



2025-2030 **Durham** **Comprehensive** **Aging Plan**



2025-2030 Durham Comprehensive Aging Plan At-A-Glance

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Overview of Durham Aging Initiatives and Aging Well Durham



Beginning with the formation of the Coordinating Council for Senior Citizens in 1949, Durham has dedicated several decades of community-centered initiatives that improve quality of life for aging adults. Many of these efforts have been led by diverse groups of community volunteers, along with representatives from nonprofits, coalitions, faith-based organizations, public health, healthcare, Durham City and Durham County governments. They have also involved a neutral convener that is responsible for several functions, including:

- Bringing together different groups that reflect Durham's community, civic and public sectors.
- Working with group members to define a collective mission, vision and set of values.
- Coordinating information-gathering to understand challenges faced by aging adults in Durham.
- Identifying strategic, asset-based recommendations to address the challenges, including promising models used in other age-friendly communities.
- Coalition building to strengthen existing relationships and to develop new partnerships.
- Managing the group's work so that it moves from planning to implementation.
- Communicating on behalf of the group so that members of the Durham community who are not actively involved in the work are aware and can engage.

"Keeping in Step: An Action Plan for Durham's Growing Older Population, 1991" (KIS Plan) is an early example of a Durham initiative focused on older adults.¹ The process to develop the KIS Plan began in 1990 when Durham County, the Department of Social Services and the Coordinating Council for Senior Citizens formed a 20-person Steering Committee. The Plan's purpose was to address three community-wide problems that were negatively affecting the health and wellbeing of older adults. The identified issues were:

- Older adults were not able to keep medical appointments, shop or participate in recreational activities because of their inability to drive or not having reliable, affordable transportation.
- A lack of social support and affordable housing that would enable older adults to manage daily activities and sustain their quality of life.
- Older adults using community resources that did not meet their needs.²



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In addition to the Steering Committee, sub-committees were formed to develop the 1991 KIS Plan. The Plan detailed four priorities with specific actions to address the three challenges. The priorities were information, care coordination, direct services and housing.³ The Plan listed community-based organizations, Durham City and Durham County departments responsible for moving the action steps forward. The Plan also called for the Durham Board of County Commissioners to “authorize the Coordinating Council for Senior Citizens and the Department of Social Services to appoint and chair an oversight committee to assure the implementation of the strategies outlined in the report.”⁴

Since 1991, Durham has continued to collaborate for the purpose of improving care coordination, direct services, housing, information-sharing and other priorities for older adults. This includes the Coordinating Council for Senior Citizens transformation into the Durham Center for Senior Life.⁵ Durham County’s strategic plans have included action items that focus on aging adults including the County’s 2008 Results-Based Accountability Initiative.⁶ Additionally, the City of Durham’s plans have also included older adult-focused activities that support its strategic goals.⁷

One group that has led recent initiatives is the **Durham Partnership for Seniors**. The Durham Partnership for Seniors was a long-standing coalition of healthcare, public health and social service providers along with community volunteers. The Partnership focused on improving the lives of older adults in Durham through advocacy, strengthening collaborations and identifying opportunities to improve quality of life. Beginning in 2008, the coalition served as the advisory committee for Durham County’s Home and Community Care Block Grant.⁸

The Home and Community Care Block Grant (HCCBG) funds in-home and community-based services for adults ages 60 and older through the Older Americans Act. The intended purpose of the HCCBG is to “develop and enhance comprehensive and coordinated community-based systems of services, opportunities and protections for older adults.”⁹ The Administration on Community Living distributes HCCBG funds to states using a census-based formula.¹⁰ In North Carolina, Boards of County Commissioners approve HCCBG funding plans each year. The Boards appoint a local lead agency that is responsible for managing the funding and documenting how it is spent.¹¹ County Commissioners also select an independent advisory committee that works with the lead agency to identify priority services and to make a funding plan for those services that will be supported by the HCCBG.¹² Prior to the Durham Partnership for Seniors being the HCCBG independent advisory committee, the Keeping in Step Committee served in this role.¹³

The Partnership organized Durham’s Healthy Aging Summits and successfully advocated for both Durham City and Durham County to join the AARP Age-Friendly Network of States and Communities on March 1, 2019. The group also led Durham’s effort to create its first aging plan as an age-friendly community.

A volunteer steering committee managed the process to develop Durham’s 2020 Aging Plan. Similar to the 1991 KIS Plan, the group that developed the 2020 Aging Plan was diverse and included representatives from nonprofits, faith-based communities, Durham County and City of

Durham departments, public health, healthcare and social services providers as well as individual older adults and adults who have disabilities. The design process lasted ten months and involved a Steering Committee and five working groups. The finalized Plan was prepared and distributed throughout the community in 2020. Because of COVID-19, community-wide coordination to implement the 2020 Aging Plan was put on hold.

In 2020, members of the Partnership along with representatives from new collaborating nonprofits and Durham’s academic institutions formed a second coalition called the **Durham Partnership for Seniors and More**. This group met regularly to coordinate community efforts around telephone reassurance calls, volunteer deployment and COVID-19 information-sharing. Their activities also included a COVID-19 prevention program for a multi-generational and bilingual cohort of Community Health Promoters. The Durham Partnership for Seniors and More’s activities were time limited with the group being active until the end of 2020.

In 2021, community-level discussions began about how Durham should move the goals of the 2020 Aging Plan forward. Like the KIS 1991 Plan’s recommendation of Durham needing a dedicated team to move the work forward, both Durham Partnerships for Seniors agreed that the community needed a new and independent nonprofit to manage the Aging Plan. Over several months, a dedicated group of individuals met to recruit board members. The volunteers also successfully advocated to Durham County and the City of Durham to secure support and funding for the new nonprofit, **Aging Well Durham (AWD)**.

On September 9, 2021, AWD’s articles of incorporation were filed with the North Carolina Secretary of State Office. In January 2023, the organization hired its first employee, the Executive Director. The first Livability Program Manager was hired in July 2023.

As the backbone organization for the Durham Comprehensive Aging Plan, Aging Well Durham is responsible for five main goals:

- Ensure that the Aging Plan remains relevant to aging adults.
- Actively collaborate with community members and representatives from the public, civic and private sectors to make Durham more age-friendly, more livable and more equitable.
- Provide technical assistance and serve as a convener to manage implementation, monitoring and evaluation of the Durham Comprehensive Aging Plan.
- Maintain bidirectional communication with partnering organizations and individual aging adults for the purposes of transparency and accountability.
- Share updates about the Plan’s activities to Durham community members and other audiences via public forums and other engagement activities.

Aging Well Durham’s Board of Directors has now taken on the responsibility of being the independent advisory committee for Durham County’s Home and Community Care Block Grant.



DURHAM AGING INITIATIVES TIMELINE

- 1949** Coordinating Council for Senior Citizens formed
- 1990** Durham County, the Department of Social Services and the Coordinating Council for Senior Citizens form a 20-person Steering Committee
- 1991** Twenty-person Steering Committee and Sub-committees develop “Keeping in Step (KIS) : An Action Plan for Durham’s Growing Older Population”
- 2006** Coordinating Council for Senior Citizens becomes Durham Center for Senior Life (DCSL). DCSL’s new building at 406 Rigsbee Avenue opens
- 2008** Durham Board of County Commissioners designate the Durham Partnership for Seniors as the county’s independent committee for the Home and Community Care Block Grant
- 2015** The Durham Partnership for Seniors launch the Durham Community Resource Connection for Aging and Age-friendly initiatives
- 2015** First Aging Well in Durham Summit
- 2016** Second Aging Well in Durham Summit
- 2019** City of Durham and Durham County join the AARP Age-friendly Network of States and Communities
- 2019** Durham’s first Aging Plan as an Age-friendly Community is created. The Plan covers 2020-2025
- 2020** Durham Partnership for Seniors and More launch several initiatives to support aging adults during the first 2 years of the COVID-19 pandemic
- 2021** Community-level discussions about how to move Aging Plan forward begin. Consensus is that Plan’s convener should be an independent nonprofit called Aging Well Durham
- 2021** Articles of incorporation for Aging Well Durham are filed
- 2022** Aging Well Durham’s Board of Directors approve the organization’s bylaws
- 2022** Durham County and City of Durham agree to jointly support Aging Well Durham
- 2023** Aging Well Durham hires first employees
- 2023-2024** More than 100 representatives from the community’s civic, public and private sectors create the 2025-2030 Durham Comprehensive Aging Plan



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Defining Older Adulthood, Inclusive Language and Ageism

Different age ranges are used to determine older adulthood. The Center for Disease Control and Prevention uses 65 years and older.¹⁴ The World Health Organization's age range for older adulthood begins at 60.¹⁵ For the Aging Plan and the age-friendly community process, Durham has adopted AARP's definition for "older adult" as being an individual who is at least 50 years old. The 2025-2030 Durham Comprehensive Aging Plan contains data from a variety of sources that use different age ranges to define older adulthood.

