



City of Manchester, New Hampshire

Age-Friendly **ACTION PLAN**



2025

Developed By



City of Manchester
Health Department



Prepared by

Patrick Tufts,
Consultant
Meredith Young,
Consultant

A cyclist wearing a black and red jersey and a black helmet is riding away on a paved path through a lush green forest. The path is flanked by large rocks and dense foliage. The background is slightly blurred, showing more trees and a building in the distance.

Thank you for your support!

The City of Manchester is proud to present its Age-Friendly Action Plan, a community-driven roadmap to ensure that residents of all ages especially older adults can thrive in a safe, supportive, and inclusive city. This plan reflects the voices, needs, and aspirations of Manchester's older adults, caregivers, service providers, and community partners.

Special recognition is extended to the Centers for Disease Control and Prevention (CDC) for funding the development of this plan through a Workforce Development Grant awarded to the City of Manchester Health Department. We are deeply grateful to AARP New Hampshire for providing technical assistance and guidance throughout the process, and to Granite United Way's Patrick Tufts and Meredith Young as consultants. We thank Mayor Jay Ruais and the Manchester Health Department for providing the leadership required to advance Manchester becoming an age-friendly city. Thank you Christine Lilley of Talient Action Group for her skillful design of the Action Plan, ensuring it is both visually engaging and accessible.

We also wish to acknowledge the invaluable contributions of the William B. Cashin Senior Activity Center, Easter Seals NH Adult Day Program, Meals on Wheels of Hillsborough County, and the Granite YMCA for hosting community conversations.

TABLE OF CONTENTS

03 EXECUTIVE SUMMARY	12 AN OVERVIEW OF MANCHESTER'S SENIORS	18 DOMAIN 6: WORK AND CIVIC ENGAGEMENT	23 IMPLEMENTATION RECOMMENDATIONS
04 INTRODUCTION	13 DOMAIN 1: OUTDOOR SPACES AND BUILDINGS	19 DOMAIN 7: COMMUNICATION AND INFORMATION	25 EVALUATION RECOMMENDATIONS
06 METHODOLOGY AND COMMUNITY ENGAGEMENT	14 DOMAIN 2: TRANSPORTATION	20 DOMAIN 8: COMMUNITY AND HEALTH SERVICES	27 RESOURCES AND REFERENCES
08 AGE-FRIENDLY ADVISORY COMMITTEE	15 DOMAIN 3: HOUSING	22 CROSSWALK OF RECOMMENDATIONS AND DOMAINS	
10 OVERVIEW OF THE AARP 8 DOMAINS OF LIVABILITY	16 DOMAINS 4 & 5: SOCIAL PARTICIPATION RESPECT AND SOCIAL INCLUSION		



Livingston
PARK

EXECUTIVE Summary

The Age-Friendly Manchester, New Hampshire Initiative is a strategic, community-driven effort to make Manchester a more inclusive, accessible, and livable city for residents of all ages, with a particular focus on older adults. Recognizing that some of this initiative's objectives will require more extensive planning, collaboration and funding efforts, this Action Plan identifies both short-term and long-term recommendations.

This initiative is part of a broader national and global movement to help communities adapt to the realities of an aging population and ensure that people can age with dignity, purpose, and independence.

The Age-Friendly Manchester Initiative is led by the City of Manchester's Health Department, in collaboration with the Mayor's Office, municipal departments, local nonprofits, healthcare partners, faith-based organizations, and—most importantly—older residents themselves. The initiative began with Manchester's 2022 enrollment in the AARP Network of Age-Friendly States and Communities, a program that encourages local governments to assess and improve the age-friendliness of their communities using AARP's 8 Domains of Livability as a framework. In March of 2025, a Community Advisory Committee of more than two dozen City and Community leaders was created to complete the earlier work. This Committee has focused on extensive listening and learning, including:

- Community forums and focus groups with older adults and caregivers, including direct conversations with approximately 100 City residents.

- Completed surveys from approximately sixty residents, 50 years or older.
- Stakeholder input from service providers, city departments, elected officials and neighborhood groups.
- Asset mapping and data analysis to identify gaps and opportunities.

This input has guided the development of a vision for an age-friendly Manchester and has helped shape the priorities of this Action Plan. The initiative is grounded in the following values:

- Opportunity: Addressing disparities and ensuring all residents can age well in place.
- Participation: Centering the lived experience of older adults in decision-making.
- Partnership: Aligning city efforts with those of community organizations, healthcare systems, and local and regional stakeholders.
- Sustainability: Integrating age-friendly goals into long-term planning, budgeting, and infrastructure investments.

The primary goals of the Age-Friendly Manchester Initiative are to:

- Create an environment where older adults can remain active, independent, and socially connected;
- Align city planning and services with the needs of an aging population; and,
- Support intergenerational community life and improve quality of life for all residents.

ABOUT US

Introduction



As Manchester, New Hampshire looks toward the future, the city is committed to ensuring that all residents, regardless of age, can thrive, participate, and feel a sense of belonging. In line with this vision, the City of Manchester is proud to embark on the development of an Age-Friendly Action Plan, rooted in the global Age-Friendly Communities movement championed by the World Health Organization (“WHO”) and AARP.

Launched by WHO in 2006, the Age Friendly Cities and Communities initiative is a global effort to prepare for the dramatic demographic shifts of the 21st century. It promotes the creation of environments that support healthy aging by addressing the physical, social, and economic factors that influence how people age. In the United States, AARP serves as the key partner for this movement, helping states, cities, towns, and rural communities become great places to grow up and age in place.

Age-friendly communities strive to enhance the quality of life for older adults by improving accessibility, increasing social inclusion, and ensuring that older residents have opportunities to contribute to civic life. The initiative is structured around eight domains of livability: Housing, Transportation, Outdoor Spaces & Buildings, Communication & Information, Civic Participation & Employment, Social Participation, Health Services & Community Supports, and Respect & Social Inclusion.

