

**Denver Aging Steering Committee:**

**Final Report and Recommendations for Action**

**December 14, 2007**

**Report Drafted by  
Denver Office on Aging  
And Councilman Doug Linkhart's Office**

## Acknowledgements

The work of the Denver Aging Steering Committee builds on the foundation laid by the Agency for Human Rights and Community Relations (HR/CR) in orchestrating the Mayor's Summit on Aging and the subsequent *Mayor's Summit on Aging Report*. We are deeply grateful to HR/CR Executive Director Lucia Guzman and her staff. Sincere thanks are also extended to Mayor Hickenlooper and the Denver Commission on Aging for their time and support of the Summit on Aging, as well as the work of the Denver Aging Steering Committee.

The Denver Aging Steering Committee is comprised of a richly diverse population. From within the City and County of Denver government, we are deeply indebted to a number of individuals who have participated for the past six months from the Department of Human Services; Public Works; Parks and Recreation; Community Planning and Development; Environmental Health; Community Health; Office of Economic Development; Mayor's Office of Workforce Development; Housing and Neighborhood Development; Office of Strategic Partnerships; Denver Office of Cultural Affairs; Office of Emergency Management; Agency for Human Rights and Community Relations; and Office of Disability Rights. In addition, we are indebted to the many other organizations who participated in the Aging Steering Committee, including Councilman Rick Garcia's office; Senator Salazar's office; Denver Indian Family Resource Center, Seniors Inc., Senior Resource Center; Denver University Institute of Gerontology, Jewish Family Services, Denver Health and University Hills Baptist Church.

We are most grateful to the over 200 older adults from across Denver County who generously shared their wisdom and experience in community forums and mail-in surveys. We appreciate the time and effort of Denver Parks and Recreation, Denver Public Libraries, the Schlessman YMCA and the Silent Athletic Club in promoting and hosting these events. We also would like to extend our deep gratitude to the director of the University of Denver, Institute of Gerontology, Enid Cox, Ph.D., and her team of graduate students, Michele Weber, Suzannah Hopkins, Michael Burson and Su-Fen Lui, and to June Twinam, MSW and her graduate student Karen Fox for their thorough analysis of the community forums and survey data

## Executive Summary

America is in the midst of a demographic transition that will impact every facet of our personal and professional lives. In 2008, the leading edge of the baby-boom generation turns 62-years-old – old enough to collect Social Security. This “silver tsunami”—77 million Americans, born between 1946 and 1964—will accelerate at warp speed the fastest growing segment of the U.S. population. By 2020, the number of adults 60 years and older is expected to double from 12 to 20 percent of the population in Denver<sup>1</sup> as well as the rest of the country. Growing at an even faster rate is those aged 85 and older—expected to increase by 60 percent between 2030 and 2040 alone – who are most likely to need the support of family, friends and the community to remain living independently.

The aging of the population is not only a demographic trend; it is a dynamic phenomenon that ripples through every facet of society. The composition of families, participation in the labor force, procreation and economic prosperity are all impacted by demographic shifts in the population. Policy makers and service providers are faced with significant challenges for the delivery of services such as health care, housing, transportation, public safety and workforce issues.

