance staff satisfaction. In this effort the United Hospital Fund will also work with hospital and long-term care members of the Greater New York Hospital Association to develop ways to intergrate Next Step in Care into practice.

Fall 2007: Mayor Michael Bloomberg, City Council Speaker Christine Quinn, and the New York Academy of Medicine launch *Age-friendly NYC*, which is modeled after the WHO's Global Age-friendly Cities initiative. The goals of the project are to evaluate our City's responsiveness to the needs of older New Yorkers, develop recommendations, and implement strategies that will allow New York to sustain and enhance its status as an "age-friendly" city. New York becomes the 34th city worldwide, and the second in the United States, to join the WHO initiative.



Source: Long Term Care: An AARP Survey of NY Residents Age 50+ (March 2007)

► **Issue:** Many caregivers who are eligible for unpaid family leave and need to use it cannot afford to do so.

► **Initiative:** Explore policies that would allow more New Yorkers to take family leave when needed. The proportion of individuals who work and also care for children and sick family members has increased dramatically over the past 25 years, as more women have entered the workforce, and as the number of dual earner and single-parent households has increased. More and more families will face this challenge as the older adult population increases and workers are called upon to care for ailing family members. The federal Family and Medical Leave Act (FMLA), established in 1993, provided an important first step in assisting fami-

lies by requiring businesses to provide unpaid leave to workers. Unfortunately, many workers—particularly lower-income individuals and single parents—are unable to take unpaid leave under FMLA for financial reasons. To this end, the City will work with businesses and legislators to examine policies that may be implemented either by government or the private sector to enable more New Yorkers to take leave from work to care for an ill older relative, child, or other family member.

► **Issue: A majority of unpaid family caregivers work and have had to make some adjustments to their work life as a result of caregiving responsibilities. Conflicts with such responsibilities impact workplace productivity.**

► **Initiative: Conduct outreach and workshops on long-term care and caregiving resources for employers in NYC.** With more older adults seeking to avoid institutionalized care and family caregivers facing fiscal constraints, an increasing number of New Yorkers are not only caring for their family members but also juggling these responsibilities with full or part time work. Research shows that 59% of family caregivers who care for adults over age 18 either work or have worked while providing such care, and that 62% of caregivers have had to make some adjustments to their work life (such as reporting late or having to give up work entirely) as a result of their caregiving responsibilities.⁶⁶ Employee caregiving responsibilities profoundly impact not only employees, but also their employers' productivity. Estimates show that as much as \$34 billion is lost by American businesses each year due to their employees' need to care for a loved one who is 50 years of age or older.⁶⁷ To better equip employers to be a support center for employees with caregiving responsibilities, DFTA will develop a series of programs and resources that will provide outreach and guidance on caregiving issues to New

June 2007: The City Council develops and funds the HIV Prevention and Health Literacy for Seniors initiative. The initiative, the first of its kind nationwide, is created to develop tailored HIV prevention and education messages that target the older adult population, aging service providers, and health care providers.

York City employers. Areas with which this initiative may assist employers include providing caregiving information sessions to employees, encouraging the expansion of insurance benefits to include eldercare components, and the development of alternative work arrangements such as telecommuting and job sharing. The initiative will also provide information on convening support groups for caregiving employees, information and referral to needed programs, and employer/employee funded long-term care insurance.

► **Issue: Most older adults prefer to “age in place” by receiving care in their homes and communities as an alternative to nursing home care.**

► **Initiative: Further increase access to community-based care.** New York City already leads the rest of the state and the nation in enrolling its residents in programs that allow older adults and individuals with disabilities to remain in their homes and communities and retain maximum independence, avoiding institutionalization. The City’s Human Resources Administration, through its Home Care Services Program, disseminates information and provides counseling about long-term care options and assists medically and financially eligible residents to choose amongst an array of programs. Services range from stand alone housekeeping and home attendant services to more robust “packages” of services which include nutritional counseling, physical, occupational, and speech therapy, and skilled nursing care. Over 83,000 City residents are currently enrolled in community-based long-term care programs, compared to 30,978 who reside in nursing homes. While New York City represents 42% of the State’s population, it accounts for 76% of the State’s Personal Care enrollees, 92% of Managed Long-Term Care enrollees, and 62% of Long-Term Home Health Care enrollees.⁶⁸ The City will continue to research how to best improve access

to publicly-funded caregiving services and launch programs to help achieve this goal. One such program is a joint assessment initiative, through which nurses and case workers make joint visits to clients and consult each other in making more accurate assessments of client eligibility and needs, and offer information and guidance on the full range of available services.

► **Issue: There is a shortage of paid caregivers despite increasing demand. Direct care workers may not receive the training and support they need to perform their duties.**

► **Initiative: Expand training opportunities and other supports for paid caregivers.** While eight in 10 older adults who are in need of caregiving services receive them from family members or other volunteers, an increasing number are relying on paid caregivers.⁶⁹ In fact, the number of home health aides that are going to be needed in the next decade is expected to grow by more than 50%.⁷⁰ Unfortunately, low wages, limited opportunities for career advancement, and a lack of formal training have contributed to high turnover and a shortage of direct care workers. To help address this urgent situation, the City will explore a number of initiatives to help recruit, train, support, and retain paid caregivers.

