

Age-Friendly DC
Five Year Progress Report to
the World Health Organization



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LETTER FROM MAYOR

MURIEL BOWSER



Five years ago, Washington, DC launched a collaborative effort to make our community age-friendly. As Mayor of our nation's capital, I am proud that DC is on pace to become only the third city in the United States to be designated an Age-Friendly City by the World Health Organization.

I am also proud to have led our Age-Friendly DC initiative on the DC Council and now as your Mayor. As a result of our shared efforts, we have:

- launched the Safe at Home Program to provide grants of up to \$10,000 for home modifications
- broke ground on Plaza West, which will provide 223 units of affordable rental housing, including 50 units reserved for grandfamilies— grandparents raising grandkids
- piloted an intergenerational gardening program to maintain school gardens over the summer
- recognized 32 local businesses as Age-Friendly Businesses, bringing the total number of recognized businesses to 43, spread out across all eight wards
- launched the Alternative Pathways to Employment Program to refresh the job skills of 50+ year old residents and place program graduates in good jobs
- trained nearly 200 direct service providers in LGBTQ cultural competency
- provided “Senior\$afe” training to financial securities firm personnel on how to spot and report financial exploitation of seniors

But our task is much larger than changing policies and programs. Age-Friendly DC challenges us to help Washingtonians live longer, healthier, more fulfilling lives, and to find pride and purpose in all that we do, regardless of age. The initiative also enables us to confront our prejudices about aging and to become more welcoming and inclusive in our daily lives. We are safer and stronger not simply because we are diverse, but because we embrace and celebrate our diversity.

In the past decade, the number of Washingtonians over the age of 60 grew by nearly 15,000, and this number will continue to rise. This report is a testament to our commitment to continue making Washington, DC, an even safer and healthier city to age in place in the years ahead. Let's keep pushing!

A handwritten signature in black ink that reads "Muriel Bowser". The signature is fluid and cursive, with the first name "Muriel" and last name "Bowser" clearly legible.

Muriel Bowser
Mayor

EXECUTIVE SUMMARY

Washington, DC, is a thriving multi-generational city. More than 1 in 10 residents in the District of Columbia are over 65 years old, and their ranks are growing every day. According to the 2011-2015 American Community Survey, over 6,000 residents over the age of 50 chose to relocate to Washington, DC, from other jurisdictions, and many older residents have lived in the District their entire lives. We believe that older adults are choosing the District of Columbia as home in large part because of the age-friendly opportunities and amenities DC offers—from housing to jobs to purposeful and healthy living. With our population growing older and because aging is an experience every person shares, making communities an easier place to grow older is an urgent and critical endeavor.

This is why in 2012 the District, led by then-Councilmember Muriel Bowser, approved plans for the city to participate in the World Health Organization's (WHO) Age-Friendly Initiative. On December 18, 2012, the Council of the District of Columbia passed the AARP Network Age-Friendly Cities and Communities Recognition Resolution of 2012. Today, the initiative is led by now-Mayor Muriel Bowser and implemented by the Deputy Mayor for Health and Human Services.

Age-Friendly DC is a coordinated and comprehensive effort with the goal of ensuring all DC residents are active, connected, healthy, engaged, and happy in their environment. The initiative considers all aspects of community life, including outdoor spaces and buildings, safe and affordable transportation, housing options for all ages, social participation, social inclusion, civic participation, employment, communication, health services, emergency preparedness, and elder abuse prevention.

Age-Friendly DC includes a Task Force comprising more than a dozen District agencies and community partners, including representatives from the private and non-profit sectors, think tanks, the media and local universities, including George Washington University; Urban Institute; DC Retired Educators of America; the United States Environmental Protection Agency's Aging Initiative; Beacon Newspapers; American Red Cross of the National Capital Region; American Psychiatric Association; Matz, Blancato and Associates; and Verizon.

Over the last five years, Age-Friendly DC has made dramatic gains in improving the health and quality of life for residents. By setting goals and tracking progress against 10 domains, Age-Friendly DC has already made the District an even a better place to grow older, and live a rich and purposeful life.

The dashboard below charts the progress and achievements of Age-Friendly DC for each of the 10 domains. The report that follows details these shared accomplishments and outlines the hundreds of projects that are underway throughout the District for the benefit of Washingtonians of all ages.

FOCUS:

2017 PROGRESS:



OUTDOOR SPACES AND BUILDINGS

- 97 percent of DC residents live within a 10-minute walk of a park
- 14,147 trees planted
- 38 percent tree canopy cover



SAFE AND AFFORDABLE TRANSPORTATION

- Pedestrian deaths down 40 percent from 2015 to 2016
- 724 new curb ramps
- 37,000 square feet of sidewalk improvements
- 10,903 new sign placements
- Non-compliance with public transit stops cut in half



HOUSING OPTIONS TO ALLOW FOR AGING IN PLACE

- 310 new units of below market-rate housing underway for grandparent-led households
- Genesis Apartments offers 27 affordable units for older adults and young parents who help one another
- Zoning laws changed to increase allowance of Accessory Dwelling Units
- Fair Housing complaints cut in half since 2012



SOCIAL PARTICIPATION

- 2,900 older residents are attending wellness centers



RESPECT AND INCLUSION

- Older residents volunteering 94 hours per year on average
-



CIVIC PARTICIPATION AND EMPLOYMENT

- Unemployment rate for older residents down from 8.5 percent to 6.2 percent
 - 43 age-friendly businesses in DC
 - 200 direct service providers trained in LGBTQ cultural competency
-



COMMUNICATION

- 23 percent more residents connected to the internet
 - 350,000 reached each month through older-oriented Beacon newspapers
-



COMMUNITY SUPPORT AND HEALTH SERVICES

- 99.2 percent of DC residents over 65 have health insurance; 96 percent of all residents insured
 - DC ranked second fittest city in America
-



EMERGENCY PREPAREDNESS AND RESILIENCE

- 170,000 residents reached by new AlertDC system
-



ELDER ABUSE, NEGLECT AND FRAUD

- 300 police detectives and 200 judges trained in elder abuse

ABOUT THE WHO AGE-FRIENDLY INITIATIVE AND THE WHO PROCESS

Launched by the World Health Organization in 2007, the Age-Friendly Initiative addresses two significant demographic trends: urbanization and the aging of the population.

