Research Report

The Livability Index 2018: Transforming Communities for All Ages

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AARP Public Policy Institute

AARP®
Real Possibilities
AARP’s Public Policy Institute informs and stimulates public debate on the issues we face as we age. Through research, analysis, and dialogue with the nation’s leading experts, PPI promotes development of sound, creative policies to address our common need for economic security, health care, and quality of life.

The views expressed herein are for information, debate, and discussion, and do not necessarily represent official policies of AARP.
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Introduction

The United States is aging quickly and dramatically. By 2035, older adults will account for 20 percent of the US population, and for the first time in our nation’s history, people ages 65 and older will outnumber children under age 18. Not only are people aging, they are also living longer. AARP surveys consistently show that older adults overwhelmingly desire to age in their homes and communities. Moreover, our nation is becoming increasingly diverse racially and ethnically. Beyond demographic change, as the economy continues to rebound from the Great Recession and many regional housing markets heat up, many families face cost-of-living challenges. Furthermore, sprawl and its associated environmental and social effects, global warming, and an increase in the severity of natural disasters each demand new ways of approaching community planning and citizen engagement.

The good news, though, is that very often, what is good for older adults is good for younger adults and children. It turns out that many of the characteristics that make a community “livable” are benefits across all ages: safety and security, affordable and appropriate housing and transportation, and the ability to live near family and friends with whom to share life’s joys and who can be called on in times of need.

As this demographic shift occurs and new challenges arise, the country faces an important question: Are our communities livable for residents of all ages? Many communities are not adequately prepared.

Newly updated and enhanced, the AARP Livability Index 2018: Great Neighborhoods for All Ages considers all such characteristics in communities across the country. It scores every neighborhood and community in the United States for the services and amenities that most affect people’s lives. The Livability Index’s scoring methodology draws attention to the need for every neighborhood to be livable so that residents of all ages, abilities, races, ethnicities, and incomes are able to enjoy the advantages of a livable community, regardless of their ZIP code.

The original Index was a groundbreaking tool of the AARP Public Policy Institute (PPI) when first launched in 2015. Through stakeholder input—

A livable community is one that is safe and secure, has affordable and appropriate housing and transportation options, and offers supportive community features and services. Once in place, those resources enhance personal independence; allow residents to age in place; and foster residents’ engagement in the community’s civic, economic, and social life.


1 U.S. Census Bureau, 2018
including via an individual preference survey of more than 4,500 people ages 50 and older, our external Technical Advisory Committee of 30-plus members that included data-methods and policy experts across each category of livability, and AARP’s direct involvement in local communities—PPI identified those core community attributes for seven categories of livability and the indicators and data sources by which to measure those attributes. The Livability Index includes 60 indicators spread across seven categories of livability: Housing, Neighborhood, Transportation, Environment, Health, Engagement, and Opportunity (see figure 1). The result is an interactive tool that residents, elected officials, city planners, researchers, homebuyers, and others can use. For example, residents and community leaders can explore how livable their communities are and support efforts to enhance livability for all residents, regardless of age, income, and address. Local officials can use the Index to make informed decisions for adapting their cities so that residents of all ages can stay active and engaged in their communities. The Index helps community leaders and individuals identify gaps between what people

What’s New in the 2018 Index?

The 2018 version of the AARP Livability Index provides a comprehensive update to the online tool first launched in April 2015. Fifty-six of the 60 indicators have been updated in this version.* The 2018 Index provides new insights into how well communities support their residents of all ages and new, interactive features to enhance the experience of visitors to the website. Users can now track a location’s progress over time, do side-by-side map comparisons of two indicators, share neighborhood scores on social media, and link to AARP and other livable communities resources. An interactive tutorial introduces visitors to these other features. With three years of data now on the website, the Livability Index includes over 30 million data points. As such, it appeals to the data analyst and casual user alike, offering an unintimidating user interface, whether that user is a subject expert or a community member looking for new insights about her neighborhood and larger community.

* Due to data limitations, one policy (state and local inclusive housing design laws [e.g., visitability ordinances]), and three metrics (household walk trips, speed limits, and voting rates) have not been updated in the 2018 edition of the Index.

Figure 1
Seven Categories of Livability and the Attributes Associated with Each

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2 Harrell, Lynott, et al., What is Livable? Community Preferences of Older Adults, 2014
3 Harrell, Lynott and Guzman, Is This a Good Place to Live? Measuring Community Quality of Life for All Ages, 2014

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2 THE LIVABILITY INDEX 2018: TRANSFORMING COMMUNITIES FOR ALL AGES
want and need and what their communities provide. In this way, the Livability Index is more than just a tool. It’s also a platform from which communities can spur action.

The Livability Index is just one of the many resources AARP offers local leaders and engaged citizens to help make their communities more livable (see the Principles and Resources discussion below). The Index can be used alongside other tools to craft a robust analysis and snapshot of livability, as a community defines it. It can serve as a conversation starter for areas one’s community seeks to improve, and how specific policy changes can help you achieve those goals.