Manchester is home to a growing population of older adults who bring a wealth of experience, talent, and energy to the community. According to recent demographic trends, nearly one in five residents is over the age of 60, and that number is projected to increase steadily in the coming decades. As the largest city in northern New England, Manchester has a unique opportunity to lead by creating a city where older adults can remain independent, connected, and engaged.

Taking age-friendly action is also an investment in the wellbeing of all residents. Features that benefit older adults, like safe sidewalks, accessible transportation, age-diverse community programming, and affordable housing, benefit everyone, from young families to people with disabilities. An age-friendly Manchester is, by definition, a livable and inclusive city for people of all ages.

This Action Plan represents the next step in Manchester's commitment to opportunity, health, and sustainability. Developed through a collaborative, community driven process and guided by the voices of older adults themselves, it reflects the city's dedication to building a more inclusive, resilient, and vibrant future - one where aging is not merely accommodated but celebrated.

VISION & GOALS

- Manchester is a vibrant, inclusive city where residents of all ages, especially older adults—can thrive, feel connected, and live with dignity through accessible services, safe neighborhoods, and opportunities to stay active, engaged, and supported.

Guiding Principles for Manchester’s Age-Friendly Action Plan (“AFAP”)

Accessible & Age-Friendly Design

Infrastructure, services, and programs will prioritize universal design principles to support accessibility, safety, and usability for individuals of all ages and abilities, enhancing mobility, housing, and public spaces throughout the city.

Lifelong Civic & Social Engagement

The City will promote ongoing opportunities for older adults to contribute to community life through volunteering, employment, education, and participation in cultural and recreational activities.

Community-Led Planning & Collaboration

Action steps will be grounded in the lived experiences of residents and shaped through partnerships with local organizations, municipal departments, elected officials, neighborhood groups, and caregivers to reflect the diverse needs of the community.

Health, Safety, & Well-Being

The Plan will support the development of integrated services that promote the physical, mental, and emotional health of older adults, including age-friendly healthcare access, preventive programs, and safe environments.

Sustainability & Continuous Improvement

Guided by data, evaluation, and innovation, Manchester will adopt sustainable practices that ensure continuous improvement across all domains, adapting to demographic shifts and emerging challenges in aging.

METHODOLOGY & COMMUNITY

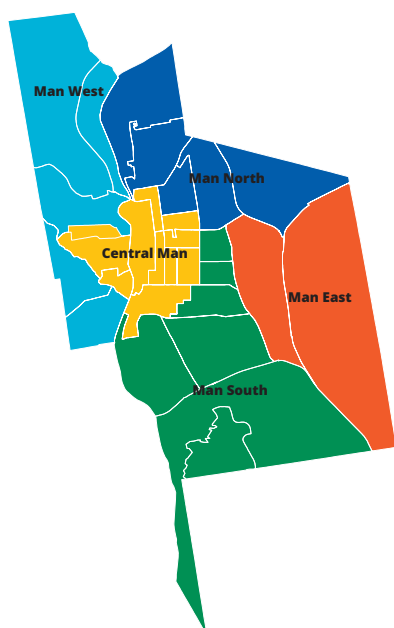
Engagement

This AFAP is grounded in findings from three critical data sources: Population-level data analyzed and published in the New Hampshire Healthy Aging Data Report, a series of community forums and focus groups hosted with Manchester's seniors, and a community survey available to Manchester seniors.

Population-Level Data

The New Hampshire Healthy Aging Data Report provides population-level data about aging in the Granite State, coupling geographically specific findings with statewide data to note anomalies across cities and towns. For the City of Manchester, data analyses divided the city into five sub-geographies (North Manchester, East Manchester, South Manchester, West Manchester, and Central Manchester).

Data points were selected based on their alignment with the eight domains of livability, as defined by AARP, as well as key demographic points (age, sex, income, marital status, homeownership status).



Community Forums and Focus Groups

As part of the listening and learning phase of the AFAP, the city conducted a series of community forums and focus groups with older adults and caregivers to ensure that the voices of those most affected by aging-related issues were central to the planning process. Approximately 100 older adults were engaged through targeted interviews and facilitated group conversations, including participants from the Easterseals NH Adult Day Program, the William B. Cashin Senior Activity Center, and clients served by Meals on Wheels and the Granite YMCA Manchester. These sessions provided firsthand insight into the daily experiences, challenges, and aspirations of Manchester's older residents, shaping the priorities and recommendations found throughout this action plan.

Resident Surveys

Residents in Manchester, aged 50 and older, were invited to participate in a Healthy Aging survey. The survey was designed and administered through AARP and could be completed on paper or digitally. The survey included 49 questions: 17 questions collected demographic data, and 32 questions aligned with AARP's Eight Domains of Livability. Fifty-nine surveys were collected between May 25, 2025, and June 23, 2025.

Stakeholder Engagement and Collaborative Planning

A successful Age-Friendly Action Plan depends on authentic community input, broad stakeholder collaboration, and a structure that ensures accountability and transparency over time. To support these goals, the City of Manchester established an Age-Friendly Community Advisory Committee to co-create the Age-Friendly Action Plan and its recommendations and sought input from the Mayor and Board of Aldermen.

ENGAGEMENT



The development of the AFAP was grounded in a collaborative, cross-sector approach. Stakeholder input was actively gathered from service providers, city departments, and neighborhood groups by including their representatives on the Community Advisory Committee. This diverse group of leaders and practitioners worked together to identify local challenges and opportunities across AARP's 8 Domains of Livability. Their collective expertise and community knowledge helped shape the plan's priorities and ensured that its recommendations are both realistic and responsive to the needs of Manchester's aging population. This inclusive process reflects the city's commitment to partnership-driven solutions and long-term sustainability.

The Community Advisory Committee ("CAC") will continue to serve as a bridge between the community and city leadership, ensuring that the voices of older adults, caregivers, service providers, and neighborhood organizations remain central to the process as elements of the AFAP are implemented. The CAC's purpose is to provide guidance, monitor progress, elevate lived experience, and foster collaboration across sectors.

