

Implications

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Designing Age-Friendly Communities

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The world's population is getting older. In 2006, the proportion of people 60 years and older was 11%; by 2050 that proportion will double (WHO, 2007a). Providing housing that meets the need of the growing number of elders is a challenge in the United States and around the world. The number of residential developments in the United States devoted to housing the elderly that are being built today—even in the current depressed housing market, is striking. These developments are frequently located at the edge of cities on sites that fail to incorporate walkable areas linked to neighborhood services such as grocery stores, pharmacies, post offices, or public libraries. While the developments are often aesthetically pleasing and the interiors fulfill accessibility and universal design needs, the livability of such developments leaves much to be desired.

Everyone deserves the right to live as independently as possible to be a participating and contributing citizen of the world. Yet for many elders, the physical environment of their homes, neighborhoods, and cities inhibit their ability to continue living actively—volunteering, passing

on their knowledge and experience, and participating in the lives of their families and neighbors.

The World Health Organization (WHO) has initiated guidelines for Global Age-Friendly Cities as one strategy to recognize communities that provide a multifaceted approach to facilitating the best quality of life possible for all elderly residents. The WHO guidelines outline strategies for developing more age-friendly cities as they relate to eight different aspects of civic life (WHO, 2007a):

- **Outdoor spaces and buildings** (e.g., ample public areas and green spaces that are pleasant, well-maintained, and safe)
- **Transportation** (e.g., sufficient, affordable public transportation options)
- **Housing** (e.g., safe and accommodating housing located close to services)
- **Social participation** (e.g., affordable activities that are diverse and well-publicized)
- **Respect and social inclusion** (e.g., recognition of elders for past and present contributions to the community)
- **Civic participation and employment** (e.g., post-retirement training for elders)
- **Communication and information** (e.g., printed information using large text and familiar language)

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Related Research Summaries



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- **Community support and health services** (e.g., conveniently located, easily-accessible health and social services)

In this issue of *Implications* we compare the way in which two metropolitan areas have taken on the WHO challenges of creating age-friendly cities.

Livable Communities Act, Minnesota's Twin Cities Metropolitan Area

The state of Minnesota enacted the Livable Communities Act (LCA) in 1995. This legislation provided three specific voluntary, grant-based programs, funded by tax levies. The programs were open to local governments, private developers, and housing agencies within the 7-county Twin Cities (i.e., Minneapolis and St. Paul) metropolitan area and were administered by the Metropolitan Council, a regional governing body serving the area. The three programs included:

- The Livable Communities Demonstration Account (LCDA) promoting transit and pedestrian oriented neighborhoods;
- The Local Housing Initiatives Account (LHIA) promoting affordable housing; and
- The Tax Base Revitalization Account (TBRA) promoting clean-up and redevelopment of polluted land.

While the three programs of the LCA address a much broader set of issues, they do support a number of objectives within the WHO Age-Friendly Cities initiatives. The LCA's report for the Minnesota State Legislature includes the number of affordable and life cycle housing units created or preserved by the LCA, the dollar amounts of the grants given in the three programs and for what projects they were used, a cost/benefit analysis of the programs, and recommendations for further policy change (Metropolitan Council, 2009).

From 1995 to 2008, the LCDA provided funding for 162 grants in 50 communities totaling \$87.4 million. Grants awarded ranged between \$100,000 and \$600,000 per



Figure 1: Site One; Public senior housing located in an established area of St. Paul, MN that did not receive funding from the Livable Communities Act's (LCA) grant-based programs.

project. The LHIA provided 119 grants totaling \$19.9 million to 57 communities with most grants ranging from \$100,000 to \$300,000. The TBRA provided grants in 36 communities for a total of 263 projects totaling \$77.5 million (Metropolitan Council, 2009).

Unfortunately, the LCA reports do not provide a measurement tool to show progress over time or what goals are being met for whom. Indeed there are no specific goals or benchmarks mentioned. The success of the programs to achieve more livable communities must be inferred through the lists of quantities of affordable and life cycle housing units, the number of new or retained jobs, acres of land cleaned of pollution, and total dollars distributed.