In support of inclusive language, the Durham Comprehensive Aging Plan uses "aging adults," "older adults," or "older individuals." Inclusive language encompasses words, phrases or tones that do not reflect biased, stereotyped or discriminatory views about a particular group of people.¹⁶ The Durham Comprehensive Aging Plan uses and promotes inclusive language for three main reasons.

The language we use reflects our beliefs and influences our actions. Terms such as "elderly," "seniors," or "the aged" have been shown to reinforce negative biases about aging adults.¹⁷ These beliefs are the basis for ageism or discrimination against people because of their ages. While anyone can experience ageism, this particular form of prejudice impacts older adults across a wider range of social relationships than individuals in other age groups.¹⁸ Ageism against older adults is prevalent across a variety of community settings including the workplace and healthcare.

The Age Discrimination in Employment Act (ADEA) of 1967 protects individuals who are 40 years and older from discrimination in any aspect of employment.¹⁹

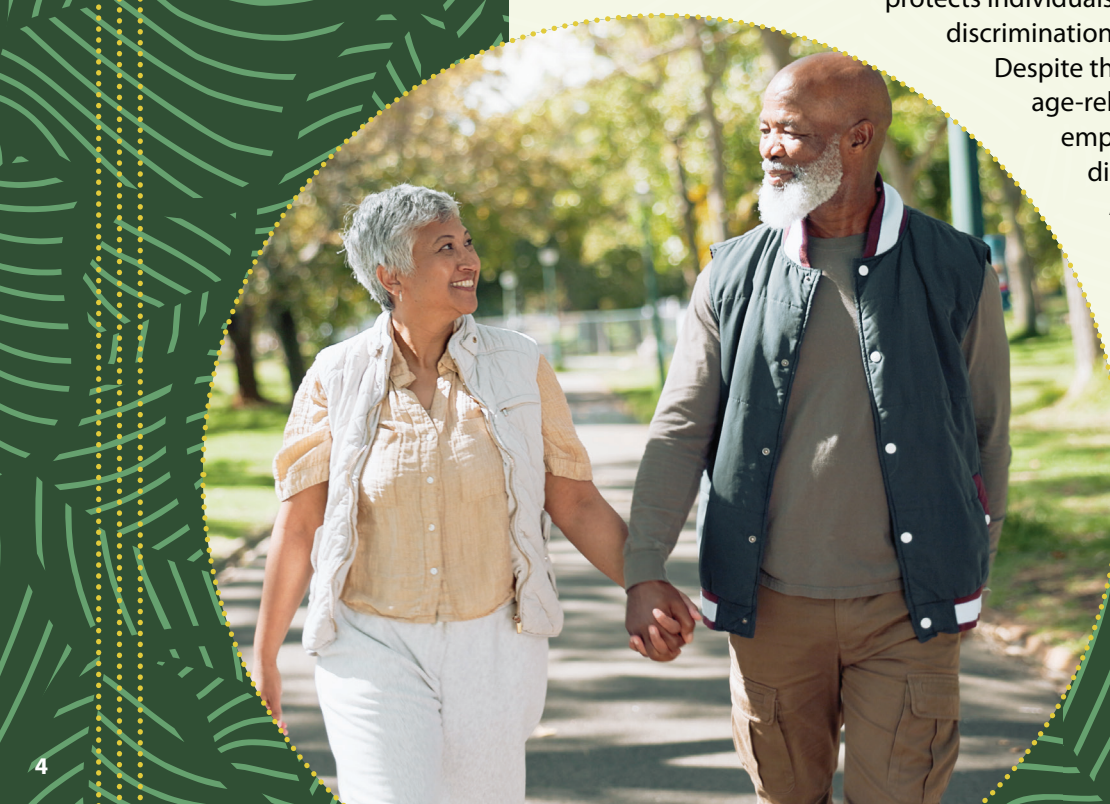
Despite the ADEA, older workers still report age-related barriers in obtaining employment and age-based discrimination while being employed. Almost one in 6 older adults working or looking for work in 2022 believed that their age was a significant reason why they were not hired for a job they had applied for over the past 2 years.²⁰

In healthcare, ageism results in poorer health outcomes for older adults across a spectrum of experiences. On one end, ageism against older adults decreases their access to services and resources like organ transplants, mental health support, sexual and reproductive healthcare and surgical interventions.²¹ On the other end of the spectrum, healthcare professionals prescribe too many or unnecessary medications to older adults compared to patients in other age groups with the same medical diagnosis.²²

Negative stereotypes about aging can also influence how individual older adults perceive themselves as well as understand and manage their health. Research shows that associating aging with decline and loss is a factor in older adults not engaging in preventative health behaviors.²³ Internalized ageism, or when an older person has negative self-perceptions about aging, has shown to increase the risk of developing depression and becoming socially isolated. Other research shows that older individuals who have internalized ageism live on average 7.5 years less than older adults who have positive attitudes about getting older.²⁴

The second reason for the use of "aging adults" and "older adults" is because of the intersection between ageism and ableism. Ableism is a "belief system that sees persons with disabilities as being less worthy of respect and consideration, less able to contribute and participate, and of less inherent value than others."²⁵ Similar to ageism, younger people who have disabilities can experience ableism. But it impacts more older adults because individuals who are 60 years and older represent the majority of people who have disabilities - globally²⁶ and in North Carolina.²⁷ The overall purpose of the 2025-2030 Durham Comprehensive Aging Plan is to improve quality of life for older adults. This means also making sure that Durham's community spaces, services and communications are accessible to everyone.

The third reason for not using terms that reinforce negative biases and stereotypes about older adults is because our perceptions about aging are changing. How adults view aging is becoming more optimistic and more representative of the diversity in demographics and lived experiences across older adults. National data reveals that older adults overwhelmingly view aging as a positive experience with continuous opportunities for learning and personal growth.²⁸ Information from the American Psychological Association demonstrates that as we age, people are generally more satisfied with their lives and more optimistic about growing older.²⁹





Projected Population Changes - Durham and Older Adult

Durham is experiencing a significant growth in the number of adults who are at least 50 years old. This is due to longer life spans because of advancements in healthcare and decreases in birth rate. Over the next couple of decades, the proportion of older adults compared to the overall population will continue to increase.

In 2025, the second largest cohort of adults in the United States, the Baby Boomers, range in age from 61 to 79 years old. The age range for adults who are Generation X is 45 to 60 years. The largest age cohort in the United States, the Millennials, is also approaching older adult status with the oldest members being 44 years old in 2025.

When the last Baby Boomers turn 60 years old in 2030, the number of older adults in Durham will grow from 55,730 individuals to 91,404.³⁰ This represents a 64% increase in 5 years.³¹ By 2040, the North Carolina Office of State Budget and Management estimates that Durham County will have more residents age 60+ than children ages 0-17.³² By 2042, there will be a 149% increase in the number of individuals age 85 years and older.³³

The steady increase of older adults over the next 2 decades will have significant economic and social impacts for Durham. Aging increases the risk of developing chronic conditions like heart disease, diabetes and cancer.³⁴ As people age, we are also more likely to develop disabilities. Globally³⁵ and in North Carolina³⁶, individuals who are 60 years and older represent the majority of people who have disabilities. The number of adults in the United States who will develop dementia is projected to double by the year 2060 from approximately to 514,000 to 1 million each year.³⁷ It is expected that dementia will disproportionately impact Black older adults and women with "lifetime risks ranging from approximately 45% to 60% in these populations."³⁸

Data from AARP's 2021 Home and Community Preferences Survey shows that 77% of older adults want to remain in their homes for the long term.³⁹ Supporting individuals and families to age in their homes and communities will become more complex because older adult homeownership is decreasing as the number of renters 65 years and older is growing from 7.4 million in 2020 to 12.9 million in 2040.⁴⁰

Table 1 shows estimates of certain demographic characteristics for Durham residents 60 years and above in 2024.