Instituting a CAC offers several key benefits:

Community Voice and Representation: The aging experience is diverse, shaped by cultural background, socioeconomic and mobility status, health, and neighborhood context. A representative advisory committee ensures that the plan reflects the needs of all Manchester residents, not just those with the loudest voices or easiest access to power.

Accountability and Transparency: The CAC provides a forum for tracking progress, reviewing outcomes, and holding partners accountable to the goals of the AFAP. It can help maintain momentum, surface emerging issues, and celebrate successes.

Cross-Sector Collaboration: By including members from government, healthcare, housing, transportation, nonprofits, academia, and lived experience, the CAC fosters coordinated solutions to complex, interrelated challenges facing older adults.

Sustainability and Continuity: Municipal administrations change, but a community-led advisory body helps preserve institutional memory, maintain focus on long-term goals, and ensure that age-friendly priorities remain embedded in city planning and policy.

Inclusive Innovation: The CAC can serve as a sounding board for new ideas, help pilot projects, and recommend policy or program improvements based on community input and on-the-ground knowledge.

AGE FRIENDLY COMMUNITY ADVISORY Committee Members

Alain Bernard

Assistant Vice President of
Healthcare Services, Catholic
Charities of New Hampshire

Betsy Burtis

Chief Operating Officer, Amoskeag
Health

Kristen Campbell

Director of Health, Wellbeing and
Independence, Waypoint

Patrica Carty

President & CEO, Mental Health
Center of Greater Manchester

Stephen Cornish

Admin Director of Primary Care,
Elliot Health System, Senior Health
Center

Steve Duquette

Senior Services Officer, Manchester
Police Department

Laurie Duff

Director of Senior Services,
Easterseals NH

KR Epstein

Community Engagement Director,
Granite United Way and Mary Gale
Foundation

Jon Eriquezzo

President, Meals on Wheels of
Hillsborough County

Alex Floeckher

Planning & Community
Development Department, City of
Manchester

Catherine Frasco

Vice President, VNA of Manchester
and Southern NH, Inc.

Daley Frenette

Chief of Staff, Office of the Mayor

Mary Georges

Executive Director, Victory Women
of Vision

BoRin Kim

Associate Professor of Social Work,
University of New Hampshire

Katy Easterly Martey

Executive Director, New Hampshire
Community Development Finance
Authority

Elaine Michaud

Deputy Public Health Director, City
of Manchester

Catherine Naczas

Executive Director, Manchester
Housing and Redevelopment
Authority

Jay Ruais

Mayor (Ex Officio), City of
Manchester

Anna Thomas

Public Health Director, City of
Manchester

Patrick Tufts

Consultant

Denise van Zanten

Director, Manchester City Library

Mike Whitten

Executive Director, Manchester
Transit Authority

Meredith Young

Consultant



AARP'S 8 DOMAINS OF LIVABILITY

Overview

The AARP Network of Age-Friendly States and Communities is structured around eight interconnected domains that reflect the key factors influencing the quality of life for older adults. These domains serve as the foundation for assessing community needs and identifying opportunities for improvement:

01 Outdoor Spaces & Buildings

Safe, accessible, and well-maintained parks, sidewalks, buildings, and public spaces encourage physical activity, social interaction, and independence for people of all ages and abilities.

02 Transportation

Affordable, reliable, and accessible transportation options—including public transit, paratransit, and pedestrian-friendly infrastructure—enable older adults to stay connected to services, friends, and community life.

03 Housing

A range of affordable, age-appropriate housing options with supportive features (such as universal design and home modification programs) allows older adults to age in place safely and comfortably.

04 Social Participation

Community events, activities, and opportunities for social engagement help reduce isolation and foster a sense of belonging, purpose, and joy.

05 Respect & Social Inclusion

Public attitudes, policies, and practices that respect aging and actively include older adults in community life contribute to intergenerational harmony and reduced stigma.

06 Civic Participation & Employment

Opportunities for older adults to contribute their time, skills, and experience through paid work, volunteering, and civic engagement strengthen community capacity and individual wellbeing.

07 Communication & Information

Timely, clear, and accessible information—delivered through multiple channels—ensures that older adults are aware of and can take advantage of available services and opportunities.

08 Community & Health Services

Access to affordable health care, preventive services, mental health supports, and community-based services is essential for aging with dignity and maintaining independence.

How Domains Interconnect

While each domain addresses a distinct aspect of livability, they are deeply interconnected. For example, access to transportation directly influences social participation, access to health services, and the ability to remain in one's home. Similarly, the availability of age-friendly housing impacts health outcomes, mobility, and economic stability. Respect and social inclusion influence participation in civic life, while clear communication is vital to ensuring people know how to access programs across every domain.

Creating an age-friendly community requires a holistic approach that acknowledges these relationships and works across sectors. Improvements in one domain often create ripple effects in others, reinforcing the overall goal of making Manchester a welcoming, inclusive city for people.



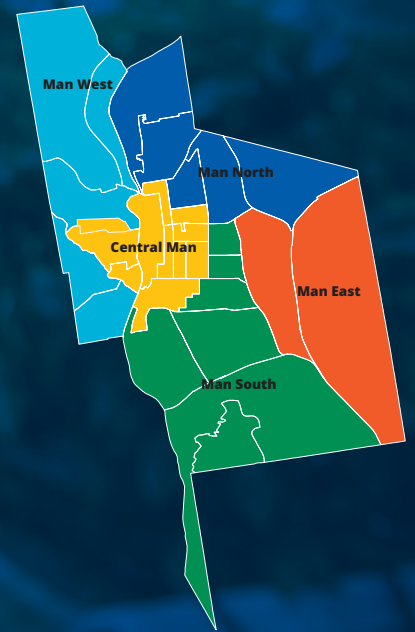
May 7, 2025 Mayor's Senior Luncheon hosted 300 Manchester older residents and celebrated their significant role in the City's past, present and future.

