



State Membership Application

To join the AARP Network of Age-Friendly States and the World Health Organization Global Network of Age-Friendly Cities and Communities

If you have questions while completing this form, please email livable@aarp.org.
If you need additional space for answering the questions you may add an additional sheet of paper.

APPLICATION SUBMISSION DATE: *January 16, 2018*

Section 1: STATE DETAILS

NAME OF THE STATE: *Massachusetts*

POPULATION SIZE: *6,780,000ⁱ*

PERCENTAGE OF RESIDENTS ABOVE THE AGE OF 60: *21%ⁱⁱ*

NAME AND TITLE OF THE ELECTED OFFICIAL SIGNING THE OFFICIAL COMMITMENT: *Charles D. Baker, Governor*

OFFICE ADDRESS OF THE SIGNER: *Massachusetts State House, Office of the Governor, Room 280, Boston, MA 02133*

Section 2: STATE CONTACT FOR THE AARP NETWORK OF AGE-FRIENDLY STATES

(The State contact is the staff member who is primarily responsible for carrying out the state-level work).

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Please describe the named person’s role and department in the state’s age-friendly initiative:

Secretary Alice Bonner leads the Massachusetts Executive Office of Elder Affairs (EOEA). The mission of the Office is to promote the independence, empowerment, and well-being of older people, individuals with disabilities, and their caregivers. Secretary Bonner has played a unique role in Governor Baker’s Administration by catalyzing discussion about and acknowledging the importance that aging plays in all aspects of the Massachusetts economy and landscape. The Office has played a key role in the leadership of the Massachusetts Healthy Aging Collaborative (MHAC), which advances healthy aging and the development of age friendly communities across the state. As Senior Director of MHAC, **James Fuccione** works in close partnership with the Executive Office of Elder Affairs. His role is to advocate for and promote age-friendly engagement across the state and to support the current network of leaders (in elder services, community services, health and wellness, government, advocacy, research, business, education, and philanthropy) as well as expand the numbers of leaders and sectors engaged in the network. These forward-thinking, results-driven leaders have come together from more than 100 organizations to advance healthy aging policies and best practices across the state. See responses to remaining questions in this application for more information on MHAC and EOEA and their vision that MA continues to be an early adopter, catalyst for other states, and national leader with vibrant age-friendly communities throughout the state.

Section 3: STATEWIDE ACTIVITIES, ENGAGEMENTS and COLLABORATIONS

1) Please provide a brief summary of policies, programs, funding and services that are targeted toward older people and how the state plans to become more age-friendly.

Massachusetts has a rich history of funding services for older people and an unwavering commitment to aging in community and community-based services. Funding dedicated to programs that support older people may be found across state agencies and secretariats, including Housing and Economic Development, Transportation, Health and Human Services, and Labor and Workforce Development. The Commonwealth has embraced an “aging in all policies” approach; the work is not confined to EOEA. As one of the first states in the country to invest in community-based and in-home services as an alternative to institutional care, services offered to older people and their families include, but are not limited to: care at home, caregiver support, affordable and supportive housing, choice counseling, nutrition, health insurance counseling (Serving the Health Insurance Needs of Everyone or SHINE), integrated health care/insurance programs (Senior Care Options or SCO, Program for All-inclusive Care of the Elderly or PACE, Medicare Advantage), information and referral services, employment, training & education services, paratransit, protective services, dementia care, mental/behavioral health and ombudsman programs.

In April of 2017, Governor Baker signed Executive Order 576 that established the Governor’s Council to Address Aging in Massachusetts. The 24-member Council is responsible for advising the Governor on the development of governmental policies, community resources, best practices, and informal supports that will promote healthy aging in the Commonwealth. The Council has been charged with creating a blueprint to make Massachusetts the most age-friendly state for people of all ages.

Massachusetts has also established itself as a leader in other areas that foster and promote livable, age-friendly communities. Examples include:

- **Complete Streets:** Smart Growth America recently released a national report card of communities with the best Complete Streets policies. Massachusetts was home to 9 of the top 12 communities nationwide.

Additionally, the Baker-Polito Administration has awarded \$12.7 million to communities across the state to revamp Complete Streets infrastructure as well as provide technical assistance grants.