Understanding Livability Index Scores

We offer the following tips for interpreting Livability Index scores:

1. Total Index Scores, the numbers shown under the rainbow, are essentially the average of each of the category scores for a particular location. They are calculated on a scale of zero to 100, with the average community scoring a 50 relative to all other communities in the nation. These relative scores are recalculated with each update of the Index. Thus, it is possible for a community to have improved its livability and receive a lower score, if its improvement has been less robust relative to other communities’ improvement. Because we use this method of relative indexing, and because we’ve refined some of the indicators using better data sets, total and category scores are not comparable from year to year.

2. Policy adoption is the quickest route to increasing a location’s score, as the Index rewards a full point to the category score for every policy of that category in place. These points are added after the category score is calculated from the metrics.* The scores for each of the seven categories are then averaged to calculate a location’s total score.

3. For a few indicators, PPI found better data with which to measure a particular community attribute. We present only comparable indicators on the history page.

4. Missing data are represented by colorless circular dots.

5. It is useful to check the level of geography of the source data to interpret the results. While more than half of the Index metrics pull source data at the neighborhood level, some indicators do not. For instance, we have social engagement data for only 51 metro areas. All neighborhoods within one of these metro areas perform the same on this indicator as their metro area. All other neighborhoods outside metro areas perform as their state performs.

* Because of the cross-cutting nature of the policy indicator, State and local plans to create age-friendly communities, it is displayed under each of the seven categories of livability; however, it only generates one total point to a location’s score.
Analysis for the Livability Index required a multilayered approach, with developers of the Index first identifying top-performing places. Highlighting top-performing communities can be helpful to all communities, as the top performers can provide a benchmark with which other communities can better determine where they might focus their efforts. Nevertheless, it is important to note that all communities can (and inevitably will) identify room for improvement—even top performers. Likewise, those that do not make the overall top-performer lists can rest assured that they too have elements of livability worthy of being highlighted.

The second layer of our analysis looked at macro trends in livability across the country. We found many reasons for optimism, as well as some disconcerting trends in need of further exploration and action.

The Livability Index helps users better understand their communities and make decisions about future needs. The following themes summarize the key findings from the 2018 Livability Index data. This is intended to be a first-blush analysis of the data. Further analysis of the data is forthcoming.

**THEME 1: DIFFERENT STRATEGIES WORK FOR DIFFERENT COMMUNITIES**

The AARP Public Policy Institute has been tracking top-performing cities since the Index was launched in 2015. Three Top 10 lists are kept based on city size: large cities with a population of 500,000 or greater; mid-sized cities with a population of at least 100,000 but less than 500,000; and small cities with a population of between 25,000 and 99,999.

Nineteen of the 30 top-scoring cities in 2015 made their respective Top 10 list again in 2018. Half (15) of the top-scoring cities are also members of the AARP Network of Age Friendly States and Communities. In addition, Brookline, Massachusetts, has been a member of the World Health Organization’s Global Network for Age-Friendly Cities and Communities since 2014, and 3 other top-performing cities are located in counties that are members of the AARP Network of Age-Friendly States and Communities. These are communities that have made a commitment to ensuring that their residents have the amenities and services that support people as they age.4

**Wisconsin Has More Top-performing Communities than Any Other State**

Wisconsin continued to have a strong showing with six cities on the lists (four on the small cities list). Wisconsin’s high performance is in part due to having several state-level policies in place that positively impact cities. For example, the state has policy to prevent housing foreclosures and a policy that goes beyond the federal Family Medical Leave Act. In addition, each of the six top-performing cities in Wisconsin have high voting rates, aided in part by a state early/absentee voting law. Five of the six cities have a local smoke-free air ordinance in place, and the sixth location (Sheboygan) is covered by state smoking policy. Wisconsin also scores high on social engagement, raising its communities’ scores. Even Milwaukee shows strong performance on social involvement, unusual for a city of its size. Finally, all six of Wisconsin’s top-scoring cities have a greater number of jobs per worker, greater hospital patient satisfaction rates, and a greater percentage of multifamily and per capita amount of subsidized housing than the national average. All of these factors work together to bump a relatively large number of Wisconsin cities to the Top 10 lists.

Nonetheless, Wisconsin still has room to improve. It rescinded its complete streets policy and mandate for human services transportation. Additional rollbacks would negatively affect city competitiveness in the Index.

4 For more information on the AARP Network of Age-Friendly States and Communities, see the description under Theme 2 below and at http://www.aarp.org/agefriendly.
Convenient “Live, Work, and Play” Neighborhoods Common among Top-Performing Large Cities

The top-scoring large cities have shuffled in ranking, but the list of cities remains largely unchanged, with one exception: Austin, Texas, is the newcomer for 2018. Overwhelmingly, large cities score high on neighborhood and transportation indicators. The Livability Index’s Neighborhood indicators largely measure proximity to a variety of destinations. These are neighborhoods that city planners describe as “live, work, and play” locations, where one can easily walk to services and amenities because the neighborhoods are compactly designed, mixed land use locations.

As one example from the list, Denver, Colorado, scores high on both the Neighborhood and Transportation indicators. The city has a strong transit-oriented development program to align its land use with investments in FastTracks, a multibillion-dollar, voter-approved bus rapid transit expansion plan. Yet challenges have come along the way. Rapid growth in Denver has strained the supply of housing that is affordable to large numbers of Denver families and individuals, and many residents are concerned that Denver’s transit build-out may not benefit low-income communities and communities of color.