Age-Friendly DC followed WHO guidance for implementing a five-year strategic process, which included: 1) Study Phase and Formation of a Task Force; 2) Planning Phase; 3) Implementation; and 4) Evaluation. Between 2015 and June 2017, Age-Friendly DC implemented the Strategic Plan and made updates available online and in DC Public Libraries. Age-Friendly DC also coordinated with the DC Office of Planning to integrate the needs of older residents into land use and economic development.

Since 2013, Age-Friendly DC has addressed the International Federation on Aging Conferences in 2014 in Istanbul, Turkey, and a Brisbane, Australia, conference on disaster preparedness and resilience. In 2015, Age-Friendly DC was invited to Geneva, Switzerland to join the 15 other jurisdictions from across the world.



AGE-FRIENDLY DC DOMAINS: KEY INITIATIVES AND PROGRESS



DOMAIN 1: OUTDOOR SPACES AND BUILDINGS

“The outside environment and public buildings have a major impact on the mobility, independence and quality of life of older people and affect their ability to age in place.” – World Health Organization¹

Age-Friendly DC promotes efforts to increase the accessibility of the built environment across Washington, DC. Key initiatives include:

BLOCK-BY-BLOCK WALK

Through the Block-by-Block Walk, residents of all ages participated in guided walks through their neighborhoods to identify improvements for persons of all ages. Individuals who want to form teams to evaluate or re-evaluate neighborhoods can use the toolkit available through the 311 Mobile App.²

SUSTAINABLE DC

Sustainable DC aims to ensure all residents live within a ten-minute walk of a natural space and for tree canopy to cover 40 percent of the city.³ These infrastructure investments have increased the accessibility of outdoor space for older residents, with 65 percent of DC neighborhoods now considered walkable.





INTERGENERATIONAL GARDENING

Intergenerational gardening provides food access on public lands while encouraging interaction between older adults and younger generations.⁴ DC has 172 Americans with Disabilities Act certified garden beds and at least 214 beds that are raised two feet high distributed across the District's 34 community gardens, making them all age-friendly.⁵

CREATIVE AGING

Since 2012, the National Endowment for the Arts has provided \$545,000 in grant funding for numerous age-friendly creative initiatives in the District.



DOMAIN 2: SAFE AND AFFORDABLE TRANSPORTATION

“Transportation, including accessible and affordable public transport, is a key factor influencing active ageing.” - World Health Organization⁶

The District has made significant progress in making transportation in the District safer and more accessible. Key initiatives include:

VISION ZERO INITIATIVE

Vision Zero is an ambitious plan to achieve zero traffic-related deaths or serious injuries by 2024 through more effective use of data, education, enforcement, and engineering.

ACCESSIBLE TRANSPORTATION

Through a coordinated transportation planning grant, the District Department of Transportation conducted the accessDC study from October 2016 until June 2017. This study identified how best to provide older adults and persons living with disabilities greater access to transportation services.⁷

In addition, under Mayor Bowser's leadership, the Department of For Hire Vehicles has implemented requirements that taxi fleets include wheelchair accessible vehicles to ensure that older residents and individuals with disabilities have accessible transportation options.

RED TOP METER PROGRAM

The Red Top Meter Program provides reserved, accessible parking for residents living with mobility needs in the Central Business District. The Department of Transportation fully implemented this plan in May, 2017.⁸





DOMAIN 3: HOUSING OPTIONS TO ALLOW FOR AGING IN PLACE

“It is clear that housing and support that allow older people to age comfortably and safely within the community to which they belong are universally valued.” – World Health Organization⁹



The DC Government made historic investments in affordable housing over the past five years. Key initiatives include:

VILLAGE INITIATIVE

Villages are grass-roots organizations that create communities where residents can provide support to one another and link members with resources. Services provided through villages may include helping members travel to medical appointments, performing simple home repairs, and assisting with daily chores such as grocery shopping.

SINGLE FAMILY RESIDENTIAL REHABILITATION PROGRAM

The Single Family Residential Repairs Program helps finance home repairs. For heads of households age 60 and older, the Department of Housing and Community Development provides a permanently deferred loan. The Handicapped Accessibility Improvement Program grants residents up to \$30,000 to remove physical barriers for older adults and others living with disabilities.¹⁰

ENDING HOMELESSNESS FOR OLDER ADULTS

In 2015, the DC Interagency Council on Homelessness released “Homeward DC,” a five-year strategic plan outlining its vision to end homelessness among veterans by the end of 2015, end chronic homelessness among individuals and families by the end of 2017, and establish the means to rehouse homeless individuals and families within 60 days by 2020.¹¹ The plan has led to a 10 percent reduction in overall homelessness.¹²



DOMAIN 4: SOCIAL PARTICIPATION

“Social participation and social support are strongly connected to good health and well-being throughout life.” – World Health Organization¹³

By continuing to strengthen formal and informal links between neighbors, more residents can remain healthy, active and engaged in the years to come. Key initiatives include:

SERVEDC

ServeDC connects older residents with meaningful volunteer opportunities based on personal skillsets and interests, and it mobilizes its volunteers to provide services to older adults, such as snow shoveling.¹⁴

VOICES OF WISDOM

Through a joint initiative led by Age-Friendly DC, the George Washington University Center for Aging, Health and Humanities and So Others Might Eat, homebound residents engage in weekly telephone conversations on topics of mutual interest.

