Saskatoon, like many communities, is experiencing a major transformation. Population growth, spurred by economic development and new job opportunities, is adding to demographics associated with those who have made this city "home" for many years. Many of us moved to Saskatoon, established careers, raised families and now remain here in retirement. By 2025, one-quarter of Saskatoon’s population will be over the age of 65.

Planning for this growing, older population is critical. The Saskatoon Council on Aging, interested in the World Health Organization’s Age-Friendly Cities model, formed a steering committee to oversee a three-phase process to create a more age-friendly Saskatoon. This report on Phase One provides an assessment of the age-friendliness of our community from the perspective of its older citizens. Through focus groups, surveys and interviews, over 500 older adults in most Saskatoon neighborhoods told us what it was like to live in Saskatoon and offered suggestions for future action.

Participants reminded us of the striking difference between Saskatoon in summer and Saskatoon in winter. They talked about improving public transportation, housing choices to keep them connected to their community, safety, improved access to shopping and services and resources to help them maintain their health and fitness.

Thank you to everyone who participated. Your experiences and suggestions will help to provide a foundation for future decisions that we hope, will make Saskatoon one of Canada’s most age-friendly communities.

The Saskatoon Council on Aging is promoting this document as a resource for not-for-profit organizations, government, business and individuals, young and less young and wants it to be a valuable resource for promoting aging issues within our Community.

A big thank you, also, to members of the steering committee who gave generously of their time, energy and expertise and volunteers and staff in our Community whose assistance was important in completing this project. You contributed to a process that enabled older adults to voice their hopes for a friendlier Saskatoon.

I am proud to support the Saskatoon Council on Aging and its initiatives that focus on positive aging for all.

Vera Pezer Ph. D.
Honorary Chair and Chancellor, University of Saskatchewan
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Age-friendly Saskatoon Initiative Steering Committee:
- Honorary Chairperson: Dr. Vera Pezer, Chancellor, University of Saskatchewan
- Co-chairs: Candace Skrapek and Dr. Murray Scharf
- SCOA representatives: Muriel Baxter and Mercedes Montgomery
- Community Champions: Dr. Hervé Langlois and Myrna Bentley
- Saskatoon Regional Health Authority: Dave Gibson, Director of Continuing Care and Seniors Health
- City of Saskatoon: Lynne Lacroix, Manager Community Development, Community Services Department
- University of Saskatchewan: Dr. Donna Goodridge Faculty Member College of Nursing and Dr. Haizhen Mou Faculty Member School of Public Policy
- Saskatoon Housing Authority: Eleanor Cardoza, Board Member
- Saskatoon Public Library: Gwen Schmidt, Coordinator Outreach Services
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  - Tourism Saskatoon

Age-friendly Saskatoon Initiative Partner Organizations:
- City of Saskatoon
- University of Saskatchewan
- Saskatoon Health Region
- Saskatoon Public Library
- Saskatchewan Abilities Council
- Saskatchewan Seniors Fitness Association
- Services for Seniors
- Saskatoon Housing Authority
- Saskatoon Community Clinic – Kokums Group

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“Yesterday’s child is today’s adult and tomorrow’s grandmother or grandfather.”
– World Health Organization
Executive Summary

“Is Saskatoon an age-friendly city?”
The answer from over 500 older adults, caregivers and service providers was: “Saskatoon is a great place to live, but...”

The ultimate goal of the Saskatoon Council on Aging’s Age-friendly Saskatoon Initiative is to develop a comprehensive plan for Saskatoon to become a model age-friendly community according to standards established by the World Health Organization (WHO).

The Age-friendly Saskatoon Initiative: Findings is the report of Phase 1. It summarizes observations from over five-hundred of Saskatoon’s older adults, caregivers and service providers that participated in Phase 1 of the project. Focus groups, online and paper surveys, and interviews were used to provide baseline data. In response to the question: Is Saskatoon an Age-friendly city? Participants identified many age-friendly features that supported quality of life and independence for older people as well as aspects of city living that needed improvement, and suggested ways to make Saskatoon and environs more age-friendly.

This report is intended to engage key community partners and decision-makers in developing and planning Phase 2 that will identify programs and services for older adults that currently exist, determine gaps, and formulate an action plan. Phase 2 will also provide business leaders, service providers and political leaders with opportunities to collaborate with older adults in strategic planning and policy development.

The Age-friendly Saskatoon Initiative has applied the research process set out by the World Health Organization’s Global Age-friendly Cities: A Guide (WHO, 2007). It aligns with the City of Saskatoon’s new Community Vision strategic plan, which identifies the importance of making Saskatoon “age-friendly”.

