

Commission on Aging
Margot Smith, Chair
Tanya Bustamante, Commission Secretary

COMMISSION ON AGING MEETING AGENDA

Wednesday, June 21, 2023
North Berkeley Senior Center
1:30 p.m. – 3:30 p.m.

Preliminary Matters

1. Call to Order by Chair Smith
2. Roll Call by Secretary
3. Public Comments
The public may comment about any item not on the agenda. Public comments are limited to two minutes per speaker. Public comments regarding agenda items will be heard while the Commission is discussing the item.
4. Introductions of Commissioners
5. Approval of minutes from May 17, 2023 (Attachment A)

Presentation

1. Overview on Housing & Seniors – *Jenny Wyant, Housing & Community Services Division*

Discussion/Action Items

The Commission may act related to any subject listed on the Agenda. Public comments regarding agenda items will be heard while the Commission is discussing the item. Public comments are limited to two minutes per speaker.

1. Commissioner reports
 - a. Conference on Aging
 - b. Land Use & Economic Development: Downsizing for Seniors (Attachment B) – *Commissioner Porter*
 - c. Other reports
2. Berkeley's Age-Friendly Plan (Attachment C)
 - a. Introduction: Berkeley's designation as Age-Friendly City – *Commissioner Porter*
 - b. Review of Plan – *Commissioner Orrick*
3. Future meetings

Items for Following Months

1. Older adults and Berkeley Adult School
2. Financial and digital literacy
3. Around town shuttle buses

Information Items

1. Council agenda report deadlines (Attachment B)

Adjournment

COMMUNICATION ACCESS INFORMATION

This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the **Disability Services Specialist at 981-6418 (V) or 981-6347 (TDD)** at least three business days before the meeting date. Please refrain from wearing scented products to this meeting.

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Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection at the North Berkeley Senior Center located at 1901 Hearst Avenue, during regular business hours. The Commission Agenda and Minutes may be viewed on the City of Berkeley website: <http://www.cityofberkeley.info/commissions>.

Secretary:

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Health, Housing & Community
Services Department
Commission on Aging

COMMISSION ON AGING REGULAR MEETING DRAFT MINUTES

Wednesday, May 17, 2023
1:30 p.m.

1. Roll Call

Present: (5) Chisholm; Cochran; Collins (arrived 1:55); Orrick; Porter; Smith

Absent: (0)

Excused Absent: (1) Lavault

Staff Present: (1) Tanya Bustamante

Public: (6)

2. Public Comment (5)

Presentation

3. Overview of Aging Services Social Services Unit- *Cuidonce Corona, Mental Health Clinical Supervisor*

Action Items

4. Approval of the Minutes from April 19, 2023 Regular Meeting:

M/S: Porter/ Cochran

Ayes:, Cochran, Chisholm, Porter, Smith

Noes: None

Abstain: None

Absent: Collins

Discussion Items

5. Discussion of Social Services presentation

Discussion; No action taken

6. Commissioner Reports

Discussion; No action taken

Commissioners adjourned at 3:35 p.m.

Minutes Approved on:

Tanya Bustamante, Commission Secretary

Fellow CoA Commissioners,

Below is a not quite year old, “for popular consumption” article from the Boston Globe. Though the “aging” area it is set in is more suburban and homogeneously wealthy (an “angst of the upper middle-class” scenario) than Berkeley and though the State of CA has passed many more new housing laws the last few years than Massachusetts has, the underlying forces at play are very similar even if locally our elder homeowners run the gamut from wealthy, to middle-class trying to get by on a fixed income, to the “house-rich” but very low-income.

Please give it a quick read. The Housing Crisis is complex and this “senior specific” issue is very much within the purview of the CoA. Making suggestions to Council as to possible ways to solve this piece of the problem is as well.

Thanks,

George Porter

From Boston Globe, 7/9/22.

In a market badly out of kilter, many older residents are stuck in their homes

Some say smaller dwellings in the state are too scarce and costly

By [Robert Weisman](#) Globe Staff, Updated July 29, 2022, 5:43 a.m.

They bought their homes when they were young, making money, and raising families. Now they’re empty nesters, in or nearing retirement, and living in houses that are too big for them.

