BAY AREA SENIOR HEALTH POLICY FORUM
South San Francisco Conference Center

Presented By
Center for Elders' Independence and On Lok Lifeways

Bay Area Senior Health Policy Forum Mission
To Inspire, Exchange, Educate, and Engage Advocates, Providers, Policymakers, and Other Stakeholders in Our Effort to Strengthen the Safety-Net for Bay Area Seniors

Health
Senior **2017** **Policy**
Forum

December 6, 2017

Summary

SHPF

Setting the Stage for Creating "Age-Friendly" Communities

How to Address the Unique Needs and Challenges of the Aging Homeless Population

Initiatives and Innovative Housing Models Addressing the Needs of the Aging Population

A Deep Dive into the Aging Homeless Population

Policy Solutions for "Age-Friendly" Communities

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ACKNOWLEDGEMENTS

Executive Director, HIP Housing; **Meghan Rose**, General Counsel and Director of Housing Policy, LeadingAge California; **Margaretta Lin**, Principal, The Dellums Institute for Social Justice; **Randy Morris**, Assistant Agency Director, Adult & Aging Services, Alameda County Social Services Agency; and **Chris Rodriguez**, Deputy Director of Aging and Adult Services, San Mateo County Health System.
We appreciate the afternoon workshop moderators who also participated in the closing plenary session: **Anne Hinton**, Livable Communities Advisor, AARP California; **Robert Ogilvie**, Oakland Director, SPUR; and **Kevin Prindiville,** Executive Director, Justice in Aging.

The success of the forum is attributable to the following steadfast members of the forum planning committee, which we had the privilege of chairing, and whose dedicated efforts throughout the planning process led directly to the success of this event:

- **Center for Elders' Independence**: Dianna Garrett, Director of Communication and Planning; Vic Gellon, Director of Business Development and Strategic Initiatives; Lenore McDonald, Director of Fund Development and Government Relations (www.cei.elders.org)
- **Contra Costa County Department of Aging and Adult Services:** Victoria Tolbert, Director (http://ehsd.org/elderly-disabled)
- **Health Care Advocate:** Elaine Wong-Eakin
- **On Lok Lifeways**: Eileen Kunz, Chief of Government Affairs and Compliance; Katherine Kelly, Government Affairs Manager; and Cassandra Chan, Community Affairs Manager (www.onlok.org)
- **Senior Services Coalition of Alameda County**: Wendy Peterson, Director (http://seniorservicescoalition.org)
- **The Health Trust**: Sonali Parnami, Program Manager, Healthy Aging (http://healthtrust.org)
- **San Francisco Department of Aging and Adult Services:** Cindy Kauffman, Deputy Director of Community Services (https://www.sfhsa.org/about/departments/department-aging-and-adult-services-daas)
- **Yu-Ai Kai Japanese American Community Senior Service:** Ryan Kawamoto, Executive Director (http://yuaikai.org/)

Thanks also go to the following individuals who managed the behind the scenes details, and who contributed to the development of the forum:
- **On Lok Lifeways**: Henry Pacheco, Jessica Chang-Greenman, Melissa Macomber
- **Center for Elders' Independence**: Dafina Dailey, Lisa LaMagna
- **LeadingAge California**: Jan Guiliano and Felicia Price

Last, a sincere thank you goes to the forum attendees who, on behalf of improving the safety-net for Bay Area seniors, generously shared their passion, ideas, and commitment to action. Thank you!

Grace Li, CEO   Linda Trowbridge, CEO
On Lok   Center for Elders' Independence

Since 2009, the Bay Area PACE (Program of All-inclusive Care for the Elderly) organizations have convened the Bay Area Senior Health Policy Forum. This biennial event has brought together aging advocates, providers, policymakers, seniors, and other stakeholders to inform policy and support the creation of a healthy environment for aging in the Bay Area.

The fifth Bay Area Senior Health Policy Forum, hosted on December 6, 2017, at the South San Francisco Conference Center, built upon the successes and collaborations at our previous forums in 2009, 2011, 2014, and 2015. This forum explored issues around creating age-friendly communities, innovative housing models, and the aging homeless population.

The following proceedings present summaries of the plenary presentations and breakout sessions, and some key takeaways that were discussed during these engaging sessions. PowerPoint presentations from our speakers are available on our website http://bayareashpf.org. This year's event was the most well attended to date, and included strong representation from all Bay Area counties. We look forward to continuing our collaboration with our Bay Area partners in the coming years.

WELCOMING REMARKS

Speakers:
Grace Li, Chief Executive Officer, On Lok
Linda Trowbridge, Chief Executive Officer, Center for Elders' Independence (CEI)

Highlights from this Session:

Today, nearly 2,000 at-risk seniors around the Bay Area are not living in nursing homes and are instead receiving personalized care at home and in PACE (Program of All-inclusive Care for the Elderly) centers. On Lok developed this model of care, and today there are 123 PACE organizations in 31 states nationwide, including On Lok and CEI. Every Bay Area senior deserves coordinated care, respect and dignity, safe housing, and accessible transportation.

The goal of this forum was to integrate care teams, community partners, and experts to focus on seniors' greatest needs. The ultimate goals, they said, are: to shape trends through policymakers, advocates, and experts in the field while helping seniors become their own advocates; and that such people stay in touch and start or continue conversations. Senior health policy needs to be reframed so that seniors are part of society's whole system, including the economic system, to make policy more democratic and less siloed.

