

**Age Friendly Plan
For A Livable Community
Alexandria, Virginia
2019-2021**



**Prepared by the
Alexandria Commission on Aging
June 2018**



City of Alexandria, Virginia
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Letter from the Mayor

Alexandria has so much to offer residents of any age, from the very young to centenarians. Its attractions abound, with lovely parks, its historic character, interesting and diverse neighborhoods, its walkable streets and many recreation facilities, an array of arts and cultural institutions, notable restaurants and retail establishments, many faith communities – and its proximity to the metropolitan Washington area.

Alexandria is a city of kindness and compassion, promoting policies that accord respect to all of our residents. In a Statement on Inclusiveness passed unanimously in November 2016, the City Council committed to fostering “an atmosphere of inclusiveness that respects the dignity and worth of every person.” In a city where 27 percent of residents were born outside the United States, and many minorities reside, it is imperative that Alexandria promotes a humane and egalitarian approach to community life.

Alexandria is also a generous City, with a range of health and community services and many programs provided to lower-income Alexandrians. And one of its great strengths is the activism of its residents. While Alexandrians love their City, they are not quiet about ways to improve it. Citizens have the opportunity to speak out in a variety of ways, including by participating in a myriad of city boards and commissions.

When the City’s Commission on Aging contacted me to request that I support an application to join the AARP/WHO Network of Age-Friendly Communities, I was immediately supportive. With the expected growth in the city’s aging population and the promise of their increased longevity, it was evident that the city had to integrate the needs of older residents into its community planning. The Commission made a commitment to develop an age-friendly plan within the two years required by AARP/WHO.

I am very proud to present to you the plan that the City Council approved unanimously. While it includes, for example, the goals of increased affordable assisted living, improved safety for our streets and sidewalks, and enhanced mental health care, it is also important that the Commission has emphasized outreach to our immigrant and minority populations. The Commission has

“The Hometown of George Washington”

identified innovative ways to reach these communities to inform them of the services available and to involve them more fully in the life of the city.

The Commission has forged very positive relationships with city staff and has worked closely with all relevant departments to ensure collaboration and integration with City master plans. It has assessed carefully the needs of older residents and sought the advice and engagement of a broad range of stakeholders. Very importantly, the plan will benefit all residents by enhancing in important ways the livability of the city.

We are very pleased to have been the first community in Virginia to be accepted into the Network of Age-Friendly Communities. I look forward to continuing to work with AARP and WHO and am grateful for the support provided to the City through the Network's many resources.

Sincerely,

A handwritten signature in blue ink that reads "Allison Silberberg". The signature is written in a cursive, flowing style.

Mayor Allison Silberberg
Alexandria, Virginia

The Commission on Aging would like to thank the following individuals for their time, expertise and dedication to making this report possible:

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Executive Summary

In June 2017, the City of Alexandria applied to and was accepted in the AARP/World Health Organization/AARP Network of Age-Friendly Communities. Alexandria was the first community in Virginia to be accepted in the Network, and the City thereby gained access to a national forum for the exchange of information and an abundance of ideas and programs. Alexandria then had two years to develop an Age-Friendly Plan. In 2012, the City had adopted a "Strategic Plan on Aging, 2013 – 2017, The Alexandria of Our Future: A Livable Community for All Ages". This Age-Friendly Plan is an excellent continuation of the work to advance Alexandria's accommodation of the needs of its older residents.

Planning for older residents encompasses the need of the entire community. What is good for older adults also benefits the young and everyone in between. Although its attention is directed to aging, the Age-Friendly Plan focuses on a livable community for all ages. The plan highlights activities in the following domains of livability: (1) social participation and respect and social inclusion; (2) housing; (3) transportation; (4) communications; (5) health and community services; and (6) civic participation and employment.

Over the past two years, the Commission on Aging conducted a variety of activities as part of developing the plan. Committees of the Commission worked over a two-year period to assess the needs of older adults and adults with disabilities. The Commission and Senior Services of Alexandria conducted many listening sessions with members of the public, older adults who participate in various programs, and Department of Community and Human Services staff who serve older adults and adults with disabilities. Virginia AARP conducted a 500-person phone survey of Alexandrians age 50-plus focusing on the domains of livability. In November 2017, the Commission on Aging secured the assistance of AARP Virginia and Just Partners, Inc. to host a day-long workshop to elicit participants' assessment of needs and priorities in housing, transportation, health and civic engagement. The workshop participants included representatives of service providers, non-profit organizations, transportation officials, residential facilities, members of faith communities, local government staff. These data gathering efforts informed the selection of goals and objectives identified in the Plan. Focusing on the Social Determinants of Health serves as an underlying perspective for this plan. The Centers for Disease Control (CDC) explains these Social Determinants of health as the life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education and health care that determine length

and quality of life. According to the CDC, the social determinants of health account for over 50 percent of an individual's health status.

Based on the various needs assessments, the Commission selected several goals and objectives within each of the six domains of livability. They are as follows:

Social Participation and Respect and Social Inclusion

Goal: People of diverse culture, race, color, nationality, gender, age, sexual orientation, gender identity, and persons with disabilities in Alexandria have information about and access to the range of services available in the City and are engaged in civic life.

Objective: Minority communities have increased knowledge about and access to City services and are involved to a greater extent in civic life.

Goal: Create inclusive services for LGBTQ Older Adults.

Objective: One lead agency is recruited and provides cultural competency training for other agencies providing services to Alexandria's older adults.

Housing

Goal: Determine prospective benefits and challenges regarding Accessory Dwelling Units (ADUs).

Objective: The City and community stakeholders study the feasibility of adding accessory dwelling units to existing housing as an option to increase the stock of affordable and accessible housing in the City, and complete a report for submission to City Council.

Goal: Develop public and private mechanisms to enhance availability of affordable assisted living in Alexandria.

Objective: Develop consistent developer contribution and concept plan.

Goal: Work with key organizations and individuals to incorporate "housing for a lifetime" features in both new and redeveloped housing.

Objective: Establish guidelines for the inclusion of accessibility features in new affordable multi-family development that receives City funding support.

Goal: Prevent the unnecessary and/or unwanted institutionalization of those who could and would prefer to remain in their homes for as long as possible.

Objective: Residents of Naturally Occurring Retirement Communities (NORCs) and others have increased awareness of available programs and services supportive of older adults and adults with disabilities.

Transportation

Goal: Assist the City to attain its Vision Zero goal of eliminating all traffic deaths and serious injuries by 2028 through attainment of interim year benchmarks.

Objective: Apply the Complete Streets Design Guidelines to roadway projects through FY21 in locations where safety issues for vulnerable populations have been identified.

Goal: Those who walk, drive, and ride a bicycle in Alexandria can do so safely.

Objective: Nine walkability audits and review of Safe Routes to School audits are completed and reports sent to the Complete Streets Team.

Goal: DASH and WMATA provide safe, reliable, and frequent transit service for people who live, work, and play in Alexandria.

Objective: Participate in the development of the Alexandria Transit Vision Plan – a study being undertaken to improve the City’s current transit network and better serve future travel needs.

Communications

Goal: Communication about programs and services available to older Alexandrians and adults with disabilities is readily accessible to all in a variety of formats and languages and is presented in many and diverse venues.

Objective: Increase outreach through various media and educational events on programs and services available to older adults and adults with disabilities in Alexandria, with a focus on minority communities.

Goal: The Senior Ambassador Program is implemented in communities throughout the City.

Objective: Increase the number of ambassadors from 35 to 60 by 2021.

Health and Community Services

Goal: Older Alexandrians, and adults with disabilities, including those in minority communities, understand the health and community services available to them.

Objective: Use of information about programs and services for older adults and adults with disabilities is increased.

Goal: Alexandrians with dementia and their caregivers are accorded respect and comfort and are integrated into City life.

Objective: Alexandria has taken significant steps to become a dementia-friendly city and to ease the burdens on those with dementia and their caregivers

Goal: Alexandria's older adults and adults with disabilities know how to prepare for an emergency.

Objective: Increase outreach about emergency preparedness through media channels and other communications vehicles.

Goal: Enhance the availability of mental health case management services for older adults.

Objective: Increase the number of specialized case managers for older adults with serious mental illness and co-occurring medical diagnosis from one to two.

Goal: Enhance the availability of mental health therapy and emergency assessments, including capacity assessments, for older adults.

Objective: Increase the availability of therapists with specialized geriatric experience and increase the Division's ability to provide capacity assessments for older adults.

Civic Participation and Employment

Goal: Encourage volunteerism and recruit volunteers to support programs for older adults.

Objective: Highlight volunteer opportunities each month, identify needs for additional volunteers serving older adults, and fill gaps.

Goal: Older job seekers in Alexandria have dedicated support.

Objective: The Workforce Development Center is assigned a full-time employee to support employment and training opportunities for older job seekers.

Background: The City of Alexandria, Virginia

Alexandria is a medium size city located in the midst of a major metropolitan area with multiple jurisdictions and nearly six million residents. The City is located across the Potomac River from Washington, D.C. and the State of Maryland, and is a member of the Metropolitan Washington Council of Governments (COG), an independent nonprofit association where area leaders address issues of regional significance such as transportation, planning, housing, environment, public safety and health. Although Alexandria has a land area of only 15.75 square miles, with nearly 150,000 residents, it is one of the most densely populated areas in the country. Alexandria's proximity to the seat of the federal government has a direct impact on the socio-economic fabric of the City.

Located in the Commonwealth of Virginia, Alexandria (and its neighboring Northern Virginia jurisdictions) is politically apart from much of the rest of the State. In the most recent national and statewide elections, Alexandria and Arlington voted over 70% Democratic, which is in stark contrast to much of the rest of the State. The three major population regions of Northern Virginia and the areas around Richmond and Tidewater do not reflect the balance of power in the state legislature, which is very conservative. The State's General Assembly is still controlled by conservative representatives, with Republicans controlling both the House of Delegates and the Senate by one-vote margins. However, this may be changing with the General Assembly more closely divided in 2018 than it has been since 2000.

This distinction is important because it directly relates to what Alexandria can do and control. Virginia is a "Dillon Rule" state. The Dillon Rule is a legal principle in which local governments have limited authority and can pass ordinances only in areas for which the General Assembly has granted clear authority. The Dillon Rule figures prominently in limiting what Alexandria can do on affordable housing, landlord-tenant rules, and many other areas where the General Assembly has chosen to restrict the rights of local governments. It can be a challenge for local Virginia jurisdictions to respond to the needs of their communities and stay within the requirements of the Dillon Rule.
<http://virginiaplaces.org/government/dillon.html>

While the Dillon Rule imposes significant limitations, City government tends to be progressive, as is clear in the City's Strategic Plan and its Housing Master Plan. The City's Strategic Plan, in the section called Inclusive City, calls for a reduction "in the percentage of low- and moderate-income households considered to be housing cost-burdened." It also articulates the objective of increasing "the percentage of residents who do not perceive barriers to living in Alexandria based on age, gender, race, national origin, religion, disability, or sexual orientation."
[https://www.alexandriava.gov/uploadedFiles/council/info/StrategicPlan/CityStrategicPlanFY2017-2022\(1\).pdf](https://www.alexandriava.gov/uploadedFiles/council/info/StrategicPlan/CityStrategicPlanFY2017-2022(1).pdf)

Alexandria is a city of contrasts. Median household income for the City is currently \$117,200 (2018), while the national average is \$59,055. But the poverty rate is 9.8%, with the federal poverty level currently \$20,420 for a family of four. (**Appendix A-1**) Poverty among older residents remains a problem (8.9 percent for age 65 and over) and is a focus of City services. As can be determined from the graphs at (**Appendix A-2 and A-3**) (Household Income for Householder 65 Years or Older by Race/Ethnicity—Actual Number and Percent of Households), nearly one-quarter of householders 65 years or older have incomes below \$30,000. As the cost of housing has increased so significantly, as have other costs, the federal poverty level does not reflect the stark reality of typical costs of living for those with lower and moderate incomes in Alexandria.

It is important to note that, while the Age-Friendly Plan will give significant attention to the needs of lower-income, aging African American and immigrant residents, white residents (particularly women living alone) with low incomes are a larger population group, and their needs must also be taken into account.

Analyses of the 2015 and 2016 updates to the American Community Survey show that the City's older population is growing at a slower rate than in other areas of the country, although the population 65 and older showed a slight increase from 9.2% in 2010 to 9.8% in 2015. The share of this age group continues to be low compared to other age groups in the City and to the national percentage, which has grown from 12.7% to 14.1% in the same timeframe. This is probably in part due to the relatively high cost of housing in the City and the competition from workers seeking housing close to employment centers. However, the older adult age group is expected to continue growing in Alexandria over the next twenty years as the baby boomers enter this age group in greater numbers and if Alexandria remains an attractive location for retirement and aging in the community.

https://www.alexandriava.gov/uploadedFiles/planning/info/StatisticsDemographics/Demographic%20Update_Revised2015.pdf

Alexandria History: Exploring the Chesapeake Bay in 1608, Captain John Smith of Jamestown sailed up the Potomac River, where he met many people living along the river banks, including Native Americans known as the Conoy chiefdom. This group represented a small percentage of the thousands of Native Americans who inhabited the region and enjoyed its rich resources of fish and game. After Smith's visit, it would be many years before white settlement would expand into this part of Tidewater Virginia. <https://www.alexandriava.gov/historic/info/>

During the late 17th and early 18th centuries, plantations were established along both sides of the Potomac River and settlement began to spread further into northern Virginia. By 1732, Hugh West established a tobacco warehouse at the foot of Oronoco Street in what is now Alexandria. To facilitate shipping, Scottish and English merchants who owned local real estate petitioned the Virginia General Assembly to establish the

town of Alexandria, named after Scotsman John Alexander, who owned much of the land around Alexandria. Along with John West, a Fairfax County Surveyor, much of the 60-acre area was surveyed by 17-year-old George Washington. Lots were auctioned in July 1749.

During the mid-1750s the town was a staging area for British troops involved in the French and Indian War. Incorporated in 1779, Alexandria became a port of entry for foreign vessels and a major export center. By the end of the 18th century, Alexandria was among the ten busiest ports in America and had been designated an official port of entry, allowing foreign shipping to land and unload without registering somewhere else first. In 1789, Alexandria and a portion of Fairfax County were ceded by the State of Virginia to become part of the new 10-mile square District of Columbia. Alexandria remained under the aegis of the new federal government until it was retroceded to Virginia in 1847.

Alexandria was also a center of the slave trade during the early 19th century, when thousands of Africans were transported to America to satisfy the labor requirements of the cotton industry. To this day, many of the families that are descendants of these slaves have remained in Alexandria and make up one of the oldest established communities within the City, providing leadership on the City Council and in the business community, City government, and non-government organizations.

During the period of the 1850s, many new homes were constructed and infrastructure was developed, and Alexandria's population almost doubled. The Civil War impacted Alexandria in major ways. Within days of Virginia's secession from the Union in the spring of 1861, federal troops arrived in Alexandria to take possession of the City. It became a supply center for the federal army and troops, and supplies were transported to Alexandria via the port and the railroad. Hospitals and temporary medical facilities sprung up around the town and several forts were constructed as part of the defense of the City of Washington. By the end of the Civil War, Alexandria's economy was in shambles, but the City itself had been spared the destruction experienced by many other places in Virginia. Alexandrians struggled to rebuild their City's commerce and prosperity. Electricity and telephone service arrived in the 1880's and new neighborhoods arose around the outskirts of the City by the turn of the century. The U.S. Naval Torpedo Station, now the Torpedo Factory Art Center, was built during World War I and expanded during World War II, with large industrial buildings dominating Alexandria's waterfront (including a Ford Motor Company warehouse).

World War II brought tremendous growth and change to northern Virginia. National Airport was constructed. Thousands of people from all over the country poured into the region as the government expanded and Alexandria became one of many "bedroom communities" serving the capital city.

During the mid-1960s, the City's leadership began to remake the old colonial port into a modern city as many of the oldest parts of town were redeveloped. Except for the 1872 City Hall, many buildings from the 18th and 19th century surrounding Market Square were demolished and replaced.

The Old and Historic District, designated in 1946, was the third historic district in the United States, after Charleston and New Orleans. The historic African American community known as Uptown was designated the Parker-Gray District in 1984, and in 2008 was approved for listing on the Virginia Landmarks Register. Among the buildings saved and restored in time for the nation's Bicentennial in 1976 were the Torpedo Factory Art Center, The Lyceum, the Carlyle House, and Gadsby's Tavern.

Today, Alexandria retains much of its historic character in residential and waterfront neighborhoods. Many late 18th and early 19th century townhouses and warehouses remain in the "Old Town" section of the City. While still a residential area for many federal employees, Alexandria is also home to many national associations, corporations, restaurants, shops, and other businesses. The Patent and Trade Office and the National Science Foundation are recent and very important additions to the City. Many old landmarks have become museums, historic sites, and art galleries.

Governance: The City of Alexandria is governed by a seven-member City Council: a separately elected Mayor and six Council members, all elected at-large. All seven offices serve a three-year term and all are elected on the same three-year cycle. The City Council hires and supervises three positions: the City Attorney, the City Clerk, and the City Manager. The City Manager is responsible for operating the local government of over 2,000 employees. A separately elected school board governs the public school system but has no taxing authority, so it petitions the City Council for funding each year.

The Division of Aging and Adult Services (DAAS) in the Department of Community and Human Services is a model of integrated service delivery for older adults and adults with disabilities, with a special emphasis on those with low incomes or who are at risk of institutionalization. The office also serves as the Area Agency on Aging and provides staff support for the Alexandria Commission on Aging (COA). The COA is a 21-member citizen body appointed by City Council to advance programs and services that address the needs of older Alexandrians, especially for (but not exclusively) low-income residents. The COA advocated for and helped prepare the current Strategic Plan for Aging, titled "The Alexandria of Our Future: A Livable Community for All Ages," which covers the years 2013 to 2017. This Age-Friendly Community Plan will replace that plan once adopted by City Council.