Stakeholders have responded. Mile High Connects, a cross-sector collaborative of nonprofits, foundations, businesses, and government leaders...
in the Denver region, has made equitable transit-oriented development (TOD) its central mission. Mile High Connects’ Denver Regional Equity Atlas drew attention to the spatial mismatch between the location of new transit lines and affordable housing, job centers, health care, and high-performing schools. Many partners have come together to try and reverse this trend through the Denver Regional TOD Fund and city-established Revolving Affordable Housing Loan Fund, among other initiatives.⁵

Many of the top-scoring large cities continue to struggle with high housing costs, low high school graduation rates, relatively elevated crime rates, and income inequality. These are areas where cities will want to place increased emphasis in all planning endeavors.

Greater Variation in Strengths Characterizes Top-Performing Mid-Sized Cities

Six of the 10 original top-scoring mid-sized cities returned to the list in 2018 (see sidebar). Joining them for the first time are Boulder, Colorado; Columbia, Maryland; Alexandria, Virginia; and Berkeley, California.

Similar to top-scoring large cities, 6 of the 10 top-scoring mid-sized cities are strong on both Neighborhood and Transportation measures of livability, and either Transportation or Neighborhood are drivers for 2 additional cities. In contrast, Rochester, Minnesota, and Columbia,

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³⁵ For more information, see http://www.aarp.org/TOD.

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Austin—Newest Entrant to the List of Top-performing Large Cities

Austin, Texas, one of the nation’s fastest-growing cities, saw improvement in a number of areas that helped push its score into the Top 10 in 2018. For example, the city now receives credit for TOD policy. It’s Health score improved by lowering its preventable hospitalization rate and increasing patient satisfaction. Under Engagement, the city established a local human rights commission and a lesbian, gay, bisexual, and transgender (LGBT) antidiscrimination law.

Austin is also engaged in other notable local livability activities. For example, it joined the AARP Network of Age-Friendly Communities in 2012. In 2016, the city amended its comprehensive land use plan, Imagine Austin, to include explicit age-friendly policy and direct the completion of an age-friendly action plan, which was adopted by the City Council in November 2016. As part of the package of plan amendments, the City Council also approved the city’s Vision Zero Action Plan. The Vision Zero plan aims to eliminate road crashes that kill and severely injure people in Austin. AARP/Texas is a member of Austin’s Vision Zero Task Force and helped draft the Age-Friendly Action Plan. In addition to these important planning efforts, Austin embarked on an ambitious effort to modernize its land development code, the zoning regulation used to implement the vision of the comprehensive plan. This is the first major rewrite of the code in 30 years and aims to effectively shape and manage the city’s explosive growth. The process began in 2012 and is expected to wrap up this year. Over time, these efforts could lead to quantitative improvement on Index metrics.

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Top-Performing Mid-Sized Cities in 2018 (Population of 100,000 to less than 500,000)

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
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<tbody>
<tr>
<td>Madison, Wisconsin</td>
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<tr>
<td>Arlington, Virginia*</td>
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<tr>
<td>St. Paul, Minnesota</td>
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<tr>
<td>Boulder, CO NEW</td>
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<tr>
<td>Minneapolis, Minnesota*</td>
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<td>Rochester, Minnesota</td>
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<td>Cambridge, Massachusetts</td>
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<tr>
<td>Columbia, Maryland NEW</td>
<td></td>
</tr>
<tr>
<td>Alexandria, Virginia*</td>
<td>NEW</td>
</tr>
<tr>
<td>Berkeley, California*</td>
<td>NEW</td>
</tr>
</tbody>
</table>

* Member of the AARP Network of Age-Friendly States and Communities

NOTE: Boulder and Lafayette, Colorado, and Silver Spring, Maryland, are located in counties that are members of the AARP Network of Age-Friendly States and Communities and thus receive “trickle-down” credit in the Index.
Maryland, make the Top 10 list due more to their relative strengths under Health and Environment. Several mid-sized cities also show housing affordability pressures (e.g., Arlington and Alexandria, Virginia; Cambridge, Massachusetts; Columbia; Madison, Wisconsin; and Berkeley). Of these six, four are located in the urban core of large metropolitan areas, the other two in college towns. Both types of cities have grappled with housing affordability pressures for some time. Rapidly rising housing costs may be something new for other mid-sized cities. Mid-sized cities can be a central city or a neighboring suburb to a city, or located outside a metro area; thus, one can expect variations in housing challenges. Nonetheless, as these places enhance their livability in other areas, such as by creating walkable communities served by good public transportation services, housing costs will continue to rise. To stay competitive, cities of all sizes will need to buckle down and direct resources toward housing affordability solutions. Unfortunately, the federal government has stepped back from financing construction of affordable housing in recent years, placing more burden on localities.

Social Engagement Drives Performance of Top-Ranked Small Cities

Only 4 of the original 2015 top-performing small cities returned to the Top 10 list (Fitchburg, La Crosse, and Sun Prairie, Wisconsin; and Bismarck, North Dakota). Sheboygan joined its sister cities from Wisconsin, as did Lafayette, Colorado; Silver Spring, Maryland; Brookline, Massachusetts; Harrisburg, Pennsylvania; and Portland, Maine.

