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# Adopting the Lifelong Communities Initiative in the Atlanta Metropolitan Area

Corneil Montgomery  
*Walden University*

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# Walden University

College of Social and Behavioral Sciences

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Corneil Montgomery

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Review Committee

Dr. Ross Alexander, Committee Chairperson,  
Public Policy and Administration Faculty

Dr. Mark Stallo, Committee Member,  
Public Policy and Administration Faculty

Dr. Tanya Settles, University Reviewer,  
Public Policy and Administration Faculty

Chief Academic Officer  
Eric Riedel, Ph.D.

Walden University  
2016

Abstract

Adopting the Lifelong Communities Initiative in the Atlanta Metropolitan Area

by

Corneil Montgomery

MA, Walden University, 2011

BS, University of Phoenix, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

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## Abstract

The older adult population has been growing since 1950. The quality of life of older Atlanta citizens may be reduced if adopted Lifelong Communities (LLC) initiative principles are executed poorly or not at all. The purpose of this case study was to describe and explore the experiences of local government officials in Atlanta, Georgia who have adopted LLC initiatives. Research questions focused on local government officials' experiences adopting the LLC initiative, their use of the LLC principles, as well as the benefits and challenges encountered when integrating principles within organizations and communities to ensure quality of life for persons served. The theoretical framework for this study was based on Lawton and Nahemow's ecology of aging and ecological change model. Data were collected through face-to-face interviews using semi-structured interview questions from 6 government officials in the Atlanta region. Additional data included relevant publicly available documents related to LLC initiatives. All data were inductively coded and then analyzed using content analysis. The findings of this study indicated that strategic planning and forming collaborative relationships with existing organizations and influential persons were key components of the LLC initiative process. According to LLC leaders, the initiative was beneficial for promoting housing and transportation options and enhancing quality of life. Furthermore, the findings of this study were consistent with the principles of the ecological change model. This study has implications for positive social change by providing information to local government officials and other stakeholders about capacity building, strategic planning, and the needs of the elderly that may lead to improving the implementation of LLCs.

The Process: Adopting the Lifelong Communities Initiative

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## Dedication

I would like to dedicate this dissertation to my mother, Joann Montgomery-Gibson, who inspires me to soar beyond the stars. I am grateful for her prayers and support, and not allowing me to give up. As a result, I am proud to be the first doctor in my family.

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## Chapter 1: Introduction to the Study

### **Introduction**

The older adult population has been growing since 1950 and is projected to represent a third of the U.S. population by 2050 (Bookman, 2008). This growth rate creates demands on housing, transportation, health care, support and community-based services, and other needs associated with older adults. In addition, policy makers, caregivers, families, and other individuals and organizations with an interest in older adults' wellbeing are impacted (Kampfe, Wadsworth, Mamboleo, & Schonbrun, 2008). Older adults prefer not to compromise their home and community of origin, but that option has become challenged. Scharlach (2012) argued that communities throughout the United States are not equipped to meet the growing needs of older adults, and their current physical infrastructure is not appropriate. Over one third of U.S. cities and towns have implemented a plan of action in response to this developing dilemma around a growing aging population (Scharlach, 2012). Cities and towns throughout the United States have begun identifying challenges presented by growing and aging population regions and communities to understand why implemented planning initiatives and frameworks exist. Communities and cities in the Atlanta region have been involved in implementing the LLC Initiative to address the needs of older adults.

The Atlanta region, made up of 10 counties and 68 cities or towns, is one of the leaders of elderly growth rate in the United States, and they are not prepared to respond their needs (Lawler & Berger, 2009). As many as 83% of Atlanta's older adults prefer to age in place and not relocate to senior living or retirements homes (Keyes, Rader, & Berger, 2011). Long-term care services, housing and transportation options, and built

environment are some of the few concerns in meeting the demands of older adults in the Atlanta region (Lawler & Berger, 2009). In response, priorities based on community development, funding sources, professional development, and marketing strategies evolved into LLC, which is discussed more in Chapter 2.

Researchers have discussed different types of aging initiatives and how they are implemented, but there is not much literature on how the LLC initiative and its adopted principles are implemented. In this study, I examined how local government officials use the principles to meet the needs of their older residents. Throughout Chapter 1, I expound on the research problem, state the research questions, discuss how the study was conducted, and state why this research was necessary and its implications.

### **Background of the Problem**

The U.S. older adult population, people aged 65 and older, has grown significantly over the last few decades. The average growth rate for older U.S. citizens was about 0.75% during the years 1900 through 2010 (Sade, 2012). In 2011, there were 41,394,141 older persons in the United States which illustrated an 18.30% increase since the year 2000 (Administration on Aging, 2012). Researchers project the years 2030 through 2050 as the greatest U.S. population increase among older adults, reaching about 70 million (Nelson, 2009; Scharlach, 2011; Wheeler & Giunta, 2009). The generation associated mostly with this population growth is the Baby Boomers, individuals born between 1946 through 1964, which started reaching age 65 in 2010 (Scharlach, 2011). Members of the World War II generation, who are not involved in this growth, are members of the U.S. older adult population (Frey, 2010). The needs and preferences of boomers differ from the World War II generation, which has shifted the priorities of the

government sector, aging organizations, housing and transportation agencies, and others with an interest in older adults.

While older population growth, which is represented mostly by the Baby Boomers is increasingly influencing society, researchers have also highlighted racial, ethnic, and other forms of changes that makes this group diverse. About 80% of the U.S. older adults are European American, and fewer than 20% combined are African American, Hispanic American, Asian American, or Native American (Scharlach, 2011). According to future projections, ethnic and racial minorities will reach the majority in the next few decades (Wheeler & Giunta, 2009), the percentage of Hispanic American, African American, and Asian American older adults will increase, and the percentage of European Americans will decrease (Bicket & Mitra, 2009). The societal challenges caused by these changes will be prevalent at the community level, particularly as it relates to quality and affordable housing, transportation options, access to quality health care, and other services and opportunities desired by older adults. These service area challenges are similar to those associated with the aging in place phenomenon and are also associated with the U.S. population and diversity growth.

Aging in place means that older adults receive services that support their long-term care needs with an objective to prevent institutionalization. Words or phrases such as self-sufficiency, quality of life, independence, and autonomy are used to describe aging in place (Dye, Willoughby, & Battisto 2011). The Older Americans Act and recommendations established at the 2005 White House Conference on Aging talk about aging in place as well (Bookman, 2008). Aging in place is a preference among older adults, though the degree to which older Americans prefer to age in place varies by



region (Kennedy, 2010; Lehning, Scharlach, & Wolf, 2012; Yen & Anderson, 2012). For example, 55% of Atlanta's region older adults plan to age in place as long as possible, which the Atlanta Regional Commission (ARC) supports (Keyes et al., 2011). Aging in place is favored amongst practitioners and other older adults as benefits a higher quality of life. In contrast, practical barriers, challenges, and potential limitations for aging in place imposed on older adults makes aging place difficult to achieve.

A governmental focus on supporting older adults' preference to age in place is linked to "American values of independence, privacy, and personal control" (Scharlach, 2012, p. 27). Those values are transparent in the pride older adults have in their homes and communities that represents a form of symbolism and family tradition. Familiarity with a person's own personal space and neighbors is also a contributing factor to aging in place (Scharlach, 2012). Therefore, many older adults wish remain in their homes, even if they require any medical attention or special level of care. A great percentage of homes older adults reside in are in rural and suburban areas that are not designed for older citizens (Scharlach, 2012). Local communities experience challenges with their existing physical and social infrastructure, which no longer meet older adults' needs (Bookman, 2008). Individuals and organizations working on behalf of the aging in place movement consider the following on behalf of older adults: (a) quality of homes, (b) communities isolated from appropriate goods and services and social connectivity, and (c) a lack of transportation. These factors are significant to the aging in place evolution.

Housing and transportation options, health and social services, and a variety of program and activities are community components that support older adults' aging in place preference. When communities identify stakeholders and develop partnerships with

organizations and governmental agencies, those community components are manifested. There have been collaborative actions taken by government, organizations, and people interested in supporting the needs of older adult and move aging in place forward. Common phrases like age-friendly, elder-friendly, active aging, livable, and LLCs describe some of the models or frameworks that has been instrumental in meeting the growing demands of older adults and fulfilling those limitations previously discussed. For example, the NORC support service program (NORC-SSP) model promotes services in communities with a high population of older adults that are limited in services, which close to 20 U.S. states adopted (Bookman, 2008). The LLC is a planning framework that focuses on aging issues within the Atlanta region that evolved from other work delivered on behalf of older adults. There are other models that entail community assessment and planning, stakeholder meetings, or information sharing with little to any observable implementation (Buffel, Phillipson, & Scharf, 2012).

The many challenges and opportunities discussed related to the aging population growth and aging in placefar in Chapter 1 were considered by the ARC when developing the LLC initiative, a framework for developing communities and places for all people to reside for a lifetime (Keyes et al., 2014). The LLC has three main goals: (a) to promote housing and transportation options, (b) to encourage healthy lifestyles, and (c) to expand information and access (Lawler & Berger, 2009). The goals are supported by seven core principles intended to be adopted by individuals and organizations interested in the LLC initiative. To date, ARC, nine communities, and 11 high rises for the Atlanta Housing Authority (AHA) adopted the LLC initiative (Keyes et al., 2014). In a case study on Mableton, GA LLC efforts, Blumberg, Jones, and Nesbitt (2010) communicated some

best practices intended for local government officials to reference. Among the available research, yet to be determined are the planning and implementation actions taken by local government officials who adopted the framework.

In this study, I explored these communities and their experiences and perceptions, and the results provide insight on the involved process of local government officials and stakeholders when adopting the LLC initiative and principles. A case study approach was the method most appropriate for this research. This approach provided support in gathering in-depth information from participants using open-ended interview questions that is discussed further in this chapter and in Chapter 3.

### **Statement of the Problem**

The quality of life of older Atlanta citizens may be reduced if the adopted LLC initiative principles are executed poorly or are not implemented at all. The LLC initiative consists of seven principles that were developed within the context of meeting the following goals: transportation and housing options, healthy lifestyles, and access to services and information (Keyes et al., 2011; Lawler & Berger, 2009). LLC principles are connectivity, pedestrian access and transit, neighborhood retail and services, social communication, diversity of dwelling types, healthy living, and consideration for existing residents (Keyes et al., 2011).

LLC principles are tools used by local government officials, community leaders, planners, developers, and other stakeholders of interest (Keyes et al., 2011). These principles speak to the needs of an expected growth within the older adults' population and increased diversity that will exist in the Atlanta region. Therefore, it is important that local government officials, planners, and other stakeholders understand, embed, integrate,

and fully carry out principles to meet the needs of older adults and other Atlanta citizens. Community gardens, farmers' markets, better sidewalks, zoning and ordinance changes, and increased transportation access are some of the outcomes of post implementation needed throughout communities in the Atlanta region (Keyes et al., 2014; Keyes et al., 2011). However, researchers have not suggested how LLC principles should be executed beyond adopting them. This lack of information is due to the LLC framework being newly started.

### **Research Questions**

The research was guided by one main research question: How have six local government officials within the Atlanta region who adopted the LLC initiative between the years 2008-2013 used them to ensure the quality of life for members of their community? The following subquestions supported the main investigation:

1. How do local government officials perceive the LLC initiative?
2. What are the perceived benefits in adopting the initiative within an Atlanta region community?
3. What are the perceived challenges in adopting the initiative within an Atlanta region local community?
4. What part of the LLC initiative needs to be altered or added for improvement?

### **Purpose of the Study**

The purpose of this qualitative case study was to describe and explore the experience of local government officials who adopted the LLC initiative in the Atlanta region. The LLC initiative's principles include a lifelong community and provide leaders

and stakeholders a comprehensive lens for planning that thrives on quality housing, efficient transportation options, and other supportive services and programs (Keyes et al., 2011). The results of this study highlight the process, benefits and challenges, and perceptions, of adopting the LLC initiative and could help guide ARC in establishing best practices that may increase the interest from other local government officials and community leaders to address the needs of older adults in the Atlanta region.

### **Nature of the Study**

The participants of this study were local government officials involved in adopting the LLC initiative developed by the ARC. In this study, I explored how they adopted LLC initiative in the Atlanta region. Six local government officials were involved in face-to-face interviews, and relevant documents were reviewed.

A case study approach was used to analyze the data. The themes and patterns that derived from data analysis helped me to interpret and communicate the processes and overall knowledge of local government officials who adopted LLC initiative. The results of this study may be used to assist ARC in understanding what technical support is needed for local government officials who adopt the LLC initiative. A full explanation of the methodology is provided in Chapter 3.

### **Conceptual Framework**

The conceptual framework for this study was based on Lawton's (1974) and Lawton and Nahemow's (1973) concepts of ecology and aging, the ecological theory of aging, and the ecological change model (ECM). Lawton and Nahemow developed the ECM, which identifies whether the measures of treatment is applied to an individual or environment, and whether the treatment is initiated by an individual or external value

individuals respond to. The ecological theory of aging and ECM provides a broader perspective in understanding relationships between the environment and people in which former and current research on community planning and the aging society relates to.

Adaptation is a term that describes the ecology of aging, which is associated with an individual adapting to his or her environment and the changes an individual applies to his or her environment as a method of human adaption (Lawton & Nahemow, 1973). The adaption level of individuals and environmental demands thrives when planners—health professional, designers, and others--work collaboratively towards healthy environments for older people (Lawton & Nahemow, 1973). Studies on environment and aging are evolving, and professionals associated with the planning field apply “strong practical components” (Lawton & Nahemow, 1973, p. 623). Professionals such as planners, architects, designers, builders, transportation engineers, and gerontologists work to identify solutions to problems relevant to designing better communities and homes. The argument for better physical and social infrastructures helped me to analyze and classify the experiences of local government officials involved in the study and provided the participants with a rationale on the importance of planning for lifelong communities.

I used the ecology theory of aging and ECM in this study to understand the experiences of local governments involved in adopting aging in place initiatives (i.e. the LLC initiative). Lawton and Nahemow (1973) believed that the concept underpinning aging in place is rooted and captured in the ecological notion of person-environment fit. The adopted LLC initiative principles are aimed at increasing the quality of life of older Atlanta citizens.

The ecological theory of aging also offered a theoretical strategy for me to understand the environment-person linkage. Using this theory, I was able to understand the experiences of the local government officials who adopted the LLC initiatives and their use of the LLC principles, as well as the benefits and challenges encountered when integrating LLC principles within organizations and communities to ensure quality of life for aging people. By using the ecological theory of aging, I was able to derive meaning from experiences or data that were collected through face-to-face interviews and to understand various aspects of LLC initiatives and the interactions between individuals and the environment and the impact they have on aging in place. Like other policies in the United States, the LCC initiatives focus on both the environment and person. The theory, ecological theory of aging, has been tested in numerous studies, and scholars have supported the principle of the ecological model (Lawton & Nahemow, 1973). It has been employed as a springboard for environmental assessment.

### **Definitions of Terms**

The following terms were used throughout this study.

*Age-friendly*: “A community or area where older people are actively involved, valued, and supported with infrastructure and services that efficiently accommodate their needs” (Alley, Liebig, Pynoos, Banerjee, & Choi, 2007, p. 4).

*Aging in place*: A description of the living arrangement preferred by older adults where they are able to reside within their homes and communities for as long as possible (Dye et al., 2011; Ivery & Akstein-Kahan, 2010; Kennedy, 2010; Yen & Anderson, 2012).

*Baby Boomers*: An individual or group born between 1946 and 1964 (Frey, 2010).

*Community leader:* An instrumental term in which a local authority operates as an agent for its communities by identifying community needs and advancing its interest (Sullivan, Downe, Entwistle, & Sweeting, 2006).

*Older adults:* A person aged 65 and older (AOA, 2012; United Census Bureau, 2010).

*Physical environment:* Refers to a community or neighborhood setting that includes walking paths, parks sidewalks, and facilities (Humpel, Owens, & Leslie, 2002; Menec, Means, Keating, Parkhurst, & Eales, 2011).

*Planning:* For the purpose of this study, this term refers to the process of “regulation, coordination, and control that enable or constrain action in society,” (Alexander, 2009, p. 234). The purpose of planning is described by the following: land use and development, environmental, community or neighborhood, and regions that responds to the public interest (Alexander, 2009).

*Quality of life:* Refers to the direct relationship between the “external conditions of a person’s life and the internal perception of those conditions” (Borglin, Edberg, & Halberg, 2005, p. 202).

### **Assumptions**

Local government officials in several Atlanta region communities, cities, and counties are engaged by the Aging and Health Resources Division within the ARC to participate in adopting the LLC framework. I assumed that the selected participants were honest and informative in answering the interview questions that reflected their experiences, understanding, and knowledge in adopting LLC principles. Participants’ experiences provided a description of the process involved in adopting LLC principles. I



also assumed that agendas, files, and documents were readily available and document actions taken by local government officials post adopting LLC principles.

### **Scope and Delimitations**

I explored the process led by local government officials in adopting LLC principles within communities, cities, and counties in the Atlanta region. There are a number of communities, cities, and counties within the Atlanta region that are the priority of the ARC, and over 10 have adopted the LLC principles. I only included the experiences and perceptions of those that adopted the LLC within 2008-2013, in which ARC staff were able to provide information. The impact the process had on providing a quality of life for citizens, primarily older adults, was not researched in this study because the greater need was to identify how local government officials used and implemented the LLC principles. The results of this study could be used as a roadmap for local government officials with an interest in adopting the LLC framework and other planning frameworks.

### **Limitations**

There were some limitations related to this study. There are 10 counties and 67 cities in the Atlanta region that ARC works with (Lawler & Berger, 2009). This study was limited only to local government officials in the Atlanta region who adopted the LLC initiative within a designated period. The perceptions of these local government officials may differ from other local government officials who adopted the LLC initiative after 2011. Although the experiences and perceptions of local government officials who adopted the LLC initiative maybe similar regardless of time frame, no generalization will be determined.

There were also limitations in the qualitative research design. I was the primary instrument involved in conducting interview questions, which may lead to researcher bias (Creswell, 2009). I made an effort to eliminate any biases from the study. Participants may not have been able to provide detailed responses to interview questions. Therefore, questions were semistructured, and participants were probed to ensure that I gathered detailed responses.

### **Significance of the Study**

Major components recognized in implementing local aging initiatives are for the lead organization or leader to convene stakeholders and facilitate community planning (Ivery & Akstein-Kahan, 2010). Proficient and reliable leadership ensures that communities sustain their efforts when implementing an aging in place initiative and efficiently respond to the needs of the community and its members. Local government officials must be outspoken and involved in order to carry out the level of community development embedded within the LLC initiative (Lawler & Berger, 2009).