Table 1: Characteristics of Durham County Residents 60 Years and Older, 2024 Estimate⁴¹

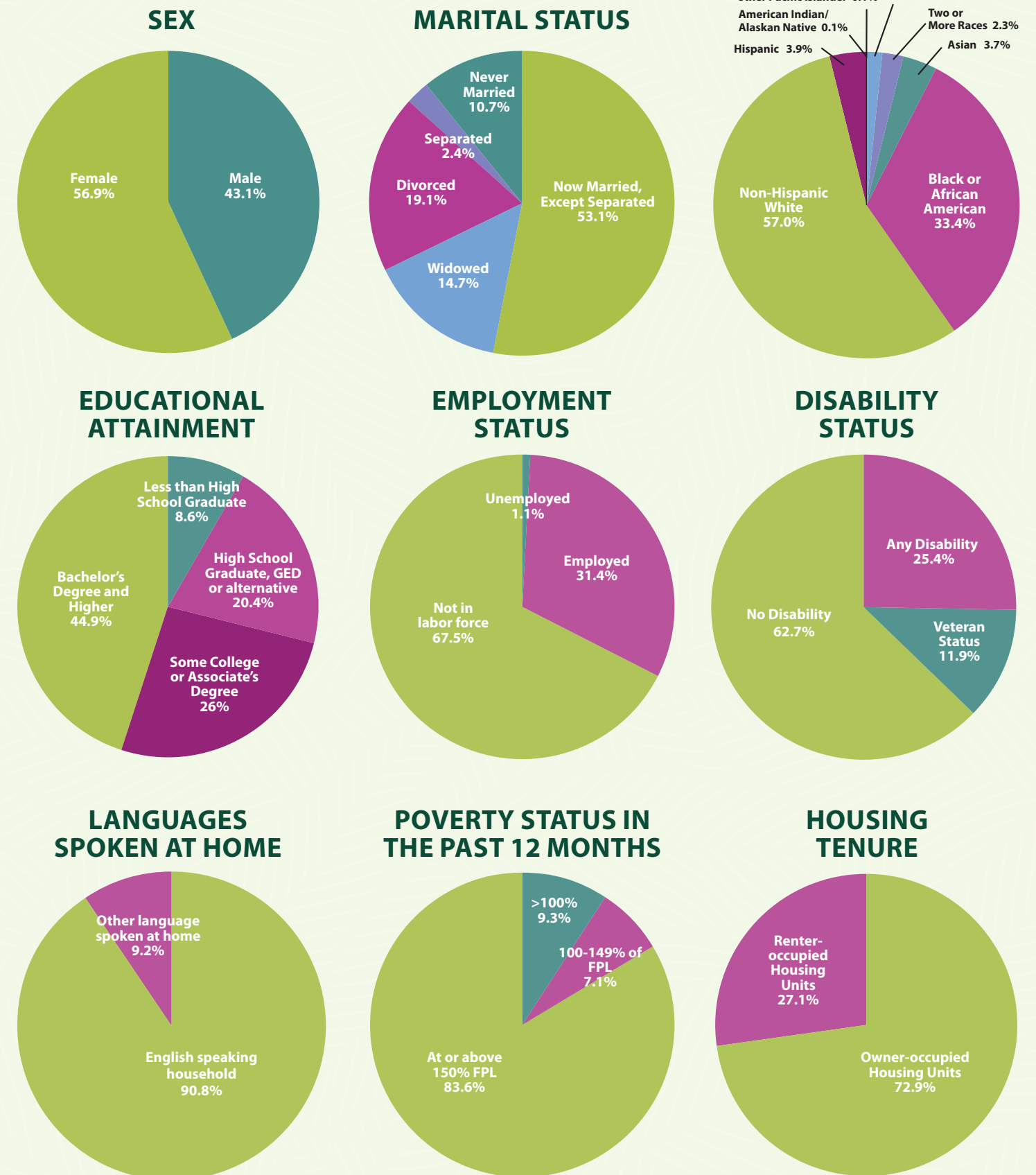




Table 2 shows the overall anticipated growth in Durham for all age ranges. The number of Durham adults 60-65 years old will grow from 61,258 in 2022 to 91,220 in 2042. Additionally, there will be a 149% increase in the number of individuals age 85 years and older.

Table 2 Projected Population Change, 2022-2042, Durham County⁴²

Age	2022		2042		% Change 2022-2042
	County #	County %	County #	County %	
Total	334,379		418,972		25%
0-17	75,069	22%	84,300	20%	12%
18-44	140,442	42%	169,143	40%	20%
45-59	57,610	17%	74,309	18%	29%
60+	61,258	18%	91,220	22%	49%
65+	44,884	13%	68,719	16%	53%
85+	4,863	1%	12,103	3%	149%

The Age-friendly Network of Communities and States & Age-friendly Community Process

Durham will experience significant social and economic changes because of the expansion in the number of older adults over the next 2 decades. To support older adults in having longer and healthier lives, both the City of Durham and County of Durham have committed to becoming more age-friendly communities by joining the Age-friendly Network of Communities and States on March 1, 2019.

The World Health Organization (WHO) defines age-friendly communities as an environment where older adults can:

- Age safely in a place.
- Be free from poverty.
- Continue to develop personally.
- Contribute to their communities while retaining autonomy, health and dignity.⁴³

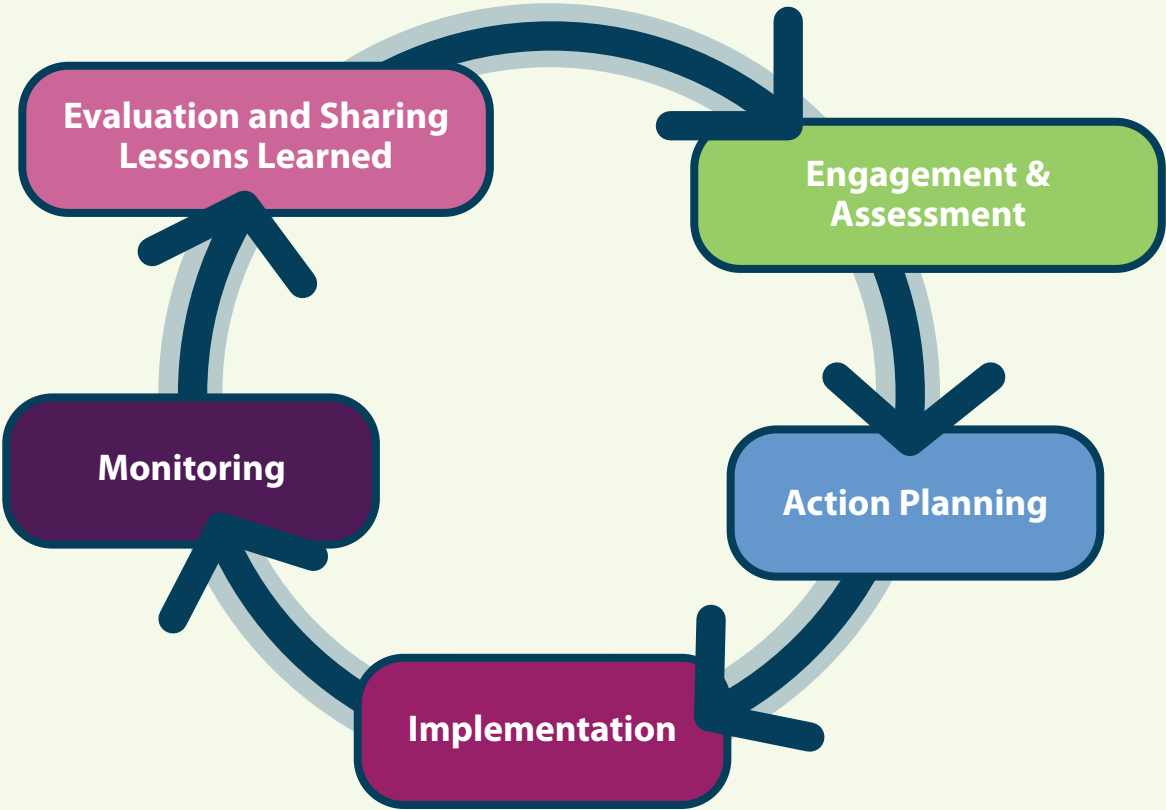
As communities take actions to become more age-friendly, older adults are central actors in these initiatives.