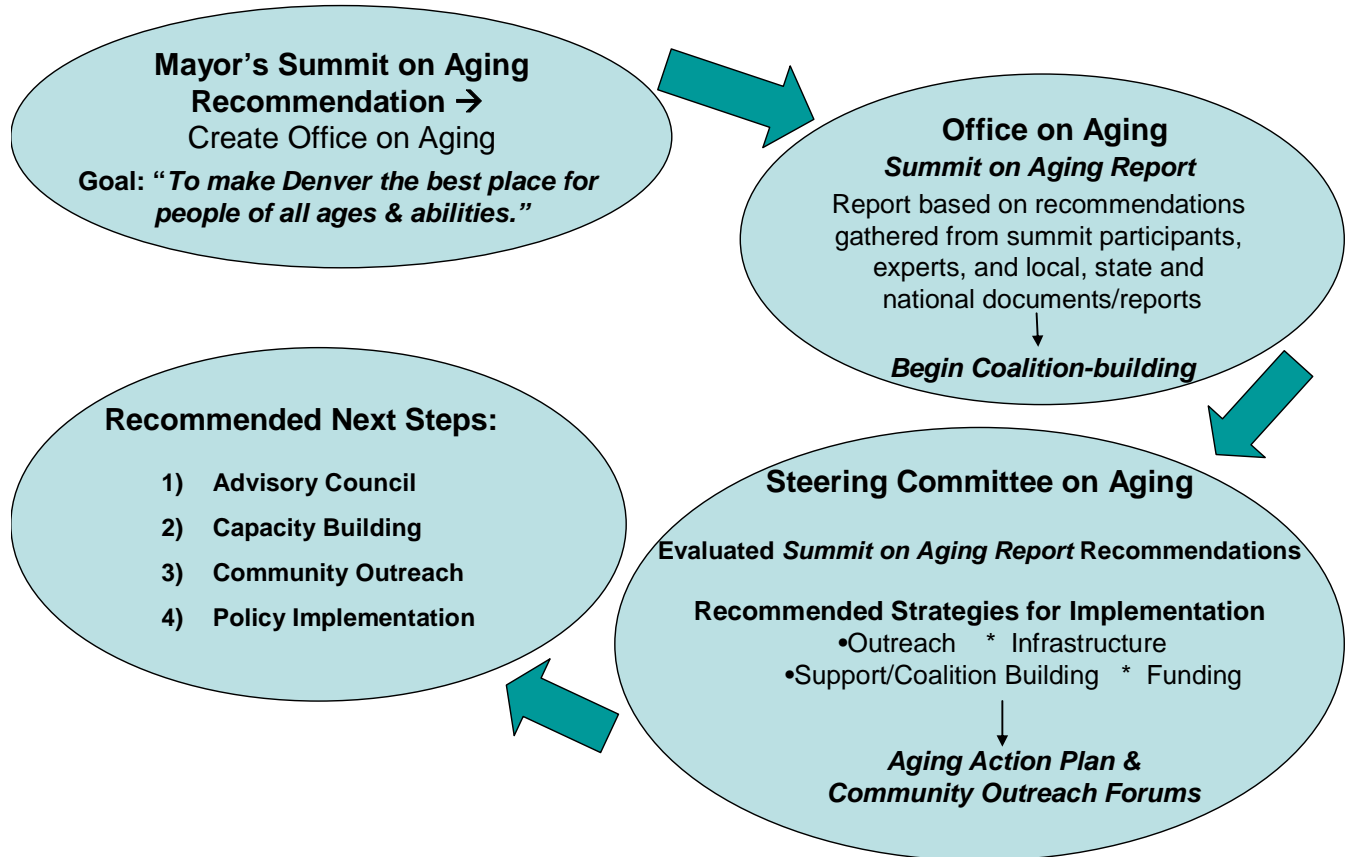
Despite this great demographic shift, few communities are prepared. A recent study<sup>2</sup> led by the National Association of Area Agencies on Aging, in partnership with the International City/County Management Association, National Association of Counties, National League of Cities and Partners for Livable Communities found that less than half, 46 percent, of 10,000 local governments surveyed have begun to address the needs of the rapidly increasing aging population.

We are at the beginning of a demographic and cultural shift that demands a deliberate, thoughtful and collaborative plan to meet the future needs, as well as reap the benefits, of an aging society.

For the past 6 months, Denver’s Office on Aging and Councilman Linkhart’s office, in partnership with members of City Council, the Mayor’s Office, citywide departments and key stakeholders from the Denver aging community have been working together to formulate policies, programs and services based on recommendations from the **Mayor’s Summit on Aging Report** that can put Denver on the fast-track to becoming a city prepared for its aging population. In addition to re-thinking how to improve traditional aging services such as senior centers, nutrition programs and home care, this committee has made recommendations for action steps in the areas of transportation, housing, land use planning, the built environment, public safety, parks and recreation, workforce development and volunteerism/civic engagement.

