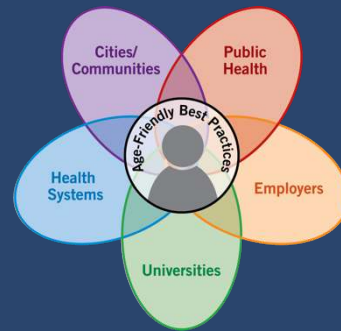# Building a Coordinated Age-Friendly Ecosystem: A Working Discussion

Meeting Summary

The John A. Hartford Foundation

AGE FRIENDLY FOUNDATION

ILC
CENTRO INTERNACIONAL DE LONGEVIDADE
BRASIL

Table of Contents

Convening Goals, Pre-Reading & Participants

On December 16, 2020, 40 recognized leaders who are working to advance age-friendly initiatives in public health, health systems, community, academia and employment gathered in the first of three virtual working sessions to discuss shared characteristics and measures in their work.

Goals of this meeting

All of our work exists together within an Age-Friendly Ecosystem, comprised of shared characteristics and measures. The goal of this event was to begin discussing those shared characteristics and to introduce measures of collective impact.

1. Make the substance behind the moniker "age-friendly" more clear to all stakeholders

2. Enhance the collective impact of the work we are all engaged in, and ultimately to improve quality of life for older adults

3. Collaborate on the development of a shared language and potentially, a shared set of harmonized measures

Pre-Reading

Prior to the convening, the organizers produced a packet of pre-reading that included the following:

1. A document (comprised of three tabs) to help analyze our shared characteristics and proposed outcome measures: Please click HERE to access this document

2. Moving Toward a Global Age-Friendly Ecosystem: Fulmer, T., Patel, P., Levy, N., Mate, K., Berman, A., Pelton, L., Beard, J., Kalache, A. and Auerbach, J. (2020), J Am Geriatr Soc, 68: 1936-1940. https://doi.org/10.1111/jgs.16675

3. Wetle, T.T. (2020), Age-Friendly Ecosystems: An Aspirational Goal. J Am Geriatr Soc, 68: 1929-1930. https://doi.org/10.1111/jgs.16676

A proposed definition of an Age-Friendly Ecosystem

An Age-Friendly Ecosystem is a comprehensive, collectively built, ever-expanding platform whose goal is to improve quality of life for older adults around the world through enhanced, collaborative impact. The Age-Friendly Ecosystem does not propose a hierarchy of any particular approach to improving quality of life for older adults. Rather, this platform acknowledges the unique strengths and contributions of existing approaches and promotes enhanced continuity and collective impact across settings.

Attendees

Participation was by invitation only. 25 organizations (Exhibit A) representing 6 countries were included.

Introductory Remarks

Moderator **Alice Bonner** set the stage by establishing that all of the meeting participants' work exists together within an Age-Friendly Ecosystem. We can define an ecosystem, she said, as a dynamic group of largely independent but interconnected players that creates products, programs and services that together constitute a coherent approach or solution to a challenge or opportunity. With this in mind, Alice proposed to the assembled group that our goal is to describe a broad and actionable strategy to meet the challenge of improving quality of life for older adults using a systems-based approach that reaches across initiatives to deliver collective impact.

Bonner asked attendees to share three words, via the zoom chat feature, that they think of when the term 'age friendly' is used.

This surfaced a number of adjectives. As you can see in this word cloud (left), frequently mentioned were the words "inclusive", "accessible", "equitable" and "respectful" (see Exhibit B for a full list).

In his opening remarks, co-host **Tim Driver** referenced the commonly held belief, often referenced by Dr. Alexandre Kalache, one of the early instigators of the age friendly cities program, that when developing age friendly initiatives, practitioners should follow the rule: "Nothing about us, without us". That is to say, older adults themselves must inform the policies and changes professionals are championing. As part of the preparation for the session, The Age Friendly Foundation surveyed 1,719 older adults. It asked the question: "In your mind, what would make a community age friendly?". It repeated the survey five more times, replacing the word "community" with "hospital", "nursing home", "doctor's office", "employer" and "university". It combined all the responses, which came from older adults across the US. The respondents had diverse backgrounds, were of an equally mixed gender and they spanned in age from the young old to the older old. In a word cloud generated from the surveys, one can see several words emerged as frequently used across the combined ecosystem of various initiatives. One of the most prominent words was "respect". This word, the planning group's research showed, is well embedded in the shared characteristics across everyone in the ecosystem's past work. One might think of respect as the inverse of ageism.

Co-host **Terry Fulmer** welcomed attendees and addressed the question: Why are we here today? First, she explained, it is to make sure that the substance behind the moniker "age-friendly" is absolutely clear to all stakeholders. We are all doing transformative work and we want the world to understand that. We also want to enhance the collective impact of the work we are all engaged in, and ultimately to improve quality of life for older adults. And we do that by coming together. And we're also here to open up new possibilities for all of us as we work together.

Co-host **Alexandre Kalache** provided background on "how we got here", through the Vancouver Protocol and its eight dimensions of an age friendly city, and he looked ahead. Lasell Village President and Age Friendly Foundation Director **Anne Doyle** summarized Alex's opening remarks after the meeting: "Alex put a spotlight on multiple important points, including: combatting ageism, the need to have healthy and ACTIVE aging, focusing on the diversity of our population across all dimensions, and ensuring that we think about the age friendly ecosystem across the global and economic spectrum." He highlighted the need, at the time the Protocol was being developed, to address the juxtaposition of two prevailing trends: aging and urbanization.