The CEOs then gave an overview of the day's agenda, starting with the keynote speaker, Dr. E. Percil Stanford, a leading advocate and author. He challenged what most think aging means. After that came the panel with Assemblyman Ash Kalra from San Jose and Dion Aroner, a leading advocate in Sacramento. For the afternoon sessions, there are two parts to each track/topic. In each track, the first part dove deeply into the issue. The second part of each track explored how to move toward a solution. Track 1 was Setting the Stage and Developing Policy Solutions for Age-Friendly Populations. Track 2 involved Initiatives and Innovative Affordable Housing Models Addressing the Needs of the Aging Population. Housing is the number one concern for elders, especially in the Bay Area. Track 3 consisted

of A Deep Dive into the Aging Homeless Population and Addressing Their Needs. Attendees were encouraged to choose one track for the day, and to stick around for the closing session where Dr. Stanford would help pull the day's discussions together with feedback from the session moderators.

KEYNOTE SPEAKER

Speaker:
E. Percil Stanford, Ph.D., President, Folding Voice and KIND Corporation

Highlights from this Session:

Dr. Stanford stated that the forum's task was to reframe aging. The topic of aging comes with assumptions. A lot of people talk about aging as a humorous thing, but there's nothing humorous about aging. The discomfort that occurs when we talk about aging and the roles of elders is unsettling. There are changes occurring around the topic, such as longer life spans as well as medical and technological advances.

We cherish antiques because of their age, rarity, beauty, utility, personal and emotional connection, and uniqueness. When we think about reframing aging, we should think about our antiques as the older people.

What are we trying to do? We have to decide what problems we're trying to solve. We spend too much time trying to decide framing when our duty is to protect and preserve what goes into the frame. In choosing the frame, we want to pay attention to size, shape, color, texture, where it's placed, and how we'll preserve the art in this frame. Aging is a true art form and each person embodies this art form. We are pieces of art in action even though we get to a point where we require care, just as antiques do. The forum was about the substance and value of the frame, who has been framing, and who it continues to be.

What is it that we need to consider? Availability, affordability, and accessibility (AAA) are the three things to keep in mind when we think about reframing aging. We need to respond to immediate and long-term results. Language is also important. We need a common language so that everyone understands what we're talking about. Socio-cultural factors come into play.

Also, one mistake made too often is ignoring history. Dr. Stanford provided a history of aging programs, starting with 1940 when a Unit on Aging was established in the NIH Division of Chemotherapy. In 1950, President Truman convened the First National Conference on Aging. In 1956, the Federal Council on Aging formed. In 1961, the First White House Conference on Aging occurred. This was the first time Americans came together, planned, and got people thinking about reframing aging. The Older Americans Act of 1965 was the anchor for the framing that we're talking about. It was the first time that we had something happening at the federal, state, and local levels. The network made it possible to provide services for older people. In 1974 the National Institute on Aging was established. Up to 2012, other programs for aging, such as the National Plan to Address Alzheimer's Disease, developed. We have to know this history in order to reframe aging.

In the 1960s, President Lyndon Johnson brought about changes in social programs that still impact today. For example, the Economic Opportunity Act was responsible for moving and framing aging. What

we are reliving now is not new. The Older Americans Act also supported adequate retirement, suitable housing, good physical and mental health, and long-term care. We have to continue to pay attention to demographics, because the act declares that no services shall be denied except through state services. Fast forward to 2016, during which both minor and major changes occurred. One positive change was that the emphasis on aging and disabilities became strengthened so that the focus is no longer just on aging. Elder abuse was highlighted. Mental health now includes behavioral health – substance abuse and suicide prevention are more recognized.

Throughout the evolution of reframing, civil rights of older adults helped reframe the status of older Americans. The modern evolution of civil rights emerged with the Civil War. However, through the mid-1900s, women and LGBT were told to stay in their place, so civil rights laws and initiatives are good, but not good proxies for equity.

Dr. Stanford then demonstrated how civil rights and discrimination cycle through. One example is that even though the 13th Amendment abolished slavery in 1865, Southern states used Black Codes to restrict African Americans' rights. Also, there are some extreme requirements to be eligible to vote on items that have the greatest impacts on older people. Another critical aspect to consider in reframing and framing aging is homelessness. People require a place to meet basic human needs. This is related to the healthcare requirement, because those in poor health are more prone to homelessness, employment loss, and lack of ability to pay for housing. The older minority has a history of being homeless, and age may be one of the most common denominators when it comes to understanding the circumstance of homelessness. About 50% of the homeless are 50 and over. Factors that contribute to homelessness include the inability of people to purchase property where they want, and redlining.

Political equity continues to matter, because people of different genders and backgrounds are not in the room where decisions are made. Also, social, cultural, and health equity are issues we have to deal with when discussing homelessness. Needless to say, age-friendly communities require intense planning: architectural schools are becoming more immersed in this topic and need to become involved as the older population continues to grow. Other factors to consider when planning an age-friendly city include elders' independence, active participation, dignity, care and self-fulfillment, gender, importance of life experiences, culture, biology, psychology, behavior, economic, and environmental factors. We need advocates, public officials, faith leaders, and business people who recognize great diversity among older persons. Elders require inclusion and contributions in all areas of community life, respect for their lifestyle choices, active participation, and emphasis on good health, security, and independence. Society needs age-friendly committees because they are essential to reframe aging; benefit everyone; secure safe neighborhoods for children and women as well as for older adults; decrease stress for families; and result in barrier-free buildings and streets with increased accessibility.