Strong performance under the Engagement category is a primary factor in making this list for all but 1 of these top-performing small cities, although even the exception, Brookline, has an above-average Engagement score. Although not true for all 10, these less-populated cities also tend to be stronger on Opportunity, with higher high school graduation rates and lower income inequality, than their larger-city counterparts.

Unlike top-performing large and mid-sized cities that score highly on measures of walkable urbanism, few small cities score high on Neighborhood indicators. The two that do are suburbs of top-scoring large cities (Brookline, outside Boston, and Silver Spring, outside Washington, DC). Both of these suburbs have walkable, mixed-use, town center neighborhoods within them.

THEME 2: COMMUNITIES ACROSS THE COUNTRY ARE TAKING STEPS TO BECOME MORE LIVABLE

Communities across the country are enacting policies across all categories of livability (Housing, Neighborhood, Transportation, Environment, Health, Engagement, and Opportunity). These actions lay the groundwork to make places more livable for people of all ages. A slight majority of policies tracked in the index (11) showed a net increase in adoption between 2015 and 2017. Some of the more notable increases were in housing trust funds, prevention of home foreclosures, complete streets, smoke-free air laws, age-friendly communities membership, transit-oriented development supports, human rights commissions, and LGBT antidiscrimination measures. The last 3 policy areas showed gains
in part because data providers evaluated a larger number of places than in previous years. Nonetheless, they help underscore a general trend toward improved livability.

Housing trust fund adoption in particular is a success story. These funds set aside revenue for a variety of affordable housing strategies. Since data were collected for the 2015 Livability Index, 5 more states have enacted housing trust funds. The vast majority of states (47 and the District of Columbia) now have trust funds in place. In the same period, the number of cities with local trust funds increased 13 percent. More than 200 counties now have trust funds.

In a few cases, policy adoption is aligned with improvement on related metrics. For instance, 65 percent of states that have a housing trust fund in place saw an increase in the availability of subsidized housing. This pattern shows up locally as well. Sixty-one percent of counties and 46 percent of cities with local housing trust funds have also increased their amount of subsidized housing, although whether a trust fund was used for subsidized units is unknown.

While more states and localities now have housing trust funds in place, this doesn’t mean that the housing affordability crisis is solved. For example, the Long-Term Services and Supports Scorecard explains that while “the total number of subsidized housing opportunities has risen since 2011, due to slow growth of the overall housing market and the increased use of vouchers, tax credits and other financing mechanisms,” availability “still falls short of current and future needs. Nationally, there are more than 18 million rental households with incomes lower than the median for their area (most of whom are cost-burdened by housing) and

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6 For additional information on housing trust funds, see Brad Gudzinas, “Housing Trust Funds,” AARP Public Policy Institute, Washington, DC, February 2017.

7 The Index counts information on a wide range of housing subsidies under this metric from the National Housing Preservation Database, including federal Housing and Urban Development (HUD) rental assistance programs, HUD mortgage insurance programs, low-income housing tax credits, and other federal loan programs. The full list of programs is available at http://www.preservationdatabase.org/programdesc.php.
fewer than 8 million subsidized units.\textsuperscript{8} Housing that is affordable (and accessible) is important for many community members who face affordability challenges, including those with long-term services and supports needs. Additional examples of policy and metric alignment may be found under Theme 3 on health below.

One policy (human services transportation coordination) deserves mention because of declining performance. Following President George W. Bush’s Executive Order 13330 in 2004, and the establishment of the federal Interagency Transportation Coordinating Council on Access and Mobility, a majority of states established comparable state and regional human services transportation coordinating councils. Yet while effective coordination remains a key ingredient to expanding access to employment, health care, education, and community services for people who are transportation-disadvantaged, 11 states have allowed their mandates for a coordinating council to expire. Institutional barriers still need to be bridged to take advantage of new technologies that can automate the scheduling of shared rides and lower the cost of providing service.

One metric, ADA-accessible stations and vehicles, does show definitive improvement across the country. Congress passed the Americans with Disabilities Act (ADA) in 1990 to prohibit discrimination against people with disabilities in employment, housing, education, and access to public services, including public transportation. The Livability Index measures the percentage of stations, trains, and buses that are accessible to people who use wheelchairs. The prevalence of transit stations and vehicles that are ADA-accessible increased between Index years from a city-level median of 82 percent to 88 percent. As transit agencies continue to replace their fleets and make upgrades to their stations, these numbers are expected to grow further, in conformance with transit agencies’ requirements under the ADA. The median saturation rate among the 30 top-performing cities is already 90 percent and 8 of these cities report their systems as 100 percent accessible (Milwaukee and Sheboygan, Wisconsin; Rochester, Minnesota; Portland, Maine; Harrisburg, Pennsylvania; and Denver, Boulder, and Lafayette, Colorado). San Francisco and Berkeley, California, both report having 99 percent accessibility.

While progress has been made on this concrete measure of accessibility, there are still many ways that even the most accessible transit systems can improve their services for people with other mobility limitations, such as making large-print system maps available, training drivers to understand the diverse needs of their customers, and installing benches and shelters at bus stops.

Access to exercise opportunities, preventable hospitalization rates, and patient satisfaction also show improvement (see Theme 3 on health below).

