Seniors Take Manhattan
How NYC became a global leader for senior living—one Zumba class at a time.

By DEBRA BRUNO

January 13, 2015

When you think about great places to grow old and retire, New York City doesn’t immediately spring to mind. It’s outrageously expensive. It can be particularly dangerous for the elderly: Being struck by a vehicle is the second leading cause of injury-related death for seniors. The subway, which opened its first subterranean trains in 1904, is a system mainly reached by long, crowded stairways into the underground—not exactly senior-friendly. And although the city is no longer notorious for its murder rate—annual homicides dropped from 2,262 in 1990 to just 332 in 2014, according to the New York Police Department—areas like East Harlem, with one of the city’s largest populations of low-income seniors, still have comparatively high levels of violent crime. And—to state the obvious—it gets cold, really cold.

But you won’t see Norma Negron moving to Florida or Arizona anytime soon.

Negron starts her day with a dance choreography class. That is, unless she has her Zumba workout. Or her doll-making lessons. The chatty 69-year-old retired homemaker says she would take guitar lessons, quilting and painting, but those classes conflict with her salsa group and with a multimedia workshop where she makes jewelry, greeting cards and pillows.

It wasn’t always this way. Negron fell into a deep depression after her grandson was killed, sometimes not leaving the house except to run essential errands. She was reluctant to accept a girlfriend’s invitation to visit the senior center in her neighborhood, she says, because she thought she would only find “elderly people sitting around drawing; it wasn’t going to be any fun. But when I got here, it was totally different.

“It really, really has changed my life,” she says of the Carter Burden/Leonard Covello Senior Center where she takes classes. “I love it. And I would be here every day if I didn’t have stuff to do at home.”

Home for Negron is East Harlem, the bustling, ethnically diverse neighborhood just north of Central Park, where the smell of shrimp fried rice mixes with the sound of Latin music. The center—on the outskirts of East Harlem—is one of New York City’s 251 places for older residents to have a meal, play billiards, tinker with computers or learn Chinese fan dancing. It’s just part of what the city that never sleeps is doing to accommodate its growing population of older residents who, like 90 percent of their contemporaries across the country, would rather age in place in their own homes.

New York is “one of the global leaders” in adapting to the needs of older residents, says John Beard, the Geneva-based director of the Department of Aging and Life Course for the World Health Organization.

In 2007, WHO initiated an ambitious project to encourage age-friendly cities, with a range of goals that could apply to every metropolis in the world. The details included tangible things like non-slippery pavements, buildings with elevators, easy access to public toilets, and plenty of outdoor seating, along
with fuzzier concepts like “respect and social inclusion.” New York was the first to join WHO’s global network of age-friendly cities.

“There was a genuine attempt to consult with older people in the city” on what mattered to them, Beard says. In addition, the city drew from a number of different municipal departments, including parks, health and police, to figure out “what slipped through the net,” he says. “Arising from that, the whole world has been interested.”

What it’s meant for New York is a slew of 59 initiatives, from the creation of pedestrian “safety islands” (so that slower walkers can have a place to stop if they only make it halfway across the street before the light changes) to seniors-only hours at public swimming pools to the use of off-duty school buses to take seniors grocery shopping or to a laundromat. The program is jointly steered and funded by the New York Academy of Medicine, the New York City Council and the mayor’s office.

The improvements have been pushed, in large part, by the reality of a graying world. As birth rates drop and people live longer, many countries in the next 20 years are going to have as many citizens over the age of 65 as they have schoolchildren. “Many people think this is just the rich world,” Beard says. “But some of the most rapid aging is occurring in lower and middle-income countries like China, Vietnam, Iran and Chile.” WHO reports that the global population of people over the age of 60 was 11 percent in 2006 but will reach 22 percent in 2050.

Some 1 million people over the age of 65 call New York City home, according to the academy. And that number will only continue to grow as baby boomers head into retirement age. By 2030, the number of older New Yorkers is projected to be 1.5 million, according to the academy.

In addition to being a leader in WHO’s age-friendly cities initiative, New York has gone a step further by creating what it calls “aging improvement districts,” where many of the age-friendly initiatives are concentrated. The city started pilot programs in 2010 in three neighborhoods—East Harlem, the Upper West Side and Bedford-Stuyvesant, Brooklyn.