Terrie "Fox" Wetle has long recognized the need for more age friendly communities. She cautioned that "although the concept of age friendly communities and institutions has been promulgated in the US and internationally, implementation continues to be more aspirational than a coordinated reality". She continued that "despite pockets of interest…, these implementations have been limited and siloed". Challenges to the expansion of the age friendly movement have existed, such as 1) identifying local champions, 2) developing strong partnerships across government, community leaders and the private sector, 3) considering the diverse needs across groups of older adults. Finally, she says that, historically, organizations such as the CDC, departments of health at all levels, and even schools of public health have lacked a focus on the needs of older adults. Wetle says COVID-19 has highlighted the urgency of work in support of older adults. In a call to action, she said "difficult times do provide opportunities". Fox says there may be a chance to seize upon this moment, and redouble efforts to advocate for age friendly institutions and communities, turning aspiration into action in support of an age friendly ecosystem.

Wetle's remarks generated a stream of "chatted" responses. Among them:

- Mark Kissinger: "There needs to be fiscal incentives for local agencies to work with older adults.

- Megan Wolfe: "TFAH and CDC are also working with the Public Health Accreditation Board to consider healthy aging recommendations--this will help to incentivize public health to expand these roles…. CDC has now designated a Healthy Aging Branch--still has limited capacity and discrete funding streams, but TFAH will be advocating for expanded roles and greater funding."

- Nicole Brandt: "As an academician and practitioner, I think we have fantastic opportunities to further leverage alignment with training and public health work such as the work with HRSA. Very excited about this discussion." Moderator Bonner responded: "Thank you, Nicki. That highlights a major challenge, which is work across agencies and organizations. So how does HRSA work along with CDC, public health agencies in the states? Getting out of our silos is critical to building forward momentum.

Proposed Framework of Shared Understanding

The evolution of an Age Friendly Ecosystem demands shared understandings if it is to become an actionable roadmap for practitioners. To follow the introductory segments of the event, **Leslie Pelton** and **Kim Dash** led a session outlining a proposed framework of shared characteristics of the Age Friendly Ecosystem. Pelton, Senior Director at the Institute of Healthcare (IHI) and a nationally recognized leader in the Age-Friendly Health Systems movement, prefaced her remarks by reinforcing that the working session is a starting point. There is more to come in improving the health and health care of older adults across the US and the work of building the framework was meant to invite collaboration across silos.

Dash explained that she, along with Age Friendly Foundation Director of Special Projects **Jody Shue** and other members of the planning group, developed the language and characteristics framework by conducting a crosswalk analysis of age friendly initiatives across a variety of the settings initiated and/or practiced by meeting attendees. It had been explained by moderator Bonner and Terry Fulmer that in this meeting, the focus would be on language, and that we will introduce the measures for discussion in a second meeting.

Dash began by saying the planning group opted to be guided by an underlying theory to provide a foundation. It chose the social ecological model because it acknowledges the connections and interplay between older adults and their environments. The five-level model helps to understand and organize the range of factors that affect the health and well-being of older adults and so is particularly well suited for this work.

McLeroy, K. R., Bibeau, D., Steckler, A., & Glanz, K. (1988). An ecological perspective on health promotion programs. *Health Education Quarterly, 15*(4), 351–377.

Participant Gretchen Alkema suggested a friendly amendment to the social ecological model, to consider how the dual tensions of standardization and personalization might shape the model.

Chuck Pu of Mass General Brigham commented "Very powerful framework which helps to organize these concepts".

Dash said that guiding the development of the pre-work was the assumption that we should be building upon what has already been done. "We knew it was important to recognize the intersections between these frameworks", as shown in the ecosystem diagram. She explained the crosswalk analysis which included a side-by-side examination of:
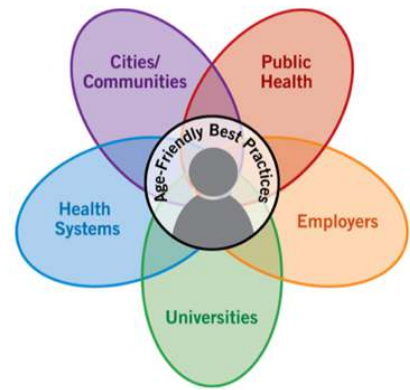
Fulmer, et al. Moving Toward a Global Age-Friendly Ecosystem, *Journal of the American Geriatrics Society*, July 2020

- WHO's work on age-friendly cities

- AARP's work on livable communities

- IHI's 4Ms – Mentation, Mattering, Mobility, and Medication

- Trust for American's Health 5Cs - Connecting and Convening, Coordinating, Collecting and Disseminating Data, Communicating, and Complementing and Supplementing

- The Age-Friendly Foundation's Certified Age Friendly Employers (CAFÉ) initiative

- The Age Friendly University Global Network's 10 principles of an age-friendly university

