Citizen Services Community Inclusion and Investment City of Edmonton 18th Floor, Edmonton Tower 10111 104 Ave NW Edmonton, AB T5J 0J4



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Seniors Centres of the Future Final Report

Citizen Services | Community Inclusion and Investment City of Edmonton

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For more information

Contact Seniors Portfolio, Citizen Access and Inclusion, Citizen Services Department, seniors@edmonton.ca, 780-496-4938

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Final Research Report: Executive Summary

As a recognized member of the World Health Organization's Network of Age Friendly Cities and Communities, the City of Edmonton has committed to listen to the needs of its aging population, assess and monitor its age-friendliness, and work collaboratively with older peoples and across sectors to create accessible physical environments, inclusive social environments, and enable service delivery methods. City Council's Seniors Declaration affirms that:

- Individuals are respected regardless of age. All generations have much to teach and learn from each other.
- People of all ages are safe in their homes and neighbourhoods. Safety has physical, environmental, financial and health aspects.
- The City 's transportation systems, urban design and physical infrastructure allow all people to participate in full lives. No one is barred by mobility or resources from involvement in city life.
- Older people have ready access to programs, employment, activities and services that help them stay engaged, respected and appreciated.

Seniors centres are part of a continuum of service delivery that provide programs, resources and information to Edmonton's aging population. Seniors Centres of the Future is a research project commissioned by the Community Inclusion and Investment Branch to explore best practices, needs and potential of seniors centres in Edmonton, in order to anticipate and meet the changing needs of a growing population over time.

The project presents a unique and timely opportunity to provide academics, practitioners, older adults and community stakeholders with the opportunity to build a collective vision for seniors centres that anticipates changing needs over time, and that can guide practice with an informed, measured and collaborative approach.

A literature review was completed with guidance from an Academic Advisory Committee comprised of academics at the University of Alberta who have an interest in seniors and senior-related issues (refer to Appendix AA). The literature review looked at research related to the best practices and possibilities for seniors centres in North America and

Executive Summary

around the world. An environmental scan explored the visions, mandates, programs and services currently provided by seniors centres in Edmonton (refer to Appendix AB).

The results of this literature review and environmental scan were used to develop materials for a public consultation that included a survey, sounding board sessions and interviews with key stakeholders.

The indicators that emerged as a result of that consultation were grouped as key themes and then contrasted and/or validated to the literature review and environmental scan in order to identify the following gaps, barriers and challenges:

- Ageism
- Target Demographic
- Cultural Diversity
- Intergenerational Programming
- Seniors Centres as Community Hubs
- Social Inclusion
- Volunteer Programs
- Health and Wellness
- Partnership and Collaboration
- Capacity and Quality

The Seniors Centres of the Future Project has undertaken a process to engage seniors, academics, practitioners and community stakeholders to identify the first steps in working collectively toward an achievable vision that ensures seniors centres play an essential role in the lives of Edmonton seniors, and continue to meet the needs of seniors and their communities.

Final Research Report: Edmonton's Aging Population

Aging is a process of progressive change in an individual's biological, psychological and social structures. Older adult and senior are flexible terms. Today, older adult is commonly used to describe anyone over the age of 55. Senior usually means anyone over 65 – the traditional age of retirement.

Edmonton's aging population is changing in regard to composition, lived experience, skills, needs, health, resources and family composition, and in expectations of service

providers, like seniors centres. At the same time, public policy, and health, social and recreation services are changing - creating both opportunities and challenges for seniors.

The senior population (65 years and older) comprised 12% of the Albertan population in 2015. When the last Baby Boomer (people born between 1946–1964) turns 65 in 2031, seniors are expected to represent 20–25% of the population, both nationally and provincially (AASC, 2014; MacRae-Krisa and Paetsch, 2013). As early as 2025, approximately 1 in 5 Albertans will be over the age of 65 (FCSS, 2008).

While the aging of Baby Boomers is a key trigger for this dramatic increase, it is not the only factor: longer life expectancies and decreasing fertility rates are also contributing to this demographic shift (AASC, 2014). The most significant increase in the

The globalization of ageing has clearly diversified this demographic along sociocultural lines, but even within societies there is a great range of older adults with varying preferences and needs. The older adult market segment may include people as young as 50, and those up to 100 and beyond, and young-old and old-old definitions may not sufficiently segment this wide-ranging age group. It has already been argued that even people of the same chronological age can have diverse health profiles and living needs.

 WHO Global Forum on Innovations for Ageing Populations

population is expected to occur among our eldest seniors, people aged 85 and older (Federation of Canadian Municipalities, 2015).

There is an inverse relationship between age and income: as seniors grow older, their income decreases. Poverty among seniors will increase in coming years according to a recent analysis of the economic circumstances of Canadian seniors (Shillington, 2016).

Edmonton's Aging Population

Old Age Security and Guaranteed Income Supplement rates are falling further behind median income levels and the vast majority of boomers retiring without employer pension plans have totally inadequate retirement savings. The net effect is a growing senior population that will require increased social supports and community connections in order to sustain their quality of life and wellbeing over time.

Edmonton's seniors are diverse. The number of immigrants and visible minorities within this population is significant: immigrants currently comprise 30% of people aged 65-74, and 10% of that age group are visible minorities. Among people aged 75 and older, 30% are immigrants, and roughly 8% are visible minorities (AFE, 2015). People whose first language is neither English nor French are projected to comprise almost one-third of the total population by 2031 (MacRae-Krisa and Paetsch, 2013).

Immigrant, refugee and newcomer seniors face increased risk of vulnerability due to the systemic, cultural and language barriers they face. Connection to community, resources, information, and support is particularly important for this population (Zenev and Associates. 2015).



According to the Demographic Planning Commission, 'families are more diverse and increasingly separated by distance. Family size is shrinking, resulting in fewer children to support aging parents. Non-profit services say they are often filling roles that families used to assume' (2008). Yet, it is estimated that as much as 80% of the care for older adults is provided by family and friends (City of Edmonton, 2010). There is a gap related to supports for seniors with limited or no family supports, and it is essential that caregivers have the supports required to provide this care.

Edmonton's Aging Population

In the Government of Alberta's *Profile of Alberta Seniors* (2010), 47% of seniors report a health-related condition or problem that limits their everyday activities. More than a third of these seniors indicated their disability is severe or very severe. The report estimates these numbers are roughly the same for seniors in Edmonton.

The Federation of Canadian Municipalities (2015) estimates that approximately 8% of seniors living in Canada's cities are low-income and economically vulnerable. This number is almost double for seniors living alone. The majority of people - particularly women - are living alone by the time they are in their 80s, primarily because of widowhood (Menec, 2016). People living alone are also at risk of social isolation and loneliness, which has negative implications for their health (Menec, 2016).

The way older adults enter into retirement is changing, as more and more people are working past the age of 65, and transition into retirement via part-time, bridge, and encore jobs (Kojola and Moen, 2016).

And while professionals and organizations in the senior sector are aware of this imminent shift (77% in an informal US web survey reported being concerned about the wave of Baby Boomers), only 40% of organizations have staff currently dedicated to meeting the needs of Baby Boomers and only 12% had developed a plan to meet these needs (MacRae-Krisa, and Paetsch, 2013).

Issues related to finances, diversity and family care will be compounded by the next wave of older adults, and the services offered by seniors' serving organizations must evolve to meet those needs if they are to remain relevant. The senior population is not just becoming larger - it is becoming increasingly diverse. There is wide variety in age, income, ability, origin and other traditional demographic markers. Seniors have diverse experiences and backgrounds, living arrangements, strengths and aspirations, support systems, levels of education, needs and desires.

Final Research Report Seniors Centres

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The National Institute of Senior Centres in the US defines a senior centre as "a community focal point on the aging continuum where older adults, as individuals or as groups, come together for services and activities which enhance their dignity, support their independence and encourage their involvement in and with the community" (AASC, 2014). In general, seniors centres are places that facilitate socialization and connection for older adults; they provide a wide range of recreational programming that contributes to health and wellbeing, lifelong learning and social support; and they support aging with dignity, independence and engagement (Whitfield and Daniels, 2014).

Multi-purpose seniors centres provide and coordinate a variety of programs and services, which may include (Pardasani, Sporre and Thompson, 2009):

- Meal and nutrition programs
- Information and assistance
- Intergenerational programs
- Social and community action opportunities
- Social day care
- Adult day care
- Ombudsman programs

- Support services for caregivers
- Health and wellness programs
- Recreational opportunities
- Transportation services
- Volunteer opportunities
- Educational opportunities
- Employee assistance
- Arts programs



Seniors Centres

The City of Edmonton's Senior Centre Plan (2011-2012) outlines essential core services that should be available to all seniors through seniors centres (see Table A1). This suggests the City of Edmonton already envisions seniors centres as multi-purpose service providers. It is also important to note that recreational programming, which is a key function of seniors centres, can be interpreted very widely. What may be considered 'recreation' by some, for example, might be understood as 'leisure' for others. For the purposes of this report, recreation is defined as physical fitness, mental fitness, creative arts and social opportunities.