The results of this study will allow the ARC and the region to create guidelines for local government officials who facilitate LLC initiative planning process within their local community. Previous researchers have explored the needs and concerns of older adults within the Atlanta region and have provided a detailed description of the LLC initiative, which provides local government officials a context to begin the planning process post adopting the principles. The implications for positive social change from this study include adding to the body of knowledge needed to help local government officials and other stakeholders interested in the needs of older adults understand the practices involved in planning to increase buy in throughout the region. When local government

officials have an understanding of best practices integrating principles in their strategic approaches, policies, and plans, better communities are created that influence the lives of future generations.

### **Summary**

The Atlanta region will experience a significant increase in its older adult population, and the ARC, local officials, community leaders, and planners recognize that the region is not prepared as it relates to existing social and physical infrastructures. The LLC initiative is a comprehensive effort to help communities respond to a diverse population, and it encompasses three distinct goals. In this study, I focused on actions led by local government officials who adopted the LLC framework in an effort to address the older adult population growth and its challenge on environment, housing, transportation, health and support services, and other features of communities. The purpose of this study was to identify, describe, and analyze the actions involved in adopting the LLC initiative. The perceptions of local government officials who adopted the LLC may help to identify challenges and benefits and potential ways the initiative can be altered to mobilize change further.

Chapter 2 is a literature review. Chapter 3 will feature the methodology applied to this study. In Chapter 4, I describe the finding and results. Chapter 5 concludes this study with an interpretation of findings, future research recommendations, implications on the field, and closing remarks about this study.

## Chapter 2: Literature Review

### **Introduction**

In this study, I focused on identifying the processes local government officials used when adopting the LLC framework and principles. In this study, I described how local government officials are using the framework and principles of the LLC to meet the needs of older adults and create communities that provide a high quality of life for all its citizens. For the purpose of this discussion, local government officials who are involved in implementing principles outlined in planning frameworks developed to address older adults and focus on housing, transportation, health, social, physical and social environment, access to supportive services, and all other connected activities and components (Keyes et al., 2014; Scharlach, 2011).

Highlighting the experiences of local government officials who adopted the LLC framework will assist with creating a best practice guide for future replication. Housing health care, transportation, and support services must change to meet the growing demands of Atlanta region's older adults (Lawler & Berger, 2009). These ideas are built upon in the literature review. The key parts of the literature review include a (a) search strategy discussion (b) review of the literature, and (c) concluding points. I focus on characteristics of older adults, components of lifelong and age-friendly communities, highlights of local government officials using different planning frameworks, and distinctive matters of the Atlanta region as they relate to older adults and community plan.

### **Literature Search Strategy**

The databases used to gather relevant literature to support this study were Science Direct, Political Science Complete, PsycINFO, Taylor and Francis Online, SocINDEX, Political Science Complete, Sage Full Text Collection, and Google Scholar. The key terms and phrases used included the following: *older adults, aging, age in place, community planning and community development, urban planning, population growth, age friendly, lifelong community, ecology, and quality of life*. The majority of articles selected were within the last 5 years, with the exception of literature related to conceptual frameworks used for this study.

### **Theoretical Foundation**

#### **Overview of the Ecological Theory of Aging**

Lawton and Nahemow's (1973) adaptation model was labeled the ecological theory of aging. The ecological theory of aging is one of the most popular middle-range theories in the field of environment and aging (Lawton, 1989). The premise of the ecological theory of aging is that people at a higher competence level have an increased chance of experiencing favorable adaptive outcomes and have the ability to adapt to a greater range environmental press (Lawton, 1974). Those who operate at lower levels have a narrow range of adaptive features, operate at a lower range of competence, and have a greater likelihood of experiencing a wider range of environmental press in negative terms (Lawton, 1989). Old age as an important phase of an individual's life and is influenced by the objective physical environment.

### **Relation to Aging in Place**

Aging in place has become a guiding strategy in meeting and addressing older people's needs. There are several interrelated dimensions of the term "place" (Cutchin, 2003): (a) a psychological and emotional dimension involving a sense of attachment and belonging; (b) a social dimension involving people's relationships; (c) the way people relate with each other; (d) a cultural dimension involving older people's beliefs, values, symbolic meaning, and ethnicity; and (e) a physical dimension that can be touched and can seem like a neighborhood or home (Pastalan, 1990). The home is a physical setting that enables older people to preserve a life meaning. The simple meaning of aging in place is often used to imply a policy ideal involving people being able to stay at home while ageing and maintaining privacy, independence, competence, safety, and control over the environment (Dyck, Kontos, Angus, & McKeever, 2005). Older people's homes have become spaces of consumption of long-term and short-term care provided by lay caregivers and informal and formal lay. Environmental gerontologists posit that as individual age, they become more attached to their residence, but concurrently become more vulnerable and sensitive to their physical and social environment (Lawton, 1977; Lawton & Nahemow, 1973).

Rowles (1983) developed the insideness theory to conceptualized people's attachment to the place they live, related to three dimensions: social insideness, physical insideness, and autobiographical insideness. Social insideness means social relationships that an individual develops with other people. Physical insideness involves an individual living at a place for an extended period of time, which makes him or her create a routine and an idiosyncratic rhythm to develop some sense of environmental control. The

autobiographical insideness entails older people becoming attached to the place they live because of their memories shape their self-identity. Thus, older people with strong attachments to a place feel more secure, more mastery, and have a positive sense of self (Rowles, 1983).

Lawton and Nahemow (1973) developed the ecological theory, which is parallel to Rowle's theory of insideness. According to the environmental docility hypothesis, the influence of the environment increases as older people's functional status decreases (Lawton, 1977). In the competence-environmental press model, Lawton and Nahemow proposed that an interaction between physical and social environmental conditions and personal competences determine the level to which an individual will age in place. There should be a fit between the environmental press and personal competences that can lead to the positive outcomes, and any mismatch can lead to poor adaptation (Lawton, 1977). In view of Lawton's theoretical model, adaptation of people during old age reflects an interaction between environmental and personal characteristics. For individuals to age in place, the near environment and immediate environment must be free of barriers that can hinder independent functioning.

### **Relation to Aging in Place Initiatives**

The ecological theory of aging addresses the interaction between informal and formal caregiving. It supports the role of aging in place initiatives that can help older people live within communities or in their own homes rather than in long-term care institutions or hospitals (Browdie, 2010). The ecological theory of aging addresses the importance of community care and the role that family caregivers and local formal

services play to enable older members of community to age in place. This outcome has led to the expansion of roles of family and local formal services in recent years.

Lawton and Nahemow (1977) articulated the interplay between the environment and the individual and advocated for maintaining functioning in the home and community-based services for vulnerable adults. There has been an expansion for these long-term care and supportive services in recent decades (author, year). These services have increased in variety and scope. These home- and community-based services include home health care, homecare services, adult daycare centers, nutritional programs, supportive services for caregivers, and home hospice provided to the end-of-life care to the terminally ill patients (author, year). Community care and aging in place include programs and policies that help in maintaining a fit between the individual and his or her place of residence.

## **Older Adults in the United States**

### **Population Growth**

A substantial portion of the U.S. total population is older adults, aged 65 and older (Bicket & Mitra, 2009). Cherlin (2010) suggested that the population would grow due to longevity or birthrate decline. In the year 2011, the older adult population was 41.4 million, which represented 13.3% of the U.S. population (Center for Disease Control and Prevention [CDC], n.d.). Just 10 years prior, 1 in 8 adults were 65 and older (Wheeler & Giunta, 2009). The numbers are increasing significantly. By 2030, 20% of the U.S. population will be older adults (Sade, 2012) at a ratio of 1 in 5, and three times as many older adults than children below the age of 4 (Wheeler & Giunta, 2009). The older adult population growth is attributed primarily to the Baby Boomer generation, which includes



individuals born between 1946 and 1964; this generation who are most recognized because of their size and social and demographic characteristics (Frey 2010; Hrostowski, 2010; Wolf & Amirhanyan, 2010). However, Hrostowski (2010) also mentioned that adults 85 and older are growing rapidly and will make up 5% of the population by 2050.

While researchers have classified this population according to generations, they have also discovered where the greatest increase is geographically by state, region, and other boundaries. Western and southeastern states and metro areas like Atlanta, Austin, and Raleigh are the fastest growing aging population, and the older adult population is slow or declining in Utah and the Pittsburg and Buffalo areas (Frey, 2010). In 2011, greater than 50% of Florida, California, New York, Texas, and a few other states were older adults, with a value of 1 million and above (AOA, 2012). Georgia's older adults represented 37% of its population, and this state poverty rate is at 10.9% (AOA, 2012). In addition, AOA, 2012) determined that 81% of older adults lived in metropolitan areas while 19% of them lived outside of urban areas. Roff and Klemmack (2004) indicated that 12.3% of individuals residing in urban areas are 65 and older, and 12.8% are in rural areas. The majority of older adults live in metro areas, but 7.8 million of them are in nonmetro areas (Roff & Klemmack, 2004).

### **Demographics**

Bicket and Mitra (2009) argued that the demographics of older adults will change simultaneously with population growth. Wheeler and Giunta (2009) stated, "the ethnic and racial diversity of older adults is increasing" (p. 237) and Hrostowski (2010) agreed. Roff and Klemmack (2004) also discussed the forthcoming demographic changes, which they discovered would be vital to gerontological social workers based in rural and small

communities. The shift in the U.S. aging population and diversity impose immediate demands on the national policy agenda (Gassoumis, Wilber, Baker, & Torres-Gil, 2010). Trask, Hepp, Settles, and Shabo (2009) explained that “demographic shifts among the aging population of the United States call for re-examination of our understanding of the needs of these individuals, especially when race, ethnicity, family consumption, and the country of origin are considered in the discourse” (p. 294). There are a number of reports that illustrate previous, current, and projected demographic statistics, such as race, income level, and gender of older Americans to support the argument of diversity.

Include a topic sentence. In year the 2011, 21% of individuals aged 65 and older were associated with racial or ethnic minority groups, which included 9% African Americans, 7% Hispanic Americans, 4% Asian American, <1% Native American, and 0.6% identified with two or more races (AOA, 2012). In the early 2000s, 87% of the U.S. population over the age of 65 was European American (Trask et al., 2009). The dynamics of demographics of this population is expected to change significantly within the next decade (Gassoumis et al., 2010; Roff& Klemmack, 2004; Trask et al., 2009). Similar to the aging population growth, the years 2030 and 2050 are also milestone years for diversity and demographic trends. By 2050, racial and ethnic minority groups are likely to represent close to 25% of the aging population, and European Americans will drop to 64% of the aging population (Trask et al., 2009). Gassoumis et al. (2010) brought more attention to population growth among Latino older adults, arguing that the Latino is an ostracized community, which makes it challenging to identify implications on federal, state, and local policies.

Another descriptor of older adults as it relates to the existence of diversity within this population is socioeconomic status and income level. The AOA (2012) highlighted that 3.6 million older adults were living below the poverty level at 8.7%. Based on a study conducted in 1939 that illustrated poverty level at 35%, the number of persons currently living below the poverty level has decreased in the United States has (Roff & Klemmack, 2004). The AOA also reported that the average income in 2011 for older men was \$27,000 and \$15,000 for women and stated that the greatest source of revenue was from Social Security. In addition, 80% of older adults in the United States live on their own, and less than 5% reside in nursing homes (Faussett, Mayer, Rogers, & Fisk, 2009). These demographic statistics can be used to identify how culturally diverse the aging population will become. Providing literature on the aging population in terms of growth and diversity will help researchers understand how concepts like age in place, age friendly, and lifelong communities evolved and its implication for policy and planning.

### **Aging in Place**

Many older adults desire to age in place, which means they prefer to grow old or age in their homes and communities of origin ( Bedney et al., 2010; Dye et al., 2011; Ivery & Akstein-Kahan, 2010; Yen & Anderson, 2012). The aging in place concept fosters accessibility to long-term care services needed for older adults to maintain a quality of life (Guo & Castillo, 2012). About 80% of seniors are achieving this goal of aging in place (Fausset et al., 2009). Ninety-two percent of adults ages 65 to 74-years-old live in single family detached homes and also desire to reside in their homes as long as possible (Dye et al., 2011). Older adults' preference to age in place continues to increase due to their attachment to their home and community that are symbolic to them and their

families. Aging in place is also used as tool for measuring successful aging that correlates with older adults' independence (Fausset et al., 2011). Independence and its influence on aging in place programs is a method to sustain older adults within their communities where social networks are established (Kloseck, Crilly, & Gutman, 2010). Researchers have defined and described aging in place and have discussed its benefits and challenges from several perspectives that continue shape how local government officials address this issue.

### **Aging in Place Challenges**

U.S. communities are not designed or structured to meet the needs of a growing aging population or support their desire to age in place (Bookman, 2008). Other scholars used terms such as “environment and infrastructure” interchangeably with “design” to describe the social or physical context or condition of a community or geographical location (Bookman, 2008). The physical environment entails the home where older adults reside and the communities where the home is located in (Ball, n.d.). The social environment includes a variety of program and services that are supported by policy and planning efforts and are facilitated by local government officials or other involved stakeholders. Safran-Norton (2010) referenced the social and physical environment in the same context, but placed an emphasis on how housing conditions impact older adults and opportunities to aging in place. Discussing the environment that surrounds older adults helps researchers to understand the dilemmas of aging in place, which Lawton's ecological model of agingsupports (Fausset et al., 2009). Research regarding environment, infrastructure, or design research is broad, but information on the

challenges and benefits at the community level has been instrumental in guiding planning and change efforts to support effective redevelopment.

Suburban and urban communities are not livable for older residents based on any sidewalks, parks, or green pathways, which scholars show enables physical activity to support healthy lifestyles (Dye et al., 2011). The evidence of this argument varies by communities. For instance, the Atlanta region would be considered not livable because it consists of predominately suburban communities that challenges older residents' needs for physical activity, social services, quality health care and housing, social connectivity, and transportation access (Keyes et al., 2011). Scharlach (2009) looked at suburban and urban communities and stated, "long established urban communities are aging in place, experiencing infrastructure deterioration that challenges older residents, while newer suburban communities that were designed primarily with young families in mind are ill equipped as those families age" (p. 5). There is a lack of community-based services, transportation issues, and housing options that are needed for older adults to successfully age in place (Keyes et al., 2011; Keyes et al., 2014; Kloseck, Crilly, & Gutman, 2010). Older adults are concerned with the lack of services and prefer comprehensive services that are accessible, affordable, and quality to meet their physical, mental, social, and spiritual needs (Guo & Castillo, 2012). Researchers have highlighted suggestions on how to shift the physical infrastructure of communities and alter services and programs to support older adults to age in place.

### **Aging in Place Strategies**

A single organization or components such as transportation, housing, social services, and others operating to serve older adults is challenged when done in isolation

(Ivery & Akstein-Kahan, 2010). Therefore, an integrated aging infrastructure that fosters quality housing, access to transportation and social services, and health care options to meet all older adults' needs was suggested (Alley et al., 2007; Dye et al., 2011). All of those elements are essential for older adults to remain active in their communities, and Bookman (2008) emphasized the accessibility to promote community involvement and housing integrated with or nearby social activities and services. Lawler and Berger (2009) claimed that information and resources will assist older adults in decision making regarding their wellbeing and aging in place. Developing collaborative partnerships with particular groups and organizations is also a suggested practice, which is a proven method to develop "effective and efficient system of service provision for older adults" (Ivery & Akstein-Kahan, 2010, p. 330). A focus on community planning and development is necessary to design communities suitable for older adults to live independent and healthy lives (Keyes, 2014). More detailed suggestions, strategies, and practices for aging in place will be identified by exploring literature on the individual components of aging in place, such as housing, transportation, support service, health care, and others. I will also highlight collaboration and integration among the components. I stopped reviewing here due to time constraints. Please go through the rest of your chapter and look for the patterns I pointed out to you. I will now look at your Chapter 3.

### **Components of Aging in Place Communities**

#### **Housing**

Housing related to older adults is described broadly throughout research.

A house is more than a dwelling unit but, also possess physical and social features that is represented by homes and existing neighborhoods (Kaup, 2009); a critical element of community-based services (Pynoos, Liebig, Alley, & Nishita, 2005); and similarly, a consumer of supportive services beyond housing walls to support older intended to remain there (Pynoos, Caraviello, & Cicero, 2009). However, it has been determined that today's housing and existing communities are ill equipped for supporting older adults' needs and successful aging in place (Scharlach, 2009). Researchers validates this argument through housing examinations related to its physical conditions (James & Sweaney, 2010; Safran-Norton, 2010); quality and affordability (Beard & Carnahan, 2011; Blumberg & Nesbitt, 2010; Stone, 2013) and connectivity to supportive and community-based services (McDonough & Davitt, 2011). There is much evidence indicating those as demands for older adults, followed by suggestions that support their desire to age in place (AARP, 2010) that local government officials must respond to. To date, housing policies have undergone significant changes, and housing models and programs have been developed for further support.

#### *Physical Conditions and Infrastructure*

As people grow older, so will their homes. Fifty percent of older adults reside in houses built nearly 40-years-old, and 8% built eighty years ago at minimum (Scharlach, 2009). There is much concern regarding houses deteriorating over time if not neither appropriately developed nor properly maintained (Kaup, 2009; Pynoos, Caraviello, & Cicero, 2009); and to what extent houses can adapt to people's diverse needs (Pynoos et al., 2009), which impacts older adults' ability to age in place; and subjects older adults to various social and medical issues (James & Sweaney, 2010). Safran-Norton (2010)

suggested well-structured houses in addition to a functional environment as essentials to older adults remaining in place, which are also factors related to why they choose alternative options or relocate. Pynoos et al., (2009) simplified Safron-Norton's suggestion using words and phrases like safety, accessibility, secure, and indoor/outdoor full access to describe housing provisions.