For example, DFTA will expand already-successful training that it offers to caregivers on Alzheimer's and dementia to focus on other caregiving challenges, such as isolation and depression. As English is not the native language of a substantial number of caregivers, trainings will also be conducted in Spanish and Mandarin, among other languages. In addition, the City will work to make English as a second language classes more widely accessible to the caregiver workforce.

► **Issue: Long-term care costs are rapidly increasing and many older adults are concerned about how they will afford care. Only a quarter of New York State residents age 50+ have purchased long-term care insurance.**

► **Initiative: Promote awareness and education about long-term care insurance.** Costs for long-term care are rapidly increasing. In 2006, a semi-private room in a New York City nursing home cost an average of \$121,545 annually, and this figure is sure to rise consistently each year. In fact, in a 2007 survey conducted by the AARP of New York State residents age 50 and older, more than half of those polled indicated that they were not very or not at all confident that they would be able to pay for assisted living or nursing home care for three years.⁷¹ One option that has been examined to help address the rising cost of care is long-term care insurance. For example, the New York State Partnership for Long-Term Care is a unique program that combines long-term care insurance and Medicaid Extended Coverage. Through this program, New Yorkers are able to protect some or all of their assets if the long-term care that they need exceeds the period covered by private insurance.

Unfortunately, few older adults know about and purchase long-term care coverage. One study estimated that a mere 25% of New York state residents age 50+ had a long-term care insurance policy in 2005.⁷² Through its Health Insurance Information Counseling and Assistance Program (HIICAP), DFTA will expand the City's efforts to make more New Yorkers aware of long-term care insurance options, including the Partnership for Long-Term Care Program. These efforts will include educational materials, seminars, workshops, and information offered through the Internet. Outreach will target not only older adults who may have already come in contact with DFTA's senior centers and other programs, but also New Yorkers in middle age who may not be aware of the need to begin planning for long-term care.

2008: Mayor Bloomberg releases a report on an alternative to the federal poverty measure which shows that more older New Yorkers are living in poverty than was previously known. Largely due to out-of-pocket medical expenditures, nearly one-third of New Yorkers over age 65 live in poverty.



► **Issue: Palliative care programs are often underutilized.**

► **Initiative: Promote palliative care.** Advances in medicine, combined with a growing older adult population, have resulted in a dramatic increase in the number of older adults living with serious illness.⁷³ Palliative care is an interdisciplinary medical specialty that focuses on improving the quality of life for individuals with advanced illness and their families through pain and symptom management, communication regarding medical decision-making, and assurance of safe transitions between different care settings.⁷⁴ It is appropriate at any point in a serious illness (even while a patient pursues life-prolonging treatment), and in a variety of settings that may include hospice, home, or hospital.

Research shows that palliative care programs remain underutilized. One form of palliative care is hospice care—a Medicare benefit available to patients with diagnoses of six months or fewer to live. Yet hospice patients in 2007 received a median of 20 days of care, a figure illustrating that many ill individuals who could benefit from palliative care often do not receive it early enough.⁷⁵ The City is planning a number of initiatives to educate New Yorkers about palliative care and promote its use. To inaugurate this effort, the City will partner with stakeholders to organize a citywide summit on palliative care. The summit will focus on and make policy recommendations in a variety of areas in order to advance palliative care, including education of medical professionals, discussion of cultural and religious differences in the context of chronic illness, and the role of faith-based organizations. The City will also work to expand public awareness about palliative care, as well as offer greater supports for individuals who are at the end of life and do not have family members and friends nearby.

2008: The City Council passes legislation, enacted as Local Law 43 of 2008, which seeks to prevent elder abuse. The legislation requires the training of staff working at City-supported senior centers in elder abuse detection and reporting, as well as in the counseling of victims.



► **Issue: More can be done to increase access to hospital-based palliative care, as 42% of hospitals in New York State still do not have such programs.**

► **Initiative: Expand existing HHC palliative care programs.** The number of hospitals offering palliative care programs increased by 96% between 2000 and 2008.⁷⁶ Palliative care in a hospital setting allows such care to be provided simultaneously with all other treatments and has been shown to improve symptom management, caregiver well-being, and family satisfaction.⁷⁷ Additionally, palliative care providers safeguard patient dignity and safety by working to ensure that patient needs, wishes and goals are respected. Still, more remains to be done to improve access to hospital based palliative care, as 42% of hospitals in New York State do not have palliative care programs.⁷⁸ In an effort to ensure dignity, respect, quality care, and comfort for its most vulnerable patients, the New York City Health and Hospitals Corporation (HHC) has been integrating the discipline of palliative care throughout its 11 acute care hospitals. Each HHC hospital now has a palliative care team. To help keep the programs vital, a central HHC Palliative Care Council provides expert advice by sharing opinions and making recommendations.