MANCHE

AN OVERVIEW OF Manchester's Seniors

The City of Manchester is home to approximately 16,500 individuals aged 65 or older, with the highest concentrations of seniors living in Central, South, and West Manchester. The experience of aging in Manchester varies significantly based on geography, as seniors in South, West, and Central Manchester are more likely to be living in poverty, relying on food stamps, and renting their homes. Seniors living in Central Manchester are 50% more likely to pass away in the next year than their counterparts in North Manchester. Seniors in North Manchester make, on average, 70% more than the city's average income for seniors and 2.4 times as much as those in Central Manchester.

Population-level data highlights significant differences for seniors living in Central Manchester. These seniors are more likely to struggle with chronic and acute illnesses, more likely to live alone and in poverty, less likely to speak English as a primary language and have access to technology-based communication, more likely to utilize emergency rooms, and have higher rates of behavioral health diagnoses (anxiety, depression, and substance use).



16.5K

SENIORS 65+ IN
MANCHESTER

50%↑

CENTRAL
SENIORS' DEATH
RISK VS. NORTH

70%↑

NORTH INCOME
VS. CITY AVERAGE

2.4x

NORTH INCOME
VS. CENTRAL

Domain 1

OUTDOOR SPACES & BUILDINGS

Findings

- > The rate of seniors self-reporting ambulatory disabilities in Manchester is 23% higher than the state average.
- > Seniors participating in focus groups and 60% of survey respondents identified safety and accessibility of the City's sidewalks, roadways, and parks as a priority.
- > Most survey respondents felt that improvements could be made to provide separate pathways for cyclists and pedestrians.
- > 65% of survey respondents reflected that the City's parks were "good" or "fair" with respect to safety and maintenance.
- > Few respondents had significant knowledge of existing community watch programs.
- > Seniors participating in focus groups indicated shopping (food, clothes) is often difficult, leaving seniors dependent on family. "Insta-cart" was mentioned as an asset, but not all respondents knew about it or how to set up an account for delivery.

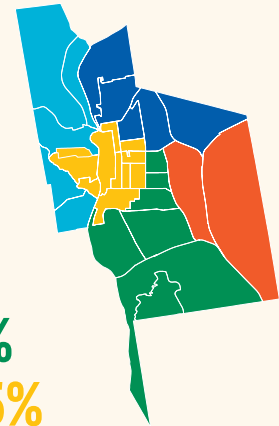
Age-Friendly Community Advisory Committee Recommendations

1. Improve Sidewalk Conditions and Walkability

- > Conduct a citywide audit of sidewalk conditions with input from older adults.
- > Repair or replace hazardous sidewalks in priority neighborhoods including Central Manchester.

% of 65+ self-reported ambulatory disability

west **21.7%**
north **12.4%**
east **16%**
south **22.2%**
central **26.5%**



- > Install curb cuts at all intersections in compliance with ADA standards.
- > Add protected pedestrian crossings and longer signal times at intersections.

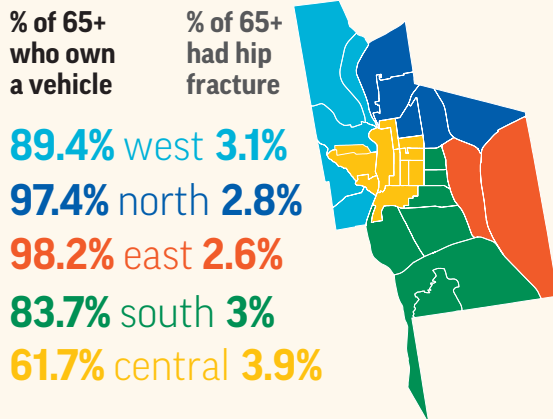
2. Improve Accessibility in Existing Parks and Green Spaces

- > Install at least ADA-accessible restrooms in high-use areas (public parks, transportation hubs).
- > Include age-friendly benches (with armrests and backs) on walking routes to libraries, grocery stores, and senior centers.
- > Encourage intergenerational gatherings in outdoor spaces through the integration of playgrounds, accessible walking trails, and seating.
- > Collaborate with law enforcement to expand the highly popular senior-friendly patrols in parks and public spaces.

3. Prioritize Snow and Ice Removal

- > Create a "Senior Priority Plow Route" map (including sidewalks) with decals and distribute through community centers.
- > Launch a neighborhood snow-removal support program for older adults with decals to identify homes needing volunteer help.

Domain 2 TRANSPORTATION



Findings

- Data highlights specific individual transportation challenges, particularly in Central Manchester, where fewer seniors own vehicles and more seniors have experienced hip fractures, reducing mobility.
- Across all questions, survey respondents reflected a lack of awareness about public transportation options in Manchester, including accessibility and convenience, affordability, public vehicle maintenance, timeliness, and special transportation services.
- Step Savers was noted as a high-quality, easily accessible option. City buses are underutilized due to lack of information, familiarity, and comfort with the system, including questions about wheelchair and walker accessibility and bus stop safety during inclement weather.
- Seniors expressed a lack of awareness of bus stop locations and a fear that they can get to a destination but will be unable to return. Others cited a desire for transportation to specific locations, including church and medical appointments.

Age-Friendly Community Advisory Committee Recommendations

1. Education and Outreach about Existing Transit Options

- Expand available training for older adults and senior service providers on how to use public transit and ride-share apps.
- Increase visibility and expand existing Bus Buddy or bus escort program.
- Provide multilingual transportation guides and materials and highlight existing language supports in public vehicles.
- Promote awareness of all available transportation services through senior centers, libraries, and online portals. These include public buses, community shuttle services, and volunteer driver programs.
- Highlight “Ride Free” opportunities to incentivize initial engagement in the public transit system.

2. Public Transit Improvements

- Evaluate and potentially expand bus routes and increase frequency, especially during evenings and weekends, with a specific focus on senior centers, healthcare facilities, faith organizations, grocery stores, and parks.
- Evaluate additional locations for installation of benches and covered rest areas near bus stops and walking paths.
- Expand on-demand or dial-a-ride services for older adults and people with disabilities.
- Ensure all transit vehicles are wheelchair and walker accessible and equipped with audio/visual stop announcements.