In summary, reframing will not be completed in our lifetimes. Instead, it is an ongoing process that requires constant attention. It's not the framing that is most important, but what the frame protects and showcases.

(Dr. Stanford's poem "Aging – A Reflection," which he read during his remarks, is included as an Appendix at the end of the Forum Summary.)

"Protecting Aging in the Golden State: A Conversation with Legislators"

Description:

In this moderated panel discussion, attendees heard from legislators who are leading the way on protecting aging programs and working to "reframe" what it means to age in the Golden State. We heard what the local and state impacts will be of health care and budget proposals being discussed at the federal level, what our legislators are doing about it, and what we can do to be proactive in protecting and enhancing programs that will impact older adults in our state. We were thrilled to have Assemblymember Ash Kalra, Chair of the Assembly Aging and Long-Term Care Committee, attend our forum for this important discussion.

Speakers:
Assemblymember Ash Kalra, 27th Assembly District
Dion Aroner, Partner, AJE Partners and former California Assemblymember

Highlights from this Session:

In this session, attendees heard from state legislators and administrators who understand aging issues and work to address them.

Ash Kalra is the first Indian American elected to the State Legislature. He is Chair of the Aging and Long-Term Care Committee. Dion Aroner served six years as a State Assemblywoman and 25 years as Chief of Staff to her predecessor, Tom Bates. She is an undisputed expert in state budget and human service issues and an advocate in the aging field.

Aroner: California and the rest of country have come out of the great recession but not everyone has come out of it the same. There is still a large number of homeless people, including 40,000 homeless veterans. In CA we're transitioning to a new governor. We're sitting on a reserve of $12 billion and taxpayers demanded that. Some want the money to go to street maintenance, but given the national dynamic, we might need the $12 billion to fight off what federal government decides to do to blue states. Mr. Kalra is looking at a very different environment than when she [Ms. Aroner] left the Assembly at the top of the market before the recession. Older Americans have a variety of issues, not just the issue of aging, but of housing. Kalra also sits on the Judiciary Committee in the Assembly, so we will look into how laws affect older citizens and equity. Older Americans are living longer and we need to protect their rights.

Kalra: As Chair of the Aging and Long-Term Care Committee, he realizes that the Committee may not be one of the most sought after committees, but after working in the Public Defender's office and serving on the City Council, he recognized that you don't see voting empowerment in seniors. He knew he'd face hard times, as Medicare and Social Security are at risk, but he knows that as a state, we'll stand by our values. He's the first Indian American in the State Legislature and in the Indian American community there is great respect for elders, so it's shameful to see what we put our seniors through. We're all aging and it's a matter of the vitality of our state. We're creating a debt for ourselves and our aging

population, and are not prepared for the financial burden or the healthcare delivery burden. We've created systemic issues the last couple of decades and he wants to fight against that.

Aroner: While policy moves through your [Mr. Kalra's] committee, big ticket items – including the Medicaid budget and how other aging and health care programs are funded – are handled by other committees. How can we bridge the gap between policy and budget committees?

Kalra: Older Americans aren't represented as they should be. It's important to have policy debates and discussions, and budget asks and discussions. The role of the policy committees is not fulfilled because bills are getting stalled due to their price tag. The reality is that there isn't as much of a movement for aging as for other issues. Seniors are suffering and we need to fight for sustaining programs. Policy and budget committees need to know what each side is doing. The policy committee allows for movement, while the budget committee sees if outside influences care about the issue. So we need to create movement through both sides.

Aroner: As an advocate for early child education as well as older adults, she found that if they couldn't get everyone on the same page to tell policymakers what the community was saying, they didn't see results. How can we effectively help policymakers accomplish what we ask?

Kalra: If the people are divided, it's harder to be heard. There needs to be feedback from local communities to create a statewide movement for policymakers to hear about the struggle people are having in other aspects of the fight. The message from a hearing he held in San Diego (focused on housing issues) was how to keep seniors in their homes and out of homelessness. Housing is healthcare so we have to do better. And how do we motivate officials who aren't typically motivated by helping seniors? Phone banks and showing up at town hall meetings can be very impactful!

Aroner: The lesson is that it's not just about money, but it's about numbers and the power to deliver a common message to the legislature. Shifting gears, if one's income is above the working poor level, they are not eligible for Medi-Cal. What can we do to make progress on long-term healthcare for middle class Californians?

Kalra: Most seniors find themselves in the middle class. Through hearings and visiting long-term care facilities, he's met with insurance industry people. All but one insurance company dropped the long-term care clause because it's not profitable. So his number one goal became how do we talk among ourselves in support of long-term care? There is an opportunity, but any systemic or groundbreaking change is unlikely to be signed into law in 2018 because we haven't created that movement. Potential options for long-term care are such a heavy lift that they need to be discussed by themselves. Assisted living wavers are capped at 3,000, and he wants to push a bill forward to increase waivers. The ceiling has been raised but not enough. The first priority is to shift people from skilled nursing facilities, which cost a fortune, to assisted living. This will save money. Bills need to create a movement toward the goal of obtaining funding for long-term care.

