Aging and Smart Growth: Building Aging-Sensitive Communities

This paper was written by Deborah Howe, Ph.D., FAICP, with the School of Urban Studies and Planning at Portland State University, in collaboration with the Funders’ Network for Smart Growth and Livable Communities and Grantmakers in Aging. It is the seventh in the series of translation papers published by the Funders’ Network to translate the impact of suburban sprawl and urban disinvestment on issues of importance to America’s communities and to suggest opportunities for progress that would be created by smarter growth policies and practices. Other issues addressed in the series of translation papers include social equity, workforce development, parks and open space, civic engagement, agriculture, transportation, education, health, children and families, housing and the environment, and community organizing.

Abstract

The sprawling, automobile-dominated landscape so prevalent throughout the United States seriously limits the continued mobility and independence of older people. This reality is of enormous consequence to the aging experience. Family members, friends, and the social service system are faced with the challenge of helping seniors overcome the environmental obstacles created by existing development. In the years ahead, the growing number of seniors, a result of the aging of baby boomers, stands to overwhelm this system. This underscores the importance of transforming our communities so that they are aging-sensitive, making it possible for people to maintain their health and independence even as needs change.

Leadership is needed to support planning processes and implementation efforts that improve the interface between the aging experience and the built environment. Public education, training, research and investment are necessary components of the action agenda that must be put into place if elders are to be full participants in – and not cut off from – our society in the coming decades.
Introduction

American society has a history of assisting older people in the form of social security; subsidized, low-income housing; delivery of meals to shut-ins; and medical insurance. We have fallen short in one arena, however, that has a profound impact on the quality of our experiences in day-to-day living—the built environment. Through land use planning and regulations, public investments, private financing, and dominant societal values, we have created communities that present significant obstacles to the continued independence of older adults. Our housing stock—with its preponderance of single-family homes—favors healthy households with relatively significant incomes. In any given community, affordable housing alternatives are often severely restricted. The prevailing land use pattern requires access to an automobile, creating a hostile environment for pedestrians and limited, if any, transit services.

This situation would not be a great concern if families, friends and institutions such as churches were able to provide the individualized support that each person needs as he or she ages. But the reality of the aging of the baby boom generation is such that, proportionately and numerically, society stands to be overwhelmed by the needs of older people. The numbers of people who are 65 and older in the United States will more than double from 2000 to 2030 (34.8 to 70.3 million), ultimately representing one out of every five people. This means fewer wage earners paying into the social service and retirement system and more expectations of relatively fewer caregivers (both family members and professionals). The need for caregiving is exacerbated by greater longevity, which increases the probability of disabilities associated with old age. Up to half of those aged 85 and above, for example, suffer from some form of dementia.

It is in our collective best interest, as individuals and as a society, to aggressively transform our communities so that they are aging sensitive, thereby enabling older people to maintain their independence and ensuring efficiencies in providing services to lessen the strain on caregivers. Foundations can play a major role in pursuing this goal and Smart Growth practices can provide the planning framework.
The explosion of growth in U.S. suburbs following World War Two changed the prevailing land use patterns in metropolitan regions. Fueled by federally insured mortgages, the development of the interstate highway system, and cheap gasoline, returning veterans were able to pursue the American dream of owning a single-family house with acreage. They were often leaving behind densely developed cities with overcrowded, deteriorated housing, and severe air and water pollution.

The relatively low densities in the suburbs and the absence of industrial development stood as a counterpoint to the cities. Residents sought to preserve these amenities through land use zoning that ensured the protection of personal investments in single-family houses through separation of land uses, requirements for large lots, and prohibition of housing alternatives. Suburban developments proceeded at a scale previously unknown that reinforced homogeneity and stood in stark contrast to relatively small subdivisions that characterized the evolution of most inner-city neighborhoods.