Phase 1 assesses the city of Saskatoon, from the perspective of older adults, using the (eight) WHO categories of an age-friendly community:

1. Outdoor spaces and buildings. Participants cited many age-friendly qualities of Saskatoon particularly in the summer months, but the city was not as age-friendly in the winter months. While they acknowledged that the challenges of the natural features of our environment are not totally soluble, actions could be taken to enhance safety and mobility and reduce social isolation.

“I walk outside for exercise but not in winter – and winter in Saskatoon is 5 months – almost half of the year.”
2. Transportation. Most participants said they rarely used public transportation, frequently citing various safety reasons and access barriers and made several suggestions to improve transportation options in the city, including expansion of specialized transportation services.

3. Housing. Most participants were satisfied with their present housing but expressed anxiety about escalating costs and long waiting lists for affordable housing options. They expressed concern about current models of senior’s housing that separate older adults from the rest of the community. They noted the need for research on options along the housing continuum, specifically, affordable housing for low to middle income seniors, and intergenerational housing models.

4. Social participation. Participants identified that there are a range of opportunities for social networking in the city; however, accessibility and affordability may be barriers to participation for some and there are few intergenerational opportunities.

5. Respect and social inclusion. Generally older adults felt they are treated respectfully, however, inclusivity did not always include ethnicity, sexual orientation, disability and mental illness. Stigma and discrimination, identified as some of the root causes of disrespect and isolation within the community, must be addressed. To counter the stereotypes of ageism, participants recommended awareness programs, educational materials, and sensitivity training.

6. Civic participation and employment. Participants felt there are many options available for volunteer work and civic participation but numerous barriers for those seniors seeking paid employment.

7. Communication and information. Participants cited many positive illustrations of programs and services that provide older adults with necessary information; however, older adults with lower education levels, lack of family resources, low incomes, and lack of computer skills or access, were identified as having difficulty obtaining information on matters of vital importance to their health, services, housing, and finances.

8. Community support and health services. A wide range of health care and community services are available in Saskatoon. Health care providers are by and large respectful and helpful but need to improve overall interpersonal skills in interactions with older adults. Several access barriers to necessary social and health services were identified: a shortage of geriatric inpatient beds, geriatricians and geriatric services; mental health and addictions services for seniors; and a shortage of palliative care beds. There is a perceived inadequacy of regulations in the personal care home and supportive housing sectors, resulting in issues around quality of care and staffing. Informal caregivers identified a lack of recognition of their contributions to the health care system and a lack of readily available support structures.

Participants encouraged governments to make the necessary changes to public policy and provision of service to support increased life expectancies. Participants identified the need for public and private institutions to adopt an “age-friendly” policy lens as part of program planning and decision-making and felt strongly that older adults must be part of the processes that directly impact them and the community in which they live.

The Phase 1 Findings report includes a community profile and describes the process of community engagement. It shares findings about the eight WHO age-friendly dimensions and makes suggestions for a “way forward.” It provides a starting point for establishing community goals and an action plan to make Saskatoon truly an age-friendly community.
Saskatoon is one of the ten best places to live in Canada. Sustaining this enviable reputation will depend on the implementation of strategies to address the challenges of a growing urban population and a rapidly increasing aging demographic.

Saskatoon citizens are living longer and the proportion of older people in the total population is increasing. This demographic shift is part of a global phenomenon; population aging and urbanization are major forces shaping the 21st century. In response to this trend, several years ago the World Health Organization developed the Global Age-friendly Cities: A Guide to get planners thinking about the elements needed in a community to support healthy and active aging. Adoption of the WHO model has spread across the globe and has been implemented by many communities in Canada.

Older adults play crucial roles in their communities whether through paid or volunteer work, sharing experience and knowledge or caring for their families. As their numbers grow, they will need access to more services that are affordable, of high quality, and that meet their needs now and well into the future. For that reason, governments and key stakeholders must work together to understand the issues of an aging population. New public policies and strategic actions should be appropriately informed by research-driven knowledge about this stage of life.

The Saskatoon Council on Aging (SCOA) launched the Age-friendly Saskatoon Initiative as a way to hear from older adults about how livable our city is now and to capture their suggestions about developing an age-friendly community. The Age-friendly Saskatoon Initiative applies the WHO research model and aligns with the City of Saskatoon’s Community Vision strategic plan, which identifies the importance of making Saskatoon age-friendly.

Through an analysis of relevant literature and policy documents and consultation with Saskatoon’s older residents, caregivers and service providers, the SCOA initiative aims: to promote the civic engagement of Saskatoon’s older citizens, gain knowledge about factors that impact positive aging, inform the community about our findings, and generate public discussion.