Dash explained that when looking across the different types of practices supported or encouraged by these frameworks for recurrent themes, certain characteristics surfaced: (i) Responsiveness to the needs and voiced concerns of older adults, (ii) Provision of social and health supports to older adults, (iii) Promotion of equitable access to opportunity and services, (iv) Encouragement of social engagement and participation in work, civic, and social activities, (v) and, Focus on increasing mobility.
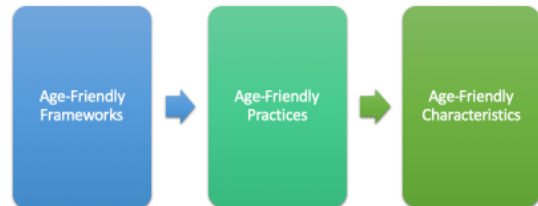
The result of all this work was visualized in the crosswalk analysis document: the proposed "Shared Characteristics of Age-Friendly Frameworks" (Exhibit C). Attendees had seen this information in the pre-work packet sent before this event. In this working session, a key activity was soliciting the reaction of attendees:

- Are these characteristics the right ones?

- What was missed?

- Which offer the best opportunity for collaboration?

Shared Characteristics of Age-Friendly Frameworks

	RESPONSIVE	SUPPORTIVE	EQUITABLE	ENGAGEMENT FOCUSED	MOVEMENT ORIENTED
Public Health Systems (5Cs)	Collecting and disseminating data to identify priorities for and programming needs of older adults	Coordinating existing supports and services (emergency preparedness); Communicating to increase awareness of health-related services and programs	Collecting and disseminating data to identify and address inequities by age and among subgroups of older adults	Connecting and convening multiple sectors/professions, fostering collaboration, coordinating existing supports and services	Complementing and supplementing existing transportation and environmental supports and services
Health Systems (4Ms)	Knowing and aligning care with "what matters" to the older adult	Using medication that does not interfere with what matters, mentation or mobility; Prevent, identify, treat, and manage delirium across settings of care	Ensuring older adults of different incomes, races and ethnicities and sexual orientation have equitable access to care	Engaging older adults (and caregivers) in shared decision making about care	Ensuring that older adults can move safely to maintain function and do what matters
Communities/ Cities/States (8 Domains)	Implementing inititatives that address the concerns of the older adults in community	Focusing policies and practices on health services and community supports tailored for older adults	Enacting policies that promote equal access to housing, outdoor spaces & buildings, communication and information as well as promote social inclusion	Implementing programs that promote social participation, civic participation and employment	Developing and implementing transportation solutions that promote mobility and access to critical services and cultural activities
Employers (Best Practices)	Developing responsive work schedules and flexible arrangements with input from older employees	Showcasing general commitment and workforce policies to support older adults	Providing job content and process accomodations; Offering training and professional development opportunities	Demonstrating a commitment to workforce planning and composition, employee retention, and candidate recruiting	Providing accomodations that promote workforce participation and mobility in the work environment
Universities/ Education Systems (Principles)	Ensuring that research agenda is informed by the needs of an aging society and promoting public discourse; Recognizing diverse educational needs of older adults	Enhancing access for older adults to university health and wellness programs	Widening access to online educational opportunities; Increasing student understanding of the longevity dividend and the increasing complexity and richness that aging brings to our society; Promoting personal and career development	Promote intergenerational learning; Engage actively with the university's own retired community; Ensure regular dialogue with organizations representing the interests of the aging population	Enhancing access for older adults to university cultural and arts resources and events

Meeting attendees "chatted" that there are a number of legislative efforts to advance age friendly initiatives:

- Melissa Batchelor: There are two bills are in the US Congress now (and hopefully reintroduced early next year) focus on Building Age-Friendly Communities (H.R.4827/ S.1536). And S.3057 Modernization of the Older Americans Act also promotes age-friendly communities (Sec.121).

- Megan Wolfe: Yes! And legislation to create a broader Heathy Aging Program at CDC with funding for all states. This will be introduced again in the next Congress.

- John Auerbach: Congress is considering creating an age-friendly line item at CDC that can make sure all state and local health depts. have healthy aging units and that CDC has its own expertise.

- John Beard: One thing that is worth considering is that on Monday, the United Nations General Assembly adopted 2021-2030 as the Decade of Healthy Ageing. Two of the 4 themes are building age-friendly environments and addressing ageism, both obviously related to this work. This gives a global political mandate for action.

An Organic Conversation About The "Bottom Up"

Meeting participants began volunteering "chat" comments about whether the age friendly movement is (or should be) driven from the top down or bottom up:

- Melissa Batchelor: "How would you know you were in an age-friendly community? How would you recognize it?"

- Wendy Huang: "I think Melissa's question is so valuable and definitely a question of mine as I'm learning more about the age-friendly movement."

- Terry Fulmer: "Is bottom up really starter gate?"

- John Beard commented: "Yes bottom up, but also needs the top on board if it is to work - top meets bottom!"

- Melissa Batchelor: "@Terry, I think a movement can start at top or bottom (or middle) - the power of the idea can be driven by many sectors"

- Alex Kalache: "all health professionals, not only the 'specialists' should be properly trained on ageing. by and large we are training professionals for the XX century and they will face an ever increasingly aged world without the appropriate skills and knowledge. (same applies to urban planners, lawyers, media...etc. etc)

- Alice Bonner: "Great points, Alex. You are right on about everyone - not just geriatric professionals - knowing about Age-Friendly Ecosystems."