But many older residents in Massachusetts who’d like to downsize — and turn over spacious dwellings to younger buyers desperate for room to expand — are finding it difficult, if not impossible. Even though their property values have ballooned, smaller homes or condos are scarce and carry prohibitive price tags in the state’s out-of-kilter real estate market.

“We’re just sitting tight right now,” said Mary Prosnitz, 66, of Wellesley. She and her 69-year-old husband, Jay, raised two sons, now grown, in the five-bedroom home they purchased 38 years ago and still live in.

A move that would let her stay in the town she’s familiar with — an aim of many downsizing suburbanites — seems impractical, Prosnitz said, because “there’s no ranch houses for seniors.” That, in turn, creates a logjam that means “no starter homes for young families,” she lamented.

“Everybody’s stuck” would be an apt descriptor of a market where the very properties both older and younger residents most want are in short supply, sending prices skyward. In June, the median sales price for a home in Greater Boston climbed to \$900,000. House hunters now must earn at least \$181,000 a year to afford a typical home, according a June report by Harvard University’s Joint Center for Housing Studies.

“It’s a circular stuck-ness that’s hard on everyone,” said Newton City Councilor Andrea Kelley, 69, a landscape architect who sold her five-bedroom house five years ago, but, unable to find a smaller one, remains with her husband on the first floor of a two-family rental home. “None of our kids would be able to afford a home in Newton today.”

Politicians and community leaders have long fretted about the soaring prices and undersupply of housing. But peel back the economic metrics, and you’ll find a demographic dynamic at play: Older folks hanging onto homes that are larger than they need, and a younger generation of two-income couples with children who are primed to move into those homes but remain trapped in apartments or condos that are too small.

Of the state’s occupied homes, 54.8 percent are owned by residents ages 55 and over, according to a US census data analysis by the Massachusetts Housing Partnership. That over-55 contingent represents just over 22 percent of the state’s population. The percentage of older homeowners is higher in some suburban towns, such as Lincoln (65.7 percent) and Scituate (65.8 percent), and in communities on Cape Cod such as Falmouth (74.9 percent) and Chatham (81.6 percent).

Many older and younger residents are looking for homes that would be a better fit for their next stage of life. But much of the new construction in Massachusetts, which real estate agents say many older buyers prefer because it saves them time

and money on maintenance, centers around pricey retirement communities and luxury condo complexes for young professionals drawing whopping salaries.

“We’re just not building enough affordable housing,” said Melvin Vieira, a Jamaica Plain real estate broker who is president of the Greater Boston Association of Realtors. “The last time this country built a lot of smaller homes for the middle class was when the soldiers were coming back from World War II. Now we’re building for the ultra-rich, for people who can afford to live in the Seaport.”

That creates a grim economic calculus for older folks who’d like to downsize, especially baby boomers who say they’re not ready to move into senior living communities — and may never be. In much of the state, buying a smaller home on a smaller lot, with fewer rooms and square feet, can cost nearly as much as they’d clear selling their current homes.

“I want to downsize but it doesn’t make economic sense,” said Joe Galli, 60, a divorced finance controller who lives by himself in a four-bedroom home in Shrewsbury and plans to retire in the next couple of years. “You can’t find a smaller home that’s less expensive than what you’ve got. Developers build big so they can get more money for it.”

Retired elementary school teacher Bill Andrews, 58, has grown so tired of looking at high-priced houses in his hometown of Upton that he’s now searching for land where he can build the house he wants. “I’m at the point where I’d even buy a gut job, something I’d tear down and rebuild,” he said. “But there’s no land available either.”

Some real estate watchers say the outlook for buyers could improve as rising mortgage rates and a weaker economy dampen demand. So far, though, that’s barely slowed the house hunting frenzy. While sales of homes and condos declined in June from a year earlier, the number of new listings shrank 2 percent for homes and 15 percent for condos, according to data from the Greater Boston realtors association.

“Certainly interest rates kicked some buyers out,” said Canton-based broker David McCarthy, the president-elect of the Massachusetts Association of Realtors. “But that just means you can make a decision on a home now without having to do it in three minutes” because of competition between buyers bidding over asking prices.

