

AGE FRIENDLY CITIES: THE BUREAUCRATIC RESPONSIVENESS EFFECTS ON

AGE FRIENDLY POLICY ADOPTION

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Challenging a long-held attachment to the medical model, this research develops a cultural model placing local governments at the center of policy making and refocusing policy attention on mobility, housing, the built environment and services. To examine the phenomenon of age friendly policy adoption by cities and the magnitude of adoption, a 21-question web-based survey was administered to a sample of 1,050 cities from the U.S. Census having a population over 10,000 and having at least 14% of their population aged 65 years and over. The goal of the questionnaire was to help identify what kind of policy objectives cities establish to facilitate the opportunity for older adults to live healthy and independent lives in their communities as they age. Multiple linear and ordinal regression models examined the likelihood of policy action by cities and provide evidence as to why some cities support more age friendly policy actions than others. Evidence illustrates theoretical advancement providing support for a cultural model of aging. The cultural model includes multiple factors including bureaucratic responsiveness reflected in the management values of the administration. Findings show variation in the integration of a cultural awareness of aging in the municipality's needs assessment, strategic goals, citizen engagement strategies, and budgetary principles. Cities with a cultural awareness of aging are more likely to adopt age friendly policies. Findings also provide support for the argument that the public administrator is not the driving sole factor in decision making. A shared space with mobilized citizen need of individuals 65 and over is identified.

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TABLE OF CONTENTS

	Page
ACKNOWLEDGEMENTS.....	iii
LIST OF TABLES.....	vi
LIST OF FIGURES.....	ix
LIST OF EQUATIONS.....	x
CHAPTER 1. PROBLEM STATEMENT.....	1
Introduction.....	1
Context of the Problem: The Evolution of National Aging Policy.....	3
Statement of the Problem.....	14
Purpose of the Study.....	15
Research Questions.....	16
Significance of the Study.....	16
CHAPTER 2. THE ROLE OF LOCAL GOVERNMENTS IN AGING POLICY.....	19
Introduction.....	19
Aging Policy: Beyond a National Issue and Concern.....	19
Age Friendly Policy Adoption as a Localized Response.....	27
Balancing Local Government Policy Objectives.....	30
CHAPTER 3. LITERATURE REVIEW.....	34
Introduction.....	34
Conceptualizing Age Friendly Policy.....	35
Age Friendly and Local Government Responsiveness.....	38
Contribution to Age Friendly Literature.....	48
CHAPTER 4. THEORETICAL FRAMEWORK.....	50
Introduction.....	50
Major Theories and Assumptions.....	50
Sub-Theories of Responsiveness.....	55

Factors Influencing the Differentiation of Policy Choices.....	66
CHAPTER 5. RESEARCH DESIGN	73
Introduction	73
Originality of the Research	75
Variables.....	79
Analytics.....	90
Contributions to Theory and Local Government Policy Adoption.....	97
CHAPTER 6. FINDINGS AND ANALYSIS	99
Introduction	99
Descriptive Summaries	99
Age Friendly Policy Adoption Model	121
Degree of Policy Adoption	130
Conceptual Distinction Models.....	145
CHAPTER 7. THEORETICAL CONTRIBUTION	158
Introduction	158
Theoretical Contributions	162
CHAPTER 8. CONCLUSION.....	181
A Cultural Model of Aging Manifest in Local Government Policy Adoption	181
Broader Implications.....	186
Opportunities for Future Research.....	190
APPENDIX A. LOCAL GOVERNMENTS AGE FRIENDLY POLICY ADOPTION SURVEY.....	192
APPENDIX B. COMPARATIVE ANALYSIS OF CITY SAMPLE SIZES RELATIVE TO THE PROPORTION OF CITIES WITH 14.5% OVER 65 YEARS AND OLDER AND THE CITY SIZES BETWEEN 6,000 AND 10,000	202
REFERENCES.....	205

LIST OF TABLES

	Page
1. Evolution of National Aging Policy.....	5
2. Supreme Court Case Decisions on Aging Policy.....	10
3. The Effects of Federalism on Aging Policy and Aging in Place.....	21
4. Domains of Age Friendly Policy and Bureaucratic Responsiveness.....	36
5. Testable Hypotheses about Age Friendly Policy Adoption by Local Governments based on a Variation of Governmental Responsiveness to Citizen Need.....	74
6. Measurement of Dependent Variables	81
7. Variables Included in the Models 1 and 2	91
8. Models 3 through 6, Differentiation of Policy Choices, Transportation, Housing, Built Environment, and Services	95
9. Frequency Results for Municipal Perceptions on Age Friendly Policy Adoption.....	101
10. Frequency Results for Municipal Perceptions on Age Friendly City Goals.....	103
11. Frequency Results for Municipal Perceptions on Responsiveness in City management toward individuals aged 65 and over.....	105
12. Frequency Results of Cross Tabulations between Municipal Perceptions of Responsiveness and Perceptions of Age Friendly Policy Adoption	107
13. Frequency Results for Municipal Perceptions on the Extent a Municipality Solicits input from Older Persons on Certain Policy Issues Pertaining to the Needs of Individuals aged 65 and Over.....	109
14. Frequency Results for Municipal Perceptions on Training, Local Investments, and Mobilized Advocacy	111
15. Frequency Results of Cross Tabulations between Municipal Perceptions of Training, Local Investment, Mobilized Advocacy and Perceptions of Age Friendly Policy Adoption	111
16. Groups Identified by Municipalities as Helping Jurisdiction on Age Friendly Policy Adoption	113

17.	Frequency Results for Municipal Perceptions on Age Friendly Policy Adoption Relative to a Need Identified by Champion or Local Leader of City Government.....	114
18.	Frequency Results of Transportation Policy Actions	115
19.	Frequency Results of Housing Policy Actions	116
20.	Frequency Results of Built Environment Policy Actions.....	116
21.	Frequency Results of Services Policy Actions	117
22.	Frequency Results of Cross Tabulations between Provision of Senior Center Activity and Perceptions of Age Friendly Policy Adoption.....	121
23.	Descriptive Statistics, Explanatory Variables for Local Government Adoption of Age Friendly Policies	123
24.	Correlation Analysis Explanatory Variables for Local Government Adoption of Age Friendly Policies	125
25.	Multiple Linear Regression: Total Municipal Age Friendly Policy Action	126
26.	Frequencies and Mean Differences Between Low, Medium, and High Transportation Policy Actions	133
27.	Frequencies and Mean Differences Between Low, Medium, and High Housing Policy Actions	134
28.	Frequencies and Mean Differences Between Low, Medium, and High Built Environment Policy Actions	135
29.	Frequencies and Mean Differences Between Low, Medium, and High Public Services Policy Actions	137
30.	Correlation Analysis: Degree of Age Friendly Policy Actions (low=0-8; medium=9-15; high=16-25).....	138
31.	Ordinal Regression Policy Adoption (Low: 0-8), (Medium:9-15), (High (Frontier City): (16-25)	140
32.	Cumulative Probabilities of Falling into a Level of Low, Medium, and High Policy Action Levels based on Low or High Levels of Bureaucratic Responsiveness.....	141
33.	Cumulative Probabilities of Falling into a Level of Low, Medium, and High Policy Action Levels based on Low or High Levels of Mobilized Citizen Need	143

34.	Multiple Linear Regression: Total Age Friendly Actions: Transportation, Housing, Built Environment, Services $n=331$, Estimate, (S.E.)	146
35.	Cumulative Probabilities of Falling into the Categories of Low or High Levels of Policy Action Relative to the Relationships between Low or High Bureaucratic Responsiveness and Low or High Levels of Mobilized Citizen Need.....	177

LIST OF FIGURES

	Page
1. Evolution of a cultural model for aging policy	13
2. Age friendly policy domains of local government	39
3. Theoretical model of bureaucratic responsiveness toward age friendly policy action ...	75
4. Theoretical advancement of age friendly policy action	159
5. A 2x2 typology on the congruence between citizen need and bureaucratic response .	170
6. Predicted effects of the congruence between citizen need and bureaucratic response on age friendly policy adoption by local governments.....	172

LIST OF EQUATIONS

	Page
1. Multiple Linear Regression, Extent of Adoption.....	90
2. Ordinal Regression, Degree of Policy Adoption.....	93
3. Multiple Regressions, Differentiation of Policy Choices.....	94

CHAPTER 1

PROBLEM STATEMENT

Introduction

Over the next two decades, the national population of people over the age of 65 is forecasted to double (West, Cole, Goodkind, & He, 2014). The nation's demographic shift in the 65 and older population and the increase in demands for services, transportation, and housing will stand to challenge public administrators as they attempt to balance limited resources relative to growing citizen needs. By 2030, three in five people will live in cities concentrating some attention to how cities will create environmental settings optimal for aging success (Myers & Pitkin, 2009). This demographic transformation will impact local governments relative to pressure on government programs and services. The changing aging population is fundamentally making local governments more aware of the older citizens they serve.

Historically, a national policy response to aging stems from a medical model responding to the needs of older adults in the context of being sick or dependent. The limitations of the medical model constrain public policy solutions to hospitalization and long-term care. This dissertation argues that a cultural model of aging overcomes these limitations by considering aging in the context of independence, healthy living, and community-based supports (Greenfield, Oberlink, Scharlach, Neal, & Stafford, 2015; Lawton & Nahemow, 1973). It considers the devolution of responsibility at the community level manifest in local governments refocusing public policy attention to areas of mobility, housing, the built environment, and public services.

Creating and designing communities that foster the changing needs of an aging population may prove to be insurmountable as the American culture tends to harbor negative perceptions about aging (Angus & Reeve, 2006). Keyes and Dicke (2016) find evidence that negative images of aging influence public policymaking. Meyrowitz (1985) suggests that ideas of age, limited to the extent we may make old people act young, in turn may create barriers for connecting older adults and their needs with appropriate policies or activities. For example, some scholars suggest that the lack of access to mobility options due to a national transportation system highly focused on the automobile may create limitations for older adults to stay in their home when they are unable to drive (Fitzgerald & Caro, 2013). Additionally, some argue that the current government service systems are not adequately meeting the needs of today's older adults for housing, transportation, nutrition, and health services (Wiles, Leibing, Guberman, Reeve, & Allen, 2012). In other words, the doubling of this demographic is going to place more pressure on an already strained system. How local governments respond to these changes may mean the difference between options for older adults to stay healthy, active, and independent in their communities longer versus needs for institutionalized care.

This chapter first provides a context of the problem through an examination of the history of major national policies and Supreme Court decided cases relative to aging policy. The evolution of national aging policies is presented in Table 1. Relevant Supreme Court case decisions are presented in Table 2. The development of national aging policy and Supreme Court case decisions allows for the juxtaposition of the medical and cultural models of aging. The chapter then examines these identifiable differences between both models. It goes on to argue that a key gap in the literature is understanding how the cultural model helps us

overcome a medical model evident with local governments at the center of policymaking. The chapter then presents the statement of the problem, the dissertation's research questions, and the intended purpose of the research in examining the conditions in which local governments engage in the development of aging policy.

Context of the Problem: The Evolution of National Aging Policy

The discourse on aging policy is typically associated with national policy surrounding a medical model based on health, security, and long term supports (Schwartz, 2012). The medical model of national aging policy, for instance, stems from adoption of federal legislation such as Social Security, Medicaid, and Medicare (see Table 1). Recently, the Patient Protection and Affordable Care Act of 2010 addresses issues important to older adults from the perspective of enhancing the medical service delivery system (Takach, 2012). Aspects of this modern national policy address health care delivery for older adults relative to long term care and institutionalized support.

Up until the early 18th century, as Fischer (1978) argued, old age in America was rare because people did not live as long, and older adults were relatively independent of government aid because the sense of retirement did not exist as a social construct of society. He suggested that the struggles of elderly in America rose in the early to mid-1900s through the 1970s due to the modernization of America. Further, he contended that changes in legal status, cultural manners, and social obligations led to generational conflicts over issues surrounding labor and retirement. He suggested that this turning point and an extreme increase in poverty of older persons surfaced the development of federal policies designed to target the social problems of the aged. He goes on to elaborate that by the mid-1930s the practice of forced

retirement increased the poverty rate of older adults. Special interest groups battled for and against the principles of expanding current national policy on the Old Age Pension (see Table 1) to increase coverage.

Due to the lack of private and federal government pensions, the lack of employment opportunities, high rates of unemployment, and the numbers of those over 65 living in poverty, by 1935, as shown in Table 1, the president and Congress passed the Social Security Act, followed by Medicare and Medicaid in the early 1950 with amendments following in 1965 (Aka, Deason, & Hammond, 2011). A rise in the number of older adults living alone pressured Congress to pass the Older Americans Act (OAA) of 1965 increasing older adults access to nutrition and support services (Pine & Pine, 2002) (see Table 1). A major focus of the aforementioned pieces of public policy, representing only a sample of all national policy relative to aging in the U.S., centered on funding provisions for older adults through long term care supports and ultimately long term nursing home care (Bolda, Lowe, Maddox, & Patnaik, 2005).

Table 1 documents national aging policy in the United States starting from the passage of the first legislation offering retirement for government employees through the Civil Service Retirement Act of 1920 through enabling legislation creating the Administration for Community Living in 2012 (Administration for Community Living, December 31, 2015; P. R. Smith, 2014). The table also distinguishes between specific attributes of a policy and its association with either a medical or cultural model of aging. For instance, the major policy attributes of the Social Security Act of 1935 as insurance for old aged survivors aligns with a medical model. Provisions of national aging policy, as shown in Table 1, such as Medicare, Medicaid, the Older

Americans Act, Nursing Home Reform, and the Affordable Care Act focus address health, long-term care, and provisions for aging and disability.

Table 1

Evolution of National Aging Policy

Year	Policy	Attributes of Policy	
		Medical Model	Cultural Model
1920	Civil Service Retirement Act	Retirement system for government employees	
1935	Social Security Act	Provide old aged assistance and old aged survivors insurance	
1940	Public law authorizing unit on aging at the National Institute of Health	Provision for researching aging policy	
1959	Housing Act of 1937		Provided direct loans for non-profit rental projects of elderly
1965	Older Americans Act	Created the US Administration on Aging and state units, provisions for activities in aging	
1965	Medicare, Title XVIII	Health insurance program for the elderly	
1965	Medicaid, Title XIX	Health insurance program for low income elderly	
1969	Older Americans Act 1969 amendments	Created demonstration programs for foster grandparents and senior volunteers	
1967	Age Discrimination Act		Provides for provision for discrimination based on age

(table continues)

Table 1 (cont.)

Year	Policy	Attributes of Policy	
		Medical Model	Cultural Model
1968	Fair Housing Act		Prohibits discrimination in local public housing, requires building codes for design and construction of accessibility in multi-family housing after 1991; provision for requirements for housing for older adults based on age
1972	Older Americans Act 1972 amendments	Provided for senior nutrition	
1973	Older Americans Act 1973 amendments		Provided for the development of area agencies on aging and authorized grants for senior centers and worker training
1974	Public law authorizing National Institute on Aging	Provides for the development of a national plan on aging health and welfare	
1974	Housing and Community Development Act		Provides for low income housing for the elderly
1975	Older Americans Act 1975 amendments		Provision for tribal organizations, provision for transportation, home care, and legal services

(table continues)

Table 1 (cont.)

Year	Policy	Attributes of Policy	
		Medical Model	Cultural Model
1978	Congregate Housing Services Act		Provides for contracts with local public housing authorities and non-profit agencies for the provision of congregate independent living services for the elderly
1981	Older Americans Act 1981 reauthorization		Provision for services focused on independent living in the community
1986	Older Americans Act 1986 reauthorization	Provisions for roles of federal, state, and area agencies on aging	
1987	Older Americans Act 1987 amendments	Appropriations for in-home services, ombudsman services, health and education, elder abuse legal aid	
1987	Nursing Home Reform Act	Provides direct access to ombudsman services for protection and advocacy	
1990	Americans with Disabilities Act		Provides for protection in employment and public facilities for persons with disabilities
1990	Age Discrimination in Employment Act		Provides for protection against discrimination in employment based on age

(table continues)

Table 1 (cont.)

Year	Policy	Attributes of Policy	
		Medical Model	Cultural Model
1990	National Affordable Housing Act Reforms		Provides for Section 202 Elderly housing program
1996	Older Americans Act 1996 reauthorization	Provision for respite care for caregivers	
2000	Older Americans Act 2000 amendments	Provision for national caregiver support program	
2006	Older Americans Act 2006 amendments		Provision for evidenced based programs and home and community based programs
2010	Affordable Care Act	Provides for long-term care	Provides for managed care of community based supports
2012	Public law establishing the Administration for Community Living	Provides for the consolidation of multiple agencies and programs on aging and disabilities	

Sources: Adapted from Smith (2014), Administration on Community Living (Administration for Community Living, December 31, 2015)

A cultural model focuses on community policies that support aging and independence rather than hospitalization or a residential care model (Phillipson, 2015). For instance, the Older Americans Act of 1965 (OAA), as shown in Table 1, began to establish some national policies to support independent aging through the provision of home and community based services. Additionally, the Fair Housing Act of 1968, the Home and Community Development Act, and the Americans with Disabilities Act created provisions to support older adults to age in place (see Table 1). Responsibility for the provision of these attributes typically devolved to subnational governments directly responsible for the social welfare of their residents (Caro & Morris, 2002).

A timeline of Supreme Court case decisions relative to national aging policy, as shown in Table 2, also illustrates how Supreme Court decided cases affected both a medical model and cultural model. The cases, *Olmstead v. L.C.*, and *Texas Department of Housing and Community Affairs v. Inclusive Community Properties, Inc.* upheld provisions for integrated housing options for minorities, elderly, and persons with disabilities (See Table 2). As shown in Table 2, a recent ruling on *National Federation of Independent Business et al. v. Sebelius, Secretary of Health and Human Services, et al.*, relative to the Affordable Care Act, clarifies the use of Medicare and Medicaid on home and community based health services for long-term care. In its entirety, the Affordable Care Act aligns more with the medical model, however, this ruling establishes a precedent for federal spending on local and community based supports. With regards to the role of local governments in a cultural model of aging, the court decisions shown in Table 2, provide evidence of the mandated role and responsibilities of local governments to, for instance, upholding fair housing and ensuring community access for individuals with disabilities. Table 2 also includes Supreme Court decided cases on the Age Discrimination act. This dissertation does not directly examine the age discrimination act. The findings presented in Table 2 illustrate the extent public policy discriminated against the elderly, here, primarily in the capacity of employment and the work place.

Table 2

Supreme Court Case Decisions on Aging Policy

Category Type	Case	Year	Federal Policy	Attributes of Supreme Court Ruling (decisions align with cultural model)
Housing				
	<i>Arlington Heights v. metropolitan housing development corp.</i>	1977	Fair Housing Act	Provides a test for local governments to prove discrimination was not a factor in making local zoning code decisions on elderly housing
	<i>Olmstead vs. L.C.</i>	1999	Americans with Disabilities Act	Fair integration, unjustified segregation of people with disabilities(elderly) as unlawful, communities must provide community based services to those entitled to institutionalized care
	<i>Texas Department of Housing and Community Affairs v. Inclusive Community Properties, Inc.</i>	2015	Fair Housing Act	Upholds Fair Housing Act ruling the use of disparate impact claims is legal relative to lending, zoning, or rental policies that disproportionately affect minorities
Health and Community Based Support				
	<i>National Federation of Independent Business et al. v. Sebelius, Secretary of Health and Human Services, et al.</i>	2011	Affordable Care Act	Provides additional protections against Medicaid's spousal impoverishment for those seeking long-term care options in the community, and incentives to keep long-term care recipients out of institutionalization

(table continues)

Table 2 (cont.)

Category Type	Case	Year	Federal Policy	Attributes of Supreme Court Ruling (decisions align with cultural model)
Age Discrimination				
	<i>McDonnell Douglas c. Green</i>	1972	Age Discrimination and Employment Act	Standard for proving discrimination
	<i>Lorillard v. Pons</i>	1978		Jury trial rights under ADEA
	<i>Oscar Mayer & Co. v. Evans</i>	1979		State law remedies under ADEA
	<i>Texas Department of Community Affairs v. Burdine</i>	1981		Standard to evaluate employer's non-discriminatory reason for termination
	<i>Trans World Airlines, Inc. v. Thurston</i>	1985		Seniority rights
	<i>Price Waterhouse v. Hopkins</i>	1991		Gender/Sex and Age stereotyping
	<i>Astoria Federal Savings and Loan Association v. Saliminio</i>	1991		Effect of State Agency Determination
	<i>Hazen Paper Co. v. Biggins</i>	1993		Termination Preceding Pension Vesting
	<i>St. Mary's Honor Center v. Hicks</i>	1993		International discrimination
	<i>O'Connor v. Consolidated Coin Caterers</i>	1996		Replacement by younger workers

Sources: (Green v. McDonnell douglas corporation.1972; Lorillard v. pons.1978; Oscar mayer & co. v. evans.1979; Texas dept. of community affairs v. burdine.1981; Trans world airlines, inc. v. thurston.1985; Price waterhouse v. hopkins.1989; Hazen paper co. v. biggins.1993; St. mary's honor center v. hicks.1993; Reeves v. sanderson plumbing products, inc.2000; National federation of independent business v. sebelius.2011; Texas department of housing and community affairs v. inclusive communities project, inc.2015)

It is reasonable to suggest that a dominant paradigm on aging grounded in a medical model as highlighted above assumes aging needs will be isolated to a health care response

typically funded through national programs such as Medicaid and Medicare. Major national aging policies presented in Tables 1 and 2 typically dealt with the medical needs of the country's older adults addressing poverty and nutrition. American cultural facilitates social constructs of what it means to grow old. From this perspective, Gawande (2014) argues the early old aged homes in the 1930s did not emerge because individuals seen as old and frail needed a better life, but rather society and culture said old age is a health issue and a medical problem. He argues that the societal response led to national policy and federal funding to grow hospitalization followed by the advancement of the nursing home industry. In other words, the deficiencies of the medical model view solutions to aging through the lens of hospitalization and institutionalized care.

This dissertation research does not intend to address the medical model typically supported by federal and state governments. The purpose of this dissertation research is to address a key gap in aging policy adoption presented through a cultural model of aging. It argues that the cultural model of aging overcomes the medical model by refocusing public policy on aging at a local government level targeting independence, community supports, and quality of life. Tables 1 and 2 provide some evidence suggesting some national policies began to address aging as independence and community making provisions on housing, transportation, and community based supports, but with the devolution of responsibility of subnational governments. Figure 1, illustrates the contextual comparison between the medical model and cultural model. This dissertation argues that local governments are at the center of this cultural policy making arena through the adoption of age friendly policies emphasizing target areas of mobility, housing, the built environment, and the provision of services (see Figure 1).

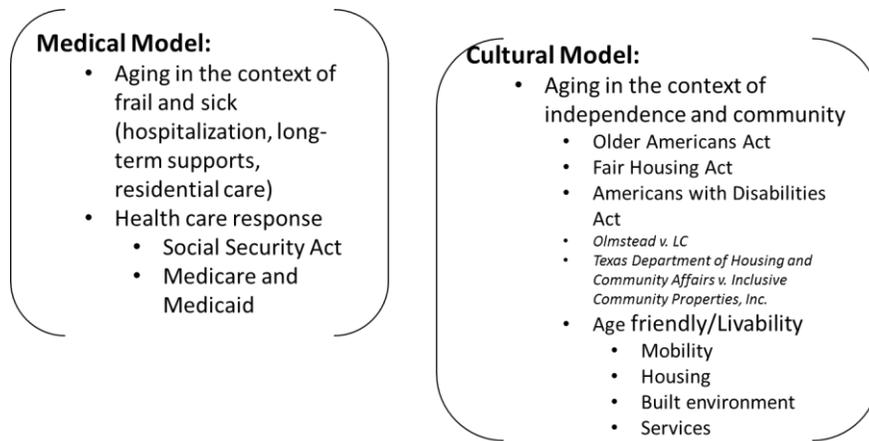


Figure 1. Evolution of a cultural model for aging policy.

A community based discourse driven by a cultural model on aging policy relative to an older adult's ability to maintain their independence is emerging. This scholarship considers the aspects of how age-related issues correspond with an individual's physical and social environment (Bronfenbrenner & Morris, 2006; Greenfield, Oberlink, Scharlach, Neal, & Stafford, 2015; Lawton, 1989). Lawton's and Nahemow's (1973) ecological model of the transformation of older adults in their environment as they age, mentioned above, serves as a basis for a cultural model. This dissertation research captures this argument in a cultural model of aging manifest with local governments at the center of policymaking. In this context, the elements of a cultural model of aging are established through a public policy framework that encompasses community planning approaches around the connection between health, independence and the built environment (World Health Organization, 2007).

The topic of developing cities friendly toward the needs of older adults is important to public administration due to a public administrator's responsibility to respond and support

policies that meet the needs of the citizens they serve. Among other basic functions, local governments have a responsibility to provide basic social services and infrastructure as well as protect the vulnerable (Phillips & Phillips, 1996). With regards to my dissertation research, the role of local governments, relative to age friendly cities, or rather public policies friendly toward older adults, is defined by their ability to affect quality of life, social health, and daily living in the community.

Cities are a natural place to test the cultural model of aging through age friendly policy adoption due to their localized knowledge of the citizenry and their capacity to influence physical and social spaces. First, cities are responsible for the provision of amenities to citizens. Second, cities are responsible for strategic planning, zoning, ordinances, building codes, and land use, all of which are mechanisms available to local governments to address the policy needs of citizens. Local governments are fundamentally responsible for establishing a basis of law through their charter and ordinances (Stenberg & Austin, 2007). They have the power to regulate land in the interest of health and safety and control the process of revenue collection and expenditure of public finances (Berman, 2007; Meck, 2007). Finally, local governments are legally positioned to provide basic social services and infrastructure, protect the vulnerable, and provide overall general public safety (Benavides, 2007). A democratic response of local governments relative to the demographic composition of the community may surface variation in a city's attention and leadership on the adoption of policies friendly toward older adults.

Statement of the Problem

The problem addressed in this research is the understanding of the local government policy making and program service delivery role in a cultural of model of aging in a response to

the monumental change in the number of individuals aged 65 years and over. The sheer number of individuals aged 65 years and over will place pressure on local government program and service delivery. The limitations of the medical model to address the needs of these individuals as presented above is that this model only lets us understand aging in the context of sick and frail. Conversely, the cultural model argues that given the large number of forecasted adults aged 65 years and older not all are going to be sick and frail. It also argues that those aged 65 and older have different needs from a younger generation. Further, the cultural model argues that the traditional local government response has not typically met these needs. This research fills the gap between a medical model and cultural model of aging by documenting what local governments are doing. Local governments are responding to the needs of their citizens but we do not understand the factors that influence and the conditions under which age friendly policy adoption occurs. Cities are a natural place to examine the cultural model because they provide services and amenities to their citizens and some local governments are already adopting age friendly policies.

Purpose of the Study

This research investigates the extent that local governments respond to the needs of a population aged 65 years and over with specific attention on policy in the domains of mobility, housing, the built environment, and public service delivery. The evidence from this study will show when we are most likely to see adoption of age friendly policies by local governments, here, municipalities. The aims of the study are (a) to expand our understanding of a cultural model of aging, (b) to examine the role of municipalities in the context of aging policy adoption, (c) to examine the predicted and logical determinants of municipal adoption of age friendly

policies, (d) to examine through bureaucratic responsiveness theory and the sub-theories of multi-level governance and public entrepreneurship the magnitude that local governments respond to the needs of a growing population of individuals aged 65 and over, (e) to investigate and describe why local governments may make different policy choices (mobility, housing, services, and the built environment) relative to the domains of age friendly policy adoption, (f) to report and analyze findings of analytical models examining the predicted effects of local government adoption of age friendly policies, and (g) to examine and discuss the broader implications and potential distributional consequences surrounding local government decisions to adopt or not to adopt age friendly policies.

Research Questions

Based on the purposes of this dissertation, the following research questions are presented to examine the phenomenon of age friendly policy adoption by local governments, the magnitude of adoption, and the factors effecting different policy choices:

- What is the role of local government in age friendly policy adoption?
- What are local government perceptions of age friendly policy action?
- What factors influence a city to adopt age friendly policies?
 - What factors influence some cities to support more age friendly policy actions than others?
 - What influences cities to differentiate among age friendly policy choices?

Significance of the Study

This research is timely given the forecasted doubling of a population aged 65 years and older. Further, it is meaningful given its purpose to juxtapose the medical model of aging with a

cultural model refocusing aging policy from institutionalization and long term care to policy on independence and community. It extends the cultural model of aging manifest with local governments at the center of policymaking. Additionally, it seeks to advance knowledge about municipal policy adoption related to the pressures of a growing aging population beyond critical and normative arguments.

This research strengthens our understanding of age friendly policy adoption through logical and predictive findings based on the theoretical factors of bureaucratic responsiveness, multi-level governance, and public policy entrepreneurship. This research's empirical analysis of bureaucratic responsiveness theory will close a gap in the literature by testing this theory empirically and confirming a value of responsibility toward older adults by local governments through age friendly policy adoption. Finally, this research is important because it informs on the practical implications if local governments fail to adopt policies friendly toward older adults. For instance, a community without a strong citizen voice and low bureaucratic responsiveness may find limitations in advancing housing and mobility options relative to the changing needs of older adults. Further, the lack government resources to provide programs and services may result in distributional consequences for older adults (Hirshorn & Stewart, 2003). Findings illustrate how local government policy making translates to the living conditions for the elderly.

The dissertation proceeds as follows. Chapter 2 provides evidence of the local government role in aging policy. Further, it establishes a place for cities and municipalities specifically in age friendly policy adoption. Chapter 3 reviews the literature on the concept of age friendly in the context of bureaucratic responsiveness theory providing evidence on capacity of cities in the age friendly policy arenas of transportation, housing, the built

environment, and the provision of public services. Chapter 4 provides the theoretical framework arguing that factors of bureaucratic responsiveness supported by the sub-theories of multilevel governance and public policy entrepreneurship are associated with the decision by cities to adopt age friendly policies. Chapter 5 provides the research design necessary to examine the research questions presented above. Chapter 6 provides and discusses the analytical findings. Chapter 7 presents the theoretical contributions of this research. Finally, Chapter 8 discusses concluding remarks, broader implications, limitations, and opportunities for future research.

CHAPTER 2

THE ROLE OF LOCAL GOVERNMENTS IN AGING POLICY

Introduction

A cultural model of aging places local governments, those closest to the people, in a strategic position of policy making around the needs of older adults. Aging policy, through the lens of a medical model, emerged as a national response to poverty and poor health of the aged. The following discussion provides evidence of the role of local government in aging policy. This review of the history of aging policy in America does not represent a salient review of all public policy around aging issues in America. Rather, this discussion systematically presents those policies that established the concept of being old in America, and those policies that ultimately devolved to subnational governments for financing and implementation of public policy designed to support the aged. It attempts to present an evolution of evidence of the devolution of the responsibility of older adults from the federal government down to lower levels of government. The chapter goes on to examine the literature relative to the local government's role in the age friendly policy and the arguments on local government policy objectives for entering this policy arena.

Aging Policy: Beyond a National Issue and Concern

U.S. history illustrates an awareness of the old, for instance, through America's first efforts toward a public benefit for the elderly through the Civil War Pension in the late 1800's (Fischer, 1978). Further, federal effort to address the needs of a growing number of impoverished elderly followed a decade later with the federal Old Age Pension (Hudson, 1999). These efforts of public policy officially established a national age and definition for being an old

citizen of the United States. By 1935, the federal government passed the Social Security Act extending benefits to all older adults not currently institutionalized as inmates (U.S. House of Representatives, 1935). Recognizing the power of older adults as a voter block, support of public policy for the old emerged as prominent agenda items on national political platforms (Turner, Shields, & Sharp, 2001). President Franklin Delano Roosevelt spoke often to the American public through his fireside chats on the importance of ensuring retirement security for the older worker (Roosevelt, 1935). National responsibility toward the aged through Social Security was initiated by the federal government and continues to remain a national government program. On average, the national government issues roughly 50 million social security checks to older U.S. citizens per month (Meier & Bohte, 2007) (See Table 3).

National programs of the New Deal in the 1950s, such as Medicaid and Medicare, where Medicaid is health insurance specific to lower income individuals including older adults, and Medicare is a sliding scale entitlement exclusive to older adults, grew in national policy favor (Fischer, 1978). However, these prominent health insurance policies, as shown in Table 3, illustrate the national government's shifting aging policy responsibility to subnational and non-governmental entities (Hudson, 1999). Proceeding decades continued a trend toward devolution of aging policy under President Reagan through the consolidation of categorical block grants and large scale cutbacks to programs such as Medicaid (Nathan, 1987). The reduction in federal spending shifted more responsibility to states relative to the provision of Medicaid establishing a place for subnational governments in the medical model of aging policy.