Aligned with the State’s **Silverprint Colorado Initiative** and DRCOG’s Area Agency on Aging **Four-Year Plan 2007-2011**, the Denver Aging Steering Committee’s action steps for policies, programs and services would improve the quality of life for *all* residents, and put Denver at the forefront of American cities creating sustainable, livable communities for people of all ages and abilities.

# Denver Aging Planning Process



## Background: The Planning Process

In 2005, the Agency for Human Rights and Community Relations (HR/CR), under the visionary leadership of Lucia Guzman, identified Denver's rapidly aging population as a key policy concern for the City. The HR/CR staff spent a year working with the Denver Commission on Aging to identify the issues and needs of Denver's older adults and their families, and the impact an aging population will have on the City and County of Denver.

On November 1, 2006, the Agency for Human Rights and Community Relations, in partnership with the Denver Commission on Aging and Mayor John Hickenlooper's Office, convened at the Denver Convention Center ***The Mayor's Summit on Aging: Making Denver the Best Place to Live and Grow Older***. The purpose of the Summit was to raise awareness among City and County of Denver employees, as well as invited members of the community, of the impact that an aging population will have on them as individuals and employees, as well as on the greater community. The second major goal of the Summit was to gather recommendations to advise policy makers, city officials and other key stakeholders about steps we can take toward ***making Denver the best place for people of all ages and abilities***. This daylong conference featured interactive presentations by local and national experts that addressed four major topic areas: (1) Livable Communities, (2) Healthy Aging, (3) Economic Stability and Long-Term Planning, and (4) Workforce Matters. Over 300 people representing a wide range of departments and agencies from Denver government attended, including employees from the Office of Economic Development, Parks and Recreation, and Denver Human Services. In addition, a number of representatives from the nonprofit sector, local seniors and other key stakeholders participated in this event.

As a result of the awareness raised by the Summit on Aging, the Mayor's Office created a new Office on Aging, separate and in addition to the Denver Commission on Aging (a voluntary advisory council). Janice Blanchard, a nationally recognized expert in the field of aging, was hired as the first director. In May 2007, the Mayor's Summit on Aging Report was released, that included goals and recommendations in the four topic areas based on input from presenters and participants of the Summit on Aging, as well as consultations with regional, state and national leaders, and reviews of best practices in other communities.

In July 2007, the Denver Aging Steering Committee, made up of members of City Council, the Mayor's Office, citywide departments and key stakeholders from the Denver aging community, began to meet to discuss the feasibility of Summit on Aging Report recommendations and creating a framework and actions steps toward their implementation. In October and November 2007, community input was solicited via mail-in post cards and nine (9) focus groups with Denver seniors were held throughout the City, resulting in more than 200 community voices. This data was analyzed by graduate students at Denver University's School of Social Work and have been factored into these recommendations for next steps for creating a Denver Aging Action Plan.

**Goals from the Mayor's Summit on Aging Report:  
*Making Denver the Best Place to Live and Grow Older***

- 1) Promote housing, development patterns and community design features to make Denver a livable community for people of all ages and abilities, especially our elders.**
  - a) Provide affordable, appropriate, accessible housing.
  - b) Adjust the physical environment for inclusiveness and accessibility.
  - c) Ensure accessible, affordable, reliable, safe transportation.
  
- 2) Promote healthy behaviors among older residents of Denver in order to reduce their risk of disease and disability, improve their mental and physical functioning and empower older adults to stay active and engage in community life.**
  - a) Increase physical activity.
  - b) Promote affordable, nutritious food.
  - c) Provide health information and outreach.
  - d) Educate local health care professionals about senior health issues.
  - e) Promote opportunities for lifelong learning, creativity and social engagement.
  - f) Design and promote the "social software" to help elders "age in community" – to age in place in their own home and maintain meaningful connections with the community.
  
- 3) Address Workforce challenges by supporting a variety of innovative strategies to encourage employers to retain, retrain and hire older workers, as well as incentives to entice older employees to remain longer in the workforce.**
  - a) Take stock of employee profile.
  - b) Work toward age diversification.
  - c) Establish mentoring relationships.
  - d) Develop systems of knowledge transfer.
  - e) Create alternative work arrangements.
  - f) Develop a plan for phased retirement.
  - g) Provide opportunities for career development and advancement.
  - h) Target benefits to an older population.
  - i) Formulate new recruitment strategies to reach midlife and older workers.
  - j) Redesign the health and safety.
  