Previous studies discovered home modification (Hwang, Cummings, Sixsmith, & Sixsmith, 2011), visitability and universal building designs (Pynoos et al., 2011), policy changes (Safran-Norton, 2010), and more to support older adults aging in place. Home modification is defined differently throughout literature. Some researchers use the term to describe simple arrangements (i.e. removing loose rugs, extra lightings, and adding shower seating) (Pynoos et al., 2011; Safron-Norton, 2010); and more extensive modifications (i.e. installing ramps, kitchen and bathroom reconstruction, and outdoor environmental adjustments; Hwang et al., 2011). Hwan et al. (2011) also identified a relationship between Lawton's person to environment method and home modification. Homeowners are primarily responsible for modifying their house to meet standards scholars suggested; however, as the individual age, there are limited in completing such task based on health conditions and financial hardships (Kaup, 2009). Conducting a needs assessment will provide comprehensive understanding regarding older adults' ability to perform specific home maintenance task and related requirements, and information would benefit designers, home builders and remodelers (Fausset, Mayer, Rogers, & Fisk, 2009).

There are also several benefits and some barriers associated with home modifications. Researchers identified the following advantages; positively impacting an



individuals' capability to age in place (James & Sweaney, 2010); avoid institutionalization and reduced health risks (Hwan et al., 2011); and enhance older adults' task performance within home environment (Pynoos et al., 2009), which are essential to successful aging in place. Older adults' physical ability and lack of financial resources are barriers connected to completing home modifications, in which requires additional assistance from local community resources. However, approximately one third U.S. cities and communities do not provide any home modification or maintenance support to meet the needs of older natives (Scharlach, 2009). Researchers have discussed how to counteract those barriers through identifying a programs and services to further support older adults able to age in place.

A variety of programs has been designed throughout the U.S. to assist in home modifications. Mostt programs are targeted specifically to veterans, older adults, and low-income households (Wagner, Shubar, & Michalos, 2010). Pynoos et al. (2009) goes further to identify services and funding provided by Veteran Administration (VA), Area Agencies on Aging (AAA) through the Older American Act (OAA), housing authorities through Community Development Block Grants (CDBG), and other social services agencies offering free and reduced rate services (p. 27). However, these services and programs are limited, which results to homes not equipped for meeting aging in place demands (Keyes et al., 2011). Pynoos et al. referenced other funding sources such as tax credits, bonds, and redevelopment funds to replace the gap Keyes et al. discussed.

Meanwhile, housing standards such as, visitability, and urban design arise with similar features as home modifications that are recommended for new housing construction, redevelopment or remodeling for older adults (Fitzgerald & Carol, 2014).

Universal design features includes no-step entry, leveled light switches, counters (Fitzgerald & Caro, 2014), modified counters and sinks (Siegel & Rimsky, 2013), and lower level living area and master bedroom (Pynoos et al., 2009). Siegel and Rimsky study also determined universal design as a planning component for livable communities because its support for aging in place. The objective of visitability is to ensure housing designs foster accessibility that has been supported by legislation in several U.S. cities and states for decades (Pynoos et al., 2011). These guidelines in addition to home modification programs and services discussed focus on promoting better housing conditions and home environments to support aging in place regardless of age. However, modifying or building new homes does not resolve all housing issues related to older adults' successfully aging in place (Fitzgerald & Caro, 2014). Local government officials and planners must be proactive, examine their local communities' housing stock, and identify other alternatives in case existing homes limit older residents from aging in place.

### *Housing Options*

Many U.S. communities' housing stock does not offer older residents a range of housing options. A typical range of housing for older adults consist of; multiple dwelling types (Fitzgerald & Caro, 2014); affordable housing for multi-income levels (Rosenthal, 2009); and housing accessible to desirable services and supports (Keyes et al., 2011). Other scholar used the phrase "diverse housing," that represents multiple housing options and intends on meeting the needs for a diverse group of individuals (Keyes et al., 2014); and the opportunity for seniors to downsize and remain independent while staying in their communities (Siegel & Rimsky, 2013). However, housing development including –cost,

type, size, density, and location are regulated by land use regulations and zoning codes that must prohibit and not restrict these types of housing for older adults and others needing diverse housing (Clark & Glicksman, 2012; Keyes et al., 2011;).

Studies show where existing land use regulations and zoning codes restrict communities from obtaining a diverse housing stock (Rosenthal, 2009); and also responsible for existing housing that ostracizes older adults from elements of their community, and need services and amenities (Keyes et al., 2011). Long range planning that governs the planning process, mandates on zoning codes that have previously supported automobile-dependent development; however, they have limited housing and transportation options too (Kennedy, 2010). The Philadelphia Zoning Code Commission amended their zoning laws to include language such as “aging” and “senior”, and incorporated aging in place related principles in response to older adults housing needs (Clark and Glicksman, 2012). There are similar activities informed by LLCs initiative in the Atlanta region that recommended local authorities to amend zoning codes as interest of older adults (Keyes et al., 2011). Rosenthal stressed zoning and coding changes, and suggest action be expedited and led by appropriate local government officials that could move land use regulatory and age-friendly housing forward. This is just one housing solution, in which others have been discovered in newly created housing models, and other actions led by aging involved stakeholders and practitioners.

Many housing models have eventually emerged with an interest in expanding housing options for older adults. Some housing models focused on aging in place, Baby Boomer preferences, and serving a diverse group of individuals and communities (Kennedy, 2010). Siegel and Rimsky (2013) argued that seniors’ health and social needs

should be included when developing housing solutions, and only included those types of model in their discussion. The models Siegel and Rimsky introduced were Accessory Dwelling Unit, Naturally Occurring Retirement Communities (NORC), Villages, and Cohousing that integrated some form of health, long-term care, or social services within the home or its community, and related to supporting aging in place. Kennedy also listed Cohousing as he discussed emerging housing model that also included HIP Housing: Matching Service for Home Sharing, Low-Cost Suburban Rentals, Green House Homes: Assisted Living Redefined and other new models. These models involved remodeling or rearranging existing homes both physically and socially, or new construction (Kennedy, 2010). Implementing these housing models requires effective planning to ensure a successful outcome.

### **Transportation and Mobility**

An increase in the aging population will pose significant challenges on transportation and mobility (Kim, 2011), in which there is little proof the United States will be prepared to meet them (Rosenbloom, 2009). Of the estimated 75 million persons that will be age 65 and older by 2030 (Coughlin, 2009; Freund & Vine, 2010; Rosenbloom, 2009), 57 million will be licensed drivers and approximately 13.9 million will need alternative transportation to remain mobile and independent (Freund & Vine, 2010). Additionally, 75% of older Americans live in suburban or rural areas (Coughlin, 2009; Dye et al., 2011), where little to any transportation options exist besides driving (Coughlin, 2009; Fitzgerald & Caro, 2014). This cohort will demand the entire transportation system—vehicles, infrastructure, land use, and public and private operators (Coughlin, 2009). The greatest challenge is providing older adults multiple alternatives to

driving that most communities' design does not accommodate (Rosenbloom, 2009). Alternate modes of transportation and mobility are—public transportation, senior or special demand transportation services, community transportation systems, and walkable communities (Fitzgerald, 2014; Menec et al., 2011; Rosenbloom, 2009). Addressing these challenges is critical, and is now top priority amongst policies issues concerning older Americans (Freund & Vine, 2010), where the mission is to expand transportation and mobility options, and creates a sustainable transport network that supports individuals aging in place or no longer able to drive.

Research highlight a number benefits other than transportation independence and aging in place when transportation is expanded for older adults and broader the community. Benefits includes a high quality of life, social inclusion, and supports aging in place (Li et al., 2012); enables social interaction and mobility freedom (Kim, 2011); helps older adults remain active citizens (Fitzgerald & Caro, 2014); and reduces long term care (Li et al., 2012). These studies are evidence of progress, as previous research was more concerned with driver safety (Coughlin, 2009). However, expanding transportation options alone will not replace all mobility deficits among older adults (Rosenbloom, 2009). More developed policies needed to ensure older people maintain mobility (Kim, 2011), and all levels must take a regional approach to addressing transportation by coordinating services, funding, and priorities (Rosenbloom, 2009).

### **Existing Transportation Modes**

In the U.S., the primary and most popular mode of transportation among older adults is the personal vehicle or driving (Chen, & McQuaid, 2012; Kim, 2012; Li, Raeside, Rosenbloom, 2009). However, close to 13.9 million other older travelers will

need an alternative to driving (Freund & Vine, 2010). Other existing modes of transportation for older adults includes walking (Freund & Vine, 2010; Rosenbloom, 2009) and public transportation (Mattson, 2011; Rosenbloom, 2009). Research also described alternative modes of transportation to include paratransit services (Federal Transit Administration [FTA], 2010; Rosenbloom, 2009), fixed routes and flexible routes (FTA, 2010), community-based transit services (FTA, 2010; Rosenbloom, 2009), and other emerging private transportation services (Freund & Vine, 2010). About 6,000 public and community organizations nationwide currently provide some type of transportation service for older riders (FTA, 2010). Literature addresses concerns about the lack and quality of existing modes of transportation, and reported the need for better transportation and mobility options as high priority policy issue per the 2005 White House Conference on Aging (Freund and Vine, 2010). The existence of modes vary by community for a variety of reasons; they have their own unique characteristics as relates to aging and aging in place; and impact older adults differently, which warrants further discussion on each individual mode.

A study indicated personal vehicles as the most popular mode of transportation among older adults in the U.S. (Kim, 2011). Private vehicles account for approximately 90% of trips driven by older adults (Freund & Vine, 2010; Rosenbloom, 2009). Older non-drivers, who rely on family and friends to drive them, almost equaled the same percentage of trips as older drivers (Rosenbloom, 2009). There are several reasons older adults prefer personal automobiles as mode of choice such as; it signifies driving freedom and independence (Freund & Vine, 2010); essential to older adults' mobility (Kim, 2011); most reliable in fulfilling all their transportation needs due to lack of other modes

within most U.S. suburban and rural communities (Kim,2011; Li et al., 2012; Rosenbloom, 2009). Researchers have also reported on issues and limitations the automobile enforce on older persons and its impact on aging in place.

Driving limits mobility for older persons as age increase (Mattson, 2011), and mobility declines as their driving ability decreases (Kim, 2011). Driving ability, along with driving skills (Freund & Vine, 2010), vehicle safety (Freund & Vine, 2010) and vehicles accessibility (Kim, 2011) reportedly are also leading factors influencing mobility of older adults. Issues like urban sprawl, air pollution, high traffic injury, and population isolation from normal activities when older persons are unable to drive as adverse outcomes caused by automobiles (Freund & Vine, 2010). Density levels were examined and determined that personal transportation is considered unsafe and unreliable when operated in high-density areas (Freund & Vine, 2010). Addressing these issues is necessary for personal vehicles to be considered an adequate form of transportation option for older.

Walking is the second most popular mode of transportation among older adults (Dye et al., 2011; Freund & Vine, 2010; Rosenbloom, 2009;). Data shows where approximately 10% of trips taken by older adult are walked (Freund & Vine, 2010; Rosenbloom, 2009). This mode of transportation is most prevalent in densely populated areas (Fitzgerald, & Caro, 2014), significant to older individuals who do not drive, and essential to all modes of transportation (Rosenbloom, 2009). In addition, walking is a highly recommended physical activity to support healthier lifestyles for older adults (Fitzgerald & Caro, 2014; Rosenbloom, 2009; Yen & Anderson, 2012). Research has not determined any other specific benefits of walking for older adults, but studies on walking

are progressing (Nelson, 2009). However, a study showed where 75% of older respondents communicated walking as a primary issue when considered it an activity to get around outside their homes (Rosenbloom, 2009). There are concerns with walking being a viable option for older adults when considering the safety, accessibility, and conditions of sidewalks (Rosenbloom, 2009).

One study highlighted several concerns reported by older pedestrians, which included lack of sidewalks, unsafe sidewalks, and crowded sidewalks (Rosenbloom, 2009). Fitzgerald and Caro (2014) shared similar concerns with sidewalks, further recommending sidewalks and crosswalks to undergo major reconstruction and repair to ensure accessibility for older and disabled users. These concerns are much prevalent in rural communities, which characterize walking as an impossible mode of transportation (Dye et al., 2011). Rosenbloom (2009) further discussed a study that showed where close to 75% of respondents indicating walking as a major issue for them when considering getting around outside of their homes. The information presented by Rosenbloom was instrumental in the many improvement efforts shown throughout the literature. Some common strategies to support improve walkability in communities are; redesigning sidewalks, enhancing crossing signal devices, and lowering speed limit (Rosenbloom, 2009); conducting safety assessment on existing sidewalks and crosswalks; and incorporating Complete Streets policies, a design method that supports safe roads for all people (Fitzgerald & Caro, 2014; Yen & Anderson, 2012).

Public transportation is another travel option that is not often used by older adults. Standard public transit services include bus, high and low rail, ADA paratransit, Non-ADA paratransit, and fixed routes (FTA, 2010). Studies showed where less than 2% of



trips taken by older adults were actually made using public transit (Freund & Vine, 2010; Rosenbloom, 2009). There is much evidence discussed throughout the literature that validates why public transportation usage is low among the aging population. For instance, public transportation does not exist or lack in most rural communities (Dye et al., 2014; Mattson, 2011; FTA, 2010; Scharlach, 2012) and suburban communities where most older people live due to aging in place (Kim, 2011). Even if public transportation services exist, older adults still opt out for reasons related to accessibility (FTA, 2010; Kim, 2011), adaptability (Dye et al., 2014; FTA, 2010; Rosenbloom, 2009) and safety (Mattson, 2011; Rosenbloom, 2009). Scholars have also believed public transportation was designed for people traveling to work (Rosenbloom, 2009) and everyday commuters (Kim, 2011), and not older travelers. These issues have caused seniors to stay at home, which excludes them from services (FTA, 2010). There is a great deal of literature that discusses solutions to improve public transportation services, in which FTA (2010) would increase transit usage across the entire population.

The strategies discussed for improving public transportation varies by simply expanding hours of operations and extending routes (Rosenbloom, 2009) to more complex changes to local communities' built environment to increase usage (FTA, 2010). There has been some investing in technology, such as new fare collection systems and equipment for reporting travel information as strategies towards increased accessibility (Coughlin, 2009). The most cost effective solution includes coordination among all agencies involved in providing public transportation within local jurisdictions to increase service hours and number of trips (Mattson, 2011). Increasing safety and security is also highly suggested to comfort older individuals concerned with crime. Travel training

emerged to help seniors, and disabled individuals successfully maneuver public transit with programs that vary based on agency or service provider (FTA, 2010). Investing in public transportation is critical in support of the aging in place movement (Mattson, 2011).

Community-based Supplemental Transportation Programs is another option commonly available to older adults in areas that lack alternatives to driving (FTA, 2010). Community transport providers include--social service agencies, local area agencies on aging, nonprofit organization, faith-based groups, and independent transit operators (FTA, 2010; Rosenbloom, 2009). These organizations operate extensive system similar to ADA paratransit systems, such as Ride Connection in Portland, Oregon (Rosenbloom, 2009), and volunteer driver programs to older adults with transportation and mobility needs (Freund & Vine, 2010; FTA, 2010; Rosenbloom, 2009). The costs of services are less expensive than other transportation modes, but the administrative cost is higher (Rosenbloom, 2009). Volunteer drivers and vehicles balances cost, which informed the existence of volunteer driving programs (FTA, 2010). Unlike other modes of travel, literature does not discuss concerns with these services but does offer strategies for improvement.

There are ways to support, improve, and expand services even with funding dilemmas (Rosenbloom, 2009). Coordination is definitely essential, but further investment state or other government entities entail improving dispatch services and increasing vehicles and dispatcher training creates a greater impact (Rosenbloom, 2009). Disseminating information on developing and sustaining such programs, and establishing an incentive component may result to more volunteer driver programs (Rosenbloom,

2009). Incentives would include discounted auto maintenance and paid gas, which is similar to a voucher system approach (Rosenbloom, 2009). Shared private capacity, a newer approach; uses information technology and internet, offers logistical solutions and low-occupancy vehicle sharing, and will shape future transportation policy (Freund & Vine, 2010). Examples of shared private capacity are Zipcar nationwide, I-GO in Chicago, and GoLoco (Freund & Vine, 2010). Community-based services playing a role in increasing mobility options for older people that requires all levels of government financial investment or be reserved only for individuals needing those level of services and unable to access other transportation options (Rosenbloom, 2009).

### **Aging Services**

The number of older people in need of services has grown, and will continue to grow creating significant challenges and opportunities for aging services (Browdie, 2010; Keyes et al., 2014; Stone, 2014). Aging services are defined as—long-term services and support (LTSS), home and community-based services (HCBS), transportation, activities of daily living (ADL), meal programs, and caregiver support services (Blumberg et al., 2012; Collins, Wacker, & Roberto, 2013; Menec et al., 2011), and there current state is evident throughout literature. Retail and recreational services, and programs exclusive to social interaction are also listed, more so in relation to boomer generation (Keyes et al., 2014). Long-term care services are used most often throughout research to describe most aging services, in which Guo and Castillo (2012) categorized as medical care, mental health, social support, and residential amenities. However, the quality and quantity of existing services will not meet growing demands (Lawler & Berger, 2009), perhaps due to service barriers described throughout the literature.

Research discussed service barriers older adults encountered such as lack of information on services (Castillo & Guo, 2012; Keyes et al., 2014; Li, 2006), lack of availability (Keyes et al., 2014; Li, 2006), lack of accessibility to services (Keyes et al., 2014; Stone, 2014; Wang, Shepley, & Rodiek, 2012), limited funding for services (Browdie, 2010; Lawler & Berger, 2009), and overall service infrastructure (Collins et al., 2013). Funding is the central barrier, often influencing the entire aging services system (Browdie, 2010). For decades, services have been slighted due to massive funding cuts and scarce funds (Browdie, 2010) that a study determined as reason services struggle to meet its consumers' needs (Keyes et al., 2014). Nevertheless, addressing all barriers are important being over 85% of older people prefer easy access or close connectivity to services (Keyes et al., 2014) that Wang et al (2012) believed is most important to individuals aging in place. The Older American Act (OAA) of 1965 has been instrumental in ongoing improvement, organization, and delivery of aging services for years through a system including all U.S. states, 629 Area Agencies on Aging (AAA), and more than 20,000 community-based organizations (Blumberg et al., 2012). Still, scholars are concerned if such system is substantial for meeting future service demands providing recommendations and input.

