DOMAIN 7 STRATEGIES COMMUNICATION AND INFORMATION



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

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



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

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

 \checkmark Achieved \longrightarrow Making Progress ∇ Delayed

PILLAR 3:

LIFELONG HEALTH AND SECURITY

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



COMMUNITY SUPPORT AND HEALTH SERVICES



FINANCIAL SECURITY



EMERGENCY PREPAREDNESS AND RESILIENCE



LIFELONG LEARNING



ABUSE, NEGLECT, AND UNDUE INFLUENCE



PUBLIC SAFETY



CAREGIVING















PILLAR 3: LIFELONG HEALTH AND SECURITY COMMUNITY SUPPORT AND HEALTH SERVICES

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



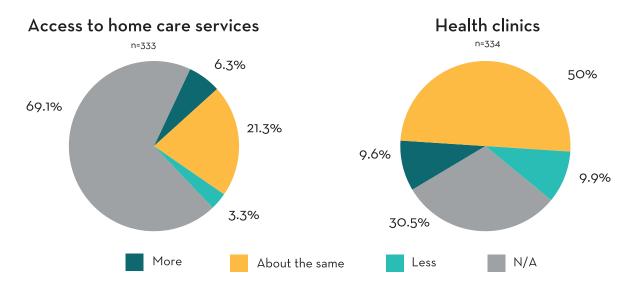
2018 - 2023 PROGRESS

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

Survey Results

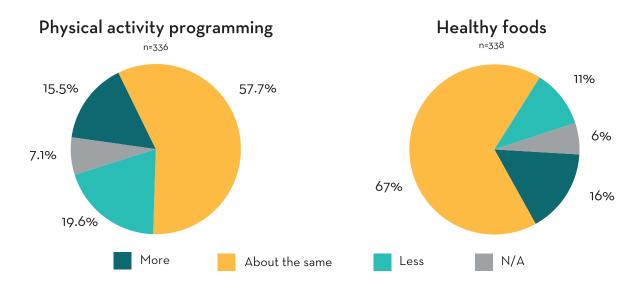
Compared to 2018...

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



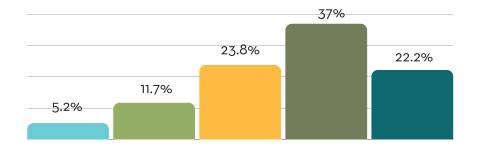
Compared to 2018...

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

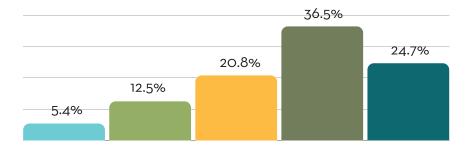


How easy is it for you to...

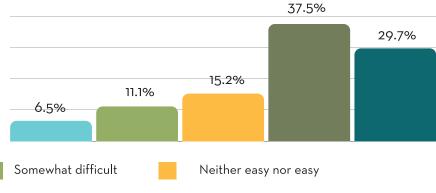
 find local sources of information about your health concerns and service needs? n=945



 access physical activity options in your area? n=942



 access healthy food options in your area? n=939



Very difficult

Somewhat easy

Very easy

Focus Group Results

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

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

Summary

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

66

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

DOMAIN 8 STRATEGIES

COMMUNITY SUPPORT AND HEALTH SERVICES



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

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



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

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

✓ Achieved → Making Progress ▽ Delayed

DOMAIN 8 STRATEGIES

COMMUNITY SUPPORT AND HEALTH SERVICES



GOAL 8.3 Support access to affordable nutrition and food education.