More than 1600 cities and communities in 53 countries are members of the World Health Organization's Global Network for Age-friendly Cities and Communities.⁴⁴ In the United States, AARP is the Global Network's affiliate. As of 2024, Durham is one of 14 municipalities in North Carolina that are members of the AARP Network of Age-friendly States and Communities.⁴⁵ In May 2023, North Carolina became the 12th state to join the Network.⁴⁶

Enrolling in the Network of Age-friendly States and Communities Network requires a membership application and letters of commitment from the municipality's elected officials.⁴⁷ The letters represent elected officials' pledges to actively collaborate with community representatives to make their city, town, county or state more age-friendly. Network members also embark on a 5-year age-friendly community process that is comprised of 7 steps:

- **YEAR 1** - establishing a way for older adults to be actively engaged throughout the process and conducting a community needs assessment
- **YEAR 2** - developing and publicly disseminating an age-friendly action plan that addresses the needs identified in the assessment.
- **YEARS 3-4** - implementing and monitoring the plan's activities.
- **YEAR 5** - completing an independent evaluation of the plan's activities and the overall impact of the age-friendly community process. Communities also submit a progress report and share solutions and lessons learned with other Network members.⁴⁸

Age-friendly Community Process 5-Year Cycle

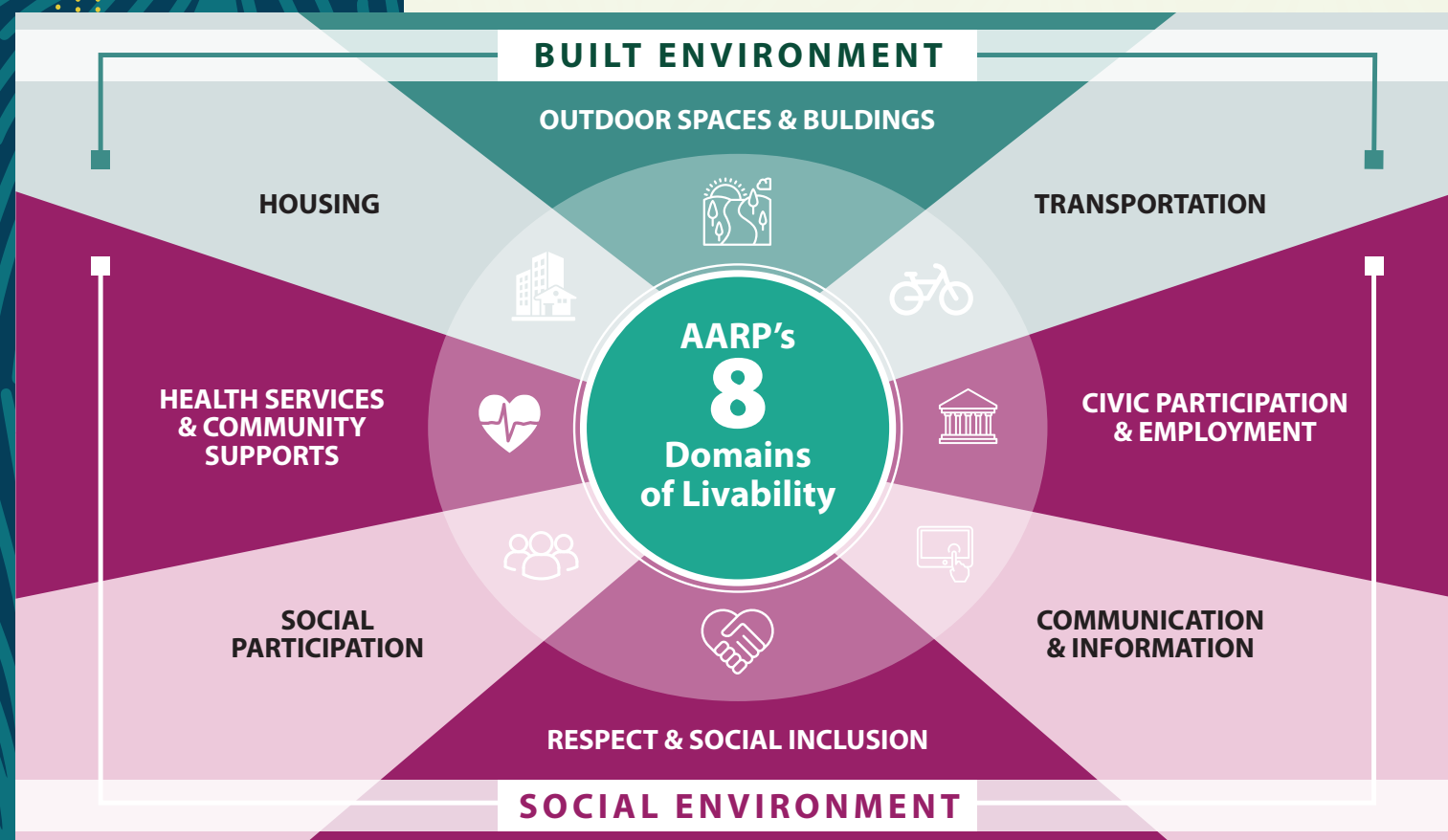




AARP Livability Framework & Durham City and County Livability Indexes

Members of the AARP Age-friendly Network of States and Communities use the livability framework to organize their community's age-friendly processes and action plans. The framework has 8 domains that represent a community's livability or quality of life.⁴⁹

Livability encompasses the built environment: housing, outdoor spaces, buildings and multi-modal transportation.⁵⁰ It also includes social and economic factors like civic engagement, employment, social participation, community support, respect and inclusion. Communities that have higher levels of livability are more age-friendly.



AARP produces a livability index for municipalities across the United States. The index uses 7 categories to assess a community's overall livability on a scale of 0 to 100.⁵¹ Locations that score higher on the index are considered to be more livable and age-friendly. The index also groups communities by population size:

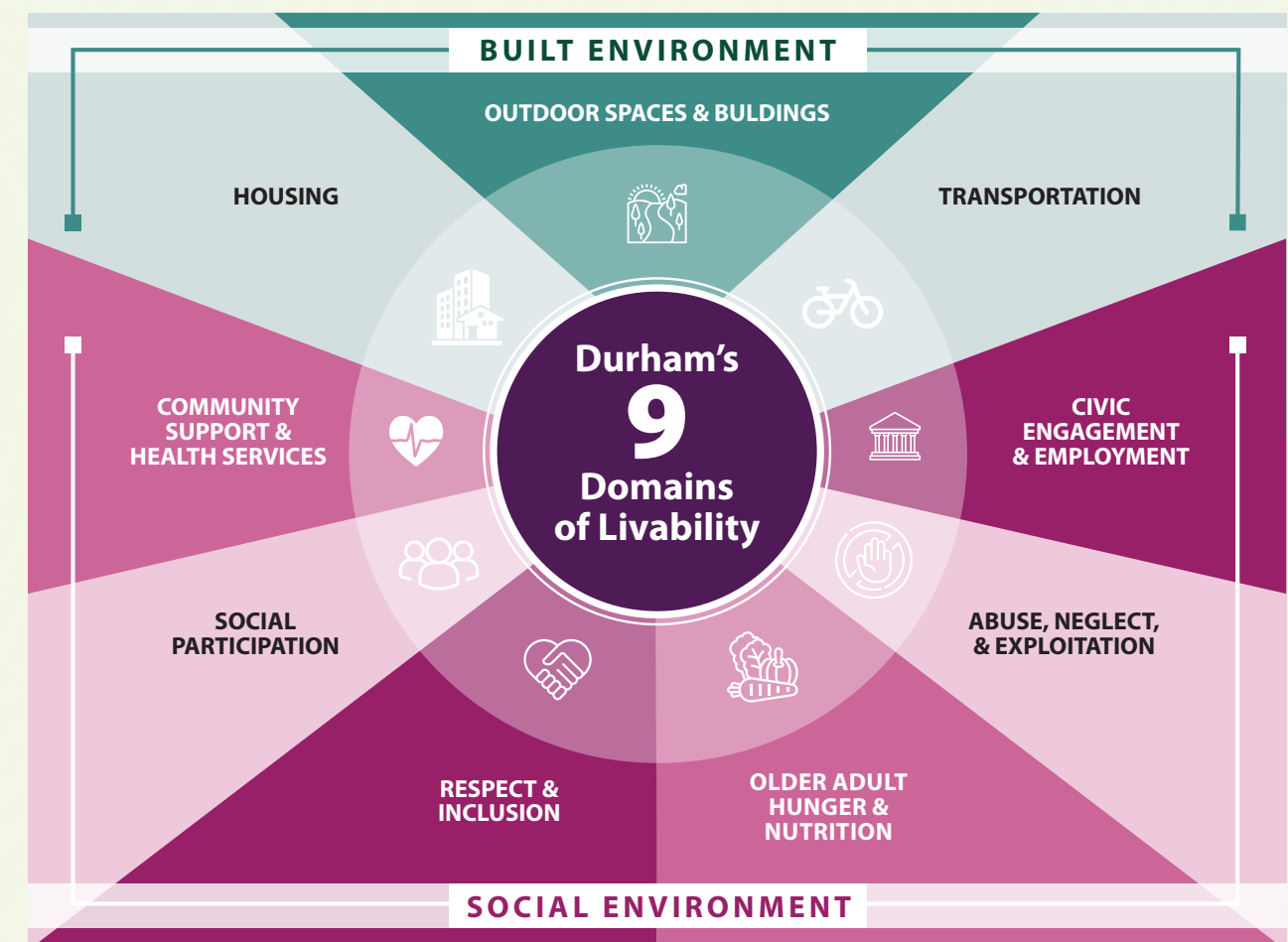
- **Very large** - communities with more than 500,000 residents
- **Large** - 100,000-499,999 residents
- **Mid-size** - 25,000-99,999 residents
- **Small** - 5,000-24,999 residents.⁵²