CONSORTIUM OF UNIVERSITIES

The 12 college and university participants of the District of Columbia Consortium of Universities voted unanimously to support the Age-Friendly DC initiative.¹⁵ The Osher Lifelong Learning Institute, based out of American University, offers more than 90 lectures, events, and study groups in a college setting for older residents.¹⁶

IONA SENIOR SERVICES

As one of the DC Office on Aging's lead agencies, IONA Senior Services provides comprehensive tools for residents to grow older.¹⁷





DOMAIN 5: RESPECT AND SOCIAL INCLUSION

“The extent to which older people participate in the social, civic and economic life of the city is also closely linked to their experience of inclusion.” – World Health Organization¹⁸



Across the District, non-profits, service providers, civic society groups, and faith-based organizations have led efforts to increase respect and social inclusion for older adults in the city. Key initiatives include:

AGE-FRIENDLY DC BUSINESS INITIATIVE

Age-Friendly DC collaborates with the Washington DC Economic Partnership to recognize businesses that foster an inclusive and welcoming environment for customers of all ages.¹⁹ The initiative continues to grow, with 43 businesses currently designated as age-friendly.²⁰

OLMSTEAD PLAN

Through the Olmstead Plan, the District works to ensure that individuals living with a disability receive services in integrated settings.

LGBTQ CULTURAL COMPETENCY

In 2016, Mayor Bowser signed the LGBTQ Cultural Competency Continuing Education Amendment Act of 2015 into law.²¹ This law requires that clinical healthcare providers obtaining a license, registration, or certification complete cultural competency training focusing on LGBTQ patients.²²



DOMAIN 6: CIVIC PARTICIPATION AND EMPLOYMENT

“An age-friendly community provides options for older people to continue to contribute to their communities, through paid employment or voluntary work if they so choose, and to be engaged in the political process.” –World Health Organization²³

The District of Columbia strives to increase employment opportunities for older adults. Key initiatives include:

BACK TO WORK 50+

In June 2017, the District launched BACK TO WORK 50+ at the Department of Employment Services. The program provides access to coaching and technology training to support older adults seeking to reenter the workforce on a full-time basis. The program is supported by the AARP Foundation.²⁴

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM

Authorized by the Older Americans Act, the program provides training for low-income, unemployed seniors. Since 2012, SCSEP has secured permanent employment for 63 District residents. There are currently 32 active enrollees.

ALTERNATIVE PATHWAYS TO EMPLOYMENT PROGRAM

The Alternative Pathways to Employment Program served individuals ineligible for the Senior Community Service Employment Program but still facing obstacles in gaining employment.²⁵





DOMAIN 7: COMMUNICATION AND INFORMATION

“The use of the Internet as a means of obtaining information and communicating with other users whether for social interaction, to receive services and care ... or to perform work and other daily tasks ... from home, has grown dramatically over the years.” –World Health Organization²⁶



To address the technology divide between age groups, the DC Government implemented several programs to provide technology training to older adults. Key initiatives include:

CONNECT.DC

Connect.DC conducts door-to-door outreach with a focus on neighborhoods where broadband adoption rates have been historically low.²⁷ Of a sample of 249 residents receiving support from Connect.DC, 47 lived in Ward 7, and 127 lived in Ward 8.²⁸ Connect.DC offers a technology training program to seniors called Cyber-Seniors, and each graduate of the program receives a new laptop.²⁹

BYTE BACK

Byte Back provides free technology and career services to low-income residents at various locations, including in DC Public Libraries. Between 2008 and 2015, over 50 specialized volunteers and AmeriCorps members taught Byte Back courses at 52 locations in the District.³⁰

SpotOn GROWNUPS

SpotOn Grownups, a weekly learning program taught at Tenley-Friendship Library, helps older adults with technological questions.



DOMAIN 8: COMMUNITY SUPPORT AND HEALTH SERVICES

“Health and support services are vital to maintaining health and independence in the community.” –World Health Organization³¹

Age-Friendly DC aims to provide and increase access to home services, clinics and programs that promote wellness and active aging. Key initiatives include:

SAFE AT HOME

Safe at Home finances home accessibility adaptations for adults over the age of 60 and persons living with a disability. Eligible residents receive up to \$6,000 for adaptations to reduce the risk of falls and remove mobility barriers. The program now allows older adults to obtain private security camera systems to promote safety in and around their homes.³²

DC SUPPORT LINK

The No Wrong Door system, formally known as DC Support Link, streamlines access to Long-Term Services and Supports for residents with disabilities.

