

Lehning, A., Chun, Y., & Scharlach, A. (2007). Structural barriers to developing 'aging-friendly' communities. *Public Policy & Aging Report*, 17, 15-20.

Structural Barriers to Developing 'Aging-Friendly' Communities

Introduction

The impending demographic shift in the United States will have a tremendous impact on public policy and community life over the course of the first half of the twenty-first century.

While approximately 12% of the U.S. population was age 65 and older in 2000, that percentage is expected to climb to almost 20% by 2030 (U.S. Census Bureau, 2004); this amounts to a doubling of the older adult population, from 35 million to 72 million (He, Sengupta, Velkoff, & DeBarros, 2005). In addition to these quantitative changes, future cohorts of older adults are expected to be qualitatively different as well. For example, members of the Baby Boom generation possess higher levels of education, are more racially and ethnically diverse, and are less likely to be married or have children than their predecessors (Frey, 2007). Baby Boomers are also expected to maintain current migration trends, living in suburban communities rather than in urban or rural areas, and in the West and South rather than in the Northeast (Frey, 2007).

While some locations will experience more growth in the older population than others, every community in this country will need to adjust its policies and practices to become a more suitable place for older adults to live. However, efforts to create more aging-friendly communities are opposed by structural lag; policies, norms, and social institutions that once seemed acceptable are now proving to be woefully inadequate to meet the needs of a growing elderly population (Riley, Kahn, Foner, & Mack, 1994). While 'aging-friendliness' has received an increasing amount of attention from researchers and policymakers within the past few years, there is as yet little consensus as to what comprises an 'aging-friendly' community or what barriers are preventing communities from implementing changes that could potentially improve

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the lives of older residents. In pointing the way forward, this report examines sources of structural lag constraining the development of aging-friendly communities and proposes a number of recommendations for policy changes designed to end this structural lag. We begin with a brief overview of the characteristics of aging-friendly communities.

Characteristics of Aging-Friendly Communities

An aging-friendly community has three primary characteristics: (1) age is not a significant barrier to the maintenance of life-long interests and activities; (2) supports and accommodations exist to enable individuals with age-related disabilities to meet basic health and social needs; and (3) opportunities exist for older adults to develop new sources of fulfillment and engagement. To quote Alley, Liebig, Pynoos, Benerjee, and Choi (in press), an aging-friendly community is “a place where older people are actively involved, valued, and supported with infrastructure and services that effectively accommodate their needs” (p. 5). What does this mean for a particular community? The specific policies and programs will vary depending on the needs of older residents and the larger community, but in general an aging-friendly community is one in which older adults can find appropriate housing, satisfactory mobility options, access to health care and supportive services, and opportunities for community involvement (Alley et al., in press; AARP Public Policy Institute, 2004; Partners for Livable Communities, 2005). Older adults themselves indicate that housing, transportation, walkability, access to services, and community engagement are the critical components of aging-friendly communities (Partners for Livable Communities, 2005). The majority of communities, however, have yet to adapt their land use regulations, housing policies, transportation policies, or opportunities for community involvement to the needs of their growing elderly populations.

Aging Friendly Communities and Structural Lag

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There are two types of structural lag that can prevent communities from being more aging-friendly. The first type includes policies that have created or maintain community characteristics inimical to the well-being of older adults. The second type includes outdated norms and traditions, which might be overcome by forward-thinking policies designed to promote aging-friendliness.

Policies that Create or Maintain “Unfriendly” Communities

The aging of the U.S. population is a relatively recent phenomenon, not envisioned in many existing public policies. Policy decisions made nearly a century ago are now creating a mismatch between the needs of today’s older adults and the political, social, and community institutions available to them.

Land use and Housing. Land use regulations impact the physical layout of a community and the types of housing available to its residents. Many of today’s zoning policies reflect the priorities of the turn of the twentieth century, rather than those of the twenty-first. In the early 1900s, the growth of industry and mass migration to urban centers created unsanitary conditions in American cities, prompting municipalities to develop zoning regulations as a way to address public health problems (Schilling & Linton, 2005). While zoning requirements such as the separation of commercial and residential districts were originally designed to prevent infectious diseases and improve the safety of neighborhoods, these regulations ultimately contributed to the isolation of residential neighborhoods, ultimately paving the way for the growth of suburbs.