- Melissa Batchelor: "@Terry, I think a movement can start at top or bottom (or middle) - the power of the idea can be driven by many sectors"

Attendee Virtual Polling & Breakout Rooms Discussions

After the presentation of proposed framework of shared understandings, attendees were asked to engage in polling and small group breakout room discussions to specifically engage their input regarding opportunities for collective action and impact.

Poll Question #1

The first virtual poll asked attendees to answer the following:
Listed below are the characteristics we have identified as being essential to an age-friendly ecosystem and recognizable across age friendly initiatives. Which do you think presents the greatest opportunity for collective action and impact?

- (13%)   Responsive

- (0%)   Supportive

- (31%)   Equitable

- (34%)   Engagement-Focused

- (22%)   Movement-Oriented

Attendees (who had been pre-assigned to one of four moderated breakout rooms) were asked to reflect on the following questions in small group breakout room discussion format:

- Are these the best characteristics to describe an age-friendly ecosystem? Why or why not?

- Tell us how you think the characteristics work across initiatives (your own work and that of others)

- Are there characteristics that we are missing?

Breakout Room Report-Outs

At the end of the 25-minute Breakout Room discussions, attendees rejoined the full session and heard summaries of small group discussions from Breakout Room moderators.

Rani Snyder was the first Facilitator to report breakout findings. She began by saying her group spoke about active and not just passive characteristics. Participants strongly expressed the need for equity and diversity, including "age inclusivity". Young people should be encouraged to think about their future selves. Community engagement was considered critical, meaning better communications to draw more people in (to the age friendly ecosystem?).

Tim Driver stated that the discussion in his group began with a debate about whether actions taken should be person-centered or community-centered. It then shifted to the word "movement". Participants wanted both definitions of the word movement to be applied in our work, meaning 1) "mobility" and "transportation", and also 2) that this entire ecosystem is really encouraging a "social movement", a cultural or paradigm shift in how society thinks about aging. There was a lengthy discussion about the need for the general population to become more familiar with this term and its meaning so that they're demanding it from their leaders.

Leslie Pelton echoed that her group wanted to interpret the word movement as a social movement. Participants also focused on the need for equity and inclusivity. Age stratification also featured prominently in her group's discussion. Finally, she shared her group's desire to include "joy" as an essential ingredient in the ecosystem, and related to that, a "culture of caring". This drew several comments:

- Anne Doyle: Joy and culture of caring are what has helped to keep the Lasell Village and Lasell University campus healthy throughout this pandemic — we care about each other and we seek joy in the small pleasures, even during this tough time.

- Terry: "love culture of caring"

- Jody Shue: "I love that: Joy!"

- Alexandre Kalache: Developing a culture of care throughout the life course to include to be age friendly at the end of life, including supporting and care in relation to end of life, grief and bereavement"

- Leslie Pelton: "@Anne Doyle - Thank you for sharing the Culture of Caring from Lasell"

- Alice Bonner: "Anne - those are terrific comments about Lasell- so important and foundational."

Kim Dash reported that there was a discussion about "supportive". It was concluded that supportive is not an appropriate word because of the power imbalance that the word conjures up. Once again, she reported, there was confusion about whether "movement" meant "social movement". There was a discussion about the fact that the word "respect" was missing from the shared characteristics matrix, and that it should be included since it was raised so prominently by the older adults themselves. It was suggested that what older adults raised could be blended with the existing frameworks. Finally, it was expressed that there is a danger of missing rural populations with the ecosystem's work.

Poll Question #2

The second virtual poll asked attendees to answer the following:
Which of the following actions do you think would have the greatest impact in addressing key barriers to this work (i.e. to the work of developing an age friendly ecosystem?)

- (37%) Identifying where we have the most in common to overcome siloed approaches to our work

- (15%) Overcoming fears that an age-friendly ecosystem will add a complicated or additional layer to your work

- (7%) Identifying foundation and government support to address payment barriers to achieving the work

- (0%) Encouraging additional major leadership from groups such as the WHO, AARP, NASEM or others to tackle policy barriers

- (41%) Demonstrating value, cost savings and efficiency to overcome inertia

Attendees (who were assigned to the same breakout room grouping) were asked to reflect on the following questions in small group breakout room discussion format:

- Which of the 5 is, in your opinion, the highest priority to tackle?

- Is there a barrier that you did you not see as an option in the poll?

- What is missing/what did we fail to adequately address?

Breakout Room Report-Outs

At the end of the 25-minute Breakout Room discussions, attendees rejoined the full session and heard summaries of small group discussions from Breakout Room moderators.

Kim Dash reported that her group felt the first barrier was the most important to address first. Once we identify what we have most in common, it was felt, the other barriers will fall. Having said that, some felt #1 and #3 are interconnected, meaning that both need to work together in order for there to be the greatest impact. In terms of what was missing, it was pointed out that populations at the margins did not have these types of movements pay off for them, so that needs to be acknowledged.

Leslie Pelton conveyed that her group felt that we must convey we're building on something, and we need to be clear about the message. We need an "elevator speech" to define what this is, and then bring in others and grow the circle. We are working against ageism, and it's a moral imperative to battle against that. Inertia is a barrier.