City Council Speaker Melissa Mark-Viverito, who represents East Harlem, says the academy of medicine approached her and asked for her support. “I said, ‘It sounds great.’ Anything we can do to make life easier for seniors, to improve their quality of life” is good. In October, Mark-Viverito announced that the city would expand the aging improvement districts to 10 more city neighborhoods, with the goal of having every city district covered by 2018.

Ruth Finkelstein, who helped launch the program, says that, for seniors, these districts are about nothing less than “reclaiming your neighborhood and reclaiming your world.” And, in that process, “pushing the boundaries of the world out, out, out.”

***

Many of the changes in New York probably wouldn’t have happened without Finkelstein. “One of my jokes was that my measure of success would be to meet in a dark alley an age-friendly initiative I’ve never heard of,” she says over lunch near her new office at Columbia University’s Mailman School of Public Health.

Finkelstein has a strong voice that can carry over a lunchtime crowd. She pauses frequently to choose her words. Aging, she says, should not be thought of as a “kind of inevitable catastrophe” but as a different “stage of life, like other stages of life, about which we have personal and societal choices.” Finkelstein, who is associate director of the Robert N. Butler Columbia Aging Center, had previously worked for the academy of medicine on issues like making AIDS treatments accessible to drug users in New York. She says the issue of aging “started to resonate” with her when WHO first introduced those at the academy to its global age-friendly initiatives. “Then I felt it was very important to take that idea and
apply it in New York City,” she says, “and expand it not just into a research model but a governance model.”

At the academy, Finkelstein helped form a steering committee that included the city’s commissioner for the Department for the Aging, which provides a host of social services for the city’s seniors. “They helped us think about a process,” says Finkelstein. Next the group took the idea to the City Council, which helped organize community consultations, Finkelstein says.

The result, since 2007, has been a profusion of senior-friendly changes throughout the city. The Department of Transportation, for instance, has built in more crossing time at 600 intersections. Countdown signals now inform people how much time they have left to cross. DOT says that after it instituted its Safe Streets for Seniors program in 2008, pedestrian fatalities for older people dropped from a high of 69 in 2003 to 47 in 2012.

The city has also installed 130 “pedestrian safety islands.” Sheila Bellen, 82, says there’s now a traffic island to help her get across the intersection of 57th and West End Avenue, near where she lives. “I can get partway, and then continue the rest of the way” after the light changes again, she says. “And they have a tree so nobody plows into you.”

Bus shelters have also been redesigned. Seniors were worried about their safety in dark, enclosed bus stops, says Shauneequa Owusu, manager for age-friendly commerce at the academy of medicine.

DOT oversaw a project where 4,000 bus stops across the city were renovated so that they’re enclosed by glass on three sides and offer benches with more seating.

During the school year, public school buses that normally sit idle when children are in class have been used to take seniors shopping. During the past school year, 1,644 seniors took 57 trips, says Lindsay Goldman, a project director at the academy of medicine.

In November, the city instituted a 25-mile-per-hour speed limit, down from 30, in an effort to spare lives. And New York offers a database of classes open to seniors for free or reduced rates at the city’s colleges and universities.

In many ways, New York is a utopia for seniors—or that’s how it seems to seniors enjoying life in the big city. “If you have to be older and want to live someplace, this is the place to be,” says Bellen, who lives near Lincoln Center. New York, she says, is “a wonderland for older people.”

Aging improvement districts took the effort a step further, implementing suggestions from residents to meet their specific needs. The academy approached then-Mayor Michael Bloomberg and the city council about establishing the districts. “Bloomberg’s base focusing on public health was important,” says Jo Ivey Boufford, president of the academy. The effort found support from others in the city, including Gail Brewer, who represented the Upper West Side on the city council and went on to become the Manhattan borough president, and Lilliam Barrios-Paoli, who moved from running the Department for the Aging under Bloomberg to become the deputy mayor for health and human services in the administration of the current mayor, Bill de Blasio.

“So we had a really lucky break,” Boufford says. “All of them had seen the success of this program and knew we weren’t just blowing smoke about how this could make a huge difference in their communities. They were ready to be champions and wanted to make sure it worked.”