The suburbs were developed first and foremost to meet housing needs, with residents initially traveling to cities for employment and retail services. Thus, from the start, virtually everyone had to have access to a car. Eventually jobs and retail moved to the suburbs. This has typically happened in an opportunistic manner (on land that is not necessarily in the best location to meet the needs of the immediate community) and in accordance with corporate standards (such as location on main highways and the provision of visible and ample parking). While these developments represent a diversification in suburban land uses and have enabled certain suburbs to grow to the point where they compete effectively with the traditional downtown in terms of office space and employment, continued reliance on cars is mandatory. Low densities and divergent directions of preferred travel limit options for offering public transit.

The bias toward the automobile has also contributed to environments that are especially unsafe for pedestrians. The highest rates of pedestrian fatalities are found in the more recently developed, sprawling communities in western and southern United States. An analysis conducted by the Environmental Working Group revealed that pedestrians in Ft. Lauderdale face risks that are eleven times higher than those in Pittsburgh. Senior citizens are particularly vulnerable as pedestrians with a death rate almost twice that of the general public.1
There is a growing interest in examining the relationship between urban form and health. At issue is whether a pedestrian unfriendly environment contributes to poor health. This is an important consideration in healthy aging as research reveals the relationship between physical exercise and health of older adults.

In the 1970s and earlier, the highest concentration of older people could be found in inner-city neighborhoods. This is not surprising given that younger people were settling in the suburbs. Now residents who moved to the suburbs as young adults in the 1950s and 1960s are aging. The proportion of population aged 75 and above (the age at which frailty begins to increase) is correlated with when the suburbs were settled, declining with distance from the city. These more distant communities will also experience the "rolling wave of frail elderly" in the relatively near future.

All of this is a recipe for serious problems. As of yet, however, there has not been much public demand that planners and policy makers pay attention to these issues. Many people are in denial about the realities of growing old. It is difficult personally to plan for the unknown, even more so when such planning is delayed to the point at which an individual's energy level, physical ability and mental capacity are in decline. The tendency is to want to stay as long as possible in one's own home until a crisis forces a change. At this point, caregivers, be they family, friends or agencies, seek out and use available options, even if they are less than ideal. This is not the time when people advocate for changes in land use patterns or improvements to the transit system, sidewalks or other aspects of the built environment. When the crisis is over, the survivors get on with their life without acting on what they have learned so as to make the community better for others.

Communities need to develop a better understanding of locally specific aging experiences with particular attention to the obstacles and constraints presented by the built environment. An aging-sensitive community provides housing alternatives, a transportation system and a land use pattern that enables people to maintain healthful independence even as their needs change. These are principles that speak to the heart of Smart Growth initiatives.
Planning Alternatives

There are few communities in the United States that are making significant progress in planning for an aging society. There are, nevertheless, some promising efforts underway. State governments, regional planning agencies, municipalities, and not-for-profit groups are rising to the challenge, offering creative ways of planning for an aging society. These are important initiatives as they demonstrate how to facilitate public dialogue about an issue that has not received much attention.

State-level Planning

Two good examples of state-level planning offer models worth consideration. In Hawaii, the Executive Office on Aging completed a strategic plan in 1998 for preparing for the aging baby boomer society. Developed in consultation with planning and public administration faculty from the University of Hawaii, the plan is a blueprint for actions that can be undertaken by individuals, organizations and government. The recommendations range from appropriate services to better housing and transportation alternatives and from expanding wellness programs to encouraging advocacy. The two-year planning effort had three phases including identifying trends and forces as well as potential scenarios focusing on the quality of life in the year 2011 (the first year that baby boomers reach 65); clarifying core values and preferred futures; and developing means of achieving the preferred futures. Strongly held cultural values regarding families, social responsibility and environmental quality permeated this process. These values are explicitly defined in the final document and reflected in preferred scenarios such as the creation of family-centered communities with multi-generation family houses and compounds or rural villages which combine small farming operations and cooperatives with community centers.