The 1926 U.S. Supreme Court case of *Ambler Realty v. Village of Euclid* provided the legal rationale for zoning, asserting the government’s role in the protection of property rights and the maintenance of “separate residential districts to preserve and enhance the quality of residential life” (Schilling & Linton, 2005, 100). So-called “Euclidean” zoning provided the

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basis for partitioning residential areas from commercial areas, making it nearly impossible for older adults to meet basic social and instrumental needs, whether to purchase groceries or visit the doctor, without driving or finding some other form of transportation. In addition, this Court ruling has allowed local municipalities to use zoning restrictions to favor the construction of large homes and businesses that generate large property tax revenues over multifamily low-cost housing that does not (Schill, 2005). These restrictions prohibit the many forms of alternative housing needed by older adults who wish to remain in their community but are unable to maintain a large home by themselves, such as shared housing, in which several unrelated individuals live in the same house, granny flats, temporary homes located on a relative’s property, or congregate living settings (Folts & Muir, 2002; Pollak, 1994).

Transportation. Transportation policies, which are deeply intertwined with local land use policies, also present formidable barriers to the creation of aging-friendly communities. Federal policies, including major capital investments in a national highway system, subsidies that keep gasoline prices low, and failure to adequately account for the secondary environmental costs of automobile use, have helped foster an automobile culture that has encouraged the growth of suburban communities (Dagger, 2003; Frank, 2000). At the same time, local zoning regulations that promote low-density development and the separation of residential and commercial zones further disadvantage older adults who wish to engage in alternative forms of mobility, such as public transportation or walking. As noted recently by the U.S. Department of Transportation (2007), “For most of the second half of the 20th century, the transportation, traffic engineering, and highway professions in the United States were synonymous; sharing a singular purpose: building a transportation system that promoted the safety, convenience and comfort of motor vehicles” (p.3).

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One result of this automobile dependence is that if an older adult must give up driving due to health problems or functional decline, their mobility can become severely restricted. Many communities prohibit the use of electric wheelchairs, golf carts, and other slow-moving vehicles that may help older adults remain mobile on public roads (Bryce, 2006). In addition, someone who is too impaired to drive is unlikely to be able to negotiate fixed-route buses and other forms of public transportation. Moreover, some areas of the country, particularly in rural areas, offer almost no forms of public transportation (Stanfield, 1996). In other areas, separate authorities provide buses, trains, and other transportation services that serve different populations and geographic areas, creating an uncoordinated system that is nearly impossible to navigate (Stanfield, 1996). Finally, while Section 223 of the Americans with Disabilities Act (ADA) requires public transportation providers to furnish complementary paratransit services to those who cannot use fixed route systems (U.S. Department of Transportation, 2006), the inadequate federal funds attached to this requirement mean that paratransit services often only provide rides for medical visits or other necessary appointments, frequently require a reservation one or two days in advance, and are limited to a single municipality or subdivision.

Community Involvement. According to Putnam (1995), "public policy has destroyed highly effective social networks and norms" (p.8), making it difficult for older adults to participate fully in their neighborhoods and communities through such activities as providing assistance to other family members, visiting with friends, or participating in reciprocal community activities. For example, slum-clearance policies in the 1950s and 1960s severed intergenerational ties, while consolidation and regionalization of local services such as rural post offices and small school districts has removed traditional hubs of social and community interaction (Putnam, 1995). Moreover, families are scattered across the United States, and

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relatives and friends that reside in the same community are now unlikely to live within walking distance of each other.

Policies that Could Promote Aging-Friendly Communities

Structural lag results not only from the decisions made by policy-makers at the federal, state, and local levels, "but also through the millions of everyday thoughts and acts of the men and women who are growing up and growing old" (Riley & Riley, 1994, p.24). Demographic realities are changing faster than consumer attitudes or market practices, suggesting the need for public policies that encourage or create incentives to address the current as well as future needs of an aging society.

Land Use and Housing. Consumer attitudes and market practices regarding residential environments are not consistent with long-term personal or societal needs and realities. Housing developers estimate that only 10% of all households are interested in forms of alternative development, such as higher density neighborhoods, a variety of housing types in close proximity to each other, transit and pedestrian-oriented design, and a mix of land uses (Inam, Levin, & Werbel, 2002). Land use regulations can potentially encourage physical activity through the development of mixed-use neighborhoods and pedestrian-friendly design, and discourage institutionalization by easing restrictions on alternative forms of housing, making it substantially easier for individuals to continue to live in familiar surroundings as they age.

The history of zoning regulations in this country provides a precedent for local municipalities to actively design their communities to be more aging-friendly. The first zoning regulations addressed the dangers of infectious diseases, the primary public health concern of the time. Today, the top public health priorities include combating obesity, physical inactivity, and chronic diseases, and therefore public health researchers are calling for public policies that

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promote more physically-active environments (Schilling & Linton, 2005). In addition, federal and state legislation may be needed to overcome local zoning ordinances which favor expensive single-family homes over multifamily units and promote socioeconomic and racial homogeneity, at the expense of the alternative forms of housing needed by many older adults (Fischel, 1978; Schill, 2005).