Multiple factors have aggravated the housing conundrum. The COVID-19 pandemic, disrupting the supply of building materials, has stalled many construction projects.

Hiring sprees at high-flying biotechs, such as Moderna, have heightened demand for homes. Savvy real estate investors specializing in “fixes and flips” often elbow out downsizing empty nesters and young families, driving up prices. And many local zoning regulations favor single-family homes while restricting development of homes on smaller lots, especially in suburban communities.

Prosnitz is part of a local group called Building a Better Wellesley that advocates for zoning changes to allow single-family homes to add auxiliary dwelling units with their own kitchens and bathrooms, creating another option for downsizing seniors or their adult children. Other suburbs, such as Newton and Arlington, have approved such plans.

“We need to find ways for more young families to be able to move to these communities, but it doesn’t seem feasible right now,” she said.

Despite the hurdles, some older residents have made the move, often to towns farther from Boston or closer to where their children and grandchildren live. But it’s seldom an easy transition.

Michele McQuillen, 63, said she and her husband, who still works as a doctor at Lahey Clinic in Burlington, sold their four-bedroom Colonial home in Needham in May. They’d lived there 29 years and raised three daughters. After moving temporarily into an Airbnb, they purchased a condo in Ipswich, close to the home of one their daughters.

McQuillen said the process of packing up their house, going through belongings, finding a new place, and waiting to close was a “nightmare,” though she’s happy with the outcome. “It doesn’t happen overnight,” she said. “I can see how most people can’t envision doing this.”

Executive Summary

Background and Context

The population of older adults in Berkeley will double in the next 10 years, resulting in 1 in 5 adults being over 65 years of age. According to a study by AARP and the Age-Friendly Berkeley community survey, the vast majority of older adults want to age in their homes and communities.¹ With this shift in demographics and the desire of people to stay and thrive in their communities, policy makers need to look at how our neighborhoods are designed, including the affordability of places to live, the inclusivity of social activities, the accessibility of infrastructure, and the availability of jobs for older people. This Action Plan builds on the work of the World Health Organization's (WHO) Age-Friendly Cities and Communities Initiative, launched in 2005 in partnership with AARP in the United States. This network has expanded to over 37 countries around the world and to over 300 cities in the United States.

The Age-Friendly Berkeley initiative helps prepare Berkeley for its rapidly aging population by gathering input from the community and pulling together public and private leaders, resources, ideas, and strategies to address the issues raised. Age-Friendly Berkeley is a collective effort whose goal is to ensure that all Berkeley residents are connected, healthy, and engaged in their environments. Planning for Age-Friendly Berkeley was guided by a Leadership Team of individuals and organization representatives who have been key voices in community conversations about aging. It has members from the city, the health sector, and the nonprofit sector (See Appendix A) who worked together to ensure that the recommendations are relevant and feasible.

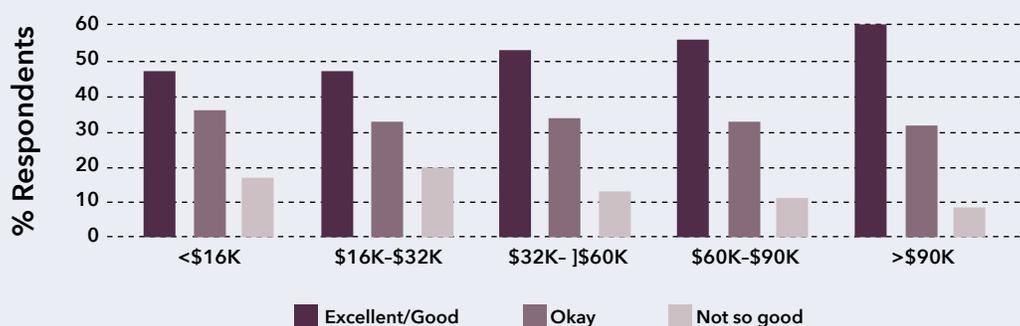
The Age-Friendly Communities movement focuses largely on collaborations with city and county governments to anticipate the wants and needs of their older populations, as well as on the growing demand for and cost of medical and social services. With Berkeley anticipating a doubling of its older adult population and with the support of former Mayor Tom Bates in 2016, the City of Berkeley completed an initial assessment, applied to and was accepted into the World Health Organization (WHO) and AARP's Global Network of Age-Friendly Cities and Communities.