Aroner: We've had lots of aging and long-term care bills come through the legislature. In looking at these bills, we've siloed so many populations, but many populations don't just consist of older Americans but also those with other health issues, such as mental health issues. How do we talk about people with multiple medical diagnoses? For example, PACE members can have up to 14 chronic conditions!

Kalra: Money is in different buckets. For example, there are separate buckets for healthcare, housing, mental health, and physical health. So how do we blend our policy and budgets? Budget issues occur even though you'd get better financial outcomes with more ADHC centers, which can get families back into the workforce when they send a loved one to ADHC. So people say it sounds great, but it's not my department. To challenge this we have to be bold and innovative and find ways to break down those silos – that's how we start to get seniors the care they need.

Aroner: You [Mr. Kalra] can choose which of the following questions you wish to answer:
- What are we doing about the Costa-Hawkins Rental Housing Act appeal?
- Hundreds of seniors are living outdoors, so what are we doing about housing for them?
- What about senior co-housing?
- San Francisco passed a Dignity Fund that funds services for older adults. How can we gain funding for a Dignity Fund for CA? (This last question drew applause from the crowd.)

Kalra: We live in some of the most expensive places in the world. Unfortunately, rent control in San Jose has not seen much progress. Everyone wants to help until we have to practice what we preach. If there's an opportunity for transitional housing or for rent control that protects seniors or a struggling family, even if it impacts the community, we have to show up and support those efforts.

In regards to Costa-Hawkins, we might find more support in the Bay Area for rent control policies. Remember that legislatures have to hear from seniors and housing advocates. It's a monumental issue but a game changer to organize renters, because there are more renters than landlords.

The Dignity Fund in San Francisco was huge in terms of affecting programs that seniors need. We need to build upon that. In the South Bay, we passed a ballot measure in November that will result in several hundred million dollars per year for housing. Two such buildings are already being built in San Jose. So there is some movement at the state level, but it's difficult. It takes state and local advocacy.

Aroner: Nursing facilities are changing their models of care and becoming rehabilitation facilities instead of staying as long-term care facilities. So what alternatives to combatting homelessness are there?

Kalra: Even though we know it works, IHSS [In-Home Supportive Services] was on the chopping block. But it was restored, because without it older persons or persons with disabilities are institutionalized, become homeless, or end up in the emergency room, which are even more expensive than IHSS. And we still need to have more money for in-home supportive aides, which is one of the fastest growing industries, to make sure aides are better trained and paid. This is because you don't want someone in skilled nursing, which is more hospital-like. The idea is to transition them back into their home or into assisted living. We need accountability for skilled nursing and how these facilities make decisions. A bill is stalled with skilled nursing facilities that declares a citation when there's a suspicious death. Nursing facilities are afraid that the bill will shut them down. But the reality is that the state doesn't want to close skilled nursing facilities. The state wants to work with them. If deaths occur due to the conditions of the facilities, we want to improve their quality so that they can be the best they can be. It has to be a partnership; we have to be in this together. There is plenty of money to be made, but it can't be made at the expense of seniors.

Aroner: California leads the nation and has lots of holistic health practitioners, such as acupuncturists. What can we do in our state to encourage the state to pay for holistic health and/or to play a role in it?

Kalra: In the last few years we've seen that Western medicine accredited holistic health practices could save more money than western-style medicine, which involves more invasive procedures, putting people in facilities, and many pharmaceuticals. So we need alternatives such as Eastern medicine. He supports patients working with doctors to find the best method to heal them and says we have to be open-minded.

Aroner: Thanks, Assemblyman, and we look forward to great things.

AFTERNOON BREAKOUT SESSIONS

(1A) Setting the Stage for Creating Age-Friendly Communities

Description:

Many Bay Area counties are undertaking the World Health Organization's Age-Friendly Communities initiative to make Bay Area counties and cities more age-friendly for all of us. What are our local leaders doing to engage with stakeholders throughout this intensive process and what are the unique findings they've discovered so far about what the community wants? How are cities taking different approaches to make our communities age-friendly and why is the WHO designation so important? Who are the champions and how can we connect with them? Attendees learned about this exciting initiative happening all over the Bay Area by leaders who are working on it first-hand.

Speakers:
Karen Grimsich, Aging and Family Services Administrator, Human Services Department, City of Fremont
Valerie Coleman, Program Analyst, San Francisco Department of Aging and Adult Services
Anne Hinton, Livable Communities Advisor, AARP California (Moderator)

Highlights from this Session:

Karen Grimisch discussed the approaches Fremont has taken to reach their goal of becoming "aging-friendly," according to the World Health Organization (WHO) and their standards. The City took three steps to reach this goal. First, they partnered with both WHO and AARP to create a five-year plan. They also used the Livability Index and the AAA County Survey. They created domains to focus on specific needs for Fremont, but believe the domains can be flexible and changed to fit each city. In 2017, Fremont was accepted into the Age-Friendly Network, where they moved forward with focus groups, consensus groups, community meetings, and a health expo. This really helped Fremont learn about their aging citizens' needs in order to meet their wishes. These three approaches led to great insight for Fremont, and they are growing next steps each day to continue in their efforts in becoming deemed an "age-friendly" city.