- **Healthy Incentives Program (HIP):** This pilot matches an individual's Senior Nutrition Assistance Program (SNAP) purchases of local fruits and vegetables when shopping at participating farmers markets, farm stands, mobile markets and Community Supported Agriculture (CSA) farm share programs. SNAP recipients receive an instant, dollar-for-dollar match credited to their EBT cards on eligible purchases. According to the National Council on Aging, Massachusetts has roughly 124,700 SNAP participants age 60 and older.
- **Community Development Block Grants:** The Baker-Polito Administration has awarded \$84 million to 180 communities to benefit infrastructure improvements, housing authority modernization and rehabilitation, local food pantry support, senior center support, and ADA-accessible improvements.
- **Modernizing Housing and Supporting Elders (ModPHASE):** Department of Housing and Community Development announced \$17.8 million earlier in 2017 to revamp senior housing units. In collaboration with EOEA, older people living in those modernized units will be eligible for services and supports through the Aging Service Access Points (ASAPs) in those communities when the units re-open.
- **MBTA Ride Share Pilot:** This pilot program was runner-up in the 2017 Pioneer Institute's "Better Government" Competition. The Massachusetts Bay Transit Authority (MBTA) launched the program with Uber and Lyft to provide transportation to those eligible for the RIDE program. The program is already saving costs and boosting customer satisfaction.

AARP-Massachusetts has been and continues to be a critically important leader, catalyst and partner in fostering and promoting livable, age-friendly communities in the Commonwealth. With dedicated staff coordinating age-friendly work in collaboration with MHAC, Dementia Friendly Massachusetts and other partners, AARP-MA has been essential in growing the movement by engaging communities, activating volunteers, and offering timely support for local and regional Age-Friendly task forces. Beyond the national AARP Community Challenge grants, AARP-MA funded four additional local projects that are raising awareness and strengthening broader age-friendly community work. AARP is supplementing the movement by providing a forum for age-friendly issues at their quarterly Elder Stakeholders Group meetings, which convene advocates for age-friendly policies. AARP continues to embed age-friendly concepts throughout their activities and events and helps bring people and organizations together to share essential resources and expertise that continues to contribute to the Commonwealth's success in making our communities great places to live for all of our residents.

A recent report, entitled [A Report on Demographics, Programs, and Services for an Age- and Dementia-Friendly Commonwealth: What we Have and What We Need, July 1, 2016 – June 30, 2017](#) provides a comprehensive look at our state's current activities and resources in place to support populations over 65 years old and those living with dementia and their caregivers. MHAC and its member organizations are working to implement the report's recommendations for building age- and dementia friendly communities and identifying approaches to fill the gaps in resources for this growing population. Additionally, the Massachusetts Healthy Aging Data Report (produced by experts at the University of Massachusetts Boston and funded by Tufts Health Plan Foundation) supports these efforts with information on statewide trends as well as Healthy Aging Community Profiles for each of the state's 351 cities and towns.

Additionally, our state's older residents living with dementia are benefiting from the numerous activities that are part of the "Dementia Friendly Massachusetts" and "Dementia Friends Massachusetts" movements. Dementia Friendly Massachusetts (DFM) is a grassroots movement to make our communities safe, inclusive and respectful for persons with dementia and is generously supported by the Tufts Health Plan Foundation. Part of Dementia Friendly America, DFM was launched in May 2016 and is co-convened by the MA Executive Office of Elder Affairs (EOEA) and Jewish Family & Children's Service (JF&CS). It is managed by representatives from seven organizations and has an active Advisory Group that includes over 40 organizations statewide. The goal of the movement's management committee is to ensure that diverse stakeholders are developing statewide systems and grassroots programs that improve the lives of people with dementia while integrating age-friendly and dementia friendly efforts. As of 11/17/17, there are 23 communities that are actively implementing community-wide dementia friendly initiatives and 31 communities that are beginning the dementia friendly journey. Additionally, there are 72 memory cafés in Massachusetts, *the most of any single state in the nation*.

MHAC is working to align Age and Dementia Friendly Community efforts based on AARP's "Better Together" policy paper, which encourages communities to promote both initiatives and compares common themes. Four communities on Cape Ann have embraced this approach and are already working on aligning age and dementia friendly initiatives. Together with AARP-Massachusetts and Dementia Friendly Massachusetts, MHAC presented to the AARP Livable Communities Conference in Dallas, Texas on how the Commonwealth is setting the standard for statewide alignment of Age- and Dementia Friendly community practices.

Massachusetts is also fortunate to be able to leverage the assets and expertise present in the academic, innovation, technology and philanthropic sectors. Aligning work across government, the private sector, academia and philanthropy to support the ideals of healthy aging and age-friendly communities has created important synergies and led to significant contributions towards our goals.

2) How will the state engage and involve older people in the process of becoming a more age-friendly?

One of our principles is to honor and build on work that communities have already begun. We have included the voices of older people, their families and their communities in our approach. For instance, The Governor's Council to Address Aging in Massachusetts began its work by listening. Through four public sessions in different regions of the state, the Council heard from nearly 500 individuals. The Council also continues to solicit feedback from Massachusetts residents through the Council's website. Findings from these meetings, listening sessions, and web-based feedback will inform our plans for becoming more age-friendly.

MHAC has a 120-person advisory group which regularly provides input on MHAC's strategic direction and advises on how to accomplish the organization's goals in support of age-friendly communities.