Through the course of her group's conversation, Rani Snyder said they felt we need #s 1, 2, 3, and 4 in place in order to get to #5. People felt it's heartening to know so many others are at work on this ecosystem. It feels good to know they're not alone in their silo. Lack of data is a major barrier. They spoke about the need for diversity, diversity, diversity. They also spoke about moving from the "transactional" to the "transformational", evoking the deeper meaning behind the work. This is a systems issue and a communications issue, Snyder said, understanding that if you're changing the systems, you're making a bigger difference in the community. That led to the communications issue. How do you make it so that everyone knows about this, such as in the Board room of a local bank. Fox Wetle chatted in, in response: "Those of us in Public Health believe that the most effective approach is multifaceted... we need to do them all simultaneously. They will support each other." Wetle felt it was a false choice to choose among the five. You need to do them all, much as was done in the smoking cessation campaigns.

Tim Driver reported on his group's growing energy and excitement at the prospect of building a movement. He said it was discussed in his group that "value" creation is not just about dollars but also about value in terms of the quality of older adults' lives. In terms of what was missing, the topic of 'sustainability' was raised. This reminded Tim of Lindsay Goldman's comment in the first breakout where she said the age friendly movement's momentum dropped off precipitously from one NYC mayoral administration to another. Therefore, there needs to be more than just governments spurring the movement's growth. As this is a paradigm shift, there was discussion about how to fully amplify that message.

Graphic Recording

Graphic Recorder Christopher Fuller revealed his four illustrations of the day's discussions, along with some of his commentary "as an outsider".

Illustration #1

What stood out in the working session was the need for an integrated approach, while at the same time there must be the ability for people to continue to work independently. "Nothing about us without us" was another key theme.

Illustration #2

The challenges stood out, one of them being urbanization. How do we make this ecosystem work for all ages, for everybody. And we cannot forget about our rural communities. Real issues with access. Re Fox Wetle, the need is great for identifying local champions.
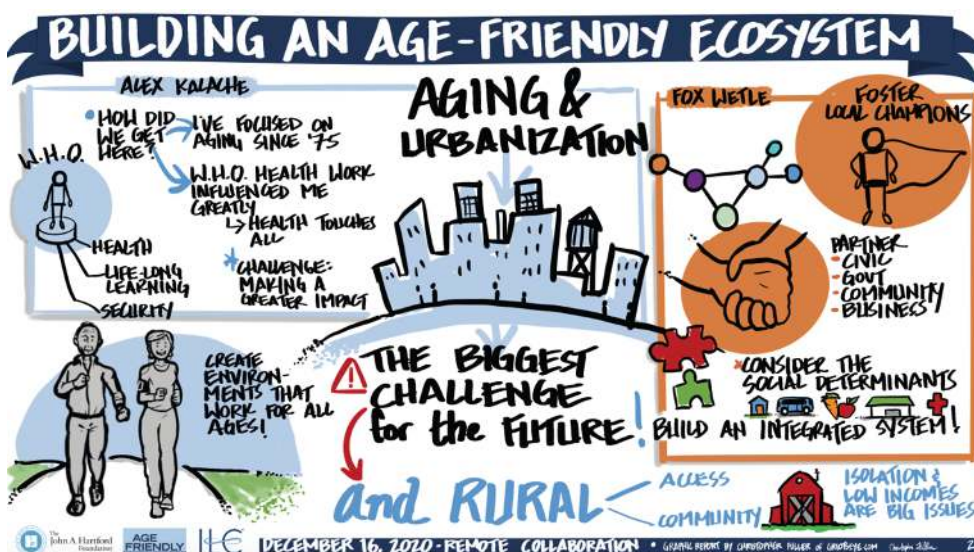
Illustration #3