Minnesota’s state government, under the direction of the Department of Human Services, sponsored the Aging Initiative: Project 2030, a two-year effort to examine the impacts of aging on state agencies, local government, businesses and individuals. This initiative had its origins in a concern that the Medicaid program could not be sustained in light of increasing need for publicly funded long-term care. Intended to identify ways of reducing the demand for long-term care, the planning effort was ultimately expanded to address a much wider array of issues, building on publicly held values regarding the importance of longer-term, comprehensive approaches.

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Citizens League, a respected regional think tank, to convene a study committee and prepare a report identifying public policy alternatives. Under the governor’s signature, all state departments were asked to appoint a liaison to provide information on which Project 2030 issues were relevant to their department and what actions were currently being taken or should be taken.

The planning efforts in Minnesota were led by a social service agency. Nevertheless, a strong emphasis was placed on issues of land use and the built environment as an integral aspect of quality living environments for older people. It is a perspective that is viewed, not in isolation, but as it relates to issues of service provision, a viable economy and mental health.

**Regional Planning**

The Metropolitan Planning Council for the Twin Cities (Minneapolis and St. Paul, MN) has established regional policies that build on the concept of "lifecycle communities." This approach acknowledges that land use patterns and housing alternatives vary according to when a community was developed. These differences have a bearing on the extent to which a person can live his or her whole life in one area. What is needed to transform a community so that it supports the entire lifecycle of individuals will vary by community type. An inner-city neighborhood may already have a supportive physical environment, but crime and poverty require investments in social services. An older suburb may need public subsidies for the construction of new senior housing and the development of expanded transit services. A newer suburban community may need changes in zoning regulations to facilitate neighborhood commercial development.

Most American communities have evolved in a manner that either requires people to move away when needs change or forces them to make less than desirable adaptations.

**Municipal Planning**

Municipal planning efforts that focus on aging, while limited in number, vary widely in how they approach the issue. The City of St. Louis Park, Minnesota, a post-World War Two suburb to the west of Minneapolis, sponsored a visioning exercise in 1994 in response to the expressed interests of grassroots groups representing residents, the business community, school district and social service agencies. What emerged was a commitment to create a
town center that integrates a medical campus tied to the hospital, an array of assisted living alternatives for older people, a community recreation center, employment opportunities and retail services. The goal is to "create a community so special that people will consciously choose to make St. Louis Park their lifelong home."7 In response, the city has revised its comprehensive plan to incorporate long-range policies that support the desired land use changes and public works investments. Zoning and development standards were amended to allow higher densities and mixed uses and to require sidewalks and improvements that facilitate walking and bicycle riding.

St. Louis Park’s planning effort reflects a dynamism that builds on strong grassroots interest and commitment and a political culture that is not adverse to risk. Most municipal planning initiatives that speak to the issue of aging tend to be more modest in that they have a narrower range of focus. In other words, unlike St. Louis Park, they are not seeking to transform the whole community.

In the K-W plan, aging is one of many issues considered. In contrast, the city of Richmond and Henrico County, Virginia undertook a six-month planning process concentrating solely on aging. By integrally involving service providers in a task force and as sources of information, it was feasible to identify the priority needs of older people including transportation services, housing options, quality of life issues, and health care.9 What is unusual about this effort is the emphasis on city and county cooperation and the outreach to service providers who often shun the more traditional community planning processes that tend to focus almost exclusively on physical planning.10

Civic Planning

Sometimes effective community planning initiatives originate outside a government. Some of these involve partnerships with the public sector either initially or as they evolve. Here are two examples under the broad category of civic planning.
The Evergreen Institute on Elder Environments in Bloomington, Indiana has involved over 1,000 citizens of all ages in a discussion of what constitutes a healthy neighborhood for older people.¹¹ Using household surveys, ethnographic fieldwork by project anthropologists and creative writing projects involving youth and elders, the institute has derived design principles for a healthy environment: neighborliness; an environment for growth, learning, and autonomy; a positive image; diverse and affordable housing options; and an intergenerational community. These principles ground a series of community initiatives including: reverse mortgage and home modification programs; ECHO housing (defined below); a mixed-use, mixed-income senior housing project; sidewalk and other urban amenity improvements; and a health cooperative combining preventive care and voluntarism.