Table 3

The Effects of Federalism on Aging Policy and Aging in Place

Policy Type	Government Level of Origination	Implementation Mandate	Attributes of Policy
Social Security Act	National	National	Public pension benefits
Medicare	National	National	Health and hospitalization insurance for older adults; administered by the federal government; funds authorized by Congress
Medicaid	National	State and Local	Health insurance for low income persons including older adults; national government sets standards; administered by state governments; joint financial responsibility of state budgets; local government responsible for community based services and zoning for nursing facilities
Older Americans Act	National	State and Local	State agencies contract with local area agencies on aging; area agencies on aging can contract with local governments for service provision; local governments may match over overmatch federal funds to increase available services due to decrease in OAA funding support.
U.S. Housing Act of 1937	National	Local and nonprofit	Section 202 provides direct loans for the purpose of constructing subsidized housing for nation's older adult population
Olmstead Act, Title II of the Americans with Disabilities Act (ADA)	National	State and Local	Requires states and local governments to make provisions for housing within the community for persons with disabilities or mental health diagnoses

(table continues)

Table 3 (cont.)

Policy Type	Government Level of Origination	Implementation Mandate	Attributes of Policy
Fair Housing Act of 1968	National	State and Local	Prohibits discrimination in local public housing, requires building codes for design and construction of accessibility in multi-family dwellings after 1991
<i>Texas Department of Housing and Community Affairs v. Inclusive Community Properties, Inc.</i>	National	State and Local	Prohibits discrimination relative to lending, zoning, or rental policies that disproportionately impact minorities
Property Tax Relief	Local	Local	Initiated in response to lack of subsidized or affordable housing supply
Age Friendly Policies	Primarily local	Primarily local	Shift away from medical model of aging toward cultural model with place based policies to modify social and physical environments to support aging in place; transportation and mobility options, housing choice and affordability, basic access to daily needs and supportive services, access to information.

Studies provide some evidence of subnational responsibility for national policies on aging (Liebig, 1992; Liebig, 1993). For instance, Leibig (1993) described Medicaid policy as a joint financing effort by national and state governments. In a case study comparative analysis of the federalism of national aging policy in the United States and Canada, she found evidence that the United States has direct responsibility for funding to support a joint funding relationship for Medicaid (See Table 3). She argued that the national government, for instance, sets standards, the state governments pay premiums and fund training and research in the

provision of health insurance services. The findings demonstrate the push of financial responsibility for national health insurance for older adults in the United States is primarily subnational. Important to this dissertation research, Leibig's (1993) evidence also provides support for the role of local governments in aging policy from the perspective that local governments have a role in the Medicaid delivery system establishing the zoning codes for respective health care facilities and nursing homes (see Table 3).

Similarly, a comparative case study of intergovernmental relationships toward aging policy implementation between the United States and Germany, Campbell and Morgan (2005), demonstrates subnational governmental response to unfunded national mandates relative to the aspects of the medical model of aging. They find evidence that both the United States and Germany tend to have long term care policies that incentivize health insurance decisions that push older adults toward nursing homes rather than allowing older adults to stay at home. The findings of the author's research have limitations but inform on the role of national and subnational governments in aging policy. The authors provide evidence that unlike Germany, where national policies ensure bargaining and negotiating toward revenue sharing among all levels of government, the United States and its local governments are typically left to raise their own taxes to pay for the federal policy (see Table 3). Further, they argue that due to the fragmentation of subnational governments in the United States, lower levels of government will only continue to feel a rising burden of funding national policy on long term care due to the increase in Medicaid eligibility from population growth and national policy changes to expand coverage.

A dimension of devolution illustrating an active role for local governments in aging policy along with the emergence of a cultural response to aging is realized through requirements for the provision of services in the Older Americans Act (OAA) of 1965 (Table 3). As shown in Table 3, OAA amendments of 1973 and 1975 address the provision of senior centers, and transportation services. The OAA devolves responsibility to area agencies on aging to allocate federal resources to city/county governments and nonprofit providers for the provision of services for older adults (Bolda et al., 2005) (see Table 3). Pine and Pine (2002) provide evidence in a case study of housing and service arrangements in New York State that the OAA's provision of home and community based services has tripled the number of persons receiving localized health and education support services by local governments and nonprofit providers. The importance of OAA programs considers the emphasis placed on older adults remaining in their homes as they age, an important aspect of the cultural model.

The concept of devolution of aging policy to the local government level and their place in a cultural model of aging is also realized in federal housing policy since the first national housing policy, the U.S. Housing Act of 1937 (Pine & Pine, 2002) (see Table 3). In the late 1950's the federal government established Section 202 of the U.S. Housing Act to provide direct loans to non-profit and limited for profit companies for the purpose of constructing subsidized housing for the nation's elderly (Ehrlich, Mendelson, & Quinn, 1976). Further, as shown in Table 3, the Supreme Court Ruling on *Olmstead vs the United States* made it a requirement for states and local governments to provide housing options for persons with disabilities that wish to retain their independence and not live in institutionalized nursing care (Olmstead, 2003). Pynoos, Nishita, Cicero, and Caraviello (2008) argue that the Olmstead ruling is the substance

behind the concept of aging in place. They suggest that the Olmstead ruling, the Housing and Urban (HUD) Development Block Grant (CDBG) program, Section 202, the OAA, and the transition of Medicaid to Medicaid Waivers have initiated a policy diversion away from federal policy of long term care institutionalization toward local community supports and aging in place. They explain that federal programs provide some financing to support a local government response but federal policy is not keeping up with demand. Here, as shown in Table 3, the responsibility falls on local governments relative to zoning and building codes, based on requirements in the Fair Housing Act of 1968 to incentivize and ensure the development of affordable and accessible multi-family housing options (Pynoos et al., 2008).

Prior research on the normative role of state and local governments in the context aging policy suggests that state and local governments share responsibility of the well-being of their citizens including the impoverished and needy (Liebig, 1992; Serow, 2003). For instance, Serow (2003) argues that local governments have primary responsibility for public safety, security, health, and transportation suggesting that local governments already have the structure to address needs of older adults in these areas. He argues though that the impact for local governments to offer services and accommodate needs may be affected by the extent their own population ages. The author contends, if a community has an increase in overall absolute numbers of older adults it could impact its distributional patterns between a balance of services between the young and old.

Based on the earlier arguments posed above by Nathan (1987) and Liebig (1992) relative to major federal spending cuts to support aging policy at the subnational level, state and local governments have been forced to raise their own revenue to address aging needs. As shown in

Table 3, local governments introduced property tax relief policies to freeze rates at a certain level for residents over a certain age, typically 65 years of age, helping older adults maintain home ownership. Additionally, in response to reductions in federal housing funds, some local governments have championed innovative policy solutions such as zoning code changes to support the provision of the granny flat apartment over garages to support housing stability for the elderly (Leibig, 1992) (see Table 4). In what Conlan (2006) refers to as new federalism, local governments are forced to go it alone.

National policy has the intent of protecting older adults from poverty and homelessness, but the fragmentation of the system, and significant reductions in federal funding suggest that communities will be forced to explore their own responses (Bolda et al., 2005). Kettl (2000) argued that as early as the 1960s, local governments have played an important role in implementing federal policy and institutionalizing their role in providing a pattern of service. He contends that local governments and even quasi-governmental organizations have taken the lead on solving social problems related to arts and education responding to localized needs. Further, he suggests that local solutions require local expertise to manage complex issues and relationships.

Nationally, the federal policy discourse on aging centers on the medical model on long term care policy, but citizen demand for policies and services friendly toward older adults corresponds with the place based theories of aging in the community with localized supports (Johansson et al., 2013). Greenfield et al. (2015) argue that the gerontology paradigm is shifting away from long-term care and institutionalized supports toward community driven initiatives and the cultural model argued in this dissertation. However, they argue that the federal policy

is not shifting quickly. The authors posit that the emergence of Age Friendly Community Initiatives (AFCIs), as referenced at the end of Table 3, is a localized response to a national citizen demand to aging in place (Wiles et al., 2012). They suggest that AFCIs support the paradigm shift from long term care services to the development of a localized and deliberate effort of communities to make changes in social and physical environments to support aging in place.

Age Friendly Policy Adoption as a Localized Response

The concept of age friendly as a matter of public policy, as shown in Table 3, builds support for a cultural model with fundamental efforts that are placed based and community planning policies that modify social and physical environments to support aging in place; transportation and mobility options, housing choice and affordability, basic access to daily needs and supportive services, access to information (Keyes et al., 2013). Relative to the role of local governments, municipalities are typically involved in the AFCI response along with nonprofits, transit providers, housing authorities, and faith based organizations to mobilize resources toward a comprehensive response (Greenfield et al., 2015). Garon et al. (2014) find evidence in a case study of AFCIs that cities with strong leadership from the municipality which champion for age friendly policies tends to lead to the institutionalization of age friendly policies and the allocation of resources to support programs.

The topic of aging in place and age friendly policy adoption is important to public administration because public managers have a responsibility to serve citizens and their collective interests (Denhardt & Denhardt, 2001). Local government responsiveness to citizen needs lie in the balanced delivery of municipal services. Local governments are legally

positioned to provide social services to their citizens and allocate resources to support planning and implementation activities (Plouffe & Kalache, 2010). Further, they have a direct ability to gauge citizen need through the facilitation of public participation efforts (Lui, Everingham, Warburton, Cuthill, & Bartlett, 2009). Assessment of citizen need is an important assumption of bureaucratic responsiveness theory, the primary theoretical argument of this research. With regards to age friendly policy adoption by local governments, Greenfield et al. (2015) argue that the Age Friendly Community Initiatives (AFCI) are deliberate efforts that engage citizens, stakeholders, faith based organizations, housing providers, transportation providers, and municipal governments. Involvement of older adults in their communities is a local issue and how they continue to participate in the civic realm as they age is an important issue for local governments (Burr, Caro, & Moorhead, 2002). The practical implications for local governments and the benefits for studying them relative to this dissertation's research questions, is their capacity to capture citizen need and provide leadership through a facilitated and directed response through policy adoption and implementation of programs and services.

As professionals, public managers should be aware of the changing demographics of their communities and ultimately of their citizens' changing needs (Wolf & Amirkhanyan, 2010). For instance, the trends of a growing older adult population in communities throughout the nation will place pressure on local governments with regards to services and programs (Benavides, 2007; Keyes et al., 2013; Wolf & Amirkhanyan, 2010). Benavides and Keyes (2015) find evidence through a case study research design that a local government, the City of Decatur, Georgia, strategically planned for an aging population in over two decades of strategic, land use, and housing plans. The authors provide evidence of the inclusion of goals specific to

the needs of older adults in adopted plans as well as the allocation of city resources earmarked for implementation of policy in adopted budgets. The authors argue that the city supported public participation and an active process of listening, learning, and responding allowed the city to track the evolving needs of its citizens as they aged. They also found a bureaucratic response to needs through identified goals and measurable objectives in the city's strategic plan. Further, the authors provide evidence of the city's attempt to reflect the needs of the community over an almost 20-year planning effort has resulted in the provision of subsidized housing, volunteer efforts to support social connections and independence, as well as a dedicated earmark for staff capacity in the city's annual budget.

The argument for this dissertation research recognizes the limitations of a single case study design and does not suggest the City of Decatur is the norm for all cities. Rather, this argument suggests that Decatur informs on the active role of the public administrator establishing a collective vision with the community ensuring the provision of goods and services to meet the expressed needs of citizens. The findings from the City of Decatur also inform on the concept of bureaucratic responsiveness. It confirms local government adoption of policies friendly toward older adults when there is congruence between citizen and stakeholder involvement, strategic planning, and government programs.

Scholars have advanced general understanding of the role of local governments in age friendly policy adoptions through empirical analysis of purposive samples of city governments (Keyes & Benavides, 2017; Lehning, 2012). For instance, Lehning, (2012) using diffusion theory and public entrepreneurship as assumptions, finds evidence in a sample of cities in the San Francisco area that local governments adopt age friendly policies when the policies are

championed by a local elected official. Through a sample of cities in the Dallas-Fort Worth Metroplex and cities already identified as age friendly through the Milken Institutes Cities for Successful Aging Report, Keyes and Benavides (2017) find some support for age friendly policy adoption using responsiveness, multi-level governance, and public entrepreneurship theories. They find that local government officials who indicate participation in training on services relative to aging in place such as transportation, housing, health, recreation, and public safety is positively associated with local government adoption of policies friendly toward older adults. The authors conceptualize bureaucratic responsiveness as the local government's perception that in general they are adopting age friendly policies. They go on to find a congruence between expressed citizen need and a bureaucratic value of responsiveness toward older adults based on a positive and significant relationship between a government having an adopted community assessment plan and adopting age friendly policies. Finally, similar to Lehning (2012), they provide evidence of a relationship between local governments that identify a locally elected champion on these issues and the adoption of policies friendly toward older adults.

Balancing Local Government Policy Objectives

The following examines why some local governments are involved in aging policy from social, economic, and civic perspectives. First, from a social perspective, cities that make necessary changes to accommodate the needs of their older citizens contribute to a positive living experience and overall quality of life. Normative arguments suggest local governments adopt age friendly policies to support older adult independence and their goals toward meaningful participation in their community (Greenfield et al., 2015; Pynoos et al., 2008;

Scharlach & Lehning, 2013; Thomas & Blanchard, 2009). Some example accommodations include continued access to transportation, parks and recreation, socialization, health care, and basic elements of everyday living (Dickerson et al., 2007; Fitzgerald & Caro, 2013; Kerr, Rosenberg, & Frank, 2012; Rosenberg & Everitt, 2001). ICMA's (2015) Knowledge Network suggests that local governments become actively involved in learning about and promoting age friendly policy adoption in order to help them strategically plan for the forecasted growth of the population 65 years and above.

From an economic perspective, lawmakers are beginning to focus attention relative to the high costs of institutionalized care and need for housing options (Wiles et al., 2012). Notwithstanding, the benefit to local economies from the rising demands for housing options (Nelson, 2009) are the opportunities communities have from this existing workforce. For example, the slow growth of the nation's workforce will place increased demand for the baby boomer skillset to remain active in the workforce longer (Klinger Donald & Nalbandian, 2003). Finally, from a civic perspective, older adults comprise an active segment in American civic engagement. Participation ranges from community, political, and government sponsored programs. For example, federally funded volunteer opportunities for retired individuals increases the capacity of older adults actively participating in communities across the nation (Achenbaum, 2006). Individual groups such as these provide opportunities to connect citizens with the public administrative process (Vigoda, 2002). In other words, the engagement of older adults has both individual and community-wide benefits (Keyes et al., 2013).

Theoretically, it is difficult to support an argument as to why communities would be at a disadvantage socially by accommodating any group within their community. As a representative

bureaucracy, public managers have a responsibility to serve the public interest of the citizens they serve and maintain a democratic process in decision-making (Denhardt & Denhardt, 2001). Public values of political responsiveness suggest that public administrators are morally obligated to address needs of the underserved (Frederickson, 1980). Considering any class or group of citizens a social burden puts public administrators in conflict with ethical and democratic obligations.

As Wolf and Amirkhanyan (2010) argue from an economic context, local governments have typically played a role in providing services to both older adults and children under 18. The authors suggest that the expectations for service growth will likely correlate to projected increases in either cohort, but local governments may face fiscal strains on delivering services. This is due to the impact both cohorts will have on the collection of taxes through the reduced spending power. Similarly, as discussed above, Peterson (1981) contends that cities experience economic constraints and thus mayors categorize policy preferences based on economic considerations.

Some scholars provide evidence that cities can make different decisions relative to policy adoption and service provision to overcome new challenges, but decisions are still influenced by economic constraints (Clark & Goetz, 1994; Jang & Kwon, 2014; Saiz, 1999; Stein, 1993). Local governments may be less willing to provide services such as health, nutrition and aging services because these programs are associated with redistributive policy types (Stein, 1993). In addition to a potential negative budgetary impact, local governments tend to avoid redistributive type policies because they require a needed scale of production beyond the capacity of a local government (Basolo & Huang, 2001; Longoria, 1994).

Conversely, scholars have argued limitations to Peterson's argument (Basolo & Huang, 2001; Krane, Ebdon, & Bartle, 2004; Schneider, 1989; Stein, 1993). For instance, Schneider (1989) provided evidence of limited variation in local government bundle of services. Further, Stein (1993) provided evidence that local governments did support redistributive policies even though they were more likely to contract services out to other providers. Moreover, Basolo and Huang (2001) argued that local government policies are not mutually exclusive to Peterson's categories of developmental, allocative, and redistributive policy types.

Important to the research questions of my dissertation is Basolo and Huang's (2001) evidence that local government politics are more complex than an economic argument. These authors provide evidence that elected official support had a positive and significant effect on local policy decisions. Further they found evidence that population need, and economic development planning are significant factors in predicting policy adoption. They found that those cities without an economic development plan are less likely to adopt economic development policies. Most importantly for the argument of my dissertation research, the authors did not find evidence that empirically supported public choice theory. In other words, these findings provide an opportunity for this research to employ a different theoretical framework to explain local government adoption of age friendly policies.

CHAPTER 3
LITERATURE REVIEW

Introduction

Older adults express a desire to remain in their communities (Fitzgerald & Caro, 2013). Survey data suggests that an increasing number of older adults want to remain in the home and community as they age (Wiles et al., 2012). Communities can create stressors that make it difficult for older adults to remain in a certain place or attractors, such as housing choice and mobility options, supporting their needs as they change (Boldy, Grenade, Lewin, Karol, & Burton, 2011). For instance, a community may not provide lower income older adults with a range of affordable housing options placing pressure on the residents' capacity to remain in a certain locality if individual needs change. A range of options include access to affordable options relative to changing income levels matched with mobility options connecting individuals with the basic services of their community (Pynoos et al., 2008). The older adult's ability to age in their home community may depend on the community's ability to offer certain age friendly features both in the physical and social realm.

Normative arguments suggest that local governments, through their jurisdiction over strategic planning, land use, zoning, housing, and transportation, are able to foster the development of communities friendly toward older adults (Rosenthal, 2009; Scharlach, 2009). In other words, the ability to age in the community may depend on the public administrator's acute and interested awareness in what older adults need. Public managers have a purposive role in linking the needs of the citizens to their actions and fundamentally representing their values (Yang & Pandey, 2007). The purpose of this chapter is to examine the concept of age

friendly, deconstruct the concept of age friendly identifying the specific domains that align with the daily responsibilities and legal obligations of local governments, and associate the concept of age friendly with a bureaucratic response.

Conceptualizing Age Friendly Policy

The international and national age friendly initiatives identified in the literature suggests that certain elements are necessary in communities to support healthy and independent aging. These include the built environment, mobility, housing, programs and services, access to information, civic participation, security, value, and leadership as shown in Table 4 (Benavides & Keyes, 2015; Fitzgerald & Caro, 2013; Lui et al., 2009). Table 4, illustrates the original domains of successful aging as captured by both the WHO age friendly cities initiative (World Health Organization, 2007b). Further, Table 4 establishes an association of the age friendly domains with local governments matching the age friendly domains with example local government initiatives (Benavides & Keyes, 2015). Public policymaking around aging in place and age friendly results in outcomes of programs, service, and community design. Finally, relative to the evidence presented in Table 4 presents a third column illustrating a connection between the domains of age friendly and example initiatives with the theoretical concept of bureaucratic responsiveness. Specific bureaucratic responses associated with the legal obligations of government are discussed in more detail in the proceeding subsections.

Table 4

Domains of Age Friendly Policy and Bureaucratic Responsiveness

Domains of Age Friendly Policy	Example Initiatives	Bureaucratic Responsiveness
Mobility	Pedestrian and bicycle facilities	Comprehensive transportation plan Improvements to transportation safety and access including sidewalks
	Transportation options including transit and older driver safety design	
Housing	Housing options across price range and type	Community Housing Needs Assessment Plan; Housing Affordability plan
	Subsidized housing	Updates to zoning and regulations to facilitate housing options
	Home services for elderly - home repair and maintenance	
Built Environment	Community design and features that support open space and recreation	Integrated strategic plan
	Planning and Zoning	Comprehensive land use plan
	Land use policies	Allocation of resources toward community features/design to attract older adults to the community
Programs and Services	Library	Adopted programs and services plan
	Recreation	Adopted parks and recreation plan
	Health	Senior oriented programming
Access to Information	Senior Center	
	Communication and Information	Website and Community newsletter
Participation	Social engagement opportunities and involvement in activities	Participation plan
Security	Public safety and emergency management provisions	Public Security plan
Value	Civic participation and employment	
	Lifelong learning and education opportunities	Program and service plan; Partnership beyond city
Leadership	Participation on advisory councils or committees	Public participation plan
Source: Adapted From Fitzgerald and Caro, 2014; Lui et al., 2009; Benavides and Keyes (2015)		

As discussed in Chapters 1 and 2, a cultural model of aging suggests perspectives are moving away from considering aging and elderly needs in isolation from shared environments such as hospitalization and institutionalized care. Along these lines, Winick and Jaffe (2015) argue that a paradigmatic shift is occurring with respect to the conceptualization of age friendly policies and planning for communities. They go on to suggest the policies captured in the domains (shown in Table 4) cut across fields of aging, transportation, housing, and community design advancing comprehensive solutions to livability for persons of all ages. Consistent with the example initiatives depicted in Table 4 and this dissertation research's argument of a cultural model, the authors suggest that the aging paradigm is moving from viewing aging as a health-related condition to a view of whole person and lifestyle issue. Specifically, the authors contend the transportation planning paradigm, for instance, is shifting from a roadway efficiency focus such as reduction in vehicle miles traveled and roadway infrastructure maintenance toward the development of multimodal, connected, and pedestrian oriented mobility options (e.g. see Mobility domain in Table 4). They go on to say the housing paradigm is shifting from a single-minded focus of low density suburban development toward tax incentivized multi-use development in urban and suburban places along with a redistribution of housing types (e.g. see Housing domain in Table 4). Finally, they maintain that design standards guiding the development of the public realm are shifting from a limited and isolated thinking about transportation modes toward sustainable solutions around the creation of walkable and accessible places (e.g. see Built Environment domain in Table 4). In other words, a multi-field approach integrates strategies creating economies of scale for local governments.

Age Friendly and Local Government Responsiveness

Evidence suggests that local governments actively pursuing age friendly policies in general tend to focus on the relationship of older adults to their physical and social environment (Greenfield et al., 2015; Lui et al., 2009). For instance, as Lui et al. (2009) argue, the physical environment relates to the interaction between the person and the environment in which they reside while the social environment is expressed more broadly as an individual's participation in their broader community. The authors go on to suggest that local governments, through their statutory obligations, may assess the needs of its citizens and lead changes through age friendly policies ensuring residents may remain in the community and access things they need for maximum independence. The relationship of local government and age friendly design is whether the community infrastructure including: housing, transportation, commercial, retail, and park and open space, promotes or creates barriers to successful and independent aging. A lack of attention to age friendly policies by local governments may create difficulties for older adults to achieve goals for independence because their communities lack access to transportation, housing, and basic health and supportive services (Keyes et al., 2013).

In conjunction with Winick and Jaffe's (2015) recognition of a paradigmatic shifts presented above, this dissertation argues the role of local government in a cultural model of aging policy, as shown in Figure 2, concentrates in the domains of mobility, housing, the built environment and services.

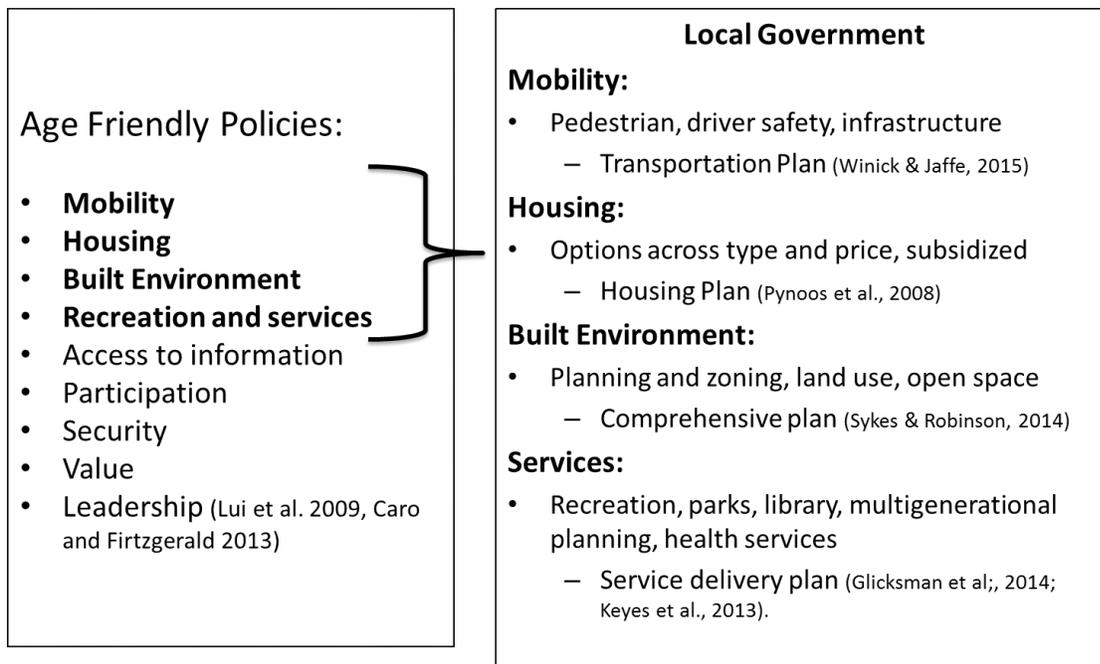


Figure 2. Age friendly policy domains of local government.

Following Lehning’s (2012) argument, local governments have a role in policy decisions that lead to or create barriers in the development of a wide variety of housing options and price points, as well as the provision of senior centers, recreation, and social services. Her research focused specifically on the local government provision of community design, transportation, and housing and found evidence to support age friendly policy adoption. Keyes et al. (2013) through a case study design, inform on the direct role local governments have in leading localized zoning code changes to promote housing options. Recently, Warner, Homsy, and Morken (2016) find local government planning and engagement initiatives inclusive of older adults positively influences provision of elder services. Further, Lynott et al. (2009) provide evidence of local government adoption of complete street policies enhancing the built

environment through pedestrian improvements creating a walkable community for individuals of all ages. The following four subsections provide evidence of age friendly policy approaches by local governments relative to these four domains of transportation, housing, the built environment, and services.

My dissertation research suggests that the remaining domains such as leadership, participation, and access to information (see Table 4 above) relate more directly to broader aspects of the community (Fitzgerald & Caro, 2013; Neal, DeLaTorre, & Carder, 2014) and are therefore not addressed. For instance, Neal, DeLaTorre, and Carder (2014) provide examples of the domains of participation and leadership through a case study of efforts led by a university in Portland, Oregon. Further, Fitzgerald and Caro (2013) suggest that regional councils on aging provide opportunities for citizens to participate in community efforts to advance aging issues. They go on to argue that physical design, infrastructure, and services are specific to the role of the local government while other features of the community play a role in other aspects that associate with individual quality of life.

The domain of public safety includes both public safety within a community and emergency management (see Table 4). Public safety is also not included as an element of this dissertation research for several reasons including the implications of measuring and differentiating between perceived public safety of older adults and the actual quality and performance of public safety (Chadee & Ditton, 2003; Lee & Earnest, 2003; Steven Dietz, 1997). Moreover, with regards to emergency management, local government responsibilities fall within a broader disaster relief community (Drabek, 1987; Waugh & Streib, 2006) making it

difficult to isolate the specific role of local government with regards to public safety in through the lens of age friendly policies.

The following subsections help to illustrate and provide evidence of the connections between the conceptual domains of being an age friendly city and example administrative initiatives by local governments (see Table 4). Further, as a contribution to the literature, and important to the theoretical development of this research discussed below, the following subsections establish a conceptualization of bureaucratic responsiveness toward age friendly policy adoption as mentioned above and shown in the third column in Table 4.

Local Government Adoption of Age Friendly Transportation Policies

While most 65 years old adults will want to remain in their homes and communities, this may prove challenging without public policy that supports increased mobility options for older adults when they are no longer able to drive or do not have access to other options (Fitzgerald & Caro, 2013). Carr and Ott (2010) argue that access to transportation is a critical element for aging in place and express that the loss of driving can lead to both a loss of independence and ultimately lead to a decline in overall physical well-being. A loss of independence may result as the needs of older adults change and in the face of reduced social networks this may result in reduced access to basic and health and supportive services.

While older adults may drive fewer miles per day, they have not stopped relying on their automobiles as their main source of transportation. Kerr, Rosenberg, and Frank (2012) provide evidence that older adults over the age of 65 drive less as identified in household travel surveys, the age group's overall vehicle miles traveled remained high indicating they still drive at very high levels compared to their younger counterparts. The authors show that when older

adults are no longer able to drive themselves they rely on family and friends for transportation services. This reliance becomes problematic when social networks decrease or become obsolete. Additionally, built environments can also create barriers for older adults to remain independent when they can no longer drive themselves. Community supports may help overcome mobility barriers and ensure older adults remain connected with their community and increase opportunities for social interaction (Dumbaugh, 2008). Thus, improvements to community design may create the possibility for alternative forms of transportation that support social interaction for all members of the community.

Conceptualizing a local government response toward planning for older drivers includes support for volunteer driver programs, better roadway design, improved lighting, and integrated transit services (Winick & Jaffe, 2015). With regards to the domain of Mobility listed Table 4, the City of Casper, Wyoming demonstrates the concept of responsiveness through their government's transportation plan adoption, and allocation of resources relative to their emphasis on new sidewalks, trail development, and pathway construction throughout the city (Sykes & Robinson, 2014).

Local Governments Adoption of Housing Policies

Housing policy to support older adults has devolved at the local government level through federal regulations such as the Fair Housing Act Amendments which require multi-family units constructed after 1988 to be accessible, for instance, with wider doorways. The Americans with Disabilities Act of 1990 places responsibility on local governments to ensure public spaces and public buildings are accessible but has limited effect on housing (Smith, Rayer, Smith, Wang, & Zeng, 2012). In 2009, the Supreme Court ruling in *Olmstead v. L.C.*

basically called for community integration for all individuals allowing anyone the option to reside independently in their community instead of residing in institutionalized nursing care (Pynoos et al., 2008). These federal regulations are designed to support an individual's desire to stay in the community but local governments create barriers because of their use of exclusionary zoning practices, lack of training of building code officials to ensure compliance with federal regulations, lack of mobility options, and lack of connectivity, especially in communities with suburban land use patterns (Pynoos, Caraviello, & Cicero, 2009).

The reality of any individual, regardless of age, being able to live in one community versus another comes down to having access to housing matched with ability to pay and choice. Myers and Pitkin (2009) suggest that American cities are going to feel the pressure from the growing number of older adults and their changing demand for housing products. They contend that cities will feel the impact as baby boomers sell off their current homes. In some cities, the authors suggest, the impact will be much greater where there is an imbalance of potential new younger buyers leaving a pool of houses on the market without the prospect of purchase. Conversely, cities with higher density and compact design where residential and shopping areas are connected for ease of pedestrian access, are gaining momentum among older buyers in search of different housing options including rentals. A motivating question of this dissertation research is whether the available affordable housing stock is proportional to the needs of the older adult population.

City planners are beginning to examine the long-term impacts on housing given the ratio of older adults to younger adults has increased roughly 30% in the last two decades (Giuliano, 2004). The mismatch between older sellers and available younger buyers will

ultimately result in strain on municipal budgets as the situation could reduce overall home values. Myers and Ryu (2008) provide evidence that more 65-year old adults will sell homes than there are buyers available to purchase them in this forecasted sell off. The authors suggest that the rental properties are top options for replacement by older buyers especially in central cities with density where the built environment supports a pedestrian friendly lifestyle. They argue that cities should examine their stock of affordable units and adjust policy to support development of more affordable units. Municipalities need to consider how to balance the ratio between selloff of housing by older adults and the potential access to a pool of younger buyers. The issue of aging is important to local governments due to potential impacts to the local housing markets and the ripple effects to municipal budgets.

The baby boomer housing demand is trending toward areas with density, variety in housing options, and access to services (Pynoos et al., 2008). Establishing a universal response to housing may be challenging due to specific place based needs of older resident such as proximity to family, employment, health care, etc. A community needs assessment allows for an evaluation of available housing relative to residential income levels and identifies gaps between population groups and available housing options (Winick & Jaffe, 2015) (see Table 4). With regards to the domain of housing shown in Table 4, for example, in the town of Scarborough, Maine, bureaucratic responsiveness is illustrated by the leadership of the Community Services Department in the development and adoption of a housing plan resulting in the approval of several new senior housing projects (Sykes & Robinson, 2014).

Local Government Policies on the Built Environment

Barriers exist between geographic location and access to basic community services. Evidence suggests that the design of the community has a relationship to health and quality of life (Glass & Balfour, 2003). The authors' findings suggest that as perceptions of community design deteriorates, older adult perceptions of their health and well-being deteriorate. Additional research evidence suggests that physically disabled seniors are more vulnerable if the environment is poor (Elreedy et al., 1999; Krause, 1993). In other words, increasing vulnerability with age is relative to the environment.