FitDC

In April 2015, Mayor Bowser launched the FitDC initiative, a comprehensive health and wellness campaign to connect residents with nutrition and fitness resources in their neighborhoods. Free outdoor fitness classes are available in the summer, including classes for older adults.³³





DOMAIN 9: EMERGENCY PREPAREDNESS AND RESILIENCE

“Resilient and empowered communities respond proactively to new or adverse situations.” – World Health Organization³⁴



Because older adults are more vulnerable to emergencies, natural disasters, or terror attacks, Age-Friendly DC added this ninth focus area in addition to the eight areas recommended by WHO. Key initiatives include:

AlertDC

The opt-in AlertDC system reaches registered residents through email, phone and text, with updates on traffic and public safety.³⁵ In fiscal year 2016, the system gained 10,709 new subscribers and has seen an additional three percent increase in 2017 thus far.³⁶

TEXT TO 911

In June 2017, Mayor Bowser implemented Text to 911 in DC. The program allows residents to text 911 to receive emergency services if they are unable to call.

EMERGENCY RESPONSE TRAINING

The District is helping to train older residents through the Community Emergency Response Team volunteer program, which requires five three-hour classes for certification on how to respond in emergency situations.³⁷ The program also empowers older adults and persons living with a disability to become active residents in an emergency.³⁸

RESILIENT DC

DC established the Office of Resilience to build DC's resilience to shocks and stresses through the development and implementation of a comprehensive resilience strategy. This includes the ability to withstand any natural or man-made disaster.



**DOMAIN 10:
ELDER ABUSE, NEGLECT, AND FRAUD**

“Elder abuse continues to be a taboo, mostly underestimated and ignored by societies across the world.” – World Health Organization³⁹

An estimated thousands of adults age 65 and over in the District have experienced abuse, neglect or exploitation every year.⁴⁰ Age-Friendly DC added the Elder Abuse, Neglect, and Fraud focus area to spread awareness of risks, protection and support. Key initiatives include:

THE FINANCIAL EXPLOITATION OF VULNERABLE ADULTS AMENDMENT ACT OF 2015

The DC Council passed and Mayor Bowser signed this legislation to support older victims of crime. The law criminalizes financial exploitation of vulnerable or older adults and penalizes anyone who uses undue influence, including mental, physical, or emotional coercion.⁴¹ The Attorney General can issue subpoenas and seek injunctive relief.⁴²

SENIOR \$AFE

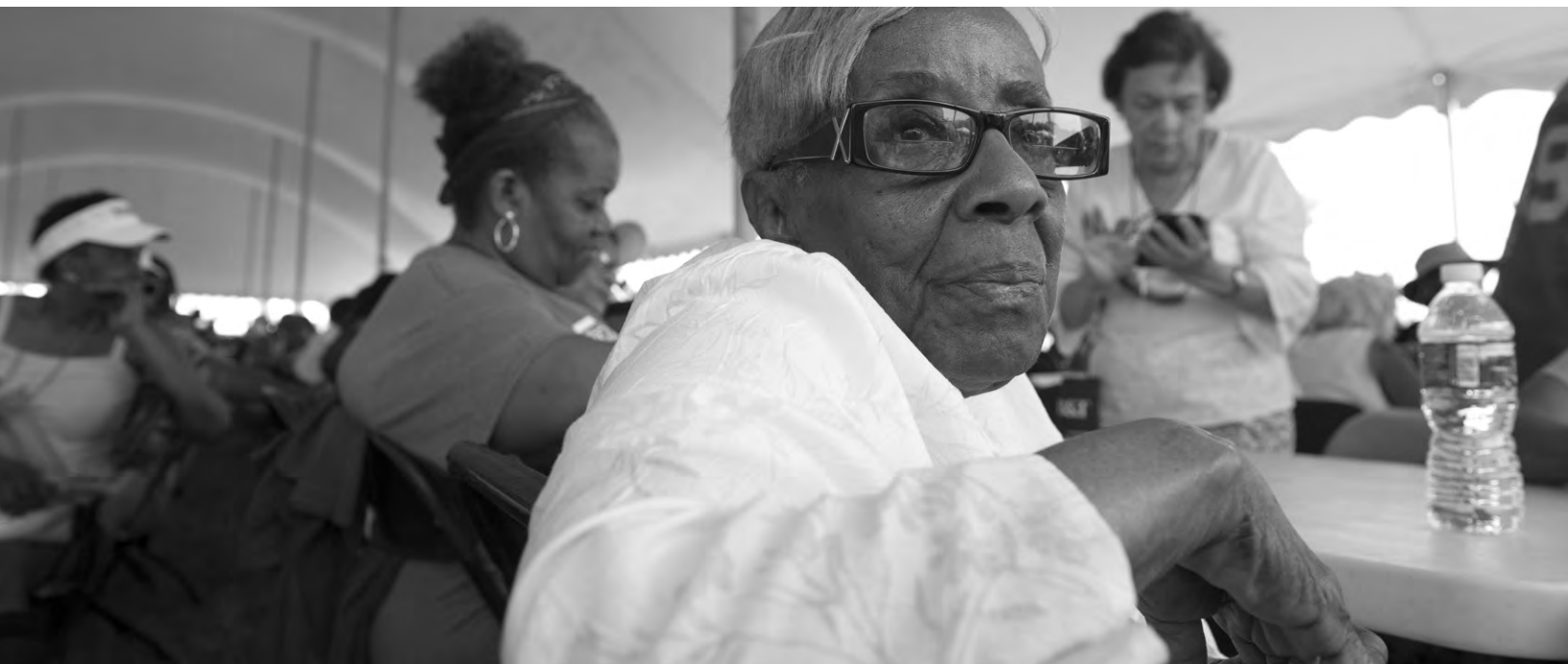
The Senior \$afe program trains financial services professionals on how to protect older residents from financial exploitation by recognizing and reporting suspected abuse.