Domain 3 HOUSING

Findings

- > Population-level data indicate challenges to individuals remaining in their homes as they age, with a specific concern around rates of self-care and independent living disabilities in Central Manchester. This area sees particularly high rates of skilled nursing home stays and use of Medicaid long term services and supports.
- > When considering factors that would influence moving, nearly 50% of survey respondents cited the cost of home maintenance and the desire to safely live independently as major reasons for potentially moving. Half of all survey respondents were unaware of the availability of home repair and/or seasonal home maintenance services available for low-income, older adults. In focus groups, participants highlighted the challenges of the increased cost of living and requested review and potential expansion of available rebate or abatement programs for older adults.
- > Only 25% of respondents felt that affordable and accessible housing options were available for adults with varying income levels. In focus groups, seniors expressed a desire for senior-focused housing, as many own larger homes that are underutilized or are becoming challenging to maintain. Participants noted new apartments built in the city are still too expensive for seniors on a fixed income.

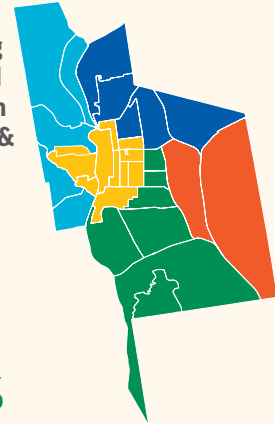
Age-Friendly Community Advisory Committee Recommendations

1. Expand Affordable Housing Options with Seniors in Mind

- > Require or encourage new housing developments to follow universal design principles (e.g., no-step entries, wider doorways, accessible bathrooms).

skilled nursing home Medicare stays/1000 65+ annually % 65+ receiving Medicaid long term services & supports

68.2 west 3.6%
52.1 north 2.9%
63.9 east 4.3%
56.4 south 3.9%
102.1 central 9.6%



- > Support Development of Senior-Centered Housing Villages, Neighborhoods, or Clusters
- > Partner with local housing authorities and developers to increase the supply of affordable housing units for seniors.
- > Prioritize senior housing developments near health care, grocery stores, parks, and public transportation to reduce isolation and enhance independence.

2. Support Efforts to Modify Existing Housing Stock to Increase Accessibility

- > Offer homeowners resources or incentives to retrofit their homes so they may remain in place.
- > Create a partnership-based grant/loan program to help low- and moderate-income older adults make necessary home modifications for safety and mobility.
- > Develop a volunteer or paid program where vetted handypersons assist with minor home repairs for older residents.

3. Incentivize Intergenerational Living Options

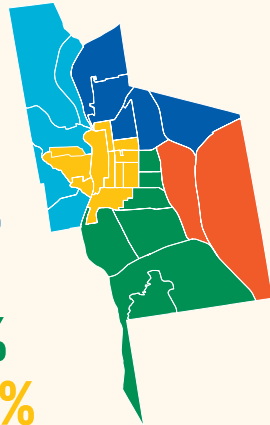
- > Review zoning laws to allow for backyard cottages, in-law suites, or garage apartments to support aging in place and multigenerational living.
- > Incentivize mixed-income and intergenerational housing projects.
- > Provide design templates and permit assistance to facilitate the process.

Domain 4 & 5

SOCIAL PARTICIPATION, ISOLATION, & RESPECT

**% of 65+
living alone**

west **44.3%**
north **25.6%**
east **20.9%**
south **26.8%**
central **33.5%**



Findings

- Approximately one in three Manchester seniors live with a depression diagnosis, with rates slightly higher in Central and West Manchester. Community rates of anxiety diagnoses are similar to those of depression. Rates of substance use disorders among Manchester seniors are 22% higher than the state average, with rates in Central Manchester at double the state average. In focus groups, seniors expressed concern over fellow seniors who are not engaged in social opportunities, reflecting the mental health concerns highlighted in population-level data sources. Conversations with providers reflected concerns about substance misuse among isolated seniors.
- Manchester seniors are significantly more likely to be living alone after age 65 than seniors across New Hampshire. Almost all focus group participants noted that they remained in Manchester because one or more relatives (often an adult child) lived nearby and provided regular care and connection. Survey respondents reflected strong personal

connections with community members and family, noting regular contact with others. About 40% of survey respondents felt a lack of companionship, a sense of feeling left out, or feelings of isolation “often” or “sometimes.” More than 80% of respondents felt there was someone available to help them at any point during the day or night.

- 60-70% of survey respondents felt that the community provides conveniently located entertainment and high-quality activities geared towards older adults. For focus group participants facing walkability/mobility challenges, large community events (especially in the downtown area) were found to be inaccessible, despite their desire to attend. Seniors not facing mobility challenges cited community attractions and events (the Palace Theatre, the Currier Museum of Art, the annual Taco Tour, and Elm Street-based events) as a place they feel welcome and part of the community. Survey respondents felt that opportunities for intergenerational engagement, cultural experiences, and elder engagement with local schools were either of poorer quality or were less well-known within the senior population.
- Seniors engaged in social groups (Easterseals NH, the William B. Cashin Senior Activity Center) felt stronger community connections and less isolation. All referenced person-to-person invitations to these services. Seniors engaged with the Cashin Senior Center were particularly enthusiastic about finding more ways to connect with community and each other. Some noted that existing senior-focused facilities may be too small for the growing number of participants.

Age-Friendly Community Advisory Committee Recommendations

1. Host Intergenerational Programming and Events

- › Create shared learning opportunities between youth and older adults (e.g., storytelling, tech tutoring, school partnerships, block parties).
- › Celebrate cultural holidays together in multigenerational settings.
- › Offer inclusive art, music, and social clubs for older adults across the city's cultural institutions.
- › Reduce age-segregation by integrating mixed-age recreation.
- › Pilot neighborhood hubs like senior cafés, drop-in centers, or public libraries with senior-friendly seating, restrooms, and programming.