There is a relationship between older populations and access to transportation and community services and their ability to maintain independence (Johnson, Gorr, & Roehrig, 2005). For example, senior centers, typically run by city or county governments, provide non-institutionalized older adults with opportunities for socialization, congregate meals, and recreation (Benavides, 2007). Johnson, Gorr, and Roehrig (2005) provide evidence that the location of senior centers may create barriers for older adults in their ability to access them and utilize their services. The authors suggest that governments must weigh decisions based on citizen need and plan the location of public services relative to population concentrations and economic characteristics of the community to ensure maximum use of public facilities.

A democratic response to community needs through the planning of public infrastructure and services raises issues surrounding equity and social sustainability. Garrido (2013) focuses on a geographic measurement of access between public infrastructure investments and spatial justice. Spatial justice is defined as the supply, quantity, and access to services based on the needs of people in the area (Harvey, 2010). The metropolitan area in

Europe examined in Garrido's (2013) research illustrates similar suburbanization patterns to the U.S. and argues similarities between countries relative to dispersion of inequities due to a lack of access to public infrastructure and services.

Responding to challenges in accessibility created by the built environment requires attention to community connectivity and accessibility between housing, the public realm, recreation, shopping, and basic needs of daily living. With regards to the domain of Built Environment shown in Table 4, bureaucratic responsiveness is reflected, for instance, as the City of Portland's Comprehensive Plan as an age friendly policy instrument integrating the connections between housing, transportation, and land use planning (Neal et al., 2014).

Local Government Policies on Service Delivery

The provision of services to older adults is complex and ranges from needing access to health and supportive services to basic every day needs such as shopping, social interaction, and recreation. King and Farmer (2009) provide evidence through a survey of older adults that there was reluctance by older adults to rely on volunteer services and apprehension from statutory services offered by their government. The authors found evidence that older adults wanted access to services that supported their independence and only considered institutionalized housing with existing supportive services as a means of last resort. In general, they found that older adults had expectations for localized services by their government but only those that supported active and independent lifestyles.

Stenberg and Austin (2007) argue that local governments need to factor in older adults relative to public services planning and programming (e.g. see domain of Services in Table 4). This consideration, they argue, is especially important if demographic forecasts for a jurisdiction

trend toward increasing numbers of older adults and decreasing numbers of youth which opens the door for repurposing public spaces. For instance, they suggest reusing a vacant school for senior services. Consideration of citizen interest in services is also important given the inclination for those identified in the baby boomer generation to be less interested in using a traditional senior center and more likely to use health and recreation opportunities in multigenerational facilities (Winick & Jaffe, 2015). Intergenerational facilities may rely on joint use strategies and have fiscal benefits for some jurisdictions (Israel & Warner, 2008). With regards to age friendly policies, a local government in Ohio utilized Community Development Block Grant Funding to construct a recreational and fitness park designed specifically for older adults in partnership with the existing community center (Winick & Jaffe, 2015).

In an assessment of age friendly criteria for city parks, the City of Philadelphia found a majority of their residents over the age of 65 did not use the public parks for recreation due to issues surrounding access, public safety, and overall appeal (Public Health Management Corporation, 2008). City planning and public participation efforts led to the adoption of an Age Friendly Parks Plan with the goal of increasing park use by older adults (see Table 4). Local government policies surrounding health have also led to the development of government sponsored community gardens in public spaces or at senior centers (Glicksman, Clark, Kleban, Ring, & Hoffman, 2014; Keyes et al., 2013). These examples of age friendly initiatives illustrate service expansion and innovation that increases opportunities for access to recreation and food in addition to opportunities for civic engagement.

Focusing specifically on the provision of elder services at the local government level, Warner et al. (2016) find evidence of a positive and significant relationship between local

governments that plan for seniors and the provision of government funded or provided elder services. Further, the authors find when the population of residents aged 18 years younger and government funded services for the elderly decrease. In other words, local governments appear to make tradeoffs between the provision of services to the elderly and children with their population of younger residents is larger. The list of services covered in Warner et al.'s (2016) research covers additional domains listed in Table 4 including health care, workforce development, and community and civic engagement which are arguably not specifically isolated to the role of local government.

In short, the aforementioned subsections provide some deeper conceptual support for the domains of age friendly policy adoption as depicted in Table 4. These four sub-sections specifically examine literature related to age friendly policies in the context of mobility, housing, the built environment, and programs and services. The purpose of this review was to find some conceptual support for local government responsibility to be responsive to the needs of individuals aged 65 and over. The practical examples identified in Table 4 provide support for a theoretical explanation of local government adoption of age friendly policies through responsiveness theory.

Contribution to Age Friendly Literature

As demonstrated above, the literature is rich in descriptive definitions of age friendly policies and normative arguments of why local governments have a role in policy adoption. Foundational empirical research identifies factors of population, government expenditure and advocacy as positively associated with age friendly innovation, but is limited to a purposive sample of California cities (Lehning, 2012). Warner et al. (2016) provide evidence through the

first large N sample of cities and counties that planning for elders and the inclusion of elders in citizen engagement has a positive relationship with the provision of services for elders. My research contributes to the literature by examining how the assumptions of bureaucratic responsiveness theory overcome limitations arguing that an attitude responsibility by public administrators to be responsive to the needs of older adults is congruent with mobilized citizen need. It argues that a factor of responsiveness by the mayor, city manager, or highest level of administrator adds to the legitimacy of citizen need by demonstrating the organizational goals, mission, purposive citizen engagement, and visionary budgetary principles align with that expressed need. Additionally, my examination of a large N sample of cities only, isolates activities around those shown in Figure 2 as specific to cities attempting to eliminate subjective response error in information about the remaining domains typically offered by non-governmental providers. Further, where previous scholars have examined the adoption of age friendly innovations by local governments, evidence reflects a total count of overall age friendly policy actions. My research examines factors that may influence why some cities implement more policy actions than others. Further, my dissertation examines the factors the influence cities to differentiate among different policy choices relative to the four domains of age friendly policies specific to local governments (also shown in Figure 2 above). Chapter 4 provides the theoretical framework supported by bureaucratic responsiveness theory and the sub-theories of multilevel governance and public entrepreneurship to explain the conditions in which cities adopt age friendly policies.

CHAPTER 4

THEORETICAL FRAMEWORK

Introduction

This chapter argues that based on these research questions, a theory framed in bureaucratic responsiveness and supported by sub-theories of multilevel governance public entrepreneurship is necessary to answer this dissertation's research questions presented in Chapter 1. First, bureaucratic responsiveness is necessary to examine the congruence between the variation in mobilized citizen need and the variation in the public administrator's attitude to be responsive to the needs of a population aged 65 years and over. Second, multilevel governance theory is necessary to examine whether a local government response depends on their access to federal and state resources. Finally, public policy entrepreneurship theory is argued to help examine the causal relationship between the leadership and professionalism of a local champion and the likelihood of local government adoption of age friendly policies. The following discussion frames a theoretical argument of understanding local government adoption of age friendly policies through bureaucratic responsiveness, multilevel governance, and public entrepreneurship. The theoretical framework offers hypotheses to test and challenge the current assumptions.

Major Theories and Assumptions

Bureaucratic Responsiveness Theory

The concept of bureaucratic responsiveness has been defined as the congruence between bureaucratic goals and citizen need (Yang & Pandey, 2007). Responsiveness relates to the bureaucracy's ability to provide or facilitate the provision of the goods and services that

align with the public interest. Vigoda (2002) argues that responsiveness is about producing what citizens want with both speed and accuracy. Bureaucratic responsiveness in the context of local governments is important to understanding the dynamic of balancing the ideology of citizens with a preferred policy response (Besley & Burgess, 2001). In other words, a theory of bureaucratic responsiveness must examine two assumptions; how public administrators gauge, examine, and respond to citizen need and the saliency of their issues, as well as how citizens perceive that government is providing the goods and services they need. Public managers ultimately balance these competing public values (Denhardt, 2011).

Public administration theory has varied in its perspective of considering and responding to citizen need (Durant & Ali, 2013). Waldo's (1952) call for a return to democratic administration from public administration orthodoxy developed a following of scholars that convened at Minnowbrook in 1968. Members of the academic community argued for the field's attention to both changing demographic needs and mounting normative issues of injustices of marginalized individuals facing many American cities throughout the nation. This movement gave rise to the New Public Administration framework (Denhardt, 2011; Yang, 2015). Frederickson (1971) argued that the discipline had a moral obligation to address the needs of disadvantaged citizens by adding specific criteria to decision making on the provision of public goods and services.

Some scholars have raised normative arguments in the past about the field of public administration being responsive through decision making to the needs of all citizens especially the disadvantaged and marginalized (Denhardt, 2011; Frederickson, 1971; Marni, 1971). Etzioni (1988) posited that individual decision making and self-utility of public decisions could not be

separated out from the utility of the community, challenging the neoclassical concept of mono-utility. Individual preferences, he suggested, are not devoid of the moral values inherent in the choices to rank such preferences suggesting the individual (public manager) decision and the collective (community) decision are influenced by their own inherent set of values. Relative to public policy, he goes on to suggest, there is a necessary balance between individual decisions and the collective decisions. He argued that differences are corrected through a deliberative process of information sharing and consensus building in a collective rationality. In other words, the individual thinking and decision making process surrounding the goals of the public administrator is supported by the expert help and access to information received through a collective group process.

My dissertation research argues that the NPA tradition offers a foundation to bureaucratic responsiveness theory and is important to this dissertation research for two reasons. First, the period supported the advancement of opportunities allowing administrators to establish programs and services they saw as necessary to address concerns of marginalized and disadvantaged citizens. Second, it also advanced opportunities for citizens to articulate their needs to public administrators through a wider range of public participation mechanisms (Durant & Ali, 2013). Public administrator awareness of citizen need is a fundamental assumption of a responsive public administrator. Responsiveness theory suggests that citizen preferences or needs are reflected in public policy outcomes (Manza & Cook, 2002). Some scholars have examined responsiveness theory from the context of citizen involvement with government and the attitudes public administrators have toward the input received from public participation mechanisms (Yang & Callahan, 2007).

Consistent with Rawls' (1971) veil of ignorance no one public administrator has a full understanding of their future with regards to society and class and therefore would not make decisions to impair his or her circumstance. In the case of aging policy, all public administrators face the prospects of living in their communities at an advanced age with the potential of reduced capacities and increased need for government support. Based on Rawls' (1971) theory, public administrators would not make policy decisions that would negatively impact their future and thus make policy decisions that ensure fairness for all citizens. For instance, as Denhardt (2011) suggests, an element of moral obligation in decision making would ensure sidewalk construction is considered for lower income areas of a community with the same weight and consideration as upper income areas. Public funds are allocated with fair consideration to all citizens.

As a basis for validity in using responsiveness theory to examine policy adoption in the context of an aging population, Benavides (2008) provides and finds strong support for using the theory to examine local government policymaking toward a growing Hispanic population. In a review of local government responses to the needs of a growing Hispanic population in communities, Benavides found evidence of local government awareness of demographic growth of Hispanic populations and the use of best practice programs. The author documents the establishment of local government programs including recreation, community relations, workshops, translation of local government public relations material including websites, the rebroadcasting of city council meetings in Spanish, opportunities to participate on advisory councils, and designating a Hispanic heritage month. He argued that the identified programs fit the criteria of best practices, including benchmarking against peer performance statistics, the

provision of a measure of positive outcome, innovativeness, quantifiable gains, successful application over time, and the potential for replication. In the author's comparison of practices amongst cities, evidence suggests that the provision of educational and recreational opportunities was important for fostering participation of Hispanic individuals. Maintaining citizen involvement efforts is complex, as the author stresses, an identifiable challenge among all programs is continuation when a municipality no longer has the financial capacity to support the effort. Cities that lead on these endeavors are being responsive to this demographic.

Benavides (2008) informs this dissertation research with evidence on an identifiable attitude of responsiveness by local governments relative to the presence of a high concentration of Hispanic individuals residing in their communities. Similarly, the argument of this research is that both an attitude of a responsiveness held by the public administrator in congruence with a mobilized citizen need relative to the high concentration of older adults in a community will influence local government initiative of age friendly policy adoption. For many local governments, this will be the first time they have ever planned for so many individuals over the age of 65 years old. This research argues that an attitude of responsiveness by bureaucrats to be responsible for aiding the needs of older adults leads to age friendly policy adoption. Further, it goes on to suggest that higher levels of mobilized citizen need relative to those aged 65 years and over leads to age friendly policy adoption.

H1: Higher levels of bureaucratic responsiveness increase the likelihood of age friendly policy adoption by local governments.

H2: Higher levels of citizen need increase the likelihood of age friendly policy adoption by local governments.

Sub-Theories of Responsiveness

Previous research identifies that explanations of local government decision making on service delivery outcomes are also influenced by institutional arrangements such as leadership, professionalism, and form of government (Clingermayer & Feiock, 2001). Moreover, a decision for local governments to provide some services over others may relate to levels of labor and capital intensity (Terman & Feiock, 2014). Determinants of bureaucratic responsiveness expressed through sub-theories of multilevel governance and public entrepreneurship support an overall theoretical framework of bureaucratic responsiveness (Keyes & Benavides, 2017).

Multilevel Governance as a Sub Theory

Responsiveness theory identifies an association between citizen need with a public value of responsibility to be responsive to the needs of a growing population of individuals aged 65 years and older. Multilevel governance theory adds to the theory of responsiveness by arguing that to solve issues associated with aging in place public policy development, local governments will allocate their own resources, maintaining flexibility and control, but are more likely to do so with the aid of state and federal resources. Multilevel governance, also referred to as the concept of devolution, suggests that federal policy is more effectively implemented at a subnational level because localized governments are more aware of the needs of citizens in their community (Agranoff & McGuire, 2001). Multilevel governance also suggests that subnational governments are more likely to take the lead on implementation of federal policies if funding is available.

The concept of federalism relates to the intergovernmental relationships between national, state, and local units of government. Russell, Borick and Shaftiz (2012) explain that in

the 1970's the national government advanced the use of federalism through cooperative and creative federalism policy structures in its increased attention to antipoverty issues. The authors further state that national programs such as the Community Development Block Grants program pushed national policy down to subnational governments through fiscal incentives such as grants in aid. The theory of devolution argues that local governments are more closely connected with the citizens and understand the services they need (Krane, Ebdon, & Bartle, 2004). This concept of cooperative or fiscal federalism evolved using federal funding formulas. However, by the 1980s and presidential action toward reduction in federal funding there surfaced a new type of federalism where local governments saw themselves at the center of addressing societal issues without any federal funds (Conlan, 1986). Large spending cuts, presidential support for privatization, and outsourcing reduced the resources available to local governments but still left them responsible for compliance to national policies, usually described as unfunded mandates (Krane et al., 2004).

Building a consensus around a multilevel governance theory requires assessing the assumptions of the theory in the literature. It requires examining how other authors have overcome the criticisms through theory development, operationalization of a multi-level governance conceptual framework, and the ability to infer and generalize the factors associated with devolution. Wallis and Oates (1988) operationalize devolution as decentralization to local governments and measure decentralization as intergovernmental transfers to subnational governments. The authors examine states over an 8-decade period and find evidence that states with larger urbanized areas and a larger percentage of the population are more likely to decentralize decision making with municipalities through increased levels of intergovernmental

transfers. In other words, these states are less likely to centralize power and more likely to give municipalities more autonomy in decision making. Similarly, Faguet (2004) measures the success of the diffusion of power to local governments as a measurable and verifiable change in local investment patterns to support local need and national policy. He provides evidence that a national move toward decentralization at the local government level produced a change in local government investment patterns.

Moreover, Bardhan (2002) operationalizes devolution as the decentralization of services toward lower levels of government. He suggests that the decentralization of federal policies through localized services provides local governments with more autonomy in decisions making. He argues that the diffusion of power to local governments reduces the costs for higher levels of government to assess local needs and devise localized programs. He raises concerns that variation in local accounting systems, the risk of capture by elite groups, and variations in technical and administrative capacity may create variations in local governments achieving goals of national policy. In this context, the role of subnational governments in developing a localized policy response to changing demands of their community is influenced by their overall capacity to implement and allocate resources. Previous scholars have measured multi-level governance from the construct of success through local government capacity to invest resources and the capacity to accomplish the program relative to national policy goals (Chubb, 1985; Faguet, 2004; Terman & Feiock, 2014).

Multilevel Governance as the Connection between Local Governments and Age Friendly Policy

The process of multilevel governance allows subnational governments to create innovative and effective solutions (Agranoff, 2013). In a content analysis of 32 out of 39 local

government applications to the federal government for consideration of the allocation of innovative transit funding, Blumberg and Schweitzer (2006) found evidence supporting the devolution of innovation in transit planning down to subnational governments. The authors found that local transit authorities used grant funds to develop trip planning resources. They also found that funding encouraged local integration of services with other providers. In an examination, the devolution of equality in national policy across aging programs at subnational levels in the United Kingdom, Chaney (2013) finds evidence of patterns of funding and policy adoption at lower levels of government. Here, success of devolution is operationalized as the ability to innovate, the congruence between citizen need and program delivery, and partnerships to leverage resources.

Relative to the local government adoption of policies friendly toward older adults, Keyes and Benavides (2017) examined a theory of multi-level governance and policy adoption. The authors found through a small sample of cities from the Dallas-Fort Worth metroplex and a sample of cities already predetermined to be friendly toward older adults that the receipt of federal or state grants was irrelevant to age friendly policy action. The authors did find a positive and significant association between administrative staff capacity and local government adoption of policies friendly toward older adults. Warner et al. (2016) did not find any support for an association between federal intergovernmental aid and government provided services, but did find a relationship with services and their receipt of state aid. This is not surprising because the sample included both cities and counties. Counties typically receive state aid because of their responsibilities in the provision of services through the area agency on aging.

There is not a single national policy driving local government adoption of age friendly policies, nor is there one single intergovernmental grant opportunity. With regards to the aforementioned national policies around older adult health, transportation, services, and housing, local governments are adopting policies and implementing programs designed to foster an older adults' ability to remain in their community as they age.

H3: Higher levels of federal and state financial support for programs and services friendly toward older adults increase the likelihood of age friendly policy adoption by local governments.

Public Entrepreneurship as a Sub-Theory

This subsection builds on the previous theories of bureaucratic responsiveness and multi-level governance to include a concept of public entrepreneurship. The previous sections conceptualize the elements to build an empirical analysis between the identification of citizen need and the bureaucratic response. The theory of public policy entrepreneurship also examines the role of the bureaucratic leader, but does so from the context that the leader can mobilize resources to support a creative and innovative policy change (Schneider & Teske, 1992). For instance, with regards to aging policy adoption, innovative policies such as flexible transit routing may create door to door transportation options that improve daily living activity for older adults (Alsnih & Hensher, 2003). The following examines the assumptions of public entrepreneurship theory from the context of the public administrator having a prominent role in policymaking, in acting as a leader mobilizing support and resources for important policy issues, and putting forth innovative and creative policy solutions.

The Public Administrator's Role in Policymaking

The administrator, as an expert, plays a role in shaping policy and balancing a reciprocal relationship with the city council through the policy adoption process (Svara, 1999). In a survey of 858 top local government managers, Jerome and Legge (2002) examined manager roles and responsibilities relative to the manager's perception that they participate in a modified (highly reciprocal relationship) politics and administration role, a partnership role, or a pure orthodox role (complete separation of politics and administration) relative to their relationship with their city council. The authors found evidence that the extent the public manager believed they had discretion had a positive correlation with the perception their role was highly modified suggesting a more pronounced role of the manager in policy-making. This evidence substantiates the idea that administrators are already at the forefront of policy creation. Further, it lends support to this research's argument of bureaucratic responsiveness theory suggesting managers may support age friendly policy adoption because of an attitude of responsibility for being responsive to the needs of aging population.

The concept of entrepreneurship in the public realm spans decades back in the political science realm relative to policy agenda setting (Kingdon, 1995). The idea of policy entrepreneurship is that no one policy idea can move forward on a policy agenda until a set of actors get involved and lead the policy toward policy adoption. In policymaking, policy makers are faced with multiple policy streams. Zhariadis (2007) argued that the policy makers are limited in their attention to what policy stream they may support. He suggested that it was through the action of a policy entrepreneur interested in the policy change to mobilize the necessary support to seize a window of opportunity that may create a space for the issue on

the policy agenda. In other words, the policy entrepreneur finds an opportunity to advance their issue. Goodsell (2003) suggests that the keyword is opportunism. He argues that the policy entrepreneur spots the opportunity that is unnoticed by others. Olson (1968) identified a policy entrepreneur as someone with the ability to overcome collective action problems. He argued that a policy entrepreneur has the ability to take a latent group of individuals and mobilize them around a policy issue. He identified power, prestige, and clout as incentives for the entrepreneur to invest their time in organizing individuals toward a collective action.

The complexity of public administration issues has continued to increase the role of the public administrator in policymaking to ensure responsiveness to citizen need (Roman, 2015). Public managers as leaders can create change through direct influence on strategic development, the mobilization of sources to support activities, and budget development (Cohen, Eimicke, & Heikkila, 2013) However, public manager leadership toward the adoption of innovative policies suggests leader attributes of entrepreneurial behavior.

Mintrom and Norman (2009) define the entrepreneur from the context of three themes. First, they suggest that the entrepreneur have some prior knowledge of the issue to aid them in defining the problem at hand. Second, they suggest that policy entrepreneurs are identifiable by their commitment to mobilizing actors to collectively address a problem. Finally, they argue that a policy entrepreneur will demonstrate a capacity to lead by example. As a result, the authors go on to argue that an innovative policy change as the dependent variable must illustrate the innovative adjustment as a departure from the status quo.

Public Policy Entrepreneurship and Age Friendly Policy Adoption

Public policy entrepreneurship builds on responsiveness theory to the extent that the adoption of age friendly policies is deemed innovative. To examine a theory toward public entrepreneurship, it is important to determine the innovativeness of the policy and the attributes that differentiate normal leadership from entrepreneurial leadership. Innovative policies are those policies that are determined to be innovative on the basis that they create a dynamic change from the current bundle of local government services and programs. The literature suggests these policies hold innovative characteristics (Schneider, Teske, & Mintrom, 2011).

Klein et al. (2010) argue that innovative policy adoption is the result of institutional arrangements used by the public entrepreneur in the pursuit of public value. They suggest that defining the public interest is a messy proposition given standard tools of polling individual interest do not aggregate to the group (Arrow, 1969). Therefore, they argue that a decision should be close enough to public interest and be designed with the outcome of created public value. Some have defined public value as the public manager's ability to align policies with the realized political and institutional setting (Moore, 1995). A normative argument can explain government manager's value in working with citizens to facilitate a collective vision (Denhardt & Denhardt, 2001). Lynn (2003) argues that public employees are expected to safeguard the public value or rather ensure governments are accountable to responding to the will of the people.

The evolution of public administration in the areas of innovative policy adoption to address complex social problems has given rise to entrepreneurial leadership traits that differ

from those of the basic public leader (Schneider & Teske, 1992). Public entrepreneurs are defined as public leaders that look for opportunities, mobilize necessary resources, and create change. The increased attention on management and market-based principles in public administration in the 1980's produced definitions of entrepreneurial leaders as risk takers in pursuit of competitive, mission driven, and results-oriented solutions (DeLeon & Denhardt, 2000; Hood, 1991). In their examination of the characteristics of local leaders, Schneider, Teske, and Mintrom (2011) argue that the local leader looks for the opportunity of innovation and mobilizes slack resources to support policy change. Jang et al. (2014) find evidence of city adoption of innovative sustainability policies when their elected state representative also voted in favor of statewide sustainability policies. Further, the social context surrounding the local leaders or city manager also influences their individual ability to bring about innovative policy adoption (Zimmer, 1986).

With regards to understanding public policy entrepreneurship relative to age friendly research is whether local government policies are integrated toward a comprehensive outcome of an age friendly community. The potential for innovation at the local government level lies in the connection of goals across governmental departments and local social services providers to integrate policies friendly toward older adults. A case study in Atlanta, Georgia provides evidence of a comprehensive strategy that mobilized participants across sectors leading to age friendly policy adoption (Bolda, Saucier, Maddox, Wetle, & Lowe, 2006). Innovation stems from the public administrator's ability to move policy adoption toward actual allocation of resources toward such initiatives in the annual budget. Scholarship suggests that the public entrepreneur is likely to need mobilized support from the citizenry to overcome political opposition to the

transformative policy actions (Schneider et al., 2011; Schneider & Teske, 1992). Relative to aging policy adoption, Lehning (2012) found a positive and significant association between the presence of a local public entrepreneur and local government adoption of policies friendly toward older adults.

H4: The presence of a public policy entrepreneur on the needs of older adults increases the likelihood of age friendly policy adoption by local governments.

Bureaucratic responsiveness, supported by the entrepreneurial policy making, may present itself as policy making that responds to the needs of the citizenry or pursues opportunities in anticipation of changing conditions or new problems (Meier & Bohte, 2007). Here, the public administrator's awareness of demographic forecasts of individuals 65 years and older in their local jurisdiction serves as a possible indicator of an increased demand on certain public services. DiMaggio and Powel (1983) suggest that certain factors may cause organizations to adjust their beliefs based on changing conditions in the environment. They argue that the normative pressure of a profession may support the growth and elaboration of knowledge important to that field. For instance, the International City County Managers Associations (ICMA) provides additional professional organizational support to city managers as public administrators. An argument on variations in leadership based on form of government suggests that the professional preparation of city managers exposes them to forecasting demographics and balancing services with needs. Further, the concept of professionalism suggests that a city manager's career is supported through networking and continuing education through professional association such as ICMA. With regards to aging issues, ICMA has disseminated to their membership multiple reports, survey findings and member sharing

blogs on the role of local governments in creating places that support individuals in their elder years (International City and County Managers Association, 2015). Some scholars suggest that the professional organizational support provides intrinsic motivation to support public values (Kearney & Sinha, 1988). In other words, public administrators may adjust their responses to support new knowledge. Based on DiMaggio and Powell's (1983) argument the knowledge will diffuse throughout the organizations with members associated with the profession. The variation in a professional bureaucratic response is influenced by the form of government.

H5: Council-manager form of government increases the likelihood of age friendly policy adoption by local governments.

This dissertation research argues that of those local governments that do adopt age friendly policies, some cities may theoretically do more than others. Previous studies of age friendly policy adoption are limited to normative arguments (Greenfield et al., 2015), case study design (Garon et al., 2014), and limited empirical understanding due to smaller sample sizes or generalized lists of age friendly policy actions not specifically isolated to those actions performed by cities (Lehning, 2012; Warner et al., 2016). My research argues that the magnitude of adoption is understood through a city's overall revenue per capita as financial capacity to provide services toward a sustainable community, and have taken tangible actions that reinforce their jurisdiction's commitment to sustainability across all age groups. One aspect of the theoretical model for this research argues that factors of financial and multigenerational programmatic commitment capacity increase the strength of understanding why some cities are taking more age friendly policy action than others. The regression models detailed in Chapter 5 will explain the phenomenon between selection of being an age friendly

city and the magnitude of age friendly policy actions between cities. Swap with log revenue per capita.

H6: Higher levels of revenue per capita are associated with higher levels of age friendly policy actions.

H7: The commitment of multigenerational investment in services by a local government is associated with higher levels of age friendly policy actions.

Factors Influencing the Differentiation of Policy Choices

An additional layer of my research proposes an individual examination of the different policy choices made by cities relative to the age friendly domains identified by the World Health Organization discussed in Table 1 and consistent with the theoretical determinants of policy adoption discussed above. The four specific domains identified in this research as specific areas of city responsibility toward age friendly policy action include mobility, housing, the built environment, and services. The individual policies are examined based on the theoretical arguments explaining why cities may prefer one policy choice over another or rather the relevant factors that affect a local government's policy choice.

Mobility

Transportation options are important to older adult independence when they are no longer able to drive. Some policy responses friendly toward older adults include safer roadway design and more visible signage including structural and safety improvements tackled in regular public works maintenance (Dickerson et al., 2007). Evidence suggests that older adults stay home more on a given day when driving their personal vehicle is no longer an option (Hu & Reuscher, 2004) while walkable environments with pedestrian mobility options results in higher

overall health outcomes for older adults (Shore, 2006). Older adults living in communities with public transit were more likely to have higher levels of mobility with good health outcomes (Frank, Kerr, Rosenberg, & King, 2010). Walkable communities have economic development gains, where, Lynott et al. (2006) found that communities with adopted complete street policies (e.g. options for driving, walking, bicycling, outdoor dining, scale) attracted individuals of a variety of age groups. Evidence suggests that walkability increases overall attractiveness of a place and increases home values (Eppli & Tu, 1999). In other words, local governments may find mobility policies attractive investments given their spillover benefits to the rest of the community.

Evidence suggests that local government finances are not entirely sufficient to support all investments and rely on federal and state sources to build out infrastructure projects. Hwang and Ziebarth (2015) provide evidence through a case study design that cities located in the Minneapolis Twin Cities metropolitan region rely on financial assistance from the state created through the passage of the Livable Communities Act of 1995 to support age friendly infrastructure projects. The findings are limited in their generalizability but do inform on the relationship between an increase in the development of pedestrian facilities in the region after the increase in access to available intergovernmental resources. Mobility projects are attractive but high cost, therefore, local government mobility policy choices in the realm of age friendly options may be influenced by the access to additional resources (Wachs, 2006).

H8: Higher levels of intergovernmental resources as a component of local government budgets increase the likelihood of local government facilitation age friendly transportation policy actions.

Housing

Housing options as a concept of age friendly policy suggests a community has housing options across type and price range including rental or subsidized housing. Being able to remain in a community is realized as individual access to available options and local government planning identifying gaps between population groups and options (Winick & Jaffe, 2015). A local government can increase the supply of affordable housing through the operating of low income housing via a public housing authority, the issuance of low income tax credits for developers, housing ordinances, building codes, and inclusionary zoning ordinances (Brown-Graham & Morgan, 2007). In comparison, scholarship on smart growth policies, which also gives attention to a range of housing options and price points, has examined the extent of housing policy adoption (Hawkins, 2011; Ramírez de la Cruz, 2009). For instance, Hawkins (2011) argues that communities with high levels of homeownership may oppose different housing options including rental due to perceived negative externalities on property values. Based on his study of smart growth policy adoption including higher density housing and rental options, evidence suggests that communities with high levels of homeownership had less political support for smart growth policy adoption. In other words, housing policy is complicated politically when policy calls for increased residential density. Lehning's (2012) research examined levels of housing innovations and concentrations of individuals aged 65 and older found fewer innovations in cities with higher concentrations of 65 and older. Her supplementary qualitative findings add a richness to these quantitative results suggesting that overall there is still public resistance to higher density forms of development an aspect of age friendly housing, and public concerns about design. There are limitations due the representativeness of the sample but

findings inform on the potential resistance by the broader public for support for a range of housing options for older adults.

Normative arguments have suggested that external pressures can direct local government zoning power to create barriers for the development of a range of housing options for older adults by restricting certain types of uses (Rosenthal, 2009). Evidence from Supreme Court case decisions finds that municipalities have used zoning power to restrict development of elderly housing types (Grogan, 1999). For instance, *Arlington Heights v. metropolitan housing development corp.* (1977) (see Table 2) established a test for local governments to prove discrimination was not a factor in making local zoning code decisions on elderly housing. Further, *McDonald Douglas Corp. v. Green* (1973) (See Table 2) established the test that local governments must prove nondiscriminatory action in making local zoning decisions on elderly housing.

H9: Higher levels of homeownership decrease the likelihood of local government facilitation of age friendly housing policy actions.

Built Environment

The comprehensive or strategic plan is a fundamental planning document that allows local governments to set goals and document what they intend to do (Meck, 2007). Research suggests that the health and well-being of individuals is improved when communities plan and make development decisions that connect land use policies with transportation policies (Roux, 2003). The built environment represents the physical environment of the community including the relationship between mixed use compact development and block size, or the relationship between street trees and pedestrian facilities (Leslie et al., 2007). The plan is codified into

zoning ordinances regulating activities and controlling uses. In one respect, as Hamin (2003) argues, changes in land use reform and policy that translates into zoning changes tends be a concern for homeowners relative to potential impacts on property value. However, in a case study on growth management policy adoption and planning, positions of individual cities varied. The author found interest among cities for improved planning to address pressures to changing land use patterns. Strategic and comprehensive planning is a function of local government (Meck, 2007). Comprehensive planning defines the community's goals and objectives and guides future growth and development (Godschalk, 2001). Further it allows a community to examine the costs and benefits of policies and development. With regards to local comprehensive plan development, Garon et al. (2014) provide evidence of higher levels of policy adoption and implementation through deliberative efforts of planning and consensus building between the municipality, citizens, and stakeholders.

H10: Higher levels of bureaucratic responsiveness increase the likelihood of local government facilitation of built environment policy actions.