With the city on board, the academy ultimately held some 30 town hall meetings. The program was jump-started with a combined $4 million from the city, the academy and private grants. Tweaking existing city projects to incorporate the suggestions of seniors—rather than launching new projects from scratch—has allowed the city to be more efficient and effective in meeting seniors’ needs while containing costs, explains the academy’s Owusu.
The academy then began to identify neighborhoods for a pilot program.

“We recognized that New York City, while enormous, is very much a city of neighborhoods,” says the academy’s Goldman. “And neighborhood identity is very strong among New Yorkers.”

East Harlem was an obvious choice: The New York Academy of Medicine is based there. “We knew we could start in East Harlem, where we live,” Boufford says, “and then get other champions.”

***

Today, East Harlem is a mixture of Latino, Chinese and African-American residents with pockets of older Italians and other ethnicities. (The actor Al Pacino was born in East Harlem in 1940.) Also known as Spanish Harlem or El Barrio, it has one of the city’s highest concentrations of public housing.

A series of interviews conducted in English, Spanish and Cantonese produced a list of requests from the district’s older residents. The older residents described what “makes it harder or easier to live in the neighborhood—that’s what you try to tackle, rather than coming in with a blueprint,” says the academy’s Boufford.

One recommendation, for example, was more benches in public spaces. East Harlem had “limited spaces” where people could sit, Mark-Viverito says. Working with the city’s transportation department, East Harlem now has about 20 more benches that can accommodate three or four people.

Senior swim times at Thomas Jefferson Pool at 112th Street and First Avenue was another improvement. Seniors were hesitant to visit public pools during regular hours, says Mark-Viverito, because “people didn’t feel comfortable or safe” with little kids running around. Maria Pacheco, 73, a resident of East Harlem, was one of the first seniors to join the swim and encourage her neighbors to do so as well.

“I took attendance and greeted them,” she says. Even with the pool to themselves, many seniors were reluctant at first because of the idea of wearing a bathing suit and being exposed,” she says. “But being that [the pool] was closed, they were able to go in, and they love it.”

Eventually, she says, she stopped taking attendance because it left her no time to enjoy the swimming herself.

Now the pool, which is open for seniors 9-11 a.m. three times a week in the summer, has a disc jockey and an occasional performance by the Harlem Honey and Bears Swim Club, a synchronized swim group open to those older than 62.

The extended pool hours eventually expanded to 15 other public pools in the city.

Union Settlement, a settlement house in East Harlem that was first opened for immigrant communities in 1895, takes Pacheco and other seniors to a gym at Asphalt Green, which offers low-cost sports and aquatics programs for seniors at its Upper East Side location.

Adding a laundry room inside Corsi Houses, a 172-unit seniors-only building on 117th Street, was another improvement. Many East Harlem public housing apartments had closed their laundry rooms for “issues of safety and maintenance,” says Mark-Viverito. Now the building has a laundry room just for seniors so they don’t have to travel five to seven blocks to do their laundry, she says.

As a senior’s world grows smaller, “your block, your building, your apartment, your neighbors, your corner store, your local library, your Y, your drugstore loom all the larger in importance to you,” says Columbia’s Finkelstein. A place where the owner knows how you take your coffee or can help you get in the door—or even offer employment—is that much more important.
Settepani, an Italian restaurant on Lenox Avenue, is one such place. The restaurant has been an institution in East Harlem for 14 years, serving minestrone, pasta and pastries in a casual eatery with outdoor seating in the summer. Like many other businesses in New York, it has become an important part of the age-friendly initiative.

Incorporating businesses that employ and cater to seniors is an important part of New York City's aging initiatives. East Harlem Cafe, where the owner offers a crossword-puzzle club and a weekly 99-cent pancake deal, is one company where seniors in the area feel at home. | Mark Peterson/Redux

Owners Leah Abraham and Nino Settepani have owned businesses in the city since the 1980s and now have both a bakery in Brooklyn and the East Harlem restaurant. The business was one of the first to win the city's "Age Smart Employer" award. The couple says that in matters of employment, age is something to value.