2. Launch an “Age-Friendly Awareness” Campaign

- › Use media and signage to challenge ageism and highlight the contributions of older adults.
- › Feature older adults in city communications and local news.
- › Establish annual “Older Adult of the Year” or “Lifetime Contribution” awards.
- › Recognize volunteerism benefiting older adults and older adults who volunteer or mentor at city events.



3. Design Inclusive Public Engagement Processes

- › Ensure older adults are actively invited to public meetings, listening sessions, and advisory boards.
- › Provide transportation for older adults to public meetings.
- › Offer hybrid/accessible meeting formats for full participation.

Domain 6

WORK AND CIVIC ENGAGEMENT



Findings

- One in five older Manchester residents remains in the labor force. Rates of employment are highest in North Manchester, with 26.7% of senior residents reporting employment in the last year.
- Survey respondents reflected that the community offered a good range of volunteer opportunities to choose from, and existing volunteer opportunities are fairly easy for seniors to find. Among focus group participants, seniors were enthusiastic about engaging in community and senior-focused efforts, including volunteering at the William B. Cashin Senior Activity Center, assisting fellow seniors, and building a network of supports for their communities.
- Survey respondents had less awareness of volunteer training opportunities and transportation options for those wanting to volunteer or engage with their faith communities.

Age-Friendly Community Advisory Committee Recommendations

1. Create a Citywide Volunteer Network for Older Adults

- Match older adults with meaningful volunteer roles in schools, nonprofits, and city departments.
- Offer stipends or recognition programs for sustained service.
- Actively recruit older adults to serve on city boards, commissions, and advisory councils.
- Offer mentorship opportunities for older residents to guide younger leaders.
- Provide transportation vouchers, translation services, and adaptive equipment to enable older adults to volunteer.

2. Launch an Age-Friendly Business Recognition Program

- Promote age-friendly workplace policies and flexible jobs.
- Partner with employers to reduce age discrimination and provide part-time and remote work options.
- Recognize local employers who support older workers with flexible hours, caregiving leave, and inclusive practices.
- Publicize these businesses to encourage age-positive workplaces.
- Encourage local businesses to train staff on age sensitivity, readability, and accessibility.
- Create an "Age-Friendly Business" certification or decal program.
- Host an "Older Worker Appreciation Week" or honor long-serving employees in citywide ceremonies.
- Include stories and photos of Age-Friendly Businesses and accomplishments in city newsletters and social media.

Domain 7 COMMUNICATION & INFORMATION

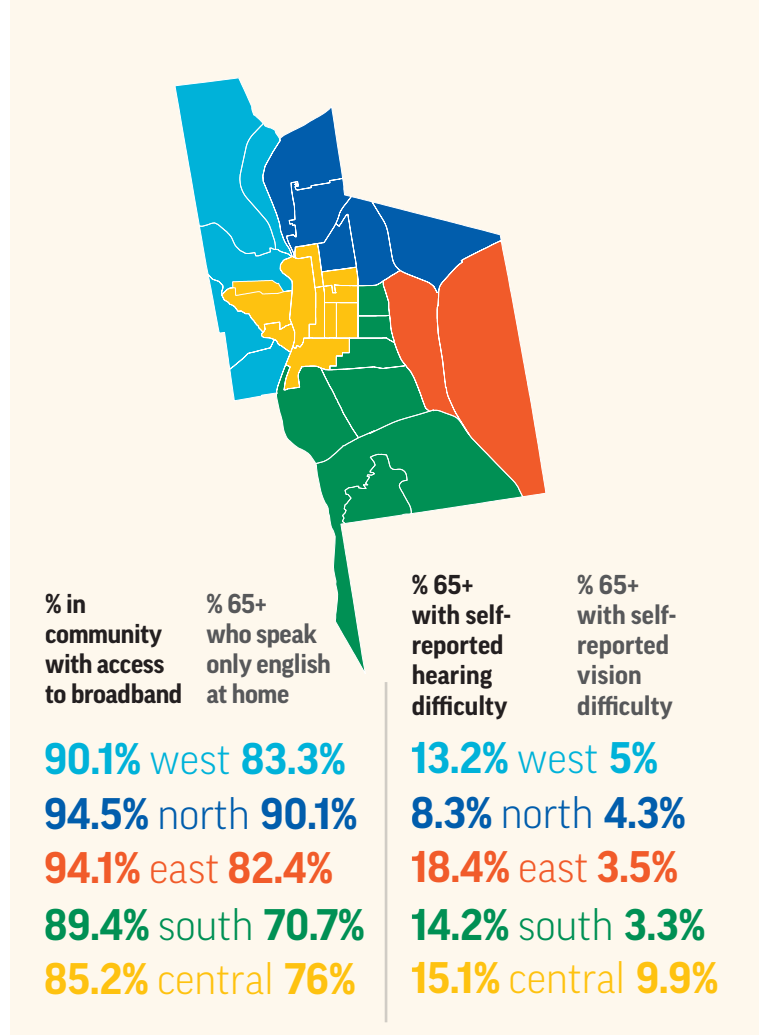
Findings

- > Population-level data sources highlight linguistic and technology challenges with communication to seniors in Central Manchester, specifically. Surveyed seniors note strong access to computers and the internet in public places, and many have reliable access to the internet at home. Despite this access, they note that adding digital communications options will likely have a limited impact on the senior population.
- > Focus group participants highlighted the power of person-to-person communications to notify seniors about opportunities, events, and services. Survey respondents noted they have moderate awareness of and confidence in centralized communication platforms for community information, with a need for a “live” navigator in person or via phone. Focus groups and survey respondents repeatedly highlighted the strong services available for seniors, but less awareness outside current participants.

Age-Friendly Community Advisory Committee Recommendations

1. Use Multiple Platforms for Public Communication

- > Provide clear, large-print, and multilingual materials, using plain language and large fonts in communications.
- > Translate key information into the most spoken languages in the community.
- > Send a printed or emailed newsletter highlighting Citywide programs, events, and services for older adults. Feature spotlight stories of local seniors, new and existing resources, and timely alerts (e.g., extreme weather tips).