The Evergreen Institute works in partnership with Bloomington Hospital, the city, and Indiana University along with other organizations. The Retirement Research Foundation of Chicago provided start-up funds.

The Evergreen Institute has cultivated a constituency for change creating a level of energy among citizens for pursuing specific goals. The city as a partner is receptive to these initiatives. More often than not, a local government has to be pressured to meet the needs of particular interest groups. Such groups will be more effective if they can provide credible data to support their cause. In 1994, the Contra Costa County Advisory Council on Aging sponsored a survey in the City of Pleasant Hill that was spurred by older residents who wanted a say in local planning for housing and related services.¹² Retired volunteers and middle-aged working people took ownership of the survey and interviewed three hundred residents. The results provide a picture of the city's older residents revealing that 70 percent want to stay, many need access to transportation, and women are particularly concerned with issues of safety. None of this would come as a surprise to those familiar with the field of aging, but the importance of the survey is that it is community specific and it helps citizens, planners, and policy makers appreciate these issues at their local level.

These initiatives have in common the notion that it is possible to define public goals and actions for improving the lives of older adults. The predominate themes include the recognition that healthy environments for older people are good for all ages; credible, locally-specific information is essential; values are important in defining preferred alternatives and appropriate courses of action; and it is
necessary to bring together relevant stakeholders. These planning efforts represent essential first steps in making publicly based decisions about how communities intend to provide for the needs of older people.

**Housing Alternatives**

Perhaps one of the most common ways that communities seek to meet the needs of older people is through various housing alternatives. Some alternatives are discussed next.

**Home Sharing**

One would think that people have a right to live with whomever they choose, but this is not the case in many U.S. communities. Restrictive definitions of what constitutes a family along with outright limits on the number of unrelated individuals who are allowed to live together as a household can present obstacles to older people who want to share housing. It took a New York State Supreme Court Decision to allow the Harvest House in the Town of Syosset. Syosset’s zoning ordinance prohibited more than two unrelated persons from living together. The zoning ordinance of DuPage County, Illinois, provides for Senior Citizen Home Sharing. Five or more people aged 55 and older can live together in a group home. This is considered a special use and requires a permit. Senior Home Sharing, Inc., a county-based nonprofit corporation has developed five such homes.

**Accessory Apartments**

Accessory apartments are separate dwellings created out of extra space within, above or on the lot of a single-family house or garage. Advocates have long promoted them as helping older people by providing a source of income, living space for a caregiver, and additional security. Opponents fear the degradation of single-family neighborhoods because of more cars and an increase in the number of renters based on the perception that numerous conversions in any one neighborhood will occur. Experience suggests that the demand is not significant although it is definitely greater in areas with high housing prices.

Daly City, California, began allowing accessory apartments in 1983. The maximum size of the apartment is 25 percent of the principal dwelling unit and owner occupancy is required. Permit fees are set at $100, lower than the cost of adding a new bedroom and applicants are ensured of an immediate assessment of the feasibility of their obtaining a permit. Nearly three hundred new units have been created, many of them by...
senior citizens and empty nesters on fixed incomes. One Alzheimer patient and homeowner was able to trade housing for medical services.\textsuperscript{16}

Officials in the Town of Hyde Park, New York, were willing to allow accessory apartments, but they wanted initially to restrict them to older people.\textsuperscript{17} After hearing arguments about the role that accessory apartments could play in making housing affordable for young people, the town adopted a liberal set of regulations allowing the units in all residential zones, in new construction, and in relatively small houses. Despite these provisions, only one or two permits were sought per year. This underscores that these units will not overrun a community. It also suggests that restricting them to older people is unwarranted. It is quite possible that their value to aging in place will be more evident if homeowners were to create them when they are middle-aged, before their income is restricted and before they are experiencing health challenges.\textsuperscript{18}

