

AGE-FRIENDLY DC

2018-2023 STRATEGIC PLAN
PROGRESS EVALUATION REPORT



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LETTER FROM MAYOR MURIEL BOWSER



Dear Washingtonians,

I am proud to present to you the Age-Friendly DC 2018-2023 Strategic Plan Progress Evaluation Report. Since Age-Friendly DC's launch in 2013, the District has been committed to our goal of ensuring all DC residents have a fair shot at being active, connected, and able to lead healthy and happy lives. I am grateful for our cross-sector work to support all residents, particularly the older adults in our lives who are foundational to the spirit of our city.

We have come a long way, not just in the fight against COVID-19, but also in our work towards DC's comeback. The next five years are so important. We will transform parts of our city with a special focus on our values, particularly inclusiveness and equity for all. Initiatives like Age-Friendly DC demonstrate those values in action. Across 58 District government agencies and offices and 33 community organizations, we've seen progress across each of Age-Friendly DC's focus areas.

Of course, there's still progress to be made, and there are challenges to overcome. However, we know together we can achieve our goals. As we look ahead to the 2024-2028 plan, we will expand our work with proven strategies and develop new ones to meet the bold goals we've set for ourselves over the next five years. We will increase food access and internet access. We will continue to invest in economic prosperity and affordable housing citywide. These goals can only be achieved if we are focused on equitable collaboration.

This report highlights the ways Age-Friendly DC has continued to show evidence of their work across the District. Congratulations and thank you to all who have contributed to our efforts to build a healthier, more connected, and more resilient DC.



Muriel Bowser
Mayor

LETTER FROM THE AGE-FRIENDLY COORDINATOR

Dear Fellow DC Residents,

As the District's Age-Friendly Coordinator, I have had the pleasure of working closely with DC residents since 2013. In that time, our work has been unanimously supported across our local government and internationally recognized for our comprehensive and transformative approach to make DC an easier place to grow up and grow older.

As we conclude and evaluate the impact of our second 5-year effort, I want to name how our lives have been forever changed. The COVID-19 pandemic was sudden, unpredictable, and devastating. We learned the importance of public health, as regular testing, mask-wearing, and vaccinations became our best defenses against the virus. The pandemic also challenged us to adapt and expand our efforts to address each of our fourteen Age-Friendly domains, some of which include:

- Understanding and utilizing technology: We found new tools to connect with family, friends, and colleagues virtually.
- Being active outdoors: Walking outside became easier as our sidewalks, street crossings, and parks became more accessible.
- Helping our neighbors: Neighbors helped neighbors more frequently and directly through organizations like DC Villages, which allows residents to age in their own homes among communities they know and love.
- Supporting DC workers: Residents needing time off were able to utilize DC's Paid Family Leave program.

The Age-Friendly DC 2018-2023 Strategic Plan was created before we knew what we know now; yet we've made desirable progress thanks to the partnership of the DC government agencies and community organizations. I encourage you to become familiar with our accomplishments and to help us shape our next 5-year strategic plan. We look forward to your partnership as we continue to improve our quality of life here in the District. Remember, you start aging as soon as you're born.



Gail Kohn

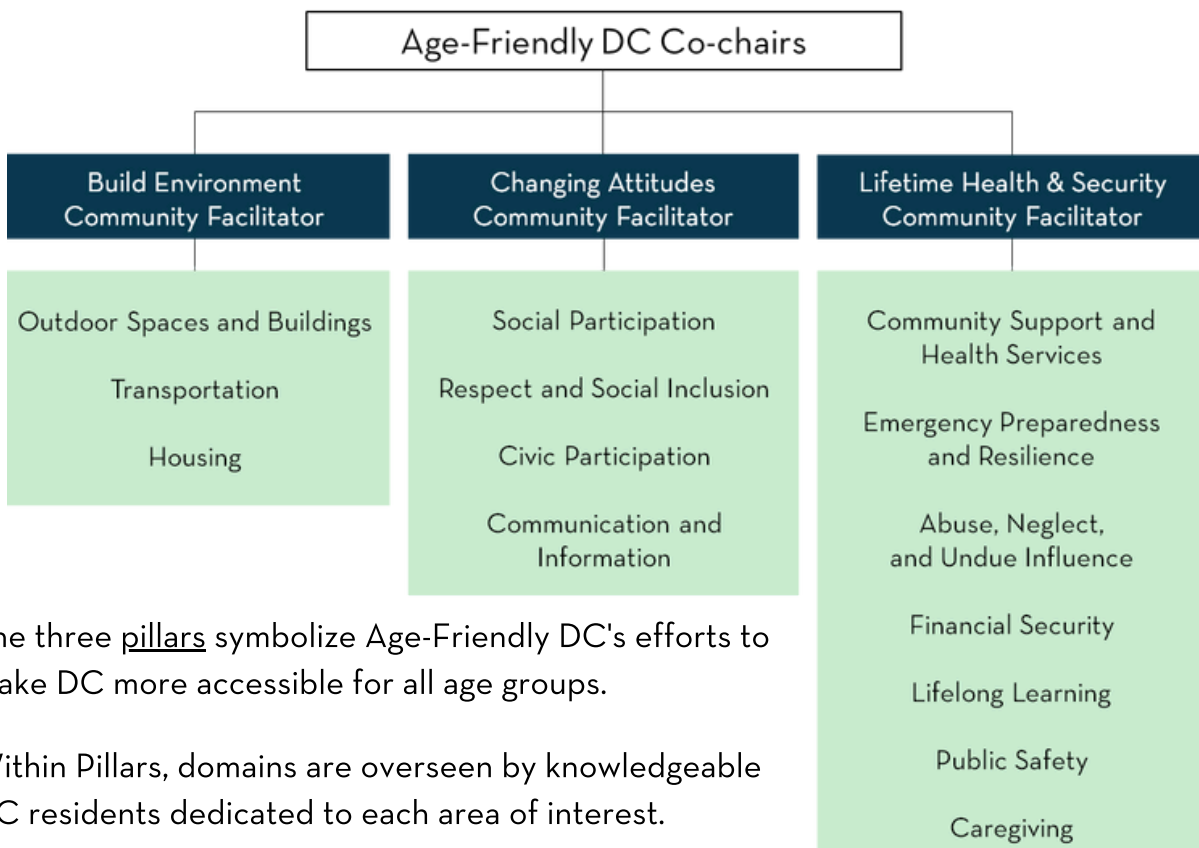
Age-Friendly DC Coordinator

ABOUT AGE-FRIENDLY DC

Age-Friendly DC is an initiative of the DC Government to coordinate observations of residents with equitable actions by DC agencies and community organizations **to make the District an easier place in which to live, work and play, as we all grow older.** After the completion of the 2013-2017 Age-Friendly DC Strategic Plan, **the District of Columbia was recognized as a top city in the world for Age-Friendly policy directions** by the World Health Organization (WHO) and AARP.

As an interagency initiative housed in the Office of the Deputy Mayor for Health and Human Services, **Age-Friendly DC collaborates with 26 agencies across the government.** This ensures that lifelong aging is a consideration in all citywide plans, and actions. This report on our progress implementing the plan, released by Mayor Muriel Bowser prior to the January 30, 2024, Task Force meeting, relies on the work accomplished by the actions of DC government agencies and community organizations. Throughout this report, watch for hyperlinks to plans and programs that have resulted in the Age-Friendly DC 2018-2023 strategic plan progress.

Age-Friendly DC relies on the advice and expertise of its task force, charged with contributing to the District's second 5-year strategic plan. **The Task Force is comprised of DC agency leaders and community representatives, appointed by Mayor Muriel Bowser.**



UNDERSTANDING AGE-FRIENDLY DC DOMAINS

The following overview of Age-Friendly DC domains details the use of terms throughout this report:

| | |
|--|---|
| OUTDOOR SPACES AND BUILDINGS | Everyone, regardless of abilities, should be able to easily access buildings and be active in public spaces anywhere in the city. |
| TRANSPORTATION | Traveling on foot or using wheels should be safe and easily available. |
| HOUSING | Affordable and accessible places to live. |
| SOCIAL PARTICIPATION | Connecting with others at events, programs and activities. |
| RESPECT AND SOCIAL INCLUSION | Being welcomed by others, regardless of our differences. |
| CIVIC PARTICIPATION AND EMPLOYMENT | Engaging in the city's functions and economy via voting, social groups and working |
| COMMUNICATION AND INFORMATION | Sharing knowledge about news and programs. |
| COMMUNITY SUPPORT AND HEALTH SERVICES | Programs and services that prevent and treat health issues. |
| EMERGENCY PREPAREDNESS AND RESILIENCE | Plans and services in place of unexpected events that allow for communities to bounce back quickly. |
| ABUSE, NEGLECT, AND UNDUE INFLUENCE | Programs and services that prevent unjust treatment and taking advantage of residents. |
| FINANCIAL SECURITY* | Having enough money to sustain a happy and healthy lifestyle. |
| LIFELONG LEARNING* | Continuing to learn throughout one's life. |
| PUBLIC SAFETY | Feeling secure and comfortable with one's surroundings. |
| CAREGIVING | Providing care for someone with long-term health needs. |

2018-2023 Age-Friendly DC Strategic Plan

The 2018-2023 Age-Friendly DC Strategic Plan is organized into three pillars. Within the three pillars, areas of focus or domains, recommended by the World Health Organization, were adopted to organize work. In 2017, DC residents shared their observations on life in the District, resulting in six additional domains that Age-Friendly DC uses to address their concerns about the city they love. Those DC-specific domains are marked with an asterisk (*) in the list below.

Built Environment



OUTDOOR SPACES
AND BUILDINGS



TRANSPORTATION



HOUSING

Changing Attitudes About Growing Older



SOCIAL PARTICIPATION



RESPECT AND
SOCIAL INCLUSION



CIVIC PARTICIPATION
AND EMPLOYMENT



COMMUNICATION
AND INFORMATION

Lifelong Health & Security



COMMUNITY SUPPORT
AND HEALTH SERVICES



EMERGENCY PREPAREDNESS
AND RESILIENCE*



ABUSE, NEGLECT, AND
UNDUE INFLUENCE*



FINANCIAL SECURITY*



LIFELONG LEARNING*



PUBLIC SAFETY*



CAREGIVING*

2018-2023 Age-Friendly DC Strategic Plan

In January 2023, Age-Friendly DC began to assess the effectiveness and reach of the 2018 - 2023 strategic plan with an evaluation.



EVALUATION AIMS

- To evaluate progress implementing the 2018 to 2023 Age-Friendly DC strategic plan
- To explore current barriers to healthy aging in DC that will inform the 2024 to 2028 strategic plan



QUESTIONS

1. Domain-by-domain, how have measures of interventions progressed?
2. What are current attitudes to growing older within the District of Columbia?
3. Do residents perceive progress across the strategic plan over the past 5 years?
4. What are current barriers to healthy aging in DC?



EVALUATION DESIGN

This evaluation utilized a mixed methods design consisting of three components:

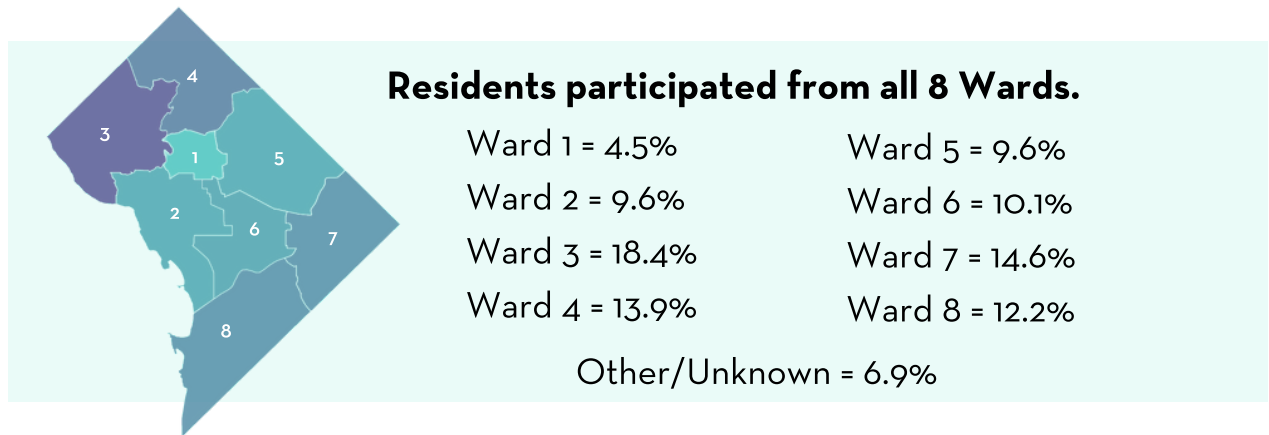
- Age-Friendly DC Task Force members for each domain were asked to report data on the completion of the plan aims, goals, and strategies.
- The DC Livability Survey was distributed by the Mayor's Offices of Community Relations and Community Affairs at events across the city, in all 26 DC libraries, and published in The Beacon Newspapers.
- Focus groups were conducted with approximately 6-12 members per group to understand how residents perceived change in each of the 14 domains over the past five years. Focus groups were recruited from each ward and through special populations groups.

Results from each of these components are summarized within each pillar by domain.

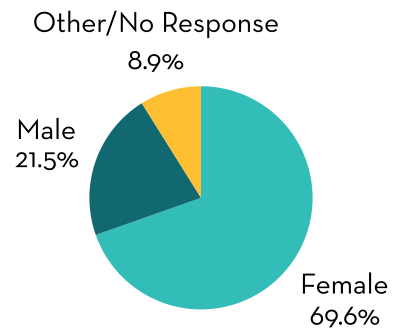
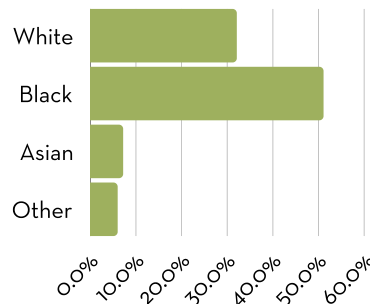
Survey Participant Characteristics

The Age Friendly-DC Livability survey was open to all District residents age 18 and older. Residents were recruited to take the survey either on paper or online through multiple channels.

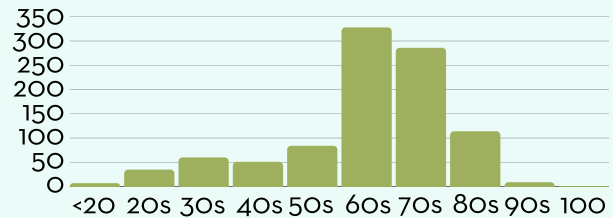
In total, 1,090 people completed the survey.



The sample was racially diverse and mostly female.



Participants ranged from 18 to 95, with a median age of 65 years old.



While only 6% of participants identified as having a disability, 60% reported a significant limitation (e.g. difficulty walking).

Focus Group Participant Characteristics

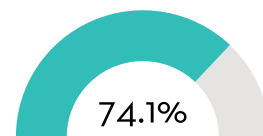
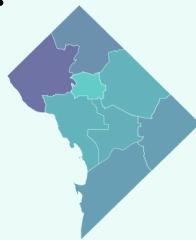
There were considerable efforts to hold focus groups with residents from each ward and representatives for special interest groups. Age-Friendly DC worked closely on a recruitment strategy with the Mayor's Office of Community Affairs (MOCA), the Mayor's Office of Community Relations and Services (MOCRS), and numerous community partners, leading to a total of 20 focus groups:

- Ward 2 residents
- Ward 3 residents
- Ward 4 residents
- Ward 6 residents
- Ward 7 residents
- DC veterans
- LGBTQ veterans
- LGBTQ Individuals & Allies
- Deaf, Blind, and Hard of Hearing
- Unhoused community members (2 focus groups)
- Asian Pacific Islanders-Mandarin
- Asian Pacific Islanders-Cantonese
- African Affairs
- DC Neighborhood Village members
- NW Village members
- Serve DC members
- Community Emergency Response Team members
- Homeland Security and Emergency Management staff members

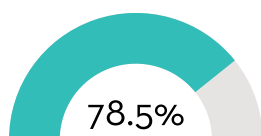
Each facilitator and participant completed the Age-Friendly DC Livability Survey prior to joining the focus group.

Group participants were from all 8 Wards.

| | |
|----------------------|---------------|
| Ward 1 = 3.3% | Ward 5 = 3.2% |
| Ward 2 = 11.1% | Ward 6 = 8.2% |
| Ward 3 = 44.1% | Ward 7 = 4.7% |
| Ward 4 = 16.8% | Ward 8 = 1.8% |
| Other/Unknown = 6.8% | |



Most group participants have lived in DC for over 20 years.



Most group participants identified as female.

The average age of focus group participants

66
years old

Age-Friendly DC Task Force Members

When the Age-Friendly DC 2018-2023 Strategic Plan was developed by the Task Force, members were able to establish directions to strive for but were reluctant to set 5-year numeric targets that could demonstrate progress, due to concerns about unforeseen priorities and budget constraints. However, looking retrospectively, data was retrieved that illuminate the results Pillar-by-Pillar, and domain-by-domain. Most data was reported by Task Force members appointed by the Mayor from DC agencies, less so from the Mayor’s Task Force appointments for the community. Listed below are the DC agencies and community organizations that have been appointed by the Mayor as members of the Task Force and others who joined Age-Friendly DC domain committees to devise and implement the approved plan.