Additionally, we plan to leverage existing relationships with many of our partners including the Massachusetts Councils on Aging, Massachusetts AARP, Massachusetts Senior Action Council, the Multicultural Coalition on Aging, Mass Home Care, the Massachusetts Municipal Association, as well as housing, social service, public health, business, and local grassroots organizations. We will out our plan, embed equity, access, diversity and inclusivity in

our approach, and ensure that our most vulnerable residents inform us of their needs and play a central role in the decision-making process.

We will also build on local best practices which have successfully engaged older people. One urban example is Age-Friendly Boston. In early 2015, Mayor Walsh of Boston hosted the first Age-Friendly Boston Academy to allow residents to engage with the City and its partners and make their voices heard. More recently, Age-Friendly Boston went into the community to talk to residents from a wide representation of older adults (e.g., neighborhood, ethnicity, income, age). This grassroots effort has helped the movement reach individuals whose voices may not always be heard. Paying close attention to what they heard from seniors, the initiative developed the [Age-Friendly Boston Action Plan 2017](#). In addition to the domains laid out by the World Health Organization, the plan outlines the action items to address additional topics with significant impact on some Boston residents including dementia, economic insecurity and social isolation.

Another example is in the Berkshires, a mostly rural region in western Massachusetts. In 2011, Berkshire County experienced a shift where more residents are age 65 or older than under 18 and, according to the regional planning agency, the trend appears to be ongoing. The planning commission coordinates with roughly 40 cross-sector organizations and has collected nearly 2,500 survey responses in addition to holding public meetings. The region is releasing its own action plan and is signing up individual towns to formally commit to the broader effort.

3) Briefly describe the mechanisms the state has or is planning to put in place to facilitate collaborative planning and implementation between different agencies and departments.

The Governor and his Cabinet will meet regularly to review the recommendations and work of the Governor's Council to Address Aging in MA. In addition, the Cabinet will initially focus on at least 2 specific initiatives to support this work:

- (1) Reviewing all policies with an eye toward aging and equity in all policies – one example is seen in the partnership between the state's Department of Public Health and Executive Office of Elder Affairs where healthy aging and age friendly activities have been prioritized as an area of focus through the ["Community-Based Health Initiative \(CHI\) Healthy Aging Fund Initiative."](#)
- (2) Expanding the Community Compact initiative to include age and dementia friendly commitments as a best practice. Community Compacts are voluntary, mutual agreements between the Baker-Polito Administration and individual cities and towns where the community commits to implement at least once age friendly best practice at the local level and may apply for state resources to support this effort. Another element to Community Compact agreements is an opportunity to nurture regionalization where appropriate via Efficiency and Regionalization Grants. Where it makes sense, the Governor's Council will encourage and support age-friendly collaborations between communities with similar goals and challenges.

In addition, MHAC will continue to serve as the backbone organization and the hub for our state's age friendly work. It has become the go-to organization for information and resources for communities seeking to make age-friendly commitments and for entities interested in joining the state's healthy aging movement. Significantly, MHAC membership has expanded to include many who would not traditionally be engaged in aging work as a result of intentional outreach to "unusual partners" who can advance the age-friendly movement. MHAC's infrastructure enables it to effectively share information and coordinate activities across its many and varied stakeholders, which is critical when working with disparate organizations across the state. All of MHAC's collaborative planning and implementation activities revolve around four strategic priorities: 1) continue to build the age-friendly movement in MA; 2) deepen capacity-building work at the municipal level; 3) embed diversity, access, equity and inclusion into

MHAC's approach and the age-friendly movement; and 4) influence relevant policy and translate implications to stakeholders.

MHAC is committed to advancing healthy aging and age-friendly communities throughout the state by promoting policies and practices that are inclusive, relevant, and enhance the quality of life for people of all ages. Although MHAC is continuously adding new members, many of its current members have been contributing to its efforts since 2009. [Click here for more information about the history of the MHAC.](#) Experts covering all eight domains of age-friendly communities are represented in MHAC membership. The Collaborative is committed to building connections between these experts and healthy aging stakeholders – some of whom did not initially consider themselves natural partners – to help all agencies, organizations, and companies see their role in the age- and dementia friendly community movements.

4) Briefly describe the mechanisms the state has or is planning to put in place to facilitate engagement with communities to identify unique and disparate needs throughout the state.

