Age Friendly Neighbourhoods some issues/more questions

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Key Features of an Age-Friendly Community

- pleasant, secure and physically accessible outdoor spaces and public buildings
- well-designed, affordable and secure housing choices
- well-maintained and accessible roads and walkways
- affordable and accessible public transportation
- secure neighbourhoods
- supportive health and community services
- Respectful relationships
- opportunities to be socially active
- opportunities to participate in suitable volunteer, civic and employment positions
- information that is easy to access and understand

What Is an Age-Friendly City?

Older people face increasing challenges due to the sensory and other changes that age brings. In an age-friendly community, policies, services and structures related to the physical and social environment are designed to support and enable older people to "age actively" -- that is, to live in security, enjoy good health and continue to participate fully in society. Public and commercial settings and services are made accessible to accommodate varying levels of ability.

Age-friendly service providers, public officials, community leaders, faith leaders and business people:

- recognize the great diversity among older persons,
- promote their inclusion and contribution in all areas of community life,
- respect their decisions and lifestyle choices, and
- anticipate and respond flexibly to aging-related needs and preferences.

Why Cities

- Making cities age-friendly is one of the most effective policy approaches for responding to demographic ageing.
- Major urban centres have the economic and social resources to make changes to become more age-friendly and can thus lead the way for other communities within their countries.
- In the developed world, three-quarters of older persons live in cities.
- In developing countries proportionately more older persons live in rural areas but rapid urbanization is gradually reversing the picture

The WHO project

- It focused on the "lived" experiences of older people -- that is, what seniors experience as age-friendly in their daily lives in the community - and involved them as full partners from start to finish.
- The process:
 - WHO and partners from many countries would first consult with older persons, and then with community leaders and experts, to identify the major physical and social barriers to active ageing.
 - Each partner would then use this knowledge to develop, implement and evaluate local action plans to make the environment more age-friendly.
 - To share the learnings, the WHO will compile the results into practical "Age-Friendly City" guidelines that could be used by cities around the world.

The Canadian Initiative

- WHO, with the Public Health Agency of Canada (PHAC) and other partners, produced the publication <u>Global Age-friendly Cities: A Guide</u>. The Guide was developed through an extensive series of focus groups carried out in 33 cities of varying sizes. The research included four Canadian sites—Halifax (NS), Portage la Prairie (MB), Saanich (BC) and Sherbrooke (QC).
- The initiative captured the views of people aged 60 and older who live in lower and middle-income areas, and the observations of caregivers and of service providers from public, voluntary and private sectors.

The Literature

Neighborhood Environment in Studies of Health of Older Adults: A Systematic Review

- Primary emphasis on health and aging. This health focus reflect the whole aging field.
- SES of the neighbourhood rather than the household because measures of SES have different meanings when the population is over 60.
- Neighbourhood defined by geography . Very few studies measured neighbourhood features.
- Objective and perceived neighborhood features are different -- latter should be included in future studies
- There exists a continuum of mobility amongst seniors many drive cars; others need ties for transportation

Transport & Mobility

- People want to age in place but...
- If can drive then aging in suburb works
- choosing and selecting "pieces of the city"
- the experience of the "city by proxy" indicates the suburban model failure to adapt at the same rhythm as its residents aging

Health and Healthcare Access of Ethno-cultural Minority Older Adults: A Scoping Review - Final Report 2011

- Lack of information on ethnocultural groups other than Asian
- Lack of information regarding all health issues and health service access across all ethnocultural groups
- Concern regarding :
 - lack of detail on social demographics of ethnocultural groups being studied (e.g., time since immigration, educational levels etc.). Feedback stressed the need for information producers and users to understand that "ethnocultural" is not a homogeneous concept even within specific groups
 - bias in information due to documents being generated by a limited number of individuals (authors)

Many US studies concerned with Aging at Home in the Suburbs

- Can be done for extended periods of time if there are sufficient economic and social resources upon which seniors can depend, I as well as regular interpersonal contacts. HOWEVER questions must be raised about those for whom these two resources are nonexistent.
- Residential living can be a model for the elderly person whose autonomy is in decline. HOWEVER, these facilities are far from what people consider a meaningful "home". locating serviced-housing within single-family houses districts would allow elderly to maintain socio-spatial familiarity with the Neighborhood

Issues/Questions

- NA suburbs that are car reliant are problematic
- Aging in place studies show that if people inhabited a neighborhood for a long time it helps them to accept reduced mobility
- Heavy focus on well post WWII baby boomers at moment;
 - assumptions of responsibility to be active
 - assumptions about resources and choice
- Elderly people have a range of mobility, resources & are diverse – neighbourhoods need to address this.

Issues/Questions

- People who adapted in suburbs were long time residents. Others would have moved several times – more the norm of the future?
 - Can one make a neighbourhood like OWN co-op where people who know each other live.
- need more studies with racially/ethnically diverse communities
- community-based participatory research e.g. include older community members in neighborhood research and advocacy efforts