A vision for the future aging services system encompass a person and family centered, coordinated, and integrated system that meet demands of a diverse population (Stone, 2014). Stone (2014) also discussed LTSS, HCBS and other familiar services (Guo & Castillo, 2012; Menec et al., 2011) at minimum, but focused more on enhanced service delivery methods for a larger proportion of older adults, caregivers, and service providers. Stone first recognized a variety of care settings and living environments with

an emphasis on NORCs, an innovative way service delivery model in support of aging in place (Guo & Castillo, 2012), further suggesting community members build on their economy scale and purchasing power to deliver a broad range of services—social, wellness, health, and long-term care to its entire community (Stone, 2014). The usual Area Agencies on Aging and aging services network would serve as delivery hubs (Stone, 2014), also responsible for service integration and coordination to expand and connect services (Guo & Castillo, 2012; Keyes et al., 2014). Additionally, new technologies—web-based service hub, personal devices, and electronic care reminders to help deliver more efficient service and minimize accessibility concerns (Stone, 2014). Studies concluded that efforts to this magnitude are coupled with new policy and regulation and qualified service professionals (Li et al., 2006; Stone, 2014); followed by an outcome evaluation to identify its contribution towards economic growth, quality of life, stable communities (Stone, 2014).

### **Community Design**

Existing physical infrastructures of most U.S. communities were built during the 1930s through 1990s (Yen & Anderson, 2012), in which older adults assisted in reshaping (Nelson, 2009). Communities were designed primarily to promote automobile travel, developed at lower densities, and isolated residential areas from particular services and amenities (Kerr, Rosenberg, & Frank, 2012). Older adults communicated additional barriers including; poor street conditions, unnecessary noise and insufficient lighting (Clark & Nieuwenhuijsen, 2009). Several studies examined built environments (Burton, Mitchell, & Stride, 2011; Hunter et al., 2011; Kerr et al., 2012) and determined that communities be rebuilt and improved to ensure a high quality of life for older adults (Yen

& Anderson, 2012). Literature suggested built environment improvements to; promote physical activity (Hunter et al., 2011; Kerr et al., 2012; Yen & Anderson, 2012) facilitate independence and mobility (Burton et al., 2011; Clarke & Nieuwenhuijsen, 2009; Hunter et al., 2011; Kerr et al., 2012); support aging in place (Burton et al., 2011; Yen & Anderson, 2012); help older adults maintain their physical health (Buffel et al., 2012; Burton et al., 2011; Hunter et al., 2011); and increase access to services and amenities (Buffel et al., 2012; Kerr et al., 2012). These elements are crucial especially for future boomer generation desiring to age in place (Burton et al., 2011). However, there is little evidence providing built environment professionals-- designers, planners, developers, and architects new community design and development practices (Burton et al., 2011; Clark & Nieuwenhuijsen, 2009; Kerr et al., 2012).

There are specific design solutions for future built environments (Kerr, Rosenberg, & Frank, 2012). First, all design concepts should ensure communities are safely accessible both by walking or transit for a growing aging population (Kerr et al., 2012). Shorter streets and blended land use are considered essential design characteristics to meet primary objective (Kerr et al., 2012). Other design features are street layouts and designs, green space, type and range of buildings that are incorporated based on importance to communities (Burton et al., 2011), an action championed by Area Agencies on Aging and aging network and information be provided to built-environment professionals (Keyes, Rader, & Berger, 2011). A collaborative approach is suggested to coordinate and implement design solutions (Hunter et al., 2011). For example, the LLC initiative brought a diverse group of stakeholder across multiple sectors—planning, engineering, public health, and private development to facilitate built environment plans

for Atlanta's aging population (Hunter et al., 2011). Information sharing and outreach compliments completed design efforts, which provides older adults and other residents with walking routes guides, maps of local services and attractions, and a directory of accessible buildings (Hunter et al., 2011). Those activities minimize any potential financial burden imposed on communities related to environment design improvements (Hunter et al., 2011). Their study also highlighted communities who successfully incorporated design solutions (Hunter et al., 2011), which Yen and Anderson (2012) targeted as influences in developing U.S. policy and environmental efforts and supports.

Building Healthy Communities for Active Aging was established by U.S. Environmental Protection Agency (EPA) as recognition initiative (Hunter et al., 2011) or awards program (Scharlach, 2012). Past awardees included communities and regions that either developed walking and biking trails, refined street designs or fostered mixed use through local zoning regulations (Hunter et al., 2011). The World Health Organization (WHO) is another organization supporting community designs specific to older adults and health matters through its 'Age Friendly Cities' initiative (Kerr et al., 2012). Kerr et al. (2012) also mentioned Center for Disease Center (CDC), a federal agency instrumental in promoting policies and environmental changes through a variety of projects to assist communities and local government in environmental planning, designing, and implementations. This is evidence of some progress in the United States. Future built environment changes are enhanced and sustained through a comprehensive policy approach, collaboration and coordination amongst multiple sectors and the community level, citizen participation, and through outcome evaluation, benefiting all citizens (Hunter et al., 2011).

### **Aging in Place Initiatives**

A number of aging-friendly community initiatives have been developed and implemented by governments, nonprofit organizations, and foundations throughout the U.S. (Lehning, Scharlach, & Wolf, 2012). Initiatives have been designed to focus on a variety of crucial areas: built environment, social infrastructure, and social and human capital (Scharlach, 2009). Another study linked aging-friendly community initiatives to improving the health and well-being of older adults while aging in place (Lehning, 2014). The goals of these initiatives are to help communities become more age-friendly (Scharlach, 2012) and be places that accommodate older adults for a lifetime (Lehning et al., 2012). Studies indicated the number of aging-friendly initiatives that existed in the U.S. and grouped them accordingly (Lehning et al., 2012; Scharlach, 2009; Scharlach, 2012).

For instance, findings from a national internet-based survey identified 292 currently aging-friendly initiatives currently implemented within the U.S. of the following types: community-planning, co-location of services, system coordination and program development, and consumer associations (Scharlach, 2012). Similarly, a study found 124 initiatives and grouped them in the follow categories: community-wide planning, consumer-driven support network, cross-sector systems, resident-based support systems, and single-sector services (Lehning et al., 2012). In addition, initiatives are classified according to the traditional models of community change: community planning, locality development, and social action (Scharlach, 2009).

The majority of initiatives in the U.S. are community planning that is typically developed and implemented by local governments (Scharlach, 2012). Community



planning initiatives primarily involves a needs assessment, data collection, strategic planning, convening of stakeholders (Lehning et al., 2012; Scharlach, 2012). Some examples of community planning initiatives includes AdvantAge, National Association of Area Agencies on Aging and Partners for Livable Communities Aging in Place, WHO Aging-Friendly Cities, AARP Livable Communities, and Aging Atlanta (Scharlach, 2009; Scharlach, 2012). However, community planning lack consistency between plans and actual ground level actions (Greenfield, Scharlach, Lehning, & Davitt, 2014). Evidence of actual implementation of programs, services, and infrastructure and system changes are across the other aging-friendly initiatives listed that are primarily developed by non-governmental sources (Scharlach, 2012). This is partially the case because “local governments’ limited control of the political or fiscal tools required bringing about change in major systems” (Lehning, 2014, p. 34). Nevertheless, it still is important to describe aging-friendly initiatives developed by local governments, and bring awareness to significant nongovernmental initiatives that promotes age in place and aging-friendly communities (Greenfield et al., 2014).

### **WHO Aging-Friendly Cities**

Aging-Friendly Cities is a global initiative launched in 2006 by the World Health Organization (WHO) in 2006 (Buffel et al., 2012; Neal & DeLaTorre, 2009; Scharlach, 2012). It aims to identify and understand what features make a city age-friendly, and features that impose barriers to age-friendliness (Neal & DeLaTorre, 2009). This planning framework initially involved approximately 35 cities around the world including Portland, Oregon and New York City (Buffel et al., 2012; Neal & DeLaTorre, 2009). Each city convened a focus group involving older adults, caregivers, service providers,

and other stakeholders to help identify factors essential to an age-friendly city (Buffel et al., 2012; Neal & DeLaTorre, 2009). Their input help identified the following domains: outdoor spaces and buildings, transportation, housing, respect and social inclusion, social participation, civic participation and employment, communication and information, and community support and health services (Neal & DeLaTorre, 2009). Domains then evolved into a comprehensive guide and model to help government officials, planners, and policy makers build cities friendly for all ages (Buffel et al., 2012; Kennedy, 2010; Neal & DeLatorre, 2009). In conclusion, the intended result of the project was to stimulate local actions and policy changes necessary for age-friendly cities.

Researchers further discussed the action taken by U.S. Aging-Friendly Cities Project initiative participants (Neal and DeLatorre, 2009). Portland State University Institute of Aging conducted a project with support from state's AARP chapter (Scharlach, 2012). They held a town hall meeting, which involved a presentation of results to local government officials and other stakeholders; and held a meeting with Portland's Bureau of Planning to discuss suggestions for improving cities age-friendliness (Neal & DeLatorre, 2009). Age Friendly New York City, a joint effort between City of New York and the New York Academy of Medicine, established two "ageing-improvement districts" (Scharlach, 2012, p. 31). To date, Age Friendly New York City efforts has collaborated with public and private partners and local business.

### **Community Partnerships for Older Adults**

Community Partnerships for Older Adults (CPFOA) is a national initiative, funded by the Robert Wood Johnson Foundation (Bailey, 2009; Lehning et al., 2012; Scharlach, 2012). This initiative is identified as a cross-sector systems change initiative,

which is an interorganizational approach and collaborative effort developed to improve current programs, services and infrastructures for older community members (Lehning et al., 2014; Scharlach, 2012). In fact, older adults play a significant role in providing input and developing the initiative (Lehning et al., 2012). The CPFOA program intends on; strengthening the long-term care system (Bailey, 2009; Scharlach, 2012); develop community leaders and promotes ideas and solutions to meet older adults needs (Bailey, 2009); and form partnerships between community stakeholders- local governments, social service providers, policy makers, and older adults (Lehning et al., 2012).

Additionally, stakeholders collaborate to identify significant challenges and barriers that affect older person and communities as an effort to promote better lives for older adults (Bailey, 2009). Thus far, 16 U.S. communities have received CPFOA grant funds in the following regions: Atlanta, New Hampshire, Hawaii, and New York (Scharlach, 2012).

Each grantee is provided \$750,000 to form partnerships and carryout projects (Scharlach, 2012). Project areas included service provider training, program development, policy development, and civic engagement (Scharlach, 2012). The Aging Atlanta Partnership LLCs Initiative successfully informed changes to senior housing zoning ordinances and Aging Together Partnership of Culpeper (Bailey, 2009). Virginia convened a large number of jurisdictions and organization, and developed an adult day program for older adults within its region; and Aging Future Partnership of Broome County, New York developed a training program to inform builders, planners, developers, and planning commission of strategies to design lifelong homes and communities (Bailey, 2009). Factors such as shared leadership and a common agenda among partners contributed to progress made by grant recipients (Bailey, 2009).

### **Naturally Occurring Retirement Supportive Services Program Model**

Naturally Occurring Retirement Supportive Services Program (NORC-SSP) model was first established in the mid-1980s in New York (Guo & Castillo, 2012; Greenfield et al., 2012; Greenfield, 2014; Ivery, Akstein-Kahan, & Murphy, 2010; Scharlach, 2012). NORC-SSP is one of the longest standing models that have been implemented at the national level (Greenfield, 2014). NORC-SSP is a partnership that involves older residents work with government agencies, health and social service providers, housing administrators, philanthropic organizations, and other community organizations collaborate to help older adults age in place by improving services and programs tailored to their needs (Greenfield et al., 2012; Guo & Castillo, 2012; Ivery et al., 2010; Scharlach, 2012). This model is focused on providing a wide range of services, including: case management and social work services; health care management and prevention programs; education, socialization, and recreational activities; and volunteer opportunities (Greenfield, 2014; Greenfield et al., 2012; Guo & Castillo, 2012; Scharlach, 2012). There is little research on whether NORC service delivery model and programs processes promote aging in place (Greenfield, 2014). Whereas, most research on the NORC-SSP model has been related to outcomes on health, service usage, performance, and older persons' perceptions about aging in place (Ivery et al., 2010); and characterizing and establishing model, and identifying concerns with implementing model (Greenfield et al., 2012; Guo & Castillo, 2012) .

NORC programs and services are normally administered and coordinated by a lead agency (Ivery et al., 2012; Greenfield, 2014; Greenfield et al., 2012). The lead

agency typically is community-based nonprofit social service provider that directly responsible for “developing partnerships, managing finances, and coordinating the services that are facilitated by the program” (Greenfield, 2012, p. 229). For example, the Jewish Federation of Greater Atlanta (JFGA) collaborates with local Area Agency on Aging (AAA) to identify an appropriate lead agency to coordinate and provide services at each six NORC sites in Georgia (Ivery et al., 2012). JFGA identified the Atlanta Regional Commission as a lead agency whose community partners included: Fulton County Aging Services, City of East Point, East Point Community Action Team, and East Point Police Department (Ivery et al., 2012). Those sites are recognized as pilot programs, benefiting designated NORC communities based on needs identified within the community assessments (Ivery et al., 2012).

NORCs contribute to the development community-based programs that can support aging in place (Ivery et al., 2012). The NORC-SSP model helped meet older adults’ health and wellbeing needs while aging in place, and even prevented institutionalized care (Guo & Castillo, 2012). NORC services are necessary for developing livable communities, which foster independent living among older adults aging in place. Another benefit to implementing the NORC-SSP model is a cost reduction associated with a growing aging population and their long-term. This model also offers a flexible approach to programming, implementing, and service delivery with much involvement from older adults, which is appropriate as long-term care needs change continuously. Lastly, NORC programs and services are resourceful, viable for older adults served through model to live quality and longer lives.

However, “there are many advantages and support for increased development and delivery of services and programs targeting elder through NORCs” (Guo & Castillo, p. 223). The main challenge is the diversity of older residents living in NORC communities, such as; racial, ethnic, cultural, and gender that service providers and must consider to ensure their needs are met (Guo & Castillo, 2012). Many older adults lack accessibility to programs and socialization because of proximity and mobility issue, which calls for additional funding to expand services (Guo & Castillo, 2012). Increased funding coupled with additional resources is recommended for developing, planning, monitoring, and evaluating NORCs to sustain its programs and services. The support of federal, state, and local governments are necessary to develop more NORC-SSPs throughout other U.S. communities (Guo & Castillo, 2012). In their conclusion is a recommendation for additional research that will explore best practices within the NORC-SSP model and other innovative aging models (Guo & Castillo, 2012).

### **Aging Atlanta**

Aging Atlanta is a typical community planning initiatives led by government that involved actions such as strategic planning and need assessments to assist in addressing issues faced by older residents (Scharlach, 2009). Robert Wood Johnson Foundation’s Community Partnerships for Older Adults program (Lawler & Berger, 2009; Ory, Liles, & Lawler, 2009) funded this initiative. Aging Atlanta was driven by data showing where older person wanted to remain in their homes, yet communities within the region were ill equipped or ill-prepared to meet those needs (Ory, Liles & Lawler, 2009). As a result, Aging Atlanta was instrumental in significant policy changes, more relevant direct services, expanded transportation system, and new health program implementations

(Keyes et al., 2011; Lawler & Berger, 2009; Ory et al., 2009). Communities are even more aware of older adults needs, and have progressed towards promoting more healthy and active living (Ory et al., 2009).

Helpful lessons and recommendations were also discovered from Aging Atlanta. For instance, “in order to scale up these promising practices, providers and planners in the region would have to make partnership a permanent part of the way they work” (Lawler & Berger, 2009, p. 77). Scholars noted much work was still required in order for Atlanta’s region and communities to truly become a place that is livable for all people (Ory et al., 2009). These ideas and practices later successfully evolved into the second phase of Aging Atlanta (Ory et al., 2009), the LLC initiative, a much more comprehensive approach led by the Atlanta Regional Commission (Keyes et al., 2011; Ory et al., 2009). Based on the gap in literature, the results of this study identified lessons learned and best practices related to process involved in new initiative.

### **Lifelong Communities Initiative**

#### **Background**

ARC, Atlanta’s regional commission, the Area Agency on Aging, and planning agency, developed the LLCs initiative in 2007 as a comprehensive community planning effort that helps communities respond to the changing needs of a rapid growing and diverse population (Keyes, et al., 2011; Lawler & Berger, 2009;). The LLC initiative was developed as a new paradigm that understands meeting the growing aging population not only fosters all levels of supportive programs and services and healthcare, but also integrating plans and regulations for the built environment (Keyes et al., 2014). ARC also developed this initiative to illustrate the relationship between livable communities and

age-friendly communities (Keyes et al., 2014). Ultimately, ARC wanted the LLC initiative to reform Atlanta metro communities into places people of all ages and needs can live for a lifetime (Keyes et al., 2011). Scholars further discussed the elements, goals, and principles of this initiative provided via the LLC framework (Blumberg et al., 2010; Keyes et al., 2011; Keyes et al., 2014;).

### **Framework**

The LLC framework has three main goals: to promote housing and transportation options; encourage healthy lifestyles; and to expand information services and access (Blumberg et al., 2010; Keyes et al., 2011; Keyes et al., 2014; Lawler & Berger, 2009). Research noted that after these goals were developed, ARC, the Area Agency on Agency, aligned its services and programs to support its intended outcome (Blumberg et al., 2010). Another study included evidence of those goals, which includes new housing options, alternative transportation, walkable communities, physical and social well-being, preventative health care options, and expanded health and supportive services (Keyes et al., 2014). Meanwhile, ARC uses the framework and related goals to guide leaders and residents on how to think, plan, and design communities that service all age groups and abilities (Keyes et al., 2011). The LLC framework was continually introduced to ARC's 10-county region, communicating data and research to elected officials, county staff and community stakeholders about the needs of their aging local population (Blumberg et al., 2010); and to determine the feasibility of implementing the LLC initiative locally (Keyes et al., 2014). By the second year, the initiative was further developed to include a set of guiding principles and regulations (Keyes et al., 2011).



ARC hosted a charrette, a design workshop which convened aging, health, housing, transportation, planning, architecture, and other experts and challenged them to implement the LLC framework in six different sites (Keyes et al., 2011). The charrette planning process was intended to foster a multidisciplinary approach to community design and development and increase the regional interest, awareness, and momentum around these issues (Keyes et al., 2011). Scholars reported that charrette participants developed six master plans and produced a set of principles on how to create lifelong communities (Blumberg et al., 2010; Keyes et al., 2011; Keyes et al., 2014). The seven core principles are connectivity; pedestrian access and transit; neighborhood retail and services; social interaction; dwelling types; healthy living; and consideration for existing residents (Blumberg et al., 2010; Keyes et al., 2011). The charrette concluded with conceptual the master plans at the six sites that would serve as best practices for implementing the LLC framework, and a tool kit for local government officials to determine opportunities to integrate LLC principles in development projects (Keyes et al., 2011).