Services

The public has come to expect that a range of services are provided by local governments. Vick (2007) argues that parks, open space, and opportunities for public recreation services promote a healthy environment, support business and economic development, and stimulate home values. She goes on to suggest that the scope of services is defined relative to individual community needs and interests. Further, she argues that the overall provision of services should align with the goals and objectives established through the community's adopted strategic plan.

Cities may shift policy priorities to respond more directly with programs and services that align with the demographic backgrounds they represent (Krislov, 2012; Mosher, 1968). For example, MacDonald (2008) provides evidence that large concentrations of residents over 65 have a positive and significant effect on total government expenditures. In a case study assessment of one city's approach to examining citizen need for policies friendly toward older adults, Benavides and Keyes (2015) found evidence, limited in generalizability, but helpful in informing on a municipality's professional awareness of citizen need. The authors found municipal use of tax records to target the residences of older adults living below the poverty line and its purposeful use to select elderly residents for their annual volunteer assistance program for home repair and lawn maintenance. The authors found that a professional response through the provision of appropriate is important to providing a voice to those that may not be able to come to the table.

With regards to the provision age friendly services, Warner (2010) suggests social and economic benefits for local governments and communities relative to multigenerational planning. She argues that sustainable local government budgets rely on diversity in the overall age group of the community. She goes on to suggest that co-locating services designed for both younger and older residents, repurposing public spaces around the growing needs of older adults, and leveraging multigenerational opportunities bring public and social value benefits for the community. Similar to the argument above, here, planning along with deliberative engagement toward a consensus on services matched with goals and objects results in the policy actions that facilitate age friendly services.

H11: Higher levels of citizen need increase the likelihood of local government facilitation of age friendly services.

In short, this chapter reviewed scholarship to form the basis of why bureaucratic responsiveness theory is necessary for explaining and predicting local government adoption of age friendly policies. The public administration literature on bureaucratic responsiveness discusses responsiveness as a congruence between citizen need and a bureaucratic response (Benavides, 2008; Boyne, 2002; Bryer, 2009; Vigoda, 2000). However, as this chapter argues, the theory is limited in providing a clear conceptual understanding of how public administrators gather information about citizen need and the extent this is matched with a bureaucratic responsibility to be responsive to the needs of a population aged 65 and over.

CHAPTER 5
RESEARCH DESIGN

Introduction

The purpose of this chapter is to discuss the factors affecting local governments' aging policy adoption and the magnitude of adoption. This discussion will illustrate how each factor is supported by theory and evidence taken from empirical studies. The chapter will first discuss the originality of the research design based on its large N sample size of U.S. cities, its intent to capture and create a new data source through the administration of a survey to this national sample of local governments. The chapter will then define each of the dependent, independent, and control variables. It will then present the 6 models for each regression analysis. Finally, the chapter will examine and discuss how the theory of this dissertation research and its corresponding methodology will add to the current knowledge of aging in place and aging policy in a local government environment.

A theory of bureaucratic responsiveness includes an examination and understanding of citizen need and the bureaucratic response that aligns with the expressed wishes of the community. Further, adoption may be dependent on the devolved power of the local government to allocate resources to the issue and the presence of a public entrepreneur to champion age friendly policy adoption. Theoretically, a local government response is affected by expressed or known citizen need of the community they serve. Table 5 reflects the eleven hypotheses establishing the fundamental basis for this research's theoretical model shown in Figure 3.

Table 5

Testable Hypotheses about Age Friendly Policy Adoption by Local Governments based on a Variation of Governmental Responsiveness to Citizen Need

The propositions important to this research are as follows:
H1: Higher levels of bureaucratic responsiveness increases the likelihood of age friendly policy adoption by local governments.
H2: Higher levels of citizen need increases the likelihood of age friendly policy adoption by local governments.
H3: Higher levels of federal and state financial support for programs and services friendly toward older adults, increase the likelihood of age friendly policy adoption by local governments.
H4: The presence of a public entrepreneur on the needs of older adults increases the likelihood of age friendly policy adoption by local governments.
H5: Local governments with council-manager form of government increases the likelihood of age friendly policy adoption by local governments.
H6: Higher levels of revenue per capita is associated with higher levels of age friendly policy actions.
H7: The commitment to multigenerational investment in services by a local government is associated with higher levels of age friendly policy actions.
Differentiation of Age Friendly Policy Choices:
H8: Intergovernmental resources in local government budgets has a positive effect on the likelihood of age friendly transportation plan adoption by local governments.
H9: Higher levels of homeownership have a negative effect on the likelihood of age friendly housing plan adoption by local governments.
H10: Higher levels of high bureaucratic responsiveness increase the likelihood of local government adoption of an age friendly comprehensive plan.
H11: Higher levels of citizen need increase the likelihood of local government adoption of an age friendly services and programs plan.

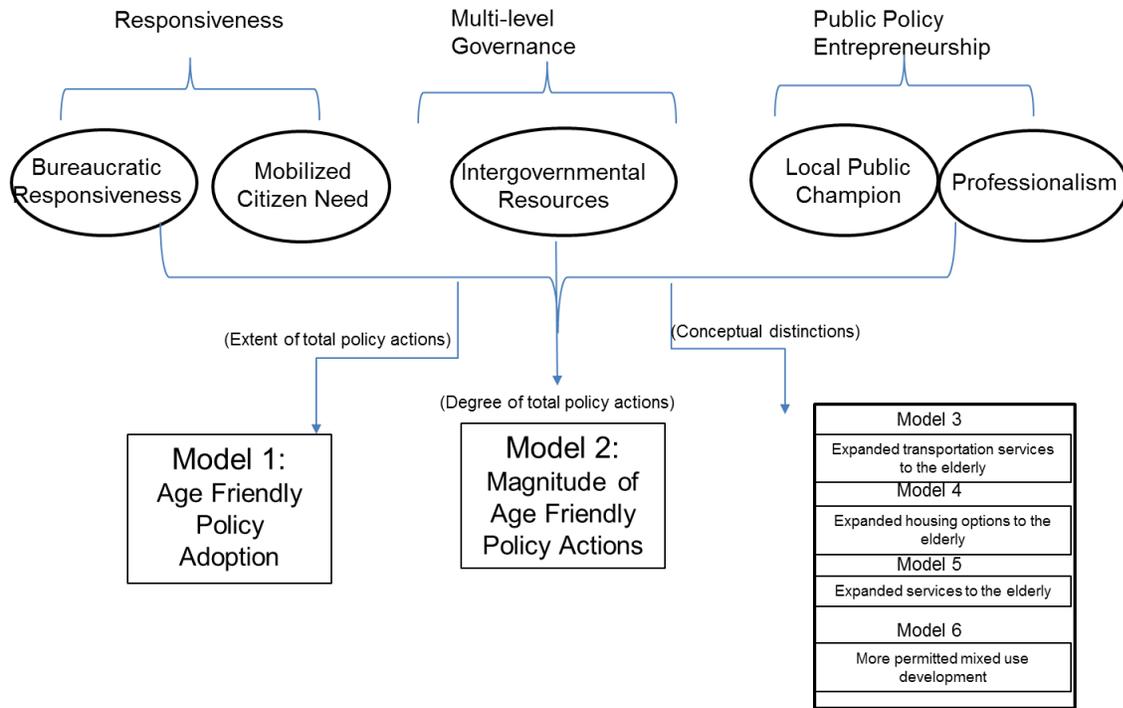


Figure 3. Theoretical model of bureaucratic responsiveness toward age friendly policy action.

Originality of the Research

This research design relies on original research through new data collect efforts and the administration of a survey to generate a large N sample of local governments. The following subsections discuss the methods of collecting the sample. Further, it examines the purposive role and process of survey administration. Appendix A includes a listing of the survey questions.

Sample

The sample design for this dissertation research contributes to the literature using a large N sample of local governments to improve the current state of generalization and inference. The data comes from a sample of 1,050 cities that responded to a survey of age

friendly policy adoption. A final response of 371 cities, comprising a 35.2% response rate, comprise the final data set.

The sample includes a national list of cities identified as place geography on the U.S. census list of geographies (United States Census Bureau, 2013) 2014 5-year estimates. Then all cities were classified based on their location in one of the 10 federal identified regions per the United States Census. The list of cities was then sorted by region, cities with 14% or more of their population 65 years or older, and with a total population over 10,000. The sample also based its selection on cities at 14% and above for a concentration of 65 years and older based on the general overall U.S. average of 65 and above at 14.5% (United States Census Bureau, 2013). All cities per region captured based on these criteria are included in the final sample. Cities that meet the criteria of a population over 10,000 captures almost 75% of the total U.S. population based on 2014 U.S. Census estimates. Additionally, those cities with a population 10,000 and above and have an average of 14% and higher of their population over 65 years of age captures roughly 20% of the population based on the same estimates. A goal of the sample collection process for this research is to capture as many cities as possible with a population over 10,000 in proportion to the total number of cities in a given federal region (U.S. Census Bureau, 2016). The final results reveal that federal regions 7 and 8 capture the fewest cities at a population of 10,000 or above based on an overall percentage of cities in their respective federal region suggesting these regions have more cities under a population of 10,000. A comparative analysis examines the number of cities captured based on the aforementioned criteria per a population of 9,000, 8,000, 7,000, and 6,000. The findings suggest only a marginal

increase in percentage points (see appendix B for raw data for comparative analysis based on city size).

The criteria to select cities based on a population of 10,000 relates to the increased likelihood they have the financial and staff capacity to deliver a broad range of services to their community (Moon, 2002; Damanpour and Schneider, 2006). For instance, Moon (2002) used a sample of local governments with a population over 10,000 based on the assumption they were large enough to likely have their own website and offer e-government services. Moreover, Damanpour and Schneider (2006) use city size as a proxy for financial and staff capacity. They find evidence that city size has a positive and significant relationship with adoption of innovation policies. Additionally, using cities with a population of 10,000 or greater ensures the sample will include representation of council-manager form of government, a variable utilized in the model discussed below. Council manager form of government is most popular in cities with a population over 10,000 (National League of Cities, 2013). As mentioned above, the decision to further select cities based on their concentration of individual 65 years and older at 14% and above was relative to the U.S. Census average based on 2014 estimates for 65 years and older is 14.5%. The U.S. Census forecasts the concentration of individuals 65 and above to be 20% of the total U.S. population by the year 2050 (West et al., 2014). Given that the current U.S. average for 65 and older is roughly 5 percentage points from the predicted 20% forecast, this research argues that the 14% criteria captures cities already likely feeling pressure to accommodate a growing segment of their population. The purpose for including cities with a concentration of individuals aged 65 and over at 14% of the total population was to increase

the potential for the inclusion of cities in the overall sample likely not adopting age friendly policies.

Survey Overview

A web-based questionnaire, as shown in Appendix A, used for this dissertation is fundamentally based on Keyes and Benavides (2017). The survey (Appendix A) includes questions that address local government adoption of age friendly policy adoption overall and includes questions to explore unique policy choices in the areas of mobility, housing, the built environment, and public service delivery.

In addition to collecting direct information from public managers on theoretical determinants of bureaucratic responsiveness, the web-based survey also addresses determinants of this research's sub-theories multilevel governance and public entrepreneurship. For instance, with regards to multilevel governance, the survey addresses individual perceptions of federal or state funding to support local programs and services to support older adults, and capacity of staff to implement programs. Further, it examines technical training specific to the needs of older adults in the areas of transportation, housing, nutrition, health, public safety, and recreation. Then it collects individual perceptions of public entrepreneurship relative to professionalism, and the awareness of a local public official as a champion on these issues.

Survey administration followed the Dillman (2000) method to increase the response rate. For the first contact, the sample received an introductory email inviting their individual participation in the survey. The introductory email also indicated that the actual survey link would follow via email in three business days. The second contact to the sample included the

actual survey link sent through email via the University of North Texas Qualtrics survey software. The actual survey includes its own introduction explaining the purpose of the survey and directions on how to respond, and the informed consent. The third contact included both thank you emails to those that responded to the survey and a reminder to the remaining members of the sample. The third contact was sent one week from the original survey email send date. A fourth contact email reminder was sent to any nonresponses two weeks from third contact. Finally, a fifth contact included phone calls made to those that have not yet responded after one week from fourth contact. Thank you emails were sent to completed surveys.

Variables

Dependent Variables

Cities are examined on whether they have adopted age friendly policies overall. The choice for multiple dependent variables is important for three reasons. First, there is no standard measure for age friendly policy adoption. Second, multiple variables allow this dissertation research to consider both the binary decision of local governments to adopt age friendly policies, a variation in actions taken toward age friendly policy adoption, and their variation in choices given the four domains of age friendly presented in this research. Finally, none of the survey constructs offers a single measure of age friendly policy adoption but rather provides diversity in understanding specific actions local governments may be taking or find more appropriate given their jurisdiction. Together, in their entirety, these indicators provide a fuller explanation about how the bureaucracy is responding to understand citizen need relative to age friendly policies.

As shown in Table 6, the variable *Total Age Friendly Policy Action* is captured through responses to 19 survey items that asks respondent perceptions on facilitated actions of transportation policy, housing policy, built environment policy, and local government services policy. The concept of age friendly is measured as the number of actions combined for each policy activity area including expanded transportation options, expanded housing options, accommodations for accessibility through the built environment, and expanded public service delivery options (see Table 4). The data was collected through the survey and represents the respondent's perceptions of possible tangible policy objectives per each policy activity area. The variable, following Warner et al. (2016) total elder services is measured as an interval variable with a range of 0-25 possible municipal policy actions.

Table 6

Measurement of Dependent Variables

Variables	Measurement	Unit of Analysis	Source
Dependent			
Total Policy Actions	Interval	1-25 total policy actions	Survey
Level of adoption (low, medium, high)	Ordinal	1= 0-8 actions 2= 9-15 actions 3= 16-25 actions	Survey
Differentiation of Policy Choices Total Transportation Policy Action Total Housing Policy Actions Total Built Environment Actions Total Service Actions	Interval Variables	1-7 total transportation policy actions 1-7 total housing policy actions 1-6 total built environment actions 1-5 total service actions	Survey

To capture the phenomenon of why some cities do more than others, this research uses an ordinal variable of low, medium, and high levels of policy action (See Table 6) based on Jenks natural break and the visual distribution of the variable, *Total Age Friendly Policy Action*. The arguments for breaking the Total Age Friendly Policy Action variable into an ordinal variable for a model on the degree of adoption is supported by three arguments. First, theoretically local governments may pursue a few or many age friendly policy actions relative to their administrative and resource capacity to implement policy actions. This suggests that there is

something different between those that are facilitating a low number of policy actions (0-8) versus the highest (frontier city) adopters at 16-25 buffered by a medium group of adopters with 9-15 total age friendly policy actions. The model examines the factors that would influence cities to be frontier cities with the highest level of adoption and what types of policy actions differentiate between low, medium, and high policy adopters. Second, a visual exploration of the distribution of the variable *Total Age Friendly Policy Action* reveals some natural groupings around low, medium, and high levels of adopters supported through significant independent means t-tests showing significant differences between the means of within groups per policy action. Finally, a Jenks Natural Breaks analysis provides support for a grouping of cities at low (0-8), medium (9-15), and high (16-25) policy actions. The natural breaks method clusters municipalities with the smallest within group variances creating a natural grouping in which given the determinant factors of this model a city could move to the next highest or next lowest group. The total policy actions comprise the *Degree of Age Friendly Policy Action* measured as an ordinal variable where 1=0-8 policy actions(Low); 2=9-15 policy action (medium action), and 3=16-25 policy actions (high action).

Differentiation in policy adoption choices around those that are friendly toward older adults are captured as respondent perceptions toward facilitating transportation, housing, community design, and public service programming (see Table 4). The data for each variable was collected from the survey. Each variable, expanded transportation options, expanded housing options, accommodations for accessibility through the built environment, and expanded public service delivery options, is measured as an interval variable relative to the total number of actions taken per policy category type as shown in Table 6. The policy action categories of

transportation and housing each had 7 total policy actions, built environment 6 total policy actions, and public service deliver 5 total policy actions. The independent variables for the four models on differentiation of policy choices are consistent with the preceding models (see Table 7). The variables are consistent with the practical actions by local governments captured in Table 4 and identified as actual policies, plans, and programs for planning age supportive communities (Sykes & Robinson, 2014; Winick & Jaffe, 2015). Examination of these additional dependent variables of unique age friendly policy adoption allows for a richer understanding of specific decisions local governments may make with regards to supporting policies friendly toward older adults.

Independent Variables

The multiple definitions of bureaucratic responsiveness (Bryer, 2007; Bryer, 2009; Ostrom, 1975; Yang & Pandey, 2007) create a challenge for the operationalization of the concept. Further, bureaucratic responsiveness theory assumes a congruence between citizen need and bureaucratic response (Vigoda, 2002). Boyne (2002) examined the concept of bureaucratic responsiveness and argued that responsiveness may be measured through some aspect of matching the allocation of resources to the expressed citizen preferences. Further, he elaborated on the operationalization of responsiveness as a combination measure of citizen or customer satisfaction. The challenge is to match verifiable citizen input with local government values of responsiveness. Based on these assumptions, the theoretical framework for this research conceptualizes both responsiveness and citizen need.

Bureaucratic responsiveness. Yang and Pandey (2007) operationalized bureaucratic responsiveness as an index measure including respondent perceptions of whether the public

organization satisfies public needs, improve public service quality, and increase citizen trust. They found evidence of a positive and significant association between the factors of decentralization, results oriented management, customer services, and management by objectives and overall bureaucratic responsiveness as the dependent variable. The findings suggest that agencies understood the needs of the citizens, integrated those citizen needs as measurable objectives in the strategic plan, and produced outputs that correspond to the consensus (Innes & Booher, 2010).

The measure of responsiveness for this dissertation research is interested in the public administrator's responsibility to be responsive to meeting the needs of an increasing population of individuals aged 65 years and over. Responsiveness is conceptualized as the extent to which the city responded to the expressed needs of its citizens (Vigoda, 2002). The intent of this variable is to capture whether the organization has a value or attitude of responding to the needs of a typically marginalized group. Similar to Yang and Pandey (2007), this research is interested in the general attitude and philosophy of public managers to be responsive to the public they serve. The concept of responsiveness is captured as the respondent's attitude toward meeting the needs of individuals aged 65 and over. This research measures responsiveness based on a 4-item index measuring respondent perception to four survey items. The four questions supporting the *Responsiveness Index* ask respondents to indicate the extent their city performs a needs assessment for individuals aged 65 and over; integrates the needs of individuals aged 65 and over into the city's strategic goals; creates opportunities for civic engagement of individuals aged 65 and over; and establishes vision based budgetary principles to reflect the needs of individuals aged 65 and over. The questions

are measured on a Likert scale 1 to 5 with 1 being the lowest and 5 the highest. These four questions serve as a basis for local government responsiveness based on their association to daily functions of professional city management (see Stenberg & Austin, 2007).

Citizen need. Citizen need is conceptualized as the extent to which need is mobilized through advocacy. From a demand side perspective, Frumkin (2009) argues that non-profits exist to address an urgent social need. He goes on to suggest that a known demand results in connections of people coming together to respond to the community concern. He contends that the non-profit's ability to build community trust gives it the credibility to stimulate political involvement on the broader issue of interest. The concept of mobilized citizen need is captured as total membership numbers in local Retired Senior Volunteer Program (RSVP) chapters and is measured as an interval variable (Corporation for National and Community Service, 2015). Mobilization of a group serves as a proxy for the citizen need element of responsiveness theory. As Yang and Pandey (2007) found, certain stakeholders may have a stronger effect on certain policy issues. The argument here is whether the government reprioritizes policy initiatives relative to the influence of a specific cohort.

A second proxy for mobilized citizen need is captured as a total number of individuals in a community aged 65 years and over. The concept of citizen need is also operationalized as *Log Total Population 65 and over*. This variable is measured as an interval variable. MacDonald (2008) argues that older adults will still lobby for tangible outcomes and provides evidence that large concentrations of residents over 65 have a positive and significant effect on total government expenditures. The variable also aligns with the argument of Benavides (2008) that

a concentration of a demographic cohort has the capacity to influence a local government to make policy adjustments.

Multi-level governance. This analysis addresses the scope to which local governments adopt policies friendly toward older adults relative to theoretical elements of multi-level governance. As discussed in Chapter 1, the discourse on national aging policy is on long term care and health insurance. However, national aging policy also resonates through federal acts on housing, transportation, and services devolving to subnational governments as unfunded mandates. The devolution of federal policy suggests that lower levels of government have a better sense of how to meet the needs of their citizens. Due to constant economic limitations and the need for local governments to balance efficiency with advocacy this dissertation research argues that local governments are more likely to adopt policies friendly toward older adults when they receive supplemental funding from higher levels of government. The concept of multilevel governance is operationalized as based on the location or proximity of a city in the region of a US DOT, HUD, EPA Sustainable Communities Partnership Grant. The HUD Sustainability grant represents federal motivation in supporting local governments in pursuit of age friendly policy action. The federal government partnership has been funding sustainable community planning efforts for five years. Eligible grant recipients must demonstrate local leadership and collaboration among public and nonprofit agencies. The grant goals include the removal of barriers to housing affordability, the creation of connected and reliable transportation systems, and the redevelopment of neighborhoods while protecting the environment.

Public Entrepreneurship. Following previous research findings (Keyes & Benavides, 2017; Lehning, 2012) this dissertation also examines the role of a local policy entrepreneur or public champion relative to local government adoption of age friendly policies. Schneider and Teske (1992) identify public entrepreneurs in local government as either elected officials, city manager, or other official with direct responsibility toward policy adoption. Here, the concept of a public policy entrepreneur is measured as a subjective variable, Local Policy Entrepreneur, relative to respondent perception that they identify age friendly policy actions relative to the needs championed by a local public policy entrepreneur. The variable is measured as a dichotomous variable where 1=Presence of a local public policy entrepreneur, and 0=Otherwise.

Variations in leadership based on form of government suggest that the professional preparation of city managers exposes them to forecasting demographics and balancing services with needs. City managers over mayor-council are predisposed to the role of professionalism and specialization, attributes making city managers more inclined to support innovative policies and efficiency as a public value than elected mayors (Clingermayer & Feiock, 2001). The concept of form of government is measured as *Form Appointed* as 1=Yes and 0=Otherwise. The reference category is *Form Elected*. *Form appointed* captures all appointed manager positions across different municipality types.

Control Variables

Survey data responses were supplemented with data from the survey, 2010 U.S. Census data from the American Community Survey (United States Census Bureau, 2014). An important control variable is the extent that a municipality has already taken policy action with the

provision of a senior center. Aday (2003) identified the first model of senior center emerging in New York City in 1943 as a municipal response to issues of poverty among the city's elderly. As Pardasani and Thompson (2012) argue, the Older Americans Act primarily initiated the creation of senior centers across the country and remains their primary source of funding today. They go on to suggest that the diversification of senior center offerings from health, nutrition, recreation, etc. is evidence of how responsive senior centers have been to the needs of older adults, but go on to argue they have not evolved to meet the needs of the aging boomer population. Taietz (1976) identified early models as either focused on meeting the basic needs of the poorest older adults or designed as a volunteer model serving more affluent older adults offering a range of services. The presence of funding for senior centers prior to 1965 provides evidence of long-term resource allocation for senior center development. Additionally, Pardasani and Thompson's (2012) argument suggests current senior centers are not presently aligned with the parameters of age friendly. Having a senior center, measured as a dichotomous variable where 1=Having a Senior Center and 0=Otherwise controls for long term investments by the municipality into specific services of senior center activity not included in the total age friendly policy actions available to municipalities. Administrative capacity of the municipality is captured as the number of full time employees in an ordinal variable where 1=1-100; 2=101-999, and 3=Over 1,000. The data on senior center and administrative capacities is captured through survey responses.

Lehning (2012) did not find a significant or positive relationship between income and local government adoption of age friendly policies suggesting that wealthier older adults may have private resources to address their needs and not require public policy changes or public

assistance. This dissertation argues that the previous author's limited sample size may also have been a factor and therefore, includes *Log Median Household Income* as a control given the large *N* sample size of this research.

City revenue per capita serves here as an indicator for overall city fiscal capacity. Greater fiscal capacity suggests the government may have access to slack resources to reallocate toward innovative policy adoption (Schneider & Teske, 1992). In other words, to be responsive toward a particular group in the community through public policy requires awareness of the community's fiscal strength. Vigoda (2000) finds an association between local government responsiveness and overall government fiscal capacity. The concept of fiscal capacity is operationalized as *Log Revenue Per Capita* and measured as an interval variable. Data was collected for each city from their 2014 financial statement in the respective Comprehensive Annual Financial Report.

Higher density development is concept incorporated into age friendly concepts because higher density communities typically represent accessibility between uses within the physical environment (Warner et al., 2016). The models control for density with a variable *Log Density* measured as an interval variable based on the total population per square mile. The data comes from the U.S. Census.

Theoretically, a city may have more capacity to invest in sustainability policies when additional revenue is added to its tax base through general sales tax (Myers, 1993). The argument for this research is that when cities can expand the tax base beyond property taxes there is more revenue available to invest in generational services. *Log Revenue Per Capita* is discussed above. An additional variable, *Log Grandparents living with grandchildren per 1,000*

(United States Census Bureau, 2014), is also used to operationalize the concept of generational capacity (Israel and Warner, 2008). This variable is interval and measured based on the log number of grandparents living with grandchildren per 1000 as listed per municipality in the American Community Survey, 2014 data.

Analytics

The first model, extent of adoption, Model 1, (as shown in Table 7) answers the question, to what extent do cities adopt age friendly policies. It relies on an ordinary least squares linear regression analysis because the model utilizes an interval variable as the dependent variable. The study is trying to determine the relationship between various interval and dichotomous variables and an interval variable of total facilitated age friendly policy actions. The model incorporates the primary independent and control variables expressed as:

Equation 1

Multiple Linear Regression, Extent of Adoption

$$\hat{Y} = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \beta_5 X_5 + \beta_6 X_6 + \beta_7 X_7 + \beta_8 X_8 + \beta_9 X_9 + \beta_{10} X_{10} + \beta_{11} X_{11} + \beta_{12} X_{12} + e$$

Where Y = Total Municipal Age Friendly Policy Actions

X1 = Responsiveness Index, X2 = RSVP, X3 = Log Total Population 65 and Over, X4 = HUD

Sustainability, X5 = Public Entrepreneur, X6 = Form_Appointed, X7 = Administrative Capacity, X8

= Log Grandparent in Home Per 1000, X9 = Senior Center, X10 = Log Revenue Per Capita X11 =

Log Household Income X12 = Log Density

Table 7

Variables Included in the Models 1 and 2

Theory	Variable	Measure	Unit of Analysis	Source	Extent of Adoption	Degree of Adoption
Bureaucratic Responsiveness	Bureaucratic Responsiveness Index	Index (4 survey constructs; 5-point Likert scale)	1=Not at all; 2=Low; 3=Moderate; 4=High; 5=A great extent	Survey	+	+
	Concentration of population 65 and over	Interval	Total of cohort per city	U.S. Census	+	+
	RSVP Membership	Interval	County level (total membership numbers per county)	National Corporation of Community Service	+	+
Multi-level Governance	Hud Sustainability Grant	Dichotomous	1=City as member in official planning team; 0=Otherwise	US DOT, HUD, EPA	+	+

(table continues)

Table 7 (cont.)

Theory	Variable	Measure	Unit of Analysis	Source	Extent of Adoption	Degree of Adoption
Public Entrepreneurs hip	Form_Appointed	Dichotomous	1=Council-Manager, 0=Otherwise	Survey, Gov. Website	+	+
	Identification of local public policy champion	Dichotomous	1=Yes; 0=Otherwise	Survey	+	+
Community Attributes	Log Number of Grand Parents Living with Grandchildren per 1000	Interval	City level data	U.S. Census/ACS	+	+
	Log Household Income	Interval	City level data	U.S. Census	-	-
	Log Density	Interval	City level data	U.S. Census	+	+
Government Attributes	Senior Center	Dichotomous	1=City has senior center; 0=Otherwise	Survey	+	+
	Total General Revenue Per Capita	Interval	City level data	Comprehensive Annual Financial Report 2014	+	+
	Administrative Capacity	Ordinal	1= Under 100 staff; 2= 101-999 staff; 3= 1000 and over	Survey	+	+

The variables in the model account for 0.65 of the variance. Tests for multicollinearity and extreme outliers did not indicate any problems. A separate model with standard robust errors did not change the level of significance.

The second model, degree of adoption, Model 2, (also shown in Table 7) answers the question, why do some cities support higher levels for age friendly policy actions than other cities. The model uses an ordinal regression because the dependent variable is split into ordinal rankings where 1=Low (0-8 policy actions), 2=Medium (9-15 policy actions), and High (16-25) policy actions. As mentioned above, the split is analytically justified using a Jenks Natural Break method. Ordinal regression is necessary to examine the logit (log odds) of falling into an ordered dependent variable (Guisan & Harrell, 2000). The study is trying to determine the relationship between various interval and dichotomous variables and an ordinal variable of total facilitated age friendly policy actions associated with low, medium, and high policy actions. The model incorporates the primary independent and control variables expressed as:

Equation 2

Ordinal Regression, Degree of Policy Adoption

$$\hat{Y} = \alpha + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \beta_5X_5 + \beta_6X_6 + \beta_7X_7 + \beta_8X_8 + \beta_9X_9 + \beta_{10}X_{10} + \beta_{11}X_{11} + \beta_{12}X_{12} + e$$

Where Y = Low, medium, and high categories of facilitated age friendly policy action.

X1 = Responsiveness Index, X2 = RSVP, X3 = Log Total Population 65 and Over, X4 = HUD

Sustainability, X5 = Public Entrepreneur, X6 = Form Appointed, X7 = Administrative Capacity, X8

= Log Grandparent in Home Per 1000, X9 = Senior Center, X10 = Log Revenue Per Capita X11 = Log Household Income X12 = Log Density

The Pseudo R² is 0.32, which measures the model’s predictive accuracy. The higher the number between 0-1, the better the fit. The test of parallel lines is not significant ($\chi^2 = 7.74$) indicating our assumptions hold that the logit coefficients are equal across the levels of the outcome (UCLA Statistical Consulting Group, 2016).

Models 3 through 6 (as shown in Table 8) are used to help answer the question on what influences cities to differentiate among the four different age friendly policy type categories of transportation, housing, the built environment, and services. Multiple linear regression is used to examine the primary independent variables and control variables relative to unique policy adoption choices around those that are friendly toward older adults. Four dependent variables capture the concepts of mobility, housing, public service programming, and built environment/community design. Each independent model dependent variable is measured as an interval variable.

Equation 3

Multiple Regressions, Differentiation of Policy Choices

$$\hat{Y} = \alpha + \beta_1X_1+ \beta_2X_2+ \beta_3X_3+ \beta_4X_4+ \beta_5X_5+ \beta_6X_6+ \beta_7X_7+ \beta_8X_8+ \beta_9X_9+ \beta_{10}X_{10}+ \beta_{11}X_{11}+ \beta_{12}X_{12} + e$$

Where Y Model 3 = Total Transportation Policy Actions

Where Y Model 4 = Total Housing Policy Actions

Where Y Model 5 = Total Built Environment Policy Actions

Where Y Model 6 = Total Services Policy Actions

X1 = Responsiveness Index, X2 = RSVP, X3 = Log Total Population 65 and Over, X4 = HUD

Sustainability, X5 = Public Entrepreneur, X6 = Form_Appointed, X7 = Administrative Capacity, X8

= Log Grandparent in Home Per 1000, X9 = Senior Center, X10 = Log Revenue Per Capita X11 =

Log Household Income X12 = Log Density

Table 8

Models 3 through 6, Differentiation of Policy Choices, Transportation, Housing, Built Environment, and Services

Theory	Variable	Measure	Unit of Analysis	Source	Mobility	Housing	Built Environment	Services
Bureaucratic Responsiveness	Bureaucratic Responsiveness Index	Index (4 survey constructs; 5-point Likert scale)	1=Not at all; 2=Low; 3=Moderate; 4=High; 5=A great extent	Survey	+	+	+	+
	Concentration of population 65 and over	Interval	Total of cohort per city	U.S. Census	+	+	+	+
	RSVP Membership	Interval	County level (total membership numbers per county)	National Corporation of Community Service	+	+	+	+

(table continues)

Table 8 (cont.)

Theory	Variable	Measure	Unit of Analysis	Source	Mobility	Housing	Built Environment	Services
Multi-level Governance	Hud Sustainability Grant	Dichotomous	1=City as member in official planning team; 0=Otherwise	US DOT, HUD, EPA	+	+	+	+
Public Entrepreneurship	Form Appointed	Dichotomous	1=Council-Manager, 0=Otherwise	Survey, Gov. Website	+	+	+	+
	Identification of local public policy champion	Dichotomous	1=Yes; 0=Otherwise	Survey	+	+	+	+
Community Attributes	Log Number of Grand Parents Living with Grandchildren per 1000	Interval	City level data	U.S. Census (American Community Survey)	+	+	+	+
	Log Household Income	Interval	City level data	U.S. Census	-	-	-	-
	Log Density	Interval	City level data	U.S. Census	+	+	+	+
Government Attributes	Senior Center	Dichotomous	1=City has senior center; 0=Otherwise	Survey	+	+	+	+
	Total General Revenue Per Capita	Interval	City level data	Comprehensive Annual Financial Report 2014	+	+	+	+
	Administrative Capacity	Ordinal	1= Under 100 staff; 2= 101-999 staff; 3= 1000 and over	Survey	+	+	+	+

The variables in Model 3 (as shown in Table 8) account for .647 of the Model variance, in Model 4 they account for 0.46 of the Model variance, in model 5 they account for .465, and in Model 6 they account for 0.62 of the model variance. Tests for multicollinearity and extreme outliers were examined on each model and the results did not indicate any problems. A separate model was also examined for Models 3-6 with standard robust errors did not change the level of significance.