The bakery, for instance, has one employee, 62, who has been a "pillar" to Nino Settepani for years. "He wants to retire, and I'm trying to hold him back from retiring," Settepani says. "He has a lot of innate knowledge that you don't even think about."

The bakery also for years employed a woman in her 70s who would come before 6 every morning to open up the shop. She was so reliable that "I didn't have to worry about getting a phone call: 'Nobody's here to open the store,'" he says.

Over on Lexington Avenue, East Harlem Cafe is another of the area's age-friendly businesses. Owner Michelle Cruz offers a Saturday crossword-puzzle club, a walking group and a very popular 99-cent pancake deal each Friday. "Seniors can come in with their friends and they can gather and socialize for a while," she says.

The walking group meets at the cafe each Saturday for a cup of coffee and then walks over to Central Park. "When I can get them to do four miles, we'll do it," she says. "Other times, we just go around the reservoir."

***

The Upper West Side is only a couple of dozen blocks away from East Harlem, but it is worlds away in terms in wealth, ethnicity and interests. It also became one of the early aging improvement districts. The district has produced a guide to grocery stores, which lists the 23 stores on the Upper West Side, from Fairway to Whole Foods, that have handicapped-accessible bathrooms, single-portion servings of meats and fish, and seating, if someone needs to take a break. The PDF displays symbols to show which stores allow online shopping, a senior discount or delivery services. (The Upper East Side subsequently produced a similar guide in 2012.)

Bedford-Stuyvesant in Brooklyn was the third neighborhood to become an aging improvement district, under the auspices of the Coalition for the Improvement of Bedford-Stuyvesant. Seniors there have asked for more benches, safety programs organized by the area's block associations, and special hours at banks to help seniors learn the details of electronic banking.

But New York is not the only city to rethink the way it works with its older seniors. Sandy Markwood, CEO of the National Association of Area Agencies on Aging, says the group has done several national surveys to determine whether U.S. communities are doing enough to face their aging populations.

The first survey, in 2005, which was done when the first baby boomer turned 60, determined that "communities were not prepared for an aging population," Markwood says. And a second survey in 2010, when baby boomers turned 65, showed "some progress," but not enough.

Even so, there is a growing national interest from city and county officials “as they realize their population is growing older,” she says. Olivia Mastry, who runs Minnesota’s Act on Alzheimer’s advocacy group, has
helped 33 communities in that state become what she calls “dementia-friendly.” The communities themselves figured out what they might need to do to help cities and towns facing problems with dementia.

“Half the people who have dementia today never receive a formal diagnosis,” she says. “And most providers will tell you they don’t feel equipped to handle the disease.” Yet, she adds, as many as one out of nine people over the age of 65 has some form of dementia.

The solutions in Minnesota have ranged from gas station signs in Cambridge that say, “Have you had your memory checked? See your doctor today” to training sessions in St. Paul to help business owners, law enforcement officers, librarians and others become more sensitive to those with cognitive impairment, she says.

Atlanta has also won notice for its programs. One of the biggest problems in the sprawling region is lack of transportation for seniors, says Mary Blumberg of the Atlanta Regional Commission. “Atlanta has terrible traffic problems, but it has some public transport,” she says. “In rural areas, there are no options.”

So Atlanta provides vouchers that seniors can use to buy public transportation or even give to a family or friend to compensate them for taking them to medical appointments or shopping. “They can choose how to use them,” Blumberg says.

The District of Columbia has used the New York model, says Gail Kohn, the coordinator for D.C.’s age-friendly program. D.C. has just finished its planning process and has designated 12 businesses age-friendly, she says.

On a national scale, AARP will launch a tool that will serve as both a scorecard and a nudge to cities: a livability index, with a special focus on aging residents, of course. The index, to be launched in April, will be the nation’s “first comprehensive livability index for every block across the country,” says Rodney Harrell, director of livable communities for AARP’s Public Policy Institute.

“For instance, it will look at access to grocery stores: how many of them are within a quarter mile of your house?” he says. Every ZIP code in the country will get its own score. On a scale of 0 to 100, the segments of each area will be rated on an average of seven themes, such as housing, transportation and health. People can also go in and rework the score based on services and characteristics that matter most to them. For instance, if housing doesn’t matter because you’re already comfortable where you live, you can exclude that factor, he says.