Alexandria a Member of the AARP/World Health Organization Network of Age-Friendly Communities

AARP sponsors the Network of Age-Friendly Communities, which is affiliated with the World Health Organization. AARP requires the chief elected official of a community to approve the application, which for Alexandria was developed by the Commission on Aging (COA). Once enrolled in the Network, the organization responsible for the application has two years to develop an Age-Friendly Plan. The timing for Alexandria is very appropriate because the current Strategic Plan on Aging focused its recommendations on the years 2013 – 2017, and Alexandria’s Age-Friendly Plan would be designed for implementation in 2019 to 2021. Although its attention is directed to aging, the Age-Friendly Plan will focus on a livable community for all ages and will be developed with a multi-generational lens.

In essence, planning for aging residents encompasses the needs of the entire community. What is good for those who are aging also benefits the young and everyone in between. A well-developed and executed plan also creates a legacy for younger generations and establishes a context for future evaluation of the needs of residents as they age.

Alexandria Strives to Be a Livable Community for All Ages

Most Americans want to stay in their communities as they age. Alexandrians are not an exception, and for good reasons. The City occupies a beautiful location on the Potomac River, mere minutes from Washington. Its history attracts new residents and tourists, as do its many amenities. Alexandria’s interesting and distinct neighborhoods and its small-town character, abundant restaurants, its Potomac waterfront acting as a magnet for residents and tourists alike, its parks and walkable streets, and its celebration of the arts, offer a plethora of opportunities to engage in the life of the City. Testament to this is Southern Living’s identification of Alexandria as one of the 15 “prettiest” Southern cities, the only one in Virginia to be included. Alexandria has received many recognitions of this kind.

Alexandria’s proximity to Washington and its many attractive features have created a conundrum: the City has become an increasingly expensive place in which to live. And a town whose residents tend to be generous in provision of programs and services that support those in need faces severe budget constraints due to the lingering effects of the Great Recession, a need for new schools, the urgent requirement to replace a costly, aging sewer system, and to make other infrastructure improvements. Budget cuts require the City to fund some services formerly funded by the federal government.

It is in this resource context that those influencing the development of the Alexandria Age-Friendly Plan evaluated current programs and services, their effectiveness, and the gaps that should be filled, across the eight domains defined by the World Health Organization. (See chart below.) The Alexandria Commission on Aging (COA), which has

led development of the Age-Friendly Plan, had the advantage of an excellent precedent for its deliberations. In 2012, the Alexandria City Council approved the Commission's request to fund a consultant to assist in developing a strategic plan on aging.

The COA determined priorities in community features for the plan, similar to those specified in the Eight Domains of Livability (housing, transportation, health and community services, communications, etc.), and the City Council approved the plan, "The Alexandria of Our Future: A Livable Community for All Ages, 2013 – 2017."

The COA became passionately engaged in creating ways to enhance Alexandria's livability for all ages, while being mindful of the budget constraints the City faced. It kept front and center the results of two community forums, attended by around 400, held as listening sessions to obtain the views of older residents prior to development of the plan. It became evident in their comments that many were not aware of services and programs already available in the City. This outcome prompted the Commission to choose as its first priority for the plan enhanced outreach and communications, to increase understanding of all that is available in the City.

The Commission formed committees on communications and outreach, housing, transportation, health, economic opportunity, and advocacy. The committees set about their work, assessing the programs and services available in their assigned areas, and identifying the gaps that might be filled.

Very importantly, with its Council-approved strategic plan in hand, the Commission developed strong working relationships with the relevant local government departments and organizations in the City corresponding to its areas of focus. These departments and organizations have provided their support, expertise, and counsel.

Prior to the Council's consideration and approval of the strategic plan, as was true of most communities around the country, the City had not accounted for the full range of community characteristics that are essential to accommodating the needs of many residents who wish to stay in the City as they age. Once the City Council reviewed and approved the plan, it has been very supportive, particularly in protecting the programs and services for older adults and adults with disabilities from budget cuts in an environment in which City agencies have routinely been asked to reduce costs.

Because the Strategic Plan on Aging covered the years 2013 to 2017 and was due to expire, the COA recognized that the City's work was not done. It decided to ask the Mayor and City Council to approve an application to join the AARP/World Health Organization (WHO) Network of Age-Friendly Communities. The Mayor and City Council agreed unanimously that the City should do so and recognized that it is a requirement for acceptance in the Network that the City develop an Age-Friendly Plan, subject to the

approval of AARP and WHO (approval is based on the soundness of the plan, not on the City's determination of the needs and priorities of its older residents.)

While the Strategic Plan on Aging was developed with the assistance of a consultant, the Commission on Aging, all volunteers, decided to take on the daunting task of developing the Age-Friendly Plan without requesting any budget for a consultant. It must be noted that the director and long-term care coordinator of the Division of Aging and Adult Services have provided ongoing, expert, and enthusiastic support.

The COA concluded it was equal to the task because it had gained years of experience, developed many collaborative relationships, and could rely on the many resources provided by AARP and WHO. The following list of accomplishments during the years that the COA led the implementation of the Strategic Plan on Aging is testament to the City's commitment to becoming a livable community for all ages.

Among the City's accomplishments following approval of the City's Strategic Plan on Aging are the following:

In Housing:

- Two units in Sunrise Living Facility (assisted living) on Washington Street for individuals covered by Virginia's auxiliary grant for low-income residents.
- Silverado Memory Care – Two units affordable at 60 percent of market cost.
- Secured developer contribution that will provide up to 6 units in a future phase of the Goodwin House continuing care retirement community.
- (Pending Development Special Use Permit approval in Fall 2018) Negotiating developer contribution of multiple assisted living/memory care units for low-income residents in proposed Potomac Yard facility.
- Hosted the Northern Virginia Housing Expo.
- Currently expanding annual apartment & condo survey/resource list to include criteria important to older adults.
- Through close working relations with City officials and staff, influenced the addition of affordable accessible living units in the City's Housing Master Plan.
- Led the effort in creating and vetting, with major stakeholders, a list of criteria for affordable accessible housing and assisted living units to be used in the review of development projects seeking City approval.
- Supported and participated in a meeting, convened by the City's Office of Housing, of multi-family private and nonprofit (affordable housing) developers, state and City planners and regulators, architects and affordable housing players to discuss the benefits and business practicalities of universal design. (Participants have requested another meeting.)
- Serve on the City Council-appointed Housing Affordability Advisory Committee, the Office of Housing's Work Group responsible for developing a review process for assisted living development projects presented to the City, and on a Work

Group providing input to the City and the Alexandria Redevelopment Housing Authority (ARHA) regarding the replacement of housing-authority owned units and relocation of housing authority residents displaced by proposed redevelopment projects.

In Transportation:

- Member of advisory committee on Vision Zero plan; testified before City Council in support of Vision Zero; provided comments and written testimony on draft plan for Vision Zero.
- Conducted walk audits and provided findings to City Department of Transportation and Environmental Services.
- Act as liaison with Complete Streets planner.
- Represent COA in meetings of the ad hoc Bicycle and Pedestrian Advisory Committee.
- Represent COA in meetings with Alexandria Families for Safe Streets.

In Communications:

- Senior Living in Alexandria monthly cable show.
- Speaker Series: Topics of interest to older adults, featuring expert speakers; monthly October to June (includes Senior Law Day).
- Monthly *Aging Well in Alexandria* newsletter with Division of Aging and Adult Services, Senior Services of Alexandria and At Home in Alexandria. Distributed to over 70 congregations in Alexandria. The newsletter includes news of City programs and services for older adults and adults with disabilities.
- Senior Information Corners (16 locations). The Corners are routinely restocked with information about many of the programs and services available to older adults and adults with disabilities in Alexandria.

In Civic Participation and Employment:

- Silver Service Card: Provides discounts for residents 55+ in over 60 establishments in the City.
- Workforce Development Center (WDC): Website focused on resources for older adults seeking to re-enter the workforce.
- WDC monthly workshop on employment strategies for 50+.
- Commission on Aging liaison to Commission on Employment.
- The Senior Academy, a multi-session course for local seniors interested in learning more about how City government works, with the goal of increasing participation and engagement in civic life and activities.

In Community and Health Services:

- Development of Robust Walking by Dr. Dan Kulund, former member of the Commission on Aging, who designed an exercise routine specifically for older adults.
- Dr. Kulund personally visited and reviewed all of Alexandria's parks to assess their accessibility and usefulness for older adults and adults with disabilities, and reported to the Department of Parks, Recreation and Cultural Activities.
- Robust Walking events held two times a year; and Robust Walking group meets three times a week.
- Meals on Wheels (Senior Services of Alexandria) provided seven days a week, 365 days a year.
- Increased number of guardianship/conservatorships.
- Northern Virginia Aging Network Legislative Platform items were enacted by Virginia General Assembly: Medicaid Expansion; medical use of marijuana; 3rd week in September will be Falls Prevention week in Virginia; increased funding to enhance No Wrong Door and Long-Term Care Ombudsman Program.
- Approval of Full-time Chronic Disease Nursing position to staff the Department of Aging and Adult Services (DAAS).
- Education re: CCC+ (Commonwealth Coordinated Care Plus) program implemented by the Commonwealth in Northern Virginia on 12/1/17.
- DAAS staff helps to coordinate Annual Caregiver Conference.
- A member of the Commission on Aging serves on the Public Health Advisory Commission and the Partnership for a Healthier Alexandria.
- Another member of the Commission will serve with the group developing the next Community Health Assessment and the subsequent Community Health Improvement Plan.

In Recreation:

- Better promotional materials created, including Power Plus brochure: publication specific to programs and activities for individuals 55 years and over.
- Added pickleball open-play hours and outdoor tennis courts lined for pickleball.
- A Matter of Balance classes offered at recreation centers.
- Expanded fitness and recreation classes offered at recreation centers – walking groups, weight training, line dancing, stretch it out, lunch 'n learn.
- Expanded social activities and events offered at recreation centers.
- Parks upgraded to ADA standards for accessibility.

How the Commission Developed the Plan

The Needs Assessment

The Commission's committees focused on their areas of responsibility and worked over a nearly two-year period to assess the needs of older adults and adults with disabilities

in Alexandria and determine the major priorities for meeting them. AARP added greatly to the Commission's understanding of the needs and priorities by completing, in July 2016, a 500-person phone survey of Alexandrians 50-plus that focused on the eight domains of livability. Furthering the Commission's ability to assess the needs of residents, the Commission analyzed the AARP Livability Index report on Alexandria. (Details of the findings of these assessment tools are in the sections on the six Alexandria domains.)

The Commission on Aging and Senior Services of Alexandria conducted many listening sessions. Senior Services held, over a two-year period, three listening sessions as part of its Senior Speaker Series. The Commission sponsored five listening sessions in senior centers and subsidized independent living facilities and a condominium, and one in a diverse senior center was conducted in Spanish. The Commission on Aging also conducted a listening session with Division of Aging and Adult Services staff. This session yielded some very important information, as this staff knows the problems of older residents and adults with disabilities intimately through their daily contact with them.

Also important to the assessment was the November 2017 workshop sponsored by AARP Virginia and Just Partners, Inc., which drew 55 participants from a range of local and regional organizations that represented the faith community, local government, non-profit organizations, service providers, transportation officials, residential facilities, advocates for the aging, and others. The workshop was designed to elicit the group's assessment of the needs and priorities in housing, transportation, health, and civic engagement. The workshop had an important influence on the Commission's choice of priorities, as the discussions reflected the views of very well-informed participants. Their conclusions are reflected in the sections on the domains. The participants in this workshop continue to serve as an advisory committee to the COA.

Consulting with Local Government Staff, Virginia State Government, Local, Regional and National Non-Profit Organizations, and Experts in Relevant Fields

During the two-year planning period, the Commission featured experts each month at Commission meetings, most of whose presentations were relevant to development of the plan. COA committees also sought the knowledge of City staff, consulted with state staff of the Department of Aging and Rehabilitative Services and many of the area's non-profit organizations, frequented the AARP website, as well as that of Grantmakers in Aging, the Milken Foundation and others.

Having immersed themselves in the various assessment tools and having acquired expertise in community planning around aging, the Commission committees then

selected the priorities that aligned with all that they had learned. The domain-specific plans are the result.

An Important Perspective for Planning: Social Determinants of Health

The impact social determinants have on health is recognized world-wide and influences health policy at every level, from the World Health Organization to Alexandria's Community Health Improvement Plan. The Virginia and Alexandria Departments of Health incorporate this perspective into their planning.

The Centers for Disease Control (CDC), in its publication *Promoting Health Equity, A Resource to Help Communities Address Social Determinants of Health*, identifies the following as important elements in supporting healthy outcomes:

"Social determinants of health are life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines length and quality of life." <https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/pdf/sdoh-workbook.pdf>

According to the CDC, the social determinants of health account for over 50 percent of health outcomes. The National Academy of Medicine (in a chart provided by County Health Rankings and Roadmaps), identifies the factors that comprise the 50 percent:

Social and Economic Factors:

- Education
- Employment
- Income
- Family and Social Support
- Community Safety

Physical Environment:

- Air and Water Quality
- Housing and Transit

[\(https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/\)](https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/)

An understanding of the social determinants of health provides an important insight into the relevance of the World Health Organization's Eight Domains of Livability. The domains address the importance of community planning, which is the foundation for creating an age-friendly community. Though health care is certainly critical, it is the other domains that, with health care, encompass the full range of community characteristics that have a strong bearing on the overall health of the community.

It is important to recognize that the domains do not address aging alone. Careful implementation of planning around the domains ultimately influences the health of all generations.

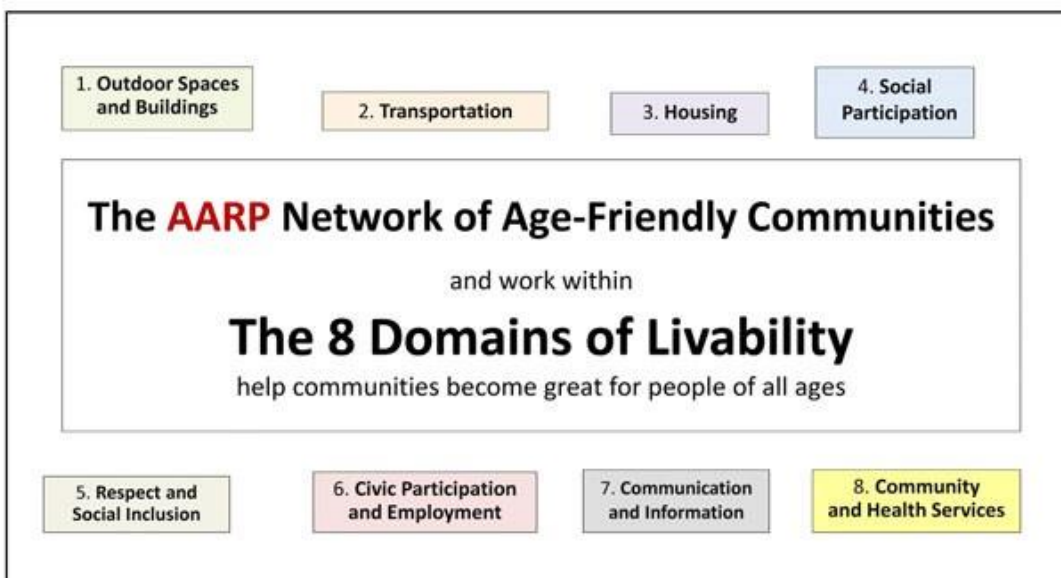
Engaging All Generations

It is thus reasonable to conclude that actions on the domains often benefit all ages. It is not difficult to understand why. The availability of affordable, quality housing, for example, is essential for health as is a variety of transportation options enabling access to employment, medical care, nutrition, and education.

It is thus essential that the fundamental connection among generations is recognized in age-friendly planning. The ideal way to make sure that happens is to engage all generations in the planning process and in intergenerational programs that engage residents of varying ages. The Alexandria Public School System, for example, participated in the planning process, and those who work to implement the plan will focus on every opportunity to be inclusive across generations.

As volunteers become acquainted, the camaraderie that often results increases respect for and appreciation of differences in age and culture. For all generations, this outcome can be a great benefit of volunteering and a major contribution to the health of the community.

The Eight Domains of Livability of the World Health Organization and AARP



Alexandria's Domains for the Age-Friendly Plan (Based on WHO/AARP Domains)

Each community in the Network of Age-Friendly Communities chooses its own priorities, and is not obligated to cover all the domains. The Commission on Aging has not specifically included Outdoor Spaces and Buildings, though some aspects of that domain are covered in Transportation. The others, however, are all included in the Alexandria plan.

Social Participation and Respect and Social Inclusion: Alexandria is an inclusive City: All Alexandrians are treated equitably, including older adults and adults with disabilities, and are encouraged to participate in the vibrant life of the City and all that it offers. In 2016 the Alexandria City Council issued a Statement on Inclusivity that describes the City's commitment.

(https://www.alexandriava.gov/news_display.aspx?id=94948)

Housing: A range of affordable, accessible and supportive housing is available that meets the needs of older residents of the City to enable them to age in place.

Transportation: A variety of mobility options, including pedestrian-safe streets, make moving in and around the City and region possible for Alexandrians of all ages and abilities.

Communications: Information about services and programs is readily available and accessible in a variety of formats and venues for older residents and older adults with disabilities, their families and caregivers, local organizations, and businesses.

Health and Community Services:

Health and Community Services accommodate the expectations and needs of older adults and adults with disabilities in Alexandria and support their caregivers.