### **Planning**

ARC provides a range of support for communities to successfully implement LLC initiative and principles (Keyes et al., 2014). Yet, existing local government rules and regulations, zoning codes, and transportation are typical planning barriers within regional jurisdictions that makes it challenging to implement all LLC principles (Keyes et al., 2014) and build a lifelong community (Blumberg et al., 2010). However, the number of new partner communities is increasing to commit to carrying out the LLC principles within their jurisdictions (Keyes et al., 2014). Even ARC integrated the LLC initiative

internally within its 30-year land use and transportation plan, and Livable Communities initiative (Blumberg et al., 2010; Keyes et al., 2014). Literature described more activities of jurisdictions and communities who adopted the LLC principles, but provides little information regarding subsequent implementations (Blumberg et al., 2010).

### **Implementation**

ARC selected the City of Mableton in Cobb County as the first site to fully implement and test the LLC initiative (Keyes et al., 2014). This case study helped ARC understand the initiative's effectiveness and identify necessary tools to move communities from planning to implementation activities (Keyes et al., 2014). To date, the LLC initiative has been replicated in nine other communities including: Avondale Estates, Beltline/Boulevard, Clayton County, the City of Conyers, the City of Decatur, East Point, Stella Place, Toco Hills and eleven Atlanta Housing Authority high-rises (Keyes et al., 2014). These communities have completed a number of activities concerning their aging population such as: housing and transportation surveys; adopting new zoning ordinances and housing and transportation plans; integrated older adults needs within redevelopment plans; started walking clubs and mapped walking and biking trails; and developed community gardens (Blumberg et al., 2010; Lawler & Berger, 2009). Scholars also indicated that "four local government adopted resolutions supporting LLC Communities Principles" (Keyes et al., 2014, p. 127). This work is ever evolving across the region as local government demonstrate leadership in policy, program, comprehensive plans, and zoning and building codes changes to support all residents (Blumberg et al., 2010).

Literature indicated that implementation activities have not only been external, but ARC also adopted LLC principles and performed internal activities to ensure alignment with the three supporting goals (Blumberg et al., 2010). For instance, after ARC examined the Aging Division programs, the staff structure was change to ensure to ensure all individuals' scope of work reflected the LLC goals (Blumberg et al., 2010). The ARC board, comprised of local government officials from across the region adopted agency-wide goals based on the LLC initiative (Keyes et al., 2014). To this extent, issues of the aging population are integrated within agency's 30 year plan and priority of the 10-county head elected officials and Atlanta Mayor (Blumberg et al., 2010). The agency has been recognized at the local, state, and national levels its commitment to the aging field through the LLC initiative (Keyes et al., 2014). ARC also provides technical assistance, which entails best practices and lesson learned to local government and communities interested in launching a LLC (Keyes et al., 2014).

### **Lessons Learned and Best Practices**

Results from the Lifelong Mableton case study indicated that successful implementation requires support from local government and related community and civic groups (Keyes et al., 2014). Best practices also derived from that case study for communities involved in implementing the LLC initiative including: tailor lifelong community approach to individual community; strong leadership among government and civic groups is vital, celebrate wins throughout process to support continued involvement in the LLC initiative; involve individuals impacted by a LLC in planning and implementing as necessary (Keyes et al., 2014; Lawler & Berger, 2009). Overall, the

LLC initiative is a clear-cut model and aggressive method that supports meeting the needs of the aging population within region (Keyes et al., 2014).

### **Summary**

To conclude, the literature review highlights current literature on aging in place and related frameworks, and promotes future research within the field of study. Yet, it is only a contribution to existing literature as research published in many articles, reviews, and books are emerging related to this innovative study topic. The review of literature was found to be highly resourceful, reflecting key elements and practices for communities to further support older adults and aging in place. On the other hand, peer-reviewed articles are restricted to particular information on implementation and coordination of aging in place efforts within communities employing qualitative case study approaches. Comprehensive discussions on aging in place components further the study into the world of aging in place frameworks and initiatives. However, because of the intricacies and distinctiveness of the study, focusing the literature on an innovative aging in place initiative at the local government level corresponds to specific research and analysis challenges. Due to applying current theory and literature, I illustrate and provide a greater level of understanding related to issues involving local government officials implementing aging in place initiatives. Chapter 3 consists of detailed discussions and review of the research design and approach, methodology, validity and reliability, participant and recruitment, data collection and analysis, instrumentation, and dissemination of findings.

## Chapter 3: Research Method

### **Introduction**

The purpose of this study was to explore and describe the experiences and perceptions of local government officials who adopted the LLC initiative in the Atlanta region in an effort towards supporting the needs of their local aging population. I highlighted the best practices and gathered an in-depth understanding of the process and practices involved in adopting principles that may increase the interest of current and future local government officials engaged in developing a LLC to promote aging in place. To answer the research questions, a qualitative methodology was used. I conducted face-to-face interviews with local government officials and reviewed internal documents to identify the participants' perceptions and to explore the actions and insights of the participants. A qualitative design was used to explore and understand how local government officials use the LLC initiative within their organization's planning, policy processes, and overall agenda for older adults, which was the primary focus of this study. Because little research has been conducted on this topic, employing a case study approach helped me to identify missing information within the literature (Yin, 2003). The case study inquiry was aligned with the principles of the ecology theory of aging and the ECM.

The information collected will be presented to the ARC board members, Aging and Health Resource Division, and Aging and Health Resource Committee to assist these agencies in establishing best practices and guidance as a tool for local government officials adopting the LLC initiative in effort to address issues that impact the region's aging population.

Chapter 3 includes explanations of the research method used to carry out the design strategy connected to adopting the LLC initiative. A case study design was selected for this study to examine the perceptions of local government officials who adopted the LLC initiative between the years of 2008-2013 in the Atlanta region. In this chapter, I discuss the case study design as a preferred method. Additionally, I highlight the instrumentation activities and steps for identification, recruitment, and data collection. In conclusion, Chapter 3 provides a detailed data analysis plan to further study.

### **Research Questions**

The research design was aligned to help answer one central question: How have six local government officials within the Atlanta region who adopted the LLC initiative between years 2008-2013 used them to ensure the quality of life for members of their community? The following sub questions supported the main investigation:

1. How do local government officials perceive the LLC initiative?
2. What are the perceived benefits in adopting the LLC principles within an Atlanta region community?
3. What are the perceived challenges in adopting the LLC principles within an Atlanta region local community?
4. What components of the LLC initiative need to be altered or added for improvement?

### **Research Design and Rationale**

A qualitative method was chosen to address the research questions that guided this study. Qualitative researchers favor collecting data within participants' natural setting, attempting to make sense of or interpret the phenomena in terms of the meanings

participants bring to them (Creswell, 2009, p. 44). Qualitative research contains explicit practices essential to changing worldviews that are captured through interviews, observations, field notes, and other means of collecting qualitative data (Creswell, 2009). The flow of qualitative research includes researcher-based assumptions, identifying a theoretical framework, selecting research inquiry, data collection, data analysis, data presentation to field of study, and future implications to literature and social change (Creswell, 2009). A qualitative researcher seeks to implement social change or inform others within field of study of social change opportunities.

### **Role of the Researcher**

The researcher is the main instrument for collecting data in a qualitative study (Patton, 2002). For this study, I used face-to-face interviews to collect data. I also collected secondary data sources, including participants' planning, policy, and procedural documents and the interview protocol. The interview protocol was used to gather field notes to document my comments and observations. I provided a consent form that explained the purpose of the study, timing and procedures, how information would be used, and the confidentiality of voluntary information to all participants. I ensured any possible bias was absent from this study. All information collected, including field notes, was properly and accurately written and recorded using a digital recorder. Member checking involves sharing findings—case analysis, final report, or themes-- with voluntary participants (Creswell, 2009, p. 191) and was administered during data collection and analysis of the study to lessen biases. Relying on evidence from selected data sources (interviews and a review of participants' documents related to the LLC initiative) helped reduce any possible researcher bias. I incorporated reflective journaling,

a preferred and feasible method to manage bias in the study (Ortlipp, 2008). The information captured from reflective journaling was used for data analysis purposes, particularly as it pertained to developing codes and categories. Local government officials directly responsible for adopting the LLC initiative were participants in the study, but I did not include any persons I have a personal association or relationship with.

## **Methodology**

### **Case Study Selection**

To obtain a holistic and realistic view of research questions, I used a qualitative case study design. Based on a constructivist paradigm, a case study provides the researcher with an in-depth understanding of participants' actions through descriptive stories of participants' perceptions on views (Baxter & Jack, 2008). I gathered descriptions of current planning and practices to support local government officials in the Atlanta region who adopted the LLC initiative.

A case study inquiry is appropriate for exploring and understanding real-life situations involving participants provided through multiples lenses such as documents, artifacts, interviews, and observations (Creswell, 2009; Patton, 2002). Case studies can be used to reveal how processes and plans are implemented (Yin, 2003). Meaningful themes and patterns emerged to strengthen this study's data analysis and support the interpretation of local government officials' perceptions and attitudes concerning the LLC initiative. In terms of bounding, this study was limited to local government officials who led their organizations in adopting the LLC initiative within the years of 2008-2013. In this case study inquiry, I investigated local government officials' attitudes and perceptions within a real life environment that was bounded by a definitive time and



place (Yin, 2003). Selecting a case study design is further validated by (a) the strategy to explore multiple data sources, (b) the study focus on answering “how” and “why” research questions, and (c) insight into a case representing new research (Baxter & Jack, 2008; Creswell, 2009; Patton, 2002). In this study, data were collected using interviews and documents that describe current plans, policies, and procedures. Schramm (as cited in Yin, 2003) highlighted that scholars use case studies to illustrate a decision or a set of decisions, why they were appropriate, how they were implemented, and results of all associated activities. Hence, a case study is consistent with this study’s purpose to explore the process that could serve as best practices to other local government officials or stakeholders related to LLC efforts.

Other qualitative strategies of inquiry were considered. However, they were not suitable for the purpose of this study. For instance, the ethnographic design was considered because its approach includes efforts to understand and define interactions of a cultural group (Creswell, 2009). However, this design was more appropriate for studies that require the researcher to be fully immersed in a study over an extended period time.

### **Validity and Reliability**

Validity and reliability are used to increase rigor in qualitative research, particularly with a case study design. Triangulation, a strategy scholars illustrated as combining and examining multiple data sources (Baxter & Jack, 2008; Creswell, 2009; Patton, 2002), is used to ensure the validity of qualitative study results. I triangulated data from interviews and document reviews to help validate accurate findings, appropriately formulate justifications for themes, and eliminates bias that may result from using a

single research method. I also revealed my personal bias brought to the study, which increased the validity and reliability of the study.

Reliability is applied to test a case study for successful completion, meaning “the researcher’s approach is consistent across different researchers and different projects” (Creswell, 2009, p. 190). Reliability is also achieved when researchers document all procedures and steps involved in conducting a case study research (Yin, 2003). Therefore, Yin (2003) suggested developing a case study protocol and database (p. 41). An interview protocol and database were developed to help me to attain accurate data, reduce biases, and allow for replication of the case study with unique results and findings. The interview protocol and consent form elaborated on the purpose and significance of study, how results were used, and possible ethical concerns.

### **Participants and Recruitment**

The target population selected for this case study consisted of six local government officials within the Atlanta region, which includes the following 10 counties: Cherokee, Clayton, Cobb, DeKalb, Douglas, Fayette, Fulton, Gwinnet, Henry, and Rockdale counties, and the city of Atlanta. This sample population for this study was drawn using purposive sampling, a nonprobability sampling approach. A researcher uses purposive sampling to develop inferences about a specific population (Quarterman, 2008). This study’s participants represented a homogeneous sample, which is a sample that has related characteristics (Holloway & Wheeler, 2009). Participants had to be local government officials who participated in adopting the LLC initiative between the years of 2008-2013. Each participant required some knowledge on community development and planning and aging in place and its priorities and impact on older adults and communities

throughout the Atlanta region. It is critical that the sampling strategy is aligned with the research questions, objectives, and framework (Patton, 2002). Thus, the participants selected for this case study were selected based on their collective experiences in adopting the LLC initiative to address the needs of older adults within Atlanta region communities. The sample included local government officials—city managers, county administrators, or aging service directors who were identified with assistance from the ARC Aging and Health Resource Division staff as persons instrumental in spearheading the LLC initiative at the local level. The ARC staff provided me with a list of potential participants who met the criteria for this study. Then, participants received an e-mail invitation. The invitation included information regarding the purpose and nature of the study and an explanation of participant requirements. Additionally, the criteria for the study included the following: Only local government official with experience adopting the LLC initiative between the years of 2008-2013 could participate. Once I received notification from potential participants who agreed to participate, I sent participants a consent form, which is discussed later in Chapter 3. I did not begin any data collection procedures without a signed consent from each participant.

### **Data Collection**

The purpose of this study was to examine the experiences of local government officials involved in adopting the LLC initiative and whether their actions ensured a quality of life for community members served. Data collection procedures include establishing boundaries for the study, identifying the data collection type, and creating a protocol to record findings (Creswell, 2009). I used the following strategies to collect data: face-to-face interviews and public document reviews. A case study's strength is "its

ability to deal with a full variety of evidence - documents, artifacts, interviews, and observations" (Yin, 2003, p. 8). To ensure the validity of the study results and to uphold data integrity, data were collected, recorded, and written (Maxwell, 2005). After receiving a list of potential participants who met the study criteria from ARC, I contacted each person by phone to verify his or her e-mail address. This process was followed by an invitation e-mail to 10 potential participants that explained the purpose of the study and interviewing protocol. Information regarding consent was communicated to interviewees prior to the interview via the recruitment e-mail (Appendix B) and informed consent form. Seven potential participants responded to the invite, and six elected to participate in a face-to-face interview. Each interview was scheduled and held at the research participant's individual worksite. Participants were asked to set aside at least 1 hour for interviews. Each participant was referred to by a pseudonym such as RP1, RP2, RP3, RP4, RP5, and RP6 throughout interviews, transcriptions, coding, and summary. A digital voice recorder was used to record interviews, which allows the researcher to revisit information when needed (Farber, 2006). The transcribed data were coded and stored on a password-protected external hard drive. Evidence captured and interpreted from internal public document aided me in understanding how the local government officials actually used the LLC principles within their organizations. All data collected (including interview protocol forms, digital recordings, collected public documents, and transcriptions) will be securely kept in a locked file cabinet. After 5 years, all data will be erased and destroyed.

### **Data Analysis**

An appropriate data analysis process was identified to examine understand the collected data. Priest, Roberts, and Woods (2002) provided descriptive qualitative data analysis steps and procedures that I employed in this case study. Because this project is a qualitative case study, additional data analysis and interpretation best practices were facilitated. After interviews are conducted, the data should be transcribed (Patton, 2002). Each digital recording was typed verbatim using Express Scribe, and I read the transcript several times to identify key terms, phrases, patterns, and insights. Each transcript included the pseudonym and no identifying information about participants. The transcripts were examined to identify key themes and central ideas of the study (Smith et al., 2009). A member check was conducted to verify findings with the participants, which is a component of the analysis and can reinforce validity (Hartley, 2004).

I applied first level coding, a line-by-line analysis of each transcript. NVivo 10 was used to assist with hand coding procedures. The codes derived from this process revealed concepts and categories within the data; these concepts and categories subsequently became master codes and headings as a foundation of the analysis (Priest et al., 2002). After the interviews were coded, they were coupled with the data analysis, and the transcripts were reviewed consecutively to determine the main themes to identify actual meanings. Then, second-level coding was performed to narrow and refine the first-level coding. Then the data were organized around key themes, which required close examination in relation to categories (Hartley, 2004). This process led to significant patterns, categories, and core themes. A final code list was developed that I frequently checked and questioned, in addition to the emerging themes. Coding was verified and

internal audits and member checking were conducted through two stages of analysis (Lincoln & Guba, 1985). NVivo 10 was used to create the initial coding for each participant and the information collected from the participants. In addition, NVivo 10 allowed me to create, store, manage, edit, code, and examine multiple transcripts with different emergent themes. I uploaded all interview transcripts into NVivo 10, and I coded for emergent themes that maybe used to develop insights about how local government officials within the Atlanta region who used the LLC initiative to ensure the quality of life for members of their community.

A thematic approach was applied, which was suitable to respond to the following inquiries: (a) who says what, (b) to whom, (c) why, (d) how, (e) and with what effect (Babbie, 2003). Each reoccurring theme was clustered to create each central idea for the study. These clusters of themes provided the evidence for expanding the phenomenon using descriptive texts. Finally, a cross analysis of participant interviews was performed to identify similarities and differences in perception. The final analysis of findings are presented and interpreted in Chapter 4.

### **Instrumentation**

Commonly used data collection strategies in qualitative research involve observations, interview, documents, and audio visual materials (Patton, 2002). Data were collected using face-to-face interviews and a review of planning, policy, and other internal document related to the study's topic. The use of both data sources represented triangulation to increase the validity of this study. Interviews and document reviews helped me to gather pertinent information to understand the processes and practices involving local government officials who adopted the LLC initiative.

## **Interviews**

General steps for interviewing entailed the researcher; identifying research questions that participants answered during the interview; identifying participants that met criteria for study, indicated the type of interview (i.e. in person, phone, or focus group), selected recording equipment and tools, identified physical location(s) for interviews, and developed interview protocol. Creswell (2009) highlighted data collection approaches for interviews, in which the following was employed to this research: “conduct a semi structured interview, audio tape the interview, and transcribe the interview” (p. 182). A set of open-ended questions was utilized; however, I remained open to discuss unanticipated information that supported the purpose of this study. The interview protocol form for this study included designated sections to document study title, date, time, place, and participant descriptors. This form also informed the purpose of study to interviewees, and described length of interview, consent information, and dissemination of results.

In addition to the interview protocol, interviews were recorded with a digital recorder to ensure accurate information, but at participants’ consent. Recorded information reflected all verbal exchanges taken place during interview that was analyzed and transcribed. Recording information is the basis to which a researcher should take notes (Creswell, 2009). To reflect such, note taking was performed to notate important points and reflections observed from participants throughout interview.

## **Document Review**

Though the primary source for data derived from interviews, participants' publicly planning, procedure, and policy documents were examined. Securing those documents for review helped better understand the implemented process and practices related to adopting the LLC initiative. The results from document review served as written evidence that was compared with interview results to validated findings and developed rich descriptions of participants' processes and practices.

### **Dissemination of Findings**

The results of this study will be reported to a diverse group of professionals, which separated into the following categories:

1. Atlanta Regional Commission (ARC)—board members, Aging and Health Resource Division, and Aging and Health Resource Committee.
2. Local government officials—city managers, county administrators, senior service directors, and planning directors.