- 4) Educate the public about planning for retirement and late life issues, including financial, long-term, healthcare, legal, end-of-life, personal, and other important matters.**
  - a) Provide education, opportunities and incentives for all employees to save for retirement.
  - b) Provide opportunities to learn about life planning and retirement planning as it relates to housing, lifestyle, health, relationships and volunteer and civic engagement opportunities.
  - c) Provide opportunities to learn about legal and financial planning.

**Table 1: Highlights of Key Challenges and Action Steps**

*Through City leadership and with State, Federal, and community partnerships, the Denver Aging Steering Committee recommends these actions steps to address identified challenges to our aging community. The first three areas – housing, aging in place/aging in community, and planning and development – represent **the top three issues** of DRCOG’s Area Agency on Aging planning document for creating elder-friendly communities as represented in the 2035 Comprehensive Plan.*

Issue	Challenges	Action Steps
<b>Housing</b>	<ul style="list-style-type: none"> <li>Lack of affordable, appropriate &amp; accessible housing</li> <li>Physical environment inhibits inclusiveness &amp; accessibility</li> <li>Lack of community-based supportive services for home maintenance and “aging in place” assistance</li> </ul>	<ul style="list-style-type: none"> <li>Provide affordable, appropriate housing options by evaluating existing policies, expanding programs, and forming collaborative partnerships</li> <li>Promote polices that adjust the home environment for inclusiveness and accessibility</li> <li>Promote and expand home assistance programs to assist with chores, household bills and maintenance, snow removal and yard work</li> <li>Promote alternative housing models such as Golden Girls Homes, co housing, homesharing, NORCs, ADUs and cooperative living arrangements</li> </ul>
<b>Aging in Place/ Aging in Community</b>	<ul style="list-style-type: none"> <li>Fragmented &amp; inefficient long-term care system that does not support elders staying in their homes as alternative to institutional LTC</li> <li>Policies that are reactive rather than proactive to needs of elders</li> <li>Current system promotes dependency and “Three plagues of old age” - loneliness, helplessness and boredom</li> <li>Current system of institutional long-term care is costly to families, tax-payers, government &amp; communities</li> <li>Elders currently devalued and demeaned</li> </ul>	<ul style="list-style-type: none"> <li>Assess Denver county via GIS maps for high density neighborhoods of seniors in relation to services, transportation, healthcare, etc</li> <li>Develop with State, DRCOG and non-profit community strategic partnerships &amp; policies in order to provide better coordination of services, identify gaps and avoid duplication of services (e.g., Co. Senate Bill 173)</li> <li>Promote opportunities and awareness around the importance and value of “interdependence” and other aging in community principles in strengthening Denver communities</li> <li>Promote public awareness via social marketing campaign of the contributions elders make to our community &amp; individual lives</li> </ul>
<b>Planning and Development</b>	<ul style="list-style-type: none"> <li>Zoning codes discourage innovative models of housing and non-institutional long-term care</li> <li>Lack of senior housing close to public transportation and other services crucial to senior mobility and independence</li> </ul>	<ul style="list-style-type: none"> <li>Incorporate senior-friendly housing in zoning code (ADUs, Lifetime homes, Universal design)</li> <li>Promote senior housing &amp; comprehensive services in TODs and along transit lines</li> <li>Improve connectivity and safety of streets and sidewalks</li> <li>Increase accessibility &amp; sensitivity to the needs of special populations (eg, elders &amp; persons with disability) in public buildings &amp; public spaces</li> </ul>
<b>Transportation</b>	<ul style="list-style-type: none"> <li>Lack of affordable, accessible, &amp; reliable transportation to retain mobility &amp; independence</li> <li>Road design makes walking &amp; bicycling difficult</li> <li>Driving environment deters older adults from driving</li> <li>Older adults often stop driving due to health</li> <li>Transportation stations/stops are insensitive to needs of elders, disabled as well as others (e.g., parents with small children)</li> <li>Taxi system is prejudiced against senior &amp; disability community</li> <li>Lack of coordinated transportation system and one-stop call center for transportation needs</li> <li>Unfamiliarity with Public Transportation system</li> </ul>	<ul style="list-style-type: none"> <li>Increase access to transportation for life essentials and social and civic engagement needs</li> <li>Improve pedestrian access and roadway design and signage</li> <li>Support volunteer driving programs</li> <li>Provide driver safety programs</li> <li>Provide &amp; promote programs for mass transit access such as Travel Buddies</li> <li>Support Complete Streets Initiative and Safe Routes to School</li> </ul>