Special PC programs are being created at several HHC hospitals to serve the needs of each hospital's community. One hospital has used specially trained volunteers to help patients in need of palliative care who are without family; another is focusing on ensuring that palliative care principles based on the alleviation of suffering are used in the emergency room (the site where most people enter the hospital). Another hospital is working to ensure that as patients transition from hospital care to hospice care they maintain continuity of treatment and ongoing contact with the hospital palliative care team that they have come to know so well. HHC will work to expand the availability of palliative care services to its patients throughout the system.

► **Issue: Many individuals do not make their wishes regarding what types of end of life care they would want to receive known. Only an estimated 15 to 25% of Americans complete advance directives.**

► **Initiative: Promote advance directives.** End of life situations can arise unexpectedly, at any age. While decisions regarding end of life care are highly personal ones, many individuals unfortunately do not make their wishes regarding what types of care they wish to receive known in advance. Only an estimated 15 to 25% of adults complete advance directives, usually after hospitalization or serious illness.⁷⁹ Advance care planning, such as health proxies and living wills, helps an individual to make sure that his or her wishes regarding care will be known and followed. In collaboration with its community-based organizations and health care partners, DOHMH will work to make health care providers and New Yorkers alike more informed and aware about advance care planning. These efforts will include making forms and resources for completing advance directives publicly available, as well as helping to facilitate discussions on advance care planning and hospice care.

► **Issue: Absent advance directives, a physically or mentally incapacitated person may not have health care decisions made by loved ones who best understand his/her wishes.**

► **Initiative: Advocate for State legislation authorizing family members or domestic partners to act as surrogates to make health care decisions on behalf of an incapacitated adult.** There are three types of advance directives in New York. The state health care proxy law enables competent adults to protect their health care wishes

by appointing a health care agent to make decisions about treatment on their behalf when they are unable to decide for themselves. Living wills, which are not provided for by legislation in New York State but are nonetheless recognized by courts, allow individuals to state their wishes regarding medical care. Do not resuscitate orders (DNRs) allow individuals to express their wish not to receive cardiopulmonary resuscitation. As noted above, however, many New Yorkers do not complete advance directives.

Proposed legislation before the New York State legislature, called the Family Health Care Decision Act, would help New Yorkers to ensure that their wishes regarding care will be respected in the event that a crisis arises and there is no signed health care proxy in place nor “clear and convincing evidence” of treatment recommendations. The legislation would authorize family members, including domestic partners, to act as surrogates on behalf of adults who lack decision-making capability regarding treatment and/or end of life care. Surrogate decisions would be made according to the incapacitated individual’s moral and/or religious beliefs (if known), consultation with the patient’s health care provider, and institutional safeguards. Most importantly, this legislation will eliminate the legal and ethical gap regarding decision-making for incapacitated adults by establishing clear standards of surrogate authority to provide medical treatment or end of life care.

NEXT STEPS

In collaboration with The New York Academy of Medicine (NYAM), the Mayor's Office and City Council will work with their public and nonprofit partners to implement the recommendations included in this report. In addition, NYAM will be convening the Age-friendly New York City Commission, a group charged with ensuring that the public, nonprofit, and private sectors continue to collaborate in meeting the demographic challenges and take advantage of the opportunities posed by a rapidly increasing population of older New Yorkers. We remain firmly committed to making sure that New York continues to be a vibrant, healthy, and safe place to live and work for all New Yorkers in the years to come. We look forward to sharing our continued successes with you as we move forward with cementing New York's position as an age-friendly city.



APPENDICES

Age-friendly NYC: Issues and Initiatives

What we discovered: Issues identified in NYAM Report and other research

What we want to accomplish: Age-friendly NYC Initiatives

Community and Civic Participation

Employment & Economic Security

1. Employers and industries need assistance in recruiting, placing, and training older workers to meet the demands of today's economic environment.	Provide job training and search assistance to older New Yorkers
2. Employment opportunities are important for the personal and financial well-being of older New Yorkers.	Increase number of paid job opportunities for older New Yorkers
3. A number of older New Yorkers, including recent immigrants and those whose employment histories are limited to informal work, are ineligible for Social Security.	Assist older New Yorkers short of work histories to obtain employment allowing them to be eligible for Social Security

Volunteerism

4. Many older adults live separately from families and are at risk for social isolation; conversely, many younger adults lack contact with elders.	Promote intergenerational volunteering and learning through partnerships with schools and nonprofit organizations
5. Older New Yorkers provide critical resources to the City and seek continued involvement in political and civic activities.	Provide new volunteer opportunities and expand resources for older New Yorkers through timebanking and other initiatives

Cultural & Recreational Activities

6. Use of public libraries decreases after age 50.	Establish citywide partnership between senior centers and libraries
7. Many older adults are interested in cultural activities and desire greater access to them.	Recruit artists to conduct programs in senior centers
8. New York offers many cultural opportunities, but affordability can be a challenge.	Provide a guide of discounted arts/cultural events for older New Yorkers