PILLAR 1: BUILT ENVIRONMENT

The built environment consists of human-made structures and the outdoor spaces that connect them, together shaping the places where we live, work, and play. Decisions about land use, including proximity of services and amenities, accessibility for all, diversity and affordability of transportation, and housing options have an enormous impact on quality-of-life for everyone, especially as we grow older. The three domains below address these areas of focus.



OUTDOOR SPACES AND BUILDINGS



TRANSPORTATION



HOUSING



PILLAR 1: BUILT ENVIRONMENT OUTDOOR SPACES AND BUILDINGS

VISION: A city where everyone has access to recreational facilities, activities and services; moves easily indoors and out; and routinely experiences nature.



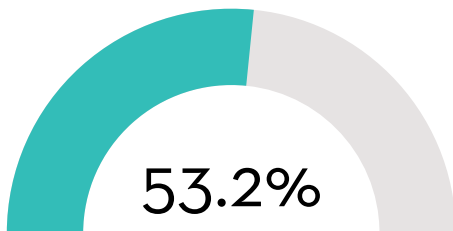
2018 - 2023 PROGRESS

- Since 2018, the Department of Parks and Recreation (DPR) has invested over \$205M in the American Disability Act (ADA) compliance of recreational facilities.
- Over the past five years, DPR has added 5 new parks and 7 recreational facilities.
- A variety of outdoor amenities, including additional restrooms, picnic tables, water fountains, and benches were incorporated into the DC park system to enhance visitor experience and convenience
- In 2023, DPR adopted the 20-year [Ready2Play Plan](#) which promotes climate-resilient, environmentally friendly, and inclusive parks and recreational facilities.
- In 2022, AARP DC donated a [FitLot Outdoor Fitness Park](#), located in Ward 4 at the Lamond Recreation Center, which currently offers programming through DPR.
- The Comprehensive Plan update approved in 2021, increases equity, convenience, and resilience by strategically planning locations of housing, recreation, education, and business center locations across the District.

Survey Results

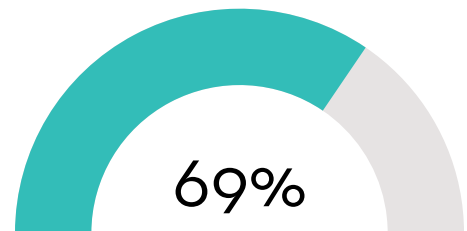
Residents who report utilizing local recreation centers

n=957



Residents who report utilizing local parks

n=971

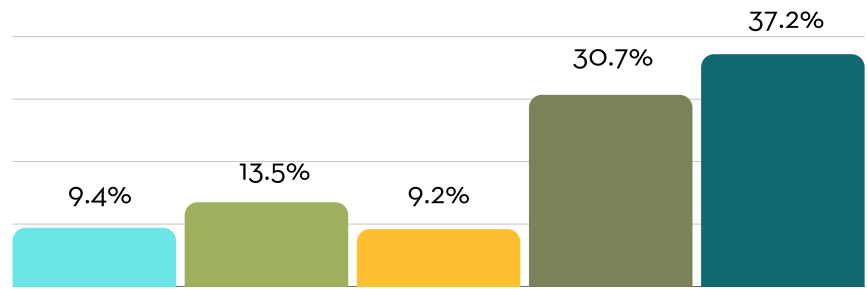


Nearly 7 out of 10 (68.6%) find it easy to access nature

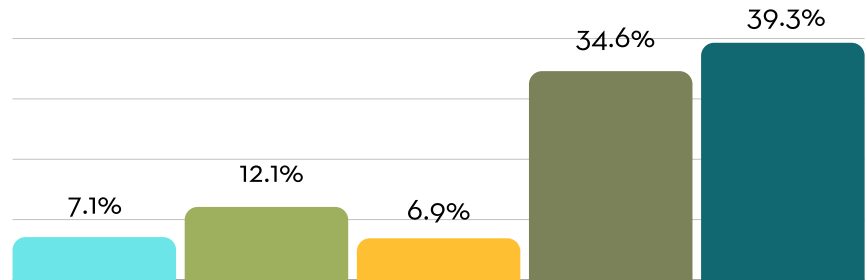
n=385

How accessible are...

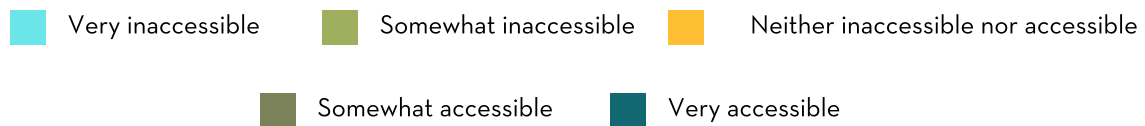
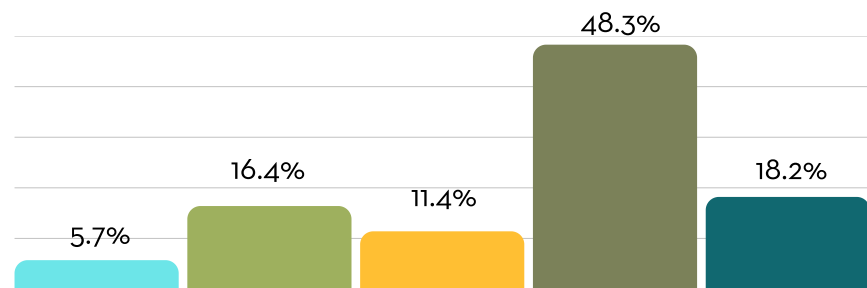
• Recreation centers in your neighborhood? n=688



• Parks in your neighborhood? n=810



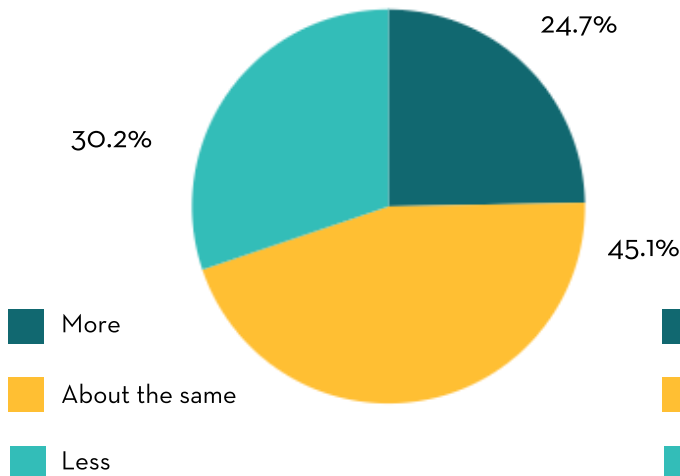
• Buildings in your neighborhood? n=385



Compared to 2018...

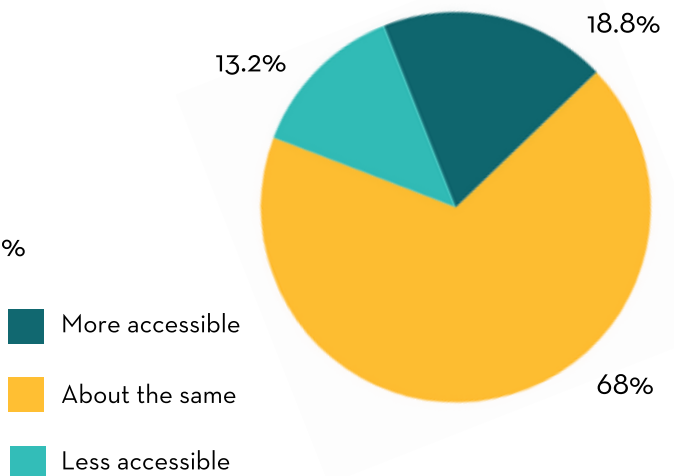
Residents use parks and recreation facilities

n=328



Residents feel parks and recreation facilities are

n=325



Focus Group Results

Among focus group participants, there was high praise for the parks, trails, and recreation centers in the District. Focus group members felt parks and trails were great places for physical activity for people of all ages and were becoming more accessible. Similarly, recreation centers have improved over the past few years with building updates, new equipment, more accessibility, and a wider array of programs.

Focus group members hoped to see continued improvements in parks and recreation, such as more benches and restrooms in parks, and an increased number of multi-generational programs that welcome older adults to recreation centers.

Focus group members also discussed the role of private businesses and homes in regard to this domain. A wide range of restaurants and shops increases motivation to get out and walk in the neighborhood. The inaccessibility of both businesses and homes was seen as a major barrier to being active.

Summary

The District of Columbia has invested in creating accessible park and recreation opportunities within close proximity to all residents and has developed strategic plans that continue to expand inclusive and environmentally-friendly parks and recreation centers. Survey respondents report high use of parks and recreation facilities and most feel these spaces are accessible. Focus group members also provided praise for parks and recreation and acknowledged improvements in their neighborhood. Overall, the Age-Friendly DC Outdoor Spaces and Buildings domain was successful in increasing access to parks and recreational opportunities. Future efforts should focus on continued expansion of accessible park structures and increasing programs for all that welcome older adults, in recreation centers.



I think they've done a great job. That park over here - McPherson Square - before it was just a rat village. Now it's beautiful. I went by there one day and they had a whole bunch of children and families in the park. I mean, it is just so beautiful now. So I think they're doing a great job. I really do. I think the mayor, their staff are doing great and they devoted more money to doing these things.



DOMAIN 1 STRATEGIES

OUTDOOR SPACES AND BUILDINGS



GOAL 1.1: Increase accessibility and knowledge of outdoor areas by creating engagement opportunities; and work to beautify recreational facilities.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|---------------------------|----------|
| 1.1.1 | Increase the number of art projects, landmarks and natural features for people of all ages as a way to create distinct and memorable places within neighborhoods by 2023. | DCCA, OP, DPW, DDOT | ✓ |
| 1.1.2 | Strengthen the linkages to physical activity for residents 50+ by expanding the Park Prescription to residents of all ages. | DPR, DC Health, DAACL | → |
| 1.1.3 | Increase the number of parks and public spaces by 10 new locations a year that are equipped with drinking fountains, restrooms and seating with arms and backs. | DPR, ODR | ✓ |
| 1.1.4 | Increase awareness of District buildings and parks that are accessible. | OP, DCRA, DCPS, DGS, DPR | ✓ |
| 1.1.5 | Increase awareness of accessibility concerns by working with private entities to publish accessibility reports for private buildings. | Age-Friendly DC Taskforce | ✓ |

✓ Achieved → Making Progress ▽ Delayed

TURKEY THICKET: SENIOR PICKBALL CLINIC MARCH 2023



PILLAR 1: BUILT ENVIRONMENT

TRANSPORTATION

VISION: A city with a variety of transportation modes, including walking, biking, and scooters, that are safe and affordable for travelers of all ages and abilities, easy to find and use, and able to connect residents and visitors to jobs, goods, and services.



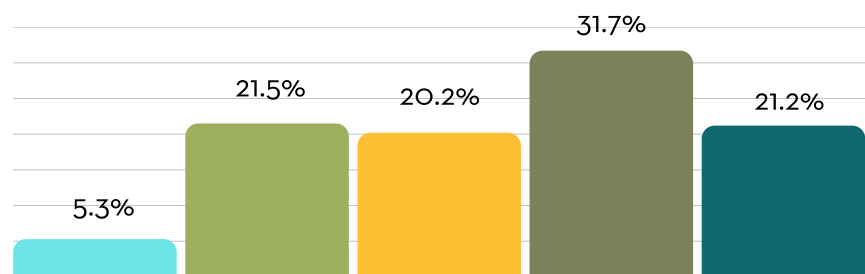
2018 - 2023 PROGRESS

- In 2023, the Washington Metropolitan Area Transit Authority ([WMATA](#)) held 1,424 in-person travel trainings for older adults and people with disabilities to travel safely and independently on Metrorail/Metrobus.
- Since 2021, the District Department of Transportation (DDOT) has repaired 148 miles of sidewalk, installed/maintained 500+ high visibility crosswalks, installed 21 miles of bike lanes and trails, and improved compliance with ADA guidelines at 131 transit stops.
- At least 60 [Leading Pedestrians Intervals](#) were installed at crosswalks in 2023 and more than 300 have been installed since 2021.
- Over 3,460 residents have a [DC Connector Card](#), which provides qualified adults age 60+ with reduced fare on ground transportation services.
- The shared electric vehicle company, [Lime](#), introduced [Lime Assist](#) to increase accessible bikes for those with mobility impairments.

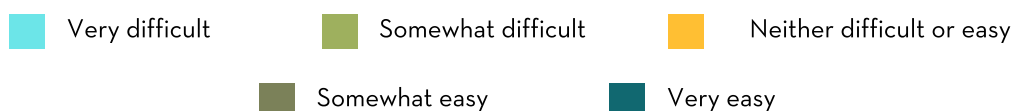
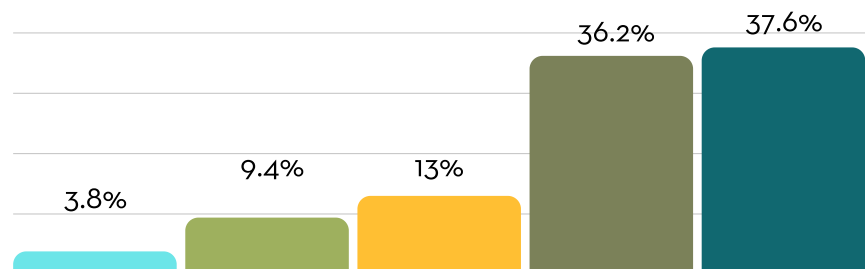
Survey Results

How easy is it for you to...

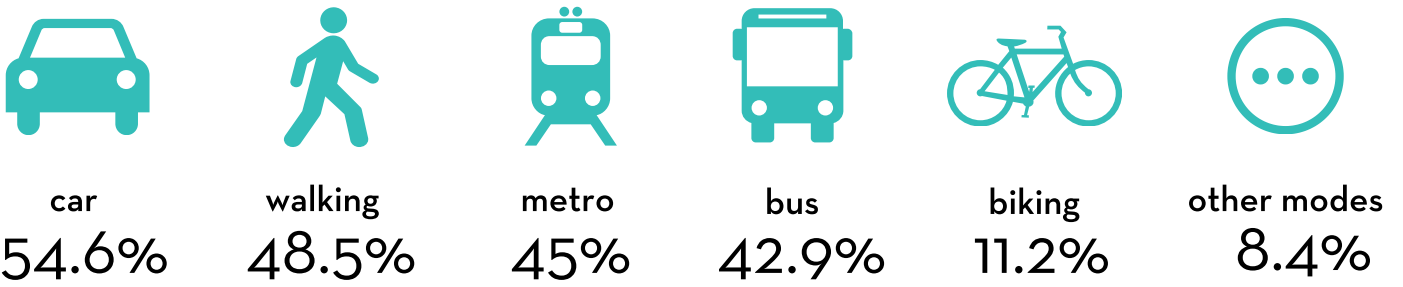
- Walk to places in your neighborhood? n=961



- Access public transportation? n=956



Residents' typical modes of transportation n=1090

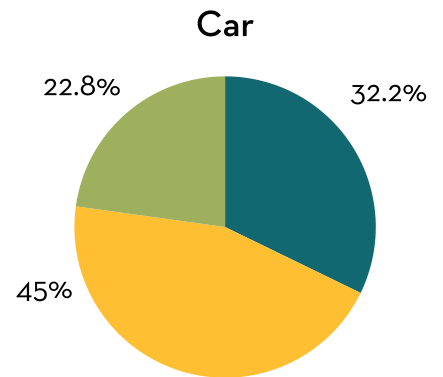
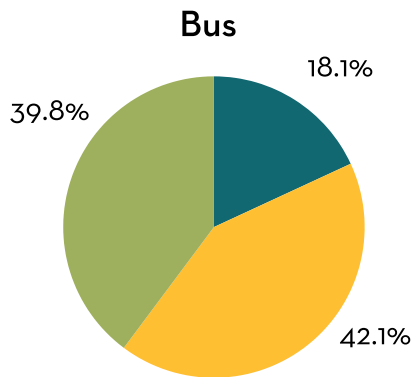
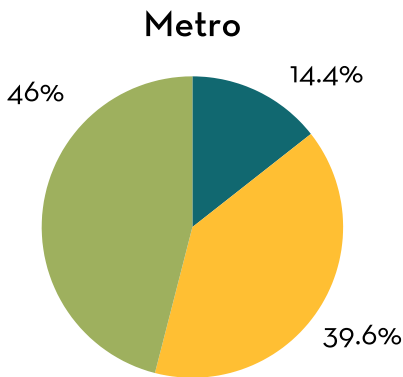
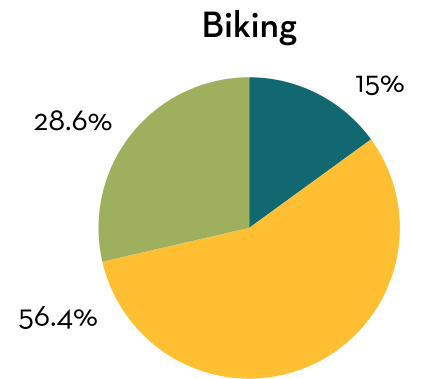
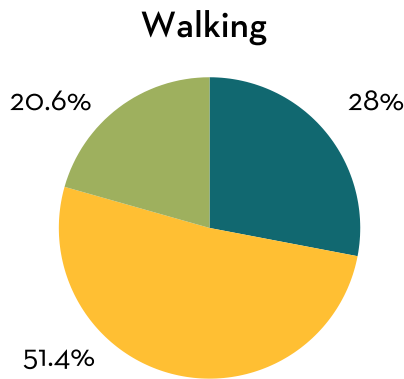


Compared to 2018...