“The main lesson is that we need to plan for all ages and abilities and incomes,” Harrell says. “By doing that, aging needs aren’t in a box. And if we do that well, we will meet the needs of a large part of the community and will have ‘communities that work for all people,’” he says.

That lesson—that age-friendly is also moms-with-strollers-friendly and wheelchair-friendly and distracted-person-walking-down-the-street-with-his-eyes-on-his-iPhone-friendly—is one that comes up often.

In fact, many scholars of aging say that it’s a mistake to imagine the needs of older adults as a separate issue.

“When we talk about aging services, it’s often been narrowly focused on Medicare, Medicaid and the Older Americans Act,” says Amanda Lehning, an assistant professor at the University of Maryland’s School of Social Work, who has studied aging issues. “What’s really exciting now is that the aging-friendly community movement is really broadening the discussion about what kinds of things we should be doing so older adults can continue doing things they’ve done throughout their lives.”

“It’s beyond thinking of older adults as just a disability or cognitive decline,” she says.
Mildred Warner, a professor of city and regional planning at Cornell University, says many of the age-friendly initiatives are biased toward older adults, which misses a larger concept.

“We run the risk of missing an opportunity to use [age-friendly actions] to create cities that are good for growing,” she says. Her focus is on multigenerational planning. One example, she says, is re-imagining schools as community assets, or, as in New York, using school buses for seniors in the middle of the day.

“In our society, we’re divided by a lot. We need to create things to bring us together,” she says.

***

This enthusiastic and life-affirming sense of aging does ignore some hard realities.

The truth is that aging is more than just a state of mind. Bodies wear out, and at some point nearly every human is going to need more than just a smooth sidewalk. Evelyn Granieri, chief of the Division of Geriatric Medicine and Aging at Columbia's College of Physicians and Surgeons, says few people are talking about the oldest and most frail seniors. “They’re almost invisible,” she says.

In the medical establishment, geriatrics is lower than the lowest rung of prestige, and few medical schools devote much attention to the field. Last year, Granieri says, there were fewer than 100 geriatricians trained in the U.S.

At the same time, the number of frail older people is growing, and many are facing issues with dementia. “When you reach 85, there’s a 50 percent likelihood that you’re going to have some form of dementia,” she says. “And there’s almost nobody who’s 100 who is cognitively intact.” Part of the reason is that people are living longer with diseases like diabetes, which is connected to dementia, she says.

When the baby boomers age, the country will be in trouble, she says. “Dementia is real, pervasive, misunderstood and unattended to. It’s almost a pandemic,” Granieri says.

In the meantime, New York seems to be doing what it can to put resources in place for many of its aging residents. Older people “want to stay active and engaged in the community,” says the academy of medicine’s Boufford. “They want to give back. It’s this huge resource that’s wasted.”

Of course, older New Yorkers are New Yorkers first and older people second. They take pride is being New Yorkers.

Pacheco says she considered a relocation to Queens once, when she was younger. “But it was a long way for me” to get back to East Harlem, where the rest of her family lived. “There, I needed a car. Here, you don’t need a car.”

Dolly Acheson, 76, who has lived in New York her entire life, says her daughter would like her to move to Houston to be closer to her. “I went to an active senior living center in Houston,” says the retired telecommunications worker, over fruit smoothies at the Moonstruck Diner in midtown Manhattan. “Not my thing.”

Rosalind Yu, 73, who has lived in New York since 1970, says she has absolutely no idea whether New York is getting better for older residents. “When I was not old, I didn’t pay much attention,” she says. “But when I get old, I find everything is nice, easy and convenient.” One of her favorite activities is traveling from her home in Flushing, Queens, to shop around the city, including a green market at Union Square in Manhattan during the summer, a Greek supermarket to buy feta cheese and a Russian supermarket in Rego Park, Queens, for smoked salmon. “I just love to run around,” she says.

And Sheila Bellen warns visitors that she’s got a packed schedule. “Make sure,” she tells a reporter who wants to set up a meeting, “it’s not on a Thursday when I go to my tap class.”