Information & Planning

9. Older adults want to pursue their interests and interact socially while staying active and busy.	Publicize citywide opportunities for older New Yorkers through new older adult-focused NYC & Co. website
10. Older adults desire a "one-stop shop" for information about City services.	Redesign DFTA's website to be more user-friendly and provide greater information about services
11. Older adults desire to be included in all levels of decision-making about their communities' needs.	Conduct local community assessments of neighborhoods to determine age friendliness
12. Some older adults who are lesbian, gay, bisexual, or transgender (LGBT) do not feel welcome in trying to access City services.	Conduct cultural competency trainings on LGBT issues with the City's senior service providers

Housing

Affordable Housing Development

13. Demand for publicly-subsidized or financed low income senior housing (such as Section 202 units) far exceeds supply.	Target housing funds and streamline process of building low income housing for older New Yorkers
--	--

14. Zoning requirements for parking may be an impediment to the development of new affordable housing.	Examine parking requirements for affordable senior housing and amend the zoning code as necessary to facilitate construction of senior housing
15. Preserving innovative, affordable, and appropriate housing is an important determinant of health for older New Yorkers.	Provide loans for rehabilitation and new construction of affordable housing

Homeowner & Renter Assistance

16. Many older homeowners are on fixed incomes and may not have the resources to make needed repairs to their homes.	Provide loan assistance to older New Yorkers for home repairs
17. Some older adult homeowners may have special needs and circumstances and could benefit from a contractor who is sensitive to these needs when they are seeking home repairs.	Engage NYC home improvement contractors in best practices for older adult market
18. Affordability of housing is a concern. Nearly half of all renters age 65 and older in NYC spent at least 35% of their income on rent in 2005.	Improve access to SCRIE through transfer from DFTA to Department of Finance
19. Older adults fear the costs of housing-related legal proceedings and often do not have the resources to defend themselves.	Expand eviction prevention legal services for older New Yorkers

Aging in Place

20. Older adults appreciate and benefit from living in close-knit micro-communities. Social service programs within the City's NORCs should be expanded.	Provide additional supportive services to NORCs
21. Frailty can lead to an inability to stay living independently in the community.	Target Section 8 vouchers to vulnerable older adults at risk of eviction
22. While there is an increased demand for alternatives to nursing home care, such models can be prohibitively expensive to develop and difficult for older adults to access.	Promote development of and access to new models of housing that support aging in place

Public Spaces & Transportation

Accessible & Affordable Transportation

23. Half of New Yorkers regularly use mass transit, but not all subway stations are accessible. Older adults desire information regarding the status of elevators in subway stations before making a trip.	Improve elevator and escalator service and enhance accessibility of subway stations
24. Some older adults have reliability and efficiency concerns regarding Access-A-Ride.	Improve efficiency of Access-A-Ride by equipping vehicles with GPS devices and implementing phone notification system
25. Many taxis are not wheelchair accessible or easy to get in and out of.	Match accessible taxis with users who need them
26. A goal to strive for in the future is assuring that all taxis purchased for use in the City are wheelchair accessible.	Develop model accessible taxi
27. There are large sections of the City not well-served by bus or subway routes.	Develop taxi voucher program for older adults who are unable to use public transportation

Safe & Age-friendly Public Spaces

28. Many bus stops lack seats or shelter.	Increase seating in bus shelters
29. Unexpected delays in transit and poor weather can make access to restroom facilities difficult for older adults.	Install public restrooms at key locations citywide
30. There are few places to sit and some sidewalks are crowded and have various obstacles.	Create new, pedestrian friendly public spaces while calming traffic
31. Pedestrian safety is a concern for older adults.	Redesign street intersections at key locations citywide to improve safety for older New Yorkers
32. Some older adults feel that certain parks are at times too crowded and their programs geared to the younger population.	Identify age-friendly parks and encourage older adults to utilize them

Planning for the Future

33. More opportunities should be created for older adults to engage in volunteerism with issues they feel passionate about.	Provide environmental stewardship workshops and engage older New Yorkers in planting trees as part of PlaNYC and MillionTreesNYC
34. The needs of older people and individuals with disabilities should be incorporated into transportation and related planning efforts.	Conduct study to better address the mobility needs of older New Yorkers
35. Participation in the life of the City could be made easier with fewer architectural and physical barriers.	Promote use of Universal Design Guidelines through education and awareness efforts

Health & Social Services

Wellness & Healthcare Planning

36. The number of older New Yorkers with HIV/AIDS is on the rise.	Increase HIV awareness and health literacy among older New Yorkers
37. Studies show that older adults using senior centers desire a greater variety of programs and activities.	Redesign senior centers to focus on wellness and develop health outcomes
38. A significant percentage of older adults does not engage in regular physical activity.	Establish fitness club discount for older New Yorkers
39. Older New Yorkers desire assistance with understanding the intricacies of various health plans.	Increase awareness about health insurance options through DFTA's HIICAP program