Civic Participation and Employment:

Employment services are available for older Alexandrians, a variety of volunteer roles are offered, and innovative programs are developed to engage older residents in the community that also serve their needs as consumers.



Social Participation and Respect and Social Inclusion

WE ENVISION: People of diverse culture, race, color, religion, national origin, gender, age, sexual orientation, gender identity, and ability in Alexandria have information about and access to the range of services and programs available in the City, and engage in civic life.

WE LEARNED:

The diversity of Alexandria’s population is one of the City’s defining characteristics. Alexandria’s government and many of its organizations, including the faith community and non-profit service organizations, are committed to generous support of the many immigrant and minority communities in the City that may suffer discrimination. The City’s Strategic Plan is specific in its expectations. It articulates the objective of increasing “the percentage of residents who do not perceive barriers to living in Alexandria based on age, gender, race, national origin, religion, disability or sexual orientation.”

Its goal for 2022 states that, “Alexandria is a caring city that supports an affordable and livable community for all. As an inclusive city, there is no place for intolerance in the community. Further, the city is committed to and values our diversity. Alexandria provides high-quality social services to eligible residents to reduce poverty and increase self-sufficiency. The city is welcoming to people in all stages of life and is known as an age-friendly community.”

[https://www.alexandriava.gov/uploadedFiles/council/info/StrategicPlan/CityStrategicPlanFY2017-2022\(1\).pdf](https://www.alexandriava.gov/uploadedFiles/council/info/StrategicPlan/CityStrategicPlanFY2017-2022(1).pdf)

The AARP Livability Index raises important concerns relevant to the many minority communities in Alexandria that point out some of the obstacles the City faces if its 2022 vision is to be fully realized. Its rating in the category “opportunity” indicates that Alexandria is in the lower third among U.S. communities in its high school graduation rate. It is also in the lower third in multi-generational communities, and suggests in that context that, “A lack of diversity may signify a community that is unaffordable and socially isolating,” because one or more generations are underrepresented in the overall population.

The Index also places Alexandria in the middle third in economic opportunity (jobs per worker) and in equal opportunity and income inequality. The Index states that, "Higher levels of inequality within a community mean fewer opportunities for low-and middle-income residents to advance, which can lead to a shorter life and greater health problems in the long run." <https://livabilityindex.aarp.org/search#Alexandria+VA+USA>

These results reflect the complexities of managing Alexandria's remarkable diversity, with 27 percent of residents having been born outside this country. Many residents do not speak English at home. The 2010 census showed that, at that time, students in Alexandria schools spoke 130 different languages. The many languages spoken at home are indicative of one of the problems that confront those who would like to reach out more effectively to residents of Alexandria's immigrant communities. They may not be able to read or speak English. Spanish (13.5 percent of residents), various African languages, and Arabic are among the more commonly spoken languages of immigrants in the City. <https://statisticalatlas.com/place/Virginia/Alexandria/Languages>

In nine listening sessions with broad representation among diverse communities, the concerns raised included:

- The expense of living in the City.
- Need for more intergenerational programs.
- Need for more affordable health and dental care.
- Need for additional and less costly exercise programs, or alternatively, development of communications about less expensive programs that are available in the area.
- Ongoing increases in condo fees.
- Problems with walking in the City: lights at cross walks are too short in duration for pedestrians; drivers and cyclists do not stop; uneven sidewalks.
- Seniors feel unwanted in the City as housing costs are out of reach for many.
- Need for Senior Corners in grocery stores.

During a listening session with the staff of the Division of Aging and Adult Services (DAAS), whose services tend to be focused on low- and moderate-income residents, participants noted that knowledge about services is still limited. The staff suggested that closer collaboration and information sharing among the Division, the Recreation Department, the libraries, and other agencies, would better enable their respective staffs to know about services available from a variety of sources. They also commented that information and assistance must be accessible to those who do not read.

WE ARE: Because aging may pose a variety of special challenges to minority populations, inclusion will be a major and cross-cutting priority for Alexandria's Age-Friendly Plan, and it is incorporated as a domain that encompasses social participation and respect and social inclusion. The charts at **Appendix B-1** show the population of Alexandrians 55 and over, and the ethnic and racial composition of the City. Nearly 30

percent of the City's 65 plus residents are members of racial and/or ethnic minority populations.

The LGBTQ community in Alexandria will be given attention. As they age, Lesbian, Gay, Bi-Sexual, Transgender, and Queer older adults, who fought the first battles for equality, have been feeling that they must now hide their identities to survive. An age-friendly City of Alexandria will ensure that its older LGBTQ citizens will not be isolated and afraid to ask for help. Work toward this goal will include advocating for their rights and fostering greater understanding of LGBTQ aging in all our communities, especially in nursing homes and assisted living facilities.

Nearly 54% of those who speak a language other than English as their native tongue report that they do not speak English "very well." **(See Appendix B-2.)** For those who do not speak English very well, access to services can be a significant obstacle. The Alexandria Council of Human Service Organization's (ACHSO) 2015 report, *Meeting Today's Needs, a Needs Assessment of the Alexandria Human Services System*, identified the need for improved dissemination of information to immigrant communities about services. The report states that focus groups concluded that the health of immigrants can be compromised because, "Language and cultural barriers keep people from accessing services or even getting information about available services." (ACHSO Report) <https://www.alexandriava.gov/uploadedFiles/achso/2015%20-%20ACHSO%20HS%20Report.pdf>

The National Institutes of Health describes the conundrum faced by communities that seek to accommodate the needs of minorities. It states that, "Life expectancy at older ages has increased significantly over the past 25 years, but unacceptable disparities continue to exist in terms of disease burden and lifespan among racial and ethnic groups in the United States...Economic circumstances can determine whether an individual can afford health care and proper nutrition from early life into old age. Individual and family financial resources and health insurance can determine whether an older adult enters a nursing home or stays at home to be cared for by family and friends." <https://www.nia.nih.gov/about/living-long-well-21st-century-strategic-directions-research-aging>

A variety of impediments can cause many minorities to live less healthy and fulfilling lives. As made clear by the social determinants of health, these can include health disparities, lack of affordable and appropriate housing, lack of transportation options, fewer opportunities for economic security and work, discrimination, and, for some, the absence of financial literacy, sound nutrition, and for immigrants, difficulties with language.

In Alexandria, DAAS is cognizant of the challenges of serving those for whom English is a second language. Three staff members are fluent in other languages, including Spanish, Amharic, and Korean. The City also has a contract with the AT&T Language Line to provide translation services over the phone. Other units in the Department of

Community and Human Services also focus on the needs of Alexandria's minority populations.

WE WILL Work to Achieve These Goals:

Goal: People of diverse culture, race, color, nationality, gender, age, sexual orientation, gender identity, and persons with disabilities in Alexandria have information about and access to the range of services available in the City and are engaged in civic life.

Objective: Minority communities have increased knowledge about and access to City services and are involved to a greater extent in civic life.

Action: Outreach to diverse communities.

Outcome: Communities are aware of and have access to services available in the City and are engaged in civic life.

Goal: Create inclusive services for LGBTQ Older Adults.

Objective: One lead agency is recruited and provides cultural competency training for other agencies providing services to Alexandria's older adults.

Action: Conduct cultural competency training for those providing services to Alexandria's older LGBTQ older adults.

Outcome: Lead agency is regularly assisting other agencies in reinforcing their commitment to inclusion and welcoming of clients regardless of sexual orientation and gender identity.

Goal: People of diverse culture, race, color, nationality, gender, age, sexual orientation, gender identity, and persons with disabilities in Alexandria have information about and access to the range of services available in the City and are engaged in civic life.

Objective: Minority communities have increased knowledge about and access to City services and are involved to a greater extent in civic life.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|--|---|-----------------|--|---|--|---|---|
| <p>Increase outreach to minority communities and identify needs.</p> | <p>Division of Aging and Adult Services (DAAS) staff meets with broad range of community groups.</p> <p>DAAS increases availability of in-language informational materials, and Senior Services of Alexandria (SSA) assures that the Senior Corners in libraries and recreation centers are stocked.</p> <p>Responses provided to concerns raised at listening sessions already conducted.</p> <p>Community leaders in minority communities identified.</p> <p>Needs identified reported to appropriate agencies or organizations.</p> | <p>Commission on Aging, Division of Aging and Adult Services, Department of Community and Human Services, Alexandria Commission on Persons with Disabilities, non-profit organizations serving minority communities, faith-based communities.</p> | <p>EOY 2021</p> | <p>The City Strategic Plan's commitment to inclusion.</p> <p>Engagement of Alexandria's boards and commissions that advocate for the needs of minority communities.</p> <p>Support of leaders in minority communities.</p> <p>Commission for the Arts, Del Ray Artisans, Workforce Development Center, Office of Housing, DOT, Complete Streets, Department of Health, Neighborhood Health.</p> <p>Seek Intergenerational / family engagement.</p> | <p>Need to identify methods to overcome fears and cultural reluctance of immigrant communities that can deter use of public services.</p> | <p>Identification by COA Communication Committee of communication vehicles that reach minority communities.</p> <p>Across domains, translation of information about services available for older adults and those with disabilities.</p> <p>Repeated outreach by senior ambassadors serving diverse communities.</p> | <p>Significantly increased outreach to diverse communities demonstrated by attendance at listening sessions, reports of work of senior ambassadors, accounts of distribution of information by a variety of media.</p> <p>Increased use of City services by diverse communities and additional needs identified and resources identified.</p> | <p>Minority communities are aware of and have access to services available in the City and are engaged in civic life.</p> |

| Action | Tasks and Resources | By whom. | By When | Support available/ needed. | Special Considerations | Needed elements for communication planning. | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--------|---|----------|---------|----------------------------|------------------------|---|--|--------------------------------|
| | <p>Conduct ten additional listening sessions, with three in Spanish, and at least one in LGBTQ community.</p> <p>Develop basic messages about availability of assistance from DAAS.</p> <p>Work across domains to communicate to all audiences about support available in housing, home care, transportation, health, etc.</p> <p>Provide informational materials for minority audiences to senior ambassadors for their distribution.</p> <p>Seek additional senior ambassadors in minority communities.</p> | | | | | Increased availability of translated materials at Senior Corners. | | |

Goal: Create inclusive services for LGBTQ older adults.

Objective: One lead agency is recruited and provides cultural competency training for other agencies providing services to Alexandria’s older adults.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|--|-----------------|--|---|--|---|--|
| <p>Conduct training with selected lead agency.</p> | <p>Create intake and training using inclusive terminology.</p> <p>Identify lead agency for these tasks.</p> | <p>Commission on Aging (COA) Diversity Committee</p> <p>Division of Aging and Adult Services (DAAS).</p> | <p>EOY 2020</p> | <p>Collaboration with Alexandria LGBTQ Task Force and Arlington Gay and Lesbian Community Alliance.</p> <p>Alexandria Welcoming Faith Congregations</p> <p>Lead non-profit aging service provider.</p> | <p>In general, the LGBTQ community of older adults has lived in fear of social stigma and family of origin issues that makes them very apprehensive about applying for assistance from aging service providers.</p> <p>Establishing clearly discernible policies of welcome should therefore be a major priority.</p> | <p>Work with COA Diversity Committee and DAAS to establish messaging responsive to the needs of LGBTQ older adults.</p> <p>COA Communications Committee works with lead agency to support and publicize these efforts.</p> | <p>Agency non-discrimination policy prominently posted on all website and print materials.</p> <p>Partnerships with, or outreach to, the LGBTQ community highlighted or displayed.</p> <p>Agencies co-sponsor LGBTQ events or programs with local LGBTQ groups.</p> <p>Current programs modified for LGBTQ clients.</p> | <p>Lead agency is assisting other agencies in reinforcing their commitment to diversity and welcoming of clients regardless of sexual orientation and gender identity.</p> |



HOUSING

WE ENVISION: A range of affordable, accessible and supportive housing, including assisted living, is available that meets the needs of City residents, of all ages and abilities, to enable them to age in place.

WE LEARNED: As noted in the overall background, in addition to the City's 2013 Housing Master Plan, the perspective on housing in Alexandria has been informed by AARP's Livability Index, AARP's survey of residents in 2016, and the workshop conducted by AARP and Just Partners, Inc., on November 2, 2017, with over 50 participants.

In the Housing section of the Livability Index, AARP compared Alexandria to the median of U.S. neighborhoods. Alexandria scored highest in the availability of multi-family housing and subsidized housing. Alexandria scored lower in the housing cost-burden area. The lowest scores were in overall housing costs and housing accessibility. In the AARP survey, respondents identified affordable housing as the greatest need in the City. Affordable assisted living also ranked high.

At the November 2 workshop, participants were asked to add their thoughts to the Index and survey results, and to recommend possible solutions to service gaps. They identified the following prospective solutions in the housing area: making accessory dwelling units more possible in Alexandria; providing better outreach and education about housing programs; exploring co-housing and home sharing options; incorporating universal design in new housing; increasing affordable assisted living; co-locating housing with other city facilities; supporting Naturally Occurring Retirement Communities (NORCs) and developing group homes for older adults.

At a subsequent community partner session on December 12, 2017, participants worked on a specific planning matrix to identify the ways to provide affordable assisted living in the City. (See following chart.)

WE ARE: The City of Alexandria is a very high land-cost jurisdiction, so housing costs are also very high. The City's Office of Housing conducts an annual rent-cost analysis to identify the number of market rate affordable (not subsidized) housing units in the City. Since 2000, the number of market rate affordable rental units has declined by 90%, from 18,218 to just 1,749 in 2017. Fewer than 6% of the rental housing units in Alexandria are affordable to households earning 60% of the Area Median Income for the Washington, DC region, which in 2018 ranged from \$49,260 for a one-person household to \$70,320 for a four-person household.

The City's Department of Planning and Zoning analyzed the 2015 American Community Survey data and found that 42.5% of occupied housing units were estimated to be owner-occupied in 2015, down from 45.7% in 2010; 57.5% were renter-occupied, compared to 54.3% in 2010. This change since 2000 reflects new construction and changes in the number of investor-owned single-family units and condominiums that are rented. Both ownership and rental housing continue to be constructed in the City; however, most of the new supply is not affordable to persons with incomes at or below 60% AMI.

https://www.alexandriava.gov/uploadedFiles/planning/info/StatisticsDemographics/Demographic%20Update_Revised2015.pdf

Statistics demonstrate the problem. The average rent for two bedrooms has increased by 104% from 2000 to 2018. The increase in assessed value of residential property in the City has been 187% during the same period. **(See Appendix C-1)** This appendix demonstrates the disconnect between incomes and housing.

Subsidized housing was an area where the City scored well in the AARP Livability Index, but that belies the reality of housing affordability when the very small number of market rate affordable units are added. The City has one public housing building of 170 units for older adults and those with disabilities. Three privately-owned buildings offer subsidized rents for older adults (age 62 and over) and those with disabilities have 90, 300, and eight units each. These buildings have project-based housing vouchers associated with all units. Other subsidized public and private housing units are available to older residents, but the actual number of older residents in them is not tracked.

As noted in the introductory background section, Virginia is a Dillon Rule State. The state controls what the City can and cannot allow. Rent control is not an option for localities in Virginia, so Alexandria has no way to control the rapid rise in rents. The City has the ability to secure affordable units in new developments only when bonus density (for an increased number of housing units and/or height of building beyond what would be permitted by right) is requested pursuant to a provision in the City Zoning Ordinance (Section 7-700). The City recently increased its density bonus to a maximum of 30% - up from 20% - in exchange for affordable units. Higher levels of density may also be permitted in Small Area Plans. While the density bonus provision is utilized by some developments, the number of additional affordable housing units it yields is limited. The City's principal means of obtaining new affordable housing is through direct-funding

support to non-profit housing development entities that build new, affordable, multi-family rental housing.

Other Office of Housing programs that benefit older low- to moderate-income Alexandrians are the City's down payment and closing cost assistance program (up to \$50,000) that helps make homeownership affordable to income-eligible buyers; the Rental Accessibility Modification Program (RAMP) that provides grant funds of up to \$50,000, as well as project management assistance (coordination with architects, contractors and property management) to implement accessibility modifications in rental units; and the Home Rehabilitation Loan Program, that uses owners' equity in their homes, to provide improvements and modifications to address code issues and/or to enhance livability, accessibility and energy efficiency, so that low-income homeowners can remain safely and affordably in their homes. These zero interest loans are repaid when homeowners move and/or sell their homes.

The Commission's goals also align with the City's Housing Master Plan, adopted by City Council in 2013. The full Housing Master Plan is available at:

<https://www.alexandriava.gov/uploadedFiles/housing/info/Housing%20Master%20Plan%20Final.pdf>

Rebuilding Together Alexandria: Making Homes Safe for Many Older Residents and Those with Disabilities

Rebuilding Together Alexandria's (RTA) cornerstone program, Safe and Healthy Homes, focuses on stabilizing 25 items that the National Center for Healthy Housing found to drastically improve living conditions for a home's residents, with a particular focus on low-income persons living in older and/or substandard housing who are disproportionately affected by home hazards. By delivering these safe and healthy home repairs to seniors throughout Alexandria, many Rebuilding Together Alexandria clients can age-in-place for years beyond the time that the work was completed.

- 65% of RTA's clients are age 64 or older, with the average age of clients 71.
- 63% self-diagnose as having a disability.
- 71% are female heads of households.
- Since 1986, 27,264 volunteers have worked on 2,137 projects, leveraging \$7.5 million worth of in-kind value.

WE WILL Achieve the Following Goals:

Goal: Determine prospective benefits and challenges regarding Accessory Dwelling Units (ADUs).