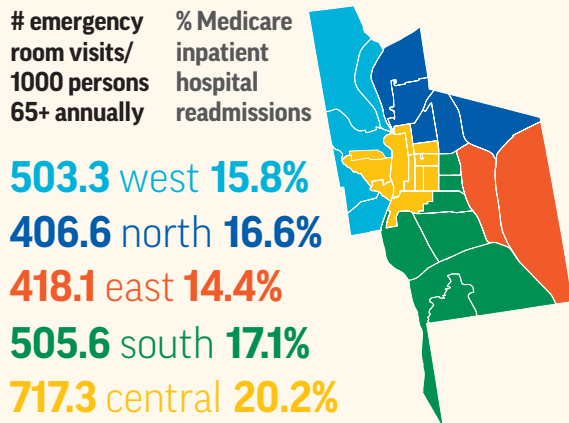
- > Make printed versions available at libraries, health centers, and senior housing, with a protocol for updating these regularly.
- > Distribute important updates via TV, radio, social media, text alerts, and postal mail.
- > Consider low-tech options like robocalls for emergency alerts.

2. Train City Staff and Service Providers in Age-Inclusive Communication

- > Offer workshops on communicating clearly and respectfully with older adults, including those with vision or hearing impairments.
- > Ensure front-line workers are aware of common accessibility needs.
- > Involve older residents in designing public outreach strategies and reviewing materials for accessibility.
- > Pilot materials with older focus groups.
- > Offer hearing loops, large screens, live captions, or printed materials at all city meetings.
- > Record and post events online for later viewing.

Domain 8

COMMUNITY & HEALTH SERVICES



Findings

- > Seniors across Manchester face chronic and acute health challenges, with concerns for seniors living in Central Manchester.
- > Focus group conversations highlighted the strength of existing services for seniors (medical providers, Cashin Senior Center, Easterseals NH Senior Programs). These services are best communicated through social networks and word-of-mouth, meaning that many isolated seniors are left unaware of them.
- > Survey respondents had positive impressions of healthcare professionals, noting their variety of specialty and respectful practices.
- > Health and social services are conveniently located, and answering services are helpful and easily understandable.

Age-Friendly Community Advisory Committee Recommendations

1. Strengthening Neighborhood-Based Prevention and Recovery Networks

- > Increase volunteer neighbor check-in programs: Organize “buddy systems” where volunteers check on older neighbors during power outages, heat waves, and storms.
- > Provide post-crisis support for older adults, including food delivery, mental health care, housing assistance, and transportation.
- > Prioritize outreach to isolated older adults during crisis recovery periods.
- > Partner with public health and hospitals to increase options for mobile clinics for flu shots, blood pressure, diabetes, oral health screenings, and hearing/vision checks. Target neighborhoods with transportation barriers.



- › Expand community health worker program for older adults to assist with health literacy, care coordination, and benefit applications.
- › Focus on cultural competence and trust-building.

2. Train First Responders on Older Adult Needs

- › Increase education of EMS, police, and firefighters on interacting with people with physical, cognitive, and/or age based limitations, including dementia, vision loss, or limited mobility.
- › Include training in cultural competency for diverse aging populations.

3. Increase Access to Affordable Mental Health Services

- › Expand access to geriatric counseling, grief support, and social-emotional wellness programs.
- › Increase training for providers in age-specific needs and dementia-friendly approaches.

4. Strengthen Hospital Discharge and Follow-Up Protocols

- › Improve coordination between hospitals, primary care, and community-based services to reduce re admissions and gaps in care.
- › Include caregiver training and home safety checks as part of discharge planning.

CROSSWALK OF RECOMMENDATIONS AND DOMAINS

	Outdoor Spaces and Buildings	Transportation	Housing	Social Participation and Respect	Work and Civic Engagement	Communication & Information	Community and Health Services
Improve Sidewalk Conditions and Walkability	●	●					
Improve Accessibility in Existing Parks and Green Spaces	●			●			
Prioritize Snow and Ice Removal	●						
Education and Outreach about Existing Transit Options		●				●	
Public Transit Improvements		●			●		
Expand Affordable Housing Options with Seniors in Mind		●	●				
Support Efforts to Modify Existing Housing Stock to Increase Accessibility			●		●		
Incentivize Intergenerational Living Options			●	●			
Host Intergenerational Programming and Events	●	●		●		●	●
Launch an “Age-Friendly Awareness” Campaign				●	●	●	
Design Inclusive Public Engagement Processes				●	●	●	
Create a Citywide Volunteer Network for Older Adults					●	●	
Launch an Age-Friendly Business Recognition Program					●	●	
Use Multiple Platforms for Public Communication					●	●	●
Train City Staff and Service Providers in Age-Inclusive Communication		●		●		●	●
Strengthen Neighborhood-Based Prevention and Recovery Networks					●	●	●
Train First Responders on Older Adult Needs						●	●
Increase Access to Affordable Mental Health Services							●
Strengthening Hospital Discharge and Follow-Up Protocols						●	●

Implementation FRAMEWORK

01 ROLES AND RESPONSIBILITIES

City of Manchester Government

- > Mayor’s Office and Board of Aldermen: Public endorsement of the plan and alignment with city-wide strategic priorities.
- > Manchester Health Department: The backbone organization.

Age-Friendly Community Advisory Committee on Implementation

- > Lead coordination implementation and evaluation.
- > Engage community stakeholders, monitor progress, and ensure accountability.
- > Provide bi-annual updates to City leadership and the community.

Engage Older Adults in the Implementation

- > Involved in co-design, feedback loops, and peer outreach.
- > Serve as ambassadors to promote participation and ensure the plan reflects lived experiences.