The category scores are based on a variety of indicators across the livability domains. The Age-friendly Network of States and Communities also use data about local and state age-friendly policies to determine livability scores.⁵³ In 2024, the most livable locations in the United States by population category and their index scores are:

- **Very large** - San Francisco, California (66)
- **Large** - Arlington, Virginia (67)
- **Mid-size** - Cliffs Park, New Jersey (68)
- **Small** - Great Neck Plaza, New York (73).

The index lists both Durham City and Durham County as large communities. In 2024, the livability scores for Durham City and Durham County were 60⁵⁴ and 61 respectively.⁵⁵ Both the City's and County's lowest scores are for neighborhoods and their highest are for engagement (City) and environment (County).

The 2025-2030 Durham Comprehensive Aging Plan has 9 domains of livability. They are:





2025-2030 Durham Comprehensive Aging Plan's Livability Groups and Age-friendly Community Planning Process

In the spring of 2023, livability groups began developing definitions, goals and strategies for the 2025 Durham Comprehensive Aging Plan's domains. Throughout 2023 and 2024, the design process was dynamic as the livability groups refined drafts of the Plan's goals and strategies to reflect the members' awareness of emerging priorities identified by aging adults in Durham. The design process also included "check-in" points about three other plans that are related to the 2025-2030 Durham Comprehensive Aging Plan:

- The Durham Comprehensive Plan adopted by Durham City and Durham County in October 2023,⁵⁶
- The North Carolina Institute of Medicine's 2023 "A Place to Thrive. Creating Opportunities to Age Well in North Carolina,"⁵⁷
- The 2024 "All Ages All Stages North Carolina - Multisector Plan for Aging."⁵⁸

The purpose of the check-in points was to learn about the three Plans and to align the 2025-2030 Durham Comprehensive Aging Plan with them. The check-in activities included:

- Review of the plans by Aging Well Durham's staff.
- Meetings between Aging Well Durham's staff and representatives from the Plans' conveners.
- Inviting representatives from the convening organizations to meet with the livability groups and to do presentations at the quarterly community meetings hosted by Aging Well Durham.
- Updating the 2025-2030 Durham Comprehensive Aging Plan's draft goals, strategies and language to align with the other three plans.

Additionally, Aging Well Durham's staff participated in the "All Ages All Stages NC" workgroups.

The overall desired outcome of the 2025-2030 Durham Comprehensive Aging Plan is to improve Durham's age-friendliness and livability. While the Plan's proposed goals and strategies have been designed from the perspectives of aging and ability, the positive changes they are expected to bring are meant to benefit people of all ages and abilities who live in Durham.

The livability groups used the following definitions during the Plan's design process:

- » **DOMAIN DEFINITIONS** - are the ideal state or the livability groups' vision for older adults in an age-friendly Durham within the context of the domain topic.
- » **GOALS** - represent outcomes that we will work to achieve over the next 5 years.
- » **STRATEGIES** - where Durham will focus our activities to support the goals.

Lead Agencies that are listed in the Plan have programs or activities that support the Plan's goals. Lead agencies created the 2025-2030 Durham Comprehensive Aging Plan by participating in at least 1 livability group or by providing input through communication with Aging Well Durham. The current lists of lead agencies will be continually updated with new partners being added over the next 5 years. The livability groups identified potential measures of success in the fall of 2024. An evaluation framework for the Aging Plan will be developed using the measures.

The 2023-2024 design process did not include the crafting of Specific Measures Achievable Relevant Time-bound (SMART) Objectives. SMART objectives will be developed in 2025 before implementation activities begin. They will be used track the Plan's progress.

In addition to the livability group's work of developing the 2025-2030 Durham Comprehensive Aging Plan, Aging Well Durham held a series of **8 listening sessions** in the spring 2024 with aging adults. There were 3 main purposes for the listening sessions:

1. Relationship building between Aging Well Durham, older adults and adults who have disabilities.
2. Learning about what is working well for aging adults and what they believe should be done to improve community conditions in Durham.
3. Collecting information to help shape the 2025-2030 Durham Comprehensive Aging Plan's implementation.

Community members engaged through the listening sessions were:

- Adults who have disabilities (ages 18 years and older),
- Family Caregivers who speak English
- Family Caregivers who speak Spanish
- Older adults who speak Spanish
- Older adults who speak Haitian Creole
- Older adults who speak Mandarin Chinese
- Older adults who live in North Durham County
- Older adults who live in West End-Lakewood Neighborhoods.

In total, 79 aging adults participated in the listening sessions. An initial summary of the session's findings and an infographic will be made available on Aging Well Durham's website - www.agingwelldurham.org



Not only do we need young volunteers to help us, but we older people, although we may lack some physical strength, have accumulated some experiences in life that we can contribute to. We can give back our knowledge, our experiences, and our time. I think what we have most now is time. We are very willing to do things, which I think is great."

- Older Adults who Speak Chinese Listening Session Participants



I like the weather. I like North Carolina. Something that has improved in the past few years that I'm very grateful for... There's been a much better mental health access in Durham. It has really stepped-up since COVID - the connectivity. I am so much more comfortable participating with people since I can do it my house with my cat. I can have my therapy here, because I can't physically, I can't get on the bus. I think Durham did a really good job with COVID. I really do.

- Adults who have Disabilities Listening Session Participants



2025-2030 Durham Comprehensive Aging Plan's Vision, Mission & Cross-Cutting Issues

A Coordinating Council made up of representatives from the livability groups met twice in 2024 to create a vision and mission statement and to identify values and cross-cutting issues for the 2025-2030 Durham Comprehensive Aging Plan. The Coordinating Council began by reviewing the 2020 Durham Aging Plan's mission, vision, values and cross-cutting issues and then updated these specific elements.

2025-2030 Durham Comprehensive Aging Plan's Vision Statement -

Durham is a thriving, vibrant, diverse and inclusive community that respects and values aging adults of all races, ethnicities, abilities, and socio-economic status. It offers abundant opportunities for all residents to engage, live, work, worship, learn and play with dignity by building a sense of belonging.

2025-2030 Durham Comprehensive Aging Plan's Mission Statement -

Durham will celebrate aging as well as meet the needs and engage the strengths of all neighbors toward the goal of building a safe, affordable, accessible and connected community through its Comprehensive Aging Plan.

2025-2030 Durham Comprehensive Aging Plan's Values - Engagement, Equity, Dignity, Integrity, Respect, Belonging, Compassion, Self-Determination, Person-centered, Inclusion, Health and Well-being, Safety, Happiness.