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

✓ Achieved → Making Progress ▽ Delayed

DOMAIN 8 STRATEGIES

COMMUNITY SUPPORT AND HEALTH SERVICES



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

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





PILLAR 3: LIFELONG HEALTH AND SECURITY

EMERGENCY PREPAREDNESS AND RESILIENCE

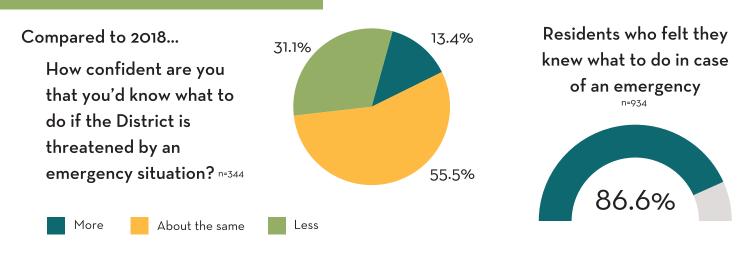
VISION: A city that ensures the readiness, immediate safety, and resiliency of all residents and communities before, during, and after an emergency.



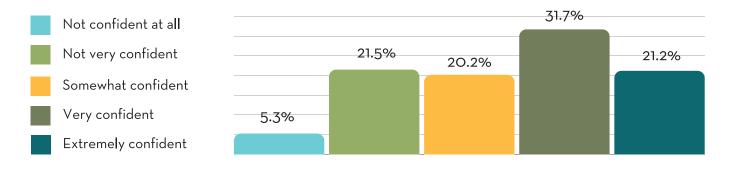
2018 - 2023 PROGRESS

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

Survey Results



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



Focus Group Results

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

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

Summary

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

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

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

DOMAIN 9 STRATEGIES OF THE PROPERTY OF THE PRO

EMERGENCY PREPAREDNESS AND RESILIENCE



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

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



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

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

✓ Achieved → Making Progress ▽ Delayed

PILLAR 3: LIFELONG HEALTH AND SECURITY ABUSE, NEGLECT, AND UNDUE INFLUENCE

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



2018 - 2023 PROGRESS

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

Survey Results

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

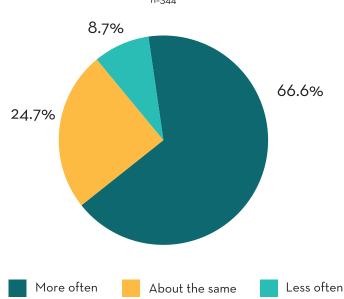
n=344



Compared to 2018...

Residents are receiving spam calls and emails...

n=344



Focus Group Results

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

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

Summary

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

My mother gets called every day from people asking for her Social Security number, her Medicaid, and trying to get all types of personal information from her.

Fortunately, her mind is still sharp enough that

she's not falling for it,

but that's real.

DOMAIN 10 STRATEGIES

ABUSE, NEGLECT, AND UNDUE INFLUENCE



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

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



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

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

DOMAIN 10 STRATEGIES

ABUSE, NEGLECT, AND UNDUE INFLUENCE



GOAL 10.3: Increase prosecution of elder abuse crimes.

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



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

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

PILLAR 3: LIFELONG HEALTH AND SECURITY FINANCIAL SECURITY

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



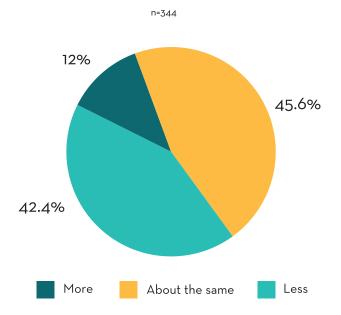
2018 - 2023 PROGRESS

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

Survey Results

Compared to 2018...

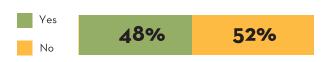
How confident do you feel about the amount of money you have saved for the future?



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



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



Focus Group Results

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

Summary

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

66-

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

DOMAIN II STRATEGIES FINANCIAL SECURITY



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

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





PILLAR 3: LIFELONG HEALTH AND SECURITY LIFELONG LEARNING

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



2018 - 2023 PROGRESS

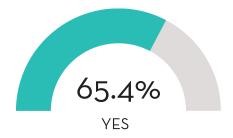
- In 2023, the <u>Martin Luther King Public Library adult learning computer lab</u> conducted 435 digital literacy classes and workshops.
- There are 70,766 active DC Public Library card holders over the age of 50.
- <u>DC Futures</u> provides tuition and support for degree-seeking adults, of up to \$8,000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

Survey Results

Compared to 2018...