COLLABORATIVE TRAINING & RESPONSE FOR OLDER VICTIMS

In January 2014, the Network for Victim Recovery DC created the District's Collaborative Training & Response for Older Victims. The program strengthens cross-organizational collaboration and more effectively supports victims of elder abuse in the District.⁴³

OFFICE OF THE ATTORNEY GENERAL

In 2017, the Office of the Attorney General added a new position of Elder Abuse Specialist to enhance the prosecution of elder abuse cases.



APPENDIX



AGE-FRIENDLY DC DASHBOARD

The Age-Friendly DC Dashboard tracks progress across the initiative’s 10 domains. These 74 strategies were developed by the Age-Friendly DC Task Force and were implemented by agencies across the District.

■ PROGRESS ACHIEVED
 ■ IN PROGRESS
 ■ RECONSIDERED

GOAL	2017 UPDATE
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GOAL 1.1: Increase access to buildings and use of parks and open spaces by incorporating a systems approach to provide greater opportunities for people to enjoy the outdoors while protecting the environment.

1.1.1: Ensure all residents have access to parks and open spaces within a half-mile of every home, and recreation facilities within a mile of every home.

■ Of DC’s residents, 97 percent live within a ten-minute walk to a park.

1.1.2: Develop a plan to use landscaping, art and natural features as a way to create distinct and memorable places within neighborhoods.

■ Over 65 murals in 44 neighborhoods discourage graffiti and property defacement.

1.1.3: Increase the number of parks and public spaces that are equipped with seating, drinking fountains, and restrooms.

■ All of the District’s 61 recreation centers are undergoing construction to make restroom entrances available from the building exterior.

1.1.4: Enhance clinical and community linkages to physical activity and nutrition programs for residents 50 and older.

■ The District expanded the Park Prescription program, a community health initiative to encourage older residents and families to spend time outside.

1.1.5: Make District buildings and parks accessible, and work with the private sector to publish additional accessibility reports for private buildings.

■ The DC Office of Disability Rights collects reports throughout the year to track the accessibility of buildings and parks.

1.1.6: Increase opportunities for inter-generational gardening and food access on public lands, focusing on DC food deserts.

■ DPR maintains 34 community gardens and 172 documented ADA certified garden beds and at least 214 beds that are raised two feet high.

1.1.7: Establish an awareness campaign for safe disposal of over-the-counter and prescription medications. The campaign will focus on both disposal of medications and the establishment of convenient drop-off locations throughout the city.

■ Age-Friendly DC distributed 1,000 disposal bags between 2016 and 2017, and the Metropolitan Police Department hosts two drug take-back days per year where residents can drop off medications.

GOAL 2.1: Ensure all modes of transportation are safe, affordable, and accessible for residents of all ages and abilities.

2.1.1: Improve the transparency of reports for-and prioritization of-service requests for repairs of sidewalks, curb cuts, and street lights.

■ DDOT identified all bus stops that require the addition of shelters or other repairs, and resolves issues within 60 days.

2.1.2: Develop a sustainable funding system for sidewalk repairs.

■ In 2016, DDOT improved over 37,000 square feet of sidewalk.

2.1.3: Use safe, aesthetically pleasing materials for sidewalk construction that minimize falls and accidents.

■ DDOT completed 1,800 repairs using pervious flexible rubberized pavement for sidewalk repairs to preserve and protect tree roots while preventing mobility barriers due to roots.

2.1.4: Establish workgroup to promote bicycle safety and identify strategies to increase the number of older riders using bicycles.

■ Strategy deferred.

2.1.5: Require that replacement of missing street and traffic signage is easily readable, well-lit and addresses access and functional needs.

■ In FY2016, DDOT completed 10,903 sign replacements, and 16,649 more signs will be replaced in FY2017.

2.1.6: Increase accessibility at public transit stops.

■ In 2012, the District has cut non-compliance in half.

2.1.7: Convert pre-existing on-street parking spaces into ADA accessible spaces.

■ Approximately 350 red top meters have been installed in the Central Business District, and the program will be duplicated in other parts of the city.

GOAL 2.2: Provide residents with the information and tools they need to make informed travel choices.

2.2.1: Create an integrated, one-call, one-click system for older adults and those with disabilities to access and schedule transportation options, including accessible options.

■ DDOT's goDCgo currently maps out different travel routes for residents.

2.2.2: Develop an available-on-demand, cross training for direct service staff to ensure they have up-to-date information about current accessible transportation options and the one-call, one-click system.

■ Strategy deferred.

2.2.3: Expand offerings of transportation trainings (individual counseling and group instruction) to introduce and familiarize older adults with all travel options to ensure they can make informed, appropriate, cost-effective, and efficient choices.

■ WMATA provides training to residents seeking how to best use transportation. Between six percent and eight percent of those trained are older adults.

2.2.4: Integrate eligibility determination for transportation options into the DC Access System (DCAS).

■ Strategy deferred.

GOAL 3.1: Streamline, expand, and promote programs that support affordable housing and aging in place.

3.1.1: Conduct a needs assessment study taking into consideration recent population changes, needs of residents of various age-cohorts ages 45+, income levels, current and future availability of housing, and the projected resources necessary to meet these needs.

■ DCOA conducted a needs assessment in 2016 to improve overall efficiency and identify high-value areas of improvement, expansion or innovation to meet the needs of individuals age 60 and older in DC.

In 2018, DHCD will conduct a comprehensive housing assessment to study DC residents' housing needs.