Another accessory apartment alternative is the Homecare Suite manufactured by Mobile Care, Inc. of Lawrence, Kansas.\textsuperscript{19} This modular, fully accessible unit is inserted within an attached garage. Installation takes seven to ten days, removal only 48 hours. The unit retails for $30,000 or it can be rented. Units are available either with or without a kitchen. The absence of a kitchen may ensure the acceptance of this alternative in those municipalities that do not allow accessory apartments.

**ECHO Housing**

ECHO stands for Elder Cottage Housing Opportunity. These are portable, fully accessible cottages that are placed on the lot of a single-family house to provide accommodations for an older person. Despite their popularity in Australia and Canada and strong promotion by the American Association of Retired Persons, they have not caught on as a housing alternative.\textsuperscript{20} Nevertheless, they are allowable in communities such as Fort Kent, Maine.\textsuperscript{21}

An ECHO house, by design, is to be removed once an older person no longer needs it. Proponents have considered this to be one of the selling features of this alternative in that it is not a permanent addition to the housing stock. Some would argue, however, that permanence is not a problem; the additional density has benefits that enhance a community including increasing the feasibility of transit alternatives and the viability of neighborhood stores. This is the basis for an amendment to the Portland, Oregon zoning ordinance.\textsuperscript{22} In response to the regional government’s mandate
to increase density by allowing accessory units, the city revised their overly restrictive "Add a Rental" program and now permits freestanding units on existing lots. These are permanent structures; unlike an ECHO unit, they do not need to be removed. The impetus for this policy was not an explicit concern with meeting the needs of older people although the potential benefit is obvious.

**Senior Housing Developments:**
The private sector is challenging local governments by developing new forms of senior housing that do not conform to what zoning ordinances have allowed. Twenty years ago, nursing homes were the primary alternative when older people’s care needs increased to the point that they could no longer remain in their home. Today the growing list of options includes adult care foster homes, congregate housing and assisted housing. Many of these alternatives are intended as a counterpoint to the institutional nature of traditional nursing homes and as such merit inclusion in more traditional neighborhoods. Zoning ordinances, however, treat them as multi-family rental housing or medical institutions. An aging-sensitive community will seek to integrate this housing form through zoning and site planning standards that relate the housing to the surrounding neighborhood and transportation system.²³

Some municipalities provide incentives for the construction of housing for older adults. San Diego offers developers the opportunity to build at a 50 percent increase in density with the additional units required to meet city low-income and affordability criteria. Projects are also subject to location criteria that ensure level terrain and access to stores, services and transit. Lincoln, Nebraska, uses density bonuses to encourage developers to meet barrier-free design criteria. Clackamas County, Oregon, uses a point system that rewards the siting of elderly housing in close proximity to various services.²⁴

Another important housing alternative is the conversion of buildings that are often in the heart of communities.
According to Madeleine L’Engle, a science fiction author, the shortest distance between two points is a "wrinkle," a means of inter-galactic travel made possible by bringing two points together. The same concept can be applied in our communities. By bringing land uses together, we reduce the time, distance and effort of travel. This gives older people alternatives to driving and eases the demand for transportation services.

Mixed land uses can occur within a building. The Stark Metropolitan Housing Authority in Canton, Ohio, for example, operates a medical clinic within a senior high rise. The Lone Plaza, a high rise with a preponderance of seniors on the Portland State University campus in Oregon, has a bank branch and restaurant on the main floor. Mixed uses may also be within a given parcel. When Safeway, Inc. developed a grocery superstore by consolidating two blocks in Portland, Oregon, they had to request a change from residential to commercial zoning with the intention of demolishing a block of housing. Since the city has a no net housing loss requirement for zoning changes, Safeway constructed a four-story housing complex for seniors adjacent to the grocery store. The same housing policy was the impetus for a senior-housing complex built in conjunction with another Safeway and a Target store near a light rail stop in the eastern part of the city.