Valerie Coleman presented on the City's Age & Disability Plan. Valerie discussed her approach in interviewing participants in dozens of age-friendly efforts across the state in order to better understand how to approach San Francisco. Her biggest takeaway was that each plan is very specific to the city it is in, and therefore she realized some key points she needed to consider in San Francisco. For example, the

geography, diversity, and transient nature of the city, as well as the strengths and weaknesses of the Bay Area all deserve careful consideration when designing the plan. The plan was really targeted at seniors and those with memory impairment, as well as their caregivers. Similar to Fremont, San Francisco had many project partners and domains specific to the city. The city also had projects aimed at safer bike lines and digital literacy, and many others. Valerie shared lessons she found useful for other cities attempting to become "age-friendly." She stressed the importance of partnerships, a clear vision, trust, and flexibility.

(1B) Policy Solutions for "Age-Friendly" Communities

Description:

When thinking about how to make communities more age-friendly, it can be overwhelming to figure out where to start. How do you cultivate support from the community and elected officials to actually make age-friendly changes in our communities? How have leaders overcome obstacles such as NIMBY-ism? What have our leaders learned so far about this process and what can we do today to make our communities more age-friendly? Attendees learned about actionable steps we can all take to support age-friendly initiatives underway and start them in our own communities.

Speakers:
Sybil Boutilier, Commissioner, Marin County Commission on Aging
Diana Miller, Project Manager, Santa Clara County Seniors' Agenda
Anne Hinton, Livable Communities Advisor, AARP California (Moderator)

Highlights from the Session:

Diana Miller talked about an "Age-Friendly Silicon Valley." She stressed the importance of thinking about "age-friendly" to mean "people-friendly" – that these efforts (made for seniors) should really be changes to the county that people of all ages can benefit from. The social determinants of health vary by ZIP code, and Santa Clara's goal is to make every ZIP code age-friendly by the end of 2017. The county is well aware of the rapidly growing aging population, citing that older adults make up more than 1 in 4 residents in 8 counties in California and the fastest growing cohort is those 85 years and older. Santa Clara began their initiative with a core team of people and community organizing discussions in each city in the county. Next, they held focus groups, identified a task force, and presented their findings. Some challenges they shared were that nobody sees themselves as an "old person" in Santa Clara County, and that ageism is an issue throughout Silicon Valley. They also discussed the importance of making each individual city feel unique in their initiatives, while creating a cohesive plan for the county. Currently, Santa Clara is on Phase 2 of their Age-Friendly Action Plan, which includes quarterly meetings with each city's task force. Their closing advice for cities and counties following in their footsteps is to expand upon and transform things they already have.

Sybil Boutilier spoke about Marin's age-friendly plan. As one of the "healthiest" and "oldest" counties in the Bay area, 27% of Marin's residents are over 60, and 32% of Sausalito's residents are 60+. Marin is one of California's fastest aging counties, projected to increase by 35% over the next twelve years. Marin is unique in that their aging-friendly initiative was started by a group of seniors themselves. This senior task force went before the city council and proposed a two-year planning phase to become age-friendly. Ms. Boutilier shared the importance of developing a three-year action plan, communicating

constantly, and joining up with partners. She stressed that "visibility builds credibility and political will," meaning that communication and transparency are really key when working on these initiatives. Marin really sees age-friendliness as a permanent value with the flexibility to evolve and change with the needs of the city. Right now, they are working on a 20-year strategic plan.

(2A) Initiatives and Innovative Housing Models Addressing the Needs of the Aging Population

Description:

It is apparent to anyone living in the Bay Area that the housing crisis has reached a critical point. It is imperative that the unique needs of the Bay Area's aging population don't get lost in the discussion of making housing more affordable across our region. This session explored innovative housing models in the Bay Area by leaders who are thinking about new ways to address the affordable housing crisis specifically for the aging population. We also learned about new partnerships that are forming, and new ways to think about tackling this key issue.

Speakers:
Chuck Durrett, Architect, McCamant and Durrett Architects
Ancel Romero, President, Affordable Housing HumanGood
Robert Ogilvie, Oakland Director, SPUR (Moderator)

Highlights from this Session:

Chuck Durrett introduced the term "co-housing" to North America after spending two years in Denmark learning about it. He is a proponent of senior co-housing communities (SCCs), or "custom-made neighborhoods." He and his wife (Ms. McCamant of the firm) live in one themselves and have designed and built over 50 SCCs throughout the US. The key is involving future residents early in developing the design criteria and in site planning. Affordability and a sense of community ("breaking bread and stitching neighbors together") are key to their success. Some SCCs are seniors-only; others, inter-generational. "Privacy is less important when you know your neighbors." SCC residents solve their own problems because they're responsive and accountable to their peers. And SCCs are an effective "anti-NIMBY" (Not in My Backyard) approach because prospective residents reach out to neighbors in advance of development to generate goodwill. SCC proponents have worked to rezone single family homes in expensive neighborhoods. Citing a labor shortage, he said it's tough to find architects and contractors to build these communities.