Objective: The City and community stakeholders study the feasibility of modifying city regulations to permit accessory dwelling units, where appropriate, as an option to increase the stock of affordable and accessible housing in the City and complete a report for submission to City Council.

Action: Research accessory dwelling units and propose recommendation to City Council.

Outcome: Determination of benefits and liabilities of ADUs by City staff and stakeholders and resulting recommendation to City Council.

Goal: Develop public and private mechanisms to enhance availability of affordable assisted living in Alexandria.

Objective: Develop consistent developer contribution and concept plan.

Action: Study group crafts City policy for developer contributions in assisted living facilities.

Outcome: Policy now in effect for acquiring contributions for affordable assisted living development.

Goal: Work with key organizations and individuals to incorporate “housing for a lifetime” features in both new and redeveloped housing.

Objective: Establish guidelines for the inclusion of accessibility features in new affordable multi-family development that receives City funding support.

Action: Determine which enhanced accessibility features should be included in addition to accessibility features required as part of federal, state and local building codes.

Outcome: Guidelines approved and agreement reached that they are to be followed for new affordable, multi-family development that receives City-funding support.

Goal: Prevent the unnecessary and/or unwanted institutionalization of those who could and would prefer to remain in their homes for as long as possible.

Objective: Residents of Naturally Occurring Retirement Communities (NORCs) and others have increased awareness of available programs and services supportive of older adults and adults with disabilities.

Action: Support public and private providers in their information and service outreach efforts to reach targeted communities, including NORCs.

Outcome: Information/resource person available to residents in 75% of NORCs, and increasing awareness among targeted groups about how to access resources that help older adults and adults with disabilities remain in their homes.

Goal: Determine prospective benefits and challenges regarding Accessory Dwelling Units (ADUs).

Objective: The City and community stakeholders study the feasibility of modifying city regulations to permit accessory dwelling units, where appropriate, as an option to increase the stock of affordable and accessible housing in the City and complete a report for submission to City Council. It is noted that some Small Area Plans already permit ADUs (Potomac Yard, Beauregard), but few accessory units have resulted.

| Action | Tasks and Resources | By whom | By when | Support available/ Needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|--|--|---|---|--|--|---|---|
| <p>Research accessory dwelling units and propose recommendation to City Council.</p> | <p>Gather data. Conduct research. Analyze above. Develop communication plan and meetings. Establish conclusions.</p> | <p>Office of Housing Planning & Zoning – to include demographer support, census data input, as well as a zoning analysis.</p> | <p>Pursuant to the Housing Master Plan implementation schedule, review of this tool is part of the anticipated FY 2020 planning process, subject to approval by City Council of Planning’s Long-Range Planning Interdepartmental Work Program. Staff from several departments will be involved; the effort will include significant community outreach.</p> | <p>Realtors Contractors DCHS Rebuilding Together Civic/Neighborhood Associations Transportation and Environmental Services (parking) Code Administration Community leaders, Alexandria Housing Affordability Advisory Committee, Faith communities Commission on Aging.</p> | <p>Key topic in elections. Manage tensions between different interest groups. Parking requirements. Code, insurance and taxing requirement.</p> | <p>Education – what is an ADU? Why ADUs? Development of messages. Assess cultural appropriateness. Account for languages and language use. Messaging for community leaders. Information for senior ambassadors. Determine outlets for information.</p> | <p>Report submitted to City Council. Recommendations available for public consideration.</p> | <p>Determination of benefits and challenges of ADUs by City staff and stakeholders, and resulting recommendation to City Council.</p> |

Goal: Develop public and private mechanisms to enhance availability of affordable assisted living in Alexandria.

Objective: Develop consistent developer contribution and concept plan.

| Action | Tasks and Resources | By whom | By when | Support available/needed | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred |
|--|---|---|------------------|---|---|---|---|
| <p>Study group crafts City policy for developer contributions in assisted living facilities.</p> | <p>Determine membership of study group, including representatives of development community.</p> <p>Establish meeting location and schedule of meetings.</p> <p>Establish and implement work plan.</p> | <p>Office of Housing, Department of Planning and Zoning</p> | <p>June 2019</p> | <p>Commission on Persons with Disabilities, and Housing Affordability Advisory Committee are available support. Support needed of real estate development community.</p> <p>Staff and volunteer support available, to include Commission on Aging, Division of Aging and Adult Services, groups represented in the study group.</p> | <p>Explain relevant terminology. Develop communications strategies for participating organizations.</p> | <p>Meetings of study group completed, enabling development of policy.</p> | <p>Policy now in effect for acquiring contributions for affordable assisted living development.</p> |

| Action | Tasks and Resources | By whom | By when | Support available/needed | Needed elements for communication planning | Indicators: Results: Increased capacity, persons served, benefits received | Outcome What changes occurred. |
|--|--|---|------------------|---|--|---|---|
| <p>Create concept plan for mixed-income, affordable assisted living facility, including identification of potential site(s) and funding sources.</p> | <p>Develop list of stakeholders.</p> <p>Seek location and development partners.</p> <p>Review Chesterbrook as model.</p> | <p>Office of Housing, Department of Planning and Zoning, Alexandria Redevelopment and Housing Authority, Department of Community and Health Services, Department of Aging and Adult Services, Commission on Aging, Housing Affordability Advisory Committee, Alexandria Housing Development Corporation, United Way</p> | <p>June 2020</p> | <p>Support needed: housing advocates, development community, aging advocates, community leaders.</p> <p>Need for no- or low-cost land.</p> <p>Need for ongoing source to potentially seed/supplement funds for operating costs.</p> <p>Need identification of available land.</p> <p>Need pre-development funds.</p> <p>Cultivate business relationships.</p> <p>Potential partnership with Ladrey.</p> <p>Potential partnership with ARHA for project-based vouchers.</p> <p>Potential partnership with faith communities/other land owners.</p> | <p>Communication planned for broad dissemination to seek community support, specific organizational support.</p> | <p>Research completed on successful examples of mixed-income affordable assisted living.</p> <p>Information about Chesterbrook essential as model.</p> <p>Sponsor and no- or low-cost location identified.</p> <p>Vouchers available.</p> | <p>Concept plan created, enhancing interest on the part of policy makers.</p> |

Goal: Work with key organizations and individuals to incorporate “housing for a lifetime” features in both new and redeveloped housing.

Objective: Establish guidelines for the inclusion of accessibility features in new affordable multi-family development that receives City funding support.

| Action | Tasks | By whom | By when | Support available/needed | Special Considerations | Needed elements for communications planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred |
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| <p>Determine which enhanced accessibility features should be included in addition to accessibility features required as part of federal, state and local building codes.</p> | <p>Create draft checklist of enhanced accessibility features or performance standards for reviewing development projects as potential factor in decisions regarding City funding.</p> <p>Vet the checklist or standards with major stakeholders.</p> <p>Work with the Office of Housing/Planning & Zoning, Code Administration and City Attorney on the implementation of a checklist or standards to be used for reviewing potential City-funded development projects.</p> <p>Educate builders and developers about the need for and benefits of enhanced accessible design in all housing and facilities.</p> | <p>Commission on Aging (COA), Division of Aging and Adult Services</p> | <p>2021</p> | <p>Alexandria Office of Housing, Department of Planning and Zoning, Department of Code Administration, City Attorney, City Council, Alexandria Housing Affordability Advisory Committee, VHDA, private sector experts.</p> | <p>It can be a serious challenge to persuade builders that enhanced accessibility is a critical requirement for older adults and adults with disabilities.</p> | <p>Develop communication plan that targets major builders, (re)developers, contractors, and realtors in the Alexandria area.</p> <p>Implement the communication plan.</p> <p>Evaluate inclusion of accessibility in subsequent developer project proposals.</p> | <p>Guidelines drafted, vetted, approved by Planning and Zoning and Office of Housing for using checklist in reviewing potential City-funded development.</p> <p>Education sessions held to make the case with key developers, redevelopers, contractors, builders, realtors, and other stakeholders.</p> <p>Developers support enhanced accessibility guidelines.</p> | <p>Guidelines approved and agreement reached that they are to be advisory for new construction of affordable, multi-family housing that receives City-funding support.</p> |

| Action | Tasks | By whom | By when | Support available/needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred |
|--------|--|---------|---------|--------------------------|---|--|--|-------------------------------|
| | <p>Interview key builders, developers, realtors about accessibility features' perceived value in development projects: for developers, for buyers.</p> <p>Hold educational sessions with key developers, redevelopers, contractors, builders, realtors, and other stakeholders to make the case for accessibility.</p> | | | | <p>Consult with Planning and Zoning early in the process to determine the scope of work, and if the task of creating a checklist or performance standards would necessitate addition as a Long-Range Planning Interdepartmental Work Program item to be approved by City Council.</p> | | | |

Goal: Prevent the unnecessary and/or unwanted institutionalization of those who could and would prefer to remain in their homes for as long as possible.

Objective: Residents of Naturally Occurring Retirement Communities (NORCs) and others have increased awareness of available programs and services supportive of older adults and adults with disabilities.

| Action | Tasks and Resources | By whom | By when | Support available/ Needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|--|---|-----------------|---|---|---|---|---|
| <p>Support public and private providers in their information and service outreach efforts to reach targeted communities, including NORCs.</p> | <p>NORCs identified (condo, rental properties). Information/resource assistance available in 75% of NORCs.</p> <p>Senior ambassadors recruited and trained to provide information about services available from public and private providers.</p> <p>NORC residents attend senior ambassador information sessions.</p> | <p>Commission on Aging, Division of Aging and Adult Services, At Home In Alexandria</p> | <p>EOY 2021</p> | <p>Senior Services of Alexandria, City Departments, Senior Navigator website, local media, NORC property managers, community volunteers, library system, local service providers.</p> | <p>Property managers resist “aging community” label being applied to their facility.</p> <p>Consumers seeking information about aging services often receive and access information piecemeal from a myriad of providers.</p> | <p>Plan for continual outreach to media and all other information vehicles to publicize the availability of information and referral regarding services for older adults.</p> | <p>Inventory and publicize services that are available to support people staying in their homes.</p> <p>List of NORCs prepared (condo, rental properties).</p> <p>Senior ambassadors recruited and trained in services available from public and private providers.</p> <p>Community meetings held for residents of 75% of NORC condo and rental complexes.</p> | <p>Information/resource person available to residents in 75% of NORCs, and increased awareness among targeted groups about how to access resources that help older adults and adults with disabilities remain in their homes.</p> |

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred |
|--------|--|---------|---------|---------------------------|---|--|--|-------------------------------|
| | <p>Public information, referral, and outreach strategies and resources enhanced.</p> | | | | <p>Increased outreach about the Division of Aging's information and referral services, Senior Navigator's searchable database, and the work of the Senior Ambassador Program should appreciably enhance the availability of detailed information and referral about services and resources.</p> | | <p>Weekly topic and service updates provided to senior ambassadors.</p> <p>Pre- and post- surveys of NORC residents reflect increased awareness of available services.</p> <p>Senior Navigator website is updated with additional information about available services and its role as a searchable database publicized.</p> <p>A major "Aging in Place" topic placed in local news media quarterly.</p> <p>Major providers report increased referrals resulting from Aging in Place Information & Referral initiatives.</p> | |



TRANSPORTATION

WE ENVISION: A City with a variety of mobility options, based on pedestrian-safe streets as the foundational principle, that make moving in and around the City and region possible for Alexandrians of all ages and abilities.

WE LEARNED: The perspective on transportation in Alexandria has been informed by AARP's Livability Index, AARP's survey of residents in 2016, the community workshop conducted by AARP and Just Partners, Inc., on November 2, 2017, with over 50 participants, and several listening sessions. Participants in listening sessions generally praised DASH, but raised concerns about walkability—identifying such problems as crossing against traffic lights that change too quickly, speeding traffic, sidewalks that are difficult to negotiate, and other issues.

In the transportation section of the Livability Index, Alexandria scored highest in convenient transportation options (both frequency of local transit service and walking trips), transportation costs, safe streets (crash rates), and accessible system design. Alexandria scored lower (in the middle third) on safe streets (violation of speed limits), and scored the lowest (bottom third) in congestion. The 2016 AARP survey showed that Alexandrians 50+ are generally pleased with transportation options in the City, but they think that parking is too expensive and sometimes not available.

At the November workshop, participants were asked to add their thoughts to the Index and survey results, and to recommend possible solutions to service gaps. Participants identified the following possible solutions in the transportation area: add and repair seating at bus stops; provide more information on Metro/public transportation options; offer streetscape amenities. safe sidewalks, and pedestrian-friendly crosswalks; add benches; make sidewalks more walkable (no more brick); provide access to public transportation for areas not on bus routes; increase separation of pedestrian, bicycle,

and car traffic; provide DASH travel training; map crashes, by type and age of pedestrian; expand pedestrian-appropriate lighting to more areas within Old Town and Del Ray; and market public transportation targeted to Alexandria's population of older citizens. While review of these recommendations is very useful, they do not indicate a large-scale insufficiency in all the attributes mentioned, though some are lacking in specific locations in the City.

The safety of walking in Alexandria is a high priority for this plan. Volunteers for AARP Virginia and the Commission on Aging conducted walkability audits in three neighborhoods and found that the close observation required by the audit revealed a range of problems: crosswalks were lacking in some areas or were fading; intersections that are hazardous for pedestrians were identified; in some cases, cars blocked the ability to see pedestrians preparing to cross the street; sidewalk maintenance was inconsistent; wide streets need center islands; broken pavement was found. Speeding was observed everywhere.

The reports on the audits were submitted to the Department of Transportation and Environmental Services and some changes are already planned. In order to ensure enhanced walkability, AARP Virginia and the Commission on Aging will continue walkability audits and will collaborate with the Complete Streets Team to assure that essential changes are made.

WE ARE: As a chartered City in the State of Virginia, Alexandria is responsible for building and maintaining its own streets and sidewalks. The State of Virginia only maintains the interstate; the City maintains all federal and state highways in the City. The City also sets speed limits on all roadways.

An AARP Public Policy Institute Community Transportation Survey provides useful data on older drivers and those who no longer drive. The ability to continue driving, or have access to volunteer drivers, or use public transportation, is key to maintaining independence, and is essential for access to goods, services, and the social contacts necessary for a good quality of life. A 2011 study by Transportation for America shows that, compared to those of similar ages who drive, 15 percent of those who don't drive make fewer trips to the doctor, 59 percent make fewer trips to shop or eat out, and 65 percent make fewer trips to visit friends and family.

<http://t4america.org/resources/seniorsmobilitycrisis>.

The City has upgraded many bus stops to be accessible for riders of all abilities. Mount Vernon Avenue and Randolph Street bus stops are being upgraded to meet ADA standards.

Alexandria has taken significant steps to meet some of the needs. The Alexandria Transit Company's DASH bus service provides transit within the city and links to Metrorail and Metrobus to connect to the Washington DC Metropolitan Area. All DASH

buses are wheelchair accessible. The City provides funding for MetroAccess for persons unable to use Metrobus or Metrorail. The City also operates the Alexandria DOT paratransit service. For qualified individuals, both taxi and lift-equipped van service are available for trips throughout the City of Alexandria, Fairfax County, Arlington County, City of Falls Church, and City of Fairfax.

The City has also reaffirmed its support for the Complete Streets program as part of the City Council Strategic Plan, the Transportation Master Plan and Eco-City Alexandria. The goal is to create infrastructure that provides safe, convenient, and comfortable travel for all roadway users.

The City Council has also approved the Vision Zero Action Plan whose goal is to completely eliminate traffic deaths and serious injuries by 2028. This is a significant step toward ensuring safety for older drivers and pedestrians through multi-year implementation of design strategies based on data, engineering, enforcement, and education. Initial action comprises a three-year work plan, with year-one high-priority action items that include high crash intersections and engineering action items.

Both of these initiatives are vital to achieving and maintaining safe streets and sidewalks for Alexandria's older residents and all others as well. The Alexandria Office of Performance and Accountability and the Alexandria Police Department analysis of six corridors with numbers of high crash deaths or serious injuries showed that those walking or biking have a higher chance of serious injury when involved in crashes and that older persons are among the most vulnerable.

The goals for this plan align with the City's Comprehensive Transportation Master Plan, www.alexandriava.gov/TransportationPlanning; the Pedestrian and Bicycle Master Plan, www.alexandriava.gov/PedBikePlan; the Alexandria Complete Streets Design Guidelines, www.alexandriava.gov/localmotion/info/default.aspx?id=91090; the Complete Streets Program, www.alexandriava.gov/CompleteStreets; and Vision Zero, www.alexandria.gov/VisionZero.

WE WILL Work to Achieve the Following Goals:

Goal: Assist the City to attain its Vision Zero goal of eliminating all traffic deaths and serious injuries by 2028 through attainment of interim year benchmarks.

Objective: Apply the Complete Streets Design Guidelines to roadway projects through FY21 in locations where safety issues for vulnerable populations have been identified.

Action: Design strategies to attain zero traffic deaths and serious injuries.

Outcome: Initial steps taken to enhance traffic safety in Alexandria.

Goal: Those who walk, drive, and ride a bicycle in Alexandria can do so safely.

Objective: Nine walkability audits and review of Safe Routes to School audits are completed and reports sent to the Complete Streets Team.

Action: Conduct walkability audits.

Outcome: The goals of Vision Zero for pedestrian safety in the three-year work plan are met.

Goal: DASH and WMATA provide safe, reliable, and frequent transit service for people who live, work, and play in Alexandria.

Objective: Participate in the development of the Alexandria Transit Vision Plan – a study being undertaken to improve the City’s current transit network and better serve future travel needs.

Action: Development and beginning implementation of the Alexandria Transit Vision Plan.

Outcome: Improved transit network and service to meet the current and future needs of the City and region.