While there is no standard definition or detail of senior centre programs and services across Canada, a movement has begun to determine best practices for them (Whitfield and Daniels, 2014). In 2013, the Canadian Research Institute for Law and the Family completed a literature review and environmental scan to determine the best practices of multi purpose seniors centres, which include:

- Appealing to a rapidly changing senior population
- Understanding the characteristics of the local older adult population
- Ensuring facility design is age-friendly
- Offering diverse programming
- Forming strategic partnerships for sustainability and collaboration
- Ongoing evaluation of programs and services

Seniors Centres

Table A1
Seniors Centre Plan 2011-2021 Core Services

Core 1: Social Services	Core 2: Recreational Programs
Information and referral, one-to-one supportive counseling, support groups, education, advocacy, outreach and other assistance	Physical fitness, mental fitness, creative/arts and social opportunities
Core 3: Nutrition Services	Core 4: Health and Wellness
Provides regular access to nutritious and reasonably priced food choices	Regular health related information sessions and referrals to health professionals; could include health seminars such as fall prevention, 'aging in place' and medication management
Core 5: Community Development	Core 6: Volunteerism Opportunities
Collaborate and work with both citizens and other community partners to provide programs and services that meet the needs of seniors that enhance their quality of their life. This could include providing supports to seniors to remain in their home and community.	Provide volunteer opportunities for seniors (both within and outside the centre) and have a plan for volunteer development, management and retention.

Final Research Report: Aging in Place

Public policy has shifted towards seniors programming and related funding that supports 'aging in place' in the community. This policy shift means that community services must meet the needs of seniors as they 'age-in-place'. Accessible and affordable community-based health, wellbeing and social services will be required in order to meet the needs of the increasing seniors demographic who will be less likely to move to a congregate or institutional setting as their health and wellness needs change.

In 2010, the Government of Alberta released the *Aging Population Policy Framework*, which outlines the roles and responsibilities the government will undertake to respond to our changing and aging population, and identifies a need for coordinated policy development, partnership and affordable services for Alberta's aging population.

Aging-in-place requires "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level" (AASC, 2014). Given the growing expectations that older adults have regarding aging in place, services will need to be able to meet the needs of seniors differently.

Baby Boomers are changing the way we think about aging, and as they continue to grow older, will profoundly impact where and how people age (see Appendix AC). As they age, Baby Boomers will continue to change the way we see family dynamics, volunteering and civic engagement, health and wellbeing, recreation and leisure and the purpose and

The future of senior centres is being shaped by the most volatile and active generation in modern history. As a consequence, these facilities are poised to become prototypes of dynamic ageing – redefining the concept of what it means to be an elder.

Ready or Not: Senior Centres
 Steel for Boomer Barrage

potential of senior services (Malonebeach and Langeland, 2011; Hinterlong & Williamson, 2014).

Baby boomers have different expectations regarding work and retirement, and the overwhelming majority plan to remain in their homes as they age (AFE, 2015; Federation of Canadian Municipalities, 2015). The majority of respondents (87%) to the Future of Seniors Centres survey think that it is very (58%) or somewhat (28%) likely that they will stay in their current home - age in place - as they age.

Senior centre programming must support and foster aging in place, and include recreational activities that support social and intellectual development, and

Aging in Place

promote health and wellbeing. But it must also meet the needs of seniors as determined by seniors. Seniors must be involved in all stages of program development, including implementation and evaluation (Pardasani, Sporre, and Thompson, 2009).

For example, Baby Boomers demonstrate a greater interest in educational programming, and travel and volunteer opportunities, while older seniors may be more interested in the kinds of activities more traditionally associated with seniors centres, such as table games and crafts. Including seniors in program development can help to meet the wide-ranging needs of a very diverse population.

Health and wellbeing has long been a focus of seniors centres in Edmonton. Most share a mandate to facilitate independent living in the community. As a result, seniors centres are uniquely positioned to provide service and support for seniors who wish to remain in their homes and home communities as they age (AASC, 2014; MacRae-Krisa and Paetsch, 2013; Whitfield and Daniels, 2014; ANSRO, 2011).

Seniors centres of the future will not look the way they have in the past. They have already evolved from places that primarily provided space for social interaction, into multi-purpose centres that offer recreational, nutritional, health and wellness, and social service programs, as well as community development and volunteer opportunities. This positions them as key partners in the development and delivery of seniors' services, and seniors centres have an important role to play in supporting healthy and active aging, and aging in place (Government of Alberta; ANSRO, 2011).



The nature of the way we as a society care for our elders is changing, and will continue to change as the Baby Boomers and Zoomers enter that demographic. Seniors centres may be uniquely positioned to respond to those changes, but it is becoming increasingly apparent that our response must be an informed, coordinated and holistic effort.

Final Research Report: Active Ageing: A Policy Framework

When it comes to growing older, age is just a number. Health, ability, independence and participation differ significantly between seniors of the same age.

When we develop policies and programs for older adults, we need to keep these differences in mind, and the *Active Ageing: A Policy Framework* (World Health Organization, 2002) is a way to think about how we can best meet the needs of all adults as they grow older.

The purpose of the *Active Ageing: A Policy Framework* is to support the development of community-based approaches that take into account the truly diverse experience of aging, and encourage health, activity, participation and connection as a way to sustain quality of life over time.

Seniors centres in Edmonton have always been community-based spaces where the health, activity, participation and connection of seniors is valued and supported.

Active ageing is a holistic view of wellness that shifts the focus away from disease management into areas of prevention and proactive strategies that enable individuals to live as fully as possible.

By developing effective, efficient and affordable programs, services and supports that align with the seven dimensions of active ageing, senior centres can strengthen their position as community active ageing hubs.

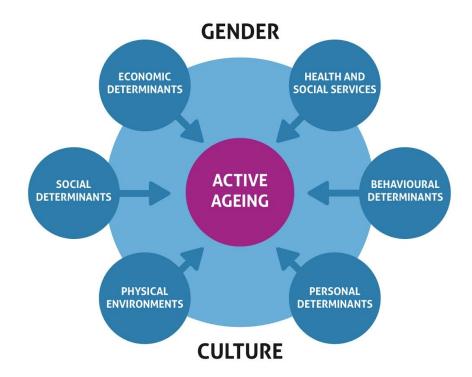
 Alberta Association of Seniors Centres Alberta Senior Centres Needs and Capacities Companion Report The Active Ageing: A Policy Framework is a way to organize and focus the work that seniors centres do, so that they are able to continue to meet the needs of an increasingly large and diverse senior population in the future.

Active aging is the process of optimizing opportunities for health, participation and security for people as they age.

The framework, which is consistent with the Alberta Government's Aging Population policies and the City of Edmonton's Age Friendly Edmonton Initiative, defines 'active aging' as the process of optimizing opportunities for health, participation and security for people as they age.

The Determinants of Active Ageing

The framework suggests several inter-related areas that impact the aging process, and determine our ability to remain as healthy and active as possible as we age.



Environmental Scan

An environmental scan explored the visions, mandates, programs and services currently provided by seniors centres in Edmonton (refer to Appendix AB). Information on focus, services and program provision for each senior centre was gleaned from organizational websites where possible, and from information provided in the Sage Seniors Directory and the Directory of Seniors Centres in Alberta where no website information was available. Seniors centres were not contacted directly: this scan of services relies entirely on public communication of programs, services, focus and mandate. The environmental scan completed for this report determined that the programs and services provided by seniors centres in Edmonton can be consistently applied to the *Active Ageing: A Policy Framework*.