Both groups may benefit from information about practical strategies and challenges related to implementing the LLC initiative at the local government level. A 1-2 page summary of research results was disseminated to participants by e-mail via blind carbon copy. In addition, a PowerPoint presentation will be developed to present research results to stakeholders and participants as requested. Research results will be presented in a clear, concise, and presentable manner, and will consist of conclusions, best practices, recommendations and actions items to support current and future LLC sites and an overall enhanced LLC framework.



### **Summary**

This chapter consisted of detailed discussions and review of the research design and approach, methodology, validity and reliability, participant and recruitment, data collection and analysis, instrumentation, and dissemination of findings. This research study was further enhanced and supported by the research methodology described in detailed within Chapter 3, which also addressed all components of a high quality case study. It is important that I closely aligned my research methodology and purpose and nature of study to ensure my proposal was approved, so I could begin the research. As a result, the final two chapters consist of results, a detailed summary, conclusion, and recommendations for study field.

## Chapter 4: Results

### **Introduction**

The purpose of this qualitative case study was to explore and describe the experiences of local government officials who adopted the LLC principles within the years of 2008-2013. Six research participants shared in-depth responses on the processes and practices involved in adopting the LLC principles to support the development of their local LLC and to promote aging in place. All data collected were collected to address the following research questions:

Central Research Question (RQ1). How have six local government officials within the Atlanta region who adopted the LLC initiative between years 2008-2013 used them to ensure the quality of life for members of their community?

Subquestion 1: How do local government officials perceive the LLC initiative?

Subquestion 2: What are the perceived benefits in adopting the LLC principles within an Atlanta region community?

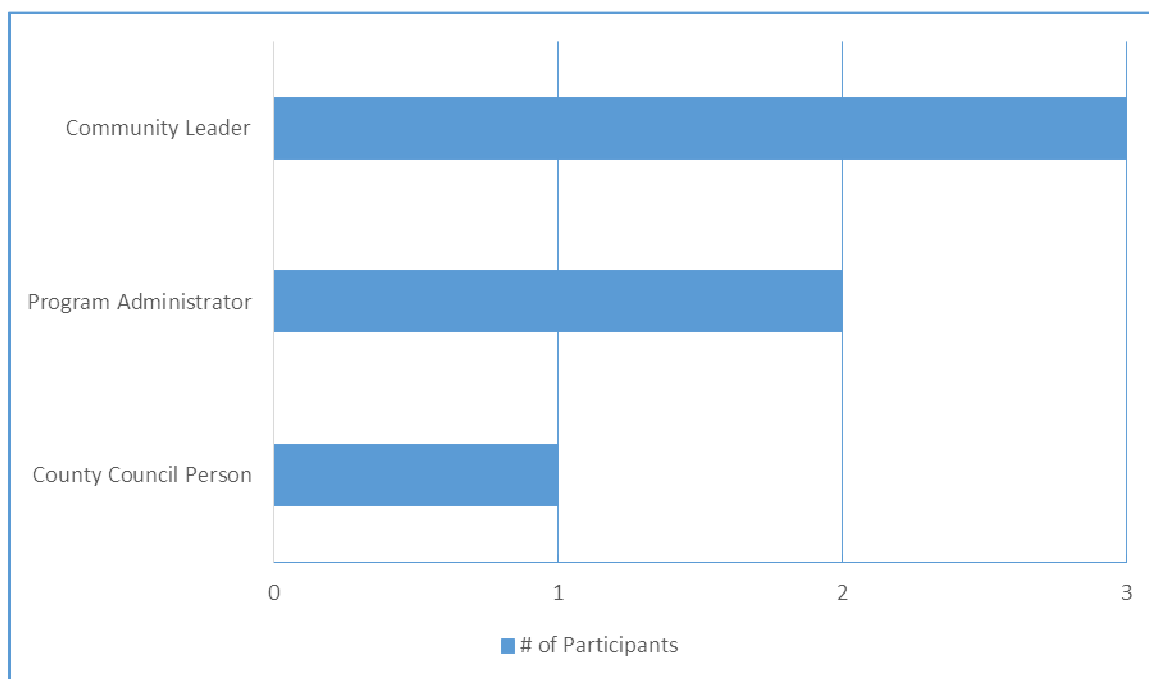
Subquestion 3: What are the perceived challenges in adopting the LLC principles within an Atlanta region local community?

Subquestion 4: What components of the LLC initiative need to be altered or added for improvement?

Chapter 4 has the following sections: (a) the profile of research participants; (b) the data collection and analysis procedures; (c) the summary of research participants' experiences and perceptions discovered during face-to-face interviews; (d) the identification of themes and patterns, including rich descriptions; (e) the evidence of quality and accurate data; and (f) the final summary of the research results.

## **Participants**

Ten local government officials (county administrator, city manager, and aging services administrator) were contacted for this study based on a list provided by the ARC (community partner). An ARC staff person identified persons who met the inclusion and exclusion criteria. To qualify, participants had to be local government officials who adopted the LLC initiative between the years of 2008-2013. In addition, participants had to have knowledge on aging in place and its priorities and impact on older adults and communities throughout the Atlanta region. The exclusion criteria were local government officials who did not participate in adopting the LLC initiative between the years of 2008-2013. The participants of this study were six seasoned local government officials who had years of experience and interest in the areas of community development, planning, or aging. Six of the research participants identified themselves as local government professionals. The participating local government officials consisted of one county council member, three program administrators, and two community leaders who had been active in implementing the LLC initiative at the community level. However, for the nature of this study, participants were classified as local government officials (see Figure 1). Demographics including age, sex, income, or any other personal characteristics were not elements within this design of the study and were not collected during any phase of the research.



*Figure 1.* Representation of research participants based on their local government professional title.

All participants were interviewed face-to-face using a set of open-ended questions. I learned from the interview responses that most participants adopted the LLC principles as recent as 2009, and their average years of work experience was over 10. Lastly, to ensure confidentiality and anonymity, the research participants are referred to as RP1 through RP6 throughout this chapter.

### **Data Collection**

The data collection process began once I received approval from Walden University's Institutional Review Board (IRB) to conduct research. I received approval on September 3, 2015, and the assigned approval number was 09-03-15-0176620. I used the following strategies to collect data: face-to-face interviews and public document reviews. I contacted the Director of the Aging and Health Resources Division at ARC to

obtain a list of potential participants who met the study criteria. After receiving the list, I contacted potential participants by phone to verify e-mail address. I sent an invitation e-mail to 10 potential participants and explained the purpose of the study and interview protocol. I received responses from seven of those invited individuals, and six elected to participate in a face-to-face interview. The one individual who opted out did not provide a valid reason. I scheduled and conducted face-to-face interviews with all research participants. Each interview was held at the research participants' individual worksite. The worksite allowed me to understand the phenomena based on the research participants' perspectives and their real-life experiences. Onsite interviews were conducted between September 9 and September 18, 2015 at six worksites located in the Atlanta region.

Six interviews were recorded using a digital recorder at the research participants' consent to ensure the accuracy of data. Information regarding consent was communicated to interviewees prior to the interview via the recruitment e-mail (see Appendix B) and informed consent form. Research participants confirmed their consent again at the beginning of each interview. The average time of completed interviews was 56.47 minutes. The time variables were reflective of each participant's level of preparedness to answer questions more so than the time needed to expound on responses. Participants who reviewed and reflected on interview questions prior to the interview were more prepared than those who did not prepare. Participants who were unprepared required extra time to process questions and recall related experiences and procedures.

Every digital recording was transcribed word-for-word using Express Scribe Transcription software. Additionally, the interview protocol (see Appendix A) was used

to structure the interview and was useful for notating points and reflections observed from the research participants. Field notes and comments from participants' reflections were documented on the interview protocol form. Journal entries drafted while reflective journaling were also documented in the feedback section of interview protocol form, which was necessary to manage biases. All documented notes and commentary were pertinent to the development of codes and categories.

Public documents and secondary sources of data provided me insight on the involved processes and procedures when implementing the LLC initiative or adopting LLC principles. Four participants provided a total of 12 document concerning policy, planning, procedural, evaluation, and facilitation as they relate to the LLC initiative's goals and principles. Table 1 summarizes the documents collected for this study. The documents provided by the research participants were used to validate their responses to the interview questions posed, the process of adopting LLC principles, the governance and operation of each organization, supportive plans, and procedures. The data from each interview and documents yielded a comprehensive viewpoint of the involved process in adopting LLC initiative and principles.

Table 1

*Document Collection Details*

Document	Research Participant (RP)	Date Collected
Inman Park Neighborhood Profile	RP1	September 9
Regional Strategic Plan	RP1	September 9
Lifelong Inman Park	RP1	September 9
Lifelong Decatur: 2014 Survey Summary and 2015 Goals	RP2	September 11
Decatur Lifelong Community Advisory Board	RP2	September 11
Decatur 2010 Strategic Plan	RP2	September 11
2014 Lifelong Decatur Survey: Final Report of Survey Results	RP2	September 11
Tucker Civic Association Minutes for Meeting	RP4	September 17
DeKalb County Board of Commissioners Business Agenda/Minutes	RP5	September 18
Mission of Lifelong DeKalb	RP5	September 18
2034 Comp Plan	RP6	September 18
2011 LCI Update	RP6	September 18

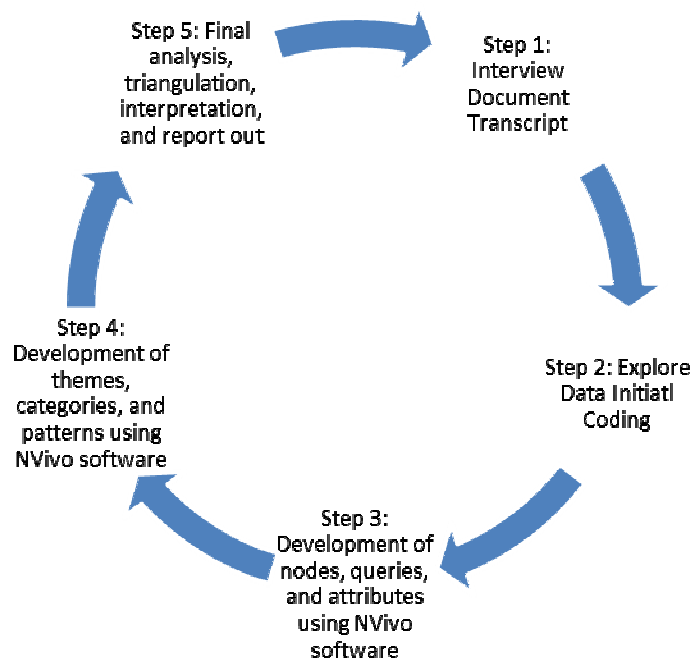
**Data Analysis**

Priest et al. (2002) provided descriptive qualitative data analysis steps and procedures that I employed for this case study (see Figure 2). To begin the data analysis process, I transcribed each audio interview using Express Scribe, reading each transcript twice to identify key terms, phrases, patterns, and insights. After this procedure, I applied first-level coding, a line-by-line analysis of each transcript. The codes derived from this process revealed concepts and categories within the data and subsequently became master codes and headings as a foundation of the analysis (Priest et al., 2002). Then, second-level coding was performed to narrow and refine the first-level coding. This process led to significant patterns, categories, and core themes. A final code list was developed that I

frequently checked and questioned, in addition to the emerging themes. Coding was verified and member checking was performed through two stages of analysis (Lincoln & Guba, 1985): initial coding by the qualitative researcher using NVivo 10 to create an initial coding structure and during independent reading of transcripts by participants with review and verification of coding structure.

Throughout data analysis, data needs to be organized categorically and chronologically, reviewed repeatedly, and continually coded (Farber, 2006). Thus, all interview transcripts were uploaded into NVivo 10 to assist with the hand coding process. NVivo 10 also served as a one-stop shop to manage, import, organize, share, export, and query data. The software provided me an opportunity to sort the data by various conceptual themes and subthemes. Themes emerged by linking categories to context, interaction strategies, and consequences. Then, I used this tool to sort the data and illustrate the categories in Microsoft Excel report format. The Excel spreadsheet had five columns that represented the coding structure. The first column was for comments, mainly from the reflexive notes and others derived throughout the process. The second and third columns were labeled category and subcategory for information gathered on each interview question. Columns 4 and 5 highlighted the number of participants represented in each category or subcategory and the amount interview content identified within each category. Major categories were in bold font, signifying as a possible theme. This information was then grouped and formulated for rationale and then interpreted and presented in the study.





*Figure 2.* Performed data analysis and interpretation process.

### **Evidence of Trustworthiness**

Credibility, transferability, dependability, and conformability are four common procedures that are used to confirm and evaluate qualitative studies (Creswell, 2009). First, I confirmed credibility and internal validity by using member checking, which involved me sharing findings (transcriptions, coding structure, themes, case analysis, and final report) with voluntary participants. As a result, I made slight changes to one participant's response and documented it on their interview transcript. Additionally, I triangulated using multiple data sources, relying on evidence from interviews and review of participants' documents to provide more detail about local government officials' experiences adopting the LLC initiative. The interview data served as my primary source of data, and document reviews provided confirmation and were related to the results that

developed from the interviews. I remained consistent with my initial credibility strategies discussed Chapter 3.

Transferability typically involves the researcher making generalizations about the research subject and, in most cases, is not an issue for qualitative research (Creswell, 2009). No generalizations were undertaken due to the nature of my study and sample size. To ensure dependability I maintained consistent data collection and analysis methods that others researchers could repeat. Data collection procedures consisted of face-to-face interviews, document reviews, and I created a protocol to record findings. Additional data analysis and interpretation procedures were facilitated via organizing data files, coding and applying notes to data, categorizing codes and themes, using textual and integral descriptions for analysis, and presenting data in tables and figures.

To ensure conformability I triangulated the data (interviews and document reviews) to formulate appropriate justifications for categories and themes. Finally, I used reflexive as a conformability strategies. One particular reflexive method I used was reflexive journaling that was outlined earlier in this chapter. I did not make any changes to my original conformability strategies described in Chapter 3. All four of these criteria of trustworthiness helped establish rigor and validity to the research of this study.

### **Presentation of Findings**

The data revealed five major themes and associated subthemes (Table 2). Four of the major themes were stable across the six communities, and the fifth theme defines the local environment and has a mediating influence on all the findings. Much of the contextual variability that defines the local environment emerged in the subthemes. The subthemes might be promoters or inhibitors within a community depending on the

capacity of the LLC leadership and/or the level of community involvement. The context for understanding the inter-relationship among the themes and subthemes is that everything is nested in the conditions (e.g., resources, policies, politics, etc.) of the local environment. This pervasive influence is indicated in the placement of the local environment across the base in Table 2, suggesting a substrate upon which the other four themes and subthemes rely.

Other influences permeating the data are the relationships among community characteristics and leadership. These interactions across themes are the focus of the triangulation section of the study in which all data sources are integrated. First, the major themes and subthemes are described and representative quotes are provided.

Table 2

*Themes and Subthemes for Local Officials' Interviews*

Major Themes	Subthemes
Strategic Planning	Build Capacity Using Existing Services Promote Sustainability
Collaboration and Leadership	Existing Agencies and Organizations Influential People
Benefits	Housing and Transportation Options Quality of Life Inclusion Education Outreach
Challenges	Funding Allocations (especially for Housing and Transportation) Resistance of Stakeholders
Local Environment	

## Strategic Planning

In describing the LLC initiative within the community and how the LLC principles were being implemented, all interviewees used the language of planning, forming committees for decision-making, and using survey data or existing policies to drive decisions.

We function as that already. And the board has approved it. We're just now in the process of being written into the bylaws, which is a very exciting process for us, because with that we had a very clear goal statement, you know, and it just helped us to once again strengthen the committee (RP1, personal communication, September 9, 2015).

And then, at the end of last year, we did our survey, which, a lot of those results dovetailed with the results of the strategic plan. So then we used the survey results for a strategic planning session that we held in January. So as a result of that, we developed some core goals for this year, and that's when we set up our committees (RP2, personal communication, September 11, 2015)

We just did its strategic planning session for 2015/16 initiatives, and that's in there, is to keep a conversation in the community going about what it is that will make {city} a lively community tomorrow, not one that's dying (RP3, personal communication, September 16, 2015).

There's an aging group, a transportation group, a housing group, and we actually have some people who blended over from our sustainable [city] committee be part of it (RP6, personal communication, September 18, 2015).

A review of Table 1 list the receipt of planning documents and survey reports from many of the communities supports the statements regarding strategic planning. That these documents were "living" and not growing dust on a shelf is suggested in the comments of RP2 who stated, "It reflects a lot of what we're focusing on as a lifelong community, and is actually the initial charge from the City Commission for the board."

Specific planning comments fell into two subthemes 1) building on existing resources and 2) promoting sustainability (Table 2). The subtext heard in all comments was the local environment - location and availability of vacant land, presence of existing city services, and current zoning codes. Nearly everyone spoke of using existing community resources and infrastructure in their strategic planning. Doing so demonstrated knowledge of or at least an awareness of zoning and planning regulations within their community.

We're looking at existing complexes, and we're looking at vacant land, so we have a very specific plan on how, how do we move this forward? And then, we want to look at the zoning issues, make sure we understand that as we prepare for possible assisted living, personal care home kind of situation here. And then, talking about city services, you know crosswalks, and transportation (RP1, personal communication, September 9, 2015).

We're planning to redo our zoning code. We're starting into that now, and talking about there being more of a unified development ordinance... allowing for a greater variety of housing options, and a great variety of housing mixes. Unfortunately, the whole Euclidian zoning initiative from the 20s and 30s through the suburban development period

has made it difficult for [city]. So, we're hoping to do a UDO to relax some of those (RP3, personal communication, September 16, 2015).

So that is a huge impediment, and, to be able to rework places, to be able to achieve a connectivity goal. On pedestrian access and transit, the cost of pedestrian infrastructure is substantial, particularly in areas where you're retrofitting. Every time that you retrofit, you're talking about piece-by-piece acquisition of rights of way. (RP5, personal communication, September 18, 2015)

Interviewees conveyed how strategic planning to promote sustainability has provided a road map to arrive at a lifelong community.