Goal: Assist the City to attain its Vision Zero goal of eliminating all traffic deaths and serious injuries by 2028 through attainment of interim year benchmarks.

Objective: Apply the Complete Streets Design Guidelines to roadway projects through FY21 in locations where safety issues for vulnerable populations have been identified.

| Action | Tasks and Resources | By whom | By when | Support available/ Needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|--|--|---------|--|--|--|---|--|
| Design strategies to attain zero traffic deaths and serious injuries. | <p>Support Transportation and Environmental Services, the Police Department, and other agencies in implementing Vision Zero action items.</p> <p>Conduct walkability audits.</p> <p>Develop strategies for informing residents about the need for greater compliance with traffic safety laws.</p> | Vision Zero-committed City departments, including Transportation and Environmental Services, Police Department, and Office of Performance and Accountability | FY 2019 | Office of the City Manager FY budget, Transportation and Environmental Services, Transportation Commission, Traffic and Parking Board, Bicycle and Pedestrian Advisory Committee, Commission on Aging, Division of Aging and Adult Services, Alexandria Families for Safe Streets. State police, DMV, VDOT | <p>Need to educate residents about the problems with chronic speeding in a densely populated city.</p> <p>Need for walkability audits to assess problems for older residents and those with disabilities, though the audits cover safety considerations for all users.</p> | <p>Support Vision Zero at Traffic and Parking Board hearings pursuant to changes essential for Vision Zero implementation and encourage community involvement.</p> <p>Work with media partners to more accurately report traffic crashes.</p> <p>City will maintain a comprehensive website to provide information on projects, programs, and progress of Vision Zero.</p> | <p>Right turn on red restrictions installed at ten intersections and pedestrian countdown signals at five intersections.</p> <p>Twenty crosswalks enhanced with high visibility laddered markings.</p> <p>Lead pedestrian intervals installed where there is heavy turning traffic.</p> <p>Two major pedestrian intersections improved.</p> <p>Intersection improvements at ten high-crash sites.</p> | Initial steps taken to enhance traffic safety in Alexandria. |

| Action | Tasks and Resources | By whom | By when | Support available / Needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--------|--|---------|---------|----------------------------|------------------------|---|--|--------------------------------|
| | <p>Monitor progress of Vision Zero action items: establish engineering priorities; establish agreements for data collection and coordination, and public information priorities; and prioritize roadway safety treatments.</p> | | | | | <p>Need for messages and promulgation of them about traffic safety violations, such as speeding and other violations.</p> | | |

Goal: Those who walk, drive, and ride a bicycle in Alexandria can do so safely.

Objective: Nine walkability audits and review of Safe Routes to School audits are completed and reports sent to the Complete Streets Team.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|--|----------|---|--|--|---|---|
| Conduct nine walkability audits using intergenerational teams. | <p>Recruit leaders and volunteers.</p> <p>Identify locations for audits from police and fire records and Vision Zero.</p> <p>Train leaders and volunteers.</p> <p>Acquire vests, clipboards.</p> <p>Collaborate with Safe Routes to School.</p> | <p>Commission on Aging (COA) Transportation Committee</p> <p>Division of Aging and Adult Services</p> <p>Alexandria Complete Streets Team</p> <p>AARP Virginia</p> <p>Alexandria Families for Safe Streets</p> <p>Bicycle and Pedestrian Advisory Committee.</p> | EOY 2021 | <p>Leadership of Commission on Aging.</p> <p>Alexandria Commission on Persons with Disabilities.</p> <p>AARP Walkability Audit Guides for Leaders and Volunteers.</p> <p>Collaboration with Complete Streets Planner.</p> <p>Need assistance of AARP volunteers.</p> <p>At Home in Alexandria volunteers.</p> | <p>The work of Vision Zero will be important in determining locations for audits, either before its work in specific areas or as follow up.</p> <p>Walkability audits are an opportunity to address issues important to the health and safety of all ages and all abilities.</p> | <p>Work with COA Communications Committee to reinforce the need to obey all traffic signals, signs, speed limits, and pedestrian crosswalks,</p> <p>Communications Committee also works with Vision Zero to support and publicize its efforts.</p> | <p>Reports re: walkability audits made to Complete Streets Team.</p> <p>Commission on Aging reports the outcome of walkability audits to City Council if needed to support Vision Zero.</p> <p>Resident safety is enhanced in locations where audits are completed, and City takes action.</p> <p>Reports on areas where speeding is common, as noted in audits, provided to police.</p> <p>Repeated safety messages re: pedestrians and drivers enhance healthy behaviors.</p> | The goals of Vision Zero for pedestrian safety by 2021 are met. |

Goal: DASH and WMATA provide safe, reliable, and frequent transit service for people who live, work, and play in Alexandria.

Objective: Participate in the development of the Alexandria Transit Vision Plan – a study being undertaken to improve the City’s current transit network and better serve future travel needs.

| Action | Tasks and Resources | By whom | By when | Support available/needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|--|---|--|---|--|---|--|
| <p>Development and beginning implementation of the Alexandria Transit Vision Plan.</p> | <p>High levels of community participation and engagement in the development of the plan.</p> <p>Work with study consultant to convene meetings with constituencies that serve older Alexandrians and older adults with disabilities, and to reach individuals and organizations that will influence outcome of the vision plan.</p> | <p>Transportation and Environmental Services, Planning and Zoning, and the Alexandria Transit Company (DASH)</p> | <p>The public and community engagement portion of the planning study lasts through June 2019.</p> | <p>The Commission on Aging, Transportation Commission, WMATA, Environmental Policy Commission, Commission on Persons with Disabilities, neighborhood and civic associations, major city employers, the faith community, and current transit riders</p> | <p>Engagement and participation in the study by COA members and committees. The COA should assist with outreach efforts so that diverse voices are included in the development of the plan.</p> | <p>Widely publicize the plan development and opportunities to participate.</p> <p>Promote the benefits an updated transit vision will provide to Alexandria, even for those residents who do not currently use transit.</p> <p>Assist study coordinators in identifying and connecting with additional stakeholders from underrepresented communities.</p> | <p>Development of a plan that accurately captures the transit needs of the community.</p> <p>Approval of the plan by the City Council with a commitment to provide funding to begin implementation.</p> | <p>Improved transit network and service to meet the current and future needs of the city and region.</p> |



Communications

WE ENVISION: Information about services and programs is readily available and accessible in a variety of formats and venues for older residents and older adults with disabilities, their families and caregivers, and local organizations and businesses.

WE LEARNED: The critical element in determining successful outcomes in any venture is the access to complete, relevant, and accurate information. In forums held by the Commission on Aging (COA) prior to the development of the Strategic Plan on Aging in 2013 – 2017, it became very clear that many older residents did not know about the programs and services available to them—making it difficult to successfully manage their older years. While progress has been made on this effort, more recent listening sessions have shown that there are still gaps in knowledge about services and programs.

For this reason, the COA made communications and outreach its first priority for its original strategic plan. Because communications and outreach are made more complicated by Alexandria’s remarkable diversity, unremitting attention must continue to be given to its many distinct audiences.

As noted in the health section of this plan, for the Division of Aging and Adult Services (DAAS), assuring that older residents and those with disabilities know what is available to them, is a top priority. It has been the highest priority for the Older Americans Act and Area Agencies on Aging since the Act’s creation 53 years ago. The DAAS has staff members who speak Spanish, Amharic, and Korean to reach older adults and their caregivers who have limited English proficiency.

For the DAAS and COA, creating effective messages and programs and increasing outreach have been major undertakings since 2013, and while significant enhancements in communications have been made, the outreach to older adults and those with disabilities must be an intense and ongoing effort. It is a goal of this plan to find innovative ways to help older residents recognize the resources that are available for planning their future and their care.

A special challenge for Alexandria is reaching out to its immigrant communities, as many older immigrants are not able to speak or to read English. In these communities,

focusing on families is essential, as the adult children may be proficient in English and act as interpreters for their parents. At a recent listening session conducted in Spanish at St. Martin de Porres Senior Center, participants were provided informational materials in Spanish, but they also wanted information in English to offer to their English-speaking adult children.

Immigrant communities are sometimes fearful about using public services due to the political environments of the countries from which they emigrated and can be severely exacerbated in this country due to the toxic conditions around immigration issues in the current political climate. In some cases, adult children, who are busy working and raising children and acting as caregivers for their parents, can help to overcome their parents' resistance to the services available in the City if they have the relevant information. For this reason, the communications and outreach approach will focus across the generations in immigrant communities and all others as well.

Communications and outreach must cover the broad range of issues that are encompassed in the domains. Planning for the cross-cutting nature of communications and outreach to achieve the goals of the Age-Friendly Plan will be essential.

WE ARE: Many communications vehicles are available in the City, and the COA and the DAAS, as required by the original strategic plan, focused on taking advantage of them to the greatest extent possible. Columns on issues relevant to older adults and their families appear routinely in the local newspapers -- the *Alexandria Gazette*, the *Alexandria Times*, and *Zebra*.

Aging Well in Alexandria, a monthly newsletter, is emailed to over 70 congregations in Alexandria and is co-written by the DAAS, Senior Services of Alexandria (SSA), and At Home in Alexandria (AHA). Volunteers from SSA stock the "Senior Corners" in Alexandria public libraries with information about City services and programs (transportation options, tax credits for older home owners, rent relief for low-income seniors, recreational and educational programs, and many other topics important to older residents). Rebuilding Together Alexandria and Volunteer Alexandria also share information through their channels of communication.

SSA makes very important contributions to communications directed to older adults and their families in the City. It produces the monthly SSA cable television program, "Senior Living in Alexandria," which concentrates on interviewing individuals with expertise in aging issues.

SSA features a monthly Speaker Series on topics such as caregiving, affordable housing, transportation, and recreational and wellness programs. It also sponsors Senior Law Day as part of the series. SSA encourages its audiences to stay involved in the community as volunteers.

In recognizing that outreach can be most effective when it is hands-on and provided in the context of a specific community with shared interests, the COA for several years

discussed the possibility of creating a senior ambassador program. Through this program, volunteers would be trained about the many services and programs available in the City and how to access them. They would then share this knowledge with their assigned community, which can be a church group, a condo or apartment complex, a senior center, a neighborhood, a club, a pickle ball team—the possibilities are many.

SSA stepped in and agreed to recruit and train ambassadors and to manage the program. In a short time SSA has assigned 35 ambassadors to a variety of Alexandria's communities. The senior ambassadors convey information through meetings, community publications and one-on-one sessions. They are a great resource and are so well informed that they can offer immediate assistance to members of their community who need help in locating the City's resources.

WE WILL Work to Achieve the Following Goals:

GOAL: Communication about programs and services available to older Alexandrians and adults with disabilities is readily accessible to all in a variety of formats and languages and is presented in many and diverse venues.

OBJECTIVE: Increase outreach through various media and educational events on programs and services available to older adults and adults with disabilities in Alexandria, with a focus on minority communities.

ACTION: Develop a strategic, inclusive approach to communicating information (and identifying gaps) about relevant programs and services for older residents and adults with disabilities.

OUTCOME: Alexandria's older adults and adults with disabilities know about the supportive programs and services available to them.

GOAL: The Senior Ambassador Program is implemented in communities throughout the City.

OBJECTIVE: Increase the number of ambassadors from 35 to 60 by 2021.

ACTION: Recruit and train senior ambassadors from all areas of the city, with special focus on minority communities.

OUTCOME: Older adults and their families are aware of the services and programs available in the City.

Goal: Communication about programs and services available to older Alexandrians and adults with disabilities is readily accessible to all in a variety of formats and languages and is presented in many and diverse venues.

Objective: Increase outreach through various media and educational events on programs and services available to older Alexandrians and adults with disabilities, with a focus on minority communities.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|---|-------------|--|---|---|---|--|
| <p>Develop a strategic, inclusive approach to communicating information (and identify gaps) about relevant programs and services for older residents and adults with disabilities.</p> | <p>Track extensive outreach to older adults and adults with disabilities, with special attention to minority communities, by Department of Aging and Adult Services staff.</p> <p>Assess outreach of current providers of communications for older adults and adults with disabilities to identify target audiences, distribution methods, and effectiveness.</p> <p>Use surveys to assess access to information about services and programs by older residents and adults with disabilities.</p> | <p>Commission on Aging, Division of Aging and Adult Services, Senior Services of Alexandria, At Home in Alexandria.</p> | <p>2021</p> | <p>Alexandria Health Department, Office of Housing, Fire, Police and Sheriff Departments, the Department of Parks, Recreation and Cultural Activities, Department of Transportation and Environmental Services, At Home in Alexandria, Alexandria Boards and Commissions, Neighborhood associations, faith-based communities</p> | <p>Communications encompass the entirety of age-friendly domains, complicating the work of providing coverage of all important information.</p> | <p>In various media, including social media, seek repeated opportunities to publicize issues affecting older residents and adults with disabilities and the age-friendly plan activities relevant to them.</p> <p>Reach all generations via varied communication vehicles and recognize the importance of family members as conveyors of information.</p> | <p>Increased participation by underserved communities in opportunities (educational meetings, listening sessions) to receive information about services and programs.</p> | <p>Alexandria's older adults and adults with disabilities know about the supportive programs and services available to them.</p> |

| Action | Tasks and Resources | By Whom | By When | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--------|---|---------|---------|---------------------------|---|---|--|--------------------------------|
| | <p>Identify and implement needed improvements for outreach to targeted populations, with special attention to those who may be currently underserved.</p> <p>Enlist existing programs to educate older residents and adults with disabilities, for example, the Senior Ambassador Program, At Home in Alexandria, and faith-based communities.</p> <p>Widely circulate easy-to-understand instructions in varied languages on how to use “Call, Click, Connect,” the City website, and important telephone numbers.</p> <p>Develop two inter-generational communication events.</p> | | | | <p>Alexandria’s diversity and the many languages spoken by residents complicate communications efforts.</p> | <p>Follow up assessment of current providers of information with increased outreach to fill any gaps.</p> <p>Increase availability of translated information about programs and services for older adults and adults with disabilities.</p> <p>Increase Senior Corners with their abundance of information about programs and services.</p> | <p>Five community/civic groups recruited to help educate older residents and adults with disabilities in minority communities.</p> <p>Increased outreach and media attention to age-friendly activities and accomplishments that inform residents about ways to enhance their welfare.</p> | |

Goal: The Senior Ambassador Program is implemented in communities throughout the City.

Objective: Increase the number of Ambassadors from 35 to 60 by 2021.

| 35Action | Tasks and Resources | By what date will the action be done? | By whom? | Support available/ needed | Special considerations | Needed elements for communication planning | Results: increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|---|---------------------------------------|--|---|---|--|---|--|
| <p>Recruit and train senior ambassadors from all areas of the city, with special focus on minority communities.</p> | <p>Communicate with ambassadors via weekly newsletter, quarterly meetings.</p> <p>Recruit new ambassadors, with special focus on minority communities.</p> <p>Train new ambassadors with comprehensive information about services available to older adults in the City.</p> <p>Provide ongoing training, as needed.</p> <p>Develop information for dissemination to relevant audiences to attract new ambassadors.</p> | <p>EOY 2021</p> | <p>Senior Services of Alexandria</p> <p>Division of Aging & Adult Services</p> <p>Commission on Aging</p> <p>Faith Communities</p> <p>Volunteer Alexandria</p> <p>(Younger ages welcome as ambassadors.)</p> | <p>Commitments from communities that would benefit from Senior Ambassador Program.</p> <p>Facilities to train new ambassadors.</p> <p>Support of publications to advertise and recruit new volunteers.</p> <p>Support of current ambassadors to recruit others.</p> | <p>It takes special effort to identify prospective senior ambassadors in immigrant communities.</p> <p>Continued need to recruit new ambassadors.</p> | <p>Communicate the need for additional ambassadors and engage listservs, local media, local organizations.</p> <p>Reach out across the generations via various media to enlist ambassadors and to inform families and others about the program.</p> <p>Develop a procedure for gathering data about the numbers of people being informed and requesting information.</p> <p>Create reports about numbers of people requesting and receiving services through the ambassador program.</p> | <p>Increased capacity of persons served to understand the resources, programs and services available to them.</p> <p>Increased number of ambassadors trained.</p> | <p>Older adults and their families are aware of the services and programs available in the City.</p> |



Community and Health Services

WE ENVISION: Community and health services are widely available to accommodate the expectations and needs of older adults and adults with disabilities, and support their caregivers.

WE LEARNED: Alexandria is generally supportive of health and community services, and has been sensitive to the impact of the City's budget reductions in recent years, thereby preventing cuts in these services.

The results of community assessments, including the 2016 AARP survey of 500 Alexandrians 50 years of age and over, the AARP Livability Index, as well as the views of participants in listening sessions and a workshop, are generally positive about health and community services available in the City. AARP's 2016 survey, showed significant confidence in the availability of well-maintained hospitals and health care facilities, as well as affordable health and wellness programs and classes.

The AARP Livability Index gives the city a 79 percent rating in health, the highest rating for Alexandria among the Index categories. Access to and quality of health care receives high marks. The Index shows, however, that patient satisfaction with hospital care is not on a par with the other ratings.

At the community engagement workshop, concerns were raised about the lack of awareness of the services available, particularly among those who do not speak English. Participants raised the issue that health services may be inaccessible to some because they lack transportation. Concerns were also expressed about the lack of dental services for lower-income residents and in nursing and assisted living facilities. Listening sessions in senior centers and in subsidized independent living facilities also noted the lack of dental care available to those with lower incomes.

The AARP survey also demonstrated that many respondents are not knowledgeable about the availability of affordable home care services; 45 percent responded that they

were not sure about their availability or refused to respond. (Refusals were minimal.) When asked about a service that provides people to help seniors easily find and access health and supportive services, 39 percent responded that they were not sure or refused.