Assistance to At-Risk Older Adults

40. Falls are the leading cause of morbidity and mortality from unintentional injury among older individuals.	Implement citywide falls prevention initiative
41. Older New Yorkers are especially at risk for health problems related to heat.	Provide free air conditioners to at risk older New Yorkers
42. A sizable percentage of older New Yorkers lives alone and nearly 17% are at risk for social isolation.	Conduct outreach to older New Yorkers at risk for social isolation
43. Alert systems should be adopted to protect older people living alone.	Add Silver Alert to Notify NYC
44. Older adults are worried about being cheated or robbed in financial schemes.	Expand "Savvy Seniors" campaign to educate older New Yorkers about identity theft and fraud

Access to Nutritious Food

45. Access to affordable and nutritious food is a concern among older New Yorkers.	Improve older New Yorkers' access to food stamps by implementing telephone application process and outreach campaign
46. About three million New Yorkers do not live near grocery stores. Older adults are concerned about the closing of affordable supermarkets as a significant loss to their neighborhoods and to their well-being.	Implement NYC Green Cart program and form supermarket commission to address needs of neighborhoods underserved by supermarkets
47. The need to travel for nutritious food is burdensome to older adults with disabilities.	Provide bus service for older New Yorkers to access grocery stores
48. An ever-increasing demand for home-delivered meals and other supports requires fine-tuning and streamlining delivery of services.	Increase efficiency in City's case management and home-delivered meals programs

Caregiving & Long-Term Care

49. While the increasing role of grandparents as parents is a phenomenon that has gained visibility in recent years, their role is not well-acknowledged in some social service systems.	Provide counseling and support services to grandparents raising grandchildren
50. More than one million NYC residents provide care to older family members with chronic illnesses. Informal caregivers need more support in confronting care needs for relatives.	Expand educational materials and supports available to family caregivers
51. Many caregivers who are eligible for unpaid family leave and need to use it cannot afford to do so.	Explore policies that would allow more New Yorkers to take family leave when needed
52. A majority of unpaid family caregivers work and have had to make some adjustments to their work life as a result of caregiving responsibilities. Conflicts with such responsibilities impact workplace productivity.	Conduct outreach and workshops on long-term care and caregiving resources for employers in NYC
53. Most older adults prefer to "age in place" by receiving care in their homes and communities as an alternative to nursing home care.	Increase access to community-based care
54. There is a shortage of paid caregivers despite increasing demand. Direct care workers may not receive the training and support they need to perform their duties.	Expand training opportunities and other supports for paid caregivers
55. Long-term care costs are rapidly increasing and many older adults are concerned about how they will afford care. Only a quarter of NY State residents age 50+ have purchased long-term care insurance.	Promote awareness and education about long-term care insurance

Palliative Care & Advance Directives

56. Palliative care programs are often underutilized.	Promote palliative care
57. More can be done to increase access to hospital-based palliative care, as 42% of hospitals in New York State still do not have such programs.	Expand existing HHC palliative care programs
58. Many individuals do not make their wishes regarding what types of end of life care they would want to receive known. Only an estimated 15 to 25% of Americans complete advance directives.	Promote advance directives
59. Absent advance directives, a physically or mentally incapacitated person may not have health care decisions made by loved ones who best understand his/her wishes.	Advocate for State legislation authorizing family members or domestic partners to act as surrogates to make health care decisions on behalf of an incapacitated adult

AGE-FRIENDLY NYC Vision Statement 124

New Yorkers are living longer and are healthier than ever. Indeed, life expectancy in New York City has now surpassed the nation as a whole, and more New Yorkers are choosing to stay here as they age. Over the next twenty years, city demographers expect that older New Yorkers (60 and above) will nearly double in number and will constitute 20.2% of the City's total population. As our population ages, the City will be transformed by the social and economic contributions of an increasingly vibrant older adult population. This transformation will challenge traditional models for supporting people as they age.

New York City strives to be a place that accommodates older New Yorkers as vibrant contributors to the City and its communities and where older New Yorkers are supported in their endeavors to live the fullest lives possible. With local government, non-profit organizations, and private companies working together, New York City aspires to be a model city comprised of communities that are characterized by their ability to support and engage people as they age.

By strengthening partnerships, modernizing programs, and reinforcing the network of services and opportunities available to older New Yorkers, we aim to:

- ▶ **Empower individuals as they age to live independently and vibrantly;**
- ▶ **Create a more seamless continuum of supports that fosters quality of life and community connectedness in a manner that meets the wide-ranging needs and preferences of older individuals and their families; and**
- ▶ **Ensure that City-funded programs are responsive to the needs and preferences of the most vulnerable older New Yorkers and are designed to support their lifestyles and choices.**

To achieve and sustain this vision as a municipality operating in accordance with national and state laws and regulations, our approach for local planning will be guided by the following principles:



Engagement

- Programs – The City and its partners should strive to meet the diverse interests and abilities of older New Yorkers by continuously reflecting on and adapting to their changing interests and needs.
- Outreach and Access – Community-based programs, including libraries, schools, museums, and religious institutions, should be supported to develop and sustain programming that meets older New Yorkers’ interests and engages them in lifelong learning and other opportunities for enrichment.
- Civic Engagement – Older New Yorkers should have volunteer and service opportunities that value their experiences and benefit their communities.
- Employment – Older New Yorkers should have work opportunities that are reflective of their skills and experience.
- Cultural Diversity – Programs and services should be reflective of the increasing ethnic and cultural diversity of New York’s older adult population.