Needs Assessment

Thus began a needs assessment and a 2-year process using the WHO framework to support Age-Friendly planning. The needs assessment included a review of related research and plans from other cities, a survey of over 1400 Berkeley seniors, 5 focus groups, and interviews with 18 city staff and numerous community partners. The findings are summarized in Appendix B and indicate that the needs of older adults in Berkeley are representative of findings across international, national and local studies and surveys. The community responses indicate that residents appreciate the service/activity rich environment of Berkeley, as well its walkability and its diverse people. Strikingly, residents' feelings on whether Berkeley is a good place to age varied significantly depending on income. Those earning less than \$32,000 annually were more than twice as likely to rate Berkeley poorly when compared to top earners.

¹ AARP, 2012 and Age-Friendly Community Survey 2018

Rating of Berkeley as a place to age by income group



Common issues raised by community responses included:

- The high cost of living
- Lack of affordable housing, including affordable home modification and in-home supports
- Limited reliability, coordination, and options of transportation
- Problems with sidewalks, poor lighting, lack of benches, and limited parking
- Crime
- Widespread homelessness
- Insufficient number of affordable, desirable settings for out-of-home assisted living
- Limited options for subsidized services for moderate income individuals
- Lack of “human touch” for information, referral and system navigation assistance.

The Age-Friendly planning process also leveraged and incorporated community feedback gathered as part of the city’s strategic planning process and the 2018 Health Status Report. The City’s strategic planning process includes a focus on affordable housing, improving ADA compatibility, investing in infrastructure and improving access to information. The Health Status Report found many strengths in Berkeley related to life expectancy, but troubling disparities for African Americans and other people of color. This Age-Friendly Plan is presented as a complementary, consistent and collaborative set of recommendations focused on creating a city that is inclusive, equitable, and accessible for people of all ages.



Approach

Several themes cut across the plan’s recommendations and actions. These include the need to:

- **create complete neighborhoods** that have a mix of housing types and land uses, affordable housing and transportation options, and access to healthy foods, schools, retail, employment, community services, parks and recreation options
- **foster ongoing collaborations** within large organizations, such as municipal entities, and across sectors and community organizations, as these are key to implementing policy and programs
- **leverage existing resources** to support, expand and coordinate a system of services and supports for aging in community
- **capture emergent opportunities** and leverage innovations in both technology and care/service delivery to support community-based living
- **strengthen intergenerational relationships** because while programs abound, they are mostly age-specific
- **work with other regional jurisdictions** and Age-Friendly cities to address overlapping issues and services and to find solutions to common challenges.

“Housing is not affordable.”

“It is a lively city with active people.”

“Does not have a welcoming downtown.”

Recommendations

The recommendations in this Action Plan are designed to build on what is already occurring in the community, improve impact, and address gaps. While recommendations are too numerous to list in the executive summary (see Appendix B), the leadership team reviewed local results using the 8 domains in the WHO framework and identified 4 priority areas and goals for the Action Plan: ²

HOUSING AND ECONOMIC SECURITY:

Develop a continuum of affordable, accessible housing options for older adults to age in their community regardless of their health or financial status.

TRANSPORTATION AND MOBILITY:

Advance a network of public and private transportation that equitably serves residents and connects them to services, social activities, and employment opportunities.

HEALTH AND WELLNESS:

Develop a more integrated system of services and supports that is person-centered and ensures that all residents have the opportunity to engage in health promoting activities.

SOCIAL PARTICIPATION AND CIVIC ENGAGEMENT:

Enhance neighborhood cohesion and social connectedness of all Berkeley residents with community events and activities that are inclusive, affordable, and accessible.

² Detailed information for all 8 domains is included in Appendix B where each domain includes relevant resources, current efforts that are in process, survey results and information from focus groups, GIS maps, and information from the 2016 Alameda County Plan for Older Adults and the Berkeley Age-Friendly Continuum needs assessment.