Advocates for the aging and providers of community-based long-term supports and services face a conundrum. Many older adults are not familiar with the services available to them and their costs and are faced with the need to make critical but hasty decisions when a health crisis occurs. In a Medicare & Medicaid Research Review, the authors state that, "Although preparing for future care needs has become somewhat of an expectable developmental task of later life, few older adults actually engage in such planning." (Sorenson and Pinquart, 2000) The review describes those whose planning, or lack thereof, was analyzed as "scramblers, reluctant consenters, wake-up call decision-makers, and advance planners." Advance planners were a decided minority. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4193628/>.

The Commission on Aging and the Division of Aging and Adult Services are very familiar with this tendency of older residents to resist planning until an emergency occurs. In 2012, when the Commission and Division sponsored forums to assess the needs of older residents, attended by over 400 older Alexandrians, attendees consistently recommended that the City create services that already exist.

For the Division of Aging and Adult Services, assuring that older residents and those with disabilities know what is available to them is a top priority. It has been the highest priority for the Older Americans Act and Area Agencies on Aging since the Act's creation 53 years ago. The Division has staff members who speak Spanish, Amharic, and Korean to reach older adults and their caregivers who have limited English proficiency.

For the Division and Commission, creating effective messages and programs and increasing outreach have been major undertakings since 2013, and some progress has been made. Finding innovative ways to help older residents recognize the resources available for planning their future and their care will be a goal of this plan.

The number of older adults with behavioral health problems needing therapy and intensive case management services continues to increase. The wait for intensive case management services may be as long as a year. As one of their many responsibilities, staff in the Division of Aging and Adult Services conducted 89 emergency consultations, clinical evaluations, capacity assessments, and screenings for mental health hospitalizations in FY 2016 and 150 in Fiscal 2017, an increase of 41 percent. Consequently there is often a delay in the Division's ability to accept new clients and frequently this means that only the individuals with the most acute needs can be served. The increase in assessments has often meant that people wait a very long time for needed service.

WE ARE: As noted in the introduction and other domains in this plan, Alexandria’s leaders in health care understand that the social determinants of health must be accounted for in their planning. With this plan’s social determinants lens, it is clear that the other domains are relevant to health-related issues. For that reason, the goals for health and community services are cross-cutting, as housing, transportation, communications, employment, and civic engagement have a direct impact on health.

As Alexandria’s Partnership for a Healthier Alexandria points out in its Community Health Improvement Plan, the following may contribute to health inequities among Alexandrians: geography and access to transportation; housing type and availability; income; social isolation; race; limited-English proficiency, income disparities; and stigmatization of differences. The Partnership has determined that access to care for all residents of Alexandria is one of its priorities. The Partnership has also chosen as priorities: (1) “Aging Well in Place,” with the specific goal of enabling “older adults to age in their place of choice with appropriate services and supports;” and (2) access to affordable care, insurance coverage, and quality healthcare providers for all Alexandria residents, including the aging. These priorities of the Partnership are shared with the Commission on Aging and the Department of Aging and Adult Services and focus attention on those communities most likely to suffer health inequities: minorities and immigrants.

The Alexandria Health Department and Neighborhood Health provide health services to the uninsured on a sliding scale. However, a very significant problem for older Alexandrians, and others as well, has been the very restrictive eligibility in Virginia for Medicaid, and for other health supports. Through intense efforts by the Governor, AARP, the City and other jurisdictions in Virginia, the Virginia Chamber of Commerce, the Virginia Hospital and Healthcare Association, the Northern Virginia Aging Network and other organizations, the Virginia General Assembly in 2018 enacted Medicaid Expansion. Even with this great improvement, efforts must still be made to ensure access to providers of care and to address specific diseases and health risks of the older population.

Of special concern to the Commission on Aging and the Division of Aging and Adult Services is the quality and affordability of nursing homes and assisted living facilities in Alexandria and nearby communities. Complaints about the quality of some facilities have been reported. The Commission and DAAS, which are represented in the Northern Virginia Aging Network, supported its proposal for the 2018 session of the Virginia General Assembly to substantially increase funding of the ombudsman program in the Commonwealth, where as many as 25 additional ombudsmen are needed.

In Alexandria the following services are available for older adults and adults with disabilities, though many have eligibility requirements:

- Homemaker and Personal Care Program.
- Medicaid Waiver Personal Care for people who would otherwise be in nursing homes.

- Adult Day Care.
- Full-Time Chronic Disease Nurse in the Division of Aging and Adult Services.
- An array of transportation services, to include grocery shopping, Senior Taxi and DOT.
- Meals on Wheels, by Senior Services of Alexandria (SSA).
- Liquid nutritional supplements.
- Case management and counseling service for low-income older adults and adults with disabilities in the City; one social worker holds office hours at the Ladrey House.
- Adult Protective Services.
- Call Reassurance Program.
- Friendly Visitor Program (SSA).
- Grocery Shopping and Delivery Program (SSA).
- Also available are screenings for nursing homes (Medicaid), assisted living auxiliary grants (Virginia) and Medicaid waivers for persons who would otherwise be in a nursing home.
- Mental health counseling and treatment and mental health capacity assessments are offered by DAAS.
- Link to Life, MedicAlert +Alzheimer’s Association Safe Return, and Project Lifesaver.
- Legal services and multicultural services are also available in the City; and
- PACE (Programs of All-Inclusive Care for the Elderly) offered by INOVA Hospital.

Appendix E provides information on current income guidelines for programs for elders.

WE WILL Work to Achieve the Following Goals:

Goal: Older Alexandrians, and adults with disabilities, including those in minority communities, understand the health and community services available to them.

Objective: Use of information about programs and services for older adults and adults with disabilities is increased.

Action: Outreach to older residents about health and community services, with special attention to minority communities.

Outcome: Alexandrians have increased understanding of resources available to them and are able to make plans for their long-term care preferences.

Goal: Alexandrians with dementia and their caregivers are accorded respect and comfort, and are integrated into City life.

Objective: Alexandria has taken significant steps to become a dementia-friendly City and to ease the burdens on those with dementia and their caregivers.

Action: Build a team that takes the initial steps to create a Dementia-Friendly Alexandria.

Outcome: Alexandria is an increasingly dementia-friendly City for those with dementia and their caregivers.

Goal: Alexandria's older adults and adults with disabilities know how to prepare for an emergency.

Objective: Increase outreach about emergency preparedness through media channels and other communications vehicles.

Action: Develop and execute a communication plan to reach older adults and adults with disabilities with information that enables them to prepare for emergencies.

Outcome: Older adults and adults with disabilities are prepared to manage emergencies.

Goal: Enhance the availability of mental health case management services for older adults.

Objective: Increase the number of specialized case managers for older adults with serious mental illness and co-occurring medical diagnosis from one to two.

Action: One additional full-time specialized case manager will be available to serve older adults with serious mental illness and co-occurring medical diagnoses.

Outcome: The number of older adults who will be served will double.

Goal: Enhance the availability of mental health therapy and emergency assessments, including capacity assessments, for older adults.

Objective: Increase the availability of therapists with specialized geriatric experience and increase the Division's ability to provide capacity assessments for older adults.

Action: One additional full time mental health therapist with geriatric expertise will be available to serve older adults with serious mental illness and co-occurring medical diagnoses.

Outcome: Older adults with serious mental illness and co-occurring medical diagnoses who need therapists will be served in a timely manner.

Goal: Older Alexandrians and adults with disabilities, including those in minority communities, understand the health and community services available to them,

Objective: Increased use of information about programs and services for older adults and adults with disabilities.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|--|-------------|--|--|---|---|--|
| <p>Conduct outreach to older residents and adults with disabilities about health and community services, with special attention given to minority communities.</p> | <p>Develop methods for reaching families to encourage communication and improve their understanding of community services needed to plan for consequences of health issues.</p> <p>Senior ambassadors will inform communities about health and community services.</p> <p>Include opiate addiction and treatment in outreach.</p> | <p>Division of Aging and Adult Services, Commission on Aging, Senior Services of Alexandria, At Home in Alexandria</p> | <p>2021</p> | <p>Department of Community and Human Services, Partnership for a Healthier Alexandria, Alexandria Senior Centers and independent living facilities, ALIVE, Department of Transportation, Catholic Charities, Lutheran Social Services, Ethiopian Community Development Center, faith-based institutions, Alexandria Health Department, Neighborhood Health</p> | <p>There are both language and cultural obstacles to developing effective outreach to those who are new immigrants and not able to read or understand English.</p> | <p>Need to develop effective communications strategy for engaging local government agencies, non-profits, Alexandria boards and commissions, and faith-based institutions, in outreach via their regular activities.</p> <p>Develop media plan for increasing outreach to minority communities.</p> <p>Include all generations in communication planning.</p> | <p>Increased information available to minority communities about health and community services.</p> <p>Over three-year period, evidence shows increased use of services by individuals in minority communities.</p> <p>Attendance increases in events sponsored for minority communities, indicating increased engagement in the community.</p> | <p>Alexandrians have increased understanding of resources available to them and make plans for their long-term care preferences.</p> |

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--------|--|---------|---------|---------------------------|------------------------|--|--|--------------------------------|
| | <p>Identify health and community services issues in listening sessions.</p> <p>Increase availability of translated information.</p> <p>Include information about various recreation programs and classes for improving balance.</p> <p>Collaborate with organizations sponsoring events for diverse communities.</p> | | | | | | | |

Goal: Alexandrians with dementia and their caregivers are accorded respect and comfort, and are integrated into City life.

Objective: Alexandria takes significant steps to become a dementia-friendly City and eases the burden on those with dementia and their caregivers.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|---|--|---------|--|--|---|--|--|
| Build a team that takes the initial steps to create a Dementia-Friendly Alexandria. | <p>Identify organization to lead the team.</p> <p>Create dementia-friendly team.</p> <p>Convene relevant community leaders, and caregivers and persons with dementia.</p> <p>Consider for the team, leaders in health and long-term care, social services, faith-based leaders, legal and financial services, businesses, first responders.</p> <p>Team determines interest in using Dementia Friendly America Toolkit.</p> | Commission on Aging, Division of Aging and Adult Services, (DAAS), AARP Virginia, Leading Age Virginia, Virginia Department of Aging and Rehabilitative Services | 2021 | At Home in Alexandria, Senior Services of Alexandria, Department of Human and Community Services, Adult Day Care Center, AARP, Alzheimer's Association, Catholic Charities, Lutheran Social Services, National Association of Area Agencies on Aging, Silverado, Graceful Care, Insight Memory Center, Elder-Link, Goodwin House | It can be difficult to involve businesses and financial institutions, but they are important to dementia friendliness. | Plan for repeated media attention to dementia friendliness, to educate the public about dementia and integrate those with dementia and their caregivers into the community. | <p>Development of a team.</p> <p>Consistent media attention.</p> <p>Increased participation in support groups.</p> <p>Increased activities for those with dementia and their caregivers: café time, arts, music, other activities.</p> <p>Memory café is launched in Alexandria.</p> | Those with dementia and their caregivers become aware that Alexandria is an increasingly dementia friendly city. |

| Action | Tasks and Resources | By Whom | By When | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--------|---|---------|---------|---------------------------|------------------------|--|--|--------------------------------|
| | <p>AARP Virginia volunteers conduct AARP Prepare to Care sessions.</p> <p>Communicate the availability of caregiver support groups.</p> <p>Identify providers who can help develop caregiver training.</p> <p>Identify resources for caregivers, including respite, opportunities for activities, such as sharing arts and musical events with their care recipients.</p> | | | | | | | |

Goal: Alexandria’s older adults and adults with disabilities know how to prepare for an emergency.

Objective: Increase outreach about emergency preparedness by 20 percent through media channels and other communications vehicles.

| Activities | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|--|--|-------------|--|--|---|---|--|
| <p>Develop and execute a communication plan to reach older adults and adults with disabilities with information that enables them to prepare for emergencies.</p> | <p>Commission on Aging members, Senior Ambassadors, and RSVP volunteers distribute emergency preparedness materials at programs, senior residences, listening sessions, recreation centers, and other outlets.</p> <p>Distribute emergency services materials, including the Readiness Wheel for Seniors and SMART 911 through senior corners at libraries and other venues.</p> | <p>Office of Emergency Management, Commission on Aging, Division of Aging and Adult Services</p> | <p>2021</p> | <p>Alexandria Health Department, Office of Housing, Fire, Police and Sheriff Departments, the Department of Parks, Recreation and Cultural Activities, Senior Ambassador Program, At Home in Alexandria, Alexandria boards and commissions, neighborhood associations, faith-based communities</p> | <p>The communications plan for the Age-Friendly Plan will be important in this effort.</p> | <p>Develop and execute communications plan.</p> <p>Craft articles about SMART 911 and emergency preparedness for <i>Alexandria Times</i>, <i>Alexandria Gazette</i>, <i>Zebra</i> and Aging Well in Alexandria, the newsletter sent to faith communities.</p> | <p>Increased numbers of older adults and adults with disabilities are enrolled in SMART 911.</p> <p>Increased participation by many organizations increases opportunity for older adults to learn about emergency preparedness.</p> <p>Engagement of RSVP volunteers increased.</p> | <p>Older adults and adults with disabilities are prepared to manage emergencies.</p> |

Goal: Enhance the availability of mental health case management services for older adults.

Objective: Increase the number of specialized case managers for older adults with serious mental illness and co-occurring medical diagnosis from one to two.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|--|--|---------|---|---|---|---|---|
| Increase the availability of Mental Health [MH] Case Management Services for Older Adults with serious mental illness [SMI] and one or more co-occurring chronic medical conditions by 100% by adding a bilingual Family Services Worker II position (dedicated to MH Case Management with the Older Adult Clinical Services Team). | This position works with persons with SMI and co-occurring medical diagnoses that increase their risk. The Virginia Department of Behavioral Health and Developmental Services [DBHDS] emphasizes MH case management services to provide increased medical care coordination with primary care physicians in order to improve the general health and reduce risks to persons with SMI. | Division of Aging and Adult Services and Commission on Aging | FY 2020 | DCHS Center for Adult Services [CAC], especially Mental Health Outpatient and Emergency Services. | The Virginia Department of Behavioral Health and Developmental Services recommends that persons with SMI and co-occurring chronic medical needs are being served through a model of case management coordination of care. | Develop a brochure regarding services provided. | This position would increase Targeted Case Management Services for Older Adults with SMI and co-occurring chronic medical diagnosis by 100%. The program's current capacity is 22 persons. It will increase to 44 persons with SMI and co-occurring, complex medical diagnosis being served. | Reduces the wait list for Persons with SMI and co-occurring medical diagnosis. Increases supports to other DCHS programs in the CAC needing assistance with this population. |

Goal: Enhance the availability of mental health therapy and capacity assessments for older adults.

Objective: Increase the availability of therapists with specialized geriatric experience and increase the Division’s ability to provide capacity assessments for older adults.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|---|----------------|---|--|---|--|---|
| <p>Enhance the availability of therapy services and emergency/ capacity assessments for older adults to address the increased demand for emergency and capacity assessments that has directly affected the availability of mental health therapy services and ability to respond to increased demand for state hospital discharge planning responsibilities that adds to clinician caseload.</p> | <p>Mental health therapy for individuals, families and caregivers by a licensed provider.</p> <p>Increased availability for emergency and capacity assessments in response to the increased need and demand for this service requires a license and training in assessment of mental health emergencies and capacity assessments.</p> | <p>Division of Aging and Adult Services, Commission on Aging.</p> | <p>FY 2020</p> | <p>The Center of Adult Services Programs, including Mental Health Out-Patient Services.</p> | <p>The demand for emergency assessments and capacity evaluations has increased from the APS and other community requests as well as with in the Center of Adult Services as clients age in place. In addition long use of typical neuroleptic medications commonly used for persons with mental illness increases the likelihood of developing neurocognitive impairment in the later years.</p> | <p>Brochure illustrating services provided.</p> <p>Provide information regarding increased services provided to collateral services for older adults.</p> | <p>Increased ability to provide mental health therapy services to those requesting, and increased availability for emergency and capacity assessments as well as providing the support needed to address state hospital discharge planning requirements.</p> | <p>Mental health therapy services will be more available for older adults and the wait list will be reduced.</p> <p>Older adults needing semi-urgent capacity assessments or therapy will be served in a timely manner.</p> |



Civic Engagement and Employment

WE ENVISION: Employment services are available for older Alexandrians, a variety of volunteer roles are offered, and innovative programs are developed to engage older residents in the community.

WE LEARNED: Alexandria has a well-deserved reputation for civic participation (as the AARP Livability Index score reflects--in low-cost Internet access, civic organizations that can work to effect change and a high voting rate). Older residents are well-represented in a variety of volunteer activities, including those that support older adults and adults with disabilities who need assistance. Alexandria residents can be involved in over 70 boards and commissions, and many non-profit organizations in the City are sustained by volunteers, including older volunteers.

It is important, however, that older adults are actively recruited as volunteers and their assignments comport with their skills and experience if that is their choice. Volunteer opportunities are available that serve older adults with the non-profit Senior Services of Alexandria, At Home in Alexandria (the village), the Adult Day Care Center, the Department of Aging and Adult Services, and the Department of Community and Human Services, all of whom actively recruit volunteers, and are always seeking more volunteer assistance. AARP Virginia has been very helpful in recruiting its members as volunteers and has been successful in placing them in Alexandria's non-profit organizations. Volunteer Alexandria and RSVP also serve as resources for matching volunteers with appropriate assignments that serve older adults.