This Phase 1 Findings report summarizes the observations of a sample of Saskatoon’s older adults and suggests strategies for making Saskatoon and environs more age-friendly. It describes current and emerging needs of Saskatoon’s older citizens, and the importance of multi-sectoral engagement and commitment to develop partnerships and maximize resources. The report is also a mechanism to engage key community partners and decision-makers in developing and planning of Phase 2 of the Age-friendly Saskatoon Initiative.

Only through a concerted effort by the community to address the future needs of an aging population will our city be truly age-friendly and remain a desirable place to live.

“Saskatoon has many parks and I love to go walking.”
City of Saskatoon: A Community Profile

Saskatoon citizens are living longer and the proportion of older people in the total population is increasing. The city is experiencing the first crest of a wave of aging baby boomers expected to swell the ranks of seniors over the next several decades. Saskatoon seniors are a diverse cohort, ranging in age from 60 to over 100 years, with varying backgrounds, living arrangements, family circumstances, abilities and interests, marital status, cultural background and incomes. Within the older adult demographic the most dramatic growth will occur in the over 80 age group and there will be increasing ethnic and social diversity including higher proportions of Aboriginal peoples and visible minorities.

Projected increase of older adults over time as percentage of overall population*

* Historically Saskatoon’s growth rate was less than 1% per year. However the trend over the past five years is that the city’s population has been growing by 2.5% per year. Saskatoon is the fastest growing city in Canada. All statistics for the graph above were provided by Statistics Canada for Canada, Saskatchewan, and City of Saskatoon.
Community Engagement: The Process

About an Age-friendly City
Around the world, cities have adopted the Age-friendly City model developed by the World Health Organization (WHO). The WHO Age-friendly Cities: A Guide (2007) provides an innovative framework for assessing and planning current and future developments for older adults. According to the WHO, an “Age-friendly City” has policies, services, settings, and structures that support and enable people to age actively by:

• recognizing the wide range of capacities and resources among older people;
• anticipating and responding flexibly to aging-related needs and preferences;
• respecting their decisions and lifestyle choices;
• protecting those who are most vulnerable; and
• promoting their inclusion in and contribution to all areas of community life.

About the Age-friendly Saskatoon Initiative
The Saskatoon Council on Aging (SCOA) launched Phase 1 of the Age-friendly Saskatoon Initiative in February 2011 as the first step in the proposed implementation of the World Health Organization Age-friendly Cities model. This initiative advances SCOA’s vision of “Positive Aging for All” and is intended to support older adults to lead healthy independent lives and be active and socially engaged.

A prime motivator for the Age-friendly Saskatoon Initiative was the recognition that there is no provincial or municipal strategy for seniors. Older adults in Saskatoon have had a limited public voice and have not been adequately engaged in the development of policies and programs that address their needs and concerns and those of their caregivers.

The aims of the Age-friendly Saskatoon Initiative were to:

• provide a common foundational planning document for community-based organizations, seniors’ groups, and governments to support the development and coordination of their policies, programs and services directed toward older adults.

The Age-friendly Saskatoon Initiative Steering Committee adopted the research design outlined by the WHO Age-friendly Cities: A Guide. Phase 1 of this multi-phased model involves the completion of a community assessment. Following the WHO guidelines for the community assessment a combination of focus groups, surveys and interviews were used to collect and analyze the views of older adults, caregivers, and agencies that serve older adults. The participants were asked to share their experiences with respect to growing older in Saskatoon and to provide ideas and suggestions to make Saskatoon more age-friendly.
About the Participants

The objective of the sampling design for the study was to achieve representation of the following groups:

- older adults in the various geographic areas (neighbourhoods) in Saskatoon and the rural areas in the immediate environs of Saskatoon;
- formal and informal caregivers;
- older adults with various health and mobility challenges;
- various income levels in the population;
- Aboriginal and immigrant communities;
- business community;
- various community-based organizations and public agencies serving seniors.