Ancel Romero reminded attendees that American Baptist Homes of the West merged with Southern California Presbyterian Homes to form HumanGood with 400 employees and more than 10,000 senior residents, 50% of whom are low-income. HumanGood has 80 communities – 18 Continuing Care Retirement Communities (CCRCs) and 62 that are affordable. His premise is that funding for affordable housing is finite. Those communities with services are few and far between.

HumanGood received a $1.2M US Housing and Urban Development (HUD) grant to test developing housing with supportive services to delay nursing home care for senior residents. Under this three-year demonstration project, three such communities will be developed for dual-eligible (Medicare and Medicaid) seniors featuring a wellness RN and a nursing station. At the end of three years, data on these enhanced supportive housing communities will be assessed (e.g., the number of emergency room visits,

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turnover, participation rates in activities and supportive services). To develop its first community, HumanGood will partner with five other entities: the County of San Mateo, the Institute on Aging (case management), Health Plan of San Mateo, Brilliant Corners (property management), and the Alzheimer's Association (dementia care). HumanGood is also exploring alternative uses for its CCRC properties with expansive sites, such as tiny houses built on wheels – 250-350 square feet, a bath, windows, and loft storage.

Ancel also addressed the changing landscape for funding affordable housing. Redevelopment agencies have been eliminated in California. The biggest threat, however, is the proposed elimination of private activity bonds, or the 4% low-income housing credit, under the tax overhaul bill. These bonds account for 60% of affordable housing nationally. He urged political action to prevent their elimination. Nevertheless, organizations like HumanGood must turn to alternatives such as charitable and fundraising events; grants (e.g., from the Bill and Melinda Gates Foundation, Aetna); social impact investing; crowd funding; donor-advised investment funds; and cash on cash, not IRR.

(2B) How Do You Finance Housing for Seniors and What Are the Policy Solutions to Address Housing?

Description:

Building more affordable housing in the Bay Area is imperative, but will not address the immediate needs of our aging population and it's not the only solution. This session explored creative steps Bay Area housing leaders are already undertaking to address the housing crisis and take meaningful action. Attendees learned about the landmark package of housing legislation that was signed into law this year, financing models that are being explored, programs such as home sharing and co-housing which are aiming to address the housing shortage, and the next steps on a comprehensive AARP study looking at the housing crisis. Attendees brought their own ideas on what our leaders can do to address the housing crisis, and discussed how we can "move the needle" on affordable housing.

Speakers:
Blanca Castro, Director of Advocacy, AARP California
Laura Fanucchi, Associate Executive Director, HIP Housing
Meghan Rose, General Counsel and Director of Housing Policy, LeadingAge CA
Robert Ogilvie, Oakland Director, SPUR (Moderator)

Highlights from the Session:

Blanca Castro reviewed key findings from an AARP study called "California Dreaming or California Struggling?" Of those surveyed, 61% said they have considered leaving the state and moving somewhere else due to the high cost of living. Affordable housing is a top concern across all age groups, and there is broad support for legislation to address access to affordable housing and workplace retirement savings plans to support a comfortable retirement. A recently passed housing package will help provide more housing affordability. Increases in the minimum wage and paid family leave will also help support stronger financial security. More information on the study and links to the statewide report can be found at: https://www.aarp.org/research/topics/economics/info-2017/ca-financial-security-dreaming-struggling.html?CMP=RDRCT-PRI1-RETIREMENT-042417. AARP is also focusing its advocacy efforts on the age-friendly initiative taking place in 16 cities/jurisdictions across the state. Improving housing

options for older adults, including streamlining accessory dwelling units and the increased availability of mobile home parks, are additional housing options that can be implemented in a shorter timeframe.

Laura Fanucchi discussed HIP Housing's unique Home Sharing Program, which can either be when a home owner is matched with a home seeker who pays rent, or the home seeker exchanges household duties for reduced rent. Home Sharing can be a great option for older adults to help fight against anti-displacement policies, overcome isolation, and keep older adults living in their homes as long as possible. HIP Housing assists with the screening process to match home owners with home seekers by conducting background checks, verifying references, and providing ongoing supportive services to create a successful living environment. HIP Housing operates Home Sharing Programs in San Mateo and Fremont, but there are numerous other programs across the Bay Area and surrounding regions.

Meghan Rose provided a historical perspective of the affordable housing crisis, created by increased demand and the fact that funding/developing has not kept up with demand, which leads to rising housing costs. A landmark housing package recently passed the state legislature. SB 2 creates a permanent source of funding for the creation of affordable housing through implementing a $75 fee on county recorder transactions. (This does not apply to home sales). SB 3 is a bond measure that will be on the 2018 ballot, which would include a $3 billion bond for affordable housing and $1 billion bond for an affordable home ownership program for veterans. SB 35 will streamline the approval of housing projects to help meet local development goals. These pieces of legislation are key to helping to alleviate the affordable housing crisis in California by providing funding and streamlining the development process. In addition, SB 62 would establish the Affordable Senior Health Program, which would specifically develop affordable housing for seniors under jurisdiction of the CA Department of Housing and Community Development (HCD), and would require the director of HCD to annually report to the legislature specific information about the program to increase transparency and accountability. It is increasingly important to continue advocacy for these important bills and increase the focus on housing for older adults. We should look at building on existing infrastructure of housing and health/community service networks, provide easy access for residents to access housing resources, and explore options for seniors who have Medicare and Medi-Cal.