How has your typical mode of transportation changed?

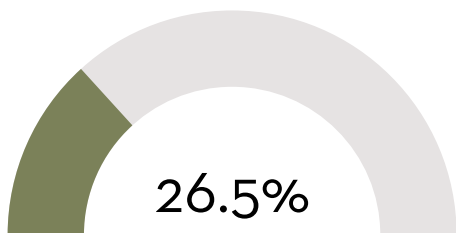
n=313

- More
- About the same
- Less



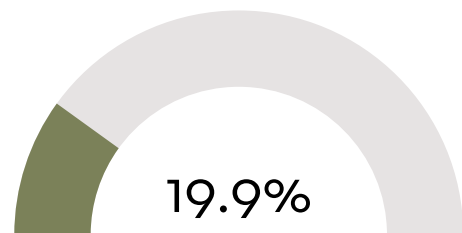
% of residents who report that their mode(s) of transportation changed due to safety

n=347



% of residents who report that their mode(s) of transportation changed due to affordability

n=347



Focus Group Results

Transportation was a hot topic among focus groups with members raising both positive and negative aspects regarding public transportation, car travel, bikes/scooters, and walking. Focus groups acknowledged that DC has a strong public transportation system, many bike lanes, and walkable neighborhoods. They were aware of efforts to improve transportation including [Vision Zero](#), longer pedestrian crossing times, connections to trails, and reduced fares for those 65+ through WMATA, [MetroAccess](#), [VetsRide](#), and the [Connector Card](#) program. Group members also noted that they had seen an increase in sidewalk repairs.

However, there were several major concerns related to transportation. Some viewed public transportation as unsafe due to worries about theft and assault. Others expressed frustration with bike lanes that are making car travel and parking more difficult. Furthermore, members shared that bikers and scooter riders often ride on the sidewalk and leave their bikes and scooters in the middle of walkways, reducing pedestrian safety. Lastly, group members felt that while bricks were aesthetically pleasing, these walkways were a safety hazard for those with mobility issues.

“ In terms of transportation in general, we're well off because we've got a Metro stop smack in the middle of our area and lots of buses and bus access all around. ”

Summary

The city has made substantial efforts to increase the safety and accessibility of all modes of transportation. Survey results show that there is a high use of cars, buses, metro, and walking, but only 11% of respondents bike. Respondents report that it is easy to walk and access public transportation in their neighborhood. Over the past five years, survey respondents began walking or driving more, but took public transportation less. Focus groups acknowledged improvements in city walkability and programs to increase safety and access for residents 60+ and those with disabilities. However, they expressed concerns about personal safety on the metro, changes in traffic patterns due to bike lanes, and the safety of brick sidewalks for those with mobility limitations. Overall, the transportation domain has made great strides and should continue to implement the [MoveDC](#) plan.

DOMAIN 2 STRATEGIES

TRANSPORTATION



GOAL 2.1: Continue implementing safe and affordable private and public modes of transportation.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 2.1.1 | Develop sustainable funding and implementation for sidewalk repairs, safety, and maintenance. | DDOT | ✓ |
| 2.1.2 | Reduce the amount of bicycles and pedestrian crashes. | DDOT, WABA, MPD, PAC, BAC | ▽ |
| 2.1.3 | Increase outreach to a.) increase older adult bicycle usage and b.) strengthen the interaction of pedestrian/bicycle/mobility devices. | DDOT, WABA, DCPL, DPR, BAC, DAACL, LIME | ✓ |
| 2.1.4 | Replace street/traffic signage so it is easily readable, well-lit at night, and addresses access and functional needs. | DDOT | ✓ |
| 2.1.5 | Improve transit stops making them more compliant with accessibility guidelines through sidewalk/intersection connectivity (e.g. curb ramps). | DDOT, WMATA | ✓ |
| 2.1.6 | Improve accessible curbside use opportunities. | DDOT, ODR, WMATA, DFHV, DAACL | ✓ |

✓ Achieved → Making Progress ▽ Delayed

DOMAIN 2 STRATEGIES

TRANSPORTATION



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

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|--|----------|
| 2.2.1 | Enhance WMATA transportation training (such as Travel Training/System Orientation), individual counseling and group instruction which inform older adults of app travel options. Pertinent written information can ensure they can make informed, appropriate, cost-effective, efficient choices. | WMATA, DCPL, DDOT, DACL, DPR, AARP, DFHV | ✓ |
| 2.2.2 | Expand travel options to connect older adults to survival essentials (i.e. meal delivery, medication) and to key locations (medical centers, senior centers, grocery) within the District. | DFHV, DACL, DDOT, DC Villages | ✓ |
| 2.2.3 | Improve access to real time data, such as reports of service repair requests for sidewalks, streetlights, alleys, and traffic signals. | DDOT, WABA, DCPL, DPR, BAC, DACL | ✓ |

✓ Achieved → Making Progress ▽ Delayed



PILLAR 1: BUILT ENVIRONMENT HOUSING

VISION: A city that provides access to a continuum of safe and affordable housing options that allow residents to age in place.



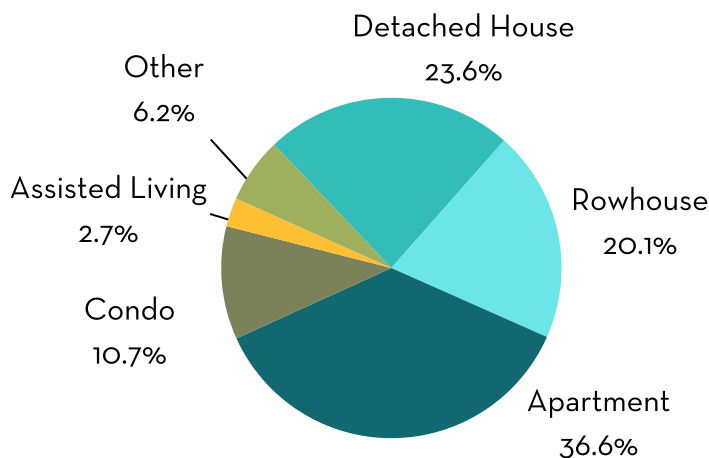
2018 - 2023 PROGRESS

- Since 2019, over 8,000 affordable housing units have been developed with the greatest concentration of units in wards 3, 5, 7, and 8.
- Between 2018 and 2023, 266 homes were rehabilitated through the [Single Family Residential Rehabilitation Program](#).
- The [Heirs Property Assistance Program](#) was launched in 2023 to preserve housing for families after a homeowner passes away.
- Since 2018, three affordable assisted living residences have been built due to increases in reimbursement by Medicaid.
- Since 2018, over 640 housing contractors and inspectors have been trained to meet ADA guidelines in order to increase accessibility for those with disabilities.
- To prevent falls in the home, the Department of Aging and Community Living (DAACL) reported 4,891 installations through the [Safe at Home](#) safety modification program between 2018 and 2023.
- In 2019, the Department of Insurance, Securities, and Banking (DISB) presented 18+ housing resource forums and consumer protection presentations in partnership with local and national organizations.
- In 2023, 17 projects produced 447 affordable units, of which over half the units are accessible.

Survey Results

Survey participants' current housing

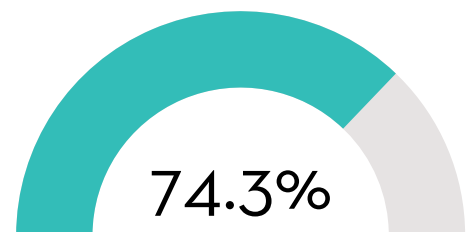
n=949



Compared to 2018...

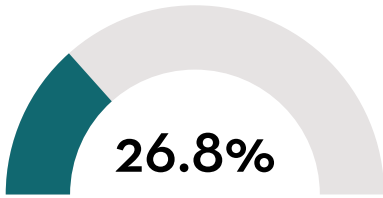
Residents still living in the same place

n=350



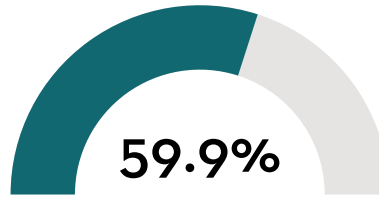
Residents who feel their neighborhood is affordable

n=936



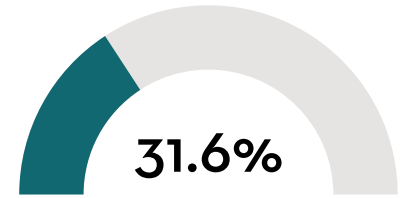
Residents who own their home

n=419



Residents who have wheelchair accessible housing

n=950



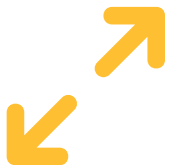
Those who moved over the past 5 years did so because... n=104



They wanted a more walkable or accessible community
20%



They could no longer afford their home
13.3%



They needed more space
21.1%



They were worried about safety
17.8%



They wanted to be closer to friends/family
16.7%



They wanted to be closer to work
11.1%



They wanted to downsize
11.1%



other reason(s)
21.1%

Focus Group Results

Focus group conversations elicited a great deal of concern about the lack of affordable housing in Washington, DC. Groups stated that apartments, houses, and even assisted living centers have become very expensive. Group members noted that older adults living on a fixed income may have a hard time living in their home due to increasing property taxes and the high cost of maintenance. The groups recognized that more apartment buildings were being built, but felt that rent was still too steep for many people. Furthermore, many homes and apartments were seen as inaccessible to those with mobility limitations. More affordable options were often seen as the least accessible.

Multiple programs to assist with housing were discussed. Group members welcomed programs that reduced property taxes or paid for home repairs, but noted that the income qualifications are too low. Members applauded voucher programs but shared stories in which the process of attaining a voucher was cumbersome and were concerned that members receiving vouchers needed more complementary services. Finally, groups expressed gratitude for programs through DC Neighborhood Villages such as the vetted vendor program and snow shoveling services.

“ I think the cost of living, particularly around housing, is the number one issue that I'm hearing across the board. ”

Summary

The city has put great effort into ensuring residents have affordable and accessible housing options. DC invested in building more affordable units and promoted the construction of affordable assisted living facilities, training housing contractors and inspectors to improve accessibility, and providing support for residents to maintain their property. About half of all survey respondents live in a house, just over a third live in an apartment, and most have not moved in the past five years. However, most survey respondents felt their housing was inaccessible and their neighborhood lacked affordability. Focus group members acknowledged helpful programming such as the [Single Family Residential Rehabilitation Program](#) and [Safe at Home](#), but felt that the expense of housing in DC was currently one of the biggest issues affecting residents. The District has made considerable progress on the housing domain goals but might need to accelerate efforts in the next strategic planning cycle.

DOMAIN 3 STRATEGIES

HOUSING



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

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 3.1.1 | Develop incentives financed by the Housing Production Trust Fund (HPTF) and other government financing to encourage developers to increase the production of new affordable units available, including intergenerational as well as age-segregated housing to residents 50+. | DHCD, OP | ✓ |
| 3.1.2 | Increase awareness and access to the Safe At Home program to residents 60+ by expanding eligibility requirements. | DACL | ✓ |
| 3.1.3 | Increase awareness and access to home modification programs using allocated funds from the Single Family Residential Rehabilitation Program, Handicapped Accessibility Program, Rebuild Together, and other programs, so residents can prepare for the years when they may experience mobility limitations and/or accommodate others with mobility disabilities. | DHCD, DACL | ✓ |
| 3.1.4.1 | Review Medicaid assisted living reimbursement rates annually to support older low-income residents accessing and maintaining assisted living housing. | DHCF, DACL | ✓ |
| 3.1.4.2 | Review Optional State Supplemental Payment (OSSP) funding levels to ensure that payment levels established effective January 1, 2021 and are updated to reflect inflation. | DHCF | ✓ |
| 3.1.5 | Encourage the development, preservation, and improvement of new and existing independent living residences and affordable and accessible housing in the city. | DHCD, DMPED, WMATA | ✓ |
| 3.1.6 | Research and promote home-sharing options for both intergenerational living arrangements for residents 50+, as a strategy to enable capable older adults to remain in their neighborhoods. | Age-Friendly DC Taskforce, AARP, Generation Hope, Home Sharing Compatibility Apps (i.e. Silvernest) | ✓ |
| 3.1.7 | Encourage implementation of accessory dwelling units (also known as ADUs or “granny flats”) in more residential zones. | DMPED, DHCD, DCRA, OP | ✓ |

DOMAIN 3 STRATEGIES

HOUSING



GOAL 3.2: Increase awareness of accessible, affordable, and healthy housing options that supports residents with diverse backgrounds and interests.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 3.2.1 | Provide and update a series of easy-to-comprehend factsheets, webinars, and/or infomercials on topics such as qualifying for tax credits, Fair Housing Act compliance, saving money on utilities, and the Healthy Homes program, annually. | OTA, OTR, DISB, OHR, DOEE, DHCD | ✓ |
| 3.2.2 | Develop and distribute a user-friendly list of housing inventory that supports residents 50+ with diverse backgrounds (i.e. LGBTQ+, persons with disabilities, English as a second language speakers). | DHCD, ODR, MOLGBT, MOLA, MOAA, MOAPIA, National Association of Realtors | ✓ |
| 3.2.3 | Provide training for managers of existing public and private housing including tenant-owned buildings to address the needs of aging residents, Fair Housing, ADA compliance and cultural competency for populations such as residents who are LGBTQ+, have a disability, and/or English language learners. | OHR, ODR, DAOL, OTA, MOLGBT, MOLA, MOAA, MOAPIA, DHCD | ✓ |
| 3.2.4 | Expand Fair Housing Act training to third-party inspectors and offer technical assistance to architects and developers to promote compliance with the act. | DCRA, ODR, DHCD, OHR, DGS | ✓ |

✓ Achieved → Making Progress ▽ Delayed



PILLAR 2:**CHANGING ATTITUDES ABOUT GROWING OLDER**

From early childhood, we form views about others. Stereotypes about groups are formed and reinforced as we become adults. Ageism, negative views about the abilities of others who are older or younger, limits full participation in social and professional situations. By reducing ageism in all its forms, we are increasing the quality of life of all residents.

**SOCIAL PARTICIPATION****RESPECT AND
SOCIAL INCLUSION****CIVIC PARTICIPATION
AND EMPLOYMENT****COMMUNICATION
AND INFORMATION**

PILLAR 2: CHANGING ATTITUDES ABOUT GROWING OLDER

SOCIAL PARTICIPATION

VISION: A city where leisure, cultural and creative, multigenerational activities are widely available and accessible for residents of all ages, including those age 50 and over.



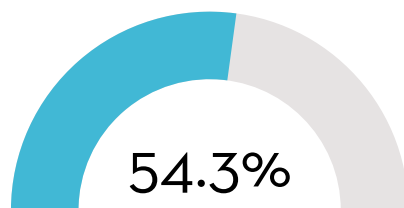
2018 - 2023 PROGRESS

- [AARP DC](#) increased visibility for the Black LGBTQ+ community by reaching 1,880 people in person and 14,120 virtually in collaboration with [DC Black Pride](#), [Capital Pride](#), and the [Center for Black Equity](#).
- [Around Town DC](#) was launched in 2019 to promote social opportunities for those 60+ in ward 2 and 3.
- [HelpAge](#) launched a pilot program, [Friendship Bench](#), in which residents are being trained to support other adults coping with depression and/or anxiety.
- The neighbor-to-neighbor support organizations, [DC Villages](#), of which we have more per square mile than any state, have created a growing source of social participation.

Survey Results

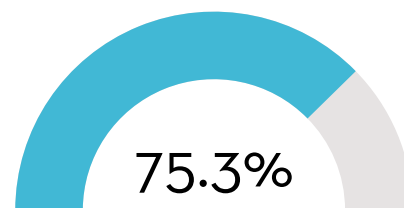
Residents who have engaged
in a volunteer opportunity in
the past month

n=960



Residents who have participated
in a social or cultural activity in
the past week

n=955

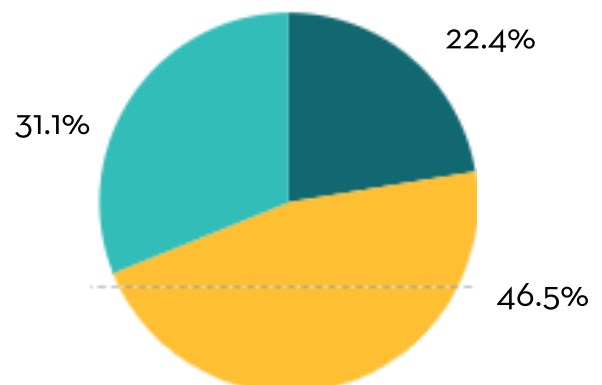


Compared to 2018...