Although Age-Friendly City criteria are not explicit goals of the LCA policy, many of the objectives of Age-Friendly Cities are being met. On-site analysis of three housing developments illustrates the impact of the LCA for providing a more age-friendly city environment. Site One (Figure 1) was a public, senior housing building located in an established area of St. Paul, Minnesota. This development had never been an applicant for or a recipient of any LCA grant awards. Site Two (Figure 2), public senior housing also located in the city of

St. Paul received two LCDA grants (1999 and 2001) totaling \$1,610,000. Site Three (not pictured), senior housing located in a suburban community, received two LCDA grants (1999 and 2001) totaling \$4,112,317 and one LHIA grant (2001) of \$100,000 (Metropolitan Council, 2009).

Specific Outcomes

For all three sites, walkability was enhanced by the inclusion of sidewalks. However, the funded sites had wider sidewalks making a substantial difference during the winter when snow removal was essential. The observations at Site One found that snow left on the narrower curb cuts made the sidewalk impassible for persons using wheelchairs and dangerous for all, limiting their use. At this site a person in a wheelchair was witnessed unsuccessfully trying to access the sidewalk because of the snow, and subsequently, resorted to traveling in the busy street.

Curb cuts at the funded sites had more features than the non-funded site. Facilitating the safety of curbcuts at funded sites were features such as color and material contrast, broad apron cuts, grooves, and bumps. At Site Three, pedestrian safety was further



Figure 2: Site Two; Public senior housing located in St. Paul, MN that received two grants totalling \$1,610,000 as part of the Livable Communities Act (LCA).

enhanced by prominent pedestrian crossing signs in addition to traffic/pedestrian signals. All three sites had at least one busy street; none of them had traffic calming devices. Visual access was improved on the busiest streets because the lack of on-street parking and buffer zones exposed pedestrians, making it easier for drivers to see pedestrians and pedestrians to observe traffic.

Availability of services was limited for all three sites. Critical services such as grocery stores or pharmacies were missing. Vacant commercial units on the ground level were present at all three sites. With few exceptions, there were few benches or places for people to sit outdoors. There were no awnings or other protection from sun, rain, or snow. There were no public restrooms.

Conclusions and Cautions

The on-site observations indicated that sites funded by LCA have successfully achieved many of the features of an age-friendly city in regards to walkability. However, there are still features that have not been incorporated related to outdoor spaces and other aspects of WHO's Age-Friendly Cities guidelines.

As a voluntary program, the effects of the LCA may not be as far reaching as a mandatory program. At the same time, there is substantial interest in the programs. Between 1996 and 2001, demand for grant money exceeded available grant allocations by \$75,000,000, leaving 130 applicants without funding or with limited-to-partial funding. Unfortunately, the LCA's dependence on tax revenue to provide these grants leaves the policy susceptible to economic conditions. For example, given the current economic downturn, the LHIA and TBRA grants were eliminated from the Spring 2009 funding cycle. However, in terms of raising awareness about the features to be incorporated into a city to support aging-in-place and a livable city approach, these programs were most beneficial.

Livable Region Strategic Plan: Vancouver Metropolitan Area, British Columbia

The Livable Region Strategic Plan (LRSP) of the Greater Vancouver Regional District was adopted in 1996. The LRSP is a mandatory growth strategy for the 21 municipalities and one electoral district in the Greater Vancouver Regional District. The goal of the plan is to “help maintain regional livability and protect the environment in the face of anticipated growth.” The plan has four specific directives: protect the Green Zone, build complete communities, achieve a compact metropolitan region, and increase transportation choice. Each local government unit must have a “Regional Context Statement” in their Official Community Plan that is approved by the Greater Vancouver Regional District stating what they will do to meet the LRSP goals. An annual report is produced by the District that measures the success of 29 indicators for the four specific programs. Long-term trends are reviewed every five years (GVRD, 1996).

As a growth strategy, the LRSP (like the LCA) addresses a wide range of issues going beyond age-friendly cities. However, the strategic plan does include specific objectives that support age-friendly cities including equitable distribution of public and social services and facilities; mixed-use urban centers linked with public transportation; reduced travel distances; and a diversity of housing types, tenures, and costs in each part of the region. The transportation part of the plan focuses on providing ample public transportation and retrofitting local streets and infrastructure to favor transit, bicycle, and pedestrian uses. As a mandatory regional growth plan, the LRSP offers a greater guarantee that its goals will be met.