One of the things stood out is that COVID has made us more aware than ever of the need for better service for older adults. Inequality is a big problem. There is a huge gap. But in closing on a more upbeat note, we need to better combine joy and work.
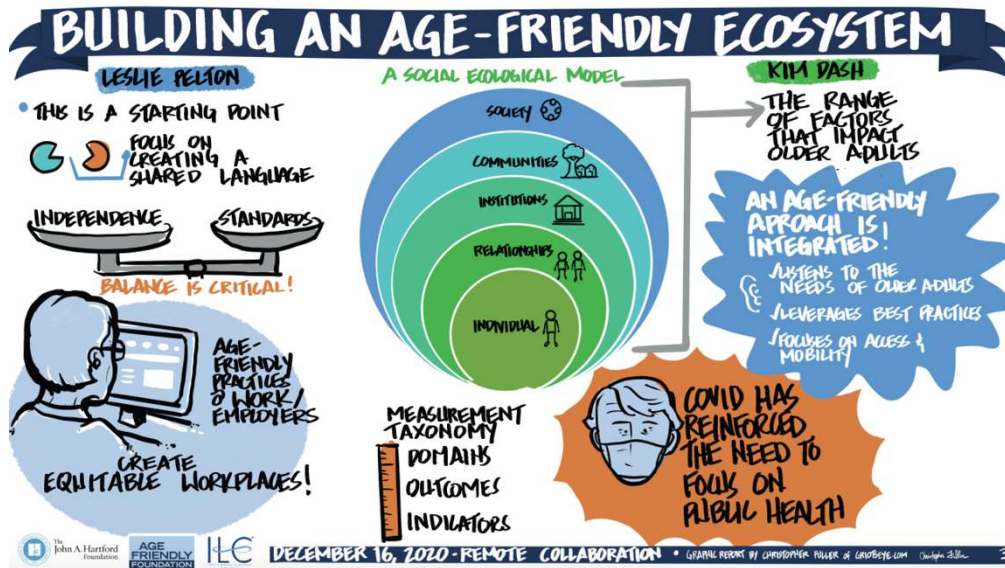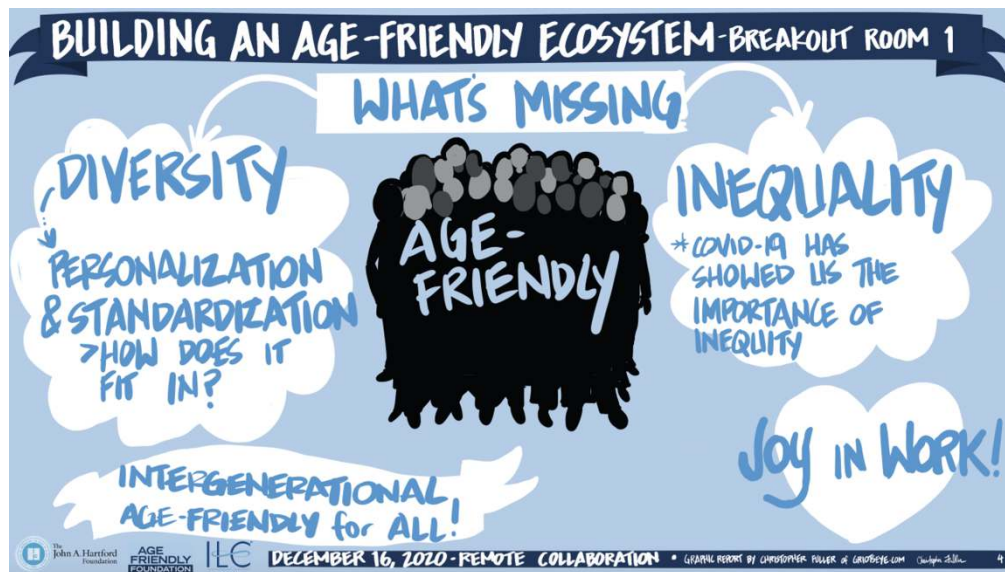

Illustration #4

Session Concludes

Bonner began to close the meeting with some call-outs on what's actionable from all this. She began by asking John Beard to tell the group more about the newly announced United Nations (and WHO) initiative called the Decade of Healthy Aging. Beard said that within that decade (2021-2030) initiative, there for four key themes, two of which are directly relevant to what we're talking about today: 1) combatting ageism, re-thinking aging and how we think about older people, and 2) building age friendly environments (and you could think about that was age friendly ecosystems). This announcement gives a global, political mandate for action. The specific actions within all of these boxes have not been clearly defined so there's a lot of opportunity to influence how this initiative might progress. On the one hand, this gives a legitimacy to what we're talking about. On the other, there's a part of this initiative, a thing called "the platform". The platform will help people connect whether it's an academic sense or it's older people themselves. That creates an opportunity for this community to link more broadly to countries around the world. That's number 1, and then there is the National Academy of Medicine, which has established a commission on healthy longevity. Within that commission, there is also a lot of focus on the environment. These are things that have just happened or are about to happen and they'd both be great things to tap into.

Bonner then called on Erin and Robyn from Rush, asking them to describe working across a large system to bring these elements together. There is a grassroots nature to the work. You tell people, and they tell someone else, and so on and so on. Robyn said "it's all in the language". We called it an age friendly health system from the beginning. She continued, saying it's indeed about the grassroots efforts, but it's also about working with leadership. You have to work it on all fronts.

Nora Super from the Milken Institute said it's great to have everyone talking, and using language around which there is a consensus.

Shekinah Fashaw said the social ecological model is a great one to use because it invites us to consider structural inequalities in this work more purposefully. She said sometimes movements leave behind some communities. This movement has real potential, she observed, to avoid color-blindness, and instead to be color and race conscious in the effort not to lave communities behind.

Donna Walsh echoed sentiments from Megan Wolfe: "the more we learn from each other, the more we can serve. In Seminole county (Florida), this has been a couple years of discovery for us. This

was not an area we'd focused on in this past, but we're seeing this [age friendly] in all aspects of public health and we're redefining public health. I have seen a shift and it's been a welcomed shift.

Jody Shue commented: "Thanks for sharing this, Donna. I love this program you are referencing and it's a great example of collaboration at its best across settings".

Leslie Pelton commented: "Leslie Pelton: @Alice - Re keeping equity alive in this work...Once we have measures and move into further testing of the Age-Friendly ecosystem framework, we have to ensure that we stratify our data by race/ethnicity/age so we are truly learning which changes impact which pops."

Bonner closed by saying the goal of the day was to start a dialogue, and "boy did we start a dialogue".

Terry Fulmer wrapped up the day by giving words of appreciation to all participants, organizers and to graphic artist Christopher Fuller. She said we'd convene again in the new year, and that we'd be in touch in the first quarter.