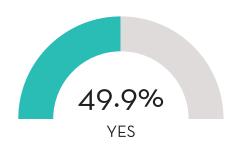
Have you obtained training?

n=344



Why did you obtain training? n=225

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





Enjoyment/ Personal Growth



33.3%

Work Requirements



30.6%

Career Advancement



22.2%

Volunteer Requirements

Focus Group Results

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

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

Summary

The city has provided several opportunities for lifelong learning through DC Public Library, the OSSE, the Consortium of University of the Washington Metropolitan Area, and many more entities. The success of this domain can be seen in the I think education is important from the cradle to the grave so I'm always looking for new things. And I have more time now as a senior to do those things that I always wanted to do.

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

DOMAIN 12 STRATEGIES LIFELONG LEARNING



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

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



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

12.2.1

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

OSSE, DME, DCPCSB, DCPL, DOES



PILLAR 3: LIFELONG HEALTH AND SECURITY PUBLIC SAFETY

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

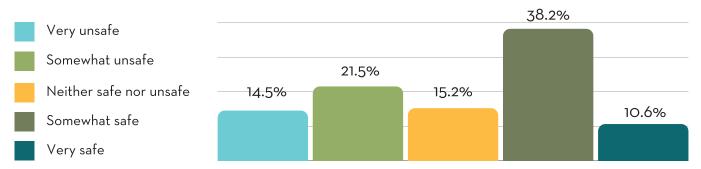


2018 - 2023 PROGRESS

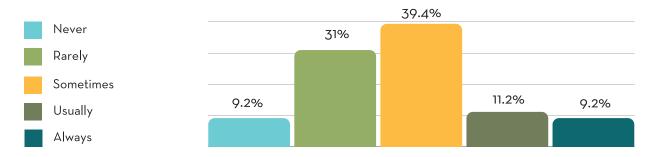
- Robberies in all forms have come down 21% since <u>The Robbery Suppression Initiative</u> was instituted in July 2023.
- Beginning in late 2017, The <u>Private Security Camera Incentive Program</u> has encouraged residents to install
 cameras and register them with the Metropolitan Police Department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

Survey Results

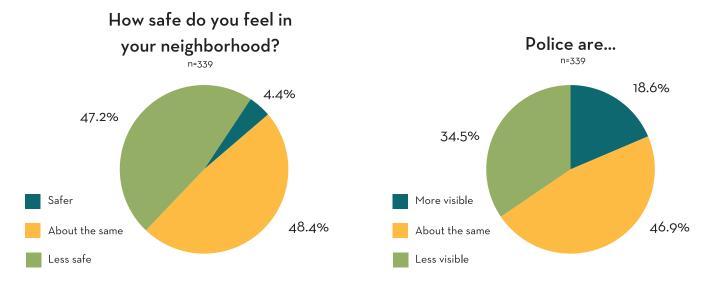
How safe is your neighborhood from crime? n=936



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



Compared to 2018...



Focus Group Results

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

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

Summary

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

66-

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

DOMAIN 13 STRATEGIES PUBLIC SAFETY



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

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



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

Increase outreach to older adults about the District's Vision Zero plan to reduce traffic deaths to zero by 2024.