Frequency of resident volunteering

n=340

More About the same Less



Focus Group Results

Focus group members generally had high recognition and praise for the social opportunities in the city. Events and programs through Around Town DC, Department of Aging and Community Living, Iona, Department of Parks and Recreation, DC Villages, DC Public Library, Senior Wellness Centers, and AARP DC were highlighted in group discussions. Some group members noted that technology that allowed for virtual participation further expanded their options, especially during the COVID-19 pandemic. Focus group members stated that they hoped these events and programs would continue to increase and become more accessible.

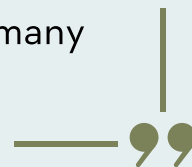
Some participants from special interest groups stated that they would like to see more multigenerational opportunities for their specific population. Barriers to social opportunities identified by the focus groups include transportation, concerns about health and safety, and accessibility of events.

Summary

Both government agencies and non-profit organizations in DC have expanded opportunities for social participation for adults 60+ and those in special populations. Most survey respondents have engaged in social events and volunteered recently. Focus group participants recognized several events and programs that provide an opportunity to connect with others, and praised the accessibility of virtual options. Overall, progress has been made on the goals for social participation. Continued focus on expanding opportunities for special populations including the LGBTQ community and those with disabilities should be emphasized in the next strategic plan.



You know, I retired a little more than five years ago and it's been a wonderful experience for me because it's just luxurious to have a day ahead of you. You can do all sorts of stuff that's allowed me to become more involved in community affairs. There's so many opportunities to learn now and communicate.



DOMAIN 4 STRATEGIES

SOCIAL PARTICIPATION



GOAL 4.1: Develop, strengthen, and promote arts, recreation, leisure, and other social activities involving older adults.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 4.1.1 | Promote, determine, and measure future intergenerational social activities and programs for underserved populations, such as intergenerational gardening and help with technology. | DACL, DCPL, OCTO, DPR, MOCA, Seabury, IONA Senior Services, DC Villages | ✓ |
| 4.1.2 | Build Around Town into a citywide online location with information about adult-oriented education, services, and events. | Iona Senior Services, DACL | ▽ |
| 4.1.3 | Promote arts-oriented programs for adults of all abilities. | Smithsonian Institutions, GW Center for Aging, Health and Humanities | ✓ |
| 4.1.4 | Promote outdoor safe-distanced mutual interest gatherings. | DPR, Capital Nature | ✓ |



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

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---------------------------|----------|
| 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. | MOCA, ServeDC | ▽ |
| 4.2.2 | Enhance and promote the ServeDC volunteer database to expand volunteer opportunities, improve ease of use, increase choices, and better match residents 50+ with volunteer opportunities. | DC Villages | ✓ |

✓ Achieved → Making Progress ▽ Delayed

PILLAR 2: CHANGING ATTITUDES ABOUT GROWING OLDER RESPECT AND SOCIAL INCLUSION

VISION: A city that actively empowers older adults by improving public and private services, as well as public perceptions of aging.



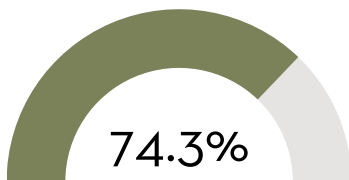
2018 - 2023 PROGRESS

- Over 50,000 Language Access Compliance trainings have been completed by District employees and grantees since 2018.
- The 2021 - 2024 Olmstead Plan was adopted with strategic goals focused on housing, healthcare, and employment for people with disabilities.
- Between 2018-2023, 100% of new and current government employees received LGBTQ+ training.
- Long-term care employee LGBTQ+ Sensitivity Training is now mandated and is being systematically implemented.

Survey Results

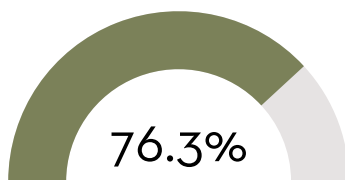
Residents feel socially included

n=946



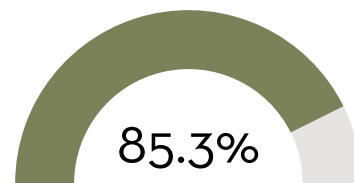
Residents have a neighbor they can rely on

n=955



Residents feel respected

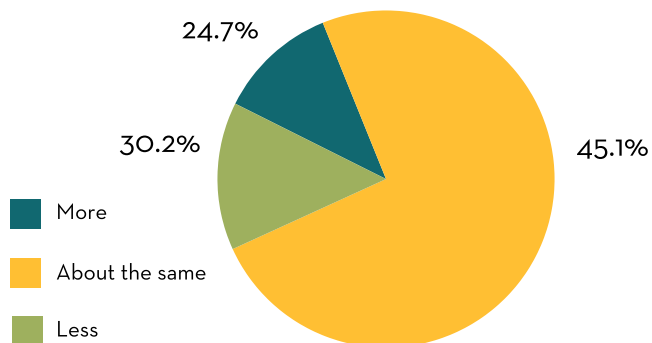
n=945



Compared to 2018...

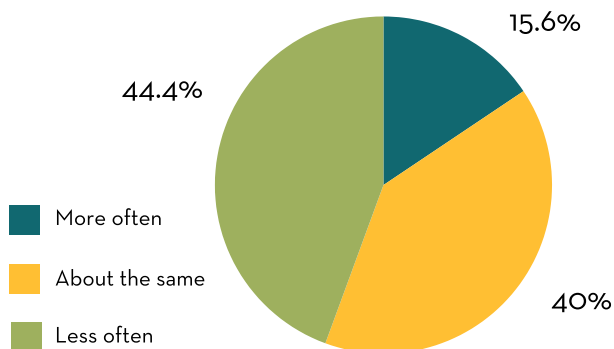
How welcome do you feel in programs in which others are different than you, regarding abilities, race, gender identity, age, political preferences?

n=346



Do you feel connected with others...

n=347



Focus Group Results

Themes related to respect and social inclusion include attitudes on aging, recognition of city efforts to improve respect and inclusion of all people, continued discrimination of some groups, and a call for more neighborhood cohesion. Focus group members recognized that older adults are breaking the stigma of aging and are living vibrant and full lives in the community. This is especially true for those that have strong social connections. However, ageism still exists in the community within some employment opportunities, programs, and attitudes from younger generations. Older adults sometimes feel that they are viewed as “outdated” instead of “experienced.”

Some groups recognized city efforts to increase inclusion such as cultural sensitivity training for city employees and community events with the police department. Focus group members from some special interest groups feel that they are still discriminated against. Not only did they express instances of overt discrimination such as people treating them poorly, but also more systemic discrimination such as a lack of accessibility and translations. Finally, the groups posed neighborhood cohesion as a possible solution to improve respect and social inclusion, acknowledging that neighborhoods can bring together people of all ages and backgrounds.

Summary

Multiple city-wide initiatives have focused on increasing respect and inclusion for people of all ages, abilities, languages, and gender identities. Survey respondents feel respected and included, and most have a neighbor they can rely on. Focus group members recognize the importance of diversity, but acknowledge there is still work that needs to be done to ensure everyone feels welcome.

There have been great strides forward in the Age-Friendly DC respect and inclusion domain. Recommendations for the next plan include developing a dedicated campaign to reduce ageism and continually improving the accessibility of healthcare for those with disabilities.

“It makes our community richer when we have all different age groups living and interacting together.”

DOMAIN 5 STRATEGIES

RESPECT AND SOCIAL INCLUSION



GOAL 5.1: Empower older adults by improving public and private services to better serve older adults and enhance the public perception on aging.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|---|----------|
| 5.1.1 | Develop person-centered, culturally sensitive training that is available to frontline, public facing government agencies, and staff. | DACL, ODR, DDS, MOLGBT | ✓ |
| 5.1.2 | Partner with private entities to support education campaigns aimed at mitigating negative attitudes and biases against aging individuals. | AFDC, AARP-DC, Corporation on National and Community Service, Mayor's Interfaith Council, NCOA, Leading Age, Frameworks Institute, MOCA | ✓ |
| 5.1.3 | Support implementation of the Olmstead Plan. | ODR, DACL, DHCF, DDS, DBH, DOES, DHS, DCHA | ✓ |

✓ Achieved → Making Progress ▽ Delayed

PILLAR 2: CHANGING ATTITUDES ABOUT GROWING OLDER CIVIC PARTICIPATION AND EMPLOYEMENT

VISION: A city where full and part-time work opportunities are available for the most experienced workers.



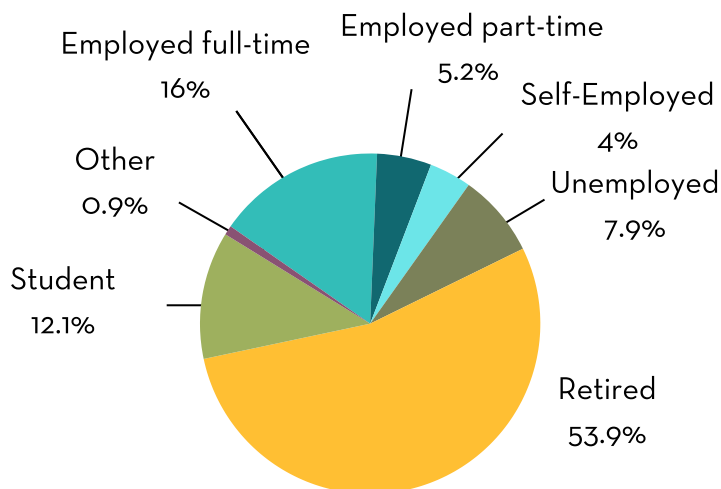
2018 - 2023 PROGRESS

- At its highest proportion in the last 5 years, an estimated 24% of adults 65+ are employed in DC.
- The 2023 DC unemployment rate is down to 4.6 per 100 residents, representing a substantial decrease across all wards since 2018.
- In the last 5 years, over 300 agencies and organization across a variety of industries have offered over 5,900 apprenticeship positions within DC.
- In collaboration with DC Board of Elections, AARP DC held voter education workshops; trained 70+ senior service providers on voter access; and conducted voter awareness campaigns, candidate forums, and tele-town halls to increase voter participation.
- Led by AARP DC, multiple community organizations and government agencies increased participation in the 2020 census in order to secure funding for the District.

Survey Results

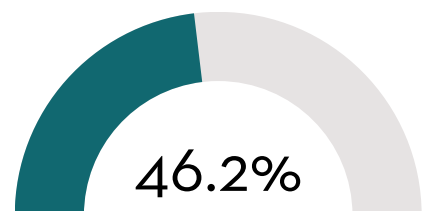
Survey participants' employment status

n=958



Residents are involved in decision-making about important political, economic, and social issues in their community

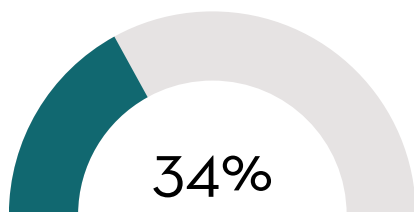
n=927



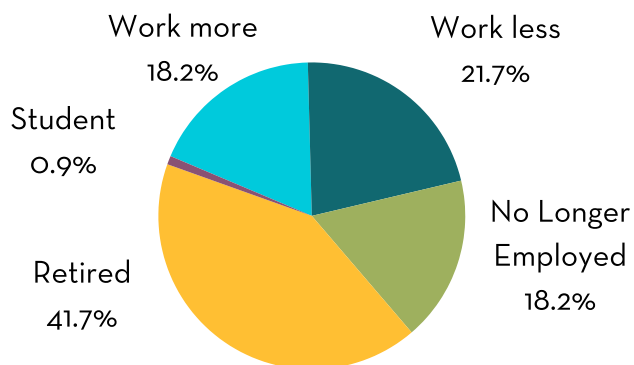
Compared to 2018...

Residents reported that their
employment status has changed

n=347



Of those that had employment changes,
residents report reported that they... n=115



Focus Group Results

Regarding civic participation, focus group members recognized the importance of raising their voices through voting, attending meetings, or even taking office at all levels of government from Advisory Neighborhood Commissions to the national level. Group members felt that it was important to have a balance of age groups participate in civic duties to represent their community. Additionally, members noted that early voting and online meetings greatly facilitated their participation.

Regarding employment, residents felt that older adults play an important role in the work force. Older group members recognized their work as a way to stay busy and engage in a meaningful way. Younger focus group members valued the experience and wisdom of older adults. However, the groups recognized that there were still barriers to employment for older adults who want to work including ageism in the work force and a lack of programs or services that connect older adults to potential opportunities.

“

I think the key thing about adults--seniors--is just to recognize and try to promote that, among seniors, you've got a lot of years ahead of you and being engaged in work or purposeful activities is something the city facilitates and supports.

”


Summary

The city has successfully promoted employment and civic opportunities to all residents across wards, especially adults aged 60 and over. Unemployment rates are down among all adults, and nearly a quarter of adults 60 years or over are employed, although about half of survey respondents were retired. Additionally, nearly half of all survey respondents were involved in decision-making in their community.



DOMAIN 6 STRATEGIES

CIVIC PARTICIPATION AND EMPLOYMENT

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

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|---|----------|
| 6.1.1 | Increase the number of residents 50+ working in long-term care by partnering with employers. Emphasize long-term care employment close to home. | DOES, OSSE Adult Charter Schools, DC Housing Authority, Leading Age | ✓ |
| 6.1.2 | Partner with the Rotary Club of Washington and Council of Churches of Grater Washington to identify entrepreneurial opportunities and employers that focus on hiring residents age 50+. | AFDC, CCGW, ICMW, AARP-DC | ▽ |
| 6.1.3 | Work with the Age-Friendly Business initiative to provide technical assistance and explore financial incentives to help small and local businesses become age-friendly, hire residents age 50+, and provide entrepreneurship opportunities for older residents. | AFDC, AARP-DC, DSLBD, DOES | ✓ |

 **GOAL 6.2** Increase civic participation among residents age 50+.

| | | | |
|-------|---|------------|---|
| 6.2.1 | Create and publish a listing of civic engagement opportunities for residents age 50+. | DOES, MOTA | ✓ |
|-------|---|------------|---|

✓ Achieved → Making Progress ▽ Delayed

PILLAR 2: CHANGING ATTITUDES ABOUT GROWING OLDER COMMUNICATION AND INFORMATION

VISION: A city that uses all forms of communication to keep older residents connected to their community, friends, and family.



2018 - 2023 PROGRESS

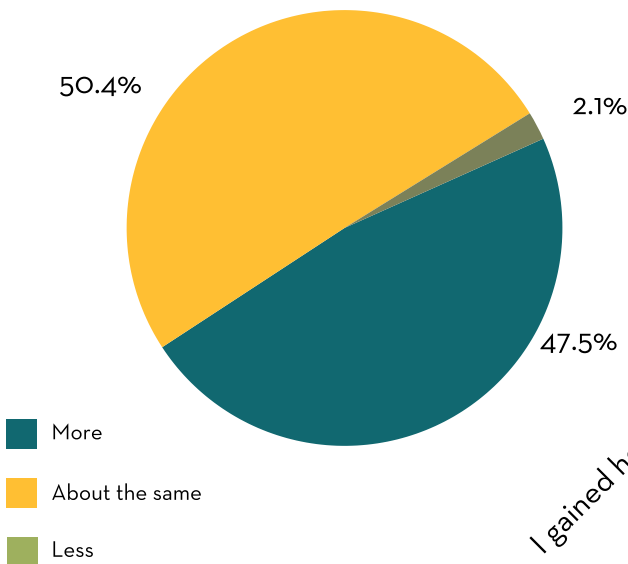
- In 2021, [TechTogether DC](#) was established to provide tech educational programs and free community internet hubs for eligible DC residents.
- Over 1,200 free iPads were distributed between 2022 to 2023 to qualified residents 60+ which included free training conducted by [WildTech](#).
- Between 2019 and 2020, at least 41,040 District government employees completed Language Access Compliance training to increase support for individuals whose first language is not English.
- The Center for Aging, Health and Humanities has hosted Age-Friendly DC Task Force meetings 2018-2023. The Center promotes the recordings of these meetings which have been received over 15,000 views.

Survey Results

Compared to 2018...