Implementation of the 3-year Action Plan

The prime objective of the Age-Friendly planning process was to develop a 3-year action plan to serve as a road map for collective action. Activities below are paced from Year 1 through Years 2-3, including evaluation and recommendations for continued improvement.

Year 1

- Designate Health, Housing and Community Services as the lead city department and the Aging Services division as the backbone agency to coordinate the initiatives
- Form a leadership team from relevant sectors of the community to work with the city
- Solidify action teams for the priority areas; prioritize recommendations
- Finalize budget and Identify funding opportunities
- Develop shared metrics and begin data collection
- Implement internal and external communication plans, set up a dashboard on the Age-Friendly website
- Catalogue and track efforts already in development.

Years 2-3

- Clarify desired outcomes and implement Year 2-3 recommendations
- Monitor progress and evaluate results using a Results Based Accountability framework
- Use the dashboard on the Age-Friendly website to track progress
- Integrate focus on aging into ongoing operations and partnerships
- Report back to the community on the status of all recommendations and begin to assess the next steps.

The Age-Friendly Framework

The World Health Organization and AARP's Global Network of Age-Friendly Cities and Communities fosters the exchange of experiences and initiatives as cities strive to better meet the needs of their older residents. The Age-Friendly Cities Initiative provides guidance for assessing local conditions and identifying areas for change. The Initiative uses a framework with eight domains which identify social and environmental factors that influence how well we age and how long we live. These domains align closely with the social determinants of health as defined in Healthy People 2020.¹¹ Based on the information gleaned from the local needs assessment, the domains in this report include:

1. Housing:

Public and private housing options, home maintenance, home modification, safety and comfort, proximity to services and community life

2. Health and Community Services:

Promote, maintain and restore health, provide home care services, coordinate service delivery and emergency planning

3. Transportation:

Public and private transit options, reliability, specialized services for people with disabilities, priority seating, traffic flow, roads, driver education, parking

4. Outdoor Spaces and Buildings:

Public areas, green spaces, outdoor and indoor seating, walkways, bike paths, lighting, customer service arrangements, public toilets

5. Social and Civic Participation:

Venues, timing, affordability, events and activities, inclusion on decision-making bodies, fostering diversity and inclusion; combating social isolation

6. Employment and Economic Security:

Volunteer and employment options, job training, age discrimination, entrepreneurship, elder fraud abuse, cost of living

7. Respect and Social Inclusion:

Programs to support cultural and ethnic diversity, public images of aging, intergenerational and family dialogue, public education, recognition of contributions to past and present, economic inclusion

8. Communication and Information:

Distribution of information, person-to-person communication, printed information, media, access to and use of technology and the Internet

¹¹ <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

Findings and Priority Areas

There are many programs and services in Berkeley that support an active and healthy community for people of all ages. The recommendations from this Action Plan are designed to build on what is already occurring, improve impact, and address gaps. Given the rapidly changing landscape and the pace of developing technology, we see this action plan as a living document, open to enhancement.

Several themes cut across the plan's recommendations and actions. These include the need to:

- **create complete neighborhoods** that have a mix of housing types and land uses, affordable housing and transportation options, and access to healthy foods, schools, retail, employment, community services, parks and recreation options
- **foster ongoing collaborations** within large organizations, such as municipal entities, and across sectors and community organizations, as these are key to implementing policy and programs
- **leverage existing resources** to support, expand and coordinate a system of services and supports for aging in community
- **capture emergent opportunities** and leverage innovations in both technology and care/service delivery to support community-based living
- **strengthen intergenerational relationships** because while programs abound, they are mostly age-specific
- **work with other regional jurisdictions** and Age-Friendly cities to address overlapping issues and services and to find solutions to common challenges.

After reviewing community responses and promising local efforts already underway, this Action Plan identified four priority areas:¹⁵

Housing and Economic Security

Transportation and Mobility

Health and Wellness

Social Participation and Civic Engagement

Within each of these 4 areas, recommendations fell into 3 categories:

Equity and Inclusion

Information

Infrastructure and Policy

These priority areas and recommendations are summarized in the following pages along with local programs and policies already in development. Detailed information for all 8 domains can be found in *Appendix B*.