<b>Health and Wellness</b>	<ul style="list-style-type: none"> <li>• Access to health services and information is unequally distributed</li> <li>• Poor nutrition and lack of exercise increase health risks</li> <li>• Transportation to medical appointments is limited</li> <li>• Chronic diseases (heart disease, cancer &amp; diabetes) are prevalent, costly and preventable health problems but inadequately diagnosed &amp; treated in older adults</li> <li>• Mental health is largely unaddressed</li> <li>• Inconvenient/non-existent access to routine screenings, health and preventative care</li> </ul>	<ul style="list-style-type: none"> <li>• Create a single point of entry for information and resource sharing (perhaps 211) as well as to identify &amp; address other health &amp; social issues</li> <li>• Develop exercise and healthy living programs for aging adults across socioeconomic sectors</li> <li>• Promote affordable, nutritious food</li> <li>• Develop health information outreach programs</li> <li>• Improve individual and caregiver transportation access for medical appointments and other physical activities</li> <li>• Promote early detection and chronic disease prevention programs</li> <li>• Develop and promote strategic partnerships to address mental health issues</li> <li>• Develop community health outreach programs</li> </ul>
<b>Cultural Enrichment and Education</b>	<ul style="list-style-type: none"> <li>• Information &amp; access to cultural programs &amp; life-long learning opportunities are inadequate</li> <li>• Programs rarely target older individuals</li> <li>• Older individuals often need training in new technologies</li> <li>• Public perception that the arts are “extra”</li> <li>• Arts funding streams are K-12, and do not apply to life-long learning</li> </ul>	<ul style="list-style-type: none"> <li>• Create a database of cultural &amp; educational programs and opportunities</li> <li>• Promote programs and outreach through innovative channels &amp; multi media (i.e., utility bills)</li> <li>• Support programs that enable older adults to contribute to the cultural life of the community (e.g., Circle of Care Project)</li> <li>• Actively engage seniors in continued education programs &amp; computer classes</li> </ul>
<b>Civic Engagement and Volunteerism</b>	<ul style="list-style-type: none"> <li>• Information about civic engagement opportunities lack coordination</li> <li>• Recruitment of Senior volunteers is limited</li> <li>• Costs associated with volunteerism can inhibit participation</li> </ul>	<ul style="list-style-type: none"> <li>• Provide a central database of volunteer, work &amp; civic opportunities</li> <li>• Outreach and advertise in multi-media formats</li> <li>• Improve linkage and recruitment strategies</li> <li>• Develop innovative strategies to offset costs of transportation and other costs</li> <li>• Improve coordination of programs such as RSVP, Boomers Leading Change, Volunteer Match, Denver Metro Volunt., etc.</li> </ul>
<b>Workforce Challenges</b>	<ul style="list-style-type: none"> <li>• Barriers inhibit the retaining, retraining and hiring of older workers</li> <li>• City and community businesses unprepared to deal with future labor shortages from retiring boomers</li> <li>• The physical environment provides barriers to aging adults in the workforce</li> </ul>	<ul style="list-style-type: none"> <li>• Develop a Social Marketing campaign to address ageism &amp; promote older workers skills, reliability and availability</li> <li>• Align with other city efforts such as Wired Initiative to address workforce shortages</li> <li>• Improve employment training &amp; retraining programs</li> <li>• Partner with area Chambers of Com., OED &amp; partners to sponsor conference and workshops on aging and workforce</li> <li>• Customize employment training to an older population</li> <li>• Utilize GAP Analysis Toolkit for employers</li> </ul>
<b>Planning Across the Lifespan</b>	<ul style="list-style-type: none"> <li>• Lack of information on funding retirement and long-term health care needs</li> <li>• Lack of understanding that life-planning must include more than financial planning</li> </ul>	<ul style="list-style-type: none"> <li>• Provide educational opportunities and incentives to increase knowledge financial planning, life planning, retirement and employment opportunities.</li> <li>• Partner with financial institutions, life-planning coaches and other community partners to sponsor conference and workshops on aging and life-planning.</li> </ul>
<b>Public Safety</b>	<ul style="list-style-type: none"> <li>• Increasing concern about the safety of neighborhoods</li> <li>• Increasing concern about personal safety and preventing elder abuse</li> <li>• Lack of coordinated effort for disaster planning</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage Neighborhood Watch and other safety programs</li> <li>• Train health care providers to identify and report elder abuse</li> <li>• Coordinate efforts with the Office of Emergency Management to provide info &amp; services in event of disasters and public health emergencies</li> <li>• Crime prevention in public spaces</li> </ul>