Table A2 Environmental Scan of Seniors Centres Programs and Services

Economic	Social	Health-related
 Diverse range of health, wellness and social service-related programming offered at no or low cost (access) Multilingual support to seniors that have immigrated to Canada Provide resource information, services and critical support Link seniors to other community resources Use of outreach to reduce isolation and connect seniors to resources Provide assistance with securing safe, appropriate, and affordable housing 	 Foster social inclusion Facilitate lifelong learning and community engagement Help seniors remain active, engaged, and informed on topics that are relevant to them Offer connection to peers with shared interests, opportunities for meaningful contribution and space for relationship building Provide informal and formal opportunities for social and emotional support Provide opportunities to improve computer skills and extend social reach via the internet 	 Provide programs to meet the demand and need for fitness, creative expression, fellowship and information Space for community partners to offer health and wellness related workshops Provide access to essential health and wellness-related information and services Foster healthy independence and aging in place Promote social integration and active participation in the community Community-based approach to aging that connects health promotion and illness prevention with the social determinants of health
Behavioural	Personal	Physical (environment)
 Offer a community-based approach to aging well Encourage involvement and self-advocacy Enhance quality of life, and support independence and self-determination Employ a preventative model that includes access to information and resources related to physical, mental, and emotional health 	 Offer resources, information, and support related to life transitions Act as social places of public life Provide activities that support independence and encourage involvement Positively influence and respond to aging-related trends Foster social inclusion in seniors' home communities 	 Community-based approach to aging well and aging in place Provide support for seniors seeking safe, affordable, and appropriate housing Connect seniors to community resources (e.g. food security) Promote and advocate for age-friendly environments

The environment scan indicates that seniors centres in Edmonton are already appreciative of and engaged in the process of active aging as a way for people to:

realize their potential for physical, social, and mental well-being throughout the life course and to participate in society according to their needs, desires and capacities, while providing them with adequate protection, security and care when they require assistance.

Active Ageing: A Policy Framework, p. 12

In general, seniors centres also have an internalized understanding of 'health' that is consistent with the definition embraced by the framework:

'Health' refers to physical, mental and social well-being...thus, in an active aging framework, policies and programmes that promote mental health and social connections are as important as those that improve physical health status.

Active Ageing: A Policy Framework, p. 12

It is important to note that most seniors centres do not have the capacity to fulfill all of the functions indicated. Nonetheless, when taken as a whole, they clearly function within the *Active Ageing: A Policy Framework* (Pardasani and Thompson, 2012).

Given the increasing appreciation for the economic and social potential of cross-sector service integration, collective-impact approaches and resource-sharing, seniors centres are well positioned to offer a leading-edge, community-based, best-practices model of person-centred service delivery that transcends the artificial barriers created by service-sector silos.



Shifting our vision of seniors centres as independent physical spaces to one that embraces the collective work of seniors centres as a way to meet the needs and strengths of seniors, creates opportunities for a more fully integrated, coordinated, responsive and person-centred approach.

Critique of the Framework

While the *Active Ageing: A Policy Framework* may provide a useful tool for organizing the work of seniors centres, consideration should be given to the limitations of the Framework itself, and to the concept of aging in place on which it depends.

Active aging reframes traditional retirement years (65+) as a time for social activity and engagement. Within this frame, there is a 'third age' - post-career and before 'old age' - that resists the ideas of frailty and dependency traditionally associated with growing older. Because the framework positions seniors as actively pursuing meaningful lifestyles, unencumbered by career or other concerns, it has the potential to minimize the impact of physical, economic and social barriers to activity (Kojola and Moen, 2016).

Active aging can also normalize ideas about 'successful' or 'productive' aging that minimize the ways in which our physical, economic and social realities impact us over the course of our lives. It also internalizes a 'busy ethic' that can set up expectations around what 'successful' or 'productive' aging should look like (Holstein and Minkler, 2003; Gilleard and Higgs, 2007).

An active aging approach needs to recognize the diversity within older populations. Policies and programs that support active aging need to reduce inequities between women and men, and between different groups in the older population, including those who are low-resourced and/or marginalized.

Participants in the Sounding Board Sessions¹ generally agreed the Framework is a useful tool for thinking about and organizing the work of seniors centres. However, several participants also indicated caution and/or concern, including:

- a lack of detail and specificity;
- the possibility that it might ask seniors centres to become all things to all people;
- the wide-reaching nature of the framework might expect seniors centres to become involved in areas that are the responsibility of others (e.g. housing; health);
- the potential for it to become prescriptive, like a rule book for funders;
- the possibility that individual seniors centres might lose their uniqueness;
- need to consider determinants such as cultural, cognitive and spiritual needs and the concept of aging with dignity.

¹ Please refer to the Public Consultation Report for a detailed summary of the Sounding Board Sessions.

Final Research Report: Public Consultation Summary

The results of a literature and environmental scan were used to develop materials for a public consultation that included a survey, sounding board sessions and interviews with key stakeholders. Several questions, tensions and themes emerged during the public consultation (survey, sounding board sessions, interviews) phase of the Seniors Centres of the Future project.

Programming

- Recreational programming and opportunities to socialize are key functions of seniors centres
- Maintaining a healthy lifestyle is important to people who want to age-in-place
- Baby Boomers will want more opportunities for social interaction, community engagement and travel as they grow older
- Activities that are traditionally associated with seniors centres (arts and crafts; table games) are not a priority for seniors centres of the future



- There is an important role for outreach (reaching out) and community-development if seniors centres of the future want to be inclusive
- Seniors need to be a part of the community, not isolated from it
- Ageism is an issue that must be addressed

Quality and Capacity

- Organizational development, change management and the capacity of seniors centres must be considered
- Professional standards, innovation, collaboration and comprehensive, holistic programming are important characteristics for seniors centres to meet the needs of seniors

 Partnerships and collaboration are a key method for maximizing capacity and minimizing duplication of service delivery for seniors centres of the future - will need to be managed over time and will require strong connection and communication

Public Consultation Summary

- Consistency of service access and quality must be balanced with responsiveness and flexibility
- Seniors centres of the future should use technology more wisely

Diversity in the Senior Population

- A consideration of the diverse and changing needs of older adults as they age is a key characteristic for seniors centres of the future
- The tension between the current and anticipated needs and desires of seniors (as the demographic changes) must be addressed
- Diversity (including and beyond cultural background) in the senior population needs to be addressed.
- Seniors must drive changing services and priorities

Community and Intergenerational Engagement

- Seniors centres are seen as having the potential to offer community and intergenerational engagement, access to information and resources, and peer and professional support
- Integration and collaboration between seniors centres and City of Edmonton services and facilities is seen as a useful way to minimize duplication and maximize access
- Location and accessibility are key concerns for seniors centres of the future, with a preference for neighbourhood based centres, particularly if they are meant to be community hubs
- There is debate regarding whether seniors centres should be senior- or community-focused
- Seniors centres should be community-based, and offer local accessibility
- There is a need for intergenerational connection

Funding and Framework

- A one-size-fits-all approach will not work for seniors centres of the future
- A framework for organizing and focusing the range of possible services provided by seniors centres is necessary:
 - o the framework should not be prescriptive organizations should be allowed to work within it according to community need, organizational interest, and capacity
 - o needs to include consideration of aging with dignity

- Seniors centres should be publicly funded; funding will play a key role in the future of seniors centres
- Seniors centres cannot rely primarily on volunteers

Public Consultation Summary

Policy

Policies related to the future of seniors centres need to consider:

- A preference for aging-in-place, preferably in current homes
- Age 65 is no longer considered a definite point of retirement
- Senior centre use is likely to become a consideration for adults between 65 and 74 years of age
- While seniors centres have an important role to play in the general health and wellbeing of older adults as they age, they should not be considered a part of the health care system
- A decentralized model for seniors centres would allow for flexibility and responsiveness

Definition of Terms

Throughout the public consultation, participants also indicated the need for a clear and shared definition of terms. A critical first step in moving toward a vision of seniors centres in the future will be a definition of key terms.

- If recreational programming and opportunities to socialize are key functions of seniors centres, then what do we mean by recreation programming? What is the desired outcome?
- If partnership and collaboration are key to the future of seniors centres, what will qualify as a partnership? Who will decide?
- How do we define community? A broad and inclusive definition that extends beyond geographic area is necessary.
- What do we mean by diverse and diversity?
- What do we mean when we say seniors centres need to be inclusive?









Final Research Report: Gaps, Barriers and Challenges

Analysis of the literature review, environmental scan and public consultation reveals key themes that will need to be addressed in order to ensure seniors centres are position to continue to meet the needs of seniors and their communities.

Ageism

Aging is a highly individual experience, and it is not possible to generalize about the skills and abilities of an older person based on age, any more than it is possible to make assumptions about someone based on any other aspect of their identity. But our society tends to value youth over age, and as an adult becomes older, they are likely to experience discrimination and barriers related to the way our society views aging.

The term ageism refers to two separate but connected ideas. It is:

- a way of thinking and making assumptions about older people based on negative attitudes and stereotypes about aging, and;
- 2. a tendency to structure society based on the assumption that everyone is 'young' and failing to consider the needs of older people.

Ageism can lead to the isolation, invisibility and social exclusion of older adults. It can be a cause for individual acts of age discrimination, and can lead to elder abuse.