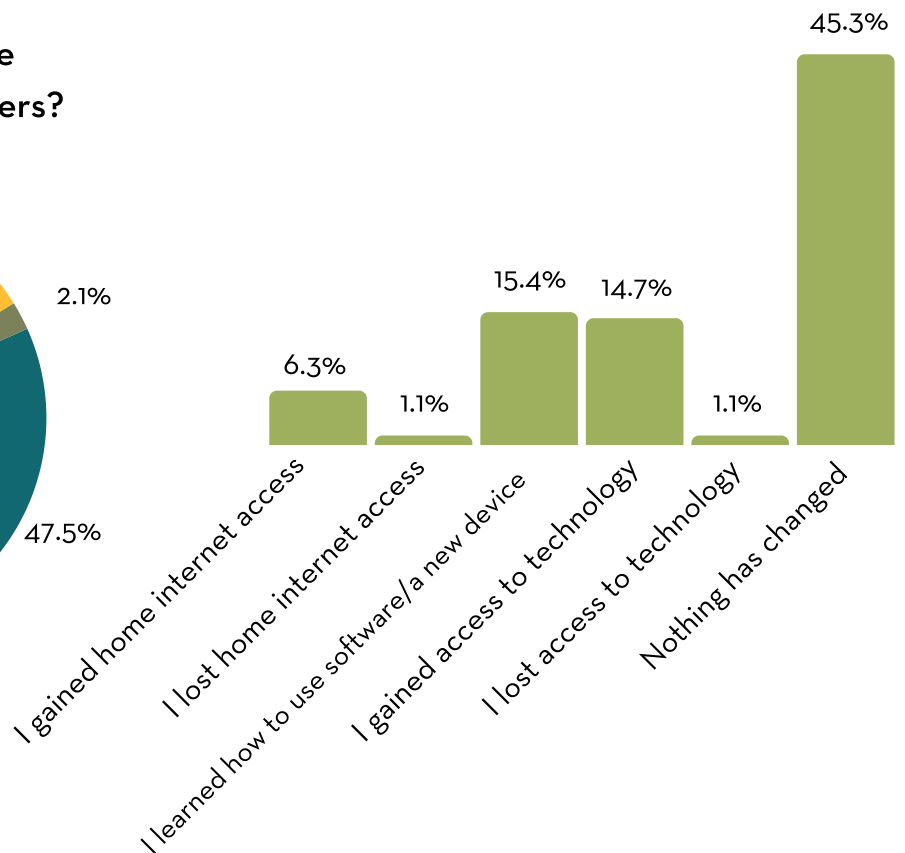
How frequently do you use technology to connect to others?

n=341

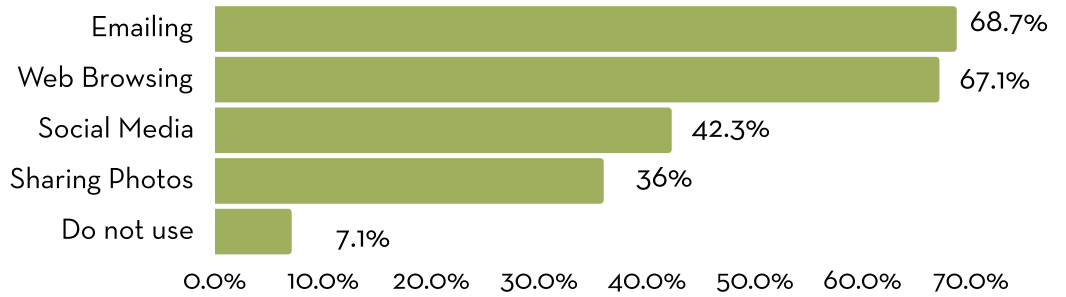


What has changed about your technology?

n=341



How do you use the internet?
n=1090



How do you typically find out about important health and safety information?
n=1090



50.2%

Word of Mouth



37.3%

Print



47%

Web



30.2%

Social Media



24.8%

Radio



42.6%

TV



3.6%

Information from medical provider



2.7%

Centers (rec, library, wellness, etc.)



2%

Other

Focus Group Results

Communication was discussed regularly throughout the focus group conversations as a way to build awareness of the available services and resources in the community. Focus group members recognized a few main themes regarding communication and information: a wide range of modes of communication are necessary to reach all, including adults past their 50th birthday. Technology plays an important role in reaching people, and multiple barriers to receiving information exist in the population.

Group members reported receiving information from a wide range of sources including app notifications, email blasts, social media, WeChat, newsletters, The Beacon Newspaper, word of mouth, and events run by places of worship, and the DC government.

Notably, a higher percentage of older adults of all ages getting information through technology, but groups were concerned that older adults who lack access to technology or who are not technology literate are not being reached. Additional barriers to communication noted include language barriers and being socially isolated.

Summary

Communication and the dissemination of information is a critical element of every Age-Friendly-DC plan. This domain focuses on reaching residents with information through many forms of communication.

As technology plays an increasingly large role in the way we share information and connect with others, this domain has demonstrated success by increasing access and education about technology. Survey respondents utilize the internet in a variety of ways and only a small fraction (7.1%) said they did not use the internet. Nearly half of all survey respondents felt they used technology to connect with others more frequently than they did five years ago. While technology-based communication ranked high among ways people learn about important health and safety information, it should be noted that half of all respondents still learn from word of mouth. Focus groups also noted that while increasing technology literacy and access have increased information sharing, other communication strategies are still key to reaching all, including adults 50 years or over. Moving forward, this domain should continue to focus on increasing access to technology while also expanding communication efforts through word of mouth.

“ In terms of communication, I would say that it has gotten better [over the last five years] because mostly everyone has a cell phone and they're on a lot of apps and you receive information pretty quickly.

DOMAIN 7 STRATEGIES

COMMUNICATION AND INFORMATION



GOAL 7.1: Improve communication regarding age-friendly initiatives across a range of traditional and digital media.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|--|----------|
| 7.1.1 | Promote newsletters related to District and community partner programs, activities and initiatives (i.e. community fairs, District agency events, etc.). | DACL, Iona, Around Town, Beacon Newspapers, MOCA | ✓ |
| 7.1.2 | Facilitate more participation in technical training workshops by maintaining an up-to-date list summarizing technical training opportunities available to DC seniors - offered by OCTO, other city agencies, or community groups. Partner with DACL to make information about training opportunities available and accessible across the city. | Iona Senior Services, DACL, DCPL | ✓ |



GOAL 7.2: Promote understanding and use of best practices for age-friendly communications across the city.

| | | | |
|-------|--|---------------------------|---|
| 7.2.1 | Distribute communication guidance that includes OCTO-recommended tips for print and digital media to increase readability for older residents. | OCTO, Leading Age DC | ✓ |
| 7.2.2 | Encourage distribution of information, geared towards residents 50+ years of age, into all official DC government language. | AFDC, DCPL, AARP-DC, MOCA | ✓ |

✓ Achieved → Making Progress ▽ Delayed

PILLAR 3: LIFELONG HEALTH AND SECURITY

As Washingtonians proceed through life, access to health care is essential. Experience with unexpected events underscores the importance of neighbors and communities working together. Saving from early in life is essential, but not always prioritized or possible. Continuing to learn is essential to stay connected with others. Feeling safe at home and elsewhere is important. Personal assistance may be necessary. These are the components of Pillar 3



**COMMUNITY SUPPORT
AND HEALTH SERVICES**



FINANCIAL SECURITY



**EMERGENCY PREPAREDNESS
AND RESILIENCE**



LIFELONG LEARNING



**ABUSE, NEGLECT, AND
UNDUE INFLUENCE**



PUBLIC SAFETY



CAREGIVING



PILLAR 3: LIFELONG HEALTH AND SECURITY

COMMUNITY SUPPORT AND HEALTH SERVICES

VISION: A city that promotes wellness and active aging through achieving excellent health outcomes at all ages.



2018 - 2023 PROGRESS

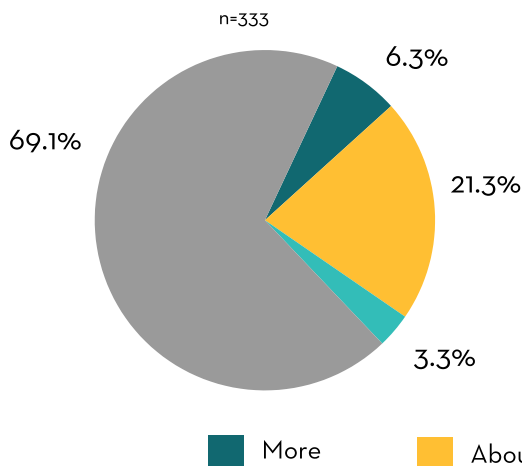
- With support from [AARP DC](#) and DACL, the [HelpAge USA's DC Grandparents Against COVID-19](#) program reached 500+ older adults, primarily from Ward 7 and 8, to improve health literacy and encourage vaccinations.
- To increase awareness of DACL’s resources, the DC Mayor’s Office provided information in-person at over 980 events and via DACL’s Information and Referral/Assistance Line, which received 153,000+ calls.
- DC Health’s [Brain Health Initiative](#) has spread awareness of Alzheimer’s disease and dementia resources to over 77% of adults 50+.
- In 2023, [Produce Plus](#) provided over 5,600 DC residents with funds to purchase fresh fruits and vegetables at District Farmers’ Markets.
- In 2023, the [USDA Commodity Supplemental Food Program](#) adopted by DC Health reached over 5,000 older adults each month to provide boxes of food items.
- In 2023, DC Health expanded its surveillance capacity to better understand the incidence, prevalence, and impact of falls across the District of Columbia based on the Emergency Medical System (EMS) and partners’ responses.

Survey Results

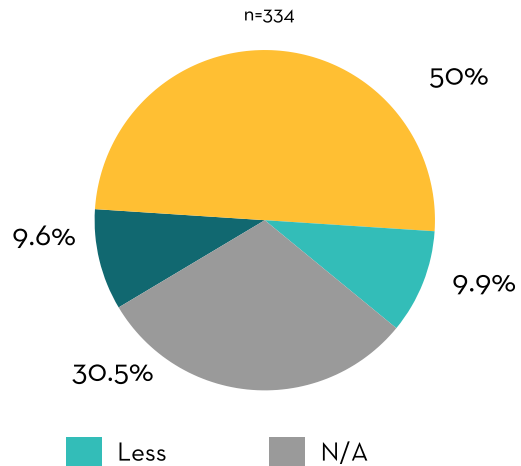
Compared to 2018...

How has your access to health changed in the following dimensions?

Access to home care services



Health clinics



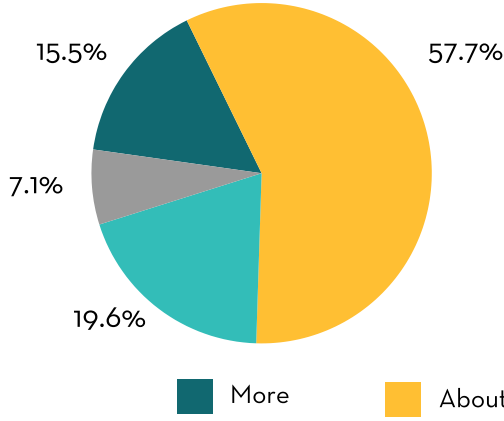
More
 About the same
 Less
 N/A

Compared to 2018...

How has your access to health changed in the following dimensions?

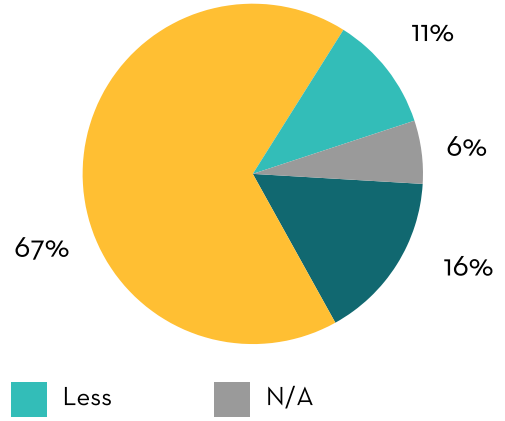
Physical activity programming

n=336



Healthy foods

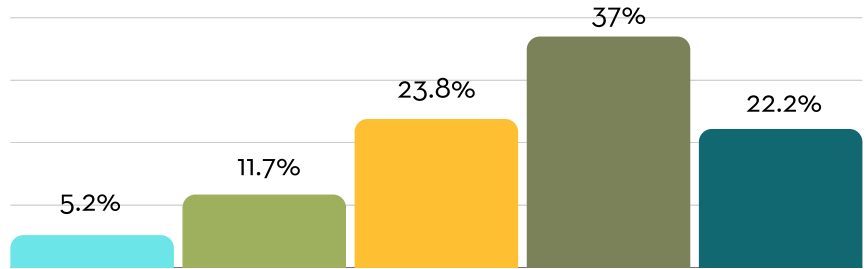
n=338



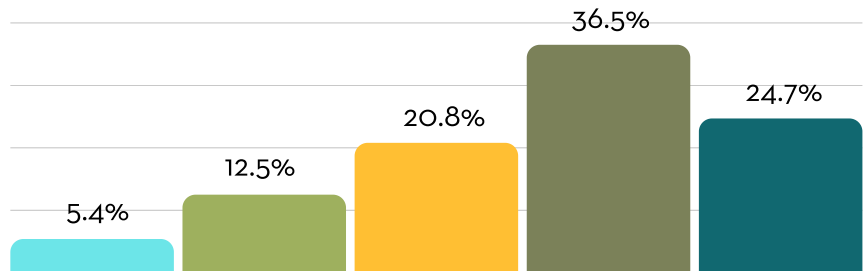
More About the same Less N/A

How easy is it for you to...

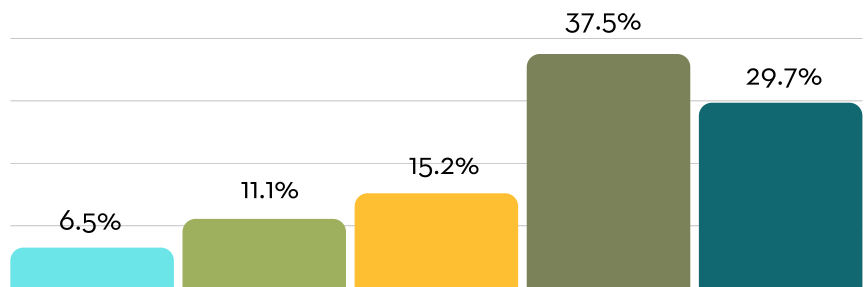
- find local sources of information about your health concerns and service needs? n=945



- access physical activity options in your area? n=942



- access healthy food options in your area? n=939



Very difficult Somewhat difficult Neither easy nor easy Somewhat easy Very easy

Focus Group Results

Overall, focus group participants recognized that DC offers residents a wide range of services that support health and well-being. Government and non-profit services discussed in the conversations include DC Villages, Senior Wellness Centers, Parks and Recreation programming, Around Town DC, Iona, DC Public Libraries, Department of Aging and Community Living, Terrific Inc., and VetsRide DC. Most residents were satisfied with their medical care stating that they feel well supported by their physicians--even acknowledging increased cultural awareness and support for those in the LGBTQ community.

However, the groups identified gaps in medical and wellness services including a lack of accessibility for those with disabilities, a lack of affordability for those with low income who do not qualify for government programs, fewer health services east of the river, limited coordination between services, and a shortage of behavioral health services. Focus group members also recognized that while many great health and wellness services exist, it is likely that there is limited awareness about what is available.

Summary

The community support and health services domain worked diligently to promote health and wellness information, increase access to healthcare and healthy foods, and track important health issues for DC residents. Most survey respondents reported that it was easy to find health information and to access physical activity opportunities and healthy food choices. Focus group members agreed that there were ample health and wellness services in the District. Overall most people feel that both prevention and treatment options are adequate in the city. In the future, this domain should expand access to services for low-income residents and residents with disabilities, and increase awareness of the wide range of services offered to all DC residents.

“

I believe that there have been a lot of resources that have been added, whether it's at senior centers, recreation centers, there are more resources available for anybody who would want to use them.

”

COMMUNITY SUPPORT AND HEALTH SERVICES



GOAL 8.1: Increase consumer awareness of preventative, primary, urgent, and long-term care options.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|--|----------|
| 8.1.1 | Increase public awareness of DACL's wide array of resources available to older adults and adults with disabilities. | DACL, AARP-DC, Iona, Home Care Partners | ✓ |
| 8.1.2 | Continue progress toward implementing the Program for All-Inclusive Care for the Elderly (PACE). | PACE, Pennsylvania Avenue Baptist Church | ✓ |



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

| | | | |
|-------|---|---|---|
| 8.2.1 | Compile and analyze data on falls to inform appropriate, evidence-based interventions that reduce the incidence of falls. | DC Health, DACL, DCHCA, DACL - APS, District Trauma System, OCME, DCFEMS, AARP-DC, DCPCA, DC Hospital Association | ✓ |
| 8.2.2 | Look for best practices to prevent or to address poly pharmacy or drug-to-drug interactions that result in hospitalization and emergency room visits. | DC Health, DCPCA, DCHA, DCFEMS, DHCF, retail pharmacies, academic institutions | ✓ |
| 8.2.3 | Increase awareness and access to community activities for persons age 50+. | DPR, DC Villages, AARP-DC, Iona, DACL, ADRCs | ✓ |

✓ Achieved → Making Progress ▾ Delayed

DOMAIN 8 STRATEGIES

COMMUNITY SUPPORT AND HEALTH SERVICES



GOAL 8.3 Support access to affordable nutrition and food education.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|--|----------|
| 8.3.1 | Increase access to affordable food including fresh produce and other healthy foods for residents age 50+. | DACL, DHS, OSSE, Sustainable DC | ✓ |
| 8.3.2 | Increase participation in nutrition and food education programs for residents age 50+. | DC Health, DACL, DPR, Capital Area Food Bank, DC Central Kitchen, DC Villages, Food & Friends, food retail outlets, SOME | ✓ |
| 8.3.3 | Identify, compile, and disseminate an online and printed directory of community-based resources that provides access to affordable nutrition and food education opportunities for residents age 50+. | DC Health, DC Food Policy Council, DACL, DC Greens, DC Hunger Solutions, DCPCA, DC Senior Advisory Coalition | ✓ |

✓ Achieved → Making Progress ▽ Delayed

COMMUNITY SUPPORT AND HEALTH SERVICES



GOAL 8.4 Increase health workers' and residents' knowledge about behavioral health and substance abuse.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 8.4.1 | Identify developmentally appropriate and culturally competent training for health care workers and aides working in home-based care units in behavioral health care settings (including memory loss) for adults over 50. | DC Health, DBH, DHS, DCFEMS, Home Care Partners, Long-Term Care CBOs, DCHHA | ✓ |
| 8.4.2 | Recommend a behavioral health screening tool and behavioral health referral information for patients over 50 to be used in healthcare settings by primary care providers. | DBH, DACL, DC Health, | ✓ |
| 8.4.3 | Increase knowledge of the impact of substance use and mental health on overall health and wellbeing for residents of the District of Columbia aged 50+. | DBH, DACL, DC Health | ✓ |

✓ Achieved → Making Progress ▽ Delayed



PILLAR 3: LIFELONG HEALTH AND SECURITY EMERGENCY PREPAREDNESS AND RESILIENCE

VISION: A city that ensures the readiness, immediate safety, and resiliency of all residents and communities before, during, and after an emergency.