3.1.2: Research and promote home-sharing options for both intergenerational living arrangements and among residents age 50 and older.

■ In 2015, Genesis Apartments opened and began offering 27 units of affordable housing for DC residents who are age 60 and older, as well as young parents.

3.1.3: Amend DC Zoning Law to permit accessory dwelling units (also known as ADUs or “granny flats”) in more residential zones.

■ New regulations went into effect in September 2016 to permit more Accessory Dwelling Units in residential zones.

3.1.4: Encourage the development, preservation, and improvement of new and existing independent living residences and affordable and accessible housing in the city by working with federal officials.

■ A total of 1,148 units were created for older adults between 2012 and 2017.

Through the Office of Tax Revenue, adults over the age of 65 may qualify for property tax relief that reduces their property taxes by 50 percent.

3.1.5: Improve awareness of, and access to, home modification programs among residents 50 years and older so that they can prepare applications prior to the years when they may experience mobility limitations. Streamline the application processes for older residents who need home modifications.

■ In 2016, DC launched the Safe at Home Program to provide grants of up to \$10,000 for home modifications, and in 2017, Mayor Bowser expanded the Safe at Home Program to cover in-home security cameras.

3.1.6: Develop incentives financed by the Housing Production Trust Fund and other government financing to encourage developers to increase the production of new affordable, transit-oriented, universally designed units for older residents with incomes less than 30 percent of area median income.

■ Between 2012 and 2017, a \$44,812,952 investment in affordable housing led to the construction of 588 units for older adults, coupled with 459 additional subsidized housing units for older adults from 2012-2017.

3.1.7: Explore and develop options for expanding the supply of neighborhood-scale assisted living for DC residents with incomes below 50 percent of area median income.

■ Daily reimbursement for Medicaid-covered assisted living will more than double in fiscal year 2018.

GOAL 3.2: Maximize awareness and provide training to increase the amount of housing that is accessible, affordable, safe, and healthy.

3.2.1: Develop a series of easy-to-comprehend fact sheets, webinars, and/or infomercials on topics such as qualifying for tax credits, Fair Housing Act compliance, saving money on utilities and maintaining healthy homes.

■ DHCD provides information for older residents through its website, and offers brochures translated into multiple languages.

The AARP Legal Counsel for the Elderly publishes a series of fact sheets for older adults.

3.2.2: Develop a user-friendly inventory and description of housing choices ideally suited for residents age 50 and older who are LGBTQ, have disabilities, and/or who are English language learners, and identify methods for wide dissemination.

■ DHCD and partner agencies incorporated the study and assessment of LGBTQ individuals and other special populations as part of the agency's Comprehensive Housing Needs Assessment, which will be completed in 2018.

3.2.3: Provide training for managers of existing public and private housing (including tenant-owned buildings) to address the needs of aging residents, including Fair Housing and ADA compliance and cultural competency for populations such as residents who are LGBTQ, who are disabled, and/or who are English language learners.

■ More than 6,000 people attended the June 2017 DC Housing Expo, doubling attendance from the previous year.

3.2.4: Promote consistent compliance with the Fair Housing Act by providing DCRA and third-party inspectors with additional training and offering technical assistance to architects and developers during design and construction.

■ The District received 12 Fair Housing complaints in 2016, compared to 31 in 2012.

GOAL 4.1: Strengthen, develop, and promote arts, recreation, leisure, and educational activities involving and targeting older adults.

4.1.1: Inform and connect older residents to arts, recreation, leisure, and educational activities through technology and non-technological means.

■ The Mayor’s Office of Community Relations and Services works hands-on in the community at wellness and recreation centers for older adults.

4.1.2: Increase opportunities for formal and informal group learning for older residents.

■ Age-Friendly DC promotes the website of the Consortium of Universities, which allows users to compare the courses available across institutions via one portal.

4.1.3: Organize peer-to-peer learning activities on art, history, travel, culture, sports, politics and other topics for isolated residents.

■ AARP extended a grant in 2017 to continue to facilitate phone conversations among homebound residents through Voices of Wisdom.

4.1.4: Expand activities, services, and programs likely to attract residents age 50+ throughout the day.

■ The District has more villages than any other jurisdiction in the country, with 12 in the metropolitan area.

GOAL 4.2: Promote and provide quality volunteer opportunities for older adults.

4.2.1: Produce a “State of Volunteerism in the District” report, assessing volunteerism by age group, activity, and organization, providing recruiting and retaining techniques and recommendations.

■ In 2017, there were over 1,400 participants in the District of Columbia involved in Senior Corps, with 125 involved in the Senior Companion Program out of the Institute of Gerontology and the University of the District of Columbia.

4.2.2: Enhance and promote the NeighborGood volunteer database to expand volunteer opportunities, improve usability, increase choices and better match residents age 50 and over with volunteer opportunities.

■ ServeDC launched Volunteer.dc.gov, an easy-to-use web portal, where users can search for volunteer activities by type of activity and skillset.

GOAL 5.1: Empower older adults by improving services, levels of engagement, and public perceptions.

5.1.1: Expand training to improve age-friendly customer service best practices at all government frontline, public-facing agencies.

■ DDS created a short training video entitled “End the Awkward” in 2015 to increase cultural competency around employing individuals with disabilities.

5.1.2: Develop and launch a District-wide anti-discrimination and anti-ageism campaign that is inclusive of diverse constituencies, including LGBTQ older adults, older adults with disabilities, and older adults who are limited and non-English proficient.