The Frameworks Institute identifies several common narratives that can contribute to ageism:

The Throwaway Generation

 highlights elder abuse and discrimination

The Vibrant and Independent Senior

 present idealized representations of the ageing process

The Ageing Worker

 focuses on older adults in and out of the labor market

The Demographic Crisis

 warns of impending social crisis due to an ageing population

Government as Solution

 describes how government action can address challenges associated with an ageing population

Government as Problem

 focuses on the relationship between failed social policy and older adults' financial insecurity.

Gaps, Barriers and Challenges

Stereotypes tend to focus on seniors as either frail, senile, and dependent; or active, healthy, and independent.

One the one hand, the image of the frail senior feeds negative stereotypes about aging, and on the other, the independent senior is positioned as having successfully aged because of their personal discipline and choices: there is no middle ground, and no room for the complex realities of lived experience (Frameworks Institute).

Ageism can also be more structural in nature - for example, when services and facilities are designed with the assumption that everyone is 'young' (OHRC).

Ageism is a key barrier to participation for seniors, and can significantly impact quality of life. It must be addressed at both a government policy and cultural level, where the process of aging is reframed, and services are geared toward supporting health, wellbeing, and social participation across the lifespan (White House Conference on Ageing, 2015).

An example of ageism is the stigma attached to seniors centres as 'places for old people', which can be a significant barrier for Baby Boomers who do not see themselves as being 'old', and resist being associated with the term 'senior' (MacRae-Krisa and Paetsch, 2013). As a response, some seniors centres have removed the word 'senior' from their name, with the hope that it will no longer be a barrier to Baby Boomer participation.

Ageism was identified by Sounding Board Session and interview participants as a critical issue for seniors centres, citing concern that if people aged 55+ do not identify with the word 'senior', they are not likely to access the programs and services provided by seniors centres.



Gaps, Barriers and Challenges

Target Demographic

Exploring the possibilities of seniors centres in the future must include a consideration of their target demographic. Clearly delineating this demographic will impact how they are funded and evaluated, and influence decisions related to senior centre purpose, location and access and priorities regarding programming.

The importance of determining the target demographic for seniors centres cannot be understated. Even the most cursory consideration can quickly demonstrate the necessity of knowing who seniors centres are for, as that will deeply impact the way that they are structured.

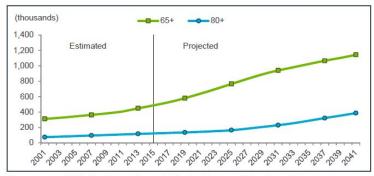
For example, the majority of current senior centre users are between the ages of 75 and 84, and are primarily single or widowed women in their 70s and 80s (AASC, 2014). Men are not currently significant users of seniors centres (Whitfield and Daniels, 2014). Older seniors are also more likely to be long-time senior centre users, and tend to participate in seniors centres more frequently than younger seniors, thus seniors centres are likely to feature prominently in their social lives (MacRae-Krisa and Paetsch, 2013; Pardasani, 2010).

Given this understanding of who current senior centre users are:

- Should programming be changed to attract male users, or embrace the needs and desires of a largely female demographic?
- Should the programming and purpose of seniors centres focus on the needs and desires of people after the age of 75, or work to ensure that seniors centres are more attractive to a broader age range?

Baby Boomers

Baby Boomers (people born between 1946 and 1964) are a key concern when considering the future of seniors centres. The changing nature of family and retirement, coupled with stigma around aging, and perceptions of seniors centres as places where 'old' people play cards, prevent Baby Boomer use of seniors



Sources: Statistics Canada and Alberta Treasury Board and Finance

Gaps, Barriers and Challenges

centres (Whitfield and Daniels, 2014;

Malonebeach and Langeland, 2011). As a result, there is some concern around 'age-creep' (increase in the median age of participants), and the corresponding threat to public funding if seniors centres are not able to attract a younger cohort (Pardasani, 2010).

While some Baby Boomers currently attend seniors centres, most feel that they are too young to do so, and do not plan on becoming users until they are between 65-74 years old (Whitfield and Daniels, 2014). This is consistent with the majority of the Future of Seniors Centres Survey respondents, who also indicated they are too young to use a senior centre (63%), and think that they will be interested in using a senior centre between the ages of 65-74 (42%).

Because seniors centres have typically had difficulty attracting younger seniors, some research asserts that re-branding or marketing campaigns are necessary for seniors centres in the future. Engaging in social and other media-based marketing campaigns to raise awareness about seniors centres is seen as a way to attract Baby Boomers, as is emphasizing a health promotion model, and redesigning senior centre spaces so that they appear more 'hip' (Fitzpatrick and McCabe, 2008).

While the literature suggests that targeted marketing campaigns emphasizing health and wellbeing might help to overcome the stigma attached to senior centre use (MacRae-Krisa and Paetsch, 2013), there is a risk that this 'ageless marketing' could in fact contribute to and reinforce the ageism that seniors centres are trying to combat.

Persistent ideas of the 'ageless self' minimize the social and physical realities of aging, and for Baby Boomers in particular can contribute to fears about declining health and failing to be productive (Kojola and Moen, 2016).

As a demographic cohort, Baby Boomers tend to be better educated, more physically fit, and have higher incomes than the generation that precedes them. They are also more likely to be involved in the community in some capacity, and many will work well past the age of 65. Importantly, Baby Boomers are not planning to age the way their parents have, and even as they enter their 70s and 80s will be interested in different kinds of programming.

In response, research suggests that seniors centres will need to shift their service paradigm from one that is primarily deficit-based (meeting the needs of seniors) to one that is asset-based (MacRae-Krisa and Paetsch, 2013). Programs that foster physical, intellectual,

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and emotional well being, and that promote autonomy and active engagement with the community are flagged as becoming increasingly important (Marcus and Migliaccio, 2006).

However, Baby Boomers are also expected to live longer than previous generations, and while they tend to be healthier, decreased mobility, and vision and hearing loss remain concerns. Increases in the number of people experiencing Alzheimer's disease and other cognitive impairments are also anticipated (MacRae-Krisa and Paetsch, 2013; Malonebeach and Langeland, 2011).

It is also common, when considering the difference between Baby Boomers and older seniors, to list 'higher income' as a key demographic difference. However, this income level will not necessarily be sustained through retirement.

Poverty in seniors almost tripled between 1995 and 2013 (from 3.9% to 11.1%), and close to 30% of single senior women are living in poverty (Shillington, 2016). These numbers are not expected to decrease. Only 15-20% of middle-income Canadians have saved enough for retirement, and despite new trends toward working past the age of 65, a significant percentage of Canadians will face a substantial drop in their living standard after retirement (Shillington, 2016).

The physical, social, and economic realities of aging cannot be denied, particularly if seniors centres are going to play a critical role in supporting aging in place in the community. However, Sounding Board Session participants in particular stressed the

wide diversity in the senior population, and cautioned that the focus of the Future of Seniors Centres project should not be frail seniors.

Retirement

The nature of retirement is changing. Retirement is no longer seen as a one-way trajectory where work stops and leisure begins. Whether by choice, or because of financial necessity, seniors are increasingly actively employed in some capacity beyond the age of 65 (Mei, Fast and Eales, 2013; Kojola and Moen, 2016). And Albertans are more likely to work full-time in later life than the rest of Canada (Mei, Fast and Eales, 2013).

A caution here is that changing attitudes about retirement can lead to a rejection of leisure and recreation as a legitimate way to spend one's time, by reinforcing the idea that to age successfully, older adults need to be actively working or volunteering. The idea of

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retirement in this context becomes synonymous with retreating, becoming a burden, and giving up on life. (Kojola and Moen, 2016).

Importantly, seniors centres are not seen by survey respondents as spaces where job training (43%) or placement (35%) services should occur. Which raises the question of the degree to which seniors centres should attempt to meet the varied demands of the senior population. If, for example, seniors have a desire and need to continue to work as they age, should (can) seniors centres provide the training and placement services they require to do so?

A central theme in the comments from survey respondents between the ages of 60-64 is concern over duplication of services, including a caution against seniors centres attempting to 'be all things to all people'.

This caution was echoed by Sounding Board Session participants, who were particularly concerned that any vision for the future of seniors centres acknowledge the broad range of needs within the senior population, and asserted that a key policy question will be whether senior centre services are needs-based or age-based.

Who are seniors centres for?

The question of *who seniors centres are for* is a theme that runs throughout the literature review and public consultation completed for this study. The senior population is very diverse, and it is not enough to say that seniors centres are for seniors: if we are to move

forward with vision and leadership, the target demographic of seniors centres must be clearly delineated.