Volunteers recruited to support aging residents need not be older themselves. High school students, among their other volunteer activities, assist in delivery of Meals on Wheels and in shoveling snow for older adults in the City. A mix of generations serves in many capacities for the organizations mentioned above. When both young and older share volunteer responsibilities, they often learn about the talents of various age groups, enjoy camaraderie across generational lines, and enhance their capacity for empathy and concern for those whose circumstances are different from their own.

The AARP Livability Index score for employment is less satisfactory than that for civic engagement. It places Alexandria in the middle rank, in comparison to communities across the country, in income inequality and access to employment, a ranking that indicates that improvement is needed. In the 2016 AARP survey of Alexandrians 50-

plus, a range of flexible job opportunities and job training opportunities for older adults were viewed as low, as a “bottom community feature,” behind only affordable housing and affordable parking as problem areas for the City.

It is well-established fact that those fifty years of age and older face obstacles when they seek employment. The evidence of discrimination is abundant: A Reuters column in September 2016 stated that, “Six years after the great recession ended, jobless older workers are the forgotten story of the economic recovery. U.S employers are creating hundreds of thousands of new jobs every month, but millions of older workers who want a job cannot find work.” <https://www.reuters.com/article/us-column-miller-unemployment/column-older-and-jobless-the-u-s-recoverys-forgotten-story-idUSKCN11E297>

Many older job seekers need assistance in their search for employment. Their confidence is often shaken, and they may need assistance in identifying the appropriate positions to seek in a changing employment environment and in creating an effective resume. The length of time it takes for older workers to find employment may cause them to stop their search.

WE ARE: Alexandria is beset with stresses on its budget, but its Mayor, City Council, and City Manager are supportive of the many programs and services provided by the City and protect them against severe cuts. However, more attention and funding are needed to improve the ability of older Alexandrians to find employment.

In May 2013, the “Experienced Worker Program: 55+” was created, targeting workers 55 and older in the City who were seeking to re-enter the workforce. It was developed through a collaborative partnership between the City of Alexandria Department of Community and Human Services JobLink (now known as the City of Alexandria Workforce Development Center/WDC) and the Division of Aging and Adult Services (DAAS).

WDC staff presented weekly orientation sessions and met with program participants to acquaint them with the program and obtain background information about them prior to their enrollment as a WDC client. Once the job seekers had become clients, they would remain with the same employment counselor for the duration of their job search.

Additionally, staff for the Experienced Worker Program was responsible for:

- Advising WDC staff on a variety of topics such as recognizing abuse/neglect/exploitation among clients, community resources available to job seekers as they continue with their search, etc.
- Building and maintaining a resource library and networking in the community for additional resources.

- Educating employers on the benefits of hiring experienced workers and working with this group to "mine" opportunities for senior employment.
- Participating in outreach/education sessions for the community at recreation centers and other sites throughout the city.

In Fiscal Year 2015, the WDC faced a budget reduction resulting in the loss of five full-time employees within the Adult Services Program. As a result, the WDC could no longer offer case management for the general public. Any job search for the older population would have to be self-directed through the WDC's Career Center.

In an attempt to mitigate the loss, the WDC went through a re-organization, which included the implementation of career readiness workshops geared towards the 50+ population; the strengthening of the relationship with the National Council on Aging; the creation of a virtual Job Board; the development of a monthly electronic newsletter; and the assignment of staff to serve as liaison to the Commission on Aging's Economic Development Committee, which created a space on the WDC webpage specifically for the 50+ population. WDC's liaison attends Economic Development Committee monthly meetings and makes presentations to senior groups in the City.

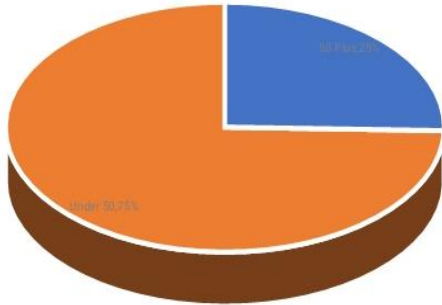
In today's economy, with the rise of both healthcare costs and living expenses, older workers, many of whom have already retired or are approaching retirement, find that they must work for a longer period or re-enter the workforce. Older adults can benefit greatly by having a workforce specialist dedicated to them, providing guidance about a workforce culture that has changed greatly since the last time they had to write a resume or interview for a job. They need specialized assistance in preparing themselves for a very different employment environment and removing barriers not faced by any other group.

Some older residents of Alexandria face difficult decisions as they determine where they will live as they age. The cost of living in Alexandria can cause some to leave the City, and for those who face unemployment, remaining in the city may become impossible. From the perspective of this plan's vision, this is a very undesirable outcome.

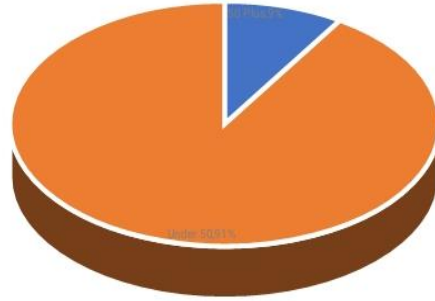
The City Council, for FY 2019, approved funding for a half-time position that would assist older residents seeking employment. Though this is a great step forward, a full-time employee is essential for providing comprehensive support to job seekers who face the obstacles that older job seekers often experience.

Cases served and placed on Jobs at WDC

50 Plus vs Under 50s for FY2014



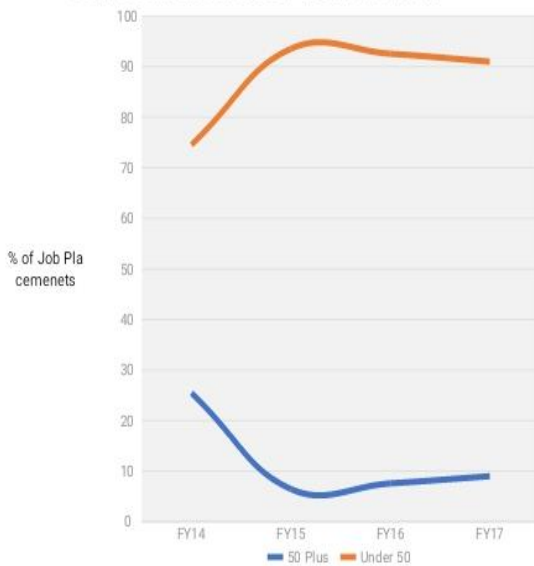
50 Plus vs Under 50s for FY2017



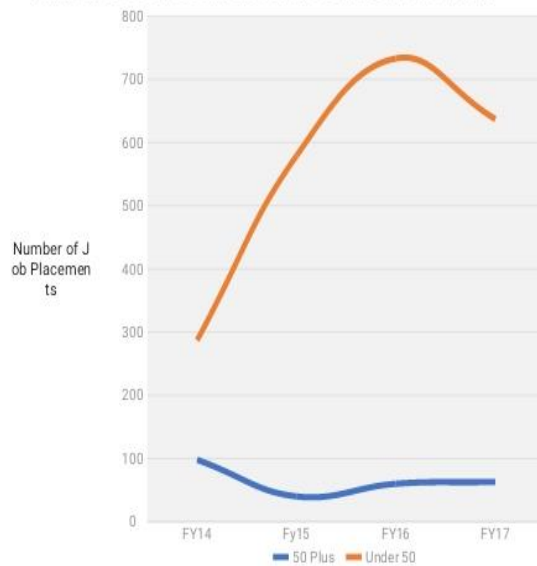
2.5 out of every 10 50+ workers placed into a job in FY14, as opposed to 0.9 out of every 10 in FY17.

Trend for Job Placements FY2014 to FY2017

Job Placements at WDC FY2014 to FY2017



Number of Job Placements at WDC FY2014 to FY2017



There has been a decrease of 16% in Job placements for 50+ participants from FY14 to FY17

WE WILL Work to Achieve the Following Goals:

Goal: Encourage volunteerism and recruit volunteers to support programs for older adults.

Objective: Highlight volunteer opportunities each month, identify needs for additional volunteers serving older adults, and fill gaps.

Action: Identify and highlight local volunteer opportunities for older adults and recruit volunteers of all generations for programs that serve older adults.

Outcome: More active older adults who volunteer and stronger support for volunteer programs and services.

Goal: Older job seekers in Alexandria have dedicated support.

Objective: The Workforce Development Center is assigned a full-time employee to support employment and training opportunities for older job seekers.

Action: Advocate for the reinstatement of the full-time position in the Workforce Development Center (WDC) that supported employment of older residents of Alexandria who were seeking jobs.

Outcome: FTE reinstated to support older job seekers in obtaining employment and mature workers accessing services through the one-stop system.

Action: Increase employer awareness and incentives to employ 50+.

Outcome: Increase in business interest in employing older Alexandrians.

Goal: Encourage volunteerism and recruit volunteers to support programs for older adults.

Objective: Highlight volunteer opportunities each month, identify needs for additional volunteers serving older adults, and fill gaps.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication planning | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|---|---|---------------------|---------|--|---|---|---|--|
| Identify and highlight local volunteer opportunities and recruit volunteers for programs that serve older adults. | <p>Create consolidated list of volunteer opportunities.</p> <p>Resources include Volunteer Alexandria, City website, RSVP, AARP, local media.</p> <p>Identify programs serving older adults that need volunteers.</p> <p>Encourage younger volunteers to engage with older residents.</p> | Commission on Aging | 2019 | AARP, Division of Aging and Adult Services (DAAS), Senior Services of Alexandria (SSA), Rebuilding Together, At Home in Alexandria, Volunteer Alexandria | <p>List should be broad and not limited by “ageism” assumptions.</p> <p>Identify intergenerational opportunities.</p> | <p>Identify a variety of media outlets and establish scheduled features on volunteer opportunities and benefits to older adults. Shared leadership of submission of volunteer opportunities.</p> <p>Schedule feature articles about specific programs serving older adults, emphasizing importance to those served as well as satisfaction of those volunteering.</p> | <p>Increased participation by volunteers in programs identified.</p> <p>Benefits include greater opportunities for socialization and community involvement and reduced isolation.</p> <p>Adequate support for volunteer-based programs serving older adults.</p> <p>Increased participation by youth volunteers.</p> <p>Non-profits that serve older adults can expand programming and improve support.</p> | More active older adults who volunteer, intergenerational involvement in volunteering to serve older adults, and stronger support for volunteer programs and services. |

Goal: Older job seekers in Alexandria have dedicated support.

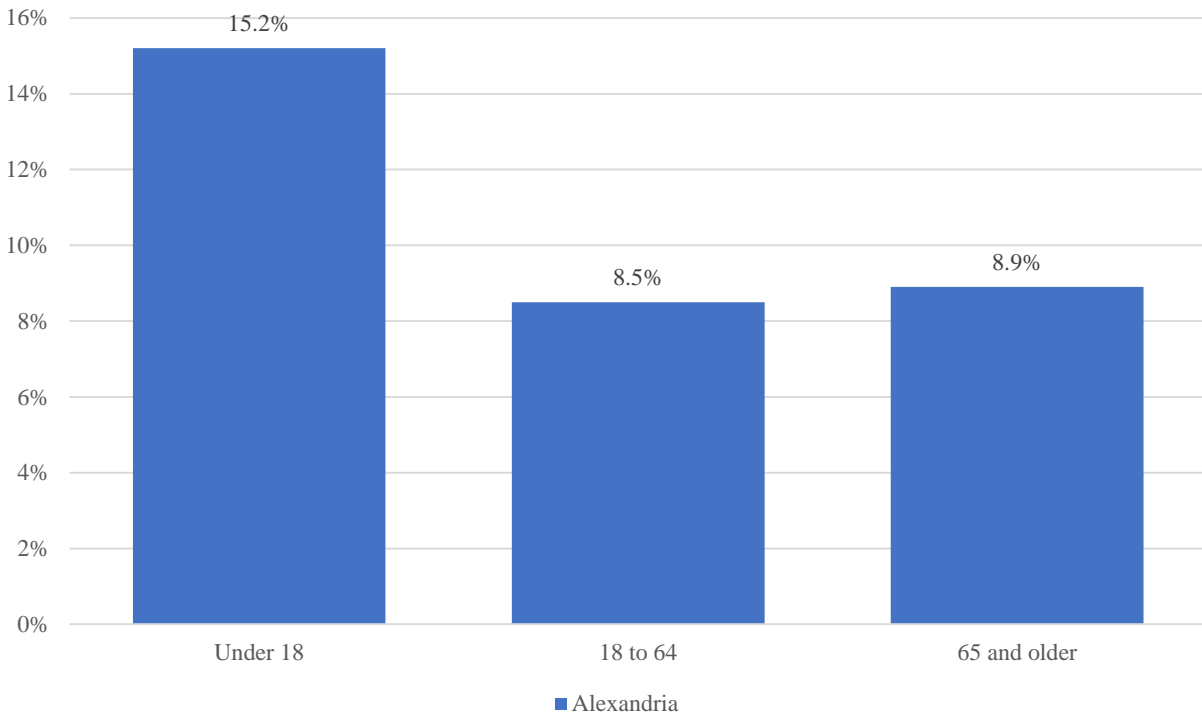
Objective: The Workforce Development Center is assigned a full-time employee to support employment and training opportunities for older job seekers.

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|---|---|---------|--|---|---|--|--|
| Advocate for the reinstatement of the full-time position (rather than part-time) in the Workforce Development Center (WDC) that supported employment of older residents of Alexandria who were seeking jobs. | <p>Promote awareness of the benefits of hiring older workers.</p> <p>Promote a one-stop shop for employment of older residents and collaborate with other service providers for those 50+.</p> <p>Seek additional support for FTE position.</p> <p>Expand availability and utilization of programs to remove language and cultural barriers to employment and training.</p> | Commission on Aging (COA), Division of Aging and Adult Services (DAAS), Senior Services of Alexandria (SSA), Equal Employment Opportunities Commission (EEOC), AARP, National Council on Aging (NCOA) | 2021 | <p>Need approval for funding by Department of Community and Human Services (DCHS), City Manager, and City Council.</p> <p>COA, SSA, faith-based institutions, Alexandria Commission on Employment (ACE), AARP</p> <p>Need support of Alexandria Economic Development Partnership (AEDP), Alexandria Chamber of Commerce, Small Business Development Center (SBDC), Alexandria/Arlington Regional Workforce Council</p> | <p>The budget impact is \$75,000 to hire FTE, to include fringe benefits and other costs.</p> <p>Financial assistance and ESOL training needed in some cases and creation of a supportive environment for learning.</p> <p>WDC needs to have the manpower to respond to the need before broad outreach.</p> | <p>Lead efforts to promote awareness of the talent that older adults bring to the workplace.</p> <p>Seek media outlets to tell specific stories about older adults and their successes.</p> <p>Seek media engagement in issues related to employment of older adults.</p> | <p>Older job seekers utilize services that remove language and cultural barriers.</p> <p>Media attention to benefits of employing older adults.</p> <p>Increased number of Alexandrians aware of services of the WDC.</p> <p>Support from Department of Community and Human Services, City Manager.</p> <p>Continued conversation and engagement to reduce operating in silos, but coordinate efforts through a one-stop system.</p> <p>Number of job seekers identified cultural and language barriers and sought assistance.</p> | FTE reinstated to support older job seekers in obtaining employment and mature workers accessing services through the one-stop system. |

| Action | Tasks and Resources | By whom | By when | Support available/ needed | Special Considerations | Needed elements for communication | Results: Increased capacity, persons served, benefits received | Outcome What changes occurred? |
|--|--|----------|---------|--|---|--|---|--|
| <p>Increase employer awareness and incentives to employ 50+.</p> | <p>Create and promote events and marketing materials that describe the benefits and incentives (such as tax credit, programs).</p> <p>Use community connections and existing and new business connections to create awareness.</p> <p>Seek employer buy-in to urge participation by large numbers of employers.</p> <p>Ask businesses to be part of the planning and implementation process.</p> | COA, SSA | 2020 | WDC, AEDP, Alexandria Chamber of Commerce, AARP, SBDC, other associations, faith-based organizations, Alexandria/ Arlington Regional Workforce Council | Need for significant effort to overcome biases. | Marketing effort (website, video, flyers, brochure) to educate about types of services offered at WDC through the one-stop system. | <p>Increased number of annual events conducted.</p> <p>Increased number of businesses that attend.</p> <p>Increased number of businesses committed to be part of the initiatives.</p> | Increase in business interest in employing older Alexandrians. |