Contributions to Theory and Local Government Policy Adoption

This dissertation argues that the forecasted monumental growth in the number of individuals aged 65 and older residing in our communities will place pressure on local government services and delivery. Therefore, this research seeks to examine the role of local governments in responding to the needs of older adults. This dissertation first juxtaposes a medical model with a cultural model of aging and closes a gap in understanding the local government role in aging policy. It does so by examining how local governments respond to the needs of older adults by refocusing policy attention on mobility, housing, services, and the built environment relative to the needs of an aging population, referred to throughout as age friendly policy adoption. Through the lens of a cultural model the policy outcomes are different from institutionalization and long term care based on this model's goals of aging in the context of independence and community. Second, the literature review on age friendly policy adoption fills a gap by surfacing a conceptual connection between the domains of age friendly, example initiatives, and practical actions of local governments representing a bureaucratic response.

Third, this dissertation research advances what we know about bureaucratic responsiveness by establishing a theoretical basis and empirical examination of the extent the variation of citizen need and a bureaucratic attitude of responsiveness affect logical and predictive outcomes of age friendly adoption. Here, it is argued that sub-theories of multi-level governance and public entrepreneurship provide a fuller understanding.

The aging in place literature is rich with normative arguments on the role of local governments and case study designs used to draw out important elements related to a government's role in policy adoption. This dissertation administers a survey to generate a national large N sample of local governments providing the largest comparative analysis of national cities relative to local government adoption of age friendly policies to date. We know that some local governments are already adopting age friendly policies but there is little evidence explaining the factors influencing these public policy decisions. This research provides evidence on the conditions under which local governments adopt age friendly policies.

CHAPTER 6

FINDINGS AND ANALYSIS

Introduction

The final data set for analysis includes 371 responses from cities reflecting a percentage response rate of approximately 36%. The analysis of the results is divided into four parts. The first section of the chapter presents the descriptive summaries of the survey of cities on age friendly policy adoption. It also presents the descriptive findings of model variables and some relationships presented through cross tabulations. The section then follows with the analysis of 6 models including the policy adoption model, a degree of adoption model, and four conceptual distinction models examining the differentiation in policy choices by municipalities. Each model analysis section presented discussed the effects of each predictor variable on the dependent variables.

Descriptive Summaries

The survey was sent directly to city leaders because the only way to find out whether a large sample of cities are responding to the needs of a growing older adult population was to ask them directly through a survey format. The goal of the questionnaire was to help identify what kind of policy objectives cities establish to facilitate the opportunity for older adults to live healthy and independent lives in their communities as they age. Further, the survey identified the tangible action areas for local governments in this policy arena.

To frame the survey, it was noted for respondents that there are different age friendly physical and social features that tend to be associated with local government planning and

programming. These features include mobility (transportation); housing; the built environment; and public service delivery.

Survey respondents were asked to indicate their perception on whether their municipality has adopted age friendly policies. Their response to this question is only important for this research from a descriptive observation. This particular survey item is not used in this research's overall theoretical model because as indicated in the discussion below on total policy actions, only 4% of the 371 respondents reported 0 total policy actions. The majority of cities are facilitating action on policies identified as important to age friendly. The results to the survey question on their perception of whether they are an age friendly city, as noted above, surfaces the issue that not all city respondents associate the policy actions they are taking as age friendly. It is possible cities facilitate some policy actions because they align with everyday city functions or just reflect good planning for a diverse population. A discussion on what policies may be standard to local government operations and those that may be advanced or elite for the highest levels of age friendly policy adoption consideration is discussed in detail in the section below pertaining to the model on the degree of policy adoption. The model on degree of adoption will provide an understanding on the factors that influence municipalities to fall into categories of low, medium, or high levels of age friendly policy action and present cross tabulation results to depict the policy actions occurring at each level of policy adoption.

Frequency results of respondent perceptions as to whether they consider their municipality to be adopting age friendly policies, as shown in Table 8, indicate only a 1% difference between those that report yes, they are adopting versus no they are not adopting age friendly policies (43%, 44%, respectively). The remaining 11% report a consideration

of planning to adopt policies in the future. Interestingly, of those cities indicating a no response for adoption of age friendly policies, 26% remarked that age friendly policy adoption is not a policy priority for the next 5 years (see Table 9). Further, of this same group of non-adopters, 21% indicated a lack of staff expertise to plan and implement age friendly policy adoption. Only 1 respondent reported a concern by the municipality of being framed as age friendly as a reason for not pursuing age friendly policy adoption.

Table 9

Frequency Results for Municipal Perceptions on Age Friendly Policy Adoption

Survey Question	Yes	No	Planning to adopt	Total Responses
Has your jurisdiction adopted age friendly policies?	43%	44%	11%	354
If not currently, why not?				
- Not a policy priority for the next 5 years		26%		49
- Lack of financial resources		8%		16
- Lack of staff expertise to plan and implement		21%		40
- Do not want to be framed as age friendly		1%		1
- Council is indifferent to this issue		11%		20
- Other		34%		64

Of those respondents that did not perceive their municipality as adopting age friendly policies provided important descriptive insight on why cities already experiencing a concentration of 14.5% of individuals aged 65 and over may not be interested in pursuing

age friendly policies. Example responses stem from their interest in social equity across all age groups including cities not isolating services by age but rather creating policies fair for all ages; nothing specific for either youth or elderly; ensuring the city is citizen friendly and trying not to discriminate; trying not to serve just one age group; and treating everyone the same. One city located in the Midwest part of the country submitted a comment through email that the survey did not apply to them because the citizens of their community did not believe it was the job of government to care for their needs. Another city in the southeast emailed indicating they too did not need to take the survey because they already offered their citizens everything they needed.

Some respondents provided additional descriptive comments indicating that age friendly was not a priority for the community or it had not surfaced as an issue among the citizenry. One city elaborated on current demographic trends. In the 1950's, this particular municipality was branded as a resort and retirement destination. The population steadily increased but in the 1990's younger families and the children of original retirees lost interest in the place as a getaway destination. The city stopped all marketing campaigns supporting its resort profile. Over the last five years, the city experienced a major turn in demographics with 49% of its population under 50 but with 18% of the original residents over 65 years of age remaining. The city indicated its current planning work attempts to balance services for older adults with extreme pressures from the influx of a younger generation due to the substantial number of new jobs created from a decade of economic development investments. The city respondent remarked that the new younger generations are not as involved in city matters indicating that the youngest person on the city council is 64, but economic

development plans are primarily tailored to address the demands of younger families such as parks, schools, etc. The city has several elderly residents in the local nursing home but primarily what they are seeing is that when a spouse dies the other no longer is able to sustain themselves financially and ultimately moves to be near their children. This detail provides insight on the uniqueness of situations that likely exist across all cities in this sample.

Some municipalities remarked that they were beginning to move in a direction of age friendly policy development, one city highlighting a new relationship between the municipality and AARP’s Age Friendly Cities Initiative, but staffing constraints, and limited resources remain an issue. Finally, as shown in Table 10, when asked about the extent of the municipality becoming age friendly, approximately 77% ranging from moderate to a very great extent indicated it as a goal for their city. Even though cities were not as a majority self-identifying as age friendly, these descriptive findings indicate age friendly as a growing policy interest or pursuit. This argument is also supported by the low percentage of respondents that adopted zero policy actions as discussed above.

Table 10

Frequency Results for Municipal Perceptions on Age Friendly City Goals

Survey Question	Not at all	Low	Moderate	High	A very great extent	Total Responses
To what extent is the goal of becoming an age friendly city a priority of your community?	4%	19%	44%	30%	3%	355

The responsiveness of public administrators is a central tenet of this dissertation's research. It argues that a value or attitude of a responsibility to be responsive to the needs of population 65 and older is a determinate for age friendly policy adoption. Table 11 shows the frequencies of the four aspects of responsiveness in city management (revised from Yang and Pandey's (2007) constructs of responsiveness). The 4 survey items focus on the city's value of responsiveness relative to a needs assessment, strategic goals, citizen engagement, and budgetary principles relative to the needs of individuals aged 65 and over. These four subject areas were identified as elements of the functions of professional city management (see Stenberg & Austin, 2007). Most municipalities, approximately 53%, were associated with the category not at all, or low level, relative to performing an assessment to capture the needs of individuals aged 65 and older, with 30% at a moderate level, and the remaining 17% at high or to a very great extent. A needs assessment is an element of strategic planning capturing demographic trends, exploring current conditions, and evaluating and prioritizing needs of the target group.

Table 11

Frequency Results for Municipal Perceptions on Responsiveness in City management toward individuals aged 65 and over

Survey Question	Not at all	Low	Moderate	High	A very great extent	Total Responses
Responsiveness: Performs a needs assessment to capture the needs of individuals aged 65 and older	29%	24%	30%	15%	2%	351
Responsiveness: Integrates the needs of individuals aged 65 and older into the city's strategic goals	12%	19%	42%	24%	2%	352
Responsiveness: Creates opportunities for civic engagement for individuals aged 65 and older	9%	14%	35%	36%	5%	353
Responsiveness: Establishes vision based budgetary principles to reflect the needs of individuals aged 65 and over	24%	29%	32%	12%	2%	348

The responsiveness survey item for the extent municipalities captured the needs of individuals aged 65 and over into their strategic goals tends to be evenly dispersed with 26% reporting high or to a very great extent, 42% reporting moderate, and 32% as low or not at all. Opportunities of citizen engagement of individuals aged 65 and older surfaced as a more relevant responsiveness construct for cities with approximately 41% reporting high or to a very great extent. Establishing vision based budgetary principles to reflect the needs of individuals aged 65 and older had lower levels of responsiveness with 53% falling into the categories of low or not at all and only 14% falling into the categories of high or to a very great extent.

Budgetary principles should reflect the goals of the city. They establish the direction for fiscal allocation in a municipality's departments and provide a basis during program and fiscal evaluation as to whether spending and programmatic decisions align with city goals.

Cross tabulation frequency results between the responsiveness survey items and respondent perceptions that their municipality adopts age friendly policies, as shown in Table 12, reveal higher frequency levels of responsiveness across all four items from moderate to a very great extent when compared those cities identified as not adopting. The findings presented here add a descriptive richness to our understanding of the association between an attitude of responsiveness and perceptions of age friendly adoption. The proceeding policy adoption and degree of adoption models examine the association of responsiveness with total policy actions. Those cities falling into the category of planning to adopt also revealed higher frequency levels of responsiveness from moderate to a very great extent than those cities identified as not adopting in responsiveness survey items except for the item pertaining to the needs assessment. The chi-squares all show significance below the .05 level limiting the likelihood the associations are by chance. The attitude of a responsibility for public administrators to be responsive to the needs of a population aged 65 and over integrated into these four elements of city management provide some support for a culture of age friendly policy adoption at the municipal level. These findings help to add to our understanding how responsiveness of public administrators relates to a cultural awareness of age friendly policy adoption.

Table 12

Frequency Results of Cross Tabulations between Municipal Perceptions of Responsiveness and Perceptions of Age Friendly Policy Adoption

Responsiveness: To what extent does your city perform a needs assessment to capture the needs of individuals aged 65 and over?						
Perceptions of Age Friendly	Not at all	Low	Moderate	High	A very great extent	Total Responses
Yes	11%	18%	42%	25%	3%	157
No	51%	28%	16%	5%	0%	151
Planning to adopt	20%	33%	0%	13%	5%	40
Responsiveness: To what extent does your city integrate the needs of individuals aged 65 and over into the city's strategic goals?						
Perceptions of Age Friendly	Not at all	Low	Moderate	High	A very great extent	Total Responses
Yes	2%	9%	45%	3%	3%	157
No	24%	30%	38%	9%	0%	152
Planning to adopt	9%	20%	48%	20%	3%	40
Responsiveness: To what extent does your city create opportunities for civic engagement for individuals aged 65 and over?						
Perceptions of Age Friendly	Not at all	Low	Moderate	High	A very great extent	Total Responses
Yes	4%	6%	30%	54%	6%	158
No	17%	24%	39%	16%	3%	152
Planning to adopt	0%	13%	40%	38%	10%	40

(table continues)

Table 12 (cont.)

	Responsiveness: To what extent does your city establish vision based budgetary principles to reflect the needs of individuals aged 65 and over?					
Perceptions of Age Friendly	Not at all	Low	Moderate	High	A very great extent	Total Responses
Yes	10%	20%	45%	32%	6%	154
No	40%	36%	20%	4%	0%	151
Planning to adopt	15%	40%	33%	10%	3%	40

This dissertation’s theoretical argument of responsiveness argues the full concept of responsiveness is the congruence between bureaucratic goals and citizen need. Bureaucratic responsiveness suggests the public administrator understands the similarity between municipal goals and citizen need. Relative to the third responsiveness item, seeking input on the extent opportunities for citizen engagement of individuals aged 65 and older, an additional survey item pursued adds additional descriptive richness into the types of policy issues municipalities sought input. The survey items ask respondents for their perceptions on the extent they solicit input from older persons on the issues of transportation; housing, meals/food and nutrition, city services, health, and recreation. Table 13 shows the frequency levels for each topic of public interest. The total frequency levels are higher in the categories of high and to a very great extent than the levels in the categories of low and not at all for the issue areas of transportation, housing, city services, and recreation. The items of meals/food and nutrition, and health had lower frequencies in the categories of high, and to a very great extent. Meals/food, and nutrition, and health issue areas are not necessarily standard routine policy areas for municipalities when compared to the issue areas of transportation, housing, city services, and recreation. However, both meals/food, and health had frequency levels in the

moderate category of 36 and 38%, respectively, illustrating reasonable interest in the solicitation on these issue areas from individuals aged 65 and over.

Table 13

Frequency Results for Municipal Perceptions on the Extent a Municipality Solicits input from

Older Persons on Certain Policy Issues Pertaining to the Needs of Individuals aged 65 and Over

Survey Question	Not at all	Low	Moderate	High	A very great extent	Total Responses
Please indicate the extent your municipality solicits input from older persons on the following topics:						
- Transportation	10%	18%	38%	28%	6%	349
- Housing	10%	21%	41%	24%	4%	349
- Meals/food and nutrition	19%	20%	36%	22%	4%	350
- City services	4%	15%	42%	35%	5%	351
- Health	17%	21%	38%	31%	3%	346
- Recreation	6%	15%	34%	36%	9%	351

Moreover, three survey questions explored additional concepts associated with engagement including training, changes in local government investment priorities, and mobilized advocacy from special interest groups in the community. These three items are not included in the overall theoretical model because they are highly correlated with the items that comprise the responsiveness index and they are likely measuring similar elements of the concept of engagement. However, they are discussed here to add descriptive fullness to the overall model results in the following chapter. As shown in Table 14, only 39% of respondents indicated that they provided training opportunities for staff achieving specialty understanding for the planning and serving the needs of individuals aged 65 and over. The results of the cross

tabulation, as shown in Table 15, indicate a higher frequency for offering training and falling into the group of adopting age friendly policies. The findings indicate a significant difference between falling into a group of adoption, not adoption, and planning to adopt ($p=.05$). Overall, almost half of respondents indicated an increased in their municipality's local financial investments within the last five years to support older adults with public programs and services (see Table 13). The cross tabulation also illustrates the association between investment patterns and falling into a group of adoption, not adoption, and planning to adopt ($p=0.05$). Cities that consider themselves to be adopting age friendly policies are associated with higher frequencies of investment. Finally, as shown in Table 14, the frequency of cities adopting policies in response to mobilized support and advocacy was low at only 29% suggesting municipalities may solicit directly to citizens for policy and services input (see frequencies for citizen engagement in Table 12). Cross tabulation results supported this finding showing that only 42% of those cities falling in the category of adoption considered themselves to adopt from a need identified by a mobilized special interest group (Table 14). Results inform on the associations of factors of engagement and a municipality's cultural perception of being age friendly.

Table 14

Frequency Results for Municipal Perceptions on Training, Local Investments, and Mobilized

Advocacy

Survey Question	Yes	No	Total Responses
Do you provide training opportunities for your staff achieving specialty understanding for the planning and serving the needs of individuals aged 65 and over	39%	61%	352
Generally, has your jurisdiction adopted policies friendly toward older adults due to the mobilized support and advocacy from special interest groups in your community?	29%	71%	352
Has your city increased its local financial investment within the last 5 years to support older adults with public programs and services	46%	54%	352

Table 15

Frequency Results of Cross Tabulations between Municipal Perceptions of Training, Local

Investment, Mobilized Advocacy and Perceptions of Age Friendly Policy Adoption

	Training			Investment in Last Five Years			Mobilized Advocacy		
Perceptions of Age Friendly	Yes	No	Total Responses	Yes	No	Total Responses	Yes	No	Total Responses
Yes	52%	48%	157	68%	32%	157	42%	58%	154
No	24%	76%	152	28%	72%	151	14%	86%	152
Planning to adopt	43%	57%	40	30%	70%	40	40%	60%	40

Respondents provided some feedback on their perceptions of groups currently working with the municipality on identifying policies and services important to older adults. As shown in Table 16 frequency levels for local area agencies on aging was highest at 66% followed by RSVP, and local AARP Chapters (66%, 44%, and 24%, respectively). Further, approximately 151 cities provided descriptive feedback indicating the creation of their own local level advisory groups created to support their age friendly initiatives. Official municipal titles ranged from Aging Network, Advisory Council, Age Friendly (*city name*), Council on Aging, Commission on Senior Issues, Community or Human Relations Commissions, Lifelong Community Advisory, Senior Board, Older Adult Task Force, and 50+ Board. Some respondents provided additional detail indicating council appointment of citizen members to the commissions or boards. Another respondent remarked that in their community all citizen commissions have representation by members of the community aged 65 and over.

Table 16

Groups Identified by Municipalities as helping Jurisdiction on Age Friendly Policy Adoption

Group	Frequency	Total Responses
Retired Senior Volunteer Program (RSVP)	44%	120
Area Agency on Aging	66%	179
AARP Local Chapter	24%	66
Alzheimer's Association	18%	50
Senior Corp	5%	15
Points of Light	1%	3
Elder Justice	4%	10
Association of Mature American Citizens	0%	1
Total		444

Public entrepreneurship, a sub-theory of this dissertation research, supports the primary theoretical argument of responsiveness theory. A theory of public entrepreneurship is explained in detail in Chapter 4. It argues that some policy adoption is dependent on the leadership of a local public official to take risks and seek out new policy solutions. This research's models described in the following three sections utilizes the survey item, has your jurisdiction adopted policies friendly toward older adults because of a need identified by a local public champion. Frequency results depicted in Table 17 show 68% of respondents did not perceive that their municipality adopted policies friendly toward older adults based on a need identified by a local public champion. The association between needs identified by a public policy champion and perception of age friendly adoption add richness to understanding to city policy adoption and a cultural of age friendly. The variable of public entrepreneurship is

examined in the proceeding models relative to total policy actions, degree of action, and conceptual distinctions between the four policy action types.

Table 17

Frequency Results for Municipal Perceptions on Age Friendly Policy Adoption Relative to a Need Identified by Champion or Local Leader of City Government

Survey Question	Yes	No	Total Responses
Generally, has your jurisdiction adopted policies friendly toward older adults because of a need identified by a champion or leader of city government?	32%	68%	352

The survey also included 25 individual items asking respondents to indicate the policy actions to facilitate expanded transportation services, expanded housing options, enhancements to the built environment, and expanded public services for individuals aged 65 and older. The frequencies as shown in Tables 18-21 provide an assessment of the levels of policy action per policy issue area. The sum of all policy actions serves as the dependent variable in the policy adoption model discussed in more detail in the following section. Further, total policy actions, transformed into an ordinal variable, serves as the dependent variable for the degree of adoption model discussed in the third section of this chapter. Finally, the total policy actions per individual categories of transportation (Table 18), housing (Table 19), built

environment (Table 20), and public services (Table 21) are dependent variables in the conceptual distinctions models presented in detail later. The basic total frequencies are presented in each table (Tables 18-21). An argument for the transformation of the interval total policy actions variable into an ordinal variable reflecting low, medium, and high degree of adoption is presented in more detail in section three.

Table 18

Frequency Results of Transportation Policy Actions

Policy Action Types	Total Policy Actions			
	%		Count	
	Yes	No	Yes	No
T1: Public transit with priority seating for older adults and disabled individuals	43%	56%	144	190
T2: Specialized transportation services for older adults	66%	34%	228	116
T3: Volunteer driver program	23%	77%	75	248
T4: Transportation voucher program	23%	77%	74	247
T5: Pedestrian crossings with proper markings and adequate crossing times	85%	15%	297	51
T6: Highly visible traffic signals and signage	80%	20%	275	69
T7: Accessible taxis	27%	73%	85	229

Table 19

Frequency Results of Housing Policy Actions

Policy Action Types	Total Policy Actions			
	%		Count	
Housing Policy Actions				
H1: Rental housing	58%	42%	198	143
H2: Subsidized housing	60%	40%	202	139
H3: Single family homes with variety of price points and sizes	57%	43%	195	146
H4: Intergenerational housing (co-located near families or other age groups)	28%	72%	9	235
H5: Segregated 55+ senior communities	62%	38%	210	310
H6: Assisted living	72%	28%	249	97
H7: Nursing homes	67%	33%	226	114

Table 20

Frequency Results of Built Environment Policy Actions

Policy Action Types	Total Policy Actions			
	%		Count	
Built Environment Actions				
B1: More permitted mixed use development	68%	32%	233	108
B2: Required sidewalks in new development	85%	15%	296	52
B3: Permitted housing options for older adults near transit stops	35%	65%	114	214
B4: Permitted housing options for older adults near shopping and recreation	53%	47%	176	156
B5: Accessible parks and open space	91%	9%	322	30
B6: Building codes that allow for universal design	57%	43%	192	144

Table 21

Frequency Results of Services Policy Actions

Policy Action Types	Total Policy Actions			
	%		Count	
Service Policy Actions				
S1: Joint programming with parks and recreation	57%	43%	195	146
S2: Health services (e.g. wellness, preventative care, etc.)	53%	47%	181	157
S3: Multigenerational recreation center with programs supporting all age groups	57%	43%	196	145
S4: Meals and nutrition services	67%	33%	227	114
S5: Lifelong learning opportunities (e.g. workshops and training)	63%	47%	215	124

The frequencies of total policy actions range from 0 to 25 total actions. Frequency levels inform on those policy actions that tend to be more commonly facilitated among municipalities than others. For example, cities where policy action support is over 50% includes T2 and T5 (see Table 18); H1, H2, H3, H5, H6, and H7 (see Table 19); B 1, 2, 4, 5, and 6 (see Table 20); and S1, 2, 3, 4 and 5 (see Table 21). Aspects of these policies include common roles for local government such as sidewalk construction, traffic signage, rental housing, mixed use zoning, and joint recreational programming where youth and seniors are together. The third section, degree of adoption, provides detailed discussion on the differences between common policies and those that tend to be more elite or advanced for municipal policy action.

An analysis of cities with zero total policy actions reveals that those respondents did not complete the survey in its entirety. There are no other common patterns for the cities identified as zero total policy actions. An examination of the cities with 23 facilitated policy actions and above shows some shared characteristics between the cities in this category. Descriptive

statistics for those cities with 23-25 total policy actions, eight cities, show they are more likely to have: 101 or greater full time staff members, approximately \$1,467 per capita revenue, approximately 56% of population white, only 10% of population African American, and an approximate household income of \$59,796.

Descriptive input from some cities reflects different and innovative policy not included in the formal survey list of policy actions. There was no critical mass on any one additional policy action offered in the option of other to include it as possibly policy action. However, examining these additional policy actions informs future survey work. In the category of facilitated transportation policy actions some respondents indicated they provide contract demand services for medical trips, participate in cost sharing services with larger public transit systems to offer service locally, support Uber and other alternative providers, and provide license plate discounts. One respondent remarked on the effort their city makes to provide adult trips and excursions through the senior center. Respondents provided additional insights on innovative housing policy actions including a zoned senior living center in a hospital area, fee waivers for senior housing, more accessible ADA housing, and approved apartment rental in some zoning categories.

The built environment policy type yielded a variety different policy action innovations not included in the formal survey list including no cost building permits for disabled veterans, council policy directives creating a walkable and drivable city. One respondent remarked on the importance of attention of requiring energy efficiency in new residential building codes reducing the overall utility expenses for older adult. Another respondent used this category to provide input on work their municipality is doing to support Healthy Living Initiatives and

Healthy Eating Active Cities Campaign. One respondent expressed apprehension to the fact that many policies were included in their 10-year comprehensive plan but there was little policy action implemented to date.

Finally, in the category of public services, some respondents elaborated on actions to support senior outreach on aging place, collaboration with faith based groups for services, the construction of multigenerational facilities, void or reduction in late fees, reduced sanitation fees, discount user fees for seniors. Some respondents highlighted newly created information and referral services, an annual senior fair, and resource center for caregivers and senior. One highlighted a newly formed partnership with a dementia friendly alliance for training and awareness. Another remarked on the recent cuts in the local budget forcing major cuts to many services to older residents. One respondent remarked on the existence of their large senior population expressing their involvement in government and the ongoing communication about addressing needs of older adults. Further, this municipality highlighted their efforts to place older adult representatives on the local transit service committee ensuring they have community engagement at all levels.

The survey asked respondents to indicate if city services included the provision of a senior center. Senior centers were not included in the final list of total policy actions used as the dependent variable for total age friendly policy actions as presented above. Federal funding helped initiate the construction of senior centers in the United States through the Older Americans Act of 1965 (Pardasani & Thompson, 2012). The primary functions of senior centers range from food, nutrition, and basic services to help poorer older adults with recreation, and socialization for more affluent older adults. This dissertation research argues that the provision

of senior center services, a city service delivery activity instituted prior to the age friendly policy movement, is associated with cities facilitating a broader range of age friendly policy actions as identified in the literature. Senior centers connect city staff directly to residents due to the programmatic activity that occurs in the facilities. An examination of frequencies indicates that almost 78% of 352 respondents facilitate policy action to support senior centers.

A cross tabulation, as shown in Table 22, of the provision of municipal offered senior center activity and the respondent's perception of their municipality's adoption age friendly policies shows that municipalities are likely to have senior centers regardless of whether they perceive themselves adopting age friendly policy actions. This finding informs on the argument presented in Chapter 5 on senior centers that this type of policy action is not an age friendly policy action as a standalone service or local action, but investment in them may influence municipalities to facilitate more age friendly policy actions. The percentage of municipalities in the category of adopting age friendly policies show the highest percentage municipalities also facilitating senior center activity at approximately 85%. Findings show support that senior centers may begin to foster a culture of age friendly policy awareness but senior center activity has relevance in the communities of most survey respondents. The models presented in the following sections examine the extent and degree that having senior center activity is an influencing factor in the extent that a municipality adopts age friendly policy actions.

Table 22

Frequency Results of Cross Tabulations between Provision of Senior Center Activity and Perceptions of Age Friendly Policy Adoption

	Senior Center		
Perceptions of Age Friendly	Yes	No	Total Responses
Yes	85%	15%	158
No	70%	30%	152
Planning to adopt	79%	21%	39

These frequency summaries lend support for the variables that comprise the models presented in the following sections covering extent of adoption, degree of adoption, and differentiation of adoption choices. The additional descriptive summaries presented above provide a deeper understanding of respondent answers that are typically lost in a large n sample data set. Most respondents demonstrate an awareness of age friendly policy issues. Further, those respondents that already consider themselves to be adopting age friendly policies also have higher frequency levels of responsiveness in three of the four survey items suggesting a cultural awareness of the local government role in age friendly policy adoption. As the data reveals, 96% of municipalities surveyed are facilitating at least one age friendly policy action. The models presented in the following three sections examine the theoretical determinants influencing these policy action decisions. The following section includes additional descriptive statistics for the variables used in the models.

Age Friendly Policy Adoption Model

The descriptive statistics for the variables used in Model 1, age friendly policy adoption model, are shown in Table 23. In a sample of 331 municipalities, total useable responses for

analysis, on average, jurisdictions facilitated approximately 13.12 total age friendly policy actions. The responsiveness index is built on municipal responses to four survey items, perceptions of city management integration of the needs of individuals aged 65 and over through needs assessments, strategic goals, citizen engagement, and budgetary principles. Overall, respondents were more likely to indicate they had an attitude of responsibility toward the needs of older adults with a mean of 2.69. On average, cities are likely to have fewer numbers of RSVP member volunteers with mean of 226.9 with a range from 0 to 1,640 members. Respondents have, on average, 4,092 number of older adults based on the log total population of individuals aged 65 and older. The identification of a municipality with an U.S. Housing and Urban Development sustainability grant served as a proxy for multi-level governance. Grant recipients are awarded federal funds to partner with local and regional entities in collaborative planning efforts. Survey respondents were less likely to fall into the category of being a HUD grant recipient. Respondents were asked to indicate whether their jurisdiction perceived their adoption of age friendly policies based on needs identified by a local public champion or leader. Municipalities were less likely to indicate that decisions to adopt age friendly policies transpired due to the leadership of a public policy entrepreneur with a mean of 0.32 (range 0-1).

Table 23

Descriptive Statistics, Explanatory Variables for Local Government Adoption of Age Friendly Policies

Variables	Mean	Std. Dev	Min	Max
Total Policy Actions	13.12	5.69	0	24
Responsiveness Index	2.69	0.89	1	5
RSVP	0.53	0.51	0	1
Log Total Pop 65 and Older	3.61	0.32	3.15	4.82
HUD_Sustainability	0.34	0.47	0	1
Public Entrepreneur	0.32	0.46	0	1
Form of Gov_Appointed	0.64	0.48	0	1
Administrative Capacity	1.78	0.51	1	3
Log GrandParentPer1000	1.17	0.35	0	2.55
SeniorCenter	0.78	0.42	0	1
Log Revenue Per Capita	3.11	0.49	0.64	4.54
Log HH Income	4.72	0.17	4.39	5.32
Log Density	3.29	0.29	2.09	4.28

Certain community and government characteristics are used as control variables. Of those that responded, municipalities were more likely to fall into the category of mayor-council form of government with a mean of 0.64 (range 0-1). Administrative capacity was defined by the number of full time staff represented by the categories under 100 staff, 101-999, and over 1000 staff members. Survey respondents represented on average a medium staff size with approximately 101-999 full time staff members. Finally, municipalities were more likely, on average, to indicate that they facilitated policy actions for the establishment of a senior center in their jurisdiction with a mean of 0.79 (range 0-1).

Further, the model controls for the extent that a municipality is committed to sustainability with a proxy for multigenerational awareness based on the number of grandparents

living with grandchildren, and the total revenue per capita. First, log grandparent living with grandchildren per 1000 communities have on average 14.85. Second, the mean for log revenue per capita is \$1,303.12. The mean for log household income is \$52,480.74, slightly lower than the national U.S. average of \$53,000. Finally, the respondent cities are less dense with a mean log density of 1,967.88 population per square mile.

Total population is not included in the models because it is highly correlated with the population of individuals aged 65 suggesting both variables are measuring the same thing. Because this research is interested in the influence of a population aged 65 and over, log total aged 65 and older remains in the model. The mean total population for all municipalities included in the sample is 32,903 with a range of 10,001 to 416,432. Overall, cities with smaller to medium population sizes were more likely to respond to this survey.

The correlation measures for all variables used in the model are shown in Table 24. The main variables testing responsiveness theory including the Responsiveness Index, RSVP, and the population of individuals aged 65 and older are positive, significant, and moderately associated with the total number of facilitated policy actions.