(3A) A Deep Dive into the Aging Homeless Population

Description:

This session took a critical look at homelessness in older adults within the Bay Area. Through data, studies, and case examples, the speakers discussed regional trends in homelessness, the impact of geographic location (rural, urban, suburban), and specific pathways into homelessness for older adults. Attendees heard about the challenges that exist for homeless older adults compared to younger homeless adults, how first homelessness before age 50 differs from later onset of homelessness, and the implications of these factors on prevention and service interventions.

Speakers:
Dr. Margot Kushel, Professor of Medicine, Zuckerberg San Francisco General Hospital Trauma Center
Samantha Green, MSc, Project Manager, Applied Survey Research
Kevin Prindiville, Executive Director, Justice in Aging (Moderator)

Highlights from this Session:

Older homeless are now a larger issue than ever before; 50% of the homeless are elderly. Economic inequality will only worsen with the new tax bill, which in turn affects the homeless population. We will see a rise in numbers. There has been no government response on this issue.

In California, we only have 21 units for every 100 low income households; there is a massive shortage. California is facing an increase in multiple areas of homelessness – two-thirds are unsheltered. Racial discrimination in the rental and home sales markets – segregated neighborhoods, predatory lending, redlining – is also a factor. African Americans have a 75% increased risk of homelessness.

The session reviewed Dr. Kushel's "Pathways to Homelessness among Older Homeless Adults: Results of the HOPE HOME Study," which summarized the findings of their study conducted in Oakland on the aging homeless population. Overview of demographics: Median age is 57; 80% are African American; 90% have an income of less than $1,150. One third lost housing less than a year ago; 44% had never once been homeless before the age of 50. Those with early homelessness (before the age of 50) had more adverse life experiences and lower income in early childhood.

Those with late onset homelessness (over the age of 50) had: Low wage work throughout life; Crisis (job loss, marital breakdown, illness, etc.); Lack of advocacy; Low social support. Many had health challenges related to the homelessness; 40% have issues with activities of daily living and many have cognitive impairments. Mental health issues were very common. They had high rates of acute healthcare utilization. Half of the participants in study were rehoused by 24 months.

Homelessness among older Bay Area adults is reaching crisis proportions. There is no standard in data collection for the elderly population. In Marin County, 42% of homeless were over the age of 50 at first instance of homelessness; 81% were homeless for a year or more. There are lots of opportunities for data collection through the local Homeless Management Information Systems (HMIS): Demographics, location, living situations, benefits and income, entry point and placement, duration. Specific populations are part of a larger community; using diverse sources is essential to better understanding.

Questions & Answers:
1. What are common reactions to people you present to? Shocked at the data; we do a good job distancing ourselves from the homeless. There is more empathy for older adults; it makes a difference in how people respond.

2. How do you come up with data for the "new" homeless population? How do we quantify this? We do a terrible job at identifying them, most people who become homeless had access to social services but we didn't ask the right questions. What we should've been asking them was, "Are you having trouble paying rent? Are you afraid of losing your housing in the next 30 days?" We need a system to identify people before they become homeless, some situations could be avoided if they were given proper resources.

3. What do you think about the Tuffsheds in Oakland? We need to get people housed; those sheds should be for emergency situations, not permanent solutions. How can we help families who want to help their homeless family members but who are barely able to support themselves?

4. How can we decrease exits from care facilities into homelessness? This happens and it is unethical. We need to make sure people aren't able to get released back into the street, and create age-friendly affordable housing.

(3B) How to Address the Unique Needs and Challenges of the Aging Homeless Population

Description:

This session focused on the implications of the growing population of older homeless adults on prevention, service, and policy interventions. Through examples provided by panel members, attendees learned what they can do to elevate the specific needs and challenges faced by older adults and those at risk for homelessness. Attendees also heard about specific policies, interventions, and prevention measures they can implement locally to help tailor solutions and respond to the specific needs of the older homeless population.

Speakers:
Margaretta Lin, Principal, The Dellums Institute for Social Justice
Randy Morris, Assistant Agency Director, Adult and Aging Services Alameda County Social Services Agency
Chris Rodriguez, Deputy Director of Aging and Adult Services, County of San Mateo
Kevin Prindiville, Executive Director, Justice in Aging (Moderator)

Highlights from the Session:

IHSS (In-Home Supportive Services) does not work for the homeless: If you don't have a home you can't get these services. There are a lot of people who are eligible for these services but cannot receive them because they have no place of residence. Alameda County Social Services Agency is trying to build a bridge to be able to provide these services to the aging homeless population in the area.

Many think low-income housing is the solution; we need to identify systemic issues. In San Mateo County, there are high numbers of elderly homeless people who are living out of their cars and motorhomes, etc. A lot of people use up their savings and cannot afford to pay the increased rent charges. They are left with no choice but to live in their cars. These experiences accelerate illness in the elderly population. Many people lose their skills when homeless.

There is a huge paradigm shift in the homeless issue we are facing today. In Oakland, the homeless rate has increased by 39% in the last two years; rent has increased by 54% in the last two years and the median income is only $36,000. We have failed to prevent displacement. The system is not set up for people in need. We need to help get a statewide rent protection law – this would help a lot.