Appendix A-1

Share of population below Federal Poverty Line, by age group



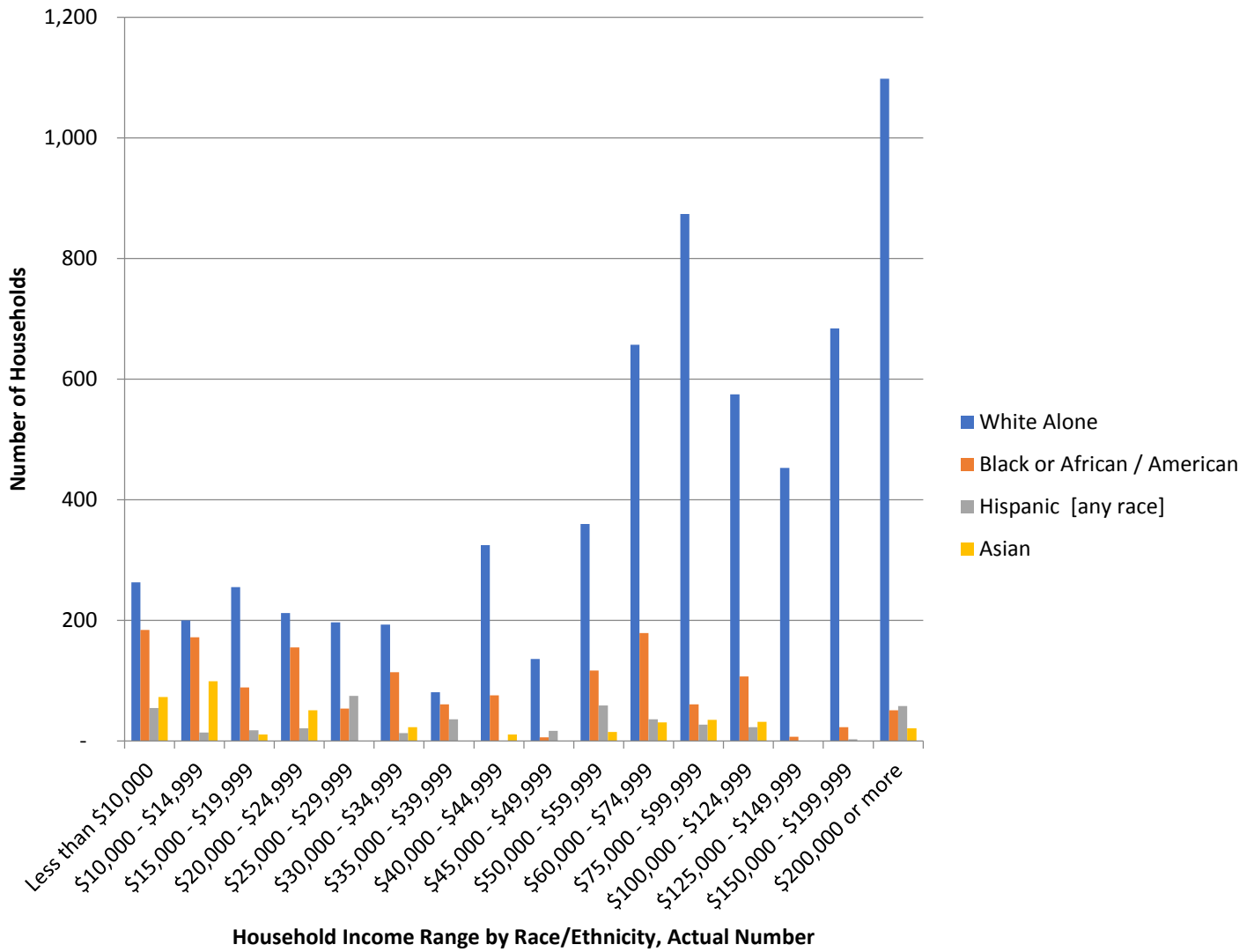
Share of Alexandria population below FPL: 9.8%

Source: US Census Bureau 2012-2016 ACS 5-year estimates

Appendix A-2

Household Income for Householder 65 Years or Older

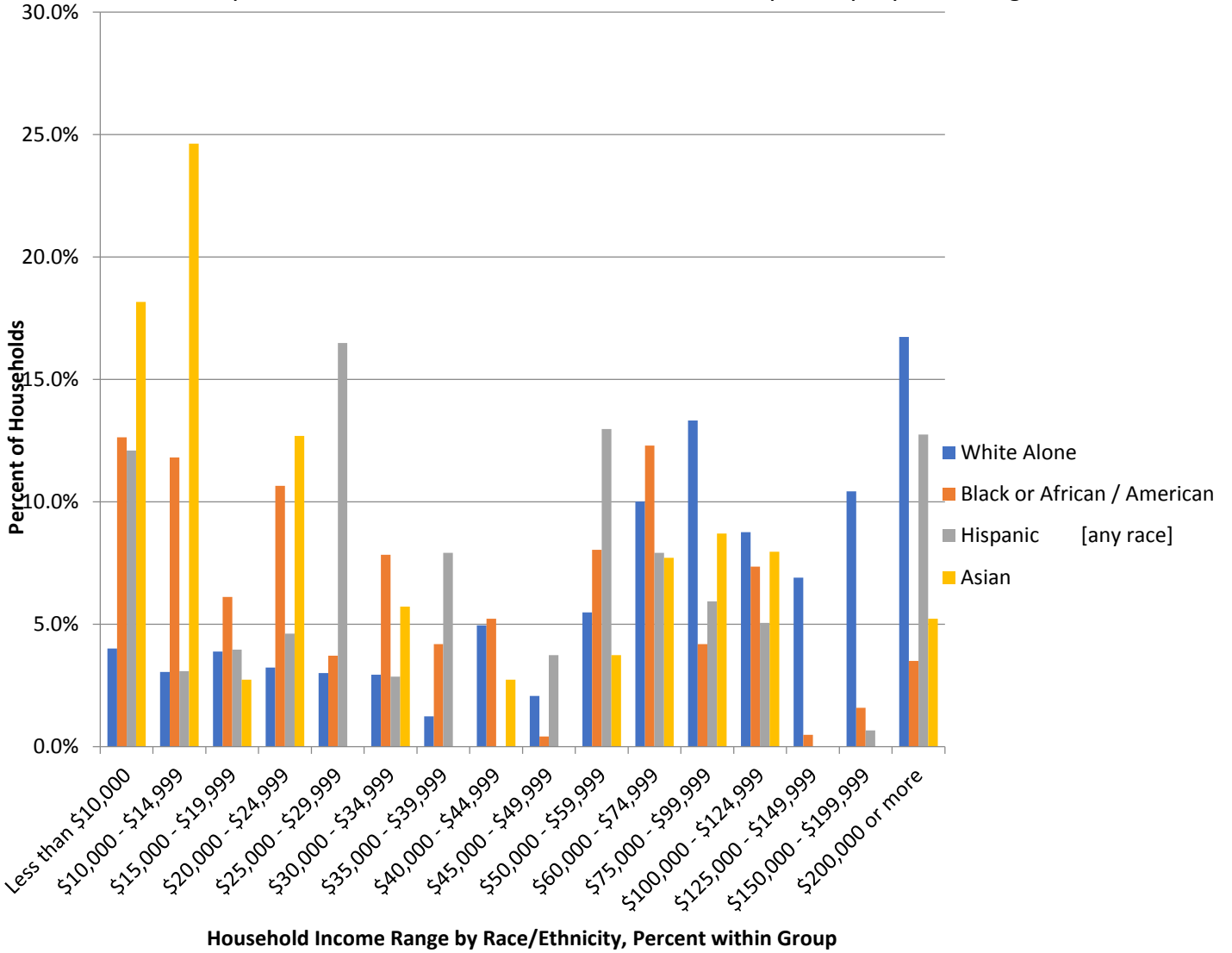
City of Alexandria, 2009-2013 American Community Survey 5-year Average



Appendix A-3

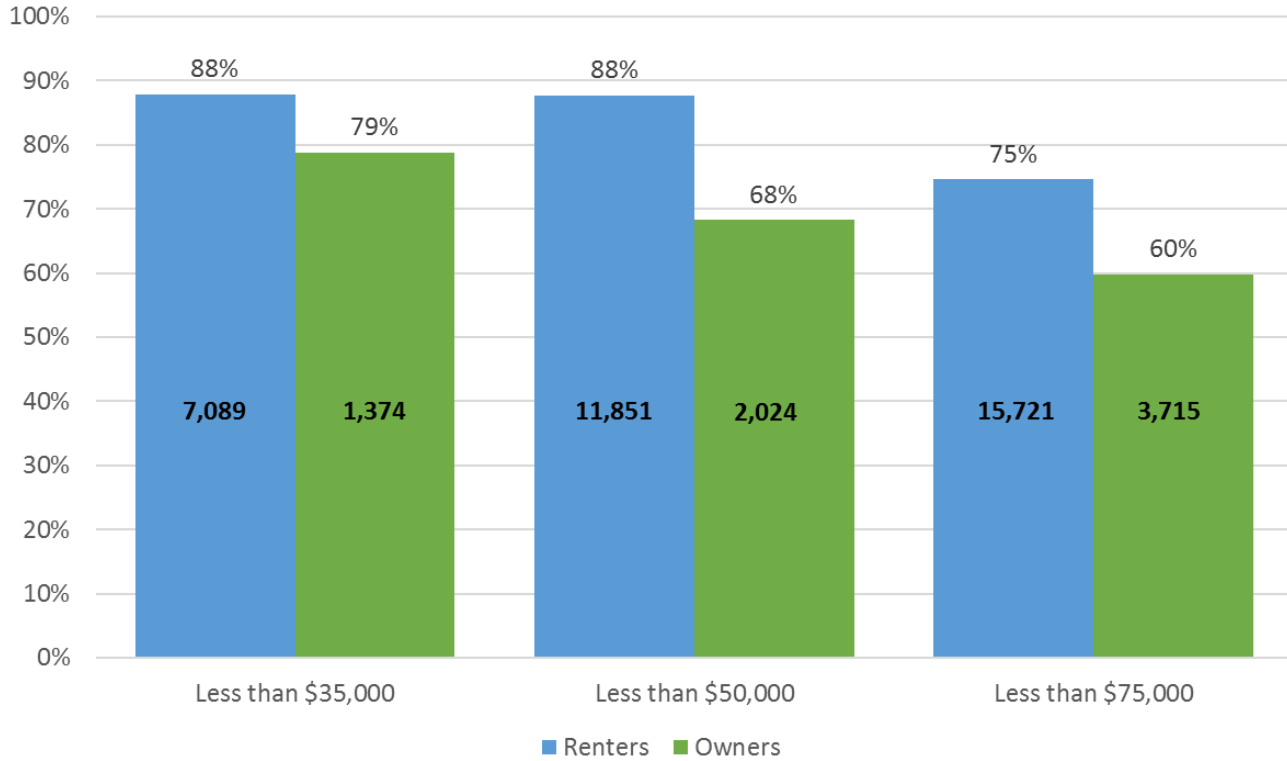
Household Income for Householder 65 Years or Older

City of Alexandria, 2009-2013 American Community Survey 5-year Average



Appendix A-4

Share of households spending 30% or more of their income on housing expenses



88 percent of renter households (just under 12,000 families) earning less than \$50,000 spend 30 percent or more of their income on housing-related expenses. Housing cost burden is particularly acute for 7,000 of these households who spend half or more of their income on housing-related expenses.

Source: US Census Bureau 2012-2016 ACS 5-year estimates

Appendix B-1

Demographic Profile Older Adults -- Alexandria¹

As of 2016, the Alexandria population age 60+ was 22,733. The following offers some details.

| | Total |
|-------------------|---------|
| Total population | 148,892 |
| AGE | |
| 55 to 59 years | 8,809 |
| 60 to 64 years | 7,559 |
| 65 to 69 years | 5,831 |
| 70 to 74 years | 3,587 |
| 75 to 79 years | 2,208 |
| 80 to 84 years | 1,627 |
| 85 years and over | 1,821 |

| AGE | Total |
|------|--------|
| 55+ | 31,542 |
| 60 + | 22,733 |
| 65 + | 15,174 |
| 75 + | 5,656 |
| 85+ | 1,821 |

Race/Ethnicity, Age 65 and over

| | | |
|-------------------------------------|--------|--------|
| White Alone | 10,600 | 70.4% |
| Black or African American Alone | 2,479 | 16.5% |
| American Indian/Alaska Native Alone | 30 | 0.2% |
| Asian Alone | 922 | 6.1% |
| Some Other Race Alone | 111 | 0.8% |
| Two or More Races | 177 | 1.3% |
| Total | 14,320 | 100.0% |
| Hispanic (of any race) | 1,052 | 7.0% |

Live Alone, Age 65 and over

5,307 older Alexandrians live alone; 3,728 women and 1,579 men. This does not include people who live in assisted living or nursing homes.

¹ American Community Survey, 2012-2016, 5 Year Estimate

Appendix B-2

Grandchildren, Age 60 and over

271 older adults are responsible for grandchildren under age 18

Poverty Status

A total of 2,686 Alexandrians age 55 and over live in poverty.

| | | |
|--------------------------|-------|--|
| 55 to 64 years | 1,370 | 8.4% of the population 55 – 64 live in poverty |
| 65 to 74 years | 704 | 7.8% of the population 65 – 74 live in poverty |
| 75 years and over | 612 | 10.8% of the population 75+ lives in poverty |

Disability

| | |
|---|-------|
| Total Population 65+ with a disability | 3,906 |
| With a hearing difficulty | 738 |
| With a vision difficulty | 750 |
| With a cognitive difficulty | 1,004 |
| With an ambulatory difficulty | 2,440 |
| With a self-care difficulty | 548 |
| With an independent living difficulty | 1,718 |

English Speaking

| | Total | Speak English “well” or “very well” | Speak English “not well” or “not at all” | Speak English “well” or “very well” | Speak English “not well” or “not at all” |
|---|--------------|-------------------------------------|--|-------------------------------------|--|
| <u>65 years and over</u> | | | | | |
| Spanish | 1,056 | 393 | 663 | 37.2% | 62.8% |
| Other Indo-European languages | 696 | 360 | 336 | 51.7% | 48.3% |
| Asian and Pacific Island languages | 710 | 255 | 455 | 35.9% | 64.1% |
| Other languages | 847 | 356 | 491 | 42.0% | 57.9% |
| Total | 3,309 | 1,364 | 1,945 | 41.2% | 58.8% |

Appendix C-1

Disconnect between incomes and housing (2000-2018)

Growth in regional median income as compared to growth in housing costs in City (2000-2018)



Source: HUD Income Limits, 2000-2018; City of Alexandria, Office of Housing 2018 Apartment Survey and Office of Real Estate Assessments, 2000-2018

Appendix D

Income Guidelines for Programs, April 2018.pdf

| | Family Size | | Family Size | | Updated by Policy | Updated on this page | Program Using Guideline |
|------------------------------------|---------------|--------------|----------------|------------|----------------------|-------------------------|---|
| | 1 | 2 | 1 | 2 | | | |
| | Annual Income | | Monthly Income | | | | |
| Medicaid Eligibility | \$ 9,712 | \$ 12,992 | \$ 809 | \$ 1,083 | | | |
| SSI - 165% | \$ 14,513 | \$ 21,780 | \$ 1,209 | \$ 1,815 | | | Medicaid Personal Maintenance Allowance |
| SSI Eligibility | \$ 8,796 | \$ 13,200 | \$ 733 | \$ 1,100 | January 1 of year | 2/18/2018 | |
| <hr/> | | | | | | | |
| Poverty Guideline | | | | | January of year | 2/18/2018 | |
| 80% | \$ 9,712 | \$ 12,992 | \$ 809 | \$ 1,083 | | | Medicaid |
| 100% | \$ 12,140 | \$ 16,240 | \$ 1,012 | \$ 1,353 | | | OMB |
| 120% | \$ 14,568 | \$ 19,488 | \$ 1,214 | \$ 1,624 | | | SLMB |
| 125% | \$ 15,175 | \$ 20,300 | \$ 1,265 | \$ 1,692 | | | OAA Title V - SCSEP |
| 130% | \$ 15,782 | \$ 21,112 | \$ 1,315 | \$ 1,759 | | | |
| 135% | \$ 16,389 | \$ 21,924 | \$ 1,366 | \$ 1,827 | | | OI |
| 150% | \$ 18,210 | \$ 24,360 | \$ 1,518 | \$ 2,030 | | | M'care Pt D; Senior Cooling |
| <hr/> | | | | | | | |
| Virginia Health Department (No Va) | | | | | March 1 of year | 2/18/2018 | |
| A Level | \$ 13,354 | \$ 18,106 | \$ 1,113 | \$ 1,509 | | | |
| Maximum B Level | \$ 16,183 | \$ 21,941 | \$ 1,349 | \$ 1,828 | | | |
| Maximum C Level | \$ 20,225 | \$ 27,422 | \$ 1,685 | \$ 2,285 | | | |
| Maximum Income | \$ 34,393 | \$ 46,631 | \$ 2,867 | \$ 3,887 | | | |
| <hr/> | | | | | | | |
| Virginia Median Income | | | | | October 1 of year | 10/17/2017 | |
| 100% | \$ 49,344 | \$ 64,512 | \$ 4,112 | \$ 5,376 | | | |
| 60% | \$ 29,606 | \$ 38,707 | \$ 2,467 | \$ 3,226 | | | |
| 50% | \$ 24,672 | \$ 32,256 | \$ 2,056 | \$ 2,688 | | | DSS Adult Services, General Relief |
| <hr/> | | | | | | | |
| DC Area Median Income | | | | | February of year | 4/17/2018 | |
| 100% | \$ 82,100 | \$ 93,800 | \$ 6,842 | \$ 7,817 | | | |
| 80% | \$ 54,250 | \$ 62,000 | \$ 4,521 | \$ 5,167 | | | |
| 60% | \$ 49,300 | \$ 56,300 | \$ 4,108 | \$ 4,692 | | | |
| 50% | \$ 41,050 | \$ 46,900 | \$ 3,421 | \$ 3,908 | | | |
| 30% | \$ 24,650 | \$ 28,150 | \$ 2,054 | \$ 2,346 | | | |
| <hr/> | | | | | | | |
| Housing Guidelines | | | | | February of year | | |
| | \$ 25,650 | \$ 25,650 | \$ 2,138 | \$ 2,138 | | 3/18/2015 | Rent Relief |
| | plus \$7,500 | plus \$7,500 | plus \$625 | plus \$625 | | | Income Disregard |
| | \$ 41,050 | \$ 46,900 | \$ 3,421 | \$ 3,908 | (50% DCAMI above | | HUD Section 8 |
| | \$ 49,300 | \$ 56,300 | \$ 4,108 | \$ 4,692 | (60% DCAMI above | | Housing tax credit financing (maximum) |
| | \$ 40,000 | \$ 40,000 | \$ 3,333 | \$ 3,333 | | | RE Tax Relief |
| | \$ 72,000 | \$ 72,000 | \$ 6,000 | \$ 6,000 | | | RE Tax Deferral |

Information accurate as of May 2018