Understanding and responsiveness to the demographics and needs of the community they serve is fundamental to the purpose and programming of seniors centres (MacRae-Krisa and Paetsch, 2013).

Best practices suggest that senior centre programming needs to be tailored not just to a demographic, but to the needs of the *neighbourhoods* that they serve (Whitfield and Daniels, 2014). There is currently a lack of understanding in the community - including individuals, businesses, and service providers - of the potential and relevance of seniors centres that needs to be addressed (MacRae-Krisa and Paetsch, 2013).

And while appealing to Baby Boomers must be a consideration for seniors centres in the future, the needs and interests of older seniors cannot be dismissed (Hostetler, 2010). Fortunately, it does not have to be an either/or proposition. For example, extending senior

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centre hours beyond the traditional work day, and offering some programs twice, or different programs in the evening, can go a long way toward attracting younger seniors, while still meeting the needs of the older demographic (MacRae-Krisa and Paetsch, 2013; Marcus and Migliaccio, 2006).

Cultural Diversity

When we refer to the senior population, we are not talking about a homogenous group. Someone who is 65, for example, will have different needs and desires from someone who is 95. The senior population is a demographic with the widest possible range of socio-economic situations, culture and language backgrounds, family dynamics, life experience, sexualities, and physical and mental capabilities.

Nor can we make assumptions about sameness within senior 'sub-groups'. While many services link the immigrant and refugee senior population, for example, refugees are more likely to have experienced trauma and victimization, and will therefore require unique interventions (Zenev and Associates, 2015).

The cultural diversity of the senior population is increasing (MacRae-Krisa and Paetsch, 2013), and seniors centres need to be able to respond to this increased diversity.

A key weakness of seniors centres is their lack of capacity to address the needs of seniors from diverse cultural groups. According to Age Friendly Edmonton's *Older Adults Needs Assessment* (2015), senior centre staff report both a lack of experience and knowledge related to immigrant and refugee seniors, and assumptions that the challenges they face are similar to those faced by all seniors.

The reality is that deep poverty and gaps (or the lack of cultural responsiveness) within key sectors such as health and housing continue to negatively impact the wellbeing of immigrant and refugee seniors. Many of these seniors are struggling with emotional and mental health issues, particularly new immigrants and refugees fleeing war. Changes to federal and provincial policy and government procedures have created new barriers in accessing services and support for which they are

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eligible, and contribute to the vulnerability of this population. And language, income, transportation and other barriers limit the ability of these seniors to access the programs and services offered by seniors centres (Zenev and Associates, 2015).

The risk of isolation can also be compounded for immigrant and refugee seniors, who may shoulder significant family responsibilities (e.g. the care of grandchildren), face language

barriers and racial discrimination, and be financially dependent on their children (National Seniors Council, 2014).

Understanding and embracing the diversity of the senior population is a challenge for seniors centres and policy makers alike because normative notions about 'who seniors are' are so deeply embedded in our approach to this population. For example, the *Older Adults Needs Assessment* states:

Due to multicultural older adults not being the focus of this study, the current understanding of how to engage with different cultural demographics of older adults and what their needs are were not explored in-depth (p. 7).

Given that 30% of the senior population are immigrants (Zenev and Associates, 2015), this assertion is highly problematic. It assumes a standard 'senior' from which immigrant and other racialized seniors are excluded: because they were not the "focus" of the study, "their needs" were not explored. This is a significant portion of the population – if their needs were not explored, whose were?

This example is not used to critique the *Older Adults Needs Assessment*, but because it exemplifies a common approach to diversity in the senior population, which continues to

internalize a stereotype about who seniors are, unless specifically focused on a 'sub-group'. It is problematic, because these assumptions inform policy, priorities, structure and funding.

Of note is the lack of available research and information on indigenous seniors in Edmonton. It is a critical gap that must be addressed.

Information, resources, and capacity are key concerns for seniors centres when it comes to diversity. There is currently a gap in funding and support for immigrant and refugee senior programming (Zenev and Associates, 2015), and that is unlikely to change if we continue to see these seniors as a separate demographic.

Immigrant and refugee seniors have unique needs related to language, isolation, and financial dependency or precariousness. These same needs act as barriers to participation,

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and require that outreach programming be expanded to overcome them. Promising practices in this area include community support staff working within specific cultural communities, and developing seniors-helping-seniors programs for different cultural or linguistic communities (Zenev and Associates, 2015).

Culturally diverse staff, and leadership in the development of culturally sensitive programming is a need for seniors centres. This is perhaps most evident in a general concern from study participants that welcoming seniors from diverse cultural communities might alienate the traditional membership of seniors centres.

For example, some Sounding Board Session participants expressed concern that seniors from diverse backgrounds have been invited to participate in current senior centre activities, but did not want to participate, and concluded that there was little more that they could do. While they support providing services within a particular cultural frame, they simply do not know how to do so, and expressed a need for training and support in this area.

Interview participants also recognized this gap in the capacity of seniors centres, and cautioned there may be some resistance to change in this area. Organizational development and a willingness to build collaborative coalitions and networks were identified as tools for change management in this area.

It is important to remember the category of 'immigrant and refugee senior' is neither static nor uniform, and increased capacity in this area will require sustained effort over time. Strengthening the capacity of seniors centres in this area will require increased cultural diversity among staff members, and ongoing training and education for

leadership and staff alike (MacRae-Krisa and Paetsch, 2013; Pardasani, Sporre and Thompson, 2009; Zenev and Associates, 2015).

A range of culturally-based seniors centres as we now think about them was not supported by interviewees; however, they indicated that cultural and other groups should be able to access space and use it according to their needs and interests, as well as participate fully in more universal programs and services being offered at the centre.



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Diversity in the senior population is not limited to ethno-cultural difference: consideration must be given to differences in gender and sexuality, geography, physical and cognitive ability, education and socio-economic background. Consideration must be given to both inter- and intra-group differences.

Sounding Board Session participants in particular emphasized the need for a vision for the future of seniors centres respond to the full spectrum of needs and desires within the senior population, and cautioned that one framework or model might not be able to capture range of strategies and approaches to service delivery required. Given the diversity of the population, participants asserted that the approach to service delivery must be flexible and responsive, and resist a 'one-size-fits-all' approach.

Survey respondents, Sounding Board Session participants, and interviewees all acknowledged that seniors centres of the future will serve a growing and increasingly diverse community, and asserted a need for clarity around the issues of diversity and inclusion, including and beyond culture (e.g. economic, physical).

Intergenerational Programming

Intergenerational activities are seen as a way to build relationships between generations, increase the visibility of seniors, and strengthen community (Whitfield and Daniels, 2014).

Providing inter- or multi-generational programming could engage the community and reduce the risk of seniors being isolated (Hostetler, 2010). Intergenerational programs can benefit both youth and seniors, by debunking generational myths and stereotypes, increasing social connection and engagement, and impacting personal and social development (MacRae-Krisa and Paetsch, 2013).

Government funding also tends to be age-segregated, and public funding and corporate and private donations tend to favour child- and youth-centred programs. The provision of intergenerational programming is seen by some as a way for community organizations to come together

A society for all ages is multigenerational. It is not fragmented with youths, adults and older persons going their separate ways. Rather, it is age-inclusive, with different generations recognizing - and acting upon - their commonality of interest.

Kofi Annan Secretary General of the United Nations

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as allies with a shared agenda that can be leveraged for funding purposes (Hannon, 2015). This approach will require leadership, and increased communication between senior and youth-serving organizations.

Seventy-five percent of survey respondents indicated that seniors centres should offer opportunities for intergenerational learning and/or engagement. However, comments from survey respondents aged 50-59 cautioned that there is also a need for senior-specific spaces, particularly for older seniors and those with dementia.

Sounding Board Session participants all addressed the importance of intergenerational programming. The participants of one session questioned a senior-centred approach to the future of seniors centres, arguing instead for more fully integrated and intergenerational models. Their concern centred around the

potential for senior-specific centres to contribute to age-segregation and the social exclusion of seniors. In general, however, participants identified a need to balance intergenerational interaction and community-based service with senior-specific spaces and services, and asserted that understanding and achieving the right balance will be a key challenge for seniors centres in the future.

Interviewees supported the idea of a model that creates space for culturally-specific and other non- geographic definitions of community activity that include intergenerational connection.

A key barrier to intergenerational programming in seniors centres is resources and capacity: intergenerational programming requires leadership and interest, knowledge and skill, and community connections to be successfully implemented (MacRae-Krisa and Paetsch, 2013). This is an area where community-university partnerships and community animators might play a significant role.