¹⁵ Detailed information for all 8 domains is included in Appendix B where each domain includes relevant resources, current efforts that are in process, survey results and information from focus groups, GIS maps, and information from the 2016 Alameda County Plan for Older Adults and the Berkeley Age-Friendly Continuum needs assessment.

HOUSING AND ECONOMIC SECURITY

Financial and housing worries topped the list of concerns across all income levels. Given housing costs in the San Francisco Bay Area, most housing is no longer affordable; nor, is there a continuum of housing options (including assisted living) available in Berkeley as we age. More affordable housing is needed to prevent further displacement. Should older adults remain in their homes, they need affordable options for safety and accessibility home modifications. While there are several housing programs in Berkeley, and some programs specifically designed to help low income seniors, they are disconnected and it is clear from focus groups that people are unaware of them. Berkeley also needs to work with neighboring communities to expand eligibility criteria for those just above income guidelines who struggle without subsidized programs. Additionally, many residents believed that there are not enough flexible jobs with accommodations for older workers to stay employed. 20% of those who reported that they are retired are, in fact, "gigging" to make ends meet. The scale of these problems requires broad, often regional, policy solutions.

Already In Development

- ✓ Senior and disabled home loan program
- ✓ Accessory Dwelling Unit (ADU) policies
- ✓ Expanded home safety inspection program
- ✓ Several pilot programs: Homeless Coordinated Entry, Berkeley Home Match and the development of a Service Linked Senior Housing/ Community Center model
- ✓ Business Succession Planning

Goal and Recommendations

Develop a continuum of affordable, accessible housing options for older adults to age in their community regardless of their health or financial status.

→ Equity and Inclusion:

- Include targets for the older adult population in the City Housing Element.
- Address the need for affordable, accessible housing at all levels of need; expand eligibility criteria for subsidized services to raise access levels to moderate income individuals.
- Expand access to supportive housing for vulnerable populations.

→ Information:

- Provide an online resource and educational workshops at Senior Centers about renters' rights and strategies to qualify for access to both market and below market rate housing.
- Offer workshops and education on financial planning and elder fraud abuse.
- Assess and map housing options for the public via written materials and the internet.
- Provide broader communication of assistance with local taxes for low income residents.

→ Infrastructure and Policy:

- Develop a program for housing cost relief for moderate income seniors who do not qualify for income restricted housing.
- Incorporate mixed zoning in all neighborhoods, increasing walkability and access to services and commercial areas.
- Pursue affordable settings for out-of-home assisted living (e.g., CCRC and alternatives).
- Enable increased development of accessory dwelling units (ADU) by streamlining the construction approval process.

HEALTH AND WELLNESS ¹⁶

Berkeley and surrounding cities have abundant healthcare and community service resources; however, most programs do not have the capacity to meet the increasing demand from seniors. Care navigation for accessing resources, affordable in-home care, and memory care are gaps in local resources. Participants in the Berkeley Continuum, Age-Friendly Berkeley and Alameda County planning consistently voiced a desire to bring services and supports to them in their home rather than requiring institutional care. Residents need access to providers and other health and wellness services such as venues for fitness, especially in South and West Berkeley. Berkeley is unique in having its own public health jurisdiction, however, there needs to be more coordination with the County Public Health Department and neighboring cities' Age-Friendly efforts to address and prevent common health issues.

Already In Development

- ✓ Emergency preparedness and resiliency planning
- ✓ Healthy food access and cooking programs
- ✓ Whole Person Care pilot, an Alameda County wrap around program for the homeless
- ✓ Alameda County's Senior Injury Prevention Program (SIPP)

Goal and Recommendations

Develop a more integrated system of services and supports that are person-centered and ensure that all residents have the opportunity to engage in health promoting activities.

→ Equity and Inclusion:

- Implement additional health related programs around nutrition and exercise, with special outreach to underserved groups.
- Broaden outreach for dental care to low income and vulnerable seniors.
- Expand eligibility criteria for subsidized services to raise access levels to moderate income individuals.