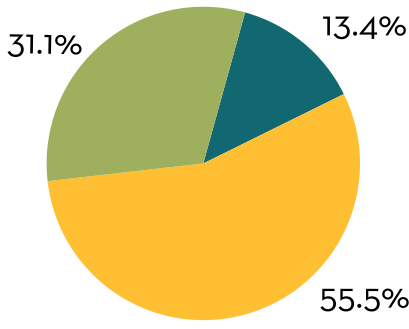
2018 - 2023 PROGRESS

- Since 2018, Homeland Security and Emergency Management Agency (HSEMA) has conducted over 630 community trainings and events related to emergency preparedness and resilience.
- [DC Community Emergency Response Team \(CERT\)](#) is a free training offered to DC residents in all 8 Wards that prepare individuals of all abilities to support their community in disasters.
- The 2023 budget for neighbor-to-neighbor support organizations, known as DC [Villages](#), increased to an all-time high of \$847,830 in part due to their actions in emergencies.
- In 2023, HSEMA hosted 93 community preparedness events—over two times as many as in 2018.
- Between 2018-2023, [AARP DC](#) hosted virtual emergency preparedness events in collaboration with HSEMA, including tele-town halls and live-stream educational events.

Survey Results

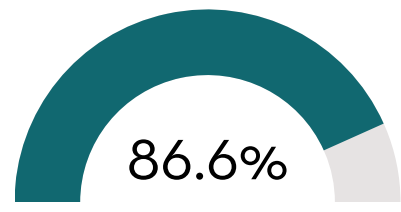
Compared to 2018...

How confident are you that you'd know what to do if the District is threatened by an emergency situation? n=344



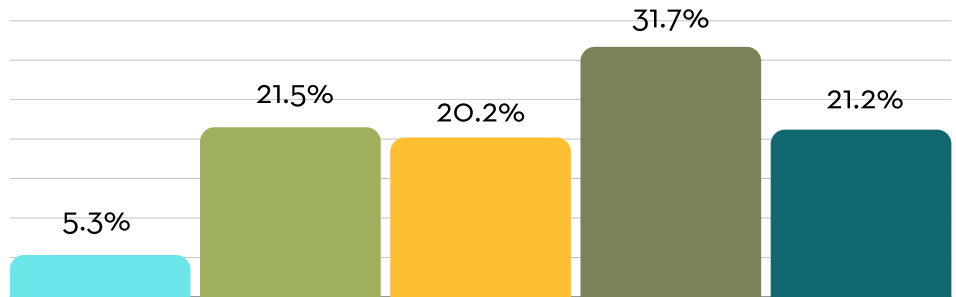
■ More
 ■ About the same
 ■ Less

Residents who felt they knew what to do in case of an emergency n=934



How confident are you that the District will be able to meet your communication, health, independence, support, and transportation needs during an emergency? n=361

■ Not confident at all
■ Not very confident
■ Somewhat confident
■ Very confident
■ Extremely confident



Focus Group Results

Concerning emergency preparedness and resilience, focus group members applauded programs, identified inequities for some residents, stated concerns about emergency response systems, and offered suggestions for improvement. Group members acknowledge Villages as a system of support in both large-scale emergencies like the pandemic, and more individual emergencies like house fires. Some group members had been trained and received kits through the Community Emergency Response Team (CERT) program, which made them feel empowered to support their community during emergencies.

Groups were concerned that emergency messages were not shared in all languages and that Deaf or Blind residents were not receiving messages. Furthermore, some members shared negative experiences in calling 911 which resulted in long wait times for first responders. Groups offered up several suggestions for improvement including mapping apartment buildings to identify those who need more support to evacuate, translating emergency messages into every language, and providing more community training for CPR/AED and Narcan.

Summary

The city has put substantial effort into increasing emergency preparedness and resilience by training residents to support their community in case of emergencies and to share information with residents through workshops, events, and DC Neighborhood Villages. Most survey respondents feel they know what to do in emergencies and feel confident in the city's ability to meet their needs in emergencies. Focus group participants acknowledged the Villages and the Certified Emergency Response Training (CERT) program as major efforts to increase emergency preparedness. Overall, residents seem pleased with the progress made in this domain.

In the next strategic plan, Age-Friendly DC should place even more emphasis on increasing accessibility in emergency response plans for people with disabilities and those whose first language is not English.

“Being able to communicate and understand what folks' needs are is really important when it comes to emergency services and preparedness.”

DOMAIN 9 STRATEGIES

EMERGENCY PREPAREDNESS AND RESILIENCE



GOAL 9.1: Assist vulnerable and at-risk resident populations with connectivity to emergency preparedness and resiliency information.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|--|----------|
| 9.1.1 | Through the actions of DC agencies and community organizations, continue emphasizing the importance of mutual support for all, including residents whose first language is not English and residents with disabilities. | HSEMA, OUC, MOCA, OCTO, OP, DOEE, ODR, DACL, DDS | ✓ |



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

| | | | |
|-------|--|--|---|
| 9.2.1 | Increase awareness of trainings on preparedness, mass care, emergency response, access and functional needs, behavioral health, CPR/first aid, and resilience to District government staff and volunteers. | HSEMA, MOCA, Serve DC, DCPL, DC Villages, American Red Cross | ✓ |
| 9.2.2 | Create and assist community-supported neighborhood Villages across the city that are accessible to all income levels. | DC Health, DCPCA, DCHA, DCFEMS, DHCF, retail pharmacies, academic institutions | ✓ |

✓ Achieved → Making Progress ▾ Delayed

PILLAR 3: LIFELONG HEALTH AND SECURITY

ABUSE, NEGLECT, AND UNDUE INFLUENCE

VISION: A city where older adults can expect to live freely of financial exploitation, neglect, and physical, sexual, and emotional abuse.



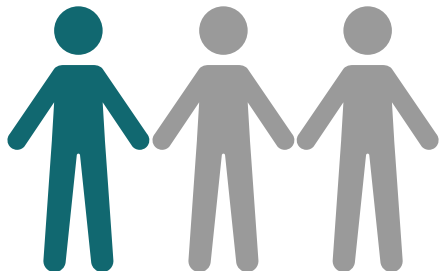
2018 - 2023 PROGRESS

- In 2023, DISB provided fraud awareness education to District residents, including those 60+.
- The [Senior Safe Act](#) was adopted in 2018 to increase the training of employees and reporting of potential financial exploitation of people 65 years or older.
- As of December 2020, the [Care for LGBTQ Seniors and Seniors with HIV Amendment Act of 2020](#) was enacted to require long-term care facilities to provide sensitivity training to staff.
 - To date, 8 Long Term Care facilities implemented the staff training, and 432 individuals completed the training.

Survey Results

1 in 3 residents (34.3%) know someone who has been the victim of financial exploitation, neglect, or physical or sexual or emotional abuse in the past 5 years.

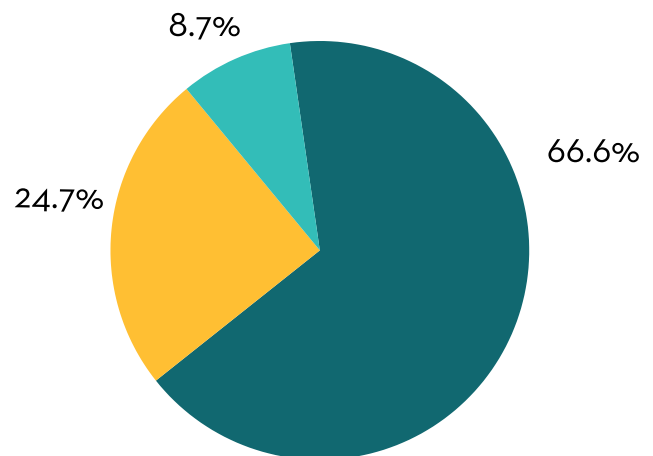
n=344



Compared to 2018...

Residents are receiving spam calls and emails...

n=344



■ More often
 ■ About the same
 ■ Less often

Focus Group Results

The main themes that arose for the abuse, neglect, and undue influence domain were a desire to build awareness around scams, opportunities to improve related services, and a recognition of the Adult Protective Service under the Department of Aging and Community Living. Focus groups recognize the alarming number of scams happening through phone, email, and even door-to-door that often take advantage of residents 60+. Particularly concerning to this group is how artificial intelligence (AI) might make it harder to recognize scams in the future. Group members raised that they would like to see more awareness-building about scams in the future.

Additionally, focus group participants feel that more awareness is needed regarding abuse and neglect of residents 60 and over, as well as training of key individuals who might play a role in the identification and connection to care for those experiencing abuse and neglect. Although many focus group members were unsure of where to turn if they noticed signs of abuse or neglect, a few members recognized the Adult Protective Service as a helpful partner for residents living with disabilities and/or 60 years or older experiencing these issues.

Summary

The city has implemented several policies including the Senior Safe Act and the Care for LGBTQ Seniors and Seniors Living with HIV Act to reduce abuse, neglect, and undue influence of adults with disabilities and/or residents 60 years or older in the District. The District's support is necessary and timely as one in three survey respondents know a victim of financial exploitation, neglect, or physical, sexual, or emotional abuse. Survey respondents also expressed that they are receiving more fraudulent emails and calls. This sentiment was shared by focus group participants who also expressed concern about the high number of scams. Progress was made in this domain in providing training to reduce abuse of LGBTQ+ older adults and providing services that reduce financial exploitation, and physical and mental abuse. Efforts to increase awareness of scams and signs of abuse should continue in the next strategic plan.

“ My mother gets called every day from people asking for her Social Security number, her Medicaid, and trying to get all types of personal information from her. Fortunately, her mind is still sharp enough that she's not falling for it, but that's real. ”

DOMAIN 10 STRATEGIES

ABUSE, NEGLECT, AND UNDUE INFLUENCE



GOAL 10.1: Lessen the impact of elder abuse in the forms of physical abuse, sexual assault, financial abuse, and neglect.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|------------------------------|----------|
| 10.1.1 | Increase the awareness of elder abuse in the forms of physical abuse, sexual assault, financial abuse, and neglect. | DC TROV, OAG, DISB, DACL-APS | ✓ |
| 10.1.2 | Conduct a comprehensive needs assessment to garner a greater understanding of elders' experiences with abuse in the District, assessing the current services offered to senior victims, and evaluating where the current gaps are. | DC TROV | ▽ |
| 10.1.3 | Coordinate a robust social media presence on issues related to elder victims' rights and resources. | DC TROV | ✓ |
| 10.1.4 | Host community outreach events focused on abuse, neglect and fraud in all 8 wards. | DC TROV, OAG, DISB, DACL | ✓ |



GOAL 10.2: Increase identification of victims and access to civil remedies for victims to lessen the impact of revictimization.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|---------------------------|----------|
| 10.2.1 | Through the Senior Safe Initiative, increase awareness among banks and financial service firms of any powers to freeze assets that have been compromised through scams and of any mandated requiring reports to APS of suspected financial abuse. | DISB, DACL-APS | ✓ |
| 10.2.2 | Increase access to information to those in long-term care on ways they can lessen and report abuse, neglect, and exploitation. | DACL-APS, OAG | ✓ |
| 10.2.3 | Provide information to the community regarding consumer protection, Medicaid fraud and abuse, protections against elder abuse and exploitation, civil protection orders, guardianships and conservatorships, and substitute decision making. | DISB, OAG | ✓ |

ABUSE, NEGLECT, AND UNDUE INFLUENCE



GOAL 10.3: Increase prosecution of elder abuse crimes.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|-----------------------------------|----------|
| 10.3.1 | Educate the courts, prosecutors, legal practitioners and other service providers on financial exploitation protections, including undue influence and civil and criminal penalties, and provide education on working with older victims and those with diminished capacity. | OAG, DACL-APS, DISB | ✓ |
| 10.3.2.1 | Increase civil and criminal prosecution of elder abuse and financial exploitation. | OAG | ✓ |
| 10.3.2.2 | Increase awareness among District agencies about elder abuse and exploitation and increase civil and criminal enforcement of the Districts' financial exploitation statute. Continue to explore the need for a MDT Elder Abuse Response Team. | DC TROV, OAG, DACL-APS, DISB, OAG | ✓ |
| 10.3.2.3 | Offer direct crime victims' legal services including: information, brief advice, representation in criminal investigations/cases, and assistance with asserting victims' rights in criminal prosecutions under the Crime Victims' Rights Act and DC Crime Victims' Bill of Rights. | NVRDC, DC TROV | ✓ |



GOAL 10.4: Increase understand and knowledge of residents' rights and resources regarding abuse, neglect and undue influence.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|---|--------------------------------------|----------|
| 10.4.1 | Provide training to allied professionals and community partners on elder victims; rights, services, and resources. | DISB, OAG | ✓ |
| 10.4.2 | Increase awareness of the District's financial exploitation statute, including civil and criminal enforcement of the statute. | OAG, DC TROV | ✓ |
| 10.4.3 | Distribute information regarding services and how to access services in all 8 wards, including non-native English speakers and members of the Deaf community. | DC TROV, OAG, NVRDC, DISB, ElderSafe | ✓ |

PILLAR 3: LIFELONG HEALTH AND SECURITY

FINANCIAL SECURITY

VISION: A city that promotes the financial well-being of DC residents and drives engagement at different life stages.



2018 - 2023 PROGRESS

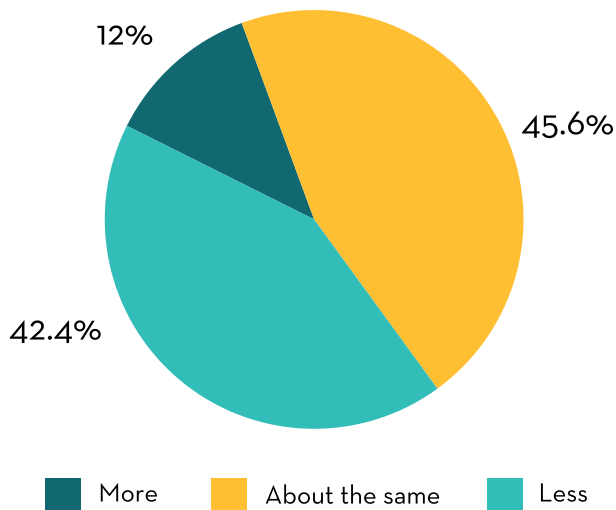
- In 2023, DISB engaged in over 25 events covering topics such as protecting assets, filing consumer complaints, Medicaid and Medicare enrollment, reverse mortgages, real estate settlements, life insurance estate planning, and flood insurance.
- According to census data, DC poverty levels declined from 2021 to 2022 from 16.5% to 13.3%.
- Since the pandemic, there has been a decline in unemployment and an increase in the minimum wage.
- In the past two years, there has been a 6.4% statistically significant decrease in black community poverty in Washington.

Survey Results

Compared to 2018...

How confident do you feel about the amount of money you have saved for the future?

n=344



Over the past year, have you had enough income to meet your basic needs without public or private assistance (e.g. private loan, family financial support)? n=935



Do you feel you have enough savings and income to meet your needs for the rest of your life? n=358



Focus Group Results

Overall, focus group members were concerned about having enough money to grow old in Washington, DC. Group members said that housing prices and cost of living have outpaced salaries in previous decades, pushing people out of the city. Group members recognized that people need to wait longer to retire. Even those that planned ahead with their savings are currently being affected by inflation. Focus group members from special interest groups such as those living with disabilities and those who do not speak English feel especially concerned about their financial situation. Those living with disabilities acknowledged the high price of care and the challenge navigating benefits. Those who do not speak English found it hard to access information about any potential retirement benefits they could access.