The majority of Americans seem to prefer 'Peter Pan' housing, perfectly designed for individuals who will never grow old (Pynoos, Matsuoka, & Liebig, 2000). While some features, such as sloped entry paths and large bathrooms, are being incorporated into new homes, features specifically designed to address a disability remain stigmatized and unpopular, and do not increase a new home's market value (Connell & Sanford, 2001). Tax incentives, subsidies, or regulations are needed to encourage the development of new housing that includes features designed to help individuals remain in their home throughout their entire lives, such as nonslip flooring, grab bars in the shower, and wheelchair-accessible doorways (Pynoos, 1990).

Tax credits, low-interest loans, and subsidies also are needed to enable older adults to modify their existing homes, which tend to be older and in poorer condition than housing stock in general (Assembly Committee on Aging and Long-Term Care, 2006). Home modification has not yet achieved a high enough priority among the American public to warrant its own federal assistance program; instead, older adults seeking assistance must determine their eligibility for a wide range of locally administered funds, such as modification funds from Title III of the Older Americans Act or money from the federal Low-Income Home Energy Assistance Program (LIHEAP) and Weatherization Assistance Program (WAP). Policy changes also are needed to help older adults age in place and avoid institutionalization. For example, Medicare and Medicaid should cover more preventive services as well as assisted living facilities and other

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forms of supported housing, in order to meet the needs of older adults to live in the least restricted and most familiar setting possible. Uniform assessments for home and community-based services (HCBS) and integrated community long-term care financing and delivery systems (Assembly Committee on Aging and Long-Term Care, 2006) would complement policies to adapt local housing resources to the needs of older adults.

Transportation. Recent transportation policies, such as the Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) and the Transportation Equity Act for the 21st Century (TEA-21), call for more walkable, liveable, and accessible communities (U.S. DOT, 2007). However, recent policies (e.g., the 2005 Safe, Accountable, Flexible, and Efficient Transportation Equity Act: A Legacy for Users) give disproportionately low amounts of monies to transit and safety improvements compared with highway funds (Hill, 2006). Needed now are federal policies mandating safer vehicle designs for older adults (Rudinger et al., 2004), state and local efforts to improve the visibility of street signs and create safer intersections by adding left-hand turn lanes and arrows (Rudinger, Donnaghy, & Poppelreuter, 2004), transportation planning initiatives that support “traffic calming” in favor of pedestrians and slow-moving mobility devices (e.g., electric wheelchairs and golf carts), and state requirements for driving tests or instruction for older adults meeting specific health or vehicle operation criteria (Adler & Rottunda, 2006).

According to Davey (2007), “alternative transport means must replicate the attributes of private cars, that is, 24-hour availability and door-to-door capability” (p.61). Existing public transportation systems need dramatic improvements before they will adequately serve older adults. This will require coordination among diverse transit authorities, expanded and more

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flexible paratransit services, and mobility management systems to coordinate travel arrangements (U.S. Department of Transportation, 2003).

Community Involvement. Life expectancy at retirement has increased steadily over the past century, so that an older adult who retires at the age of 65 can now expect to live for another nineteen years or more (National Center for Health Statistics, 2006). Currently, however, there are few opportunities for older adults to fill those years with productive activities, using their skills or acquiring new ones and remaining engaged members of their communities. Some older adults may wish to transition from full to part-time employment, but are discouraged by the lack of benefits offered by such jobs. Other older adults would like to participate in volunteer work, but struggle to find meaning in volunteer positions that are undervalued, inflexible, and consist of only menial tasks (Center for Health Communication, 2004). Federal, state, and local governments could develop policies that create more chances for older adults to remain involved in their communities, including greater funding for programs such as Elder Corps, providing health insurance for part-time workers, creating insurance pools for volunteers, developing more adult education programs (Assembly Committee on Aging and Long-Term Care, 2006), funding public awareness campaigns and programs matching the skills of older adults with available volunteer opportunities (Smith & Gay, 2005), and helping organizations develop bridge jobs to help older workers transition to retirement or even begin completely new careers (Casner-Lotto, 2007).

Conclusion

Two types of structural lag are currently stymieing efforts to create more aging-friendly communities across the United States. The first type involves policies that have evolved over the past century, resulting in structural barriers to aging-friendliness in the areas of land use

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regulations, housing policies, transportation policies, and opportunities for community involvement. Equally important is the structural lag that stems from the attitudes and behaviors of the majority of Americans, who have not prioritized aging-friendliness within their communities or their personal life planning. Needed now is leadership among federal, state, and local leaders to create forward-thinking public policies and practices that help America's communities prepare for the demographic changes that are upon us.

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