APPENDIX

EXHIBIT A
Organizations Represented at Working Session

- AARP
- Administration for Community Living (ACL)
- Age Friendly Foundation
- Brown University School of Public Health
- Dublin City University
- Education Development Corporation
- George Washington University School of Nursing
- Institute for Healthcare Improvement (IHI)
- International Federation on Ageing
- International Longevity Centre-Brazil
- John A. Hartford Foundation
- Lasell Village
- Mass General Brigham
- Milken Institute
- Michigan Health Endowment Fund
- New York Academy of Medicine (NYAM)
- Florida Department of Health (Seminole County)
- New Jersey Department of Health
- Rush University Medical Center
- The SCAN Foundation
- Trust for America's Health
- University of Maryland School of Pharmacy
- University of New South Wales (UNSW)
- University of Pennsylvania School of Nursing
- World Health Organization (WHO)

Words that come to mind when you [meeting participants] hear "age friendly"
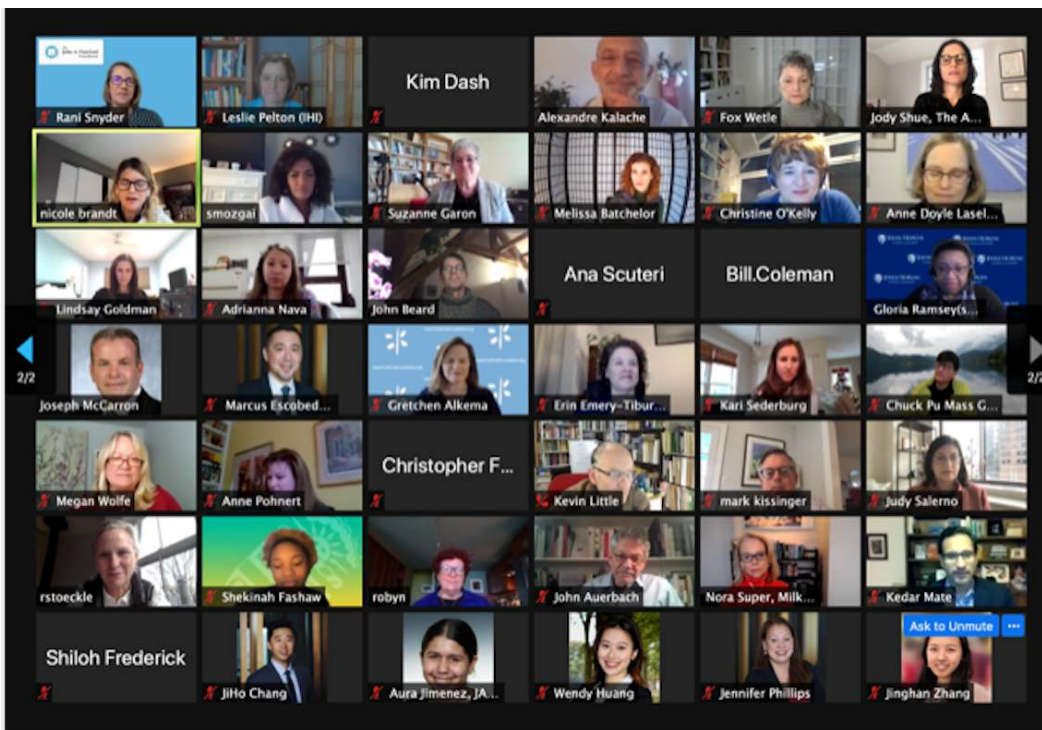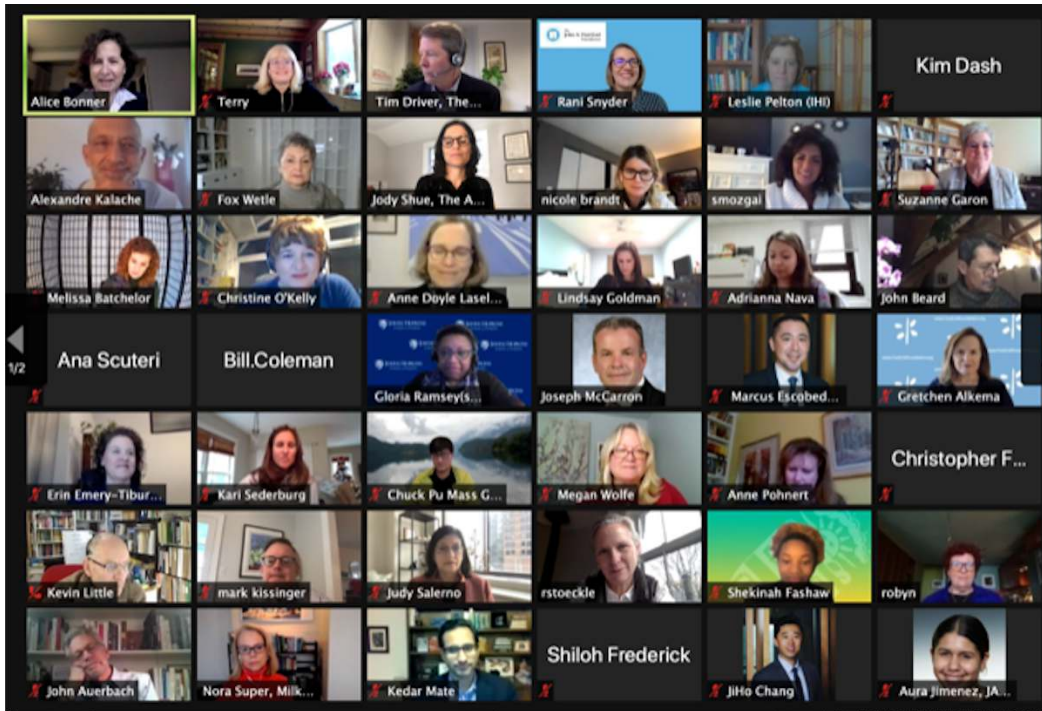
- Jody Shue: welcoming, inclusive, fair