● Phase 1

6 months

● Phase 2

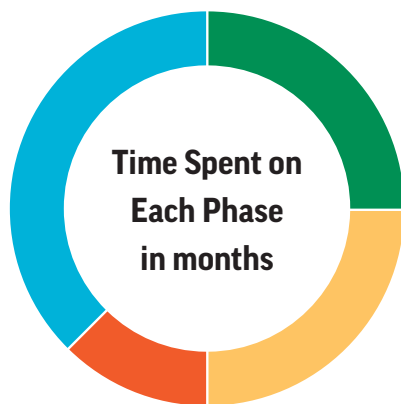
12 months

● Phase 3

18 months

● Phase 4

12 months



02 TIMELINE AND PHASES

PHASE 1

Launch & Infrastructure Building (0–6 Months)

- > Establish the Implementation Purpose and Members of the Community Advisory Committee and Identify Domain-specific Working Groups.
- > Prioritize AFAP Recommendations.
- > Create a communication strategy and engagement calendar.

PHASE 2

Early Action & Pilot Projects (6–18 Months)

- > Begin implementation of short-term, high-visibility recommendations.
- > Host community events and workshops for visibility.
- > Secure philanthropic support to build a budget and fund pilots.
- > Secure early wins to build momentum.

PHASE 3

Scaling and Integration (18–36 Months)

- > Integrate successful pilots into city systems.
- > Continue stakeholder engagement, communications, and mid-point evaluation.

PHASE 4

Evaluation and Sustainability (36–48 Months)

- > Conduct formal evaluation and community feedback review.
- > Update Action Plan based on findings.

ROLE OF OLDER ADULTS IN Implementation

Older adults are essential partners in the implementation of Manchester's Age-Friendly Action Plan. Their lived experience, local knowledge, and diverse perspectives are invaluable in shaping, advancing, and sustaining the Plan's goals. As active contributors, older adults will:

➤ Provide Ongoing Input and Feedback

Participate in advisory groups, focus groups, and community consultations to ensure that policies and programs remain responsive to real-world needs.

➤ Serve as Community Ambassadors

Help raise awareness of age-friendly initiatives, share resources with peers, and promote engagement among neighbors and networks.

➤ Support Program Development & Delivery

Collaborate with City departments, nonprofits, and service providers to co-design and co-implement programs and services that reflect the values and priorities of older residents.

➤ Mentor and Advocate

Act as mentors, advocates, and civic leaders, fostering intergenerational understanding and championing opportunity, social inclusion, and accessibility across all eight domains.

➤ Strengthen Community Resilience

Contribute skills, time, and expertise to strengthen neighborhood cohesion and advance age-friendly practices that benefit the entire community.



EVALUATION

Recommendations

RECOMMENDATION	POTENTIAL INITIAL PROGRESS MEASURE	POTENTIAL LONG TERM PROGRESS MEASURE
Improve Sidewalk Conditions and Walkability	Monitor sidewalk repairs and upgrades.	Survey residents on perceived safety and ease of walking.
Improve Accessibility in Existing Parks and Green Spaces	Monitor accessibility-related upgrades made.	Survey residents about park accessibility.
Prioritize Snow and Ice Removal	Monitor response times for snow removal in high-need areas.	Survey residents about satisfaction and trust in snow removal services.
Education and Outreach about Existing Transit Options	Monitor number of outreach events/ materials distributed.	Assess perceived ease of navigating the transit system via survey.
Public Transit Improvements	Track infrastructure upgrades (e.g., benches, signage, ramps).	Longitudinal data on senior transit usage.
Expand Affordable Housing Options with Seniors in Mind	Track number and type of senior-specific units built.	Waitlist times for affordable senior housing.
Support Efforts to Modify Existing Housing Stock to Increase Accessibility	Number of home modification grants or services provided.	Reduction in emergency relocation or falls at home.
Incentivize Intergenerational Living Options	Count new units or programs supporting intergenerational living.	Evaluate social and health outcomes of participants.
Host Intergenerational Programming and Events	Event participation rates across age groups.	Survey residents regarding intergenerational attitudes and connections.
Launch an “Age-Friendly Awareness” Campaign	Track media reach and campaign engagement (views, shares, etc.).	Sustained increase in age-friendly discourse and initiatives.
Design Inclusive Public Engagement Processes	Number of older adults engaged in planning and engagement processes.	Increased senior participation in governance or planning.
Create a Citywide Volunteer Network for Older Adults	Number of volunteers recruited and trained, number of volunteer opportunities offered.	Volunteer retention rates measure impacts on social isolation and mental well-being.

continued

RECOMMENDATION	POTENTIAL INITIAL PROGRESS MEASURE	POTENTIAL LONG TERM PROGRESS MEASURE
Launch an Age-Friendly Business Recognition Program	Number of businesses certified/ recognized.	Evaluation of program awareness among businesses.
Use Multiple Platforms for Public Communication	Number and diversity of platforms used (print, web, text, etc.), engagement rates by communication channel.	Survey residents to assess communication effectiveness and accessibility.
Train City Staff and Service Providers in Age-Inclusive Communication	Number of staff trained pre/post knowledge and attitude assessments.	Survey residents regarding satisfaction in communication accessibility, assess integration of inclusive practices in workflows.
Strengthen Neighborhood-Based Prevention and Recovery Networks	Participation rates in neighborhood health promotion and emergency preparedness activities	Response times and effectiveness during crises, survey residents regarding perceived social cohesion and mutual aid.
Train First Responders on Older Adult Needs	Number of responders trained post-training assessments.	Reduction in adverse outcomes during emergencies, feedback from seniors on first responder interactions.
Increase Access to Affordable Mental Health Services	Rates of senior utilization of services.	Changes in depression, anxiety, and isolation levels.
Strengthening Hospital Discharge and Follow-Up Protocols	Number of hospitals implementing new protocols,	Readmission rate tracking.



RESOURCES & REFERENCES

Population-level data referenced throughout this plan was published in the 2025 New Hampshire Healthy Aging Data Report. The full report can be found at: <https://healthyagingdatareports.org/nh/new-hampshire-healthy-aging-data-report/>

Additional information about AARP's Eight Domains of Healthy Living and their Age-Friendly initiatives can be found at: <https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2016/8-domains-of-livability-introduction.html>



**Oak
PARK**



City of Manchester
Health Department



**Thank
you!**

1528 Elm Street
Manchester, New Hampshire 03101

603-624-6466
manchesternh.gov/health