The study involved over 500 participants, including 23 focus groups with 198 participants; 302 completed responses to the Age-friendly Saskatoon Survey; and interviews of ten selected community representatives. All areas of the city were included in the participant sample.
Summary description of participants:
- Median age was 74.4 years
- 69.1 per cent were female and 30.9 per cent were male
- 85.2 per cent were retired
- 75.5 per cent had incomes of $60,000 or less
- 79.2 per cent indicated they were in good or excellent health
- 31.7 per cent indicated they had health problems that limited their ability to perform normal daily activities
- 58.9 per cent had a college or university level of education
- The vast majority of the survey respondents were living independently with only 6.3 per cent in an assisted-living accommodation
- 38.7 per cent resided in a house, 37.9 per cent in an apartment, and 24.2 per cent in a condominium
- 61.8 per cent owned their residence and 38.2 per cent rented their residence
- 40.4 per cent lived alone and 48.9 per cent lived with a spouse/partner
- 51.7 per cent lived in the two mature Development Areas of the Core and Nutana

Summary of demographic characteristics of participants
As a summary of the demographic description of the 500 participants in this study, the following profile of the typical participant has been presented:
- Female
- Senior
- 74.4 years of age
- Retired
- Income below $60,000
- In excellent/good health
- No activity limitations
- College/university education
- Independent
- Live alone or with spouse
- Resident in house or apartment
- Owner of residence
- In a mature neighbourhood

To complement the focus group and survey stages of data collection, input from major organizational participants and selected sub-groups of the population not represented in the sampling was also obtained. Representatives from the following organizations and other individuals were invited to provide observations, share information on current activities, and identify issues associated with the age-friendliness of Saskatoon and area:
- The Saskatoon Health Region
- City of Saskatoon
- University of Saskatchewan
- Affinity Credit Union
- Saskatoon Seniors Fitness Association
- Saskatoon Housing Authority
- Individuals from groups not otherwise represented: First Nations elder, homosexual couple, immigrant, and blind individual.

Photo credit: Deborah Black
Photo credit: Saskatoon Community Church, Kokums Group Members
The purpose of the assessment component of the SCOA Age-friendly Saskatoon Initiative was to gather baseline information and to define and describe the contexts, issues, needs and factors promoting/hindering positive aging in an age-friendly community for Saskatoon and environs.

Here is a sample of questions asked:

• What’s it like to step outside your home to go for a walk, run errands, or visit?

• Is your home located conveniently for your needs?

• Does your community include you (as an older adult) in activities and events?

• What is your experience with services for older adults?

The answers from participants – in the survey, focus groups and interviews – provides a rich source of information about our city. While most participants considered Saskatoon a great place to live, they also identified barriers to age-friendliness and suggested ways to make Saskatoon a better city.

Results of the analyses of the quantitative and qualitative data collected through the survey, focus groups and interviews are presented for each key dimension.

To the general question — Is Saskatoon an age-friendly city? — most participants replied: yes in the summer, and no in the winter. Answers varied depending upon the individual’s financial resources, available support systems, health status, level of mobility and neighbourhood.

Participants identified the need for public and private institutions to adopt an age-friendly policy lens when planning and implementing programs and services within the community and to consult and collaborate with older adults in developing services that directly impact them.
1. Outdoor Spaces And Buildings

Does the natural and built environment help older people get around easily, safely and encourage active community participation?

Positive Attributes
- Saskatoon is a clean, beautiful city with many opportunities for community participation including: attendance at various indoor and outdoor events in the summer, well-maintained and accessible parks, paths and trails; good sidewalks in newer areas, with ramps and cuts that accommodate older adults with limited mobility; well-lit streets; police patrols and community education initiatives to support safety; good access to public buildings, including automatic doors, good ramps and/or elevators; acceptable access inside buildings and accessible public restrooms.

Identified Needs
- Winter related barriers (recognized not fully resolvable) reduce accessibility, mobility and opportunities for social and civic engagement. Some older adults, particularly those with limited mobility, become housebound. Poor snow/ice clearance on sidewalks, paths and trails and public transport stops is a safety and accessibility issue.
- Infrequent and poor pedestrian crossings to parks and trails, safety (especially at night), limit access. Benches and other seating arrangements varied by neighbourhood.
- “Sidewalks and streets need work” particularly in older areas of the city where many older adults live. Also noted: “Saskatoon was designed for drivers and not pedestrians” and joint use of pathways by pedestrians and cyclists was identified as a safety concern.
- Access to neighbourhood services, such as grocery stores, is an important determinant of where older adults choose to live.
- Lack of access may also be related to lack of strength (such as opening doors), limited mobility and/or need for mobility aids.