Cross-cutting issues are embedded throughout the Plan's domain definitions, goals and strategies. Their purpose is to ensure that the Durham Comprehensive Aging Plan reflects the diversity of older adults in Durham, their lived experiences and consideration of Durham's assets and needs. The 2025-2030 Durham Comprehensive Aging Plan's cross-cutting issues are:

- **Accessibility, in all forms**
- **Communication, including digital literacy**
- **Community safety**
- **Climate resiliency**
- **Dementia**
- **Intergenerational opportunities and spaces**
- **Racial equity**
- **Sexual orientation and gender identity**
- **Social support**
- **Socioeconomic status.**

"One is how much I appreciate the public library. It's a really, really good public library. And when I am able to ride the bus to the public library, everybody's very sweet. I've found the passengers and the drivers are very kind people."

- Adults who have Disabilities Listening Session Participants

2025-2030 Durham Comprehensive Aging Plan's Domain Definitions, Goals, Strategies and Lead Agencies

ABUSE, NEGLECT AND EXPLOITATION

➤ **DOMAIN DEFINITION:** In an age-friendly Durham, aging adults are free from all forms of abuse, neglect and exploitation including systemic/structural inequities.

➤ **GOAL 1:** Strengthen the community's ability to recognize and report abuse, neglect, and exploitation of older adults and adults who have disabilities.

STRATEGY 1: Increase the public awareness of North Carolina's Adult Protective Services Program.

STRATEGY 2: Educate the community regarding the legal requirement for reporting incidents of abuse, neglect, and/or exploitation of older adults and adults who have disabilities.

STRATEGY 3: Continue to promote and improve interagency communication, collaboration, and coordination between organizations who serve adults who have disabilities.

Lead Agencies: Durham County Adult Protective Multidisciplinary Team

CIVIC ENGAGEMENT/EMPLOYMENT

➤ **DOMAIN DEFINITION:** An age-friendly Durham provides safe ways older adults can, if they choose to, work for pay, volunteer their skills while being civically engaged.

➤ **GOAL 1:** Establish and maintain a clear, equitable, and accessible volunteer and employment opportunities information network.

STRATEGY 1: Inventory existing volunteer and employment opportunities for older adults.

STRATEGY 2: Identify and recruit partner organizations that have the capacity to organize an information network of volunteer and employment opportunities.

STRATEGY 3: Increase awareness of existing organizations that provide volunteer and employment opportunities for older adults.

➤ **GOAL 2:** Expand awareness of civic engagement and employment opportunities for older adults and adults who have disabilities by building inclusive partnerships.

STRATEGY 1: Identify existing businesses and organizations that expand volunteer and employment opportunities for older adults and older adults who have disabilities.

STRATEGY 2: Identify and expand training opportunities for older adults.

STRATEGY 3: Provide workshops around new employment opportunities like remote working, entrepreneurship, and transitioning into 2nd and 3rd careers.

STRATEGY 4: Facilitate membership of older adults in all aspects of the public, private and the volunteer sectors.

Word of mouth brought me business. I never do any advertisement. I 110% feel supported. And based on conversations that leads to what you do, do you have kids, you get information. And Durham provides that.

- Older Adults who Speak Haitian Creole Listening Session Participants



People talk more here, they communicate, they do reach out. ...you know, being in the big city, sometimes it's hard to, to reach out, you know, maybe it's because there's just so many people there. But here, it's easier to connect with people.

- Older Adults who live in North Durham Listening Session Participants



GOAL 3:

Build community awareness of the value of older adults and older adults who have disabilities in employment, volunteer and civic engagement.

STRATEGY 1:

Reframe aging and the messaging around the value of older adults in employment and volunteering.

STRATEGY 2:

Increase the number of jobs, volunteering, and civic engagement opportunities for older adults.



GOAL 4:

Promote equitable voter participation and civic engagement throughout Durham.

STRATEGY 1:

Partner with existing nonpartisan voting groups to increase knowledge among older adults about voter requirements, voting periods and deadlines, and poll locations.

STRATEGY 2:

Encourage older adults from underrepresented demographics to run for political offices.

STRATEGY 3:

Coordinate transportation of older adults to polling locations.

STRATEGY 4:

Ensure all polling locations are accessible, including public transportation stop locations.

Lead Agencies: AARP NC, Durham CAN, Durham County Board of Elections, Durham Technical Community College, City of Durham - Technology Solutions Department, Digital Durham, El Centro Hispano, League of Women Voters of Orange, Durham, Chatham Counties, Kramden Institute, The National Caucus & Center for Black Aging, Inc, Triangle Nonprofit & Volunteer Leadership Center- RSVP, North Carolina Senior Tar Heel Legislators, You Can Vote

COMMUNITY SUPPORT AND HEALTH SERVICES



DOMAIN DEFINITION:

An age-friendly Durham provides a fair and just opportunity to achieve wellness and well-being for all older adults and older adults with disabilities.



GOAL 1:

Improve coordination among community-based, healthcare and governmental organizations to achieve the best possible/optimal health outcomes for older adults and older adults with disabilities.

STRATEGY 1:

Identify innovative strategies to enhance collaboration.

STRATEGY 2:

Promote investment in a shared, consumer-facing platform for information exchange to facilitate service coordination and navigation.

STRATEGY 3:

Advocate for fair reimbursement of health and social services.



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GOAL 2:

Improve equitable access to health services to achieve optimal health and function.

STRATEGY 1:

Improve organizational literacy to effectively engage older adults who have limited health literacy.

STRATEGY 2:

Invest resources and cost-savings into the community and community-based organizations that work with older adults.

STRATEGY 3:

Invest in community-based programs that are trusted by aging adults in Durham.



GOAL 3:

Improve community support and response to ensure public safety for all older adults in the event of emergencies and crises.

STRATEGY 1:

Use and promote evidence-based practices and models to reduce harm to older adults from emergencies and crises.

STRATEGY 2:

Improve coordination of government and community support during emergencies and crises.

STRATEGY 3:

Invest in coalition-building activities for emergency/crisis preparedness and response including support for community convenings.

STRATEGY 4:

Increase use and coordination of the Access and Functional Need Registry.

STRATEGY 5:

Use diverse communication approaches to disseminate information, with specific emphasis on support for older adults who are socially isolated and/or who speak languages other than English.



GOAL 4:

Build paid and volunteer workforce capacity to improve older adult health.

STRATEGY 1:

Invest and expand training, scope of practice, pay, benefits and appreciation of direct care workforce.

STRATEGY 2:

Provide community-level information about employing direct care workers.

STRATEGY 3:

Expand community health workforce to increase the number of older adults working as Community Health Workers (CHWs) and number of CHWs who work with older adults from HMPs.

STRATEGY 4:

Improve education and communication between care teams to effectively serve older adults.



GOAL 5:

Value family care partners and encourage self-directed care.

STRATEGY 1:

Support care partners by advocating for policy changes that recognize and compensate them.

STRATEGY 2:

Provide care partner resources that are racially equitable, affirming to LGBTQ+ individuals, and appropriate for all socioeconomic, literacy levels and languages used in Durham.





You gotta have four or five people in a house... Just to pay the rent that they're asking for. I feel that they should have some other accommodations or vouchers or some type support for mental health. You have a lot of families out here. Housing for them is terrible.

- Older Adults who Live in West End-Lakewood Neighborhoods



Photo © Discover Durham

- **GOAL 6:** Support aging adults and their families in preparing for decisions about goals of care, including end-of-life care.
- STRATEGY 1:** Provide community resources, including spaces, that facilitate goals of care and end-of-life care planning.
- STRATEGY 2:** Improve care teams' capacity to engage older adults and families about goals of care through policies and workforce development.
- STRATEGY 3:** Engage communities using models and behaviors that reflect cultural differences and values about goals of care.

Lead Agencies: AARP NC, Central Pines Regional Council - Area Agency on Aging, Diaper Bank of North Carolina, Duke University Health System, Durham Center for Senior Life, Durham County Community Paramedics, Durham County Office of Emergency Services, Durham County Department of Social Services, Durham County Department of Public Health, Durham Men's Health Council County Paramedics, Durham Technical Community College, El Centro Hispano, Jewish for Good, Local Direct Care Workforce Agencies, North Carolina Central University, North Carolina Community Health Worker Association, Partnership for a Healthy Durham, Project Access of Durham County, Senior Community Care of North Carolina - PACE, Senior PharmAssist

HOUSING

- **DOMAIN DEFINITION:** In an age-friendly Durham, aging adults have an abundance of affordable, safe, community-oriented, inclusive and accessible housing options and resources that support their aging in-place with dignity.