Table 24

Correlation Analysis Explanatory Variables for Local Government Adoption of Age Friendly

Policies

	Total Policy Actions	Responsiveness Index	RSVP	Log_65 and older population	HUD Sustainability	Public Entrepreneur	Form of Gov_Appointed	Administrative Capacity	GrandparentInHomePer1000 Log	Senior Center	Log Revenue Per Capita	HHIncome LN	Log_Density
Total Age Friendly Policy Actions	1.000	0.552**	0.207**	0.275**	0.036	0.376**	-0.072	0.234**	-0.023	0.331**	-0.055	0.012	0.138*
Responsiveness Index	0.552**	1.000	0.201**	0.201**	0.074	0.389**	-0.100	0.178**	-0.026	0.174**	-0.074	0.121*	0.146**
RSVP	0.207**	0.201**	1.000	0.246**	0.253**	0.109*	0.040	0.075	-0.152**	0.107*	-0.071	0.379**	0.422**
Log_65 and older population	0.275**	0.201**	0.246**	1.000	0.197**	0.188**	0.086	0.492**	-0.235**	0.071	-0.301**	0.067	0.274**
HUD Sustainability	0.036	0.074	0.253**	0.197**	1.000	0.009	0.098	0.007	-0.120*	-0.046	-0.034	0.345**	0.357**
Public Entrepreneur	0.376**	0.389**	0.109*	0.188**	0.009	1.000	-0.144**	0.149**	-0.019	0.193**	0.041	0.004	0.025
Form of Gov_Appointed	-0.072	-0.100	0.040	0.086	0.098	-0.144**	1.000	0.001	-0.003	-0.032	0.033	0.065	0.037
Administrative Capacity	0.234**	0.178**	0.075	0.492**	0.007	0.149**	0.001	1.000	-0.082	0.134*	-0.078	-0.148**	0.037
GrandparentInHomePer1000 Log	-0.023	-0.026	-0.152**	-0.235**	-0.120*	-0.019	-0.003	-0.082	1.000	0.061	0.406**	-0.231**	-0.127*
SeniorCenter	0.331**	0.174**	0.107*	0.071	-0.046	0.193**	-0.032	0.134*	0.061	1.000	0.051	-0.104	0.070
Log Revenue Per Capita	-0.055	-0.074	-0.071	-0.301**	-0.034	0.041	0.033	-0.078	0.406**	0.051	1.000	-0.066	-0.033
Log_HHIncome	0.012	0.121*	0.379**	0.067	.345**	0.004	0.065	-0.148**	-0.231**	-0.104	-0.066	1.000	0.321**
Log_Density	0.138*	0.146**	0.422**	0.274**	0.357**	0.025	0.037	0.037	-0.127*	0.070	-0.033	0.321**	1.000

The first research question of this dissertation asks, to what extent do cities adopt age friendly policies. Hypothesis 1 of this research states that higher levels of bureaucratic responsiveness increase the likelihood of age friendly policy adoption by local governments. The coefficient for bureaucratic responsiveness as shown in Table 25 is significant and supports this hypothesis ($\beta=2.267, p<.000$). A one-unit increase in bureaucratic responsiveness (scale 1-5), an

indexed variable supported by respondent perceptions on four survey elements, increases total facilitated policy actions by 2.27 actions, holding all else equal. Results lend support to the argument that an attitude or value of responsibility toward being responsive to the needs of individuals 65 and older is related to higher levels of age friendly policy actions.

Table 25

Multiple Linear Regression: Total Municipal Age Friendly Policy Action

	(n = 331)	
Age Friendly	Coef (Unstandardized)	S.E.
Intercept	3.94	8.04
Responsiveness Index	2.27***	0.28
RSVP	0.07*	0.01
Log_65 and older population	1.65 *	0.91
HUD Sustainability	-0.09	0.51
Public Entrepreneur	1.47 **	0.53
Form of Gov_ Appointed	-0.37	0.47
Administrative Capacity	0.27	0.52
GrandparentInHomePer1000 Log	0.39*	0.71
SeniorCenter	2.60 ***	0.55
Log Revenue Per Capita	-0.51	0.54
Log_HHIncome	-1.24	1.49
Log_Density	0.55	0.86
R-squared	0.65	

*p < .05, **p < .01, ***p < .001

As suggested, a value of bureaucratic responsiveness is matched with producing a public good or service that represents the accuracy of expressed citizen need (Vigoda, 2002). The second hypothesis states higher levels of citizen need increase the likelihood of age friendly

policy adoption by local governments. Mobilized citizen need is captured in the theoretical model through two different variables, RSVP membership, and the log total population of individuals aged 65 and over accounted for in the jurisdiction's census. Findings provide support for the second hypothesis. First, a one-unit increase in RSVP membership increases total policy actions by 0.07 actions, holding all other variables constant ($\beta=0.07$, $\rho<.05$). Consistent with Benavides (2008), the evidence presented here also finds that higher levels of policy action are related to higher levels of individuals aged 65 and over. A one-unit increase in the total number of individuals aged 65 and over increases total policy actions by 1.65 actions, hold all else equal ($\beta=1.65$, $\rho<.05$). The combined results for responsiveness and mobilized citizen need provide support for the importance of a cultural awareness of the needs of a population aged 65 and older integrated in fundamental elements of city management including, needs assessments, strategic goals, citizen engagement, and budgetary principles.

The third hypothesis states that higher levels of federal and state financial support for programs and services friendly toward older adults increases the likelihood of age friendly policy adoption by local governments. Multilevel governance supports responsiveness theory arguing that local governments, those closest to the people, are better positioned to solve policy issues around aging in place, but are more likely to do so with the assistance of federal or state aid. Interesting, the findings from the linear regression model do not support this hypothesis. Additionally, the results are in the opposite direction of what was hypothesized suggesting that federal grants towards HUD sustainability planning is associated with lower levels of total policy actions. An explanation may relate to the findings for RSVP. The Retired Senior Volunteer Program is also a federally funded program, but its purpose is to fund the recruitment and

advocacy work of individuals aged 65 and older by individuals 65 and older. Federal funding supports the activity through actual boots on the ground or in other words mobilized citizen need as shown in the evidence presented above. The HUD Sustainability grants fund municipal and regional plan development. It is possible to suggest that while the support of age friendly communities is an objective of the HUD program, the federal funding is not enough to translate into policy implementation by municipalities when compared programs that promote actual services such as RSVP.

Public policy entrepreneurship adds to responsiveness theory, arguing that age friendly policies are deemed innovative relative to their cross disciplinary nature. Dynamic policy solutions, therefore, require the support of a public leader that deviates from normal leadership styles in pursuit of innovation. As suggested, findings support the fourth hypothesis that the presence of a public policy entrepreneur on the needs of older adults increases the likelihood of age friendly policy adoption by local governments. The presence of a public policy entrepreneur championing the needs of individuals aged 65 and older is significant and positively associated with higher levels of policy action, holding all else equal ($\beta=1.47, p<.05$).

This research's argument of public policy entrepreneurship is also supported by the concept of professionalism. It argues that the risk-taking behavior of public policy entrepreneurs is brought on by their awareness of the needs of their citizens. This research suggests that professionalism is supported through the public administrator's association with their professional association gaining insight on demographic trends and innovative policy solutions. The fifth hypothesis states council-manager form of government increases the likelihood of age friendly policy adoption by local governments. The findings from the linear regression do not

support the hypothesis. In fact, the results are opposite the hypothesized direction. The findings may suggest that mayors would be more likely to adopt these policies relative to an argument of credit claiming for constituents as self-interested seekers of reelection (Mayhew, 1974). The voting block of individuals 65 and older is considered important for election support (MacDonald, 2008). On the other hand, the negative finding may also suggest an opportunity for educating city managers on the issues surrounding the needs of an aging population.

Hypotheses 6 and 7 support a theoretical argument that a municipality's decision to adopt age friendly policies may be influenced by their jurisdiction's commitment to sustainability across all age groups. The coefficients for both the number of grandparents living in the house with grandchildren, is relevant. A one-unit increase in the log number of grandparents living with grandchildren increases total policy actions by 0.39 actions (0.39, $p = .05$). However, log revenue per capita is not relevant to a municipality's total number of facilitated policy actions. As shown above, log revenue per capita is positive and moderately correlated with the number of grandparent's living with grandchildren in a jurisdiction (0.41, $p = .001$) implying that the level of government resources matters to grandparents cohabitating with grandchildren. Higher levels of multi-generational households in a community may raise awareness locally leading to an increase in the diversity of housing types to accommodate multigenerational households.

This research uses a measure of a municipality having a senior center to control for ongoing and long-term public investments in senior service programming and delivery prior to the inception of the age friendly cities policy movement. Senior center funding and support originated locally in 1943 and expanded as a federal government grant initiative in the Older

American's Act of 1965 as mentioned in the previous section. Senior centers provide services directly to community residents aged 65 and older and provides an opportunity to connect the needs of older adults directly to city staff. The coefficient for senior center is positive and significant, holding all else equal ($\beta=2.31, p<.000$). Senior centers, like RSVP, allow older adults to brings issues directly to city. Having a senior center serves as a proxy for a city already demonstrating long-term resource allocation to the needs of older adults.

Degree of Policy Adoption

The second question of this research asks, why do some cities adopt more age friendly policy actions than others? To examine a degree of adoption, the variable of total facilitated age friendly policy actions was transformed into an ordinal variable reflecting low, medium, and high levels of adoption. This research considers those cities adopting the highest levels of total age friendly policy actions as frontier cities. This research recognizes the power lost when transforming an interval variable to an ordinal variable. The policy adoption model in the previous section uses the full power of the interval variable. The power of the interval variable is also captured in the separate policy actions counts in models 3 through 6. A theoretical argument to split the total policy actions variable into degrees of low, medium, high includes the possibility that allocation of additional resources including staff and time for each new policy action taken is necessary for higher levels of adoption and the argument that higher-level adopters support advanced age friendly policy actions. The previous regression analysis for the policy adoption model does not indicate a positive and significant relationship between administrative capacity and total policy actions taken. However, the correlation analysis shown

in Table 23 discussed in more detail later provides evidence that administrative capacity has a positive association with total policy actions and higher levels of age friendly policy action.

The analytical steps to justify the split of the total policy action variables into low, medium, and high are three-fold. First, the Jenks Natural Break method was used to split the variable revealing a natural break for low at 0-8, medium at 9-15, and high at 16-25 (see Chapter 5). The Jenks Natural Breaks algorithm clusters data into the specified number of groups based on the smallest variance within groups (North, 2009). The outcome produced a natural grouping of low, medium, and high policy adopters. The ordinal variable used in the ordinal regression analysis output is based on the dependent variable split per the Jenks Natural Break results.

A second justification includes an exploration of the variable's distribution. An exploration of the distribution of total policy action variable revealed a grouping of frequency levels supporting a case for low, medium, and high categories. Finally, the third justification for the ordinal split stems from examination of cross tabulations, as shown in Tables 25 through 28, between each policy and the groups of low, medium, and high, and independent t-tests of mean differences per grouping. Further, the cross tabulation of the frequencies for each policy action taken by each low, medium, and high policy category reflected significant differences between level of adopter categories. The independent t-tests on the mean differences between the categories and each policy action reflect significant differences of means as shown in Tables 25 through 28. This dissertation describes common type policies as those that likely align with daily municipal operations and service (sidewalks, pedestrian crossings, traffic signals, recreation, e.g.). The identification of a common policy type is based primarily on the similar

frequency level across low, medium, and high policy action categories and no difference in means between categories.

The results of the frequencies and independent tests for mean differences shows that some policy actions are more common for governments across all three categories of low, medium, and high. For instance, as shown in Table 26, policy actions T5 and T6, pedestrian crossing upgrades and highly visible traffic signals and signage, are occurring at similar frequency levels with a lower likelihood of having a significant difference between means. This evidence suggests these policy types are consistent with standard government services and likely to be common at lower levels of adoption. On the contrary, the policy action T4, volunteer driver program, is occurring at higher frequency levels only for the high level (frontier city) adopters suggesting this policy type is less common across all levels of adopters. Across all policy types, there is a significant difference in mean between the lowest category and highest category of adopters. All cities that fall in the category of highest adopters reflect higher levels of policy actions of all types.

Table 26

*Frequencies and Mean Differences Between Low, Medium, and High Transportation Policy**Actions*

Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
	Low	Medium	High	Diff between 1, 2 Mean diff/t/p	Diff between 1, 3 Mean diff/t/p	Diff between 2, 3 Mean diff/t/p
T1: Public transit with priority seating for older adults and disabled individuals	13%	36%	55%	0.23 (2.21)**	0.42 (3.92)***	0.19 (3.45)*
T2: Specialized transportation services for older adults	33%	59%	79%	0.26 (2.37)	0.46 (5.04)*	0.21 (4.02)***
T3: Volunteer driver program	5%	22%	27%	0.17 (1.83)*	0.23 (2.75)***	0.06 (1.17)***
T4: Transportation voucher program	9%	18%	31%	0.09 (0.96)	0.22 (2.13)***	0.14 (2.77)***
T5: Pedestrian crossings with proper markings and adequate crossing times	75%	81%	91%	0.06 (0.73)	0.16 (2.85)***	0.10 (2.70)***
T6: Highly visible traffic signals and signage	71%	76%	86%	0.05 (0.52)	0.15 (1.81)**	0.09 (2.20)***
T7: Accessible taxis	10%	15%	41%	0.06 (0.71)	0.31 (2.82)***	0.26 (5.02)***

The housing action policy type comparison as shown in Table 27 provide a similar example. The frequency levels for policy actions H1 through H5 show similar frequency levels with a lower likelihood of significant differences of means between low, medium groups

suggesting these are common policy objectives for all cities. However, these results indicate a significant difference in means between the low and high levels of adopters. Frequency levels for H7, assisted living, reflect a greater variation and provide evidence of significant differences between means for the low, medium, and high adopters. Almost 89% of cities in the high category facilitate policy action for assisted living facilities. The results of the independent means test indicate a significant difference between the means of medium and high, and low and high categories reflecting higher frequency levels for all housing policy actions for medium and high categories.

Table 27

Frequencies and Mean Differences Between Low, Medium, and High Housing Policy Actions

Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
	Low	Medium	High	Diff between 1, 2 Mean diff/t/p	Diff between 1, 3 Mean diff/t/p	Diff between 2, 3 Mean diff/t/p
H1: Rental housing	44%	48%	71%	0.05 (0.42)	0.27 (2.74)*	0.23 (4.19)***
H2: Subsidized housing	36%	53%	70%	0.16 (1.412)*	0.33 (3.15)*	0.17 (3.18)*
H3: Single family homes with variety of price points and sizes	39%	44%	73%	0.05 (0.44)	0.34 (3.34)*	0.29 (5.41)***
H4: Intergenerational housing (co-located near families or other age groups)	14%	16%	42%	0.03 (0.33)	0.29 (2.60)*	0.26 (5.11)***
H5: Segregated 55+ senior communities	48%	53%	74%	0.05 (0.44)	0.26 (2.56)*	0.21 (3.92)***

Table 27 (cont.)

Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
	H6: Assisted living	39%	61%	87%	0.22 (2.01)*	0.49 (6.19)*
H7: Nursing homes	39%	60%	78%	0.21 (1.89)*	0.39 (4.04)*	0.18 (3.48)**

Results from the built environment independent difference of means tests, as shown in Table 28, indicate a commonality of the level of policy action at the low and medium levels of policy action across all built environment policy types. There is a significant difference between the lowest and highest level categories and the medium and highest level categories across all built environment policy actions except for building codes that allow for universal design policy actions. Universal design building codes are important to all three categories.

Table 28

Frequencies and Mean Differences Between Low, Medium, and High Built Environment Policy

Actions

Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
	Low	Medium	High	Diff between 1, 2 Mean diff/t/p	Diff between 1, 3 Mean diff/t/p	Diff between 2, 3 Mean diff/t/p
B1: More permitted mixed use development	44%	61%	80%	0.14 (1.58)	0.37 (3.93)***	0.19 (3.79)***

(table continues)

Table 28 (cont.)

B2: Required sidewalks in new development	75%	82%	91%	0.07 (0.81)	0.15 (2.20)*	0.09 (2.19)*
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Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
B3: Permitted housing options for older adults near transit stops	28%	24%	47%	-0.03 (0.26)	0.19 (1.18)	0.22 (4.10)***
B4: Permitted housing options for older adults near shopping and recreation	44%	38%	71%	-0.06 (.532)	0.27 (2.61)*	0.33 (6.13)***
B5: Accessible parks and open space	88%	88%	96%	0.01 (0.01)	0.09 (1.83)*	0.09 (2.84)*
B6: Building codes that allow for universal design	53%	48%	67%	-0.05 (0.42)	0.15 (1.42)	0.19 (3.56)***

The services policy action types as shown in Table 29 offer a similar pattern showing that frontier cities have higher frequency levels for less common local government services, S4 and S5, meals and nutrition, and lifelong learning opportunities. Overall, findings suggest that frontier cities have higher frequency level of support for common and advanced policy types.

Table 29

Frequencies and Mean Differences Between Low, Medium, and High Public Services Policy

Actions

Policy Action Types	Percentage of Action within Groups			Findings from independent t-tests for means between groups		
	Low	Medium	High	Diff between 1, 2 Mean diff/t/p	Diff between 1, 3 Mean diff/t/p	Diff between 2, 3 Mean diff/t/p
S1: Joint programming with parks and recreation	50%	49%	66%	-0.02 (.143)	0.17 (1.59)	0.18 (3.32)**
S2: Health services (e.g. wellness, preventative care, etc.)	30%	41%	71%	0.14 (.955)	0.40 (3.94)***	0.29 (5.54)***
S3: Multigenerational recreation center with programs supporting all age groups	42%	49%	68%	0.08 (0.70)	0.27 (2.58)*	0.19 (3.48)**
S4: Meals and nutrition services	35%	60%	78%	0.26 (2.33)*	0.43 (4.54)***	0.18 (3.48)**
S5: Lifelong learning opportunities (e.g. workshops and training)	27%	54%	79%	0.26 (2.35)*	0.51 (5.42)***	0.25 (4.83)**

The correlation analysis of the variables used in the degree of age friendly policy adoption model are presented in Table 30. The theoretical argument for the degree of adoption follows the same determinates for policy action presented in the policy adoption model. The argument for degree of adoption emphasizes the relevance of bureaucratic responsiveness matched with mobilized citizen need. Essentially moving up in categories of adoption levels requires higher levels of both theoretical elements. Responsiveness, RSVP, and the total population of individuals aged 65 and over are significant and negatively correlated with lower

levels of policy actions ($r = -0.501, p < .001, r = -0.126., p < .01, r = -0.254, p < .01$, respectively).

These findings add to the argument above that lower level adopters are likely indicating support of policies that are part of their normal city operations and capital improvements. At the highest level of policy adopter, these same three variables, responsiveness index, RSVP, and log total population over age 65 are significant and have a positive and moderate correlation with higher levels of adoption ($r = 0.325, p < .01, r = 0.105., p < .05, r = 0.134, p < .01$, respectively).

Table 30

Correlation Analysis: Degree of Age Friendly Policy Actions (low=0-8; medium=9-15; high=16-25)

Degree of Policy Action	0-8 Policy Actions	9-15 Policy Actions	16-25 Policy Actions
Responsiveness Index	-0.501 ***	0.211 **	0.325 **
RSVP	-0.126 **	0.026	0.105 *
Log Total Pop 65 and Older	-0.254 **	0.121 **	0.134 **
HUD Sustainability	-0.017	0.029	0.009
Public Entrepreneur	-0.302 **	0.125 *	0.211**
Form Appointed	0.056	0.009	-0.101
Administrative Capacity	-0.195 **	0.044	0.169 **
GrandparentInHomePer1000 Log	0.008	-0.005	-0.002
Senior Center	-0.222 **	0.032	0.203 **
Log Revenue Per Capita	0.037	-0.084	-0.002
Log_HHIncome	0.017	-0.057	-0.001
Log_Density	-0.055	-0.082	0.128 *

Public entrepreneur, as shown in Table 30 above, is significant and has a moderate and negative correlation with lower levels of policy actions ($r = -0.302, p < .01$). The public policy

entrepreneur is not correlated with a city facilitating common age friendly policy types. At medium and higher levels of adoption public entrepreneur is significant and has a low to moderate correlation with medium and higher levels of facilitated age friendly policy actions ($r = 0.125, p < .05$; $r = 0.211, p < .01$). Additionally, as mentioned above, municipalities that fall into the category of higher levels of policy adoption are correlated with administrative capacity ($r = 0.169, p < .01$). Finally, previous investment in a senior center is positively associated with higher levels of age friendly policy action ($r = 0.203, p < .01$).

An ordinal regression equation examines the degree that a city may fall into the categories of low, medium, and high compared to other cities. The variables that make up the ordinal regression equation support the theoretical model of this research (Chapter 4). As shown in Table 31, the predictor variables, responsiveness index, RSVP, log total population aged 65 and over, public entrepreneurship, and senior center are statistically significant.

Table 31

Ordinal Regression Policy Adoption (Low: 0-8), (Medium:9-15), (High (Frontier City): (16-25)

Variables	Coef	Wald	Exp_B
[TotalPolicy_Low = 1.00]	2.16	0.25	8.71
[TotalPolicy_Medium = 2.00]	4.83	1.21	125.82
ResponsivenessIndex	0.89***	34.32	2.43
RSVP	0.01 *	3.38	1.01
Log10_Total_65_older	1.23 *	6.25	3.43
Log_GrandparentPer1000	0.15	0.64	1.16
Log_Revenue_Capita	0.16	0.32	1.17
Log10_HHINCOME	-0.62	0.64	0.54
Log_Density	0.03	0.03	1.03
[PE_HUD=0]	-0.11	0.17	0.89
[PE_HUD=1]	0		1.01
[Public_entr=.00]	-0.83 **	8.49	0.44
[Public_entr=1.00]	0		1.01
[Form_Appointed=.00]	-0.13	0.28	0.88
[Form_Appointed=1.00]	0		1.01
[Q23=1]	0.36	0.19	1.42
[Q23=2]	0.39	0.29	1.48
[Q23=3]	0		1.01
[SeniorCenter=.00]	-1.12 ***	15.83	0.33
[SeniorCenter=1.00]	0		1.01
*p < .05, ***p < .01, ****p < .001			

Reference group = 3

n= 331

It was predicted that an increase in the responsiveness index would increase the odds of a city falling into a category of a higher level of total policy action ($\beta=0.89$, $p<.000$). Holding all other variables constant, the predicted odds of a city falling into a higher level of total policy actions (scale 1-3, low, medium, and high) increases by 2.46 times with each unit increase of bureaucratic responsiveness (scale 1-5), holding all other variables. The cumulative probabilities

of falling into a level of adoption at low, medium, and high policy action levels based on a low or high level of bureaucratic responsiveness are shown in Table 32. There is a 72% probability of a city falling into the category of low policy action with there is low responsive holding everything else at the mean. The likelihood being in the categories of medium and high are reduced to 27% and 1%, respectively, when responsiveness is low. There is only a 28% chance of being in the category of low policy action and a 71% chance of moving to the category of medium action when responsive is high, holding all other variables at their mean. The categories of low and high responsiveness reflect one standard deviation below and above the mean for the responsiveness index (scale 1-5).

Table 32

Cumulative Probabilities of Falling into a Level of Low, Medium, and High Policy Action Levels based on Low or High Levels of Bureaucratic Responsiveness

	Level of Policy Action		
	Low	Medium	High
Responsiveness (Low)	0.71	0.27	0.02
Responsiveness (High)	0.29	0.71	0.01

* Low (1 std dev below mean) High (1 std dev above mean)

Further, relative to bureaucratic responsiveness theory, an increase in mobilized citizen need increases the odds of a city falling into a category of a higher level of total age friendly policy action. The two proxies used to examine the relationship between mobilized citizen need and policy action, as shown above in Table 31, include total RSVP volunteers, and the log total

population 65 and over. Holding all else constant, the predicted odds of a city falling into a category of a higher level of total policy action (scale 1-3, low, medium, and high) increases by 1.001 times with each one-unit increase in the total number of RSVP volunteers ($\beta=0.01$, $\rho<.05$). Further, the predicted odds of falling into a higher category of a higher level of total policy action (scale 1-3, low, medium, and high) increases by 3.43 times with each unit increase in the log total population of individuals aged 65 and over. This evidence suggests that a sheer concentration of a demographic is enough to push a municipality to make policy adjustments in response to their needs.

Table 33, shows the cumulative probabilities of falling into the low, medium, and high policy action levels relative low and high mobilized citizen need. Here, log total population 65 and over serves as the proxy for mobilized citizen need. There is almost a 60% chance of falling into the category of low responsive when mobilized citizen need is low, holding all other variables at their mean. The likelihood of being in the category of medium or high policy action level with low mobilized citizen need is reduced to 34% and 5%, respectively, when mobilized citizen need is low. There is only a 40% chance of being in the category of low policy action, and a 48% and 11% chance of moving in to the category of medium and high levels of policy action, respectively, when mobilized citizen need is high, holding all other variables at their mean.

Table 33

Cumulative Probabilities of Falling into a Level of Low, Medium, and High Policy Action Levels based on Low or High Levels of Mobilized Citizen Need

	Level of Policy Action		
	Low	Medium	High
Mobilized Citizen Need (Low)*	0.60	0.36	0.06
Mobilized Citizen Need (High)*	0.40	0.49	0.19

* Low (1 std dev below mean) High (1 std dev above mean)

Municipalities are governments closest to the people and where citizens are typically able to communicate their needs. This research argues that local cities respond through age friendly policy adoption but are more likely to do so with the financial support of national governments. The theoretical model argues that intergovernmental support moves cities to higher degrees of policy adoption. The results of the ordinal regression do not support this hypothesis. Municipal access to national funding for age friendly policy action tends to be irrelevant.

One sub-theory of responsiveness, public entrepreneurship, as shown above in Table 30, is supported. The coefficient for public entrepreneurship is negative and significant ($\beta = -0.83, p < .01$) (See Table 31 above). Holding all else equal, the predicted odds of falling into a higher category of a higher level of total policy action (scale 1-3, low, medium, and high) decreases with the likelihood of a city indicating that they adopted age friendly policies based on the advocacy of a local public policy champion. It is likely that the public policy champion is necessary to get a city to venture into a commitment in becoming an age friendly city taking

early action with lower levels of policy adoption but is not necessary to move into higher levels of adoption. It is likely that responsiveness as a public value creates a cultural awareness that supports advanced policy action whereas the public policy entrepreneur is vital to a city taking initial steps in this policy arena. As shown and discussed above in the cross-tabulation results, lower level adopters are acting in policy areas already consistent with normal municipal operations and service delivery. Moving to advanced policy types requires a cultural awareness of aging integrated into bureaucratic values and thus into city management principles.

Finally, the control variable of senior center is negative and significant ($\beta=-1.12, p<.001$). Holding all else equal, the predicted odds of falling into a higher category of a higher level of total policy action (scale 1-3, low, medium, and high) decreases with the likelihood of a municipality indicating they have already invested in age friendly policy action. Findings suggest that initial investments bring awareness from senior center activities of the needs older adults, this awareness is not enough to push municipalities to adopt elite age friendly policies that advance them to higher levels of adoption. These findings are consistent with the descriptive and frequency results presented above in the first section that indicate a majority of support for senior centers across all respondents and policy action levels (low, medium, and high). Senior centers are typically responsive to the needs of the individuals served because they offer a direct opportunity for individuals to express their needs to city staff. Slowness in senior center evolution with innovative programming at a broad scale (Pardasani & Thompson, 2012) to meet the progressive needs of today's boomer cohort may be the barrier in pushing cities with senior centers to a higher level of policy action. Evidence suggests that a municipal having a senior

center does not necessarily mean a municipality is working toward becoming age friendly through comprehensive policy action.

In sum, model findings illustrate that certain factors are important to cities stepping out as frontier cities (highest level of adopters) of age friendly policy action. Some factors inhibit this advancement toward action on more elite policies such as the leadership of a public entrepreneur and having already invested in a senior center. This is discussed in more detail in the next chapter. The next section examines whether cities differentiate between transportation, housing, the built environment, and services when facilitating age friendly policy actions.

Conceptual Distinction Models

The third research question for this dissertation asks, what influences cities to differentiate among age friendly policy choices? This question surfaces relative to the four age friendly policy domains of transportation, housing, the built environment, and services and the extent that one domain is more important to a municipality than another one. The arguments for age friendly policy adoption suggest that cities work toward comprehensive adoption in all the domains of age friendly presented in the first chapter in Table 1. Theoretical arguments for each policy action type may provide a fuller explanation of the determinants that affect a local government's preferred policy choice. These were presented earlier in Chapter 4. The multiple linear regression model analyses as shown in Table 34 provides a fuller explanation of the political motivations driving the differentiation in policy adoption.

Table 34

Multiple Linear Regression: Total Age Friendly Actions: Transportation, Housing, Built Environment, Services n=331, Estimate, (S.E.)

	Model 3 - Transportation	Model 4 - Housing	Model 5 - Built Environment	Model 6 - Services
Intercept	2.75 (2.92)	6.11 (3.722)	-4.06 (2.86)	-2.50 (2.57)
Responsiveness Index	0.55 (0.10) ***	0.65 (0.13) **	0.49 (0.09) ***	0.58 (0.09) ***
RSVP	0.31 (0.01) **	-0.30 (.01)	0.02 (0.01)	0.04 (0.01)
Log Total Pop 65 Older	0.50 (0.33)*	0.22 (0.42)	0.41 (0.32)	0.68 (0.29) *
HUD Sustainability	-0.48 (0.19) *	0.22 (0.24)	0.26 (0.18)	-0.15 (0.16)
Public Entrepreneur	0.49 (0.19) *	0.43 (0.25) *	0.12 (0.19)	0.32 (0.17)*
Form of Gov_Appointed	-0.06 (0.17)	-0.23 (0.22)	0.04 (0.17)	-0.15 (0.15)
Administrative Capacity	0.16 (0.19)	-0.19 (0.24)	0.25 (0.19)	0.12 (0.17)
GrandparentInHomePer1000 Log	0.39 (0.26)	0.42 (0.07)	-0.10 (0.25)	0.29 (0.23)
SeniorCenter	0.43 (0.20) ***	1.04 (0.26) ***	-0.06 (0.20)	1.05 (0.18) ***
Log Revenue Per Capita	0.01 (0.19)	-0.41 (0.25)	0.22 (0.19)	-0.26 (0.17)
Log HHIncome	-0.51 (0.54)	-1.51 (0.69)	0.51 (0.53)	-0.06 (0.48)
Log Density	-0.20 (0.31)	0.23 (0.39)	0.45 (0.31)	0.33 (0.24)
R	0.66	0.46	0.47	0.62

*p < .05, ***p < .01, ***p < .001

Model 3 presents the liner regression findings for the mobility (transportation) policy adoption model. When examining the predictor variables, responsiveness index, RSVP, log total population 65 and over, HUD Sustainability, Public Entrepreneur, and Senior Center are significant. The variables in this model explain mobility policy adoption. The theoretical argument in Chapter 4 suggested that municipalities may be more favorable to facilitating action in the domain of mobility policy adoption due to the spillover effect of these types of policy choices. For instance, policy option T5, pedestrian crossings, or T6, highly visible traffic

signals and signage, offer benefits to pedestrians and drivers of all ages. Further, these practical policy types may already be consistent with everyday municipal public works operations as shown in the previous section.

Mobility projects have broad community impact but are also high cost projects to municipal governments. Therefore, as Hypothesis 8 states, higher levels of intergovernmental resources as a component of municipal budgets increase the likelihood of local government facilitation age friendly transportation policy actions. The results for the intergovernmental resources proxy, HUD Sustainability, in Model 3, do not support this hypothesis. In fact, the results are significant and negative, the direction opposite of the hypothesis. The findings indicate that of municipalities falling in the category of being associated with a HUD Sustainability grant results in a decrease in the facilitation of mobility policy actions ($\beta=-0.48, p<.05$). HUD Sustainability Partnership Grants fund planning and policy identification and are not funds for direct project implementation.

This variable was used in lieu of a direct dollar amount of intergovernmental resources reflected in a municipal budget sheet. Intergovernmental funds are not directly earmarked for aging and may not actually measure action related to age friendly policy adoption. HUD The HUD Sustainability Grant is intended to serve as proxy for federal motivators influencing municipal action toward mobility policy adoption. The finding in the opposite direction may suggest that cities take HUD up on the sustainability planning but the planning is not enough to push those cities into allocating resources toward implementation. Further, this evidence may also suggest that cities that partake in the collaborative planning, a requirement of the HUD Sustainability grant, may lose the advancement of their local priorities to a regional agenda. It

may also be questionable how much mayors and city managers know about HUD. Housing may not be considered a local priority of the municipality itself as many times affordable housing is led through a local housing authority. The correlation between HUD Sustainability and the Log total population 65 and over is significant and positive but also a weak association ($r = 0.19, p < .05$). Municipalities have other apparatuses to look at housing.

Model 3 does provide evidence supporting the main theory of this research, responsiveness theory, and its sub-theory of public entrepreneurship. Findings suggest that bureaucratic values of responsiveness are important factors influencing mobility policy actions ($\beta=0.55, p<.001$). A one-unit increase in the bureaucratic responsiveness index (scale 1-5) increases mobility policy actions by 0.55 actions. The coefficients of mobilized citizen need presented by both variables RSVP, and total population over 65 are positive and significant in Model 3. Holding all other values equal, a one-unit increase in the number of RSVP members serving the community increases the total number of mobility policy actions by 0.31 actions ($\beta=.031, p<.01$). The impact of the relationship between the log total population aged 65 and total facilitated mobility policy actions is slightly higher, all else being equal ($\beta=0.50, p<.05$). The coefficient for log population suggests municipals will take on more policy actions for every 3.18 residents aged 65 and over. Findings provide empirical support for responsiveness theory's element that a bureaucratic value of a responsibility toward the needs of older adults congruent with mobilized citizen need.