The AARP Network of Age-Friendly States and Communities Is One Framework to Increase Livability

Communities can take many actions to improve livability.\textsuperscript{9} Tackling multiple issue areas at once benefits from a framework to help navigate the complexity of community development. The age-friendly communities initiative is one framework to support collaborative efforts. More communities are taking steps toward becoming more age-friendly by joining initiatives such as AARP’s Network of Age-Friendly States and Communities (NAFSC or the Network). The Network encourages cities, towns, counties, and states to prepare for the rapid

\begin{quote}
Hillsboro and Newburg, Oregon

Hillsboro is using the Index to dig deeper into data as part of its comprehensive plan update. Newburg is using the Index to identify gaps in community livability for benchmarking as part of its Age-Friendly Communities baseline assessment.
\end{quote}


\textsuperscript{9} Visit AARP.org/livable to find a range of resources that can help improve livability.
aging of the US population by paying increased attention to the physical, social, and economic factors that influence the health and well-being of older adults. By doing so, these communities are better equipped to become great places, and even lifelong homes, for people of all ages. Age-friendly community leaders have made an important commitment to ensuring that their communities support all residents and their needs at every stage of life. Communities that join the Network can connect with peers across the country and world to share information, receive mentoring from member communities, and access aging and civil society experts. The AARP Network of Age-Friendly States and Communities is an affiliate of the World Health Organization’s Age-Friendly Cities and Communities Program, an international effort launched in 2006 to help cities prepare for rapid population aging and urbanization. The program has participating communities in more than 20 nations, as well as 10 affiliates representing more than 1,000 communities.

When the Livability Index was first launched in April 2015, there were only 52 members of the Network. Between then and when data for the 2018 Index were collected, 121 communities joined. Two states (New York and Massachusetts) also made the commitment. The Network continues to grow, and as of the date of this publication, it has over 250 communities representing more than 71 million people.

Half (15) of all the top-scoring communities in the 2018 Index are members of the Network. Other locations receive credit for age-friendly policy for a comparable level of commitment. These age-friendly communities have all made a commitment to ensuring that their residents have the amenities and services that support people as they age. Places located within Network member counties also receive credit. In total, the United States has seen an almost 400 percent increase in the number of age-friendly designated communities. Among the Top 10 largest cities, all but one (Milwaukee, Wisconsin) are part of the AARP Network of Age-Friendly States and Communities.

Many age-friendly communities are using the Livability Index to catalyze community conversations and help citizens and local officials identify their community’s relative strengths and weaknesses. Several are tracking and documenting their progress in Age-Friendly Action Plans. Combined with additional local data, the Livability Index is a powerful tool for the development of a community’s Baseline Assessment and Evaluation, two of the required steps of the age-friendly communities process.

RAYMORE, MISSOURI

Raymore references the Livability Index in its Community for All Ages Master Plan (equivalent to an NAFSC Action Plan) as a strategy to monitor and evaluate its progress.

Change Happens Slowly (And the Index Considers This)

Many communities across America are making strides to become more livable, and some emerging evidence shows that positive change is happening on the ground. In general, though, change happens slowly. There is a lag time between a community’s adoption of policy and when the impact of that policy change can be measured as outcomes. For example, even after land use plans are adopted, housing and commercial real estate markets must stimulate private investment before implementation of the planning vision takes place. It is not uncommon for 10 to 30 years to transpire before local housing development reviews and decisions have a measurable influence on the distribution of the housing stock and impact the ways people choose to get around their communities. Policy action takes time to show results.

The Livability Index also gives credit to communities that have joined the international Age-Friendly Cities and Communities network directly through the World Health Organization and communities that have remained active with age-friendly efforts since receiving funding through Grantmakers in Aging.
Other policy interventions can have a more immediate effect. For instance, complete streets policy implementation can include actions as simple as repainting the lines on the street to include bike lanes and well-marked crosswalks. Several of these types of projects have led to reduced traffic speed, increased pedestrian and bicycle travel, enhanced safety, and increased economic activity along the corridor. Conversely, many slow- and moderate-growth communities have been caught off guard by how rapidly housing costs can escalate in anticipation of redevelopment activity.

While outcomes (as measured by metric change within the Index) are the best way to measure real conditions on the ground at a given point in time, AARP recognizes that change does not happen overnight. Through the Livability Index, AARP encourages local leaders to adopt policies that lay the foundation for increasing livability over time. Policy adoption is the quickest route to raising a location’s score, as the Index rewards a full point to the category score for every policy of that category in place.

**THEME 3: COMMUNITIES ARE STRIVING TOWARD GREATER POPULATION HEALTH**

Several metrics under Health are trending in a positive direction. Seventy-four percent of cities and towns of all sizes, for example, saw an increase in access to exercise opportunities. Preventable hospitalization rates among Medicare patients declined between 2011 and 2014, from a median of 65 hospitalizations per 1,000 patients to 51. This is a positive trend, which mirrors declines in overall hospitalization rates, and suggests broad health systems improvements. For example, the provision of high-quality outpatient care and better management of chronic conditions can contribute to declining hospitalization rates. Beyond the health care setting, local actions to address social determinants of health—such as affordable housing and transportation, economic opportunity, and social isolation—can also improve health outcomes and reduce the need for hospital services.