DDOT



✓ Achieved → Making Progress ▽ Delayed



PILLAR 3: LIFELONG HEALTH AND SECURITY CAREGIVING

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



2018 - 2023 PROGRESS

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

Survey Results

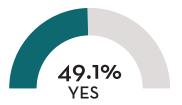


Since 2018, 4 out of 10 (41.8%) have been a caregiver for someone. n=337

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



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



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

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





Focus Group Results

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

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

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

Summary

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



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

DOMAIN 14 STRATEGIES CAREGIVING



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

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



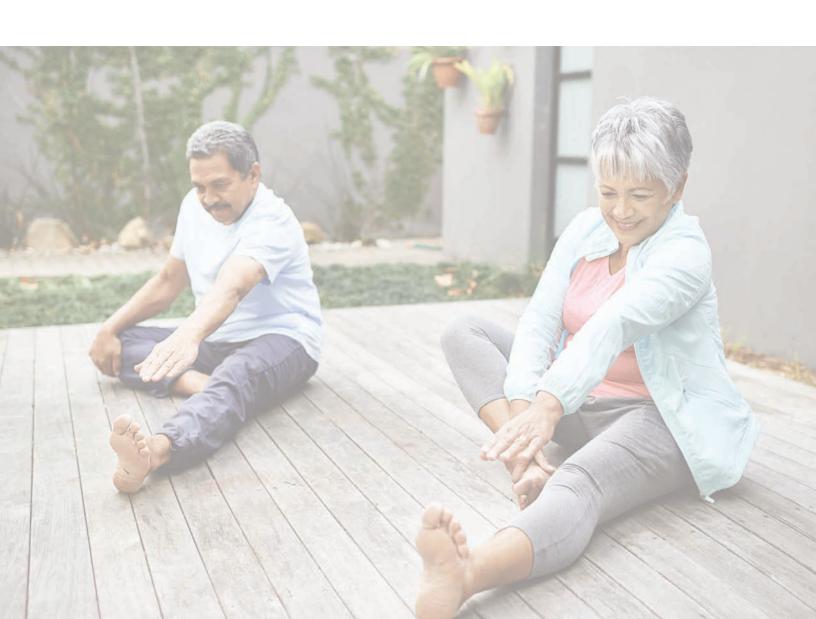
GOAL 14.2: Provide greater information to unpaid family caregivers through improved communication and highlighted opportunities for assistance through various local programs.

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

OVERALL 2018-2023 PROGRESS

Age-Friendly DC is proud of the progress that has been made over the past five years in each of the 14 domains. Several cross-cutting achievements have improved the aging experience for all residents. The District is becoming more accessible. Buildings are being built under ADA guidelines, parks and recreation centers have structures and programs that allow for equitable participation, and more services and information are being offered in languages other than English. Residents of all ages are now using technology more often. Partially motivated by the pandemic, more residents use technology to connect with others, programs, services, and other resources. Finally, the city has continued to expand the suite of resources and services that assist residents with housing affordability, health, safety, and quality of life.

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



2024-2028 STRATEGY RECOMMENDATIONS

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



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

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



Prioritize inclusion and equity of special populations across all services.

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



Promote the positive attributes of growing older.

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



Recognize the importance of the Life Course approach.

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



Consider cross-domain goal setting and collaboration.

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

RECOGNITION

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

Thank you and appreciation to:

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

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



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

Contact:

Gail Kohn, Age-Friendly DC Coordinator gail.kohn@dc.gov | 202-241-4149 1350 Pennsylvania Ave, NW, Suite 223 Washington, DC 20004

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

DC AGENCY PARTNERS

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

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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