The results also show support for the theoretical model element public entrepreneurship. Cities that indicated their support for age friendly policy adoption based on a need identified by a local public policy champion were associated with higher levels of mobility

policy action, all else held constant ($\beta=.049, p<.05$). Professionalism, the second element of the public entrepreneurship model is not significant and is in the direction opposite of what was hypothesized. These results are consistent with the Model 1, policy adoption model. Even though the results are not relevant to adoption of mobility policy action, they point toward an opportunity for education of municipal managers on this policy issue area.

This research also controls for prior allocation of resources to serve older adults by controlling for municipal investment in senior centers. As argued earlier, the presence of a senior center in a municipality serves as a proxy of long-term investments in senior programming pre-age friendly policy initiatives. The coefficient is positive and significant ($\beta=0.43, p<.001$). Having a senior center is associated with having higher levels facilitated mobility policy actions, holding all else equal. In sum, the findings suggest that mobilized need examined objectively through RSVP, and subjectively inferred through the existence of a senior center as a representation of long-term investment in aging services is important to overall municipal facilitated mobility (transportation) policy action.

Model 4 illustrates the findings of total housing policy action regressed on certain influencing factors. Housing options as they apply to age friendly policy adoption suggest that a community offers a diversity of housing types across price points, size, and product types. Independence for older adults as it applies to age friendly is realized through equitable policy treatment of individual access to housing options as an individual's ages and their needs change. The variables in the theoretical model account for 46% of the variance in the model.

Previous research suggests that local governments may be less likely to support housing options due to political pressure by homeowners to block higher density housing and rental or subsidized housing products. The theoretical argument presented in this dissertation research is that higher levels of household income decrease the likelihood of municipal facilitation of age friendly housing policy actions. The argument suggests that among the four policy domains, levels of household income may negatively influence housing policy actions in communities. The results do not support this hypothesis. Findings indicate that household income is not relevant to housing policy actions. However, the coefficient at $\beta=-1.51$ has some power in the overall model and it is negative.

The results also provide support for the main theory of this research. Responsiveness matters to municipal facilitated housing policy action. A one-unit increase in the responsiveness index (scale 1-5) increases adoption of total housing policy actions by 0.65 actions, holding all else equal ($\beta=0.65, p<.01$). However, both proxies for mobilized citizen were not significant suggesting a stronger importance of bureaucratic values toward the needs of citizens rather than responding to their direct input or advocacy on diversified housing options. Public entrepreneurship, a sub-theory supporting responsiveness theory is positive and significant, holding all else equal ($\beta=0.43, p<.05$). Logan and Molotch (2007) provide an economic argument for housing development suggesting this policy action provides exchange value. Findings from both bureaucratic responsiveness and public entrepreneurship provide support for an argument that decisions on housing may have more to do with economic development agendas rather than citizen need. A mayor may take the lead to recognize housing as a determinant to the independence and quality of life of older adults in their community, but the

responsibility for housing development lies with either another authority or private developer relative to market demand. These findings inform on the opportunities for future research related to the role of local housing authorities in age friendly housing action.

Similarly, to the findings in Model 3, municipal provision of senior center is also positive and significant, holding all else equal ($\beta=1.04, p<.001$). The findings suggest that the direct contact older adults have with the municipality through the senior center activities they may be more directly aware of their housing needs as their individual personal needs change.

Model 5 shows the linear relationship between a theoretical model of bureaucratic responsiveness and housing policy actions. The concept of built environment is explained as the physical environment of the community including the connection between land use and transportation planning and development. A municipality's built environment is the physical representation of the municipal zoning code and the goals and objectives of the comprehensive plan. Comprehensive plan and zoning development reflects the efforts of planning suggesting the influence of both bureaucratic values of responsibility of public administrators to respond to the needs of their citizens and the voice of the citizenry. The primary theoretical argument of this research, responsiveness theory, is the primary argument for the factors influencing municipal facilitation of built environment policy actions.

The results provide evidence of a positive and significant relationship between an increase in bureaucratic values of responsiveness and higher levels of municipal support for built environment policy actions, holding all else equal ($\beta=0.48, p<.001$). The variables in the model explain only 46% of the variance of municipal facilitation of built environment policy actions. However, responsiveness is the only determinate of the model significantly

associated with built environment policy action. This finding only supports one aspect of the two-part model of responsiveness theory. Here, mobilized citizen voice is not relevant. This finding surfaces the issue that built environment and planning do not produce short-term tangible results presenting the point that citizens may not recognize the direct role they have in influencing community design policy.

The variable for professionalism is positive and not significant, whereas this same variable is negative in models 3, 4 and 6. This lends some support for an argument that bureaucratic values of responsiveness without mobilized citizen need reflect leadership by the manager in leading plan development which ultimately influences the built environment through implementation of the cities goals and objectives.

Model 6 provides evidence that the provision of public services is a standard part of a local government operations. The argument for this dissertation is that municipalities may offer public services that fall within the realm of age friendly policy adoption relative to the other domains because services translate to a tangible output in response to citizen need. Municipalities find themselves having to balancing the provision of services relative to the demographics they serve. The evidence presented in Model 6 suggests that cities shift policy priorities to align with the demographics they serve. The variables in Model 6 account for 62% of the variance in total municipal facilitation of services policy action. The predictor variables, responsiveness index, log total population aged 65 and over, public entrepreneurship, and senior center are significant.

The theoretical argument explaining the actions municipalities stems from the pressure citizens place on local governments to respond to their needs. The hypothesis states that higher

levels of citizen need increase the likelihood of local government facilitation of age friendly services. The coefficient for total log population aged 65 and over is positive and significant ($\beta=0.68, p<.05$). Holding all else constant, a one-unit increase in the log total population aged 65 increases adoption of the total number of municipal facilitated services policy actions by 0.68 actions. This finding is also supported by the second element of responsiveness theory with evidence supporting a positive and significant relationship between an increase in the level of bureaucratic values of responsiveness toward older adults and an increase in total government services policy actions directly aimed at supporting the needs of older adults ($\beta=.058, p<.001$). Findings illustrate the important congruence between a value of responsibility toward older adults held by the local government and their mobilized citizen voice.

The second element of this research's theoretical model, intergovernmentalism, is not significant. Findings of irrelevance provide support for local government's role in directly responding to the needs of older adults and new positions on federalism. As discussed in Chapter 2, significant reductions in federal funding for many policy issues has resulted in subnational governments going it alone to address the needs of their residents. The evidence shown in Model 6 shows local government response to age friendly policy services action. The lack of federal funding evidence further demonstrates the role of municipal leadership to know more intimately what their citizens need relative to their quality of life and ultimately respond to needs through policy action.

Public entrepreneurship, the third element of this research's theoretical model, is supported. The findings provide evidence that the presence of a local public policy entrepreneur is associated with higher levels of municipal facilitated services policy action

($\beta=0.32, p<.05$). The provision of services equates to a tangible response to response to constituents. The local public entrepreneur may advocate for certain services to improve the local governments bundle of services offered to constituents. This research only suggests this as one way of considering the political actions of a public policy entrepreneur.

Finally, Model 6 also provides evidence that municipal governments that have already invested in senior center action are associated with the facilitation of other public services important to older adults. Respondents provided feedback on the provision of services related to joint programming with parks and recreation, health services, multi-generational activities, meals and nutrition services, and lifelong learning opportunities. As argued earlier, the provision of a senior center controls for previous investments that municipal governments have already made to support older adults in their communities. The coefficient for having a senior center is positive and significant ($\beta=1.05, p<.001$). The power of this coefficient suggests it has an important contribution to the overall model and provides evidence that having a senior center matters to municipal facilitation of other public service actions, holding all else equal.

Comparisons across models surfaces the variation in political reasons driving the differentiation of municipal selection of policy actions. The responsiveness index is positive and significant across all four models of transportation, housing, the built environment, and services policy actions. RSVP is positive and significant but only for the transportation model. The evidence of RSVP relative to its influence of total municipal transportation actions suggests that the advocacy of a mobilized group is enough to raise awareness of specific transportation and mobility needs of older adults. Mobilized advocacy raises attention to a specific concern or urgent social need (Frumkin, 2009). Transportation projects tend to have spillover effects

whereas cities are more likely to allocate resources to them because they have benefits that crossover into other groups.

Log total population aged 65 and over is positive and significant for both the transportation and the services policy action models. The services offered tend to reflect the bundle of service preferences of the community. Transportation policy actions and services policy actions produce tangible benefits for citizens. The propensity for a city to have a large population aged 65 and older may result in a city facilitating policy actions that directly benefit the citizenry as tangible actions. Evidence suggests that higher levels of individuals aged 65 and older support these age friendly policy choice behaviors demonstrating that a demographic group has capacity through numbers to influence municipal policy adjustments.

HUD Sustainability is only significant in the transportation policy actions model, model 3. The HUD grant program requires attention to collaborative and sustainable planning which is surprising that it is not influencing the adoption of housing and built environment policy actions. Multi-level governance is a process of national governments influencing subnational governments to make local policy changes that support a national agenda. These findings tend to suggest that a national agenda for age friendly policy action may not exist. Cities may not see the federal government influencing their local policy actions to help older adults remain independent in their community. Broad scale change for aging in place rests primarily with local governments. Planning may not be enough to push cities toward implementation of age friendly policy actions. Findings also suggest that a city's participation in the collaborative HUD grant may surrender their local policy priorities for advancement of a regional agenda. Finally,

as mentioned previously, cities have multiple apparatuses to advance housing development and may not see themselves as a lead agent in this policy arena.

Local public policy entrepreneurship is positive and significant in Model 3, transportation, Model 4, housing, and Model 6, services. Public policy entrepreneurs navigate the cost and benefits of supporting different policy issue agendas. It is assumed they take calculative risks to advance policy issues on to the agenda. As mentioned above, transportation and service policy actions tend to have tangible benefits to users where the entrepreneur can credit claim for bringing needed services to citizens. The concept of exchange value suggesting entrepreneurs work to ensure community has preferred bundle of services demanded by citizens (Logan & Molotch, 2007; Schneider et al., 2011). Public entrepreneurship and its influence on housing policy actions may relate more directly to exchange value as discussed above relative to the community's overall economic development goals versus age friendly goals. Public entrepreneurship is supported by both responsiveness and mobilized citizen need in Models 3 and 6 suggesting the public policy entrepreneur is acting on the support of a mobilized force of advocates for policies friendly toward older adults.

Senior center is positive and significant in the transportation, housing, and services policy action models. Similar to the two proxies of citizen demand, RSVP, and total population 65 and over, senior centers provide citizens with a direct voice to city staff. Senior centers are typically found to be responsive to its citizen users providing support for the argument of this dissertation research that they provide an opportunity to make voice their needs. Transportation and services policy actions result in tangible actions for constituents. Housing is not an immediate output of housing policy and planning, but action on the part of

the municipality may lead to large scale, and long-term change ultimately producing housing options.

CHAPTER 7

THEORETICAL CONTRIBUTION

Introduction

This chapter presents the theoretical contributions of this research. This dissertation asks five questions. What is the role of local governments in age friendly policy action? What are local government perceptions of age friendly policy action? To what extent do cities adopt age friendly policies? Why do some cities take more age friendly policy actions than others? And why do cities differentiate among policy choices (transportation, housing, built environment and services)? The theoretical framework suggested bureaucratic responsiveness theory and the sub-theories of multi-level governance and public entrepreneurship influence the magnitude that local governments respond to the needs of a growing population of individuals aged 65 and over. The research juxtaposed a cultural model against the medical model arguing that the policy actions of cities may support cultural outcomes of aging as independence and community. Scholars do continue to find evidence of a medical model of aging policy (Aka, Deason, & Hammond, 2011; Campbell and Morgan, 2005; and Bolda, Lowe, Maddox, & Patnaik, 2005). Findings suggest federal policy as a funding provision incentivizes a medical response to aging. As shown in Figure 4, the policy outcomes produced a forced choice for the older adults resulting hospitalization or long-term care.

The evidence of my dissertation research, as shown in Figure 4, illustrates theoretical advancement providing support for a cultural model of aging. Cities are adopting aging policies based on the influence of multiple drivers. The evidence points to a comprehensive approach. The cultural model includes multiple factors including bureaucratic responsiveness reflected in

the management values of the administration. Findings show variation in the integration of a cultural awareness of aging in the municipality's needs assessment, strategic goals, citizen engagement strategies, and budgetary principles. Findings also provide support for the argument that the public administrator is not the driving sole factor in decision making. A shared space with mobilized citizen need of individuals 65 and over is identified. Moreover, where previous literature on age friendly adoption provided evidence on the positive effects of a public entrepreneur (Lehning, 2012), this research also supports this finding but goes on to show that impact is not a result of one single public champion. A cultural model includes others in the policy making process.

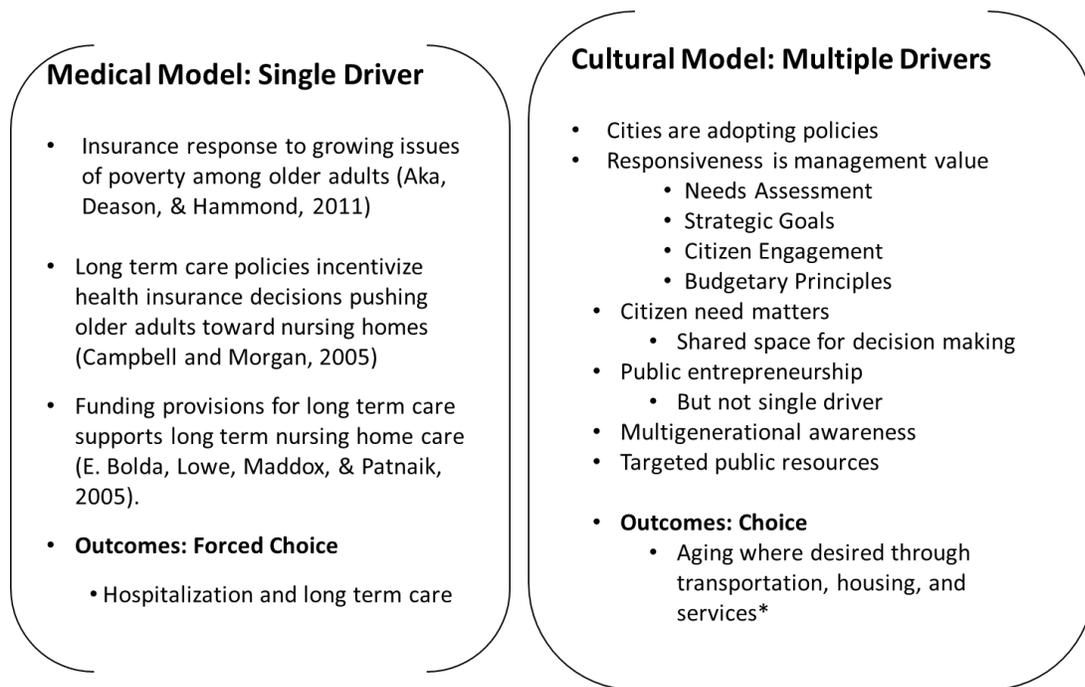


Figure 4. Theoretical advancement of age friendly policy action.

My research also suggests a cultural model includes multigenerational awareness and targeted public resources. These findings advance our understanding of city adoption of age friendly policies through the lens of a municipality's commitment to sustainability across all age groups. My research measured sustainability across age groups through the proxy of multi-generational households. Previous research has found higher levels of support among surveyed local governments that keeping individuals of all ages and abilities has economic benefits for the community (Choi & Warner, 2015). The findings of my research support this argument when considering the overall extent of adoption. Further, the control for previous targeted resource allocation, measured through the proxy of senior center, was relevant across all tested models. The findings suggest that cities that demonstrate prior support to elderly residents through senior centers adopt more age friendly policies. Senior citizen participation in senior centers provides direct access to city staff providing a point of entry to make citizen needs known to their government. The historical support for elder services also demonstrates an awareness of certain needs of this demographic group. The policy outcomes result in choice for the individual to age where desired through access to transportation, housing, and services.

The original theoretical model argued that multi-level governance through intergovernmental support from the federal government would result in higher levels of policy action. The findings did not support this argument. As argued above, the medical model is driven primarily by federal funding policy. My research found multi-level governance to be irrelevant in all models except transportation policy action. In this one instance, multilevel governance was significant, but the finding was in the opposite direction of the hypothesis. Here, federal policy creates barriers to the attainment of local goals for age friendly policy

action. The absence of federal policy as a factor in the cultural model is further evidence of a differentiation between the medical and cultural model. The medical model is federally driven, and the cultural model is locally driven.

The findings of this research provide theoretical insight on the age friendly policies identified as the obligation of cities and that comprise the cultural model. Previous scholars have examined age friendly in the context of the provision of all elder services in a community and provide evidence that cities rely on other providers for some services (Warner et al., 2016). My dissertation research confirms the most direct role for cities in response to the needs of a growing older adult population is through support of transportation, housing, built environment, and service policy arenas.

An important finding is that only bureaucratic responsiveness is relevant to built environment policy actions. Based on the theoretical aspects of the cultural model, the built environment policy type essentially falls out of the cultural model. This is interesting because the built environment policy action is always lumped into the age friendly categories and is the element of the age friendly cities initiative that leads to the physical transformation of place. However, from a theory to practice standpoint, the approach to informing policy actions is clearly not the same for advancing built environment policy actions as it is for advancing policy action in the areas of transportation, housing, and services. Reasons for this outcome may be multifaceted. It is possible that citizens do not see themselves as part of this planning aspect or that these findings are shedding some light on the bias of some planning approaches as being top down rather than a deliberative approach toward actionable agreement (Fainstein, 2000).

The following discussion elaborates on some of the key findings presented above expanding on the assumptions associated with the three different model areas.

Theoretical Contributions

Extent of Adoption

We know local governments are adopting policies to support the needs of a growing older adult population. The results of this model present the influencing factors explaining the conditions in which age friendly policy adoption occurs. This study advances knowledge about responsiveness theory through conceptual development and empirical analysis of a bureaucratic attitude to be responsive to the needs of individuals aged 65 and over, and mobilized citizen need. Further, it advances what we know about age friendly policy adoption providing evidence on levels of policy adoption as well as the differentiation of policy choices by municipalities.

First, the dissertation research findings provide causal evidence of the power that both elements of responsiveness theory, a responsibility to know what citizen need and the capacity to match the response with demand, have on total facilitated policy actions. Others have provided evidence to inform on theory of responsiveness (Benavides, 2008; Bryer & Cooper, 2007; Yang & Pandey, 2007). The findings from this dissertation research contribute by adding empirical evidence of a theory of responsiveness through the examination the cohort of individuals aged 65 and over. Further, a primary contribution are the empirical findings of this study's replication of Yang's and Pandey's (2007) survey constructs measuring a general attitude and philosophy of public managers to be responsive to the public they serve. The concept for this research of responsiveness was modified to capture the respondent's attitude toward meeting the needs of individuals aged 65 and over.

Second, this study supports responsiveness theory's argument relative to mobilized citizen need through the causal relationship of two objective variables, total population aged 65 and over, and RSVP, with total facilitated municipal policy actions. Both measures provide empirical evidence supporting Benavides's (2008) argument that a sheer population of a certain demographic can influence the adjustment of local government policy actions relative to the pressures of that group. Findings provide evidence of the causal relationship between the total number of individuals aged 65 and over and total facilitated policy actions. Similar to Benavides (2008), population growth serves as a key indicator of growth of a segment of the population. Neshova and Guo (2016) find inclusion of target groups influence policy decisions. They go on to suggest a connection between engagement and extent engagement legitimizes bureaucracy and constituency support for public policy issues.

RSVP is a federally funded program allocating resources to communities for the recruitment of volunteers aged 65 and older to advocate the needs of individuals 65 and over. This variable provides evidence of the influence of a nonprofit's ability to bring groups and individuals together to stimulate political interest in a public policy issue and community concern (Frumkin, 2009). Having a senior center further emphasizes the influence of direct contact between citizens and municipal staff. It adds credibility to an argument of cultural awareness of aging policy and the needs of older adults.

Benavides (2008) shows that local governments will initiate best practice programs and adjust policy actions relative to pressures of a demographic in a changing community. Cities alter programs and services to improve policy outcomes relative to best practice findings. The findings of this dissertation research go further to show empirically the effect on overall age friendly

policy actions by municipalities when responsibility towards to the age group of 65 and over becomes a cultural component of overall city management.

The integration of the needs of this demographic group into four core elements of management suggests bureaucratic values of responsiveness as cultural support of aging in the organizational structure and rules. Municipalities may create specific processes to better understand, capture, and respond to citizen need (Bryer & Cooper, 2007; W. F. West, 2004). The variable of responsiveness used in this dissertation research captures an aspect of administrative process and procedure relative to city management and individuals aged 65 and older reflecting citizen perceptions on city performance of needs assessments, strategic goals, citizen engagement, and budgetary principles. The findings show that municipalities may adjust procedurally to respond to the needs of an aging population.

From a case study design, Bryer and Cooper (2007) inform on the positive and negative feedback on administrative structure and process for citizens to collaborate on policy issues. They suggest that the context of the rules themselves may limit responsiveness but a formal structure for citizen input may foster engagement and feedback. Rules and structure may be more important to citizens knowing their needs are heard and there is a process for responding to them. Bureaucratic value may reflect purposive or deliberative responsiveness (Bryer, 2007) in taking actions relative to the influence for a specific group (Benavides, 2008) on processes, procedures, and actions establishing a cultural awareness of the needs of older adults. The responsiveness index informs on these connections between responsiveness, structure, process, procedure, and cultural awareness.

Third, the findings strengthen the contribution by showing that a theoretical model of responsiveness to explain age friendly policy action is supported by public policy entrepreneurship. Responsiveness is influenced by leadership and willingness to take risks for innovative solutions. The responsiveness argument is strengthened by the positive relationship of public policy entrepreneurs and policy action. Public policy entrepreneurs influence change and action within the organization. The correlation analysis in Chapter 6 supports this showing a moderate positive and significant association between the presence of a public policy entrepreneur identifying the needs for age friendly policy adoption and responsiveness index. The results lend credibility to a connection between leadership and a responsibility to be responsible to the needs of older adults.

Finally, the sub-theory of this model, intergovernmental, is only relevant in the transportation policy action model, Model 3. Further, it is in the direction opposite of the hypothesis. The HUD Sustainability Grant is intended to foster policy action toward sustainable community development, including creating communities that support all ages. The findings suggest that a national policy on aging does not influence local policy action toward age friendly policy actions. It goes on to suggest that collaborative planning may require local communities to sacrifice their goals and priorities for the advancement of regional goals. Policy action to support age friendly is driven primarily by local action and leadership, as supported with the evidence of this dissertation research, supporting the claim made in Chapter 1 that the national federal role in aging policy aligns with a medical model supported through long-term care and hospitalization. The cultural model becomes known through the findings of the local

governments' role in transportation, housing, built environment, and public services policy actions.

This dissertation research also contributes to the literature on policy adoption. First, it provides evidence supporting the local government's role in a culture model of aging. Findings show that municipalities do adopt age friendly policy actions under certain condition. Second, the research produces variables measuring age friendly policy action at low, medium, and high levels, and examines the differentiation of municipal policy choices. Previous research provides evidence of the extent of total age friendly policy action (Keyes & Benavides, 2017; Lehning, 2012; Warner et al., 2016). This dissertation confirms pervious findings and contributes with evidence on municipal policy action based on low, medium, and high levels of adoption. It goes on to identify common policies that align with everyday operations versus those that tend to be advanced and ultimately push cities into higher levels of adoption. It offers theoretical evidence on the differentiation of age friendly policy actions by municipalities.

Degree of Adoption

The evidence from the degrees of policy adoption model confirm what others have done and aligns with the literature (Keyes & Benavides, 2017; Lehning, 2012; Warner et al., 2016). This research goes further to classify age friendly policy actions into low, medium, and high adopters. It finds the bureaucratic responsiveness matched with mobilized citizen need is necessary to push cities to higher levels of adoption. In contrast to an economic argument for policy adoption (Peterson, 1981), it is not revenue per capita moving cities to take on higher levels of policy action. Rather, these policy actions are influenced by an integrated awareness of older adults into city management principles. A cultural awareness of aging is associated with

cities moving to higher levels of adoption. It is also associated with adoption of policies in all four domains identified in this research.

The lack of support for the intergovernmental sub-theory as a component of this dissertation's theoretical model calls into question whether national aging policy has any relevance on age friendly community development. Findings suggest that a cultural model of aging tends to grow up from the community through local government leadership and cultural awareness through bureaucratic values of a responsibility toward the needs of older adults. The responsiveness index serves as a criterion supporting these bureaucratic values providing support for Frederickson's (1980) argument of a moral obligation for public administrators to address the needs of the disadvantaged and marginalized. Recent advances in planning theory align with Frederickson arguing for planning decisions to be both communicative with the citizens producing fair results for a diverse community supported through criteria decision making (Fainstein, 2000). Integration of cultural awareness into the fundamentals that influence policy action. A cultural awareness of aging by local governments also supports this dissertation's research that a cultural model of aging is manifest in local governments. Age friendly policy action toward fostering independence and community develops through local government leadership.

The findings from the degree of action model also add to our understanding of the role of mobilized citizen need. Both proxies for mobilized citizen need, log total population aged 65 and over and RSVP, are relevant and significant to the probability of a city moving to higher levels of adoption. Public administration is moving in a new direction that engages citizens as equal partners in decision-making through deliberative participatory effort (Nabatchi, Gastil,

Weiksner, & Leighninger, 2012). Some scholars suggest participatory principles that call for government to engage citizens in reasoned discussion that balances sometimes conflicting public values (Bryson, Crosby, & Bloomberg, 2014). Stoker (2006) suggests traditional theory transferred public value responsibility to elected officials and public managers. The new era posited by Bryson et al. (2014) challenges preexisting paradigms. The authors suggest true public value is only determined through a deliberation between government and citizens. Deliberative democracy places citizens in an equal role of decision making (Nabatchi et al., 2012). Further, it increases diversity in decision making across traditional aspects of race, age and ethnicity, as well as pluralistic ways of thinking (Kahane, Loftson, Herriman, & Hardy, 2013; Nabatchi et al., 2012). These research findings are not intended to argue the concept of deliberative democracy. Deliberative democracy is one type of forum that realizes the congruence of bureaucratic value toward mobilized citizen need.

By focusing the congruence between bureaucratic values and mobilized citizen need, the results of the ordinal regression allow for the contribution of a 2 by 2 typology based on the extent that governments allocate resources to support a response friendly toward older adults, and the extent that governments foster participation and deliberate on appropriate needs with citizens. A 2 by 2 typology of demand and responsiveness helps us organize what we know about a congruence between the variation in mobilized citizen need and an attitude of responsiveness relative to levels of policy action. Citizen involvement may fall along a continuum expressiveness from silent and not mobilized on issues to highly mobilized in the form of special interest groups.

The 2 by 2 typology, as shown in Figure 5, attempts to capture the variation in levels of citizen need on the variations of bureaucratic responsiveness. Citizen need is organized based on membership in either a category of mobilized citizen need or not mobilized citizen need. Mobilized involvement suggests a coordinated advocacy effort by special interest groups and stakeholders in the issue area of aging with the involvement of local citizens. Not mobilized involvement suggests citizens are not collectively advocating on issues, but does not dismiss that citizens may individually contact their government with complaints or comments. Here, membership in the category of not mobilized, citizens may also represent the sheer fact that a community may have a high concentration of individuals over 65 years of age, who may be silent (though, based on an older age, needs still remain) or may not be collectively organized as an official association of a 65 and older interest group. A 2 by 2 typology provides a comparative analysis of the variation of citizen need against variation in responsiveness in the context of age friendly policy adoption. The purpose of the typology is to inform on how future research may consider this variation. As Figure 5 illustrates, relationships exist as mobilized by high responsiveness in the top right corner; not mobilized by high responsiveness in the bottom right corner; mobilized by low responsiveness as shown in the top left corner; and not mobilized by low responsiveness as shown in the bottom left corner. The scale of governmental responsiveness to citizen need informs on predicted effects of age friendly policy adoption by local governments as shown in Figure 6 presented and discussed later.

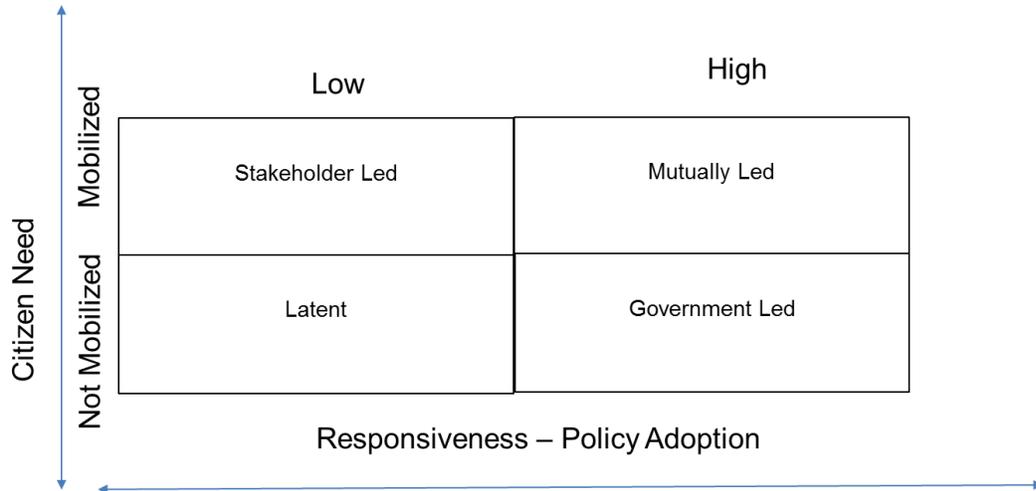


Figure 5. A 2 by 2 typology on the congruence between citizen need and bureaucratic response.

Mobilized citizen need by high responsiveness. Mutually led, as shown in the upper right of Figure 5, a match between mobilized citizen demand and high bureaucratic responsiveness illustrates the potential outcomes when citizen needs are championed by organized coordination of stakeholders and supported by municipal leadership. Here, joint effort of stakeholders and the local government translates into mobilized support for policy and allocation of public resources.

Sometimes citizen involvement is discussed in terms of special interest groups and organized participation, and sometimes citizens participate individually to express their needs. Citizens can get involved in multiple ways with their government to amplify their voice. For instance, older adults comprise an active segment in American civic engagement. Participation ranges from individual voice, and community, political and government sponsored programs.

Achenbaum (2006) indicates that there are approximately 500,000 older men and women serving in the federal government's Retired Senior Volunteer Program (RSVP). Individual groups such as these provide opportunities to connect citizens with the public administrative process (Vigoda, 2002). A homogenous group may also affect political activity and elected official support of issues (Clingermayer & Feiock, 2001), for instance, here, older adults.

Some scholars argue that deliberative consensus between citizens, stakeholders, and policy makers is necessary for the government to truly understand and know public value (Bryson et al., 2014; Nabatchi et al., 2012; Stoker, 2006). For instance, Bryson et al. (2014) argue that a new framework of public administration builds off Denhardt and Denhardt (2001) toward facilitating a collective vision. They argue that a new tradition of public administration is found in a flattened hierarchy where the citizen plays a more direct role in administration. The authors suggest that consensus on public value is consistent with the concept of serving citizens, not about productivity or entrepreneurialism.

The opportunity for building consensus may surface conflicting public values and allow for reconciliation of differences toward building greater support for policy outcomes. Nabatchi et al. (2012) suggest that deliberation may happen for different reasons including conflict resolution, and working toward a better understanding of complex and difficult problems. The authors argue that how people communicate in a process matters and design and participation rules should allow for a process that supports reasoned solution and allow for examination of strengths and weaknesses of issues and solutions. The goal of deliberation in this context is to build consensus between citizens and their government toward policy agreement (Nabatchi & Amsler, 2014). As shown in Figure 6, the predicted effect of organized citizen need and high

bureaucratic responsiveness results in comprehensive adoption of policies friendly toward older adults. This box represents the mutual efforts of citizens and bureaucrats to implement age friendly policy adoption.