- Robyn: equity

- Aura Jimenez, JAHF: Unity, inclusive, respectful

- Kevin Little: care, health, what matters

- Terry Fulmer: inclusive, no harm, reliable

- Adrianna Nava: Safe, Culturally-sensitive, high quality

- Megan Wolfe: health, lifecourse, equity

- Judy Salerno: Inclusive, empowering, equitable

- Rstoeckle: Empathic, comprehensive, ambitioous

- Wendy Huang: Community, intergenerational, high-quality

- Shekinah Fashaw: Inclusive, equitable, accessible

- Nora Super, Milken Institute: inclusive

- Erin Emery-Tiburcio: What Matters, quality, health

- Lindsay Goldman: walkability, inclusive, intergenerational

- Melissa Batchelor: Intergenerational, inclusive, accessible

- John Auerbach: independent, equity, publichealth

- Fox Wetle: Accessible, supportive, recognizing elder perspectives

- Nicole Brandt: Collaboration, community, access

- Gloria Ramsey: barrier free, independence, equitable

- Leslie Pelton: What Matters. connected,

- Smozgai: equity health quality

- Bill.Coleman: welcoming, even

- Kedar Mate: equity, better, person-centered

- Rani Snyder: Accessible, respectful, inclusive

- Chuck Pu Mass General Brigham: holistic, complex, anti-ageist

- Christine O'Kelly: Participation, inclusive, all ages

EXHIBIT C
Shared Characteristics of Age-Friendly Frameworks (V1)

	RESPONSIVE	SUPPORTIVE	EQUITABLE	ENGAGEMENT FOCUSED	MOVEMENT ORIENTED
Public Health Systems (5Cs)	Collecting and disseminationg data to identify priorities for and programming needs of older adults	Coordinating existing supports and services (emergency preparedness); Communicating to increase awareness of health-related services and programs	Collecting and disseminating data to identify and address inequities by age and among subgroups of older adults	Connecting and convening multiple sectors/professions, fostering collaboration, coordinating existing supports and services	Complementing and supplementing existing transportation and environmental supports and services
Health Systems (4Ms)	Knowing and aligning care with "what matters" to the older adult	Using medication that does not interfere with what matters, mentation or mobility; Prevent, identify, treat, and manage delirium across settings of care	Ensuring older adults of different incomes, races and ethnicities and sexual orientation have equitable access to care	Engaging older adults (and caregivers) in shared decision making about care	Ensuring that older adults can move safely to maintain function and do what matters
Communities/ Cities/States (8 Domains)	Implementing inititatives that address the concerns of the older adults in community	Focusing policies and practices on health services and community supports tailored for older adults	Enacting policies that promote equal access to housing, outdoor spaces & buildings, communication and information as well as promote social inclusion	Implementing programs that promote social participation, civic participation and employment	Developing and implementing transportation solutions that promote mobility and access to critical services and cultural activities
Employers (Best Practices)	Developing responsive work schedules and flexible arrangements with input from older employees	Showcasing general commitment and workforce policies to support older adults	Providing job content and process accomodations; Offering training and professional development opportunities	Demonstrating a commitment to workforce planning and composition, employee retention, and candidate recruiting	Providing accomodations that promote workforce participation and mobility in the work environment
Universities/ Education Systems (Principles)	Ensuring that research agenda is informed by the needs of an aging society and promoting public discourse; Recognizing diverse educational needs of older adults	Enhancing access for older adults to university health and wellness programs	Widening access to online educational opportunities; Increasing student understanding of the longevity dividend and the increasing complexity and richness that aging brings to our society; Promoting personal and career development	Promote intergenerational learning; Engage actively with the university's own retired community; Ensure regular dialogue with organizations representing the interests of the aging population	Enhancing access for older adults to university cultural and arts resources and events

EXHIBIT D
An Engaged Group of Meeting Participants,
Most of Whom Stayed Until the End

Event Agenda and Information

Date, Time, & Location	December 16, 2020 12:45PM EST Speakers/Planning Committee/Event Staff: log into Zoom 1:00PM EST Event Starts 4:00 pm EST Event Ends
Event Sponsors	Co-Sponsors: The Age Friendly Foundation The John A. Hartford Foundation The international Centre for Longevity Moderator: Alice Bonner
Event Planning Committee	Alice Bonner, Kim Dash, Tim Driver, Terry Fulmer, Aura Jimenez, Leslie Pelton, Rani Snyder, Jody Shue
Who is invited?	Recognized leaders who are working to advance age-friendly initiatives in public health, health systems, community, academia and employment.
Breakout Room Moderators	Tim Driver Kim Dash Leslie Pelton Rani Snyder
Event Objective/Goals	Our purpose is to begin a dialogue about what we may do across initiatives to build momentum for Age Friendly and the Age-Friendly Ecosystem All of our work exists together within an Age-Friendly Ecosystem, and is comprised of shared characteristics and measures. The goal of this event is to begin discussing those shared characteristics and to introduce measures of collective impact.