74

APPENDIX AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

COMMUNITY ORGANIZATION PARTNERS

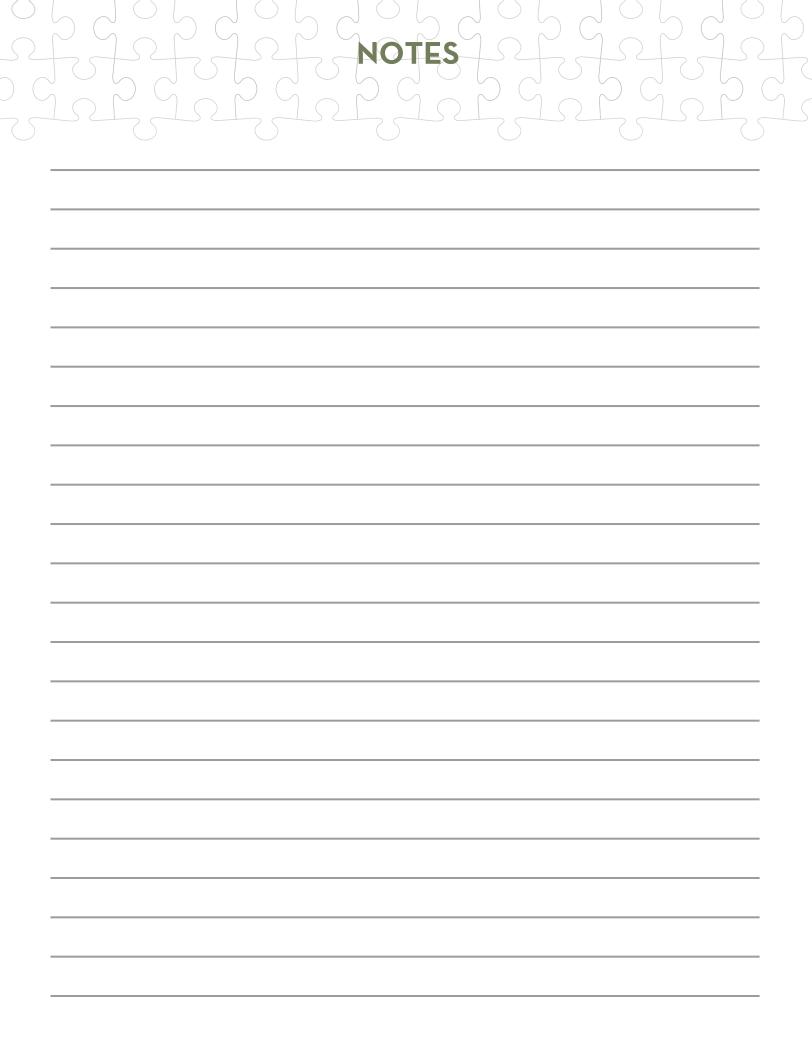
ACRYONYM/NICKNAME	ORGANIZATION NAME & LINK	STRATEGIES
AARP-DC	<u>AARP-DC</u>	5.1.2, 6.1.2, 6.1.3, 8.1.1, 8.2.1, 8.2.3, 8.3.1
СБРВ	Consumer Financial Protection Bureau	11.1.1,11.1.4
DC Greens	DC Greens	8.3.1, 8.3.3
DCHA	DC Housing Authority	3.2.3, 5.1.3, 6.1.1, 8.2.2
DC Hunger Solutions	DC Hunger Solutions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

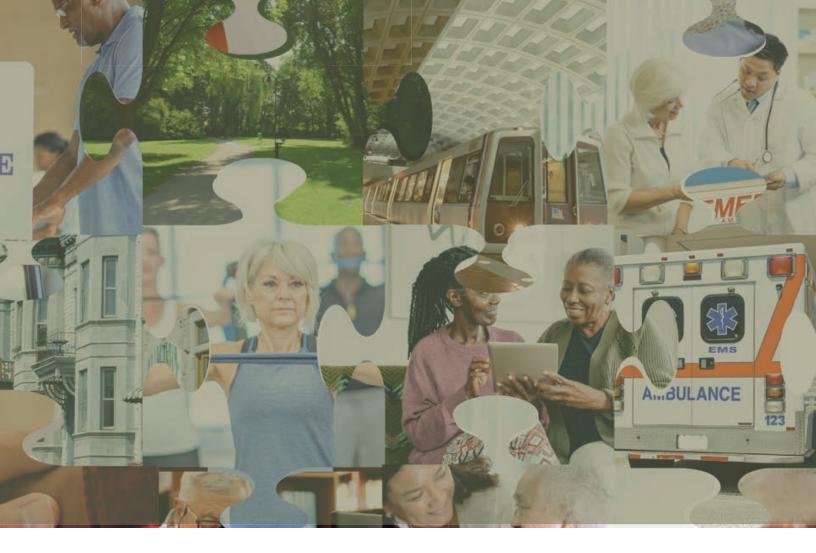
AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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

AFDC PARTNER ACRONYMS AND STRATEGY ROLES

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





Age-Friendly DC

Office of the Deputy Mayor for Health & Human Services (DMHHS)
1350 Pennsylvania Avenue, NW, Suite 223
Washington, DC 20004

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