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Leadership in the development of intergenerational learning and engagement is a key opportunity for seniors centres of the future. It will, however, need to be driven by seniors, and not imposed upon them. The challenge will be striking the right balance between opportunities for intergenerational engagement and senior-specific spaces and services.

Seniors Centres as Community Hubs

The provision of intergenerational programming is central to a broader question regarding the future of seniors centres: should they be community hubs or senior-specific?

A key question that emerged in during the public consultation was whether seniors centres should focus on the needs of seniors, or consider the needs of the broader community in their service provision. Fostering the development of community hubs and rethinking age-segregated programming is seen by some as a productive solution to both the stigma faced by seniors centres and a limited pool of funding (Pardasani, 2010).

Seniors centres as community hubs are seen as a way to prevent the social exclusion of seniors and avoid age-creep in senior centre use by more fully embedding inter- and multi-generational programming and other services into the centre. Multi-purpose seniors centres already undertake much of the work of a community hub, but for a particular demographic, and for some, widening the scope of seniors centres so that they are more age- and community- inclusive is a natural progression (Malonebeach and Langeland, 2011).

Re-visioning seniors centres as community hubs extends existing programs and services to all community members, and includes adding others so that all services can be provided in a central location at the community level. Often, these hubs are imagined as having state-of-the-art fitness facilities and opportunities for intergenerational learning and engagement (Pardasani, Sporre and Thompson, 2009).

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Seniors centres have the potential to act as hubs that coordinate intergenerational programming so that seniors can connect to the community, whether those programs are housed in the centre or not.

Intergenerational programming tends to fall into one of four categories (MacRae-Krisa and Paetsch, 2013): older people supporting youth; youth supporting older people; older people and youth collaborating to support their community; and older people and youth engaging in learning and social activities together.

However, we need to consider that inter- and multi-generational engagement does not have to be limited to seniors attending programs with youth. Seniors, for example, are often caregivers, balancing the demands of aging parents, adult children and grandchildren. The financial and time restrictions they face as a result limit their ability to be active and socially engaged (Mei, Fast and Eales, 2013; AFE 2015).

Caregivers do not tend to access resources or support from seniors centres (MacRae-Krisa and Paetsch, 2013), and this is indicative of a gap in awareness of the kinds of services that seniors centres provide.

Intergenerational programming could include spaces where younger seniors are engaging with older seniors while their caregivers attend a workshop or support group. Seniors centres might provide 'kinder-days' where grandchildren are engaged while their grandparents attend appointments with ancillary health care services provided at the centre.

Social Inclusion

Social inclusion and belonging are key aspects of health and wellbeing: loneliness has been found to be as significant a contributor as poverty to the premature death of seniors, and has twice the impact of obesity (AAAS, 2014). Loss of hearing and vision as people age can place seniors at greater risk of social isolation and loneliness (AAAS, 2014).

Age Friendly Edmonton's *Older Adult Needs Assessment* (2015) found that social isolation was impacting more seniors than they had anticipated, with a third of respondents indicating they faced barriers to social interaction, including poor health, limited mobility and financial restrictions.

Seniors centres are fundamentally about social connection and engagement, and their programming needs to reflect this (MacRae-Krisa and Paetsch, 2013; Pardasani, 2010; Turner, 2004): social connection and friendships are cited by seniors as being a key reason

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for continued senior centre participation (Whitfield and Daniels, 2014). Social isolation and loneliness are a critical concern for our aging population, and the recreational programming provided by seniors centres can play a key role in providing necessary social engagement and connection. Programs should provide opportunities to form social bonds, build friendships and deepen connections (*Older Adults Needs Assessment*, 2015).

Respondents to the Future of Seniors Centres survey indicated that recreation programs are a key function of seniors centres (93%): for current senior centre users aged 65-69, recreational programming (62%) and socializing (52%) are their primary reasons for attending.

Notably, respondents aged 50-59 who currently access seniors centres indicated recreational programming (50%) and fitness (50%) as reasons for attending. However, this age group is least likely to use a senior centre for socializing (10%).

While opportunities for social interaction and belonging will remain important aspects of senior centre programming, how those things are fostered will change. Physical activity, health promotion, lifelong learning,

knowledge sharing and opportunities for self-improvement will become increasingly important. In addition, computer use and technology must be more fully integrated into the programming of seniors centres of the future (MacRae-Krisa and Paetsch, 2013; Sperazza and Banerjee, 2010).

Information sharing and communication within partnerships, between seniors centres and other senior serving organizations, and to seniors throughout the community will increase the reach and impact of seniors centres in the future. Seniors centres need to creatively incorporate technology in their approach, including an increase in social media use and online collaborations. Easily searchable websites with comprehensive information with be increasingly important as Baby Boomers continue to age (MacRae-Krisa and Paetsch, 2013).

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Seniors who feel socially connected, even if they live alone, tend to be more resilient (AAAS, 2014). Promoting seniors centres as public spaces for social interaction and engagement (e.g. having a café form part of the physical plant) can encourage informal interaction, and provide a gateway to more formal participation and engagement with the centre.

Physical location and accessibility to seniors centres was emphasized by Sounding Board Session participants as being critical to the success of seniors centres. Seniors experience higher rates of limited mobility, and the importance of accessibility and transportation cannot be underestimated when considering the future of seniors centres. Convenience is a key indicator of senior centre use (AFE, 2015). Interview participants also noted that access to programs and services at the senior centre location is important, but added that outreach into the community is becoming an increasingly important part of senior centre service provision.

Outreach plays a critical role in social inclusion, and can help to reduce isolation and prevent elder abuse (Whitfield and Daniels, 2014). Outreach can take many forms, including formal programs with home visits and a staff presence in the community, and monitoring senior centre attendance and following up when needed, and friendly phone calls from volunteers (AFE, 2015).

Outreach services amongst seniors centres in Edmonton are currently semi-coordinated, in that a referral network exists and seniors centres providing these services collaborate on the development of standardized tools. In 2016, a three-year collective impact project supporting coordinated outreach to isolated seniors was funded by the federal government, and has the potential to profoundly impact how outreach services are conducted by seniors centres in Edmonton.

Volunteer Programs

Related to the issue of social inclusion is the role that volunteer programming will play in seniors centres of the future, as seniors increasingly seek to remain active and socially connected through volunteerism (Kojola and Moen, 2016; AFE 2015).

For some seniors, their senior centre participation is closely linked to the volunteer work they do, and many prefer to actively contribute to their senior centre, rather than be passively entertained (Whitfield and Daniels, 2014). However, the volunteer roles traditionally associated with seniors centres - reception, working in the kitchen or providing administrative support, for example - will need to give way to the desires of seniors who

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are increasingly seeking project-based opportunities related to their experience and interests (AFE, 2015).

There are multiple motivations and benefits related to volunteerism in seniors, including opportunities for engagement and autonomy, social connection and belonging, a feeling of being needed and contribution to community. Volunteering increases levels of happiness and life satisfaction in older adults, improves quality of life and helps to combat depression (Mei, Fast and Eales, 2013).

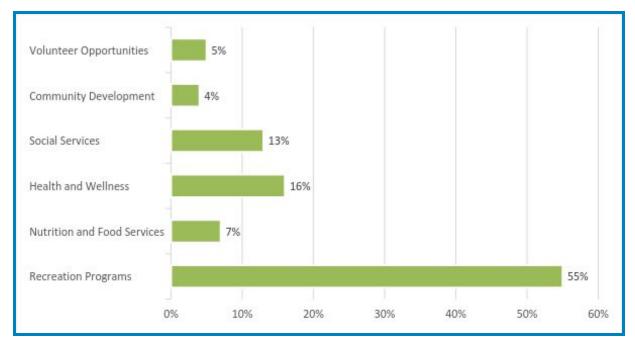
But the nature of volunteerism is changing (Fish, 2014), and seniors centres will need to respond to this change. Consideration will have to be given to the kinds of volunteer opportunities and programs offered by seniors centres.

For example, a significant number of survey respondents between the ages of 50-59 think they more likely to participate, travel or volunteer more than they do now (see Chart A1). But when asked to identify the most important program for seniors centres to provide, only 5% of respondents selected volunteer opportunities (see Chart A2).

Chart A1 Respondents who think it is <u>very or somewhat likely</u> that they will participate, travel or volunteer more as they age than they do now (#)

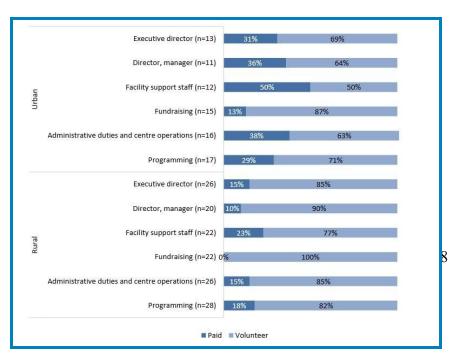
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Chart A2 What is the <u>most important</u> service for seniors centres to provide (select one)?