■ AARP is developing an age disparities reduction campaign, set for release in 2018.

5.1.3: Encourage the business community to adopt age-friendly business best practices and provide a welcoming and inclusive environment for older adult customers.

■ DC currently has 43 age-friendly businesses.

5.1.4: Increase District-wide engagement in ongoing Age-Friendly DC initiatives that promote inter-generational and multicultural respect and inclusion among diverse communities.

■ George Washington University analyzed data from 45 consultations with roughly 328 people to gather feedback from DC residents pertaining to respect and social inclusion in the city.

5.1.5: Develop and distribute surveys in various languages to gauge the level of respect and social inclusion felt by various groups across the city.

■ Of these ESL speakers responding to Age-Friendly DC, 86 percent reported feeling respected, a number similar to English speaking participants at 84.59 percent.

GOAL 6.1: Increase full- and part-time employment and entrepreneurial opportunities for older residents.

6.1.1: Establish an interagency work group to increase coordination of employment and senior services for residents age 50+.

■ The District Leadership Program also offers free weekly résumé clinics and job interview skill classes.

6.1.2: Develop and increase District government adult internship/fellowship programs for residents ages 50 and over.

■ SCSEP and BACK TO WORK 50+ are programs at DC DOES that work with older adults who have barriers to employment.

6.1.3: Increase outreach and understanding of issues and opportunities related to employment and entrepreneurship for residents 50+.

■ DOES conducted four focus groups, two to inform older adults about potential job opportunities and to encourage older adults to seek jobs and entrepreneur opportunities.

The DC Department of Human Resources has also eliminated questions about past salary in their hiring practices, encouraging older adults who may have been out of the labor market for an extended period of time.

6.1.4: Increase technical assistance to help small and local businesses become age-friendly, hire residents age 50+, and provide entrepreneurship opportunities for older residents.

■ Age-Friendly DC established best practices for age-friendly businesses.

GOAL 6.2: Strengthen, develop, and promote civic participation among residents age 50+.

6.2.1: Compile and publish a listing of all opportunities for civic participation and how to get involved. ■ Ongoing.

GOAL 7.1: Improve readability, ease of use, and delivery of timely and accessible information through traditional and digital media utilized by residents age 50+ and their caregivers, including television, radio, print, telephone, websites, and mobile apps.

7.1.1: Develop guidance for, and promote adoption of, age-friendly communication practices to be used in all media. ■ All websites based in the Mayor's office feature audio and text enlargement modules to make the information accessible to all.

7.1.2: Overhaul and promote 211 Answers, Please! database to ensure it is up-to-date, user-friendly, and offers filterable reports. ■ Strategy withdrawn.

7.1.3: Ensure that appropriate government employees, contractors, community partners, and others from whom people may seek age-related information know how to answer them or to direct them to the Aging and Disability Resource Center for answers. ■ Support Link is moving toward implementation of an integrated long term care services No Wrong Door system. See Strategy 8.1.1.

7.1.4: Utilize radio, TV, print, public service announcements, email blasts, face-to-face events, home-delivered meals, and other means to inform residents how they can access age-related information in a format appropriate to their needs and abilities.

■ In 2017, District agencies received new guidance for effectively reaching and communicating with adults over 50 and individuals who have limited vision.

The Beacon newspaper features updates from organizations such as DCOA and AARP, reaching more than 350,000 people each month, 80 percent of whom are over 50.

GOAL 7.2: Expand availability and use of age-friendly and affordable technology by older residents.

7.2.1: Increase access to technology (computers, tablets, smartphones, and Wi-Fi) at home and in public places for low-income residents age 50+, including those who are disabled and/or isolated.

■ In 2013, Connect.DC partnered with EveryoneOn, a national nonprofit that promotes digital literacy and aggregates affordable internet offers by zipcode. About 400 DC residents have purchased internet service through the EveryoneOn website.

7.2.2: Train older DC residents in technologies and devices using existing institutions (libraries, senior centers, nonprofits, and other organizations) that offer technology education and intergenerational training opportunities.

■ Project Reboot, a joint project of OCTO, DC Housing Authority and the private sector, implemented a program at Frederick Douglass Community Center in Ward 8 to train residents to use and repair older computers donated by major corporations.

GOAL 8.1: Increase consumer awareness of and access to preventive, primary, urgent, and long-term care.

8.1.1: Finalize and implement an inter-agency No Wrong Door plan so that intake, information, assistance, and referral staff at DC health and human services agencies provide person-centered counseling to assist residents with identifying, understanding, and accessing appropriate long-term services and supports. In addition, educate contractors, community partners and others who work with older adults so they know how to refer people to the appropriate resources.

■ No Wrong Door is a three-year implementation grant from the Federal Administration on Community Living to create an interagency program that connects residents with appropriate Long Term Services and Support.

8.1.2: Provide cross-training for navigators and a series of fact sheets on accessing financial planning, will and estate planning, Medicaid qualification, and long-term care resources for individuals, families, spouses, and domestic partners.

■ An online benefit program shows program eligibility and helps residents take full advantage of the services offered.

8.1.3: Require Continuing Education Units (CEU) or relevant training in geriatric care and cultural competency to be obtained by licensed healthcare providers, first responders, caseworkers, and caregivers.

■ The Office on Aging developed an Alzheimer’s Behavior Symptom Management training that is accepted for both social work and nursing assistive personnel as a form of continuing education units.

8.1.4: Continue progress toward federal approval to implement the Program for All-Inclusive Care for the Elderly (PACE), using a hub and spoke model to reach more residents closer to home.