And a lot of the reason was is because so much of our county and the country was built during that baby boom era when people had that priority. But now, as people have aged through that, you can see that they are starting to say, okay, what's next? What is best for me now? That's why it's important to educate people that are, whose nests are emptying and they're thinking about what their next stage is, whether it is their later career or retirement. (RP5, personal communication, September 18, 2015)

It will allow us to take our community kicking and screaming into a place where it needs to be. If you were to implement the life-long community principles, then you have a town that can survive organically. That's why life-long community, sustainable community, is something--it's very real to me. I think one of the big problems we have right now in America is we

haven't let something grow organically since 1945 (RP6, personal communication, September 18, 2015).

So we're trying to figure out how to keep all those things together, as a central place for all people. That's one of the things the market was about, centrally locating a whole bunch of stuff and that's it a walkable community. We're talking about being more of a unified development ordinance, allowing for a greater variety of housing options, a great variety of housing mixes (RP3, personal communication, September 16, 2015).

### **Collaboration and Leadership**

Building collaborative relationships with local agencies, organizations, and community groups was a critical part of strategic planning—so critical it warranted a separate theme. Leadership capacity and personal agency of the person administering the LLC strongly influenced the success forming and maintaining collaborative relationships. Here, I show how engaging in collaboration was recognized as important to LLC implementation, especially with existing organizations and influential people. Local government officials are excited about collaborating with people of influence while adopting the LLC principles. Getting the buy-in and support of people of influence or decision makers are significant for progress. RP6 declared that their city council and mayor truly embraces all this stuff as it relates to the LLC initiative. RP2 said, “Our LLC Advisory Board was established by the City Commission, and they do have buy-in for this.” RP1 said, “our very exciting newest, sort of relationship development here is with the president of IPNA.” RP1 emphasized, “We are fortunate that we have a president of

IPNA who understands housing, that's his background." Additionally, collaborations are formed with the following groups:

Local government:

Luckily, the organization itself has tremendous buy-in. And I know our city manager, our management team, our city commission, they're all very concerned about us losing our diversity in Decatur, and losing a big segment of our community, because number one, we're not affordable anymore. So, we do have a lot of buy-in within the organization (RP2, personal communication, September 11, 2015).

Mainly the planning and zoning departments, development and planning. But our city manager, the admin office. I mean, I'm a firm believer that the whole city delivers economic development and community development. If our public works folks aren't doing their job in keeping the streets clean and filled, we're not going to have a place where somebody wants to build something else. We need to um, we have that cooperation (RP3, personal communication, September 16, 2015).

I have a lot of guys, people who work for me, we have a very good team. The city council, the mayor and council, actually embrace all this stuff. Like most small cities, we have a lot of fighting between the members, but we're fighting over how to get to the same place (RP6, personal communication, September 18, 2015).

Churches: "All, and these people come, now the great part about that is that we have, we are collaborating with a church for that, the Inman Park United Methodist Church is a



community church, and they have welcomed us” (RP1, personal communication, September 9, 2015).

Developers:

We're looking at how do we get the developer to incorporate and talk the language. To me it's much more important that he is excited about being part of a life-long community. You should hear this developer. He says to us, you've changed our business plan. I mean, what more do you want? So, that, I think that it's working for us (RP1, personal communication, September 9, 2015).

We've got a developer that's approaching us now who wants to do townhomes in that parking lot, because that parking lot, that whole thing was created when, you know, you needed these stores and every store had to have a huge number of parking spaces to support the retail, and on and on (RP3, personal communication, September 16, 2015).

Anyone who might be interested: “We sent out an invitation to the community as a whole through the local community newspaper, announcing it wherever we could” (RP1, personal communication, September 9, 2015). “Our LLC is through the [city] Civic Association, the group that participated in getting it going” (RP4, personal communication, September 17, 2015). “Our Community Improvement District was heavily involved in it here, [city] Village, and we had about 150 people in for a meeting” (RP6, personal communication, September 18, 2015).

We collaborated with folks from the ARC, persons explaining how the various boards and commissions interact. We had the head of the Decatur

Housing Authority...someone with NORCs...someone from Senior Village...someone from the state...someone from the county. So, we covered all our bases with education (RP2, personal communication, September 11, 2015).

The formation, health, and stability of collaborative relationships required considerable effort and nurturing by LLC leadership. If leadership did not have the personal agency to form collaborations or if a change in leadership occurred, the collaboration faltered.

Some LLC benefitted from leaders with proven skills as community activists or a deep knowledge of city practices:

I was elected in 2006 and took office in 2007. I am a practicing city planner, so I obviously was and am aware of the initiatives of the Atlanta Regional Commission as it relates to exploring responses to the demographic conditions in the region and projected demographic future of the region (RP5, personal communication, September 18, 2015).

I identify kind of several things early on, before I even was aware of those within the framework of that initiative, we have um, as part of the economic development and what we've done here, we've developed an entrepreneur program that starts in our local high school in ninth grade and goes to whatever age somebody is, all the way through adults, old adults (RP3, personal communication, September 16, 2015).

I had started with the city in 2000 as the volunteer coordinator. So, for a number of years, I've been working on that aspect in a way. And my

job before I came to the city of Decatur was working with, with seniors. I managed a senior community center. So I've always worked with folks who are older adults. And also various jobs I've had, various volunteering that I've done, I have, um, worked with, with a lot of people who are struggling, um, in various ways, you know. So, it's something I've been doing for a long time without a name to it (RP2, personal communication, September 11, 2015).

I had the contacts here. So, and that's what also allowed me to take this beyond my ARC working experience and into the community. Many of the people who came were people that I already knew, and had heard the discussion (RP1, personal communication, September 9, 2015).

The sources of the document list in Table 1 are mostly from the above research participants, which is another indicator of their commitment and involvement in the LLC initiative. Other LLCs had tumultuous years characterized by unanticipated leadership changes such as the following: "It was, it was just chance, because I am not a community leader. I am not; I am a very willing volunteer" (RP4, personal communication, September 17, 2015).

And [name] had gotten a group together, was kind of assembling the group, had a couple of meetings with them, had gotten them to engage into subcommittees that they would operate on, and then one day about noon, she left. I had the meeting with them that she was going to have with them at 1:00. So I just walked into it as the person who was left who speaks planning and life-long communities. So now, I've been looking

around for a civilian who'd be on the, who'd be the board chairman, because, quite frankly, it was my twelfth thing on a list of ten things that I have to do. So I was looking for somebody who could take it over (RP6, personal communication, September 18, 2015).

### **Benefits**

The first interview question asked about benefits, so the theme did not emerge organically from the voices as the two just presented. Therefore, all interviewees addressed benefits, and four key subthemes were revealed in analysis: promote housing and transportation options, enhances quality of life, inclusion of all people, and education outreach. RP4, a gerontology professor and community leader, said, “Okay, well, the principles, I am using them to promote housing and transportation options.” RP6 shared, “coming to it with our committee here, they’ve lit into the transportation aspect.

We use the LLC principles for prioritizing discretionary land use decisions. We have worked to try to get them built into some sort of rating system for our HOME and other programs that we have to help prioritize tax credit programs. So I suggest we do some bonuses in our zoning code for accommodating seniors, for those types of priorities. Our primary focus on transportation is to try to build accessibility into those systems rather than providing for mobility to a specific a demographic. Then availability of transit services become important and we try to put transit systems and providers in the same location to efficiently serve them (RP5, personal communication, September 18, 2015).

When integrating the LLC initiative, according to the local government officials, it benefits peoples' quality of life. RP4 said, "It's going to make a community where people are happy to live healthy, have affordable housing, and having access to transportation." RP5 stated, "It makes your community much more resilient to change over time." Moreover, according to RP2, people want to continue to live in their communities throughout their lifetimes.

It will allow us to take our community kicking and screaming into a place where it needs to be. If you were to implement the LLC principles, then you have a town that can survive organically. That's why LLC, sustainable community, is something—it's very real to me (RP6, personal communication, September 18, 2015).

Participants conveyed that the LLC initiative fosters inclusion of older adults and all people and demographics. According to RP4, "we have many cultures and many colors, and we are starting to come together." RP5 emphasized saying; there are a lot of opportunities to be able to identify and accommodate every demographic cohort within our community." RP1 added, "We send a positive message when we allow communities to accommodate older adults within their structures, within their community life, and make communities be a place of all—from cradle to grave." Beyond the definition of a LLC," it really sort of focuses not only the accommodation of aging communities, but communities in every demographic and economic stage." RP5 added. RP5 emphasized, "It is really important for that larger goal of not only accommodating seniors but people at every stage of life within a community."

I know most places, their LLC focuses primarily on aging in place, but we've actually tried to broaden our view because lifelong means all stages of life. So, we look at age, income, and people of various abilities...a lot of times people with disabilities get left out of the equation. A community should be a place of diverse people...people of different ages, different races, different abilities, different economic levels, and that make of community richer—to have a variety of people (RP2, personal communication, September 11, 2015).

Local government officials are thrilled that the LLC initiative with emphasis on aging in place also supports the inclusion of older adults.

I absolutely believe that this is what Baby Boomers want; they want to be part of the community. Everybody could see, yes, we want to take care of older adults and keep them in community. It's something that personally resonated...We can make it possible with some shifts in the community (RP1, personal communication, September 9, 2015).

“Aging in place from a conceptual perspective is something we must do” (RP4, personal communication, September 17, 2015). “What we are trying to see is if, by diversifying the housing stock, we allow the, particularly older people who say they, quote, want to age in place” RP5 said. “Based on local officials' responses housing is an inclusion strategy to keep older adults in communities” (RP3, personal communication, September 16, 2015).

Participants' responses revealed that education outreach is another benefit when adopting and integrating LLC principles. RP2 offered, “We hold a series of talks on topics of interest to the community on the third Thursday of each month.” RP2 indicated

that these topics are pertinent to folks “staying in the community and their concerns.”

RP4 asserted, “The first steps we are taking in our strategic efforts is outreach to churches, schools, and organizations, and make everybody aware of LLCs.” RP3 added:

Most of my effort from the LLC framework is just educating, bringing along, and encouraging the leadership that we’ve got to have diverse housing...we’ve got to have a walkable downtown and town center area. It’s constantly the education of the community and the people and the political leadership to get them to see the value of it (personal communication, September 16, 2015).

### **Challenges**

Again, challenges and barriers was a direct question during interview. The two major challenges are (a) funding, most particularly for housing and transportation and (b) resistance of stakeholders both residents and politicians. This theme has most direct connection to the local environment since the challenges presented below are products of local context.

Transportation—at the last meeting, we spent a considerable amount of time talking about who can get to help us. Can we get buses from churches at maybe three days a week from 10 to 12...and that’s how we want to grow LLC concept. To make you realize you don’t have to be old to get on the bus. But transportation is a major issue here because we have MARTA, but doesn’t come on all streets where the old folks live or where people who don’t have the money live. So housing and transportation, right now, we need help with that. And that’s something I would like to see happen (RP4, personal communication, September 17, 2015).

The challenge mentioned by all interviewees was secure funding for any new programs such as LLC initiatives. That the funds being sought were for local housing projects and transportation, to include sidewalks, walking paths, and bus stops, did not remove many barriers.

How do you get the city, the county, the state, to understand this issue [LLC] and to provide the funding. That's where it becomes very difficult is when you talk about how do you secure funds to accommodate that? How do you get, city county budgets to accommodate that? (RP1, personal communication, September 9, 2015).

Prioritizing discretionary land use decisions is a challenge. We have worked to try to get it built into the to prioritize tax credit program for home and other programs. Again, I've run into considerable resistance from other community organizations (RP5, personal communication, September 18, 2015).

Some of our political leaders see [the principles of the LLC] and are trying to work toward it. But it is really interesting the different kind of aspects and pushback you get from, from doing that. The one we've probably dealt with most as a city is the old guard vs. the new guard, which every city deals with (RP3, personal communication, September 16, 2015).

“For anything that requires a lot of money, we haven’t been able to do, and we haven’t found the grant money to do it.” (RP4, personal communication, September 17, 2015)



The type of housing to build should funds be secured was another challenge. RP2 explained, “We don’t have a lot of land to build affordable housing or some creative housing options.” According to RP2, they are attempting to identify alternative housing, perhaps “having an accessory dwelling unit in your backyard that maybe the senior will move in and rent out the main house to make that property affordable.” RP4 confirmed, “we have an issue with some housing where we need to do some investigating of the types of housing been built...that is going to be age-friendly...maybe small cluster homes.” RP 3 declared, “We have to create some options... something with housing options...with a town center that causes a draw.”

The type of housing also raised concerns among community members not wishing to change the face of their neighborhood:

But we literally have an enormous faction of the public who want to quash redevelopment because there might be, God forbid, an apartment in it. There are signs all up and down the streets. No apartments. None. You cannot possibly have an apartment here. Because all apartment complexes become trashy, and they become slums, and they become junk (RP6, personal communication, September 18, 2015).

People are very conservative. There is nothing more conservative than a left-wing homeowner. When it comes to politically, they may be extremely expansive, but when it comes to what's happening around my house, they become very, very conservative. So existing residents, particularly where they're homeowners, are very conservative people, and

they don't like to change the status quo (RP5, personal communication, September 18, 2015).

With the apartment complexes that were proposed, that were soundly squashed by that part of the community up there, for a variety of reasons. It'll kill the community, it'll ruin the public schools, all those people will, you know, again, those people is everybody who's not here already. You know? If we can just keep them out, it'll all be the same (RP3, personal communication, September 16, 2015).

Innovations in transportation, even a sidewalk, caused a similar disturbance among some communities:

You're talking about people thinking of their own sort of narrow interests and sensitivities rather than the broader community interests as a whole. I don't want a sidewalk in front of my house, type of a thing. And those are the people that turn up at the meetings, so you really have to press the priorities of a public that often is not necessarily engaged or present (RP5, personal communication, September 18, 2015).

There's very little public transportation. We've got Marta Station up there, but where do you go with Marta? Bus service is very limited. What we have is, we all transport one another. Somebody has to go to the hospital? It's like, everybody is there (RP1, personal communication, September 9, 2015)

“That's what our senior center director has talked about is, we have a lot of elderly people in the community, but they can't get here because we don't have

public transportation. MARTA isn't here” (RP3, personal communication, September 16, 2015).

But transportation is a major issue here because we have MARTA that goes along La Vista, goes along Lawrenceville Highway, but doesn't come on all the streets where the old folks live or where the people who don't have the money live. So you'll see a lot of people pulling carts with groceries in it that really shouldn't have to in the heat of summer, and there should be a bus that'll--so, housing and transportation, right now, we need help with that. And that's something I would like to see happen. (RP4, personal communication, September 17, 2015)

On transit, again, those are expensive systems, and unless you're able to develop a complementary built environment, they're ultimately not going to be nearly as productive as they could be. So pedestrian access and transit and urbanized development all go together, and if you don't do all of them at the same time, they're not going to be very productive. So that's a big issue. Neighborhood retail and services, that issue that I talked to you about people's changing imperatives (RP5, personal communication, September 18, 2015).

One interviewee summed up the mixed messages received from the community as follows:

Well, it impacts what I do because the people who live here in this community, while they will look you right in the eye and tell you they want a livable community, a life-long community, they'll fight you tooth

and nail to have some of those elements that a life-long community requires. It makes it real hard for you to do (RP6, personal communication, September 18, 2015).

### **Local Environment**

Nearly every quote presented above may be nested here. The local environment consists of the socio-cultural within which an LLC initiative and its leadership lived. It encompasses the community, the neighborhood, the developers and financiers, the city council, church elders, the history and identity of each place. Its presence was never introduced directly by the interviewees. Rather, it was as if a breath infused into every discussion. Aspects of the local environment mediated the variability found in two critical areas: 1) leadership capacity that influence the implementation of an LLC such as the length of time leading the LLC initiative, length of time as community leader, level of notoriety, how well connected politically, and their knowledge of LLC principles and 2) community features such as location (i.e., urban, suburban, city core), existence of and longevity of community-based support networks; community awareness of LLC principles, and political climate.

### **Triangulation**

Integration of themes was accomplished through constant comparison of the subthemes with each theme and across interview. This analytic process revealed that, conceptually, Table 2 may be considered a hierarchy that depicts the ranking (from bottom to top) of interdependency found across themes (and subthemes). The local environment accounts for the affects of the physical and social environment on the successful implementation of LLC principles (i.e., acts as a mediator). A mediator creates

the conditions for challenges and benefits that accrue from planning and the capacity of leaders to build and sustain collaborations. Leadership capacity was a moderator (affecting the strength of) the local environment. Specifically, an effective leader in the present study was one with relatively high personal agency and capital within a community as indicated by longevity, known as a community activist, relatively well connected politically, understands the LLC principles, and personally embraces the philosophy of social justice. A less effective leader had few if any of those attributes. An effective leader was more successful in overcoming environmental and community challenges and had greater success in achieving LLC benefits. The data suggest that effective leaders were located in communities that were relatively more receptive (or less resistant) to adopting LLC principles.

### **Summary and Conclusion**

This chapter discussed and highlighted the data collected and findings from the six conducted interviews for this case study. Also presented are in depth responses and an analysis of the experiences, perceptions, and knowledge of the participants with regards to how local government officials, within the Atlanta region, who adopted LLCs initiative between years 2008-2013, used it to ensure the quality of life for members of their community. Chapter 4 also reasonably presents the data collection procedures I utilized and followed a profile of research participants, the data analysis, the thematic findings with appropriate insights to provide greater breath in understanding interview results, and how findings related to other literature. I then was able to construct five themes all related to the five research questions established in the initial phases of the study.

The findings revealed best practices relevant to the central and all four-sub research questions. There were five key findings. The emerging themes specifically were as follows: (a) Strategic planning is used to implement the LLC principles, involving existing community resources and infrastructure to build capacity to foster sustainability of the LLC initiative; (b) Building collaborative relationships with local organizations and influential people is a critical part of strategic planning and important to LLC implementation that requires significant effort and nurturing by LLC leadership; (c) The LLC principles aids in promoting housing and transportation options, enhance quality of life, supports inclusion of all community members with emphasis on older adults, and educational outreach; (d) Funding for housing and transportation, and resistance of stakeholders and residents are common challenges when adopting the LLC principles; and that; (5) The local environment, including leadership capacity and community features influences the implementation of an LLC. The study result indicated significant conclusions concerning the interest of local government officials engaged in ensuring a quality of life for older adults in the Atlanta region.

The illustration and analysis of the LLC initiative's implementation process based on implied responses could be a direct correspondence to social change implications. Local officials, community leaders, and practitioners could use the findings represented in this process analysis to change how aging in place and community planning initiatives are implemented, and how the local government integrates community planning initiatives within their organization. The social change implications are furthered discuss in detail in Chapter 5.