Seniors centres also currently rely significantly on volunteers to function, and this can place a strain on both volunteers and programming (see Chart A3, from Whitfield and Daniels, 2014, p. 42). Given the changing nature of volunteerism, particularly among Baby Boomers, this pressure is likely to increase unless the way that seniors centres engage with volunteers shifts.

Chart A3
Urban and rural seniors'
centres paid vs volunteer
activity by role



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Health and Wellness

In order for seniors centres to support active and healthy aging in the community, health and wellness promotion must be central to the development of their programs (MacRae-Krisa and Paetsch, 2013). Health and wellness in this context must be understood in their broadest sense, and consider the determinants of health outlined by the *Active Ageing: A Policy Framework*.

The health and wellbeing programs provided by seniors centres facilitate and support the ability of seniors to age in place, and can help them to manage pain, prevent illness and improve mental functioning (Whitfield and Daniels, 2014).



Ready access to information and resources is also an important part of healthy and active aging in the community. Information regarding government services, wills, power of attorney, health care, medical insurance and financial literacy are quite valuable, particularly for older seniors, as is access to social services and home living supports. Seniors who do not speak English as their first language may access seniors centres because of the help they provide with navigating government services (Whitfield and Daniels, 2014).

Seniors centres are positioned to employ a preventative model of support for seniors seeking to age independently and in their home communities (Whitfield and Daniels, 2014). Investing in prevention can be particularly important, given that a single fall or

injury has the potential to limit a senior's mobility, and can quickly lead to social isolation (AFE, 2015).

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Health screening, assessments and education are also valued by senior centre users. Having access to community based health practitioners in seniors centres facilitates prevention and intervention, and can positively impact diet and nutrition, oral health, exercise regimens and general health and wellbeing (MacRae-Krisa and Paetsch, 2013).

Sounding Board Session participants were concerned that seniors centres might come to be considered part of the health care system. While seniors centres are not a part of this system, they can play an important role in health promotion and the wellness of seniors as they age in place in the community, particularly given recent research regarding the impact of loneliness and isolation on life expectancy (AASC, 2014). As we learn more about the impacts of loneliness and isolation on health and wellbeing, a very strong case can be made that seniors centres are well positioned to anchor the development of healthy communities.

It is possible, for example, for seniors centres to partner with healthcare organizations and initiatives to offer services in the community, as is currently done with flu shot clinics. Initiatives like this could be extended to include primary care, physical and occupational therapy, and mental health interventions (AASC, 2014).

Seniors centres have a deep understanding of the connections between physical and mental health and social and emotional wellbeing. As such, they straddle both the social service and healthcare sectors. Health conditions tend to become more complex as we age, and as life expectancy continues to increase, seniors centres will become more integral to the broader continuum of care, and that needs to be supported by policy and funding (Whitfield and Daniels, 2014). This also positions seniors centres as model for how these two sectors might be more fully integrated and coordinated at the community level.

Partnership and Collaboration

A core theme that has emerged from both the literature and public consultation is that partnerships and collaboration are becoming increasingly fundamental to the way that seniors centres function: seniors centres will not be able to meet every need, and must be able to foster partnerships as a method of service delivery. But partnerships and collaboration need to be nurtured over time, and require strong leadership and professional relationships to thrive (Kojola and Moen, 2016).

Partnerships and collaboration are flagged as a best practice approach to help seniors centres reach out to immigrant and refugee seniors, and to address age creep and the

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gender disparity in senior centre users. Collaboration is also seen as a way to maximize limited resources and to minimize duplication and fragmentation while providing the widest range of programs and services possible (Pardasani, 2010, MacRae-Krisa and Paetsch, 2013).

Successful collaboration will be key to the potential for seniors centres to facilitate comprehensive, community-based support for seniors aging in place. Partnerships and collaboration contribute to information sharing and referrals, as well as increase awareness of community needs, wants, and resources (MacRae-Krisa and Paetsch, 2013).

Lack of service integration and coordination is a key challenge for seniors centres and other senior-serving organizations (ANSRO, 2011, p. 16). Collaboration among seniors centres needs to be strengthened and partnerships should extend into (and beyond) the transportation, housing, and health sectors in order to facilitate aging in place and continuity of care over time (Whitfield and Daniels, 2014).

Partnerships and collaboration will play a critical role in the future of seniors centres, as they have the greatest potential to ensure flexibility



within individual seniors centres while providing a standard of service provision across the city. Research shows that strategic partnerships can:

- Increase understanding of the complex needs and desires of participants;
- Increase awareness of both senior centre and other community-based programs and services;
- Improve communication between seniors centres and other community-based programs and services;
- Maximize limited resources and encourage resource-sharing;
- Minimize duplication of service;

- Contribute to the development of innovative and responsive programming; and
- Encourage a continuum of support that can foster aging in place over time.

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Strategic partnerships and collaboration will contribute to the sustainability and success of seniors centres, allow for increased responsiveness and flexibility and minimize duplication of services (MacRae-Krisa and Paetsch, 2013).

Seniors centres in Edmonton are already accustomed to achieving their outcomes via partnerships with other seniors centres, community and governmental organizations and post-secondary institutions (Whitfield and Daniels, 2014). The coordinators of senior centre outreach programs, for example, meet to share strategies, tools, and experiences and to make referrals for seniors outside of their geographic scope (AFE, 2015). Other examples include having health professionals conduct workshops on relevant topics for seniors, student placements and practicums, and working with community leagues to help ensure safety and reduce isolation for seniors in the neighbourhood (Whitfield and Daniels, 2014).

The work that the Edmonton Seniors Coordinating Council and the Pan-Edmonton Group Addressing Social Isolation in Seniors (PEGASIS) are examples of strong, formal partnerships already being undertaking by senior serving organizations in Edmonton. However, the use of partnerships varies between programs and centres, and a more coordinated, comprehensive approach is required.

Sounding Board Session participants stressed that what partnership and collaboration means and requires for seniors centres. For some, the language of partnership suggests downloading responsibility onto the community. Questions include:

- What does it mean to have an integrated approach? Is this an approach that assumes collaboration and linkages across systems?
- Systems connection and linkages is very complicated how/can it be done?
- Do we have the capacity and ability to do this?

All interviewees, who have extensive experience with partnership and collaboration, were supportive of this approach, and identified several factors for success, including:

- Ensuring that everyone involved has a clear understanding of why they are
 pursuing the partnership and how it will benefit both seniors and their
 organization a partnership or collaboration that is dictated or imposed on
 organizations will not work;
- Acknowledging that effective partnerships are built on trust and strong relationships relationship building will take time to develop and maintain; and

• Establishing common purpose and structures for working together - building capacity is critical for ongoing success.

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Capacity and Quality

Seniors centres will need to have strong strategic plans and clear objectives in order to meet the needs of seniors in the future. There is a need for stable, reliable service provision that can adapt to the changing needs and desires of an increasingly diverse population. Flexibility and adaptability are best accomplished within a solid framework that is consistent across seniors centres.

Pardasani, Sporre and Thompson (2009) identify several themes common to forward-thinking senior center directors, including:

- 1. Collaboration: forming strategic partnerships with schools and universities, social service agencies and community organizations, health care providers, and the private sector not only contribute to sustainability, but help to position seniors centres a community focal points;
- 2. Accountability: structures are in place to ensure consistent feedback from all stakeholders, including community member, Board, staff and senior centre users;
- 3. Creativity: limited resources require vision, resourcefulness, flexibility, and ingenuity in the development and provision of senior centre programs and services; and
- 4. Responsiveness: understanding and responding to the needs, interests and desires of seniors increases innovation in seniors centres.

There is a need to establish leadership within the public, private, and nonprofit sectors, in order to promote, across the ageing spectrum, equitable access to life enrichment through the arts, design to improve quality of life, and affordable options that promote social inclusion and choice in how and where to age.

White House Conference on Ageing, 2015

Several interviewees identified that the tension between consistency and flexibility is a concern that will need to be continually managed and assessed over time. Interviewees believe that a senior centre service framework is the best way to balance the need for consistency of service across the city with the desire for responsiveness and flexibility within communities.

While they have different approaches to the scope and level of detail outlined within such a framework, all agreed that defining what is possible and then letting organizations respond according to community need, organizational interest and capacity was more likely to be successful than developing prescriptive service requirements for all seniors centres.