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**PRICE, UTAH**

“My favorite part of the Livability Index is the ‘Policy’ tab because it shows where we have and do not have policy in each category. This gives us a peek into our blind spots and the data to open up conversations with our citizens and local and state policy makers to ensure we have well thought out plans for our community, like sidewalks and equal employment rights.”

—Danielle Howa Pendergrass, Nurse Practitioner, President and Owner, Eastern Utah Women’s Health

_In Price, Utah, a nurse practitioner highlights the usefulness of the Index to support her work at her clinic in rural Carbon County and more generally as an engaged citizen. For example, because her rural community has low access to exercise opportunities at gyms or through walking and bicycling, she counsels women on alternative ways to incorporate exercise into their day. Through her lens as a health professional, she views the Index as compilation of measurement for social determinants of health. By using the Livability Index in combination with other resources such as the County Health Rankings and Roadmaps, she better understands the environment in which her patients live. As such, she is better able to connect them to the right community resources such as housing, community gardens, and voter registration information._

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11 Project for Public Spaces, 2012
12 Preventable hospitalization rates are based on the universe of Traditional, Fee-for-Service Medicare beneficiaries. The latest available data from the source came from 2011 in the case of the 2015 Index and 2014 in the case of the 2018 Index. Due to the lag time in data availability, we used 2011 data from the Dartmouth Atlas of Healthcare for the 2015 Livability Index, and 2014 data for the 2018 Index.
Patients gave their hospitals slightly higher ratings in the latest version of the Index. Seventy-two percent rated their hospital a 9 or 10 (with 10 indicating the highest level of satisfaction). Previously, 68 percent of hospitals received these ratings.

**The Midwest Catches the Wave of Complete Streets Policy Adoption**

Complete streets policies, by definition, help ensure that the nation’s roads are planned, designed, built, and maintained for safe and convenient travel by all users, whether they drive, use public transportation, walk, or bike. These policies help communities become more livable and healthier. When effectively implemented, they can lead to lower road fatality rates and create more exercise opportunities. Passage of complete street policies is a high priority for AARP because older road users are most vulnerable. A pedestrian over the age of 65 is 35 percent more likely to be killed in a traffic crash than a pedestrian under the age of 65.

Seven states (Indiana, Maine, Mississippi, Missouri, New Mexico, Utah, and West Virginia) adopted complete streets policy between the data collection periods for the 2015 Index and 2018 Index. Wisconsin rescinded its policy. Now, 32 states and the District of Columbia have a complete streets policy in place, as do over 850 cities and 250 counties. More than 250 localities adopted complete streets policies between Index years.

The Midwest Census Region saw the absolute largest increase in the number of policies (133 new policies), followed by the West (66 new policies) and South (43 new policies). The smallest gain was seen in the Northeast, with 22 new policies.

<table>
<thead>
<tr>
<th>Census Region</th>
<th>Percentage of City-Level Policies</th>
<th>Percentage of County-Level Policies</th>
<th>Percentage of State-Level Policies</th>
</tr>
</thead>
<tbody>
<tr>
<td>West</td>
<td>14%</td>
<td>22%</td>
<td>28%</td>
</tr>
<tr>
<td>South</td>
<td>38%</td>
<td>44%</td>
<td>8%</td>
</tr>
<tr>
<td>Midwest</td>
<td>29%</td>
<td>31%</td>
<td>40%</td>
</tr>
<tr>
<td>Northeast</td>
<td>20%</td>
<td>3%</td>
<td>24%</td>
</tr>
</tbody>
</table>

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Communities Take Action to Improve Public Health through Passage of Comprehensive Smoke-Free Air Laws

The Livability Index tracks one policy area under the Health category: comprehensive smoke-free air laws. These are local and state laws that prohibit smoking in workplaces, restaurants, and bars. This is a high standard to reach. Many laws lack one or more of the three prohibitions. In 2015, we tracked only state-level policy. In 2018, PPI was able to obtain both state and local data.

Between the two points in time, California upgraded its smoke-free air law to cover workplaces. Its previous law covered only restaurants and bars. Thus, the state now receives credit for this policy within the Livability Index. Twenty-five states plus the District of Columbia now have comprehensive smoke-free air laws. In addition, 915 municipalities have smoke-free air laws.

While the South still lags behind its neighbors to the north and west on a variety of health factors, local action provides reason for optimism. More local smoke-free air laws have been passed in the South than in any other Census region. The next most active region for policy adoption of smoke-free air laws is the Midwest, followed by the West and finally the Northeast (see table 1).

A very different pattern is found with state-level policy. Using the Census regional definitions, only two Southern states (Delaware and Maryland) have comprehensive smoke-free air laws. This is in contrast to the West and Northeast, where about a quarter of states have policy, and the Midwest, which has 40 percent policy adoption. Local jurisdictions in the South are adopting policies directly, even when there is a lack of state leadership, or perhaps because of the void. Six of the nine states in the Northeast have policy in place today, a possible explanation for why relatively fewer municipalities have adopted local policy. For places with state policy, local policy may simply reinforce, or it may go further than, state policy. But where state legislatures have failed, local communities have the power to exert some control over their public health outcomes, including through smoke-free air policy.

Mississippi leads the South with 119 locally adopted smoke-free policies. Only Massachusetts beats Mississippi, with 154 local policies. Ninety-five percent of these Mississippi communities have a population of less than 25,000 people.