→ Information:

- Provide affordable, local navigators to help address basic systems navigation needs, e.g., public benefits, housing, and service referrals.

→ Infrastructure and policy:

- Obtain funding for additional geriatric case managers and navigators.
- Convene a summit on memory care to plan a community response to dementia and related diseases.
- Improve the workforce pipeline of home care workers and create a centralized source of vetted referrals.
- Champion lower costs for in-home services, while ensuring a living wage for home health care workers.

¹⁶ In this context "wellness" refers to the social determinants of health, defined by the World Health Organization as "the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life." <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

TRANSPORTATION AND MOBILITY

Transportation is a major concern for older residents, especially those in isolated areas such as the Berkeley Hills and low-income residents in other areas of the city. Many older adults are unfamiliar with public transportation or do not trust its reliability. Uneven sidewalks and pedestrian safety concerns are also barriers for accessing transportation options. Public transit issues such as the absence of benches or shelter at station stops and inadequate lighting, often prevent people from using services. Better public transportation options can help seniors access needed services and combat feelings of isolation. Safe driving refresher courses are also needed but there are few local options.

Already In Development

- ✓ New street policy and design approaches being used as streets are repaired and developed
- ✓ Master Pedestrian Plan being developed in commercial areas
- ✓ City sidewalks being assessed for repairs
- ✓ Mobility management and travel training being offered to seniors

Goal and Recommendations

Advance a network of public and private transportation that equitably serves residents and connects them to services, social activities, and employment opportunities.

→ Equity and Inclusion:

- Ensure that popular destinations are accessible via various transportation modes, particularly for those in outlying neighborhoods or with mobility challenges.

→ Information:

- Extend education programs about transit options.
- Promote older driver safety by linking seniors to low-cost defensive driving workshops.

→ Infrastructure and policy:

- Continue to develop 'complete streets' design to ensure safe travel and access for users of all ages and abilities regardless of their mode of transportation.
- Collaborate to advance affordability, availability, and reliability of public transportation.
- Improve transportation infrastructure (benches, pavement, shelters).
- Create well marked 'safe routes' to common destinations with smooth sidewalks, large print signs, and good lighting.

“Good public transportation.”

“Walkability in ‘the flats’ ”

“Convenient parking in downtown is not easy to find.”

“Poor transportation options”

SOCIAL PARTICIPATION AND CIVIC ENGAGEMENT

While many Berkeley residents participate in local activities, organizers need to outreach broadly across race, immigration status, sexual identity and orientation, income level, and housing status. The population of isolated seniors needs to also be considered. Although there are various websites and newsletters indicating what is available in Berkeley, most residents are unaware of the offerings. Multiple modes of communication need to be used to ensure that older adults stay informed and engaged. The city website is difficult to navigate and needs to be regularly updated to be useful. In addition, many people call the county 2-1-1 information line, but data about why people call and how they manage referrals is not tracked. Being the home of the independent living movement, Berkeley was ahead of other cities in terms of accessibility. However, public buildings and parks need to continue to be updated with evolving standards to ensure residents with mobility challenges can participate. For the same reason, amenities to make parks safer and more accessible, like public bathrooms, lighting, and benches, are needed.

Already In Development

- ✓ Development of a home visit program to isolated seniors
- ✓ Inclusion of older people in public images
- ✓ Intergenerational programming in the schools and community (e.g., active volunteers)
- ✓ Redesign of the city website to make it more accessible and easier to navigate
- ✓ Plans to increase access to broadband internet, up-to-date devices, and training, in partnership with nonprofit organizations
- ✓ Redevelopment of Berkeley's 3-1-1 line, an online service center
- ✓ Improved access to information about the options for social engagement in Berkeley
- ✓ Older adult inclusion in concept planning for the North Berkeley Senior Center
- ✓ Addition of older adult programs in parks and recreation venues and consideration of increased hours at public parks

Goal and Recommendations

Enhance neighborhood cohesion and social connectedness of all Berkeley residents with community events and activities that are inclusive, affordable, and accessible.