The benefits of mixing land uses can also be achieved by the close proximity of compatible developments. Convenience stores next to suburban developments serve this purpose, as do traditional neighborhood commercial districts. Historical development patterns and appropriate zoning are factors in ensuring the feasibility of such areas to serve local needs. The city of Forest Grove, Oregon, allows neighborhood stores as a conditional use in all residential zones. An example of proximate land uses involved the construction of two senior housing projects next to the Senior Center in Everett, Washington. The housing is physically tied to the center. Pharmacies, grocery stores and retail shopping are within walking distance and medical services including two hospitals are within a 12-block radius.

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The Transportation/Land Use Connection

One of the challenges of a free market economy, however, is that businesses have the right to move. This can be particularly problematic for place-bound seniors who have come to depend on a local service such as a grocery store.
located. This means that services may still be available in any given city but that transportation must now be provided. One alternative is property and/or business ownership by a non-profit group. For example, a church in northeast Portland operates a grocery store in a neighborhood that has long been under-served. In the 1970s, after extensive public discussion, the town of Garrett Park, Maryland, bought the building that housed the local post office and general store. The town leases and manages the building in order to serve local needs. Tenants at the end of 1994 included town offices, the post office, a town store and café, a beauty salon, a fish market, a real estate office, and other uses.27

A well-designed land use pattern will lose its impact if focused attention is not given to issues of linkages within the transportation system. A ramp to a senior center will be of limited value if the parking lot is paved with gravel, which is difficult to traverse in a wheel chair. A nearby grocery store can be inaccessible if one must cross at an intersection with a light cycle that does not reflect the slower walking speed of seniors. A sidewalk that is not maintained, the absence of comfortable benches, the lack of shade and no public restrooms can create significant obstacles for even healthy seniors. Appreciating this level of detail requires understanding how an older person experiences the built environment.

**Opportunities for Funders**

Community planning for aging is an issue that needs champions. Public dialogue about aging has tended to focus on health care, social security, and the availability of competent, affordable long-term care staff. What has been missing is a consideration of what can and should be done at the community level to support healthy aging and to remove obstacles to the provision of care.

Funders could provide leadership in this arena by facilitating dialogue between service providers and those with responsibility for guiding the physical development of a community such as planners, architects, builders and investors. The goal would be an infusion of a social perspective in the planning process and associated policies such as site planning standards, land use plans, and infrastructure improvements. Minnesota’s *Aging Initiative: Project 2030*, the City of St. Louis’ planning effort, and the Evergreen Institute’s work in Bloomington, Indiana offer ways of addressing this challenge. These and other
Funders can provide support by underwriting the development of educational materials such as the housing alternatives publications sponsored by AARP.

Planning models need to be widely disseminated so they could be applied in other locales.

The lack of attention to the aging/environment interface underscores the need for public education. Since we all experience aging individually, it is imperative that educational efforts target individual responsibility. If people make more informed choices as they face the prospect of growing old, then they will begin to demand the necessary community transformation. Funders can provide support by underwriting the development of educational materials such as the housing alternatives publications sponsored by AARP. Often, however, more tangible examples are needed to transcend preconceived ideas. Some home-builders associations regularly sponsor "Street of Dreams" developments showcasing contractors, designers and innovative housing concepts. These developments draw thousands of people over the course of a month or so after which the houses are sold. Demonstration houses with accessory apartments and barrier-free design elements and designer grab bars can go a long way in facilitating acceptance by consumers, developers and policy makers. Funders can support such initiatives.

Funders could sponsor local colleges and universities in conducting assessments of various communities and neighborhoods to identify what would be needed to transform these places into lifecycle communities. This type of analysis could also be conducted by a team of peers from around the country who are invited into the community for an intensive multi-day design charrette. The resulting ideas could serve as a basis for planned changes in the host community.