In some cases, policy adoption is correlated with improved health outcomes. Smoking prevalence decreased in 23 percent of states with comprehensive smoke-free policies and in 14 percent of cities with local ordinances.

**THEME 4: DESPITE GAINS IN MANY AREAS OF LIVABILITY, US CITIES SHOW A DISTURBING TREND TOWARD INCREASING SPRAWL**

For years, city planners have advocated for developing compact, walkable, “live, work, and play” neighborhoods. These neighborhoods are designed at a scale suitable for their human inhabitants, rather than the automobile, and are frequently served by public transportation. A well-established body of research quantifies the benefits of this form of land use for efficient

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14 The cross-cutting age-friendly communities indicator appears under each category.
15 Within these states, only Howard County and Baltimore, Maryland, have local policy.
service delivery, creating a sense of place, and economic development. While the Livability Index does not measure sprawl directly, several of its metrics are indicative of changing land use, disconcertingly toward more dispersed land use patterns.

The Neighborhood category of the Index addresses qualities of access and convenience, including proximity to destinations, mixed-use neighborhoods, and compact neighborhoods, in addition to personal safety and neighborhood quality. Our measure of mixed-use neighborhoods is diversity of destinations, which measures the mix of job categories and indicates the presence of a variety of destinations, such as stores, restaurants, doctors’ offices, and movie theaters. Livable neighborhoods include a variety of services and amenities for residents and workers. This indicator shows that jobs of a certain type became more concentrated, reducing the variety of destinations that neighborhood residents or visitors can access within the neighborhood.

Another area related to sprawl showed a lack of progress. The compactness of a neighborhood is captured by measuring activity density—that is, the degree to which people and jobs are concentrated within it. Vibrant neighborhoods need people during the day, evenings, and weekends to frequent a variety of destinations, such as jobs, restaurants, banks, and other services. When compactly laid out within a pedestrian-friendly environment, people and purpose come together to light up a neighborhood. In general, people rely less on cars for transportation in denser neighborhoods, because the distances between people and their desired destinations are shorter. Yet the updated Index showed that the number of people and jobs per square mile also declined.

The Livability Index also includes several proximity measures, which help measure land development patterns. Specifically, it evaluates the number of grocery stores, farmers markets, parks, and libraries that are within a half-mile walk from a neighborhood’s population center. Because the great majority of neighborhoods (Census Block Groups) in the United States do not have these destinations within walking distance, the median value for these metrics is zero in both the

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16 Cervero and Kockelman (1997) coined the original three Ds (density, diversity, and design). Later destination accessibility and distance to transit were added by Ewing and Cervero (2001, Travel and the Built Environment, Transportation Research Record, 1780: 87–114).

17 Population centers differ from the geographic center of the block group. Block group (neighborhood) population centers are weighted by the population of the blocks that make up each block group. In other words, the center of the neighborhood (block group) is determined by the geographic distribution of population density.
2015 and 2018 Livability Index data sets. In other words, the vast majority of Americans continue to live in neighborhoods where it is largely impractical to walk to basic services.

Other factors outside of the Index’s Neighborhood category may also be signs of sprawl. The ideal compact neighborhood offers a variety of housing types, especially multifamily housing. Yet, in keeping with the trend toward decreasing land intensity, the median percent of multifamily housing stock declined from 12 percent to 9 percent between 2011 and 2015. This general trend is true for cities of all sizes, but less pronounced in the largest cities.

The median level of traffic congestion also increased in US neighborhoods, an outcome consistent with sprawling land use patterns. Furthermore, regional air quality declined. The above observations from the data suggest that despite the planning community’s emphasis on creating compact communities, especially in urban areas, dense development remains a niche development model in a minority of neighborhoods. Construction of single-family, detached housing remains the dominant pattern. America’s cities are still growing out, more than up.

The roots of sprawl are too numerous to elucidate in this paper. America’s cities have long relied on annexation to accommodate population growth. Federal subsidies to developers and homeowners have altered market mechanisms for more than half a century. Sprawl is also an outgrowth of consumer preference for single-family homes. Regardless of the causes, the lack of housing and neighborhood options within one’s community can make it more difficult for couples and individuals to downsize and age in place. The undersupply of multifamily and other “missing middle” housing options can also reduce affordability for individuals and families at all points in the life span. Sprawl affects health by reducing opportunities to exercise as part of one’s daily transportation. It increases the likelihood of long commutes and increases environmental harms through the replacement of green space with concrete.

Future iterations of the Index could reveal more sustainable development patterns. Various surveys and anecdotal information from city planners suggest that community acceptance of more compact development patterns has grown in recent years. As new source data become available, the Index may capture progress on the above indicators. Furthermore, local and regional governments continue to adopt transit-oriented development policy and zoning. Based on research completed by PPI in 2017, the latest Livability Index credits an additional 8 states, 32 metropolitan regions, and 57 localities for a variety of TOD supports. As discussed above, it can take years for land development approvals to be fully constructed.

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18 Actual years of data for the 2015 and 2018 versions of the Livability Index.

19 The percentage of housing stock that is multifamily decreased in more places than not (42 percent of places saw a decrease in multifamily housing as a percentage of all housing units, while 30 percent of places increased their relative supply of multifamily housing). In 18 percent of large cities, the percentage of housing units that are not single-family, detached homes declined, and it increased in only 9 percent of them. Nearly three-quarters of the largest cities saw no change in the percentage of housing stock that is multifamily between the two points in time.