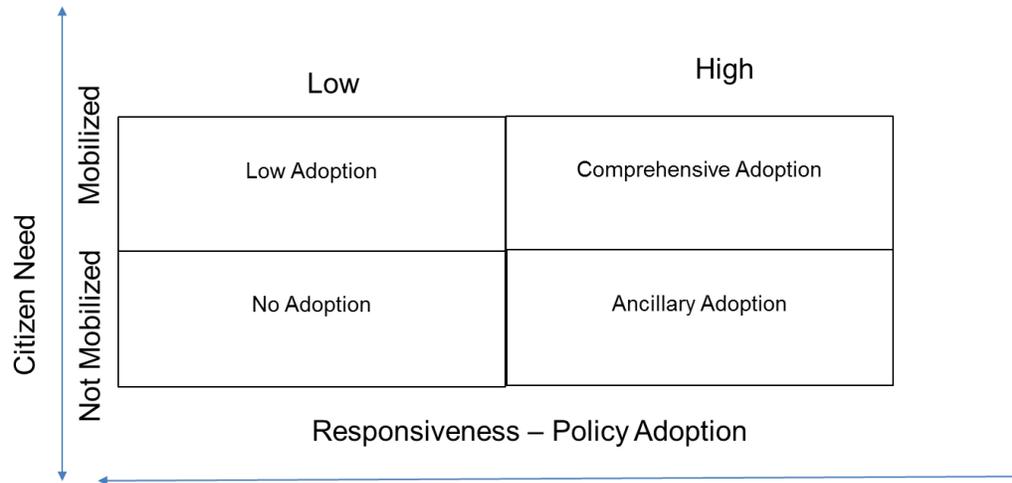


Figure 6. Predicted effects of the congruence between citizen need and bureaucratic response on age friendly policy adoption by local governments.

Not mobilized citizen need by high responsiveness. Conversely, government led, as shown in Figure 5 in the lower right corner, not mobilized demand matched with high bureaucratic responsiveness suggests, for example, the potential outcome of leadership by the elected official or professional manager reflected through policy adoption and allocation of public resources. Not mobilized demand does not suggest the absence of the presence of a high concentration of elderly in a community or individual citizen calls or contact with their government on issues relative to aging policy. It suggests that individual citizen may relay their

needs directly to their government. Further, annual strategic or comprehensive plans tend to inform local public administrators on current and forecasted demographic trends for their community surfacing a potential increase or change needed in existing public services. High responsiveness on the part of the part of the administrator suggests a proactive approach to seeking information from citizens relative to their needs and demands.

Democracy should represent equal participation but the range of public participation mechanisms used by the government may result in unequal representation (Barnes, 1999). For instance, John (2009) compares the association of individual social economic standards, age, income, being an ethnic minority, religion, being female, having no political qualifications with individual participation in citizen governance and individual participation in civic activities. He measures citizen governance as the direct or indirect participation in the coproduction of government goods and services. The author finds that a significant and positive association between an individual's participation in citizen governance with education and being religious. Conversely, he finds that individuals that self-identify with no political qualifications are less likely to participate in citizen governance. In other words, individuals with higher income and education levels, and having some pre-existing experience with their government are important factors to ongoing participation in citizen governance efforts. This has practical implications for older adults who may wish to express their needs but may not be actively engaged in participation opportunities with their local government making professional awareness critical. Further, John (2009) finds that beyond SES variables, being attached to one's neighborhood is a positive predictor for both citizen governance and an individual's participation in civic activities. Many older adults have lived in their community for decades and plan to remain there as they

age (Wiles et al., 2012) thus, the practical implications of these findings suggest that new mechanisms of engagement may be necessary to increase the engagement of underrepresented groups due to lower income and educational attainment levels.

With regards to public participation, some groups may have significant needs but remain silent on issues due to their disadvantaged situation. This dissertation expands this responsiveness theory to include the concept of representativeness. It argues that the values of local government may shift policy priorities to respond more directly with programs and services that align with the demographic backgrounds they represent (Krislov, 2012; Mosher, 1968). For example, MacDonald (2008) provides evidence that large concentrations of residents over 65 have a positive and significant effect on total government expenditures. In a case study assessment of one city's approach to examining citizen need for policies friendly toward older adults, Benavides and Keyes (2015) found evidence of the municipality's professional awareness of citizen needs. The authors found evidence of the city's use of tax records to target the residences of older adults living below the poverty line and using this information to select elderly residents for their annual volunteer assistance program for home repair and lawn maintenance. The authors found that a professional response is important to providing a voice to those that may not be able to come to the table. The predicted effects between unorganized citizen need and high bureaucratic responsiveness, as shown in Figure 6, result in ancillary adoption local government adoption of policies friendly toward older adults suggesting, for example, public managers are aware of needs and may rely on existing opportunities such as public works projects to address needs for pedestrian facilities and improved crosswalks.

Mobilized citizen need by low responsiveness. Stakeholder led, as shown in Figure 5, the upper left corner illustrates the potential outcomes of limited local government collaboration when organized citizen demand is matched with low bureaucratic responsiveness. For instance, the organized leadership of a local community's Area Agency on Aging or local chapter of AARP may coordinate support around age friendly policies, but does not have the integrated leadership and commitment by the local municipal leader. In this case, citizens may be aware of age friendly policies important to their community because of the leadership of special interest groups, but their local elected officials are not co-advocating for the commitment of resources. Garon et al. (2014) examined the policy outcomes through a case study design of community based model toward an age friendly city policy adoption based on only the strong presence of local community interest groups and no formal commitment from the local government. They found evidence that the local government participation decreased over time, and as financial resources from the national grant decreased, which funded initial community efforts, the local government did not replenish the project with any new resources. Here, as shown in Figure 6, the predicted effect of organized citizen need and low bureaucratic responsiveness decreases the likelihood of local government adoption of age friendly policies.

Not mobilized citizen need by low responsiveness. Finally, latent opportunity, as shown in Figure 5, low responsiveness indicates a lack of local government support or financial commitment. In the lower left corner, unorganized citizenry matched with low responsiveness suggests potential latent opportunities for a local government to respond to the needs of a growing older adult population. For instance, a demographic grouping, such the older adult population, may have prevalent interests (Sharp, Daley, & Lynch, 2010; Zahran, Grover, Brody,

& Vedlitz, 2008). Evidence suggests that as the concentration of older adults increases so does total local government expenditure, but this mature population wants programs and services that are likely different than younger residents. (MacDonald, 2008). A latent opportunity for responsiveness suggests that there are potential demands of citizens not currently being addressed by the existing bundle of local government services. Here, the predicted effects, as shown in Figure 6, between unorganized citizen need and low bureaucratic responsiveness results in no adoption of age friendly policies by local governments.

An analysis of the cumulative probabilities of falling into the categories of low or high levels of policy action relative to the relationships between low or high bureaucratic responsiveness and low or high levels of mobilized citizen need support this theoretical argument. Table 35 shows the probabilities for each level per the four possible relationships.

Table 35

Cumulative Probabilities of Falling into the Categories of Low or High Levels of Policy Action Relative to the Relationships between Low or High Bureaucratic Responsiveness and Low or High Levels of Mobilized Citizen Need

	Bureaucratic Responsiveness Low		Bureaucratic Responsiveness High	
	Level of Policy Action Low	Level of Policy Action High	Level of Policy Action Low	Level of Policy Action High
Mobilized Citizen Need High	0.948	0.0511	0.7512	0.2488
Mobilized Citizen Need Low	0.976	0.0253	0.8722	0.127

The probability of a city falling in to the category low policy action when responsiveness and mobilized citizen need are low is 97%. The probability of falling into the category of high policy action is only 2% when bureaucratic responsiveness and mobilized citizens need are both low, holding all other variables at their mean. The probability of a city falling in to the category low policy action when bureaucratic responsiveness is high and mobilized citizen need are low is 87%. The probability of falling into the category of high policy action is raised to almost 13% when bureaucratic responsiveness is high and mobilized citizens need low, holding all other variables at their mean. The probability of a city falling in to the category low policy action when responsiveness is low and mobilized citizen need is high is 94%. The probability of falling into the category of high policy action is raised to 5% when bureaucratic responsiveness low and mobilized citizens need high, holding all other variables at their mean. The probability of a city falling in to the category low policy action

when responsiveness is high and mobilized citizen need is high is only 75%. The probability of falling into the category of high policy action is raised to 24% when bureaucratic responsiveness high and mobilized citizens need high, holding all other variables at their mean.

In short, the best location for municipalities to fall in the typology is the top right corner where a high level of bureaucratic responsiveness is matched with high mobilized citizen need. Location in this box represents a mutual commitment between the municipality relative to action and implementation along with mobilized citizen support. It suggests a greater opportunity for comprehensive policy action across all domains of age friendly policy action presented and tested in this dissertation research.

Finally, findings from Model 2 show that a senior center is not a municipal action that moves communities to higher levels of adoption. In fact, having a senior center is a barrier to moving to higher levels of policy action. Municipalities may believe that offering a senior center is an action toward age friendly community development and then may not proceed to take more policy actions. As discussed earlier, having a senior center is representative of long term investment in services toward older adults but not necessarily representative of an age friendly action. The findings presented in Chapter 6 suggest that municipalities get to the next level of policy adoption and eventually achieve frontier city status (highest level) by facilitating advanced policy actions such as a volunteer driver program.

Differentiation of Policy Choices

The findings from this research provide further contribution on age friendly policy adoption through the comparison across the differentiation of policy actions. Lehning (2012)

shows us that cities make choices between transportation, built environment, and housing. This dissertation research goes further to include public services as an additional aspect of local government policy actions in the arena of age friendly. The analysis provides evidence, that among municipalities, the theoretical power of the transportation and services policy action models is stronger than the built environment and housing models. Transportation and public service policy actions result in tangible results for constituents making them more appealing to elected officials to support. Tangible results allow for credit claiming and a short-term response to public demand.

Other factors may go into predicting housing policy actions and built environment actions not presented in this dissertation's theoretical model. An argument may be made that services and tangible actions are easier for municipalities to respond to the direct needs of older adults. However, the planning and long-term change related to housing development and built environment have the greatest impact on the necessary changes to physical form for of the community that eventually aligns with comprehensive age friendly policy action of all four domains. Planning and community development takes time but has the capacity to transform the physical environment in which older adults live.

Public administrators have a responsibility for directing and guiding comprehensive plan development. The responsiveness index does capture an element of recognizing citizen engagement. Model 5, representing total built environment actions, showed both proxies for citizen need as irrelevant. Planning for the built environment does not translate directly into direct services received by citizens. Therefore, citizens may not recognize the direct role they

have in influencing community design policy and therefore, less likely to get involved planning process.

CHAPTER 8

CONCLUSION

A Cultural Model of Aging Manifest in Local Government Policy Adoption

Cities are important players in creating communities that foster independence and community for individuals as they age. Public administrators that foster a bureaucratic value of responsibility to be responsive toward this demographic tend to foster this value into the core principles of city management for their municipality. This research juxtaposed two different models of aging, a medical model and cultural model, illustrating the refocus of aging policy from health care toward transportation, housing, built environment, and services manifest through local governments. We know local governments are adopting policies friendly toward older adults. This research confirms the factors and conditions under which this occurs and does not present evidence of the influence of federal policy on municipal age friendly policy actions.

Three questions framed this research's investigation into the role of cities in age friendly policy adoption. The five main questions asked 1) What is the role of local government in age friendly policy adoption? 2) What are local government perceptions of age friendly policy action? 3) To what extent do local governments adopt age friendly policies? 4) Why do some local governments adopt more age friendly policies than others? and 5) Why do local governments differentiate between the age friendly policy choices they do adopt? This research established a theoretical model based on bureaucratic responsiveness theory supported by intergovernmental relations, and public entrepreneurship to examine these questions. It tested elements of this theoretical model using data from a large n sample of municipal governments.

The approach considers three different ways to measure age friendly policy adoption relative to the dissertation's theoretical model. The literature at this point does not offer a single variable reliably measure age friendly policy adoption. Following Lehning (2012) and Warner et al. (2016), this research's dependent variable uses an interval variable reflecting the total number of policy actions. It goes on to transform total actions into an ordinal variable reflecting levels of low, medium, and high policy actions. Finally, it breaks down the total actions interval variable into four interval measures of total transportation actions, housing actions, built environment actions, and services actions.

The findings indicate yes local governments adopt age friendly policy actions. The policy adoption model shows that municipalities take on more age friendly policy actions when influenced by a cultural awareness on the part of administrators and supported through mobilized force of citizens. Further, a single cohort has the capacity to influence policy adjustments (Benavides, 2008). A cultural awareness of aging on the part of municipalities is a more powerful determinate of policy action than the revenue and developmental arguments (Peterson, 1981).

The evidence from the degree of adoption model goes on to support this research's claim that certain factors cause local governments to adopt more policies than others; and yes, certain policies are associated with high levels of adopters. This research produced theoretical insight into municipal behavior toward taking on higher levels of adoption. Findings are two-fold. First, the descriptive findings show that frontier cities (higher level of adopters) adopted both common and advanced policies. Policy associated with the lower level of adoption tend to be those related to every day public work and municipal operations. Second, the likelihood of

cities moving to a higher level of adoption is positively influenced by a bureaucratic value of responsiveness toward older adults congruent with mobilized citizen need. A public entrepreneur is not necessary to advance but is needed to help initiate lower levels of action. The similar is true relative to whether a municipality has already made some type of long term investment in the aging population. The proxy of senior center was used to measure this investment. Findings show that this investment is necessary to jump start a municipality's introduction into age friendly policy action but is not an influencing factor in moving them to higher levels of policy action.

Finally, the evidence provides theoretical insight in the types of policy choices municipalities may make given different political forces influencing their actions. Municipalities do tend to make choices to support certain policy actions over others finding more support for actions that tend to deliver a tangible and possibly produce immediate results. The findings surface issues that the selection of services policy actions over actions associated more closely with planning. Undermining the opportunities to advance planning policy actions may risk a community's ability to transform its physical environment through an improved land use and infrastructure connection.

Planning allows for the identification of disparities in mobility and access. Addressing issues with transportation access and mobility for older adults is critical to overall travel behavior of individuals aged 65 and over. Lynott et al. (2009) and Yoshikawa and Bednarz (2013) found evidence of an association between urban form, transportation access and travel frequency of individuals aged 65 and over. Findings illustrate the importance of land use planning relative to the built environment as a necessary component of age friendly community development.

The previous chapter outlined findings of each hypothesis and their overall implications. The purpose of the following three sections is to highlight the elements of responsiveness factors, intergovernmental factors, and public entrepreneurship factors and stress the importance of their relationships with overall age friendly policy adoption.

Responsiveness Factors

The dissertation survey discovered the integration of a cultural awareness of aging integrated into four principles of city management including needs assessment, strategic goals, citizen engagement, and budgetary principles. Like the work of Yang and Pandey (2007), this research provided an empirical assessment of bureaucratic responsiveness. The most important factor of this research is that bureaucratic responsiveness was positive and significant across all six models. It confirms the importance of a cultural awareness of aging as a necessary component for ensuring older adults have the potential to remain in their communities as their needs change. The findings show higher levels of responsiveness associated with municipalities that already identified themselves as having a cultural awareness of being an age friendly city.

Consistent with Vigoda (2002), a government reflects responsiveness when the actions match citizen need. The zone of congruence, shown through this research, has important implications for furthering age friendly policy action. The findings from the 2 by 2 typology argue this point and show the variation in bureaucratic responsiveness and mobilized citizen need. The typology surfaces the relationships between these different institutional forms. The typology identifies the relationships between low and high levels of bureaucratic responsiveness matched with low and high levels of mobilized citizen need. It demonstrates the best place for age friendly is where high bureaucratic value of responsiveness is matched with

high levels of mobilized citizen need. The mutual leadership of both citizen and government ensures that voices are heard and services are matched with need. This location on the typology illustrates the opportunity for a comprehensive adoption of age friendly policy actions. The other locations in the typology do not necessarily assume a municipality may not take steps toward age friendly policy action but implementation may be inhibited by lack of long-term municipal leadership, the availability of grant funding, or any other earmarked funding source.

Multi-level Governance Factors

The theoretical model argued that municipal involvement in age friendly policy action was contingent on their ability to leverage federal or state funding resources. This did not prove to be relevant for any adoption model except the transportation model, Model 3. The findings reaffirm the earlier argument laid out in Chapter 2 that national policy on aging is grounded in a medical model of aging. Federal funding earmarked for aging remains in the domains of health care, long-term care, and institutionalization. These findings suggest the lack of federal policy around a cultural model of aging leaves space and flexibility for local governments to define the essence of these policy actions. It also suggests the importance of grassroots efforts and citizen voice to vocalize needs and foster the emergence of independence and community.

The negative relationship between the factor of intergovernmental and transportation policy action raises important questions about the federal government's role in developing aging policy. The HUD Sustainability grant program incorporates objectives for sustainable living across all ages. The findings from this research surfaces the argument that this objective may get shadowed by other grant objectives. Further, the local priorities for age friendly policy action may not align with regional planning priorities requiring municipalities to go it alone.

Public Entrepreneurship Factors

A majority of cities in the sample did not indicate the importance of a public policy entrepreneur in fostering the development and adoption of age friendly policy action. Some cities did report this as important and indeed, having a public policy entrepreneur proved relevant in influencing policy action. This evidence provides important theoretical insight into the relationship between bureaucratic responsiveness and age friendly policy action.

Leadership has a critical role in innovative age friendly policy action. The public policy entrepreneur is willing to take risks to advance the concepts of innovative policies but only when a cultural of responsiveness exists as supported in the correlations analysis in Table 20 above.

In this research analysis, public policy entrepreneurship was relevant to a municipality indicating low levels of age friendly policy action, but was not a factor in moving them to a higher level of adoption. Schneider, Teske, and Mintron (2011) provide evidence that public entrepreneurs may move to push more policy when supported by mobilized citizen demand. This dissertation research finds this is true at the lower levels, but advancement to higher levels of adoption rely on higher levels of mobilized citizen need reflected through RSVP and log total population of individuals aged 65 and over.

Broader Implications

Cultural Awareness of Aging

Bureaucratic values of responsiveness may be inhibited by social constructs around what it means to grow old in America creating challenges for public administrators to assess what older adults need. Popular media sources perpetuate images, which in turn have practical

implications for policy development (Bell, 1992). Fischer (1978) finds a relationship between negative images of aging and policy narratives of dependency such as social welfare. Keyes and Dicke (2016) find evidence that negative images of aging are paralleled with public policies that create barriers to older adults maintaining independence as their needs change.

Devaluation or detachment of age may limit others' appreciation of the positive aspects of being old when they do not align with those aspects associated with being young such as being active (Meyrowitz, 1985). Meyrowitz (1985) suggests that ideas of age limited to the extent we can make old people act young in turn may create barriers for connecting older adults and their needs with appropriate policies or activities. For instance, a city's planning efforts for their city's new recreation center may not yield the preferred options of older citizens if this cohort is not actively mobilized to participate. A city may identify treadmills and elliptical machines as appropriate fitness activities. When older adult residents are eventually asked for their input, they may indicate a fear of machines and highly prefer a track instead. Younger city staff may completely misunderstand the needs of older adults because they only viewed their solutions in the context of being able to act young. A bureaucratic value of a responsibility to be responsive to the needs of older adults requires public administrators to have a pulse on community demographics as well as the knowledge about the necessary policy adjustments required as citizen needs change. In this sense, public administrators should be aware of how they envision older adults and how these images influence their decision-making.

Overall, findings support a cultural model of aging manifest in municipalities. Revenue per capita is not shown to be the influencing factor driving cities to facilitate age friendly policy actions in the high level of adoption. Results point toward the opportunities for equitable policy

actions to meet the needs of older adults when these values are integrated into city management principles and reinforced through mobilized citizen need. Cities in the higher categories represent policy action across all four domains argued in this dissertation as the most relevant to city obligation and jurisdiction.

The issue for public administrators is how to foster broader understanding by local governments about the changing needs of individuals over aged 65 and how policy action can support their long-term independence in their community. Similar to Fainstein, (2000) the responsiveness index provides support that some cities are establishing criteria on how to plan and make policy decisions regarding the needs of growing older adult population. The question may surface on how to pay for the policy actions which is not a direct element of this dissertation research, but evidence suggests that policy actions are accommodated through a different cultural perspective of decision making. Evidence suggests policy actions were not necessarily financially motivated. Some descriptive results indicated limitations in finances as a reason for not doing more but this was not statistically significant.

Services over Planning

Findings also show that municipalities are more likely to facilitate transportation and services policy actions creating an opportunity for credit claiming and short-term action. Public administrators may produce tangible results but do not necessarily encompass the broader visions of all four domains including long-term change to the physical form.

The lack of significance of both proxies for mobilized citizen need relative to the built environment policy actions surfaces an opportunity for public administrators to do more to incorporate the participation of individuals aged 65 and over into the planning process. Further,

the housing results shown in Model 4 tend to support an argument that cities pass housing planning and implementation off to the local housing authority and private sector. Cities may identify housing units per capita but may not be directly responsible for housing development. The results make known the need and opportunity for cities to become engaged and lead housing policy adjustments that support the diversity of housing types and price points.

Overall, the broader implications of age friendly policy adoption relate back to cities not already doing something to address the growing needs of an aging population or doing only the basics and remaining in the low levels of policy adoption. The leadership from a public policy entrepreneur and the history of long-term investment in senior center actions is necessary for cities to get started with age friendly policy actions. It is not necessary for moving cities into higher levels of adoption. First, cities without this type of entrepreneurial leadership may not ever adopt age friendly policy actions, and those that have not already invested in services for older adults may be at a disadvantage for proceeding with this policy issue. These cities may already believe they are doing something for older adults through senior center, but findings surface the point that senior center activity does not translate into higher levels of comprehensive policy action. Second, cities may take on the common age friendly policy actions because they align with already familiar city operations, but fail to progress to higher levels of policy actions. Those municipalities remaining in the category of low level policy actions may ultimately fall short of ever developing a comprehensive age friendly policy programs. Additionally, leadership is important to establishing a cultural awareness of aging. Cities without a public policy entrepreneur may never reach their capacity to become an age

friendly city. Leadership is necessary to integrate cultural awareness of the needs of older adults into city management principles.

Opportunities for Future Research

The findings of this dissertation research present opportunities for future research. First, there are limitations related to the sample. The sample used in this research is a large N sample including cities with 10,000 or more individuals. Cities also have a concentration of individuals aged 65 and over at 14% and above. The purpose of this sample frame was to capture cities that may be doing something given the sheer size of the 65 and older population. Findings show that the means of the community characteristics for population density, median household income, population aged 65 and older, percentage owner occupied, total white population, and total black population for the sample in this research were significantly different from the U.S. Census national averages for these same characteristics. Overall, the sample tends to have less population density, higher percentages of individuals aged 65 and over, higher levels of percentage owner occupied housing, higher percentages of white population, and lower percentages of black population when compared to the U.S. Census national averages. This research's sample allows extensive data collection on the topic of age friendly policy action at the expense of improved generalization and inference across a representative sample. A random sample of cities would improve generalization and inference.

Second, this dissertation relies on the perceptions of respondents to indicate types of policy actions taken. Analyses are supported with some objective measures, but total policy action are based on perceptions of the respondent. Future research should examine actual zoning codes or capital improvement plans capturing actual regulation changes or

appropriations implementing age friendly policy actions. This process would allow for the capture of objective measures for age friendly policy adoption.

Third, this dissertation identifies relationships through cross tabulation associations of age friendly policy types and low, medium, and high levels of policy actions is a basic process to distinguish the policy action that differentiate the levels of adopters. The association surfaces distinctions in the actions of frontier cities. Cities that advance to higher levels of adoption take on more actions including those that may be considered advanced and not normally associated with daily operations of municipal governments.

Finally, this research confirms previous finding on responsiveness theory with empirical evidences through four survey constructs following Yang and Pandey. The survey items were amended relative to this research's interest in the needs of individuals aged 65 and over. The survey items capture respondent perceptions. Future research should consider examining objective measures of responsiveness such as measure of budget line item allocation to support age friendly policy action and planning.

APPENDIX A

LOCAL GOVERNMENTS AGE FRIENDLY POLICY ADOPTION SURVEY

Introduction:

The University of North Texas, Department of Public Administration, is administering a survey to local governments. The goals of the project are to learn more about what influences local government adoption of policies friendly toward older adults and the development of age friendly places.

The results of this study will help local governments and the academic field understand the public administrator's unique role in facilitating the goals of older adults in their communities to live healthy and independent lives in their communities as they age.

- Your participation is voluntary and you do not need to answer any question.
- The survey will take between 5 to 10 minutes to complete depending on your answers.
- Please fill out the electronic questionnaire. Completion of the full survey submits your response.
- For the purposes of this survey please consider the term older adult as anyone 65 years and older.
- Your answers are completely confidential and will be released by the UNT Department of Public Administration only as summaries in which no one's answers can be identified. Identifying information such as your city name will be separated from the responses you provide.

To frame the survey, we note that there are unique age friendly physical and social features that tend to be associated with local government planning and programming. These features are needed to support older adults and their ability to remain engaged and independent in their community. These include:

- mobility
- housing
- the built environment
- programs and service delivery

Adoption of City Plans with Policies Friendly Toward Older Adults

1. Generally, do you consider your jurisdiction to be currently adopting policies that are friendly toward older adults?

- Yes
- No

Skip to 3 if yes:

2. If your jurisdiction is not currently adopting policies that are friendly toward older adults, will you please list the top three priorities for your community? Open ended

Has your city adopted any plan listed below that includes age friendly policies specific to the needs of individuals aged 65 and over?	Yes	No
Transportation		
Housing		
Service Delivery		
Parks and Recreation		
Comprehensive Plan		

Please indicate the extent your city: (1 low and 5 high)	1	2	3	4	5
Performs a needs assessment to capture the needs of individuals aged 65 and over					
Integrates the needs of individuals aged 65 and over into the city's strategic goals					

Creates opportunities for civic engagement for individuals aged 65 and over					
Establishes vision based budgetary principles to reflect the needs of individuals aged 65 and over					

5. Does your city currently operate a multigenerational recreation center with programs supporting individuals aged 65 and over?

- Yes
- No

6. Does your municipality currently operate a senior center?

- Yes
- No

7. Do you consider your city to be in the implementation stage of policies that are friendly toward older adults?

- Yes
- No

8. Generally, has your jurisdiction adopted policies friendly toward older adults because of a need identified by a champion or leader of the city government?

- Yes
- No

9. Has your jurisdiction adopted a property tax relief program targeted to individual homeowners aged 65 years and over?

- Yes
- No

Skip to 11 if no

10. Please indicate the type of property tax program targeted to individual homeowners aged 65 and over.

- a. Tax freeze
- b. Tax relief
- c. Homestead exemption

d. Other ____ (text option)

11. Please indicate the reasons your city does not offer a property tax relieve program? Open ended

Please indicate the extent to which you disagree or agree you or city staff have ever participated in training or continuing education to learn more about the needs of older adults relative to: (1 disagree and 5 agree)	1	2	3	4	5
Transportation					
Housing					
Meals/food and nutrition					
City Services					
Health					
Recreation					

13. Generally, has your jurisdiction adopted policies friendly toward older adults due to the mobilized support and advocacy from special interest groups in your community?

- Yes

- No

Please indicate the extent to which you disagree or agree that your municipality solicits input from older persons on the following topics: (1 disagree and 5 agree)	1	2	3	4	5
Transportation					
Housing					
Meals/food and nutrition					
City Services					
Health					
Recreation					

15. Has your city increased its local financial investment within the last 5 years to support older adults with public programs and services?

- Yes
- No

Open ended:

16. Please indicate, from the list provided below, the stakeholders or special interest groups most actively working with your jurisdiction on the adoption of policies and implementation of services friendly toward older adults. Check all that apply.

- Retired Senior Volunteer Program
- Area Agency on Aging
- AARP Local Chapter
- Alzheimer's Association
- Senior Corp
- Points of Light
- Elder Justice
- Association of Mature American Citizens
- Other (text option)

17. Please indicate the name of any citizen or advisory council your jurisdiction has established relative to the adoption of age friendly policies.

18. Briefly describe the current city council's attitude toward age friendly policies.

Demographics:

19. Please indicate your jurisdiction's form of government

- Council-manager
- Mayor-council
- Commission
- Other (Please explain)

20. Please indicate approximate city spending range per capita

- City per capita spending under \$5,000
- City per capita spending over \$5,000

21. Please indicate the number of full time staff

- Under 100
- Between 100-999
- Over 1,000

Thank you for your time.

APPENDIX B

COMPARATIVE ANALYSIS OF CITY SAMPLE SIZES RELATIVE TO THE PROPORTION OF CITIES WITH
14.5% OVER 65 YEARS AND OLDER AND THE CITY SIZES BETWEEN 6,000 AND 10,000

Region	Total population	Percentage of overall total pop	Total population of cities with 14.5% of 65 and older	Percentage of population with 14.5% of 65 and older	Cities per region	Average City Size	Cities Over X Population					% of Cities over X In each Region					Over 10,000
							10,000	9,000	8,000	7,000	6,000	10,000	9,000	8,000	7,000	6,000	
1	9,020,036	3.9%	3,973,515	44.1%	771	11,699	164	176	192	215	231	21.3%	22.8%	24.9%	27.9%	30.0%	
2	21,251,815	9.1%	5,858,078	27.6%	1,743	12,193	334	360	407	465	531	19.2%	20.7%	23.4%	26.7%	30.5%	
3	19,380,548	8.3%	6,230,078	32.1%	3,356	5,775	357	398	465	526	590	10.6%	11.9%	13.9%	15.7%	17.6%	
4	38,923,838	16.7%	15,444,306	39.7%	4,588	8,484	755	812	898	981	1,093	16.5%	17.7%	19.6%	21.4%	23.8%	
5	38,124,220	16.3%			5,634	6,767	771	831	908	989	1,092	13.7%	14.7%	16.1%	17.6%	19.4%	
6	30,227,270	12.9%			3,937	7,678	407	441	474	536	601	10.3%	11.2%	12.0%	13.6%	15.3%	
7	10,577,698	4.5%			3,294	3,211	178	192	213	242	268	5.4%	5.8%	6.5%	7.3%	8.1%	
8	9,542,231	4.1%			2,143	4,453	150	171	190	210	241	7.0%	8.0%	8.9%	9.8%	11.2%	
9	46,037,920	19.7%			2,249	20,470	607	636	668	709	760	27.0%	28.3%	29.7%	31.5%	33.8%	
10	<u>10,638,419</u>	<u>4.6%</u>			<u>1,587</u>	<u>6,703</u>	<u>195</u>	<u>217</u>	<u>241</u>	<u>274</u>	<u>310</u>	<u>12.3%</u>	<u>13.7%</u>	<u>15.2%</u>	<u>17.3%</u>	<u>19.5%</u>	
	233,723,995	100.0%			29,302	7,976	3,918	4,234	4,656	5,147	5,717	13.4%	14.4%	15.9%	17.6%	19.5%	

Cities over X In each Region				Over 14.5 and X population					Proportion of cities with 14.5% over 65 and X by total number of cities					Over X Population			% of Cities		Percent Population of cities at 10,000 and above by total population
10,000	8,000	7,000	6,000	10,000	9,000	8,000	7,000	6,000	10,000	9,000	8,000	7,000	6,000	Proportion of cities with 14.5% over 65 and 10,000 by cities with 10,000	Total Population of cities at 10,000 and above	Percent Population of cities at 10,000 and above by total population			
100	8.0%	7.0%	6.0%	100	90	80	70	60	100	90	80	70	60	100	100%	100%			
8%	24.9%	27.9%	30.0%	95	9,020,647	114	125	132	12.3%	13.2%	14.8%	16.2%	17.1%	57.9%	1.3%	7,470,786	3.2%		
7%	23.4%	26.7%	30.5%	165	21,251,815	205	243	273	9.5%	10.4%	11.8%	13.9%	15.7%	49.4%	0.2%	3,570,832	1.5%		
9%	13.9%	15.7%	17.6%	131	19,380,452	181	243	243	3.9%	4.5%	5.4%	6.3%	7.2%	36.7%	0.6%	13,636,478	5.8%		
7%	19.6%	21.4%	23.8%	338	38,923,838	430	478	542	7.4%	8.2%	9.4%	10.4%	11.8%	44.8%	6.5%	30,869,363	13.2%		
7%	16.1%	17.6%	19.4%	351	38,124,220	439	485	549	6.2%	6.9%	7.8%	8.6%	9.7%	45.5%	3.7%	29,960,913	12.8%		
2%	12.0%	13.6%	15.3%	94	30,227,270	117	140	168	2.4%	2.6%	3.0%	3.6%	4.3%	23.1%	0.3%	24,792,855	10.6%		
8%	6.5%	7.3%	8.1%	79	10,577,688	101	119	136	2.4%	2.7%	3.1%	3.6%	4.1%	44.4%	5.4%	7,440,817	3.2%		
0%	8.9%	9.8%	11.2%	37	9,542,231	49	55	68	1.7%	2.0%	2.3%	2.6%	3.2%	24.7%	5.4%	7,395,981	3.2%		
3%	29.7%	31.5%	33.8%	196	46,037,920	220	241	264	8.7%	9.2%	9.8%	10.7%	11.7%	32.3%	7.0%	42,713,844	18.3%		
7%	15.2%	17.3%	19.5%	52	10,636,415	66	76	94	3.3%	3.8%	4.2%	4.8%	5.9%	26.7%	7.0%	8,322,326	3.6%		
4%	15.9%	17.6%	19.5%	1,538	233,723,995	1,922	2,175	2,469	5.2%	5.8%	6.6%	7.4%	8.4%	39.3%	2.3%	176,174,295	75.4%		
						100.0%									13.4%	14.4%	13.9%	17.6%	

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