| Section A: NICE to complete | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------|
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| Guidance title: | Independence and mental wellbeing (including social and emotional wellbeing) for older people |
| Committee: | Public Health Advisory Committee |
| Subject of expert testimony: | Age Friendly Cities |
| Evidence gaps or uncertainties: | [Please list the research questions or evidence uncertainties that the testimony should address] |

The committee requested the following information on Age Friendly cities:

- What are age friendly cities?
- Why are they needed?
- What do they involve in practice?
- Whether they have been evaluated for effectiveness and cost effectiveness
- Information on any barriers and facilitators to implementation

Section B: Expert to complete

Summary testimony:

What are Age Friendly Cities?

The concept of 'Age Friendly Cities' was developed by the World Health Organization to develop supportive urban environments that encourage 'active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age' (WHO, 2002 (1)). In 2010 the first UK city joined the WHO Global Network of Age Friendly Cities and by 2013/14 there were 230 cities worldwide and a UK Network was launched.

An age friendly city is defined through eight separate but interrelated 'domains'. Taken together, they form an age-friendly city. Each one of these eight domains is characterised by its own set of age-friendly features. The domains are: transportation; housing; outdoor spaces and buildings; community support and health services; communication and information; social participation; respect and social inclusion; and civic participation and employment.

There are a variety of approach to involve people in Age Friendly Cities:

- Community development
- Rights of older people
- Labour market participation
- Urban design
- City ageing plans
- Rural applications

A variety of agencies are involved, including:

- Communities
- City authorities
- Academics
- National programmes
- Regional
- NGOs
- Corporate sector

Central to the concept of an age friendly city, is the social inclusion of older people, so that they are valued and feel comfortable in the city in which they live. A key feature of this approach is the 'citizenship' model of ageing, as opposed to the medical or care service approaches that are commonplace in ageing narratives and services. The citizenship model focuses on neighbourhood and city as opposed to individuals or families. It promotes social capital and participation rather than relying on clinical or social care interventions. The aim is to age – proof universal services rather than commission separate services for older / vulnerable people. The focus is on reducing social exclusion and changing social structure and attitudes to be more inclusive,

Why are Age Friendly Cities needed?

In 2008 The Audit Commission (2) noted that "some councils will see an outward migration of affluent people in their 50s and 60s who choose to leave the cities.....the remaining older population...tends to be....poorer, isolated and more vulnerable with a lower life expectancy and a need for acute interventions".

In 2008, Scharf & Gierveld (3) reported that "there is emerging evidence that urban environments may place older people at a heightened risk of isolation and loneliness through:

- Changes in which urban spaces are developed to meet the needs of younger consumers;
- Older people's social well-being is prone to changes in population. The loss of family members, friends and neighbours has implications for the maintenance of stable social relationships.
- Older people are affected by changes linked to social issues, such as changes in services and levels of crime."

What do Age Friendly Cities involve in practice?

Age Friendly Manchester (AFM) includes:

Age-friendly neighbourhoods which focus on:

- Improving locality structures and plans, working with regeneration teams,
 NHS agencies, and council ward coordination groups
- Supporting the Valuing Older People (VOP)/AFM locality networks
- Supporting community projects that increase social participation, including the AFM small grants fund
- Promoting a range of volunteering opportunities.

Age-friendly services which focus on:

- Applying an 'ageing lens' to city plans and strategies and supporting Public Sector Reform
- Delivering the next phase of 'ageing studies' programme
- Expanding the AFM Cultural Offer: a programme that brings together 20 Manchester arts organisations.
- Supporting a range of intergenerational projects including training to community groups.

Communication and engagement which focus on:

- Further developing the VOP Board and Older People's Forum
- Improving how older people inform decisions about their areas and services
- Promoting the AFM protocol for involving older people
- Improving AFM on-line resources and promoting AFM through 'pledges'
- Reviewing how older people are communicated with.

Research and Innovation which focuses on:

- Support the Manchester Ageing Study and Cheetham Living Lab
- Develop Manchester as a centre of excellence, including Manchester Institute for Collaborative Research on Ageing and Manchester Metropolitan University
- Publish Research and Evaluation Framework
- Collaborate with (inter) national research and policy projects
- Economy and Ageing project
- Age-friendly design project

Governance, reporting and resources which focuses on:

- Supporting the multi-agency AFM Senior Strategy group to lead and promote the programme
- Reporting to Health and Well Being Board and Communities Overview and Scrutiny Committee
- Publishing the AFM Action plan and annual progress statement
- Developing AFM multi-agency workgroup and attracting resources.

Evaluation of Age Friendly Cities

The MICRA/AFM Age Friendly City Research and Evaluation Framework has identified the following outcomes in relation to seven of the eight WHO domains described above:

Transport

- Has a crucial role in enabling access to resources and in maintaining independence
- Supports being connected with 'real' world.

Housing

- Influences physical health and independence
- Is an important factor in terms of social identity, status, continuity, place and self.

Social participation

- There is a link between social participation, health and wellbeing
- Social networks are valuable for meaningful and productive activities.

Respect and Social Inclusion

- Ageist attitudes impact on wellbeing
- Social inclusion is dependent on structural inequalities.

Civic participation and employment

- Volunteering has a role in promoting health and wellbeing
- Leaving employment is a key life transition stage.

Communication and Information

- Communication and Information have a role in supporting the other AF Domains
- Barriers in the digital age, includes the sense of being 'left out' and missing out on information and services.

Buildings and open spaces

- Green open spaces are valuable in fostering health and wellbeing
- Urban environments impact on identity, sense of self and belonging.

What are the barriers and facilitators to implementation?

Facilitators:

- Political leadership and support is key
- A team of people supporting age-friendly initiatives and partnerships
- A local narrative that agencies and residents understand
- Develop mainstreaming ageing issues to everyone
- Promoting a 'citizen' perspective rather than a 'deficit' model- Involving older people as actors in setting the age-friendly agenda
- Supporting a partnership strategy: research policy practice; multiple stakeholders.

Buffel, McGarry et al 2014 (4)

Barriers:

- The lack of a national ageing programme
- Ageing is dominated by medical and care narratives, including public health: dementia and loneliness
- Voices of ageing still weak

Further Opportunities:

Despite a difficult funding environment there are opportunities for developing ageing programmes, including:

- The GM Devolution deal and public health Place-Based Agreement
- NHS 5 year Plan contains commitments to a shift towards prevention
- Big Lottery Fund programmes

References (if applicable):

- (1) Active Ageing: a policy framework. WHO, 2002
- (2) Don't Stop Me Now, Audit Commission, 2008
- (3) Scharf T and Gierveld J (2008) Loneliness in urban neighbourhoods: an Anglo-Dutch comparison. European Journal of Ageing 5 103 -115
- (4) 'Developing Age-Friendly Cities: Case Studies from Brussels and Manchester: Implications for Policy and Practice' (with Buffel, T. et al.) Journal of Aging and Social Policy, 26: 52-74.