Questions & Answers:
1. If you could ask people a few questions every six months what would they be? "Are you having trouble paying rent or utilities? Are you afraid of losing your housing in the next 30 days?" If they are a homeowner – "Has anyone approached you about a home loan or reverse mortgage?" If they rent – "Has your landlord stopped doing repairs on your residence? Are you aware of what services are available to you?"

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2.   There was discussion about the vast differences between the homeless in San Mateo County and Alameda County, and the assumption that one county has more money than the other to address the situation. Bottom line – there is not sufficient data for this age group and we need to go after private money to help fund solutions to this issue, regardless of what county.

3.   If there was something on a federal level that could be done to help what would it be? Change the HUD rules – they establish income limits for Section 8 and public housing programs; they are not working with today's reality. Reallocate money from skilled nursing. We could save by using that money for assisted living facilities.

AFTERNOON PLENARY SESSION

"Advancing Policies to Reframe Aging"

Description:

In the inspiring closing session, speakers summarized common themes from the various sessions throughout the day and discussed how working on these issues together will advance policies to "reframe aging" for Bay Area seniors. They also discussed next steps attendees can take to move these issues forward.

Speakers:
Dr. E. Percil Stanford, President, Folding Voice and KIND Corporation
Anne Hinton, Livable Communities Advisor, AARP California
Robert Ogilvie, Oakland Director, SPUR
Kevin Prindiville, Executive Director, Justice in Aging

Highlights from this Session:

Annie Hinton, AARP California
Setting the Stage and Developing Policy Solutions for Age-Friendly Communities:

Four different speakers from different cities spoke on starting/implementing solutions for creating age-friendly cities. One question they posed: How do you get others to come to the table to hear concerns? It was interesting to note how different communities are, but how some issues are the same. Whatever you do, it has to be measurable and doable. For instance, Sausalito is working to get reduced rates for government services, which is related to making services accessible to the communities they serve.

Kevin Prindiville, Justice in Aging
A Deep Dive into the Aging Homeless Population and Addressing Their Needs:

The first panel talked about the current state of homelessness and the second panel talked about solutions. The issue of older-homelessness has been a very invisible. Some data has not been captured about homelessness and how it has affected older adults. The data that has been collected shows that older adults make up the bulk of homeless people. Fundamentally, homelessness is about the legacy of racially discriminatory policies and the housing crisis. A solution is to build resilience in families, break down existing paradigms to build bridges.

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Robert Ogivile, SPUR
Initiatives & Innovative Affordable Housing Models Addressing the Needs of the Aging Population:

The first panel talked about innovative models for co- and shared housing and the second discussed the needs and challenges of the homeless population. One of the speakers coined the phrase "co-housing."

An architect (Chuck Durrett, McCamant and Durrett Architects) said what really mattered was people – the importance of people when designing, and working together as a way of creating and getting innovative designs approved. Much of what we need to get done requires swimming upstream and he is looking forward to not working against this type of flow.

California ranks high in housing units per capita and property taxes aren't keeping up with the pace of housing units. If you build properly with permits, then we can have neighbors taking care of neighbors.

Questions, Answers, Suggestions:

Dr. E. Percil Stanford as the moderator of this talk suggested: Forge a commitment to advocacy and movement in the process and a need to have all the "actors" in the game.

Question: What do we need to get some of these bills "unstuck," beyond systematic holdups, to get bills that work? Robert Ogivile, SPUR, suggested that we show up to vote. Cited only a 20% turn out in local elections. Organizations can help get people to vote.

Suggestion: Attend the Tiny House Living Festival in Pleasanton, CA, February 2-4 at the Alameda County Fairgrounds. By going to this festival people can learn more about tiny houses and how to help our communities implement a solid solution to homelessness and the housing crisis. For more info go to: www.tinyhouselivingfestival.com.

Comments:
Neighbors helping neighbors – What are we doing for each other? People are often not willing to ask for help. How do we create ways to get people to accept help and help each other?

From someone working in California Senior Living Community: Mobile home restrictions bill had seniors unable to have people stay with them, including caregivers. This bill was recently repealed, so look into restrictions and keep eye out for bills that will hurt aging people.

What we are seeing today – unified theme – social justice and aging. We need to align with other movements so we are not in competition. Work together to improve the system.

During his keynote address, Dr. Stanford read the following poem, which he wrote in December 2017.

Aging – A Reflection

Aging is swift and elusive
Relentless, ultimately conclusive

Wish it were tidy and smooth
Perhaps, somewhere a secret grove

Striking like lightening
Stunning, alarming and frightening

No need to be afraid
Aging, not a charade
All join the parade

Life unfolds like a cool, slow moving river
Down the spine, a tingle and a shiver
Profoundly challenged to deliver

We are the sum of our past
Oh My! What a blast
Knew it would never last

What was continues to be
Strength and endurance, great to see
Brings joy, unbridled glee

No time to sit and fret
The dye, not yet set
Age wins the bet!

Tornados, hurricanes and earthquakes come and go
Landing a knockout punch, a body blow!
Unconditionally, we go with the flow

Time, as precious as gold
Each step, each action, noble and bold
Endless stories untold

Acknowledge the good, and the bad
Lingering memories, not naked or fully clad
Intentions noble and ironclad

Narrow paths show the way
Beliefs, convictions save the day

Life's course, truly uncertain
No hiding behind the curtain

Indeed, aging is swift and elusive
Relentless, ultimately conclusive