Local communities and voices of consumers are at the center of our approach. We believe this work should be locally driven and supported by policy at the state level. Honoring the diversity of communities is central to how we approach this work. There are several mechanisms in place to hear from and engage with communities about their specific needs:

1. The Community Compact Program, which provides state support to municipalities in addressing the specific priorities identified in their communities.
2. Local efforts to commit to the WHO or AARP process for age-friendly designation – these all involve community engagement at their core.
3. Massachusetts has a unique capacity to collect and analyze data to inform communities as they work to become more age-friendly. Many of our communities are using the community-specific data from the *Massachusetts Healthy Aging Data Report* to identify the needs of their older adult residents. Additionally, EOE's Senior Information Management System (SIMS) database contains data about the home- and community-based services provided to older adults in Massachusetts and is a valuable resource for our age-friendly work.
4. The Healthy Living Center for Excellence (HLCE) (also an MHAC member) has already brought together 90 community-based organizations, including Area Agencies on Aging, senior centers, housing, YMCAs, faith based organizations, multi-cultural centers, academic centers, and others. These community organizations serve diverse populations and have established relationships of trust within diverse communities. Examples include organizations serving the Latino, Black, Portuguese, Chinese, Haitian Creole and other communities of color, the LGBTQ community, and the deaf/hard of hearing and blind/low vision communities. This community-centric focus delivers value beyond the program offerings. Partnerships with trusted community organizations allow the HLCE to offer programs at community locations where older adults naturally gather. They also make it possible to leverage existing support systems, such as transportation, care management, and nutrition services. HLCE also offers training, evaluation and other tools to ensure the quality, integrity, and efficiency of community-based programs.
5. EOE and its partners will continue to perform a community needs assessment every 3 years (as part of the development of the State Plan on Aging) and will continue to leverage and build upon the work already taking place in our communities across the state.
6. EOE will work with MHAC to identify and partner with local and statewide associations and organizations that focus on advocacy, education, awareness-building, and engagement of underrepresented voices in our

state to better understand issues related to access and equity within the “eight domains” of age-friendly communities.

7. EOEA will work with MHAC and AARP-Massachusetts to build on the success of learning communities developed for DFM and facilitate the creation of regional learning communities that share best practices, help remove barriers that impede local communities from moving forward, address local challenges and specific needs, and identify and support beneficial partnerships within and across communities.

Section 4: NETWORK MEMBERSHIP

Your answers to the following questions will help us complete your membership in the global age-friendly network and better enable us to understand how to support the network.

5) How do you hope to contribute to the AARP Network of Age-Friendly Communities/States and the World Health Organization Global Network of Age-Friendly Communities?

Massachusetts is committed to being part of a learning community and engaging in continuous process improvement on age-friendly practices. We will bring our strong infrastructure of academia, philanthropy, innovation, and technology to this work (for example UMass Boston Gerontology Institute, Tufts Health Plan Foundation, and the MIT Age Lab). We want to contribute to, and learn from, thought-leaders in the AARP Network of Age-Friendly Communities/States and the World Health Organization Global Network of Age-Friendly Communities. Our Massachusetts leaders will commit to engaging in discussions, sharing best practices and tools, and contributing to hackathons and problem-solving sessions among other activities.

MHAC has already taken steps towards work with neighboring states to establish partnership between border communities while also seeking out replicable state-based best practices and lessons learned. Tufts Health Plan Foundation has strong relationships with the Alliance for Health Aging in New Hampshire, the Tri-State Learning Collaborative (NH, VT, ME) and those working to advance age friendly communities in Rhode Island. MHAC and its partners will continue to advance the regional cooperation, facilitate connections and cross-state learning opportunities and collaborations and also share these efforts with the broader Network of Age-Friendly Communities.

6) What motivated your State to join the AARP Network of Age-Friendly Communities/States and the World Health Organization Global Network of Age-Friendly Communities?

Massachusetts has long been an innovator in the aging space and as a Commonwealth has been committed to a strong aging services network including Councils on Aging (COAs), Area Agencies on Aging (AAAs), and Aging Service Access Points (ASAPs). This network supports older people across all socioeconomic levels and demographics, addresses the unique needs of specific communities and supports caregivers. Governor Baker recognizes the vast contributions that older people make to our state and communities and embraces the opportunity to think about how we, as a state and local communities, can have an impact on making Massachusetts a state that embraces aging. The active engagement of older residents as contributors to the social, economic, and civil fabric of our communities is critical to our Commonwealth’s success. Innovations being developed throughout Massachusetts are rapidly positioning Massachusetts as a leader in the fast-growing longevity economy.

7) Please provide a digital (JPG, PNG or PDF) file or link of a logo or other image that represents your state.

The image resolution should be at least 72 dpi. As an example of an image, here's ours >



Click here to add a link to where we can find your logo. Or, send us your logo by email attachment to livable@aarp.org. Attached is our state seal. We look forward to developing an Age-Friendly Massachusetts logo in the near future.

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- i [Current Population Survey \(CPS\) - CPS Table Creator - U.S. Census Bureau](#). CPS Data Collected in Year: 2017 (Massachusetts)
 - ii [Current Population Survey \(CPS\) - CPS Table Creator - U.S. Census Bureau](#). CPS Data Collected in Year: 2017 (Age 60 and over)