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The *Older Adults Needs Assessment* (2015) identifies the following challenges for seniors centres:

- Growing and changing demographics of the senior population
- Demand will increase and change
- Programming demands will be different for Baby Boomers
- Different communication methods will be required
- Need for more outreach workers
- Increased demand to support mental health and special needs
- Demand for adequate and affordable housing
- Providing services to allow seniors to age in place
- Supporting seniors from different cultural demographics

Ensuring quality and standardized services across Edmonton will require strong organizational governance, skilled staff and transparency. Seniors centres have been described as a method of community based service delivery (ANSRO, 2011), and the ability to attract and retain qualified staff will become increasingly important as the nature of those services change and grow.

For example, if seniors centres of the future are going to be truly responsive to the needs and desires of seniors, users need to be driving programs, services, and organizational focus and expertise in the area of developmental evaluation and assessment will be required.

Sounding Board Session participants expressed concern regarding the current capacity of seniors centres to deliver the best practice suggested by the research, noting that seniors centres are very dependent on volunteers, and that funding is a key issue. Developing a best practice model for multi-purpose seniors centres will require the capacity to balance space, limited resources and diverse participant needs and desires (MacRae-Krisa and Paetsch, 2013).

Final Research Report: Conclusion

With the Seniors Centres of the Future project, we have been asking Edmontonians to answer the question "What should seniors centres look like in the future?" While answers vary, one thing has come through loud and clear: seniors centres have a critical role to play in meeting the needs and leveraging the strengths of seniors.

Given the increasing appreciation for the economic and social potential of cross-sector service integration, collective-impact approaches and resource-sharing, seniors centres are well positioned to offer a leading-edge, community-based, best-practices model of person-centred service delivery that transcends the artificial barriers created by service-sector silos.

The new challenge for seniors centres will be how to best address the needs and desires of this diverse population, particularly as more and more seniors choose to age in place in community.

How seniors centres respond is the challenge of a collective vision for the future of seniors centres in Edmonton. Working collectively to address the themes, challenges, gaps and barriers that have emerged from the Seniors Centres of the Future project will be key to the development of a comprehensive and directed approach.



APPENDIX AA: Academic Advisory Committee

Wendy Duggleby, PhD, RN, AOCN Professor and Nursing Research Chair, Aging and Quality of Life Director, Innovations in Seniors Care Research Unit Faculty of Nursing University of Alberta

Dr. Lili Liu Professor and Chair Department Of Occupational Therapy Faculty of Rehabilitation Medicine University of Alberta

Sheree Kwong See, Phd Professor Department of Psychology Faculty of Arts/Faculty of Science University of Alberta

Norah C Keating, PhD, FCAHS

Director, The Global Social Initiative on Ageing (GSIA), International Association of Gerontology and Geriatrics

Professor of Gerontology, Centre for Innovative Ageing, Swansea University, UK Co-director, Research on Aging, Policies and Practice (RAPP), University of Alberta, Extraordinary Professor, Africa Unit for Transdisciplinary Health Research (AUTHER), North-West University, South Africa

Dr. Janet Fast Professor and Co-Director Research on Aging, Policies and Practice Department of Human Ecology University of Alberta

APPENDIX AB: Environmental Scan - Senior Centre Type

APPENDIX AB: Environmental Scan - Senior Centre Type

An environmental scan of seniors centres was completed in the spring of 2016. Seniors centres were identified via a) the City of Edmonton website; b) Inventory of Seniors Centres in Edmonton (City); Sage Seniors Directory (self-identifying); and the Alberta Directory of Seniors Centres.

Criteria from the following sources was used to begin mapping the services and programs currently offered by seniors centres in Edmonton:

- 1. Seniors Centres Investment Program;
- 2. The Directory of Seniors Centres in Alberta: a number of organizations identified as 'seniors centres' in this Directory were not identified as such by any other source;
- 3. Range of services identified by the Alberta Association of Seniors Centres *Alberta Senior Centres Needs and Capacities Companion Report* (2014); and
- 4. Multi-purpose senior centre characteristics from Pardasani (2009).

It is worth noting that none of the above criteria included the following, which are offered by at least one senior centre in Edmonton:

- Help with housing and/or housing registries;
- Translation services;
- Help with food security (beyond food delivery programs and affordable food on-site); and
- Cross-cultural and culture-specific supports, programs and opportunities

Information on focus, services and program provision for each senior centre was gleaned from organizational websites where possible, and from information provided in the Sage Seniors Directory and the Directory of Seniors Centres in Alberta where no website information was available. Seniors centres were not contacted directly: this scan of services relies entirely on public communication of programs, services, focus and mandate.

This scan includes seniors centres and programs that are not funded by the City of Edmonton. They were included to provide a snapshot of senior-centred programs and services in Edmonton.

APPENDIX AC: Aging in Place - Alternate Models

APPENDIX AC: Aging in Place - Alternate Models

Aging in place means that where people live as they age is changing. It also means that *how* people live is changing as well. Listed here are examples of some of the creative initiatives that people are undertaking to meet their needs in the community.

All information is taken verbatim from the organization's website.

Generations of Hope

Across the country, new intergenerational communities are finding creative ways to enfold the most vulnerable among us into networks of care and support. We're helping.

Connecting generations to address social needs

How can older adults, friends, and caring neighbors help solve some of our most challenging social problems? In the "intentional neighboring" model of community living, everyone, including the most vulnerable, gives and receives care and support.

Coming together to build community

Generations of Hope brings together partners and advisors from a range of disciplines including architecture, finance, human services, and academia to advance the model of intentional intergenerational living, and to support new "intentional neighboring" initiatives.

Lanza Family Center for All Ages (CFAA)

The CFAA brings children, teens and seniors together at one site to participate in programs, share experiences and benefit from one another, just as they would in a family setting. Together, children, teens and older adults will enjoy gardening, sharing meals, singing songs, cooking side-by-side, and participating in special events that allow them to break down age barriers and form lasting impressions.

My Second Home

My Second Home (MSH), established in 1998, offers a refreshing and innovative intergenerational approach to adult day services, and is an affordable alternative to assisted living or nursing home care. Our award-winning intergenerational day program

APPENDIX AC: Aging in Place - Alternate Models

the only one of its kind in Westchester County and a model for the nation — offers older adults a safe, supervised, home-like day care environment that includes:

- Safe, supervised home-like environment
- Wellness activities
- Excellent nutrition
- Personal care
- Transportation services
- Nurturing, trained staff provide stimulating activities that help older adults continue to find joy and meaning in their lives

Radical Rest Homes

WHY SOMETHING RADICAL IS NEEDED

"Boomers", aged 55 – 65, are beginning to grapple with how we want to live once our homes are too big, our medical needs increase, and our incomes are fixed. Although many of us are not yet ready to plunge into new housing, we are very aware of the pressure to think this through before we are forced out of our lifestyle.

Over the last few years we have been thrown into the "monde des aînés" as we tend to the needs of our parents. We find ourselves saying, over and over again, "These are not the choices we want to make. We want something completely different."

RADICAL REST HOMES - THE VISION

...But if you stay alone and get sick you could end up in something worse. The chronic care facilities are everyone's nightmare.

What about another option? Gather a couple of friends and look for your own place. Stay in your neighborhood. Share the cooking, cleaning, shopping. Look after each other if someone's sick. Have government resources come to you instead of the other way around.

You can live as you want. You set the rules, the lifestyle; you care for each other. You remain in charge of your own life.

Solterra Co-Housing Ltd.

Shared housing and shared ownership is on the cusp of becoming the next new and exciting venture for the housing market in Canada. Our goal is to improve senior housing opportunities and support services in a manner reflective of age, experience, individual needs and preferences.

APPENDIX AC: Aging in Place - Alternate Models

Village to Village Network

VISION: Through innovation, collaboration, advocacy and inclusion, the Village to Village Network expands opportunity, choice, support and care for all older people.

INDIVIDUAL VILLAGES WILL:

- Commit to helping their members age in a place of their choosing, closely connected to their communities and with the supports and tools they need to create successful aging of their own design
- Create opportunities for individuals to use their talents to improve Village impact and benefit the overall community
- Provide social activities that minimize isolation and promote interaction and trust within the Village community, between individuals who offer their help and those who ask for help when needed

Affinity Group Communities

Includes communities established by and for members of religious groups, ethno-cultural groups, military officers, gays and lesbians, and others. Read more:

<u>The New York Times: A New Spin on Senior Living</u>
<u>The Babayagas' House, a feminist alternative to old people's homes, opens in Paris</u>



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