## Chapter 5: Discussion, Conclusions, and Recommendations

### **Introduction**

The purpose of this qualitative case study was to describe and explore the experiences of local government officials who adopted the LLC initiative in the Atlanta region to help establish best practices that may increase the interest from other local government officials and community leaders to address the diverse needs of persons as they age. The LLC initiative's principles define a lifelong community and provide leaders and stakeholders comprehensive lens for planning that thrives on quality housing, efficient transportation options, and other supportive services and programs (Keyes et al., 2011). As noted in Chapter 2, the LLC initiative and related principles guide leaders and residents on how to think, plan, and design communities that service all age groups and abilities (Keyes et al., 2011). The results of this study revealed that, in reference to using the LLC principles, strategic planning and establishing collaborative relationships are activities that occur frequently and have proven beneficial. This study also revealed that a significant component of the process involves education to and outreach for stakeholders and residents with regards to LLC principles. The local environment represented by both LLC leaders and community features have an influence on LLC implementation. Lastly, the study results revealed some benefits and challenges that are worth consideration to support future efforts within existing and emerging LLCs.

This chapter includes an overview and interpretation of findings outlined in Chapter 3 that are relevant to the research questions. A discussion of the integral recommendations and implications for social change are reported to define the significance of the case study and to provide greater insights on the process when

adopting the LLC principles, including benefits and challenges to integrating the LLC initiative based on the lived experiences and perceptions of local government officials and community leaders. Lastly, recommendations for further research and conclusion are offered based on the outcomes of this study.

### **Summary Review of Findings**

In this case study inquiry, I focused on the following research question and sub questions: How have six local government officials within the Atlanta region who adopted the LLC initiative between years of 2008-2013 used them to ensure the quality of life for members of their community? How do local government officials perceive the LLC initiative? What are the perceived benefits in adopting the initiative within an Atlanta region community? What are the perceived challenges in adopting the initiative within an Atlanta region local community? What part of the LLC initiative needs to be altered or added for improvement? Based on the local government officials' responses on adopting the LLC initiative, five major themes emerged: strategic planning, collaboration and leadership, benefits, challenges, and local environment. The local environment is the base from which all other themes rely on, which accounts for the affects of the physical and social environment on the successful implementation of LLC principles. Leadership capacity was a moderator (affecting the strength of) the local environment. All local government officials communicated how the LLC principles are currently used for strategic planning, and they indicated strategic planning as a key element to effectively sustain LLC efforts. Local government officials expressed how the LLC initiative informed continued opportunities to build collaborative relationships that require efforts to form and nurture by LLC leadership. The two main partners in collaboration that were



shared by local government officials are existing organizations and people of influence. The four main benefits shared by local government officials were housing and transportation options, quality of life, inclusion, and education outreach. Likewise, local government officials expressed some challenges: funding for housing and transportation, as well as resistance from stakeholders. The local environment, in relation to the existing social and physical infrastructures within each LLC, either hinders or supports the overall LLC implementation.

### **Implication of Findings**

The research questions were intended to expand the knowledge on the experiences and perceptions of local government officials involved in adopting the LLC initiative in Atlanta region communities. Local government officials' perceptions of the LLC initiative may help identify challenges and benefits and potential ways the initiative can be altered to further mobilize change. The results were presented as key themes for local government officials' interviews. The main findings are analyzed in relation to the research questions and literature discussed in Chapter 2.

The LLC initiative is a comprehensive community planning effort that helps communities respond to the changing needs of a rapid growing and diverse population (Keyes et al., 2011; Lawler & Berger, 2009). This new paradigm sought to transform Atlanta region communities into places where persons of all ages, abilities, and needs can live for a lifetime (Keyes et al., 2011). These communities were developed to illustrate the relationship between livable and age-friendly communities (Keyes et al., 2014; see Chapter 2 for a discussion of the LLC initiative). When examining aging in place initiatives, such as; the LLC initiative (Keyes et al., 2011); NORC-SSP model (Guo &

Castillo, 2012); and WHO Aging Friendly Cities (Scharlach, 2012), researchers contextually described them as community planning initiatives that primarily involves a needs assessment, data collection, strategic planning, and convening of stakeholders (Lehning et al., 2012; Scharlach, 2012). Future environment changes will involve a comprehensive policy approach, collaboration, and coordination amongst multiple sectors and the community level, citizen participation, and outcome evaluation to benefit all citizens (Hunter et al., 2011).

The local government officials' interviews informed five themes: benefits, challenges, collaboration, strategic planning, and local environment. The benefits are housing and transportation options, quality of life, and inclusion of all community members, as well as education outreach. Alley et al. (2007) and local government officials alike demonstrated that an integrated aging infrastructure that fosters quality housing, access to transportation and social services, and health care options is beneficial for older adults to remain active in their communities. Accessibility, community involvement, and housing connected to social activities and services enhance an individual's quality of life (Dye et al., 2011). Education outreach and resources sharing supports older adults in decisions making on wellbeing and aging in place (Lawler & Berger, 2009). Community members demonstrated a greater capacity of involvement when they were educated on the LLC principles by local government officials.

Transportation and mobility options lead to a higher quality of life and social inclusion (Li et al., 2012), enable social interaction and mobility freedom (Kim, 2011), and help citizens remain active (Fitzgerald & Caro, 2014). These factors are embedded within and are key characteristics of the LLC initiative. The Aging Atlanta program,

similar to the LLC initiative, was led by government and involved strategic planning and need assessments to assist in addressing issues faced by older residents (Scharlach, 2009). As a result, policies changed, services that are more direct existed, the transportation system was expanded, and new health programs were implemented (Keyes et al., 2011; Lawler & Berger, 2009; Ory et al., 2009). These actions are crucial especially for future the boomer generation desiring to age in place (Burton et al., 2011). Hence, the LLC initiative provides local government officials with interrelated principles useful to develop and sustain a community that a person can age in for a lifetime. Organizations and communities benefited when integrating the LLC initiative, yielding quality living and sustainable communities for community members served.

The challenges that the local government officials encountered included a lack of funds for transportation and housing and resistance from stakeholders. There is a proven lack of community-based services, transportation issues, and housing options that are challenges facing older adults who wish to successfully age in place (Keyes et al., 2011; Keyes et al., 2014; Kloseck et al., 2010). Regulating land use and zoning codes to prohibit opportunities for a more diverse housing intended to counter funding dilemmas (Clark & Glicksman, 2010; Keyes et al., 2011). In this study, like housing, local government officials found that a lack of funds for transportation posed challenges to integrate the LLC initiative within their local community. Addressing funding challenges is now a top priority amongst policies issues concerning older Americans (Freund & Vine, 2010), where the mission is to expand transportation and mobility options. Local government officials need to align the LLC principles with new policies to ensure that

older people have choices when it comes to housing and transportation and to take a regional approach for potential coordination of funds and resources.

Developing collaborative partnerships with particular groups and organizations is a suggested practice, proven for efficiency across the service continuum for older adults (Ivery & Akstein-Kahan, 2010). Through collaborations, both Lehning et al. (2014) and Scharlach (2012) demonstrated that programs, services, and infrastructures programs improved for older community members. Hunter et al. (2011) reaffirmed that a collaborative approach is suggested for the planning and implementation of an aging in place initiative. Local government officials used the LLC principles to form collaborations with a diverse group of existing stakeholder across multiple sectors (planning, engineering, public health, and private development) to better serve their aging population.

In this study, local government officials proclaimed that strategic planning was facilitated interchangeably with their LLC efforts, and they deemed it to be the most effective. Additionally local government officials conveyed that strategic planning has supported areas related to capacity building and sustainability. Likewise, similar initiatives such as Aging Atlanta and WHO Age Friendly Cities primarily involve strategic planning (Lehning et al., 2012; Scharlach, 2012). The focus on strategic and community planning is necessary to design communities that are suitable for people of all age and abilities (Keyes, 2014). Local government officials and community leaders begin to be more involved in strategic planning and need assessments, hence addressing issues faced by older residents.

The findings of this study confirm some of the findings in previously mentioned studies focused on aging in place initiatives that are related to community planning and development and aging in place strategies. In addition to those findings, this study supported the concepts of adopting and implementing the LLC initiative by revealing the importance of strategic planning to build capacity and promote sustainability and continuing to recognize funding challenges and the opportunity to mobilize resistant stakeholders. It could be that these two findings are exclusive to existing LLC process. Another study involving other LLCs or similar aging in place initiatives may inform greater insight on this issue.

### **Discussion of Conceptual Framework**

The conceptual framework of ecology theory of aging and the ecology change model, which is associated with an individual adapting to its environment, implying subsequent changes that thrives when planners work collaboratively towards healthy environment for older people, supported major findings from this case study (Lawton & Nahemow, 1973). The ecology change model measures treatment applied to an individual or environment and determines if the individual respond to applied changes, also aligned with key findings (Lawton, 1974). This study demonstrated the influential role of ecology as environment applied to local environment, and individual applied to leadership capacity. A detailed explanation of the methodology is discussed in Chapter 3. Participants shared their perceptions and experiences on using the LLC principles, indicating collaboration with existing organizations and influential people as key activity within their LLC process. The detailed explanations data gathered from participants were

used to construct a conclusion on the perceived benefits of the LLC principles and overall LLC initiative within Atlanta region communities.

### **Limitations of the Study**

In Chapter 1, two limitations of the study were identified, including the challenge to make generalizations based on sample population and size, and the validity and reliability of the qualitative method and instruments. Chapter 1 also summarized a plan to address each of these, not to draw any generalizations and using semi-structured interview questions to address instrument concerns. While these limitations were appropriately addressed and no other issues of limitations, biases, generalizations, and dependability surfaced, this study, like most studies, is not remised from unknown limitations.

### **Recommendations**

My primary focus was to examine the experiences and perceptions of local government officials who integrated the LLC initiative within the Atlanta region. To expand the knowledge of the local government officials perspective of the LLC initiative, this study could be repeated using a larger sample size that represents an even more existence of LLC processes and practices in the Atlanta region. For future research, I recommend using the same protocol to recruit participants for the study; however, I recommend involving other professionals to gain a larger number of participants from diverse organizations and communities. This study did not take into consideration residents, primarily older adults' perspectives. For future research, I would even recommend investigating the lived experiences of older adults who reside in emerging LLCs to determine if there is impact on quality of life. Furthermore, additional research

studies could be conducted to compare local government officials and community leaders' experiences and perceptions relative to the implementation of the LLC initiative. Lastly, an analysis on the LLC initiative alignment to achieve a person's desire to age in place is suggested.

### **Implications for Social Change**

In Chapter 1, the significance of the study was discussed to inform a greater understanding of local government officials' experiences and perceptions when adopting the LLC initiative within their organization and community. The findings, reported in Chapter 4, emphasized the benefits and challenges to adopt and integrate the LLC principles within an organization or community. In addition, strategic planning and collaboration emerged as best practices. State and regional officials, policy makers, and planning professionals planning to improve the physical and social infrastructures can use these insights through the lens of local government officials.

At the organizational level, the results from this study could potentially inform new strategies and guidelines for the local government sector, including the local Area AAA and Metropolitan Planning Commission (MPO) to facilitate aging in place and community planning initiatives. This information can be reviewed and enhanced by local government officials based on their organization's current process and procedures to generate a fully developed lifelong community. The finding of this study would definitely have to be disseminated for the occurrence of social change to become evident. As a scholar and practitioner in the field of housing and community development and as a part of an international neighborhood revitalization strategy there are numerous opportunities for dissemination I will pursue. These include presentation to organization like the

Atlanta Regional Commission, the National Association for Area Agencies on Aging, AARP Livable and Age Friendly Communities Network, the American Society on Aging, International City/County Management Association, and the American Planning Association. As a part of an international housing and community development organization, I also have the advantage of incorporating and executing similar principles that could correlate with the outcomes of social change as a result of shared findings.

While the findings are tested by practitioners, where they do inform more effective LLCs, the social change implications could positively influence local communities and the individual that reside there. Previous research has explored the needs and concerns of older adults within the Atlanta region and provided a detailed description of the LLC initiative, which provides practitioners a valuable context to begin the planning process post adopting the principles. The key components recognized in implementing local aging initiatives are for the lead organization or leader to convene stakeholders and facilitate community planning (Ivery & Akstein-Kahan, 2010). If practitioners collaborate with existing organization at the national, state, local levels, and key decision makers within existing networks, there are more likely to progress through the LLC initiative's process and continuum. In order for community planning or aging in place initiatives to be successfully implemented, practitioners—government, community and planning development, and aging must involve all interested stakeholders throughout processes to limit issue of resistance. Local government officials must be outspoken and involved in order to carry out the level of community development embedded within the LLC initiative (Lawler & Berger, 2009). Community members must be open to change



significant to quality of life for all and cooperate with local government officials, rather than hinder forward progress towards a lifelong community.

Additionally, the results added to the body of knowledge needed to help local government officials and other stakeholders respond to a fast growing diverse population. The results also highlighted the LLC planning practices and processes that could evolved into best practice guidelines to support successful implementation of emerging LLCs. When practitioners have an understanding of best practices, better communities exist to improve quality of life of persons for generations to come. There is a significant need for community members and key stakeholders to support implementation of the LLC initiative within their community. Local government officials should be completely aware that the benefits to adopt and integrate the LLC initiative within their local community to improve quality of life for persons as they age outweighs the challenges and resistance of embracing the imposed changes.

### **Conclusion**

The main focus on this study was to identify, describe, and analyze the actions of local government officials involved in adopting the LLC initiative through interviews. The results of this study were that local government officials expressed that LLC principles were used for strategic planning to build capacity and sustain LLC efforts, and to establish collaboration with existing organizations and key decision makers. The data analysis also revealed perceived benefits of the LLC initiatives and principles such as promoting housing and transportation options, higher quality of life, inclusion of all community members, and encourages education and outreach. Local government officials acknowledged that lack of funding for housing and transportation, and resistance

of community members and politicians are challenges to fully adopt and integrate the LLC initiative. Across all findings were the influence the local environment—community features and leadership capacity has on the success to implement the LLC initiative. As other researchers (Alley et al., 2007; Dye et al., 2011; Ivery & Akstein-Kahan, 2011; Keyes, 2014; Lawler & Berger, 2009) revealed, a successful implementation of aging in place initiatives fosters an integrated aging infrastructure including physical and social features, information sharing and access to resources, developed collaborative and partnerships to support coordinated service delivery, and community planning is prioritized.

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## Appendix A: Interview Protocol

**Time of interview:**

**Date:**

**Place:**

**Interviewer:** Corneil Montgomery

**Interviewee No.:**

**Problem:** The Atlanta region will experience a significant increase in its older adult population, and amongst this group are persons who desire to age in their homes and communities for a lifetime. Opportunities were recognized to support its older adult population and their desire to age in place. A familiar effort is the Lifelong Communities (LLC) Initiative developed by the Atlanta Regional Commission (ARC). A number of local government officials—county administrators, city managers, and aging services managers/administrators adopted this initiative within their local jurisdictions and communities. However, among the available research, yet to be determined are the specific actions taken or involved process of the individuals and organizations who adopted the framework.

**Project Purpose:** The purpose of this study is to identify, describe, and analyze the actions of local government officials involved in adopting the LLC initiative. Local government officials' perception of the LLC initiative may help identify challenges and benefits, and potential ways the initiative can be altered to further mobilize change. The results will be used to provide insight on the involved process of local government officials and stakeholders.

**Interviewer:** Thank you for participating. I will start the interview using the prompt and will ask follow-up questions. The responses will be kept confidential and private unless there is an approval for dissemination. You do not need to finish the interview and may leave if you are uncomfortable answering any of the questions. I plan to record the interviews and then transcribe them to use them for coding and analysis. Please let me know if you are ok with recording.

Questions	Descriptive Notes	Reflective Notes
1. What is your opinion of the benefits of the Lifelong Communities Initiative and its impact on local government officials' practices to ensure a quality of life for community members served?		
2. How would you describe your experiences adopting the Lifelong Communities principles within your organization?		
3. How do you currently utilize the Lifelong Communities principles within your organization?		
4. How can you more effectively use the Lifelong Communities principles to improve quality of life for members of your local community?		
5. What factors if any, inhibit your ability or willingness to fully integrate the Lifelong Communities principles within your organization to support the local community?		
6. What do you perceive are the challenges to adopt and integrate the Lifelong Communities principles within your organization to support the local community?		
7. What do you perceive are the benefits to adopt and integrate the Lifelong Communities principles within your organization to support the local community?		
8. What components of the Lifelong Communities Initiative you suggest be altered or added for improvement?		
<p>I want to reassure you once again that the information you provided will remain confidential. Also, if you participate in additional interviews as a part of this project, those responses will also be confidential. Thank you for supporting my research project and taking time to answer my questions. If you have any questions or concerns or think of something else you would like to add, please do not hesitate to contact me.</p>		

## Appendix B: Recruitment E-mail

To: [*insert individual e-mail*]

From: [corneil.montgomery@waldenu.edu]

Subject: [Research Participation Invitation: Process-Adopting the Lifelong Communities Initiative in the Atlanta Region]

My name is Corneil Montgomery and I am a researcher and doctoral candidate from the Public Policy and Administration Department at the Walden University. I am writing to invite you to participate in my research study of the Process: Adopting the Lifelong Communities (LLC) Initiative. You're eligible to be in this study because you are an Atlanta region's local government officials—county administrators, city managers, and aging services managers/administrators who adopted the Lifelong Communities Initiative between years 2008-2011. I obtained your contact information from Kathryn Lawler, Aging and Health Resource Manager at the Atlanta Regional Commission (ARC).

The purpose of this study is to identify, describe, and analyze the actions of local government officials involved in adopting the LLC initiative. Local government officials' perception of the LLC initiative may help identify challenges and benefits, and potential ways the initiative can be altered to further mobilize change.

If you decide to participate in this study, you will you be involved in one interview, which will be scheduled at your worksites. The interviews will last for no longer than one hour. To ensure accuracy, I will use a digital/audio recorder to capture the exact words and phrases. However, you can request that the audio recording device be turned off at any time and used to provide insight on the involved process of local government officials and stakeholders. Remember, this is voluntary. You can choose to be in the study or not.

This project 09-03-15-0176620 was approved by the Walden University IRB on September 3, 2015. An informed consent form is also attached to provide you with more information and requires signature if you decide to participate in this study. If you would like to participate in study, or have any questions about the study, please contact me at corneil.montgomery@waldenu.edu or (XXX) XXX-XXXX.

Thank you very much.

Sincerely,

Corniel Montgomery