- **GOAL 1:** Older adults and older adults who have disabilities are equitably engaged and are co-creators of Durham housing policies.
- STRATEGY 1:** Ensure that aging adults are consulted about public projects before decisions and plans are finalized.
- STRATEGY 2:** Co-create community safety interventions with Durham community members who are most at-risk of experiencing harm: youth, older adults, individuals who are returning home after incarceration and older individuals with disabilities.
- **GOAL 2:** Mobilize to support safe, fair housing and to increase supply of and access to housing and supportive services for aging adults who have disabilities in Durham.
- STRATEGY 1:** Raise awareness about tenant and resident housing rights in Durham.
- STRATEGY 2:** Increase the supply of and access to permanent supportive housing and supportive services for older adults who have limited incomes, who are returning home after incarceration and/or who have disabilities.
- STRATEGY 3:** Make long-term investments in Durham's frontline public health, social services and direct care workers.

- **GOAL 3:** Use innovative policies and models to support aging adults who own their homes to age in-place and with dignity.
- STRATEGY 1:** Support existing and create new nonprofit organizations to provide newly constructed age-friendly and all-ability housing.
- STRATEGY 2:** Provide public-financing to implement models like Community Aging in Place Advancing Better Living for Elders (CAPABLE) that proactively support aging adults to remain in their homes and communities.
- STRATEGY 3:** Expand eligibility and simplify application process for Durham County's Low-Income Homeowners Relief and the North Carolina Elderly/ Disabled Exclusion Tax Relief Programs.
- STRATEGY 4:** Promote existing weatherization, home repairs, healthy homes and modification programs to homeowners.
- STRATEGY 5:** Increase access to types of financing options for families struggling to remain in their homes that do not increase debt.

- **GOAL 4:** Use innovative policies and models that support older adults who rent their homes to age-in place and with dignity.
- STRATEGY 1:** Identify and preserve low-income housing in Durham that have expiring affordability options.
- STRATEGY 2:** Provide public-financing to implement models like Community Aging in Place Advancing Better Living for Elders (CAPABLE) that proactively support aging adults to remain in their homes and communities.
- STRATEGY 3:** Create and sustain a rental assistance program jointly-supported by Durham City and County government.
- STRATEGY 4:** Promote existing weatherization, home repairs and modification programs to rental property owners and tenants.

Lead Agencies: Central Pines Regional Council, City of Durham Neighborhood Improvement Services, Coalition for Fair Housing and Transit, Durham CAN, Durham City and Durham County Government, Durham City-County Planning, Durham County Department of Social Services, Durham Housing Authority, Legal Aid of North Carolina, Partnership for a Healthy Durham - Health and Housing Committee

I like the fact that you have different types of housing styles, just all the different neighborhoods I can see. Yes. I like the fact that we have great institutions of higher education. We have several. I know that because they provide opportunities for you to continue lifelong learning. Yes. I like the fact that there are a lot of things going on in the arts and culture.

- Older Adults who Live in West End-Lakewood Neighborhoods



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OLDER ADULT HUNGER AND NUTRITION

» **DOMAIN DEFINITION:** An age-friendly Durham has a regionally appropriate food system actively addressing the unique circumstances and challenges that older adults face in meeting their nutritional needs.

» **GOAL 1:** Ensure reliable access to regionally appropriate food tailored to individual needs and preferences.

STRATEGY 1: Strengthen existing partnerships between diverse sectors of the local food system to distribute regionally appropriate food.

STRATEGY 2: Identify opportunities for new partnership between diverse sectors of the local food system including community members.

STRATEGY 3: Provide cooking demonstrations and nutrition education to promote regionally and culturally appropriate food and meal preparation.

» **GOAL 2:** Provide support for enrollment and retention of benefits to maximize financial resources.

STRATEGY 1: Support peer-to-peer networks to share enrollment and benefits information.

STRATEGY 2: Increase local investment to clear social service waitlists and to close gaps.

STRATEGY 3: Increase enrollment opportunities at community events.

» **GOAL 3:** Support existing congregate meal sites like the Durham Center for Senior Life (DCSL) in expanding their capacity.

STRATEGY 1: Increase organizational capacity to clear waitlists.

STRATEGY 2: Enhance transportation services to all congregate meal sites, including doorstep transportation to the main DCSL location.

STRATEGY 3: Increase the number of older adults accessing congregate meals at the Senior Center at Little River.

» **GOAL 4:** Increase opportunities for congregate meal participation.

STRATEGY 1: Identify potential new congregate meals sites.

STRATEGY 2: Provide sustainable funding and in-kind support for congregate meal infrastructure.

STRATEGY 3: Develop new transportation options that provide access to congregate meals.

» **GOAL 5:** Support transportation and delivery opportunities for older adults to secure food.

STRATEGY 1: Strengthen coordination and communication among organizations who deliver food in Durham.

STRATEGY 2: Co-create neighborhood-based food hubs with aging adults.

STRATEGY 3: Promote mutual aid and volunteerism to increase deliveries.

STRATEGY 4: Coordinate with out-of-the box producers and delivery services.

Lead Agencies: Benefits Enrollment Center, Black Farmers Market, Durham Center for Senior Life, Durham County Cooperative Extension, Durham County Department of Social Services, Durham Farmers Market, Durham Food Security Network, End Hunger Durham, Feed My Sheep, Golden Life Partnership, Jewish for Good, Meals on Wheels of Durham, Root Causes

OUTDOOR SPACES AND BUILDINGS

» **DOMAIN DEFINITION:** Outdoor space is available throughout Durham and meets the needs of all users. Green space and buildings are plentiful, affordable, accessible, well-maintained, beautiful, inviting and safe for all.

» **GOAL 1:** Assess and improve current outdoor spaces to maximize beauty, use and access for all ages.

STRATEGY 1: Survey Durham's outdoor spaces to better understand and prioritize where improvements are needed, with specific emphasis on hearing from community members who lack access to outdoor spaces that are well-maintained, beautiful, inviting and safe.

STRATEGY 2: Build additional sidewalks in Durham communities where there are none. Ensure existing sidewalks are well-maintained and in compliance with the Americans with Disabilities Act (ADA).

STRATEGY 3: Increase the number of pedestrian crossings and cycle paths that meet ADA accessibility and safety standards.

» **GOAL 2:** Collaborate with public and private partners to support inclusive and equitable access to outdoor spaces and buildings.

STRATEGY 1: Create underlying principles to define what "inclusive access" should look like for Durham.

STRATEGY 2: Prioritize where new inclusive and intergenerational outdoor spaces should be located by convening a working group of intended users.

STRATEGY 3: Improve outdoor safety by using aging, accessibility and racial equity as lenses for design.

STRATEGY 4: Increase the number of public restrooms that are clean, well-maintained and accessible.



"I've been here 30 years. I'm from New York. Back in 92, I couldn't even find a bagel. I don't like how Durham, outside of Durham, is portrayed in a negative light. I like the fact, Durham is the gritty underdog, middle class - everybody is in it together. And I hope that it doesn't change with the upscale million-dollar apartments."

- Family Caregiver
Listening Session
Participants



- **GOAL 3:** Publicize availability and encourage healthy use of outdoor spaces by older adults and people of all ages.
- **STRATEGY 1:** Provide opportunities for and promote enjoyable, healthy behaviors in Durham.
- **STRATEGY 2:** Provide both traditional and innovative means of monitoring and reporting maintenance issues, safety concerns and condition of outdoor spaces and public buildings.

Lead Agencies: Durham Parks and Recreation

RESPECT & INCLUSION

- **DOMAIN DEFINITION** In an age-friendly Durham, aging adults are celebrated and aging itself is not considered a barrier to engagement and inclusivity in all things.
- **GOAL 1:** Raise community awareness about the value of aging adults.
 - **STRATEGY 1:** Use Age-Friendly and Health in All Policies Frameworks for idea development, implementation and strategies in Durham.
 - **STRATEGY 2:** Promote positive media visibility of older adults.
 - **STRATEGY 3:** Promote and support existing inclusive, intergenerational opportunities.
- **GOAL 2:** Enhance the wellbeing of persons living with dementia through an inclusive, community-wide, multisector partnership of support and services.
 - **STRATEGY 1:** Promote community commitment to supporting dementia as a public health priority.
 - **STRATEGY 2:** Enhance dementia capability of multisector stakeholders providing service and support to persons living with dementia.
 - **STRATEGY 3:** Plan and deliver accessible training and information to community-wide, multisector partnership.