Specific Outcomes

Age-friendly cities must have easy access from dwellings to services (e.g., health, recreational, and consumer services) and there must be a variety of dwelling types so that a variety of lifestyles can be accommodated without segregating neighborhoods from one another.

According to the GVRD annual report (GVRD, 2005), the diversity of dwelling types increased between 1991 and 2001 with an increase of apartment dwellings from 34.9% to 37% and an increase in the proportion of ground-oriented dwelling within the Metropolitan Core and Regional Town Centers from 13.6% to 15.1%. Between 2003 and 2005, the total number of trips taken on public transit increased at a rate that surpassed the population growth. Transit service also increased by 560,000 hours.

Conclusions and Cautions

While the data provided indicates the potential for increased opportunities for using public transportation, public transit access from residences and services would need to be analyzed to determine if public transit specifically benefited the elderly, among others.



Figure 3: Public senior housing located in Vancouver, British Columbia where the Livable Region Strategic Plan (LRSP) is a mandatory growth strategy.

The LRSP's holistic approach to creating an age-friendly city suggests that there are more options for the elderly regarding where to live, including better public transportation and an emphasis on walkability within neighborhoods. However, to further understand the effectiveness of the LRSP objectives, site specific analysis is needed.

Bottom Line for Designers

Both the Livable Communities Act (LCA) of the Twin Cities Metropolitan Area and the Livable Region Strategic Plan (LRSP) of the Greater Vancouver Regional District have been able to bring features of age-friendly cities to their communities. While the two policies appear to address the fundamental features of WHO's Age-Friendly Cities with regard to outdoor spaces, buildings, transportation, and housing, questions remain regarding the implementation of social aspects for Age-Friendly Cities such as social and civic participation, employment, communications, and information— as well as access to community and health services (WHO, 2007b). Furthermore, given the broad scope of the policies' goals, which do not specifically address the needs of older residents, there is a degree of happenstance involved in achieving age-friendly outcomes.

For architects, planners, interior designers, and others involved in creating and redeveloping a city's built environment, policies such as those discussed here are essential components in successful designs. Considering one's design within the context of the broader neighborhood and community provides for greater user satisfaction. As our population continues to become increasingly dominated by elders, designers need to respond to specific, increasingly popular desires to age-in-place within supportive dwellings, neighborhoods, and cities. Incorporating age-friendly design components can enhance the users' experience for all occupants, visitors, and others in our designed spaces.

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Additional Resources

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- www.agefriendlycommunities.org
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About the Authors

Ann Ziebarth, PhD, is an associate professor at the University of Minnesota. She teaches in the Housing Studies Program in the College of Design and conducts research on how housing policy impacts communities. Much of her research focuses on small town and rural areas.



analyzing the livability of high-rise buildings in St. Paul, MN; Hong Kong, China; Vancouver, Canada; and JeJu, Korea.

Related Research Summaries

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Heidi Erm is an undergraduate housing studies major at the University of Minnesota who was awarded an Undergraduate Research Opportunity Program (UROP) grant to study age-friendly city criteria in the 7-county metropolitan area in the Twin Cities, Minnesota, USA and the Great Vancouver Regional District, British Columbia, Canada.

“Why Older People Move or Wish to Move”
—*Housing, Theory and Society*

“Neighborhood Design Directly Influences Physical Activity”
—*American Journal of Health Promotion*

“Retirement Community Path Features that Support Walking”
—*Environment and Behavior*

“Neighborhood Design Impacts Health”
—*Journal of the American Planning Association*

“Difficulties of Aging-in-Place for the Elderly”
—*Family and Consumer Sciences Research Journal*

“Housing Design Influences Ability to Age in Place”
—*Housing and Society*

Eunju Hwang, PhD, is an adjunct professor in gerontology and Research Fellow at Simon Fraser University, Vancouver, Canada. Her research includes international comparisons of livable communities in North American and East Asia



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Caren Martin, University of Minnesota (page 1)
Eunju Hwang (page 4)
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