Summary

The District has provided several informational events aimed to support residents to be financially literate. Overall, census data shows that residents' financial positions are improving, especially Black residents. However, a third of survey respondents did not feel that they had enough income over the past year, and nearly half felt that they didn't have enough saved for the rest of their lives. Focus group members recognized that increasing housing prices and cost of living were likely main drivers for financial insecurity. The financial security domain was successful in increasing knowledge and awareness of personal finances for adults. Looking ahead, Age-Friendly DC should consider strategies that encourage this education process much earlier in DC residents' lives, including how to navigate the financial strains of inflation, and recognize the special needs of those with with disabilities and those that don't speak English.

“

In DC, it feels as though it's kind of multiple lived experiences where there are very affluent individuals that are not in a place where they are concerned about resources. And then the polar opposite of that is that, seniors that are living in poverty and having challenges with covering rent, housing, food and other essential items. I think that that is a big problem in our community.

”

DOMAIN 11 STRATEGIES

FINANCIAL SECURITY



GOAL 11.1: Identify a study assessing the financial preparedness of DC residents, specifically those over age 50.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---|----------|
| 11.1.1 | Examine the financial preparedness for the future of DC residents. | NCOA, AARP-DC, CFPB | ✓ |
| 11.1.2 | Engage residents 50+ with socially involved supplemental income opportunities such as home sharing, ride sharing, and other part-time employment. | NCOA, Home sharing Compatibility apps (e.g. Silvernest), DOES, Dept. of Labor | ✓ |
| 11.1.3 | Explain how to achieve financial well-being and establish a foundation for individuals and multi-generational knowledge through financial education including managing debt and credit, investing properly, protecting assets, and securing lifetime income sources. | DISB, Investor Protection Trust, NCOA, CFPB | ✓ |

✓ Achieved → Making Progress ▾ Delayed



PILLAR 3: LIFELONG HEALTH AND SECURITY

LIFELONG LEARNING

VISION: A city where residents of all ages have opportunities to fill knowledge gaps, pursue interests and undertake new career directions.



2018 - 2023 PROGRESS

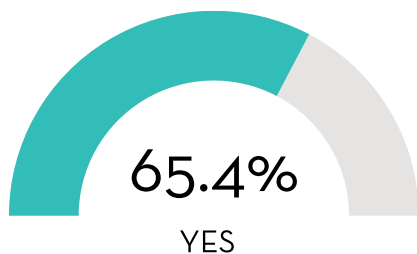
- In 2023, the [Martin Luther King Public Library adult learning computer lab](#) conducted 435 digital literacy classes and workshops.
- There are 70,766 active DC Public Library card holders over the age of 50.
- [DC Futures](#) provides tuition and support for degree-seeking adults, of up to \$8,000 in an annual scholarship at four DC institutions of higher education.
- Most DC universities provide adults 65+ with free or reduced tuition for classes.
- DC supports over 2,000 adult learners through public, charter, and community schools and community-based organizations.

Survey Results

Compared to 2018...

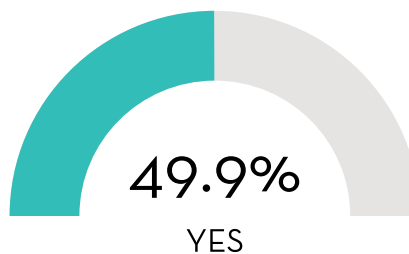
Have you obtained training?

n=344



Over the past year, were you enrolled or did you regularly attend any education or training sessions, either formal or non-formal?

n=933



Why did you obtain training? n=225



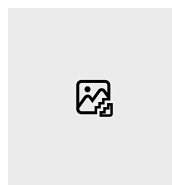
70.2%

Enjoyment/
Personal Growth



33.3%

Work
Requirements



30.6%

Career
Advancement



22.2%

Volunteer
Requirements

Focus Group Results

Focus group members valued lifelong learning and expressed a desire to continue to learn through older adulthood. Groups identified several resources in their community for adults 50 and older to learn new skills. Several members celebrated programs through the Consortium of Universities of the Washington Metropolitan Area, the Smithsonian Museums, DC Public Library, DC Parks and Recreation, and Neighborhood Villages. Technology was prioritized as a necessary skill to learn, and focus group acknowledged that the District had not only supplied various training programs, but also distributed free tablets to support adults with disabilities and/or 60 and over to become more tech-savvy.

Top barriers to lifelong learning identified by the groups include a lack of classes in other languages (including American Sign Language) as well as a lack of baseline understanding and access to technology for classes held virtually. Overall, group members were excited to continue learning and felt supported by classes and training programs in the District.

Summary

The city has provided several opportunities for lifelong learning through DC Public Library, the OSSE, the Consortium of University of the Washington Metropolitan Area, and many more entities. The success of this domain can be seen in the survey results with half of the respondents obtaining training in the past year and almost two thirds of the respondents obtaining training over the past five years. Most respondents pursued training for personal growth and development. Focus group members acknowledged the importance of lifelong learning through older adulthood and recognized services and programs offered in their community. Particularly, focus group members commented on opportunities to learn technology and noted the city's efforts in that area. Overall, this domain has been successful in offering learning opportunities to DC residents. Focus group members want more strategies to increase learning opportunities to those with disabilities, those whose first language is not English, and those who have limited access to transportation.

“ I think education is important from the cradle to the grave so I'm always looking for new things. And I have more time now as a senior to do those things that I always wanted to do. ”

DOMAIN 12 STRATEGIES

LIFELONG LEARNING



GOAL 12.1: Promote the consortium of universities website to compare information about college class offerings for DC residents 50+.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|--|----------|
| 12.1.1 | Promote the Consortium of Universities website to compare information about college class offerings for residents 50+. | Consortium of Universities, Georgetown University | ✓ |
| 12.1.2 | Track the growth of the OSHER Lifelong Learning program, Smithsonian, and other museum education programs for residents 50+. | GW Center for Aging Health & Humanities jointly with AFDC, Iona, AARP, DCPL, DC Villages, OSHER, Smithsonian | ✓ |
| 12.1.3 | Create and distribute materials informing residents about how to enroll in higher learning courses. | OSSE, Adult Charter Schools, DCPL, Consortium of Universities | ✓ |
| 12.1.4 | Promote opportunities to educate and empower residents 50+ with various technologies such as social media, online training, etc. | OSSE, OCTO, DPR, DCPL | ✓ |



GOAL 12.2: Promote awareness of adult literacy education opportunities offered in public schools, charter schools, and community-based organizations.

| | | | |
|--------|--|-------------------------------|---|
| 12.2.1 | Promote awareness of adult literacy education opportunities offered in public schools, charter schools, and community-based organizations. | OSSE, DME, DCPCSB, DCPL, DOES | ✓ |
|--------|--|-------------------------------|---|

✓ Achieved → Making Progress ▽ Delayed

PILLAR 3: LIFELONG HEALTH AND SECURITY

PUBLIC SAFETY

VISION: A city where all residents, including those 50 and over feel safe no matter the time or location.

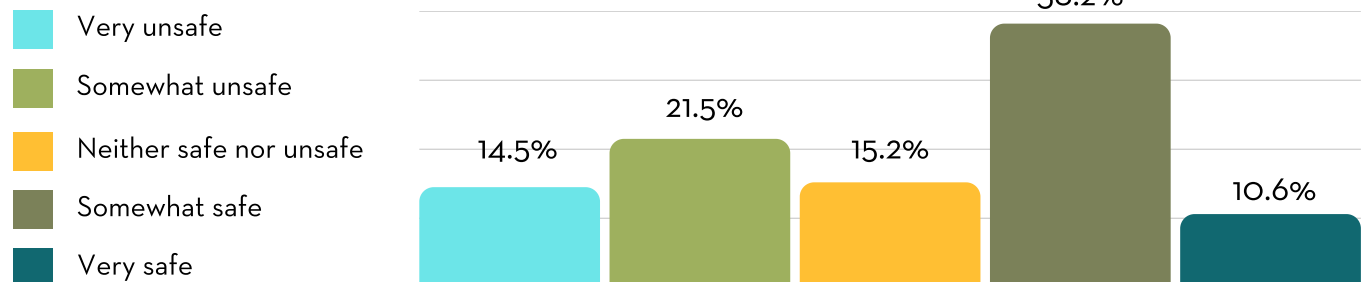


2018 - 2023 PROGRESS

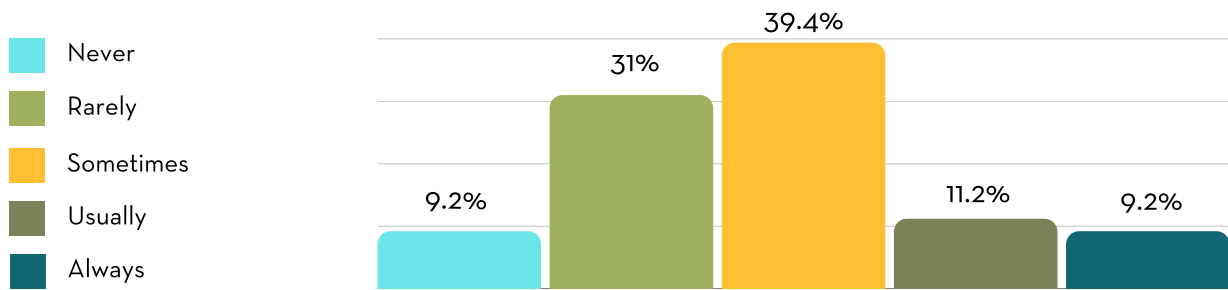
- Robberies in all forms have come down 21% since [The Robbery Suppression Initiative](#) was instituted in July 2023.
- Beginning in late 2017, The [Private Security Camera Incentive Program](#) has encouraged residents to install cameras and register them with the Metropolitan Police Department (MPD) to deter crime and assist with investigations.
 - As of June 2023, 11,405 rebates and vouchers have been issued and 26,466 private security cameras have been funded.
- Over 360 MPD community walks were conducted annually to engage with the community.
- Multiple community organizations such as [the See Forever Foundation](#) and the [East of the River Clergy Police Community Partnership](#) are focused on providing meaningful education and activities for youth and young adults to engage them in a life without criminal activity.
- Annually since 2015, MPD has held three cohorts of the [Community Engagement Academy](#) allows community members to learn firsthand about police operations.
- Since 2018, 146 individuals have completed [MPD Cadet Corps](#) to become officers in the DC communities in which they grew up.

Survey Results

How safe is your neighborhood from crime? n=936

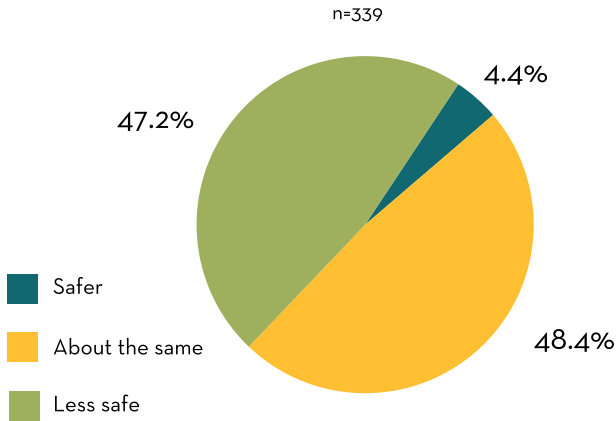


How often does the fear of crime get in the way of your daily life? n=358

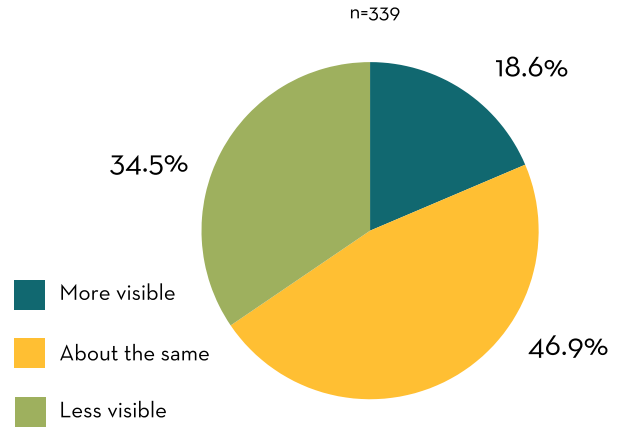


Compared to 2018...

How safe do you feel in your neighborhood? n=339



Police are... n=339



Focus Group Results

Public safety was a major concern for focus group members. Groups recognized that crime has increased and reported that the fear of crime was a barrier to going out. Group members shared instances of theft, gun violence, and assault that had happened in their neighborhoods, and were concerned about crime on public transportation and on the street. They had high regard for police and acknowledged outreach events in their community. However, groups felt more police presence was needed and that police were limited by rules that reduce their effectiveness to respond to more minor crimes.

Group members also noted that many people with behavioral issues on the streets or in their neighborhoods act out in ways that make them feel unsafe. They expressed concern for these people and wanted to see an increase in supportive programs for them. Finally, some group members were aware of programs aimed at increasing public safety. In conversations regarding transportation, Vision Zero was discussed. Some members were aware of the Private Security Camera Rebate Program.

Summary

DC is committed to improving public safety through programs like the Private Security Camera Rebate Program and MPD Community walks. Although crime levels increased through the pandemic, data suggest that policies and programs are working to once again reduce crime levels. However, survey respondents and focus group members still perceive crime to be a major issue. Only half of survey respondents felt their neighborhood was safe, and about 60% said that fear of crime got in the way of their daily life. Additionally, nearly half felt safety had decreased over the past five years. Focus group members expressed similar concerns and discussed examples of crime in their area. They also acknowledged that people with apparent behavioral issues also reduced their feelings of safety. Perceptions of crime is an evident concern for DC residents and the city has worked to reduce crime and address residents' concerns. Efforts should be continued and expanded in the next strategic plan, and more work should be done to support people with behavior health issues.



You're walking down the street and think somebody's going to mug you. It's not safe for younger people but then it's even worse for older people who are not able to defend themselves against criminals.



DOMAIN 13 STRATEGIES PUBLIC SAFETY



GOAL 13.1: Implement community engagement plans to prevent falls and crime.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|---------------------------|----------|
| 13.1.1 | Implement community engagement plans to prevent falls and crime. | DACL, Home Care Partners | ✓ |
| 13.1.2 | Implement the “Safer, Stronger DC” plan to prevent violent crimes. | MPD, ONSE | ✓ |



GOAL 13.2: Increase outreach to older adults about the District’s Vision Zero plan to reduce traffic deaths to zero by 2024.

| | | | |
|--------|---|------|---|
| 13.2.1 | Increase outreach to older adults about the District’s Vision Zero plan to reduce traffic deaths to zero by 2024. | DDOT | ✓ |
|--------|---|------|---|

✓ Achieved → Making Progress ▽ Delayed



PILLAR 3: LIFELONG HEALTH AND SECURITY CAREGIVING

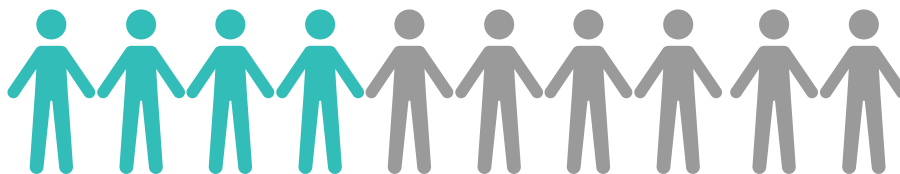
VISION: A city where those who care for others are supported.



2018 - 2023 PROGRESS

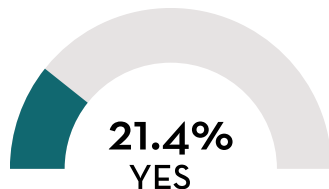
- AARP DC collaborated with several Mayor’s Offices of Community Affairs raised visibility of the contribution of family and professional caregivers reaching over 500+.
- In 2018, a citywide DACL survey found that in-home respite services were the biggest priority for caregivers.
- Online educational resources were offered to all members of the [DC Caregiver Institute](#).
- In 2020, the District of Columbia began administering paid leave benefits for up to 12 weeks to care for a family member with a serious health condition.
- By September 2023, [DC Caregiver Institute](#) participation has grown to a total of 154 clients who received 18,861 hours of in-home respite.
- From 2018 to 2023, [Sibley Memorial Hospital](#) increased care partner support groups by 233%, including those based in historically marginalized neighborhoods.
- Elderly and Persons with Disabilities (EPD) Waiver may apply for the [Services My Way program](#), which enables the qualified residents to hire friends and relatives to provide needed assistance paid for by Medicaid.

Survey Results

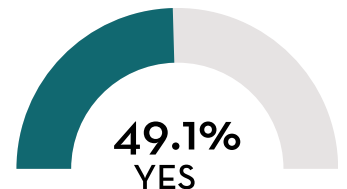


Since 2018, 4 out of 10 (41.8%) have been a caregiver for someone. n=337

Do you have any personal care or assistance needs? n=931



Are your personal care and assistance needs being met? n=57



Did you feel you had enough training to provide appropriate care? n=144



Did you feel you had enough support to provide appropriate care? n=144



Focus Group Results

Focus group members discussed three major themes regarding the caregiving domain: the role of family, challenges with hiring caregivers, and support given by the District. Several members were caregivers or were receiving care from a loved one. These members noted that family members are providing adequate care; however, family members often don't know where to get training, support, or resources. Additionally, family members may be unwilling or unable to provide all the care needed and want to seek additional hired help.