Mobility

- Transportation – Public transportation should be safe, convenient, and readily accessible to older New Yorkers and those with limited mobility and/or disabilities. Transportation options should enable people to move independently or with their caregivers throughout the City.
- Accessibility – Businesses, services, and public spaces should follow the guidelines for universal and accessible design to ensure that older New Yorkers are able to fully navigate the City’s built environment and, by extension, sustain their full participation in the social and economic life of the City.

Housing

- Affordability – Affordable housing options should be available and accessible to ensure that older New Yorkers can remain in their homes and connected to their communities if they choose to do so.

- Quality – Older New Yorkers should have safe and secure housing that provides for their health and well being.
- Design – Builders and developers should be strongly encouraged to incorporate principles of universal design into housing developments.

Health and Wellness

- Access to Information – Older New Yorkers and their caregivers should have multiple and easy points of access to a comprehensive inventory of resources that help them make informed decisions about healthy aging, public benefits, long-term care, mental health, and other supportive services.
- Service Plan Management – Where appropriate, the City should work in partnership with its provider network to manage the multiple service needs of older New Yorkers who are receiving City-funded services.
- Access to Services – Older New Yorkers should have convenient access to an integrated health care and social services system that provides comprehensive, streamlined services, including preventive health care; strategies for managing chronic medical and mental health conditions; and advanced directives, palliative care, and end of life care options.
- Care Coordination – Services should be coordinated whenever possible, in a manner that supports self-management of chronic diseases and values the older New Yorker's family as a critical partner in the development and execution of a coordinated care plan.
- Health Insurance – Older New Yorkers should have coverage that is affordable and that meets their health needs.
- Healthy Living – Older New Yorkers should have convenient access to healthy foods and programs that promote overall wellness.
- Safety – The activities of all stakeholders should be coordinated to ensure that older New Yorkers can lead safe and secure lives free of abuse, neglect, and other forms of physical, emotional, or financial exploitation.

- End of Life Care – All New Yorkers should have information and access to compassionate, appropriate, and affordable choices about end of life care.

Integration and Coordination

- Collaboration – The public, non-profit, and private sectors should work in partnership to accomplish the City’s goals for improving aging services.
- Planning – The modernization of the vast array of City services should be planned with the input of older New Yorkers and should be coordinated to ensure that services are appropriate to each individual's abilities and circumstances.
- Accountability – To ensure that programs are responsive to the evolving circumstances of older New Yorkers, relevant City-funded services should be routinely evaluated and improved using standardized evaluation methodologies and evidence-based models.

- ¹ See <http://www.bestplaces.net/docs/SeniorCities.aspx>
- ² According to the Centers for Disease Control & Prevention, life expectancy at birth for a U.S. resident was 77.7 years in 2006. See <http://www.cdc.gov/nchs/fastats/lifexpec.htm>
- ³ NYC Department of City Planning, *New York City Population Projections by Age/Sex & Borough, 2000-2030 Report* (Dec. 2006), available at http://www.nyc.gov/html/dcp/pdf/census/projections_report.pdf
- ⁴ U.S. Census Bureau, *Projections of the Population by Selected Age Groups & Sex for the United States: 2010 to 2050* (Aug. 2008), available at <http://www.census.gov/population/www/projections/summarytables.html>
- ⁵ Michael Gusmano, *Growing Older in World Cities: New York, London, Paris, and Tokyo* (2006).
- ⁶ United Nations, *World Population Prospects: The 2006 Revision* (2007), available at www.un.org/esa/population/publications/wpp2006/FS_ageing.pdf
- ⁷ NYC Department of City Planning.
- ⁸ Gary J. Gates, *Same-sex Couples and the Gay, Lesbian, Bisexual Population: New Estimates from the American Community Survey*, *The Williams Institute on Sexual Orientation Law and Public Policy*, UCLA School of Law (Oct. 2006) ("New Estimates"), available at <http://www.law.ucla.edu/williamsinstitute/publications/SameSexCouplesandGLBpopACS.pdf>
- ⁹ Urban Institute, *Gay and Lesbian Demographics*, <http://www.urban.org/toolkit/issues/gayresearchfocus.cfm> ("Urban Institute Data").
- ¹⁰ National Governor's Association, *Increasing Volunteerism Among Older Adults: Benefits & Strategies for States*, *Center for Best Practices Issue Brief* (May 2008) ("NGA Brief"), available at <http://www.nga.org/Files/pdf/0805CIVICENGBRIEF.PDF>
- ¹¹ NGA Brief.
- ¹² NGA Brief.
- ¹³ NYAM Report.
- ¹⁴ U.S. Social Security Administration, *Income of the Population 55 or Older, 2006* (Feb. 2009) ("SSA Study"), available at http://www.ssa.gov/policy/docs/statcomps/income_pop55/2006/index.html
- ¹⁵ SSA Study.
- ¹⁶ B.J. Gray, R. Scheinmann, P. Rosenfeld & R. Finkelstein, *Aging without Medicare? Evidence from New York City*, *Inquiry*, Vol. 43 (Fall 2006) ("Evidence").
- ¹⁷ Evidence.
- ¹⁸ NYAM Report.
- ¹⁹ *Findings from City agency assessments* ("City Assessments").
- ²⁰ Pew Internet & American Life Project, *Information Searches That Solve Problems* (Dec. 2007), available at <http://www.pewinternet.org/Reports/2007/Information-Searches-That-Solve-Problems.aspx>
- ²¹ NYAM Report.
- ²² *New Estimates*.
- ²³ Urban Institute Data.
- ²⁴ Bill Schoell, *More Grey, Less Gay*, *The New York Blade* (Mar. 28, 2008).
- ²⁵ Brookdale Center for Aging Study.
- ²⁶ Furman Center for Real Estate and Urban Policy, *Housing Policy in New York City: A Brief History* (2006), available at http://furmancenter.org/files/AHistoryofHousingPolicycombined0601_000.pdf
- ²⁷ NYC Department of City Planning. This figure is a 2007 estimate by DCP that was adopted by the U.S. Census Bureau in December 2008. See <http://www.nyc.gov/html/dcp/html/census/popcur.shtml>
- ²⁸ M.W. Lee, *Selected Findings of the 2008 New York City Housing and Vacancy Survey*, NYC Department of Housing Preservation and Development (Feb. 2009), available at <http://www.nyc.gov/html/hpd/downloads/pdf/Selected-Findings-tables-2008-HVS.pdf>