20 Urban Land Institute, 2015

Principles and Resources for Enhanced Livability

Through its livable communities work, AARP seeks to assist community leaders nationwide to enhance quality of life for people of all ages. AARP’s core livability principles are articulated in the AARP Policy Book as follows:

- **Secure affordability.** Communities should provide transportation, housing, and other services and features that are affordable to people of all income levels.
- **Ensure equitable access.** All people should have access to affordable transportation and housing, as well as a safe and healthy environment in which to live.
- **Ensure quality.** Individuals should have high-quality choices to meet their needs, including housing and transportation.
- **Prioritize accessibility and the ability to age in place.** People of all abilities and ages should be able to enjoy services and community features that meet their needs, allowing them to live in the setting of their choice and increase their access to destinations.
- **Promote health, safety, and environmental sustainability.** Communities should support the right of individuals from all incomes and backgrounds to live safe and healthy lives.
- **Achieve holistic policy making.** All communities should recognize and act on the intersections between livable communities and such issues as health, wellness, safety, work, education, environment, and social engagement to enable residents across generations to live their best lives.

**MAKING COMMUNITIES MORE LIVABLE**

Every community member, including local officials and local organizations, can help ensure that communities offer what people need regardless of age. Whether instituting a policy to improve transportation options for older adults, establishing a program with a local grocer to increase healthy food choices, or volunteering at the library, engaging in these and similar activities can improve the quality of life for people at every life stage. Following are ideas that local officials and community members alike can take in strengthening efforts to make communities more livable.

1. **Take a holistic view of policy issues and solutions**

   The Livability Index offers a holistic view of community life. The Index is unique in that it presents several categories, or key aspects of community life, in a way that illustrates not only how each contributes to livability, but also how they are interconnected. For example, while the Index has a Health category, health-related indicators are in the other six categories as well, such as the number of walk trips in the Transportation category. Often, efforts to address challenges within these specific areas can occur without consideration of related issues. As a result, a decision to provide low-cost housing but locate it in an area without access to health services or other vital necessities may satisfy housing affordability goals but may negatively impact community health or limit access to job opportunities. Therefore, just as the Index strives to be holistic in its measure and assessment strategy, decision makers should take a holistic approach to resolving community issues and create strategies that can satisfy multiple goals and objectives across many policy areas.

2. **Create a toolbox of multiple solutions**

   Whether the issue is housing accessibility, social isolation, or other challenges that might impede livability goals, no one solution can address the challenges many communities are facing, especially as the population ages. Communities can create a “toolbox” with an array of strategies to tackle an issue that can positively impact livability. For example, to address housing

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accessibility, communities can implement policies to encourage the integration of universal design features within new housing units, but also offer programs to fund home repairs and improvements that make homes safer for homeowners and renters.

3. Engage a range of partners

Responding to community challenges can be difficult for one person or local organization to do alone. Communities can encourage and nurture efforts to collaborate with a wide range of partners who share similar goals but bring different perspectives to the conversation and put forth new ideas that spark solutions. Supporting community partnerships should also involve bringing new voices to the table, including intergenerational groups, people of color, industry, and anchor institutions—all of whom have a stake in creating a livable community.\(^{23}\)

4. Foster and promote participation in the community decision-making process to maximize knowledge sharing

Resources like the Livability Index can help community members assess neighborhood conditions; however, nothing replaces the voices, perspectives, and insights that community members can share to provide greater context and depth concerning the lived experience within their neighborhoods or a particular topic of concern to the larger community. Community members’ local participation in activities such as focus groups, listening sessions, and local planning meetings create learning opportunities for local officials. Participation also offers community members opportunities to connect with other members and share information about livable communities efforts, raise awareness about aging, gather data about the needs of older adults, meet potential partners, and create a shared vision for the future.

The AARP Livability Index can be a part of that multifaceted dynamic. It is just one of the many resources offered by AARP to help community leaders and advocates strengthen their neighborhoods, cities, towns, suburbs, and rural communities in alignment with these principles. In addition to the Livability Index, AARP offers leaders and advocates a wealth of resources to help fill the gaps between what people want and need and what their communities provide today. Several of these key resources are highlighted in the text box below.

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\(^{23}\) As defined by the Democracy Collaborative, anchor institutions are enterprises such as universities and hospitals that are rooted in their local communities by mission, invested capital, or relationships to customers, employees, and vendors. [https://democracycollaborative.org/](https://democracycollaborative.org/)
AARP aims to help all of us make the most of a longer life—not just in our later years, but every year of our lives. To do this, we need to replace outdated models that don’t work with those that do. This applies as much to community planning as it does to our own individual attitudes toward aging. We can help our community leaders plan for 100-year life spans and in the process enable all of us to live for today. The Livability Index is a tool to help community leaders and other engaged citizens do just that. In the words of AARP CEO Jo Ann Jenkins, “(AARP’s work) is not about how to live longer, but how to make the most of a longer life.”

“(AARP’s work)” is not about how to live longer, but how to make the most of a longer life.

—Jo Ann Jenkins, Chief Executive Officer, AARP

References