\*Table adapted from *A Blueprint for Action: Developing a Livable Community for all Ages*

## **Recommended Steps to Implement Suggested Goals:**

### **I. Support and Coalition Building**

1. Meet with the Mayor's Office to present the draft Aging Action Plan and secure support and commitment for moving forward with recommendations.
2. Seek Mayor's support in forming an advisory council made up of key City officials, City Council members, and community stakeholders to direct the implementation of plan and ensure the ongoing sustainability of initiatives.
3. Present plan to City Council to build support and commitment for moving forward with recommendations.
4. Form coalitions with State, DRCOG, community partners, business community, and community leaders to achieve goals and addressing aging and workforce issues.

### **II. Outreach**

1. Expand community support for Aging Action Plan. Develop intergenerational and cross-cultural approaches to outreach to community members.
2. Develop a Social Marketing plan to educate community members and City officials about aging issues. Involve 311 and 211 to direct citizens to appropriate resources.
3. Promote Office on Aging through media, through developing relationships with Executive and Legislative branches, and key community members.

### **III. Infrastructure**

1. Coordinate City resources to streamline delivery of services, utilizing 311 as a key entry point.
2. Working in coordination with 311 and 211, compile and regularly update a directory of internal and external resources.
3. Develop information sharing mechanisms between City agencies.
4. Create a horizontal approach (i.e., Greenprint) that coordinates and streamlines within City government to address aging issues.

### **IV. Funding**

1. Maximize the City's effectiveness by seeking grants and alternative funding for specific initiatives and by coordinating programming across departments.
2. Develop community support and funding by building bridges to business and non-profit communities.
3. Ensure strategic preventative planning to prevent duplication of efforts and retain our aging population through excellent services, programs, and community planning, allowing seniors to continue living in and contributing to the greatness of Denver.

**Recommended Next Steps:**

1. Develop a City and Community Advisory Council to evaluate and implement the recommended goals and formulate a comprehensive strategic plan.
2. Increase the capacity of the Office on Aging to coordinate community outreach, develop funding strategies, build a coordinated coalition of support, and develop the necessary infrastructure to enable long-term implementation of recommended goals.
3. Engage community members to facilitate outreach and coordinate implementation of suggested goals.
4. Develop and implement comprehensive policies within the City to achieve goals.

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<sup>1</sup> DRCOG Area Agency on Aging and National Research Center (2006). *2004 Strengths and Needs Assessment of Older Adults in the Denver Metro Area: City and County of Denver*.

<sup>2</sup> National Association of Area Agencies on Aging, Metlife, et.al. (2005). *The Maturing of America: Getting Communities on Track*.

## **References**

Blanchard, JM. (2007). *Silverprint Colorado: Frequently Asked Questions*.

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National Association of Area Agencies on Aging, Metlife, et.al. (2005). *The Maturing of America: Getting Communities on Track*.

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## **Appendices**

A. Prioritization of Summit on Aging Goals.

B. Framework for Implementation Organized Around Four Goals:  
Support and Coalition Building, Outreach, Funding, and Infrastructure.

C. Community Forums and Surveys Analysis