Most focus group members expressed great concern for the current state of paid caregiving, especially relating to affordability, consistency, training, and availability. One participant shared that they had 30 different caregivers in 3 months and another participant was paying \$800 per day for care. Members felt these issues were due to a shortage of those becoming a certified home healthcare provider or staying in the role after receiving training or certification.

Finally, some focus group members were familiar with caregiver resources and support offered in the District. These members recognized Iona Senior Services, Department of Aging and Community Living, and Home Care Partners as helpful resources in the city.

Summary

Progress has been made across the caregiving strategies in identifying caregiver needs and providing resources and services. Survey respondents that have provided care feel they have received enough training and support yet only about half of all survey respondents who had care needs felt these needs were being met. Some family members who provide care or who are seeking care for a loved one recognize that there are resources in DC; however, others were not aware. The Age-Friendly DC caregiving domain was successful for building support for family members who are caregivers. Future strategies should focus on increasing the caregiving workforce and building awareness of current caregiving resources.



Something that should be considered is informing residents of the resources that are available if you are a caretaker—they're out there. Just recently, I was a caretaker. What I have found is that [resources] are out there, but it's hard to find the information.



DOMAIN 14 STRATEGIES

CAREGIVING



GOAL 14.1: Conduct a caregiver needs assessment composed of a survey and focus groups to better understand the needs of unpaid caregivers.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|--|----------|
| 14.1.1 | Conduct a caregiver needs assessment composed of a survey and focus groups to better understand the needs of unpaid caregivers. | DACL, DC Health | ✓ |
| 14.1.2 | Enhance supports and services for unpaid caregivers through the creation of a Caregiving Complex, increasing transportation options and the availability of respite services after hours, including evenings and weekends. | DACL, DC Villages, DDS, WMATA, DPR, DFHV | ▽ |
| 14.1.3 | Explore legislative barriers facing caregivers and proposed methods to enhance them. | DACL | ✓ |
| 14.1.4 | Increase awareness and understanding of Medicaid and non-Medicaid supports for care recipients and caregivers. | DACL, DHCF | ✓ |



GOAL 14.2: Provide greater information to unpaid family caregivers through improved communication and highlighted opportunities for assistance through various local programs.

| STRATEGY | DESCRIPTION | KEY AGENCIES AND PARTNERS | PROGRESS |
|----------|--|--------------------------------|----------|
| 14.2.1 | Educate employees and employers to ensure awareness of the new Family Paid Leave Law and ensure successful implementation. | DOES, DCHR, DACL | ✓ |
| 14.2.2 | Increase outreach on caregiving resources through radio, television, newspapers, and other digital media platforms, to increase the sustainability of unpaid caregiving. | DACL, Sibley Memorial Hospital | ✓ |
| 14.2.3 | Explore the creation of an online training program for family caregivers which will provide resources and showcase availability of programs like the DACL Caregiving complex. | DACL | ✓ |
| 14.2.4 | Promote cost-sharing opportunities by DC government agencies and/or private entities that can benefit family caregivers through financial assistance and partnerships that allow caregivers to remain in the District. | DACL, DMHHS, DHCD | ✓ |

✓ Achieved → Making Progress ▽ Delayed

OVERALL 2018-2023 PROGRESS

Age-Friendly DC is proud of the progress that has been made over the past five years in each of the 14 domains. Several cross-cutting achievements have improved the aging experience for all residents. The

District is becoming more accessible. Buildings are being built under ADA guidelines, parks and recreation centers have structures and programs that allow for equitable participation, and more services and information are being offered in languages other than English. Residents of all ages are now using technology more often. Partially motivated by the pandemic, more residents use technology to connect with others, programs, services, and other resources. Finally, the city has continued to expand the suite of resources and services that assist residents with housing affordability, health, safety, and quality of life.

Overall, Age-Friendly DC has helped to increase communication on aims, goals, and strategies of DC government and community organizations to improve the city where people live, work, and play.



2024-2028 STRATEGY RECOMMENDATIONS

As Age-Friendly DC renews its strategic commitments, it is also important to integrate the learnings from this evaluation into future strategies. The top strategic recommendations from this report include:



Develop home sharing programs to expand affordable housing and increase social connections.

Housing affordability was seen as one of the biggest concerns across all domain areas. Efforts to increase affordable housing can be accelerated by adopting creative home sharing programs. In addition to providing a wider range of affordable housing options, home sharing can also increase safety and social connection in the community.



Prioritize inclusion and equity of special populations across all services.

Although the District has made great strides on accessibility, DC should increase attention on inclusion and equity for those of all races, ethnicities, languages, abilities, and those who identify as LGBTQ+. Special interest groups recognized progress over the past five years but acknowledged that they still felt excluded from some opportunities and services.



Promote the positive attributes of growing older.

Older adults have talents, skills, and a lifetime of experience that are valuable to society. Ageism is still limiting some adults' abilities to share their gifts through employment and volunteerism. Future work should communicate the positive aspects of aging to increase opportunities and social participation.



Recognize the importance of the Life Course approach.

Health, financial security, and quality of life all accumulate over a lifetime with each stage of life influencing the next. While it is important to support older adults with policies and programs that affect them when they are 65+, future Age-Friendly DC strategies should also consider strategies intervening earlier in life.



Consider cross-domain goal setting and collaboration.

The 14 domains of the 2018-2023 Age-Friendly DC strategic plan were chosen as the key areas that directly affect health and quality of life. Working under these domains has improved the lives of all DC residents; however, there is interplay between these areas. Future plans should integrate goals and strategies that incorporate several domain areas.

There are plenty of DC residents and leaders who contributed caring and sharing to achieve the progress described in this report.

Thank you and appreciation to:

- Mayor Muriel Bowser for recognizing the importance of advocating for Age-Friendly DC even before she was Mayor.
- the World Health Organization and AARP for preserving a network of Age-Friendly jurisdictions from which we can learn and share.
- Task Force members, who helped to shape and implement the plan. Special thanks to our co-chairs Wayne Turnage, Deputy Mayor for Health and Human Services, and James Appleby, CEO of The Gerontological Society of America.

Thank you for your support in our efforts to make DC a vibrant city in which to grow older.



Want to know how you can make a difference in the next five years?

Contact:

Gail Kohn, Age-Friendly DC Coordinator
gail.kohn@dc.gov | 202-241-4149

1350 Pennsylvania Ave, NW, Suite 223
Washington, DC 20004

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

DC AGENCY PARTNERS

| ACRYONYM/NICKNAME | DC AGENCY & LINK | STRATEGIES |
|--|--|--|
| ADRC | Aging and Disability Resource Center | 8.2.3, 8.3.1 |
| AFDC | Age-Friendly DC Task Force | 3.1.6, 5.1.2, 6.1.2, 6.1.3 |
| BAC | Bicycle Advisory Council | 2.1.3 |
| DACL | Department of Aging and Community Living | 1.1.2, 2.1.3, 2.1.6, 2.1.7, 2.1.8, 2.2.1, 2.2.2, 3.1.4.1, 4.1.2, 4.1.3, 5.1.1, 5.1.3, 8.1.1, 8.2.1, 8.2.3, 8.3.1, 8.3.2, 8.3.3, 8.4.2, 8.4.3, 9.1.1, 9.2.2, 10.1.4 |
| DACL - APS | Department of Aging and Community Living - Adult Protective Services | 3.1.2, 3.1.3, 8.2.1, 10.1.1, 10.2.1, 10.2.2, 10.3.1, 10.3.2.2, 13.1.1, 14.1.1, 14.1.2, 14.1.3, 14.1.4, 14.2.1, 14.2.2, 14.2.3, 14.2.4 |
| DBH | Department of Behavioral Health | 3.1.1, 5.1.3, 8.4.1, 8.4.2, 8.4.3 |
| DC Advisory Board on Veterans Affairs | DC Advisory Board on Veterans Affairs | 5.1.2 |
| DC Advisory Committee on LGBTQ Affairs | DC Advisory Committee on LGBTQ Affairs | 5.1.2 |
| DC Commission on Human Rights | DC Commission on Human Rights | 5.1.2 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | DC AGENCY & LINK | STRATEGIES |
|---|---|--|
| DC Commission on People with Disabilities | DC Commission on People with Disabilities | 5.1.2 |
| DC Commission on Aging | DC Commission on Aging | 5.1.2 |
| DCCA | DC Commission on Arts and Humanities | 1.2.1 |
| DCFEMS | DC Fire and Emergency Services | 8.2.1, 8.2.2, 8.4.1 |
| DC Food Policy Council | DC Food Policy Council | 8.3.3 |
| DCHR | DC Department of Human Resources | 14.2.1 |
| DC Health | DC Health | 1.1.1, 8.2.1, 8.2.2, 8.3.1, 8.3.2, 8.3.3, 8.4.1, 8.4.2, 8.4.3, 14.1.1 |
| DCPL | DC Public Library | 12.2.2, 12.1.3, 12.1.4, 12.2.1 |
| DCRA | DC Consumer and Regulatory Affairs | 3.2.4 |
| DDOT | DC Department of Transportation | 1.2.1, 2.1.1, 2.1.2, 2.1.3, 2.1.4, 2.1.5, 2.1.6, 2.1.7, 2.1.8, 2.2.1, 2.2.2, 2.2.3, 13.2.1 |
| DCOZ | DC Office of Zoning | 3.1.7 |
| DCPCSB | DC Public Charter School Board | 12.2.1 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | DC AGENCY & LINK | STRATEGIES |
|-------------------|--|--|
| DDS | Department of Disability Services | 5.1.1, 5.1.3, 9.1.1, 14.1.2 |
| DFHV | Department of For-Hire Vehicles | 2.1.6, 2.2.2, 14.1.2 |
| DGS | Department of General Services | 1.2.3, 3.2.4 |
| DHCD | Department of Housing and Community Development | 3.1.1, 3.1.3, 3.1.5, 3.1.7, 3.2.1, 3.2.2, 3.2.3, 3.2.4, 5.1.3, 14.1.4 |
| DHCF | Department of Health Care Finance | 3.1.4.1, 5.1.3, 8.1.2, 8.2.2 |
| DHS | Department of Human Services | 3.1.1, 5.1.3, 8.3.1, 8.4.1 |
| DME | Deputy Mayor for Education | 12.2.1 |
| DMHHS | Deputy Mayor for Health and Human Services | 14.2.4 |
| DMPED | Deputy Mayor for Planning and Economic Development | 3.1.5 |
| DOEE | Department of Energy and Environment | 3.2.1, 9.1.1 |
| DOES | Department of Employment Services | 5.1.3, 11.1.3, 6.1.1 6.1.3, 6.2.1, 14.2.1 |
| DPR | Department of Parks and Recreation | 1.1.1, 1.1.2, 1.2.2, 1.2.3, 2.1.3, 2.1.7, 2.2.1, 4.1.2, 4.1.5, 8.3.2, 12.1.4, 14.1.2 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | DC AGENCY & LINK | STRATEGIES |
|----------------------------|---|----------------------------|
| DSLBD | Department for Small and Local Business Development | 6.1.3 |
| HSEMA | Homeland Security and Emergency Medical Administration | 9.1.1, 9.2.1 |
| Mayor's Interfaith Council | Mayor's Interfaith Council | 5.1.2 |
| MOCA | Mayor's Office of Community Affairs | 4.1.2, 4.2.1, 9.1.1, 9.2.1 |
| MOAA | Mayor's Office on African Affairs | 3.2.2, 3.2.3, 5.1.2 |
| MOCCA | Mayor's Office of Caribbean Community Affairs | 5.1.2 |
| MOLA | Mayor's Office of Latino Affairs | 3.2.2, 3.2.3, 5.1.2 |
| MOLGBT | Mayor's Office of Lesbian, Gay, Bisexual, Transgender Affairs | 3.2.2, 3.2.3, 5.1.2 |
| MOAPIA | Mayor's Office of Asian and Pacific Islander Affairs | 3.2.2, 3.2.3, 5.1.2 |
| MORCA | Mayor's Office of Returning Citizens Affairs | 5.1.2 |
| MOTA | Mayor's Office of Tenant Advocate | 3.2.3., 6.2.1 |
| MOWPI | Mayor's Office on Women's Policy and Initiatives | 5.1.2 |
| MPD | Metropolitan Police Department | 2.1.2, 13.1.2 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | DC AGENCY & LINK | STRATEGIES |
|-------------------|---|--|
| MPD - Pathways | Metropolitan Police Department - Pathways Program | 13.1.2 |
| OAG | Office of the Attorney General | 10.1.1, 10.1.4, 10.2.2, 10.3.1, 10.3.2.1, 10.3.2.2, 10.4.1, 10.4.2, 10.4.3 |
| OCTO | Office of the Chief Technology Officer | 4.1.2, 9.1.1, 12.1.4 |
| ODR | Office of Disability Rights | 1.2.2, 1.2.3, 2.1.6, 3.2.4, 3.2.2, 3.2.3, 5.1.1, 5.1.3, 9.1.1 |
| OHR | Office of Human Rights | 3.2.4 |
| ONSE | Office of Neighborhood Safety and Engagement | 13.1.2 |
| OP | DC Office of Planning | 3.1.3, 1.2.1, 8.3.1, 9.1.1 |
| OSSE | Office of the State Superintendent of Education | 12.1.3, 12.1.4, 12.2.1, 6.1.1, 8.3.1 |
| OUC | Office of Unified Communication | 9.1.1 |
| PAC | Pedestrian Advisory Council | 2.1.2 |
| ServeDC | Mayor's Office on Volunteerism and Partnerships | 4.2.1, 9.2.1 |
| Sustainable DC | Sustainable DC - Department of Energy and Environment | 8.3.1 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

COMMUNITY ORGANIZATION PARTNERS

| ACRYONYM/NICKNAME | ORGANIZATION NAME & LINK | STRATEGIES |
|----------------------|--|---|
| AARP-DC | AARP-DC | 5.1.2, 6.1.2, 6.1.3, 8.1.1, 8.2.1, 8.2.3, 8.3.1 |
| CFPB | Consumer Financial Protection Bureau | 11.1.1, 11.1.4 |
| DC Greens | DC Greens | 8.3.1, 8.3.3 |
| DCHA | DC Housing Authority | 3.2.3, 5.1.3, 6.1.1, 8.2.2 |
| DC Hunger Solutions | DC Hunger Solutions | 8.3.3 |
| DC TROV | The District's Collaborative Training & Response for Older Victims | 10.1.1, 10.1.2, 10.1.3, 10.1.4, 10.4.2, 10.4.3 |
| DC Villages | DC Villages | 2.2.2, 4.1.1, 4.2.2, 8.2.3, 8.3.2, 9.2.1, 12.1.2, 14.1.2 |
| DCPCA | District of Columbia Primary Care Association | 8.2.1, 8.2.2, 8.3.3, 9.2.2 |
| DCSAC | DC Senior Advisory Coalition | 8.3.3 |
| Food & Friends | Food & Friends | 8.3.2 |
| FrameWorks Institute | FrameWorks Institute | 5.1.2 |
| Generation Hope | Generation Hope | 3.1.6 |
| GU | Georgetown University | 12.1.1 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | ORGANIZATION NAME & LINK | STRATEGIES |
|--|--|---------------------------------------|
| GW CAHH | George Washington University - Center for Aging, Health and Humanities | 4.1.4, 12.1.2 |
| HelpAge | HelpAge | 8.1.1, 8.4.1, 13.1.1 |
| Home Care Partners | Home Care Partners | 8.1.1, 8.4.1, 13.1.1 |
| Home Sharing Compatibility Apps - Silvernest | Silvernest | 3.1.6, 11.1.3, 14.1.2 |
| Iona | Iona Senior Services | 4.1.2, 4.1.3, 8.1.1, 8.2.3, 12.1.2 |
| IFCMW | Interfaith Council of Metropolitan Washington | 8.3.1 |
| Leading Age | Leading Age | 5.1.2, 6.1.1 |
| Lime | Lime | 2.1.3 |
| NAC | National Alliance for Caregiving | 5.1.2, 11.1.1, 11.1.2, 11.1.3, 11.1.4 |
| NAR | National Association of Realtors | 3.2.2 |
| NCOA | National Council on Aging | 5.1.2, 11.1.1, 11.1.2, 11.1.3 |
| NCPC | National Crime Prevention Council | 2.1.7 |
| OSHER | OSHER LifeLong Learning Institute | 12.1.2 |
| Pennsylvania Avenue Baptist Church | Pennsylvania Avenue Baptist Church | 8.1.2 |
| Seabury | Seabury Resources for Aging | 4.1.1 |

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

| ACRYONYM/NICKNAME | ORGANIZATION NAME & LINK | STRATEGIES |
|--------------------------|--|------------------------------------|
| Sibley Memorial Hospital | Sibley Memorial Hospital | 14.2.2 |
| Smithsonian Institutions | Smithsonian Institutions | 4.1.4, 12.1.2 |
| SOME | So Others Might Eat | 8.3.2 |
| WABA | Washington Area Bicyclist Association | 2.1.2, 2.1.3, 2.2.3 |
| WMATA | Washington Metropolitan Transportation Authority | 2.1.5, 2.1.6, 2.2.1, 3.1.5, 14.1.2 |



Age-Friendly DC

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<http://mayor.dc.gov> | <http://dmhhs.dc.gov>
<http://agefriendly.dc.gov>