■ The Program for All-Inclusive Care for the Elderly (PACE), currently used by 36 states, is a tested model of comprehensive, integrated care for older residents. Progress towards PACE implementation continues in the District.

<p>8.1.5: Expand compensated respite care for low-income unpaid caregivers.</p>	<ul style="list-style-type: none"> ■ Through the Elderly and Persons with Physical Disabilities Waiver Program, a component of Medicaid, beneficiaries can choose their own caregivers who are paid through Medicaid.
<p>8.1.6: Fully implement the Nursing Assistive Personnel (NAP) legislation.</p>	<ul style="list-style-type: none"> ■ The Nursing Assistive Personal Omnibus regulation was first published in 2015, and is currently undergoing legal sufficiency review.
<p>8.1.7: Ensure the availability of linguistically and culturally competent training and certification for nursing assistive personnel.</p>	<ul style="list-style-type: none"> ■ The District helps individuals enroll in English classes if they are interested in becoming a home health aide. A new law requires that home health aides be trained in LGBTQ cultural competency.
<p>8.1.8: Introduce or expand primary mental health screening programs for older adults.</p>	<ul style="list-style-type: none"> ■ The Department of Behavioral Health works with programs to review and revise mental health curricula. The agency also continues to work with community leaders, such as the DC Hospital Association.
<p>8.1.9: Provide training on behavioral health for counselors and aides working in hospitals and home-based care units.</p>	<ul style="list-style-type: none"> ■ The Department of Behavioral Health communicated with primary care providers to determine additional health professional mental health training and supports needs. Home Care Partners established a mental health first aid program.

GOAL 8.2: Promote safety, wellness, livability, and activity in the community.

8.2.1: Increase access to affordable, fresh produce and other healthful foods.

■ In FY2016, DCOA's community dining option served 5,215 residents, and their home delivery program served 2,996 residents during the week.

8.2.2: Establish and implement an evidence-based falls prevention program for residents, particularly those with balance and mobility issues.

■ The Safe at Home Program began operating in January, 2016 to provide home adaptations to older residents to allow for "Aging in Place," with the highest numbers of adaptations in Wards 4, 5, 7 and 8.

8.2.3: Expand number of peer counseling and support programs and increase the number of older adult peer counselors.

■ Through DBH, the Certified Peer Specialist program gives individuals recovering from mental illness or substance abuse the opportunity to assist others in similar positions.

8.2.4: Establish awareness campaign to educate older adults on optimal use of over-the-counter and prescription medications.

■ The District distributed 100,000 medication neutralizing bags that residents can use to safely throw their medications in the trash.

8.2.5: Increase opportunities and programming for older adults to engage in physical and mental wellness activities.

■ DCOA implemented five pilot programs to develop dementia-capable systems of long term care.

GOAL 9.1: Identify and reach vulnerable and at-risk resident populations with information and education on emergency preparedness and resilience.

9.1.1: Increase AlertDC enrollment.

■ In 2014, the District upgraded to a new AlertDC system, replacing the 10-year old system. The program reaches over 170,000 people in the DC area with daily alerts.

9.1.2: Identify and locate facilities and service centers serving vulnerable populations, and identify locations with high concentrations of vulnerable adults throughout DC, creating a usable database containing this information.

■ DC's Homeland Security and Emergency Management Agency completed a community needs assessment to determine the locations of vulnerable residents in DC.

GOAL 9.2: Build individual and community resilience and preparedness for emergencies.

9.2.1: Continue to provide uniform trainings on preparedness, mass care, emergency response, access and functional needs, behavioral health, CPR/first aid, and resilience to District government staff and public volunteers.

■ As of September, 2017, the Hands on Heart CPR Program has trained 30,000 people in Washington, DC.

9.2.2: Create and assist community supported neighbor-to-neighbor networks across the city that are accessible to all income levels.

■ DC has 12 recognized villages.

GOAL 10.1: Strengthen the elder abuse prevention, detection, and enforcement system

10.1.1: Improve awareness about elder abuse among the public, unpaid caregivers, and non-healthcare mandated reporters.

■ The Department of Human Services Adult Protective Services division created Senior \$afe brochures and distributed them throughout the District.

10.1.2: Provide training specific to elder abuse, neglect and fraud, to be obtained by in-service providers, licensed caseworkers, and caregivers working with older adults.

■ Adult Protective Services runs a weekly presentation on Senior \$afe at different wellness centers and other locations accessible to older adults.

10.1.3: Develop programs to educate and protect vulnerable residents from scams.

■ The Metropolitan Police Departments' (MPD) Financial and Cyber Crimes Unit offers a 45 minute presentation that focuses on scams that target older adults.

10.1.4: Conduct a study to determine the amount of 'hidden' cases of elder abuse that are not reported.

■ Withdrawn to instead emphasize increased public awareness.

GOAL 10.2: Improve cooperation and collaboration among agencies on cases of actual or suspected elder abuse.

10.2.1: Adult Protective Services and the DC Long Term Care Ombudsman Program will collaborate on mutual issues, including investigations, and will share limited information accordingly.

■ Both agencies continue to collaborate on cases when appropriate. In fiscal year 2016, APS investigated 1,485 cases.

10.2.2: Enhance awareness by agencies and the public of the Health Regulation and Licensing Administration's "Online Professional License Search" that provides names of health care professionals who have been disciplined by their respective Boards.

■ DOH's website allows the public to search for licensing status and disciplinary actions of licensed health professionals.

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