- ²⁹ NYC Housing Authority Factsheet (“NYCHA Factsheet”), available at <http://www.nyc.gov/html/nycha/html/about/factsheet.shtml>. This figure is as of May 2009.
- ³⁰ U.S. Census Bureau, *Renter-occupied Housing Units by Rent Regulation Status, Series 1A – Table 3, Age of Householder, 2008 New York City Housing and Vacancy Survey* (“Vacancy Survey”), available at <http://www.census.gov/hhes/www/housing/nychvs/nychvs.html>
- ³¹ Vacancy Survey.
- ³² City Assessments.
- ³³ NYCHA Factsheet. This figure is as of January 2009.
- ³⁴ Vacancy Survey.
- ³⁵ Vacancy Survey.
- ³⁶ Vacancy Survey.
- ³⁷ NYAM Report.
- ³⁸ NYAM Report.
- ³⁹ Barbara A. Haley & Robert W. Gray, *Section 202 Supportive Housing for the Elderly: Program Status and Performance Measurement, Office of Policy Development & Research, U.S. Dept. of Housing & Urban Development (June 2008)* (“HUD Report”), available at http://www.huduser.org/publications/hsgspec/sec_202.html
- ⁴⁰ AARP, *Long Term Care: An AARP Survey of NY Residents Age 50+ (March 2007)* (“AARP Survey”), available at http://assets.aarp.org/rgcenter/ill/ny_ltc_2007.pdf
- ⁴¹ MTA Website, <http://www.mta.info/mta/network.htm>
- ⁴² MTA Website.
- ⁴³ TLC Website, <http://www.nyc.gov/html/tlc/html/about/about.shtml>
- ⁴⁴ NYAM Report.
- ⁴⁵ City Assessments.
- ⁴⁶ NYAM Report.
- ⁴⁷ NYC Department of Parks and Recreation website, http://www.nycgovparks.org/sub_faqs/faq.html#aboutParks
- ⁴⁸ NYC Department of Parks and Recreation website, http://www.nycgovparks.org/sub_about/about_parks.html
- ⁴⁹ NYAM Report.
- ⁵⁰ NYAM Report & City Assessments.
- ⁵¹ NYC Department of Transportation.
- ⁵² NYAM Report.
- ⁵³ NYC Independent Budget Office, *Access-A-Ride: With More Riders, Costs Are Rising Sharply* (Oct. 2006), available at <http://www.ibo.nyc.ny.us/iboreports/FBparatransit10306.pdf>
- ⁵⁴ NYAM Report.
- ⁵⁵ NYC Department of Health & Mental Hygiene, *Take Care New York – A Policy for a Healthier New York City: Fourth Year Progress Report* (March 2009), available at <http://www.nyc.gov/html/doh/downloads/pdf/tcny/tcny-4yr-ar.pdf>
- ⁵⁶ NYC Department of Health & Mental Hygiene (Dec. 2008).
- ⁵⁷ City Assessments.
- ⁵⁸ Fiscal Policy Institute, *The Economic Situation of New York City’s Health and Human Services and Cultural Nonprofit Organizations* (April 2009), available at http://www.fiscalpolicy.org/FPI_NonprofitSectorNYC.pdf
- ⁵⁹ NYAM Report.
- ⁶⁰ New York City KinCare Task Force, *Removing Barriers to Successful Kin Caregiving* (June 2009).