→ Equity and Inclusion:

- Re-frame senior centers and outreach to attract a broader community.
- Promote Age-Friendly business practices through an Age-Friendly Business Certification program.
- Seek older adult input into current municipal planning around resiliency and infrastructure.

→ Information:

- Create an easier to access and navigate directory of Age-Friendly organizations, activities and engagement opportunities.
- Add a link to activities for older adults to the City of Berkeley website.

→ Infrastructure and policy:

- Create safe routes to common destinations.
- Improve park bathrooms and facilities.
- Re-open Willard Pool to improve public access to swimming in South-East Berkeley.

Appendix C: Data Collection

- A. Survey: The AARP Age-Friendly Community Survey was used with a few minor adjustments
1. Circulation: The survey was available between March 1st and April 10
 - A link to the online version of the survey was posted on NextDoor and sent as an email blast through the following organizations:
 - o The Mayor and City Council Member's websites
 - o A City website news announcement
 - o Ashby Village
 - o University of California Retirement Center Newsletter
 - o AARP mailing to local members
 - o Member organizations of the Senior Services Coalition of Alameda County
 - A press release announcing the survey was sent out by the local paper, Berkeleyside,
 - Hard copies were made available at organizations:
 - o All 5 Berkeley Public Library Locations
 - o 2 Resources for Community Development senior housing locations
 - o 6 Satellite Affordable Housing Associate senior housing locations
 - o Both Senior Centers
 - o J-Sei
 - o Ashby Village
 - o Meals on Wheels
 - o LifeLong Medical Care Over 60 Health Center
 - o Jewish Community Center of the East Bay
 2. 1402 residents responded. Analysis provided by Nancy Frank & Associates, Piedmont, CA
- B. Supplemental local reports:
- See www.berkeleycontinuum.org 2017 needs assessment and focus group information used in this report
 - See Alameda County Plan for older adults, May 2016 https://alamedasocialservices.org/public/services/elders_and_disabled_adults/docs/planning_committee/5.2016_County_Area_Plan.pdf
- C Interviews with 18 city staff in 9 City of Berkeley departments: April-May 2018
- D Additional Focus Groups, Public Forum, City Council Presentation and meetings with the Commission on Aging
- City Council Presentation and Workshop: July 17, 2018
 - Additional Focus Groups: September 22, 2018, October 24, 2018
 - Public Forum co-hosted with the Commission on Aging: October 27, 2018
 - Several meetings with the Commission on Aging throughout project

Focus Group Question Guide

Question 1: Imagine that you are describing to people the experience you are having in Berkeley as you grow older. What do you like best about it? What is working well for you? What has been most challenging for you? What are the “age friendly” characteristics that are most important to you?

Question 2: Which of the characteristics we just mentioned are strongest or currently lacking in Berkeley?

Question 3: Of all the things we’ve listed here, what do think are the priorities? Where should we start if we are going to develop new services, supports or conditions?

As time allows and depending on focus of discussion:

Question 5: Do you have concerns about whether you will be able to live out your years in Berkeley? If so, why? Where would you go?

Question 6: How many of you have access to a computer and the internet in your home or building? Do you ever skype? Other uses?

Question 7: How do you want to be able to learn about resources that are available to you as your health and/or everyday needs change? A place (like a center?), a person (like a navigator?) the internet ?

Question 8: If someone offered to come to your home to check it out for fall hazards, talk to you about what is available in the community, needs you might have, help you plan and provide you with referrals and linkages, would that be attractive to you?

Question 9: If you had to move out of your home because you need more help day-to-day than you can get at home, where would you go? What would be your fears about living in assisted living or nursing situation?

Focus Group Survey

1. How old are you? _____
2. What is your zip code? _____
3. Did you participate in any recent survey about aging either from Berkeley or Alameda County?
4. Are you on Medicare or MediCal?
5. Where do you get your medical care?
6. Income: What would you estimate was your income last year from ALL sources (social security, retirement, pension, savings, employment, tenants, other)

Does that income support: Only you, Yourself and a partner/spouse with no other income, Yourself and a partner/spouse with additional income from them, Includes another dependent

8. What are the biggest challenges you are facing (or anticipating) as you age in Berkeley:

Is there anything else you would like to tell us?