Lead Agencies: Dementia Inclusive Inc., Jewish for Good

SOCIAL PARTICIPATION

- **DOMAIN DEFINITION** In an age-friendly Durham, social participation is essential to improving individual and community health, well-being, and resources. Social participation means connecting people where they are and honors their right of self-determination.
- **GOAL 1:** Expand opportunities for individuals to connect around common interests while cultivating a sense of belonging.

- **STRATEGY 1:** Support expansion of existing programs that reach older adults who are home-bound or are at-risk of experiencing social isolation.
- **STRATEGY 2:** Promote existing social opportunities for older adults, including details about accessibility of facilities and transportation options.
- **STRATEGY 3:** Ensure social participation opportunities are inclusive and intergenerational.

Lead Agencies: Digital Durham, Durham Center for Senior Life, Durham County Public Library, Durham Cooperative Extension, Durham Men's Health Council, Durham Parks and Recreation, Jewish for Good, Partnership for a Healthy Durham, Triangle Nonprofit and Volunteer Leadership Center

TRANSPORTATION

- **DOMAIN DEFINITION:** Transportation is available throughout Durham. It is accessible, affordable, safe, equitable, respectful and comfortable for pedestrians, cyclists and drivers. Transportation meets the needs of all users.
- **GOAL 1:** Decrease barriers to affordable, safe, equitable and accessible transportation options.
 - **STRATEGY 1:** Assess the current transportation system by engaging older adults and older individuals who have disabilities.
 - **STRATEGY 2:** Promote current methods of receiving feedback from community members and develop innovative reporting mechanisms to ensure equitable accountability.
 - **STRATEGY 3:** Increase access to a variety of transportation options particularly for community members who have accessibility and financial barriers. This includes public transportation and ride share programs.
 - **STRATEGY 4:** Ensure there is equitable access to regional transportation.
 - **STRATEGY 5:** Increase transportation access to healthcare, social services and recreation opportunities by expanding innovative programs, such as the GoDurham Senior Shuttle.
- **GOAL 2:** Promote and provide accessible, clean, and safe public transportation.
 - **STRATEGY 1:** Ensure information on how to access transportation options in Durham is current and readily available, including paper and digital maps in all languages used in Durham.
 - **STRATEGY 2:** Support passengers who have accessibility needs. This includes safety, sensitivity and bus etiquette awareness for both passengers and drivers.
 - **STRATEGY 3:** Equitably distribute and evaluate transit infrastructure, such as bus shelters, benches and lighting to promote safety and comfort.

I think the issue is they probably are not paying attention to how many people are living in North Durham right now. And realizing that there's not enough variety when it comes to the shopping and things like that... It's when you start thinking about it. Especially when you get past that last grocery store, across from the Eno River. There is no other."
- Older Adults who live in North Durham Listening Session Participants





GOAL 3: Design a flexible transportation system that allows Durham's aging population to safely engage in walking and biking.

STRATEGY 1: Design infrastructure through the lens of aging, such as well-maintained sidewalks, protected bike lanes, crosswalks, shaded rest areas with benches, lighting, bike storage and improved readability/visibility of signs.

STRATEGY 2: Support walking and biking safety programming by providing information on how to walk and bike safely in Durham, including maps of low-stress areas and walking trails.



GOAL 4: Create a system that supports aging drivers and facilitates a transition from their personal vehicle to other transportation options.

STRATEGY 1: Make older adult driver education readily available and more affordable.

STRATEGY 2: Increase targeted education about different public transportation systems (local and regional) that are available and how older adults can access them.

STRATEGY 3: Provide education and resources that support family members and care partners or caregivers in having conversations about when an older adult should stop driving.



GOAL 5: Provide both traditional and innovative means of monitoring and reporting maintenance issues, safety concerns, and condition of Durham's transportation systems.

STRATEGY 1: Publicize current reporting mechanisms.

STRATEGY 2: Convene an intergenerational and racially equitable group to develop innovative reporting mechanisms.

Lead Agencies: AARP North Carolina, Bike Durham, City of Durham Transportation Department, Durham Center for Senior Life, End Hunger Durham, Golden Life Partnership, Partnership for a Healthy Durham, Vision Zero Coalition

*There are older adults who
are caregivers to their parents,
but they need respite.
They need rest and time
to recharge, refuel."*

- Older Adults who Speak Haitian Creole
Listening Session Participants



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GLOSSARY FOR TERMS USED IN THE 2025-2030 DURHAM COMPREHENSIVE AGING PLAN

The 2025-2030 livability groups defined some of the terms used in the Plan. The groups also adopted definitions used by other organizations that have missions similar to the 2025-2030 Durham Comprehensive Aging Plan. The sources for the adopted definitions can be found in the Reference section of the Plan.

Affordable Housing - Affordable housing means Durham households spending less than 30% of their gross monthly income on housing. The Housing Livability group acknowledges that affordability is personal. We will continually engage Durham community members to update this definition.

Community Crises - Encompass a wide set of events that negatively impact the health and well-being of Durham older adults. These events can happen periodically or be ongoing. Some examples of community crises that affect aging adults more than other groups are: extreme heat⁵⁹, social isolation,⁶⁰ public health pandemics,⁶¹ prescription, intentional and unintentional overdose.⁶²

Fair Housing - The Federal Fair Housing Act and the Fair Housing Ordinance of the City of Durham "prohibit housing discrimination on the basis of race, color, national origin, religion, sex (gender), handicap (disability), familial status, military status, protected hairstyles, sexual orientation and sexual identity. It is illegal to discriminate in the sale or rental of property, coerce or interfere in housing, or administer less favorable housing terms based on a tenant's membership in one or more of the above "protected" classes. It is also illegal to sexually harass a tenant or commit other acts of harassment that creates a hostile environment."⁶³

Goals of care (GOC) - Are the main intentions of an individual's healthcare. Healthcare teams should understand and honor an individual's values, health priorities and preferences about procedures, medication, therapies and preferred locations to receive healthcare.

Inclusion - Everyone having fair access to resources. Having the opportunity to access all resources, particularly for groups who are usually excluded. Everyone is embraced as a member of the community and benefits.

Inclusive Language - Language that avoids the use of certain expressions or words that might be considered to exclude particular groups of people.⁶⁴

Systemic/structural Inequities - "Institutionally created and reinforced privilege for some groups of people and a lack of privilege and access to resources by others (for example, in law, policies, business practices, access to education, health care, banking, and housing)."⁶⁵



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2025-2030 Durham Comprehensive Aging Plan Acknowledgements - Appendix

AGING WELL DURHAM - BOARD OF DIRECTORS 2023-2025

Elijah Bazemore – retired, Durham County Sheriff's Office

Janet Bettger – Health Services Researcher

Joyce Briggs - retired, Durham Housing Authority

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Joe Harvard – retired clergy, First Presbyterian Church

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Kim Shaw – Triangle Nonprofit & Volunteer Leadership Center

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Gina Upchurch – Senior PharmAssist

Sally Wilson – Project Access of Durham County

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Chris Abrons – Durham Farmers Market

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Sammetta Cutler – City of Durham Community Safety

Denise Ferrada – El Centro Hispano

Melissa Gordon-Pitts – Duke University Hospital

Denene Hinton – Alliance Health

Kenneth Johnson – Senior Tar Heel Legislators

Kimberly Monroe – Office of Community Health-Duke Health

Olivia Moreno – El Centro Hispano

Debbie Royster – Duke Well

Crystal Taylor – Get Happy and Black Farmers' Market

2025-2030 DURHAM COMPREHENSIVE AGING PLAN - LIVABILITY GROUP MEMBERS

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Jasmine Westbrooks - EatWell Exchange

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Crystal Taylor - Get Happy and Durham Black Farmers' Market

2025-2030 DURHAM COMPREHENSIVE AGING PLAN

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Joi Gardner - Plan Proofreader

Heather Dreps - Plan Graphic Designer

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