⁶¹ *New York City Health and Nutrition Examination Survey conducted by DOHMH in 2004.*

⁶² *NYAM Report.*

⁶³ *W. He, M. Segupta, V.A. Velkoff & K.A. DeBarros, 65+ in the United States, National Institute on Aging and U.S. Census Bureau (December 2005) ("Census Report").*

⁶⁴ *Census Report.*

⁶⁵ *NYAM Report.*

⁶⁶ *National Alliance for Caregiving and AARP, Caregiving in the U.S. (2004).*

⁶⁷ *MetLife Mature Market Institute and National Alliance for Caregiving, MetLife Caregiving Cost Study: Productivity Losses to U.S. Business (July 2006), available at <http://www.caregiving.org/data/Caregiver%20Cost%20Study.pdf>*

⁶⁸ *Medicaid Institute at the United Hospital Fund, An Overview of Medicaid Long-Term Care Programs in New York, Figure 2.3.*

⁶⁹ *International Longevity Center – USA & Schmieding Center for Senior Health & Education, Caregiving in America (2006) ("Caregiving Report"), available at <http://www.ilcusa.org/media/pdfs/Caregiving%20in%20America-%20Final.pdf>*

⁷⁰ *Caregiving Report.*

⁷¹ *AARP Survey.*

⁷² *As reported in AARP Survey using U.S. Census data and projections.*

⁷³ *R. Sean Morrison, et al., Cost Savings Associated with US Hospital Palliative Care Consultation Programs, Archives of Internal Medicine, Vol. 168, No. 16 (Sept. 2008) ("Morrison").*

⁷⁴ *Morrison.*

⁷⁵ *National Hospice & Palliative Care Organization, NHPCO Facts and Figures: Hospice Care in America (Oct. 2008), available at http://www.nhpc.org/files/public/Statistics_Research/NHPCO_facts-and-figures_2008.pdf*

⁷⁶ *Morrison.*

⁷⁷ *Morrison.*

⁷⁸ *R. Sean Morrison, et al., America's Care of Serious Illness: A State-by-State Report Card on Access to Palliative Care in Our Nation's Hospitals, Center to Advance Palliative Care (2008).*

⁷⁹ *L.S. Wissow, et al., Promoting Advance Directives Among Elderly Primary Care Patients, Journal of General Internal Medicine, Vol. 19 (Sept. 2004).*

Acknowledgments

The hard work and dedication of numerous people and agencies helped to shape and inform this report.

On behalf of the Mayor's Office and Speaker Quinn, we would like to thank Jo Ivey Boufford and the New York Academy of Medicine for your continued collaboration and advancement of this work as well as all of the Council Members and City staffers that have participated in the process.

This report would not have happened without the commitment of staff at many City agencies. Thank you to all of the agencies and offices that participated in the age-friendly self-assessment and those that are working with the Department for the Aging (DFTA) to implement the initiatives, including the Department of Buildings, the Department of City Planning, the Department of Consumer Affairs, the Department of Cultural Affairs, the Economic Development Corporation, the Fire Department, the Health & Hospitals Corporation, the Department of Health and Mental Hygiene, the Human Resources Administration, the Department of Homeless Services, the Department of Housing Preservation and Development, the Department of Information Technology & Telecommunications, the Department of Juvenile Justice, the Mayor's Office for People with Disabilities, the Parks Department, the Taxi and Limousine Commission, the Department of Youth and Community Development, the Mayor's Office of Immigrant Affairs, the Mayor's Community Affairs Unit, NYC Service, the Center for Economic Opportunity, and New York City and Company.

Special thanks to all of the nonprofit partners and senior service providers who contributed both their time and resources towards this work.

Thank you to the Commissioner of DFTA, Lilliam Barrios-Paoli and her staff, especially Caryn Resnick, Kristen Simpson-Zak, Gabriel Oberfield, Angeles Pai, Chris Miller, Ali Hodin-Baier, and Aviva Sufian, whose dedication to helping older New Yorkers is demonstrated every day.

This report was written and compiled by staff from the Office of the Deputy Mayor for Health and Human Services with input from key partners. Specifically, staff from both the Council and NYAM provided feedback and insight for this report including David Pristin, Yolanda McBride, Kristoffer Sartori, Shauneequa Owusu, Pakhi Sengupta, Ruth Finkelstein, and Julie Netherland.

Thank you to Deputy Mayor Linda Gibbs and her entire staff. Special thanks to Yuriy Pawluk for his tireless dedication and writing abilities. Valuable support, guidance, and editing were provided by Kristin Misner and Maryanne Schretzman. We are also grateful for the assistance of Ronald Richter, Andrea Cohen, Wendy Perlmutter, Tamiru Mammo, and Crystal Thomas. Special thanks are in order to Connie Ress and staff at the Human Resources Administration for your creative talent and printing of this report.