Both applied and traditional academic research is needed to further understanding about aging. The Andrus Foundation has a long history of supporting university research. The Turner Foundation and Robert Wood Johnson Foundation are supporting research on the relationship between health and urban form. Both the Lavanburg Foundation and Milbank Fund have supported the development of policy analyses (see the descriptions in endnotes 14 and 15) for direct use in public decision-making. Research needs are extensive, ranging from gaining a better understanding of how older people negotiate their environment as their capabilities change to assessing the effectiveness of site development features in various assisted care housing forms. To the extent possible, research should be directed toward actual applications, such as providing the justification for improved site-planning standards.
Funders could serve as a program sponsor to promote housing alternatives or could support training to enable transit providers to be more aware of the needs of older people. Funders could also provide development support for innovative land uses and infrastructure improvements.

The effectiveness of these various initiatives could be further enhanced by advocacy efforts aimed at policies and programs at national and state levels. For example, national transportation legislation known as TEA21 (the Transportation Equity Act for the 21st Century) will be re-authorized by Congress in 2003 with hearings to begin in 2002. This represents an important opportunity to influence transportation legislation to advance aging-sensitive policies and programs.

**Conclusion**

Smart growth initiatives emphasize compact, walkable cities with diversity in housing choices, a strong sense of community and a high quality, accessible, natural environment. These are fundamental characteristics of aging-sensitive and elder-friendly communities. An explicit focus on aging defines a logical constituency of smart growth and provides a sense of urgency given the pending demographic changes. The examples of innovative practices covered in this paper skim the surface of what can be done.28

Our society will certainly survive if we fail to address the nexus between the built environment and the aging experience. But the price we will pay is a diminished experience with aging; one that reflects missed opportunities for maintaining health, independence, and self worth.

**Endnotes**


6. Some of these same goals are being pursued by the Metro Regional Government in Portland, Oregon although without the explicit attention to aging. A strong public commitment to maintaining the regional urban growth boundary (established in 1979) means that new development has to be accommodated through redevelopment and increased densities. This involves promoting high-density, mixed-use developments along transit corridors, mandating the inclusion of accessory dwellings in each municipality, and promoting row housing development. Like the Twin Cities’ lifecycle concept, these policies encourage housing diversity and transportation alternatives. (See Urban Growth Management Functional Plan (Metro, 1996)).

7. Economic Development Strategic Plan (City of St. Lewis Park, 1997).

8. Approved and Adopted Master Plan for the Communities of Kensington-Wheaton, as Amended, Maryland. (The Maryland-National Capital Park and Planning Commission, 1989).

9. Another example of municipal planning for aging used community meetings with outside experts as speakers and focus groups. Communities for All Ages: Planning for and Responding to the Needs and Opportunities of an Aging Population, prepared for the Cities of Richfield and Edina by the Hennepin South Services Collaborative (October 2000) is available at www.shfsc.org.


13. Linking Housing and Health Services for Older Persons (American Association of Homes and Services for the Aging and Milbank Memorial Fund, 1997)


20. The zoning regulations can be found at www.fortkent.org/fkzoneord.htm

21. www.planning.ci.portland.or.us/zoning/ZCTest/200/205_acc_rent.pdf


25. For further information contact John Warner, Finance Coordinator, Portland Development Commission, at 503-823-3240.


27. For additional suggestions about community-level planning for aging see Howe, Chapman and Baggett; V. Parker, S. Edmonds, and V. Robinson. 1991. A Change for the Better: How to Make Communities More Responsive to Older Adults. (AARP, 1991); Retrofitting Communities: Accommodating Aging in Place: A Best Practice Catalogue. (Partners for Livable Communities, 1995); and Assessing Elderly Housing. (U.S. Conference of Mayors and American Association of Retired Persons, 1986).