Suggestions for Improvement
- Improve snow/ice clearance and removal, particularly from paths and sidewalks, inclines on sidewalks and bridges, at crosswalks and at public transportation stops.
- Provide alternative winter facilities that allow for similar opportunities that parks and trails do in the summer.
- Promote social and civic engagement of older adults and reduce “ghettoization” through more intergenerational events and activities throughout the year.
- Engage volunteer groups of older adults to provide support services for park, path and trail maintenance.
- Enhance accessibility – consider creating seating areas in the concept of “public squares”, promote walking as a central mode of transportation, provide better public washrooms for those with limited mobility, better street lighting at crosswalks, longer crosswalk timings and voice-instruction, improved signage and enhanced regulations at crosswalks, education for citizens on safe practices, and “divided walkways” for pedestrians and cyclists on paths and trails with a clear protocol that is enforced for both groups.
- Expand affordable services for older adults such as snow removal, lawn care and home maintenance, and accommodate city services for use by older adults (e.g. placement of garbage dumpsters).
- Review policies, practices, regulations and awareness activities regarding safety and accessibility and promote “caring community” concepts such as Neighborhood Watch, safe-walk services for older adults. Open dialogue between police services and older adults.
- Engage businesses in developing processes to make their services age-friendly.

“In winter seniors struggle to cross the streets.”
2. Transportation

Can older persons travel wherever they want to go in the community conveniently and safely?

Positive Attributes
- Road and driving conditions in the summer are satisfactory.
- Able-bodied participants believe that the number of “handicapped parking” spots is adequate. They indicated that public transportation and specialized transportation services (such as Access bus and newer buses that can accommodate wheelchairs) are accessible and reliable for those that can afford them and scheduling information can be retrieved online.

“One time when I was taking a taxi I found I didn’t have enough money for the fare. The driver said not to worry, he knew where to come for the rest of the money (he had driven me home), but he never came back.”

Identified Needs
- Most participants did not use or rarely used public transportation, citing various reasons and barriers.
- There is reduced availability of public transportation in the evenings, on weekends and over holidays and the lack of transportation options for those in rural surrounding areas who are accessing Saskatoon city services.
- Many older adults lack information about public transportation and do not find this information to be easily accessible.
- Safety concerns were expressed, including navigating bus stops at unpaved boulevards and over snow mounds, using buses after dark, and buses starting up before the older adults can be seated.
- Frequently there is too great a walking distance and no seating or rest options between bus stops, parking spots and destination points, particularly downtown and at the hospitals.
- Some bus stops and parking spots are inaccessible in the winter due to inadequate snow and ice clearance.
- Options, such as wheelchair taxis, the Access bus program, and volunteer drivers were cited as either being not readily available or too costly for older adults.

Suggestions for Improvement
- Enhance drop-off options, longer maximum parking times and reduce parking fees at hospitals, “park and go” shuttles from parking lots, a courtesy parking option for seniors that are unable to walk several blocks from their parking spot to their destination.
- Invite seniors and persons with disabilities to provide input into how to improve accessibility between hospital parking lots and bus stops to hospital entrances.
- Provide additional handicap parking, especially downtown, with adequate space to maneuver a wheelchair and assist the passenger in and out of the vehicle.
- Reserve some bus seats for seniors.

“The new buses that accommodate wheelchairs and strollers are great.”
3. Housing

Do older persons have housing that is safe, accessible, and affordable that allows them to stay independent as their needs change?

Positive Attributes
• Present day housing and overall design features of homes are satisfactory.
• Home insurance is available and affordable.
• There are a variety of assisted living options for those that can afford them.
• There are services and programs in Saskatoon that support “aging in place”.

Identified Needs
• There is a lack of affordable housing options and long waiting lists; assisted living and personal care homes are not an option for lower income seniors.
• Contemporary design of housing options for older adults tends to reflect a lack of understanding of seniors’ needs and abilities (e.g. poor positioning of controls, restrictions for those with mobility aids) and these shortcomings reduce the safety and independence of older adults.
• There is a lack of information available to the public on grants for home modifications, which can be costly, and a lack of affordable indoor and outdoor home maintenance assistance.
• The restrictions on home care and the high cost of private services were seen as major barriers to older adults remaining in their own homes.
• Concern was expressed about current models of seniors housing, which separate older adults from the rest of the community.

Suggestions for Improvement
• Identify factors that would assist older adults to remain in their own homes if they choose to do so.
• Undertake more research on options along the housing continuum, specifically affordable housing for low to middle income seniors and intergenerational housing models.
• Provide needed information and assistance to older adults and their families about planning proactively for future housing options, including grants and programs that assist with housing issues.
• Make incentives and subsidies more available as a means of supporting older adults to “age in place”. For low-income seniors for instance, this could include tax deferral options and individual subsidies to enhance health care options.
• Include an age-friendly section on home maintenance, support and caregiving services in the SaskTel telephone book.
• Consult with older adults when planning and developing “seniors” housing options.
• Housing options that are advertised as being specifically for older adults should be required to meet certain criteria and standards.

“Seniors have a quiet fear as they see their expenses go up – especially large increases in their rent – that they won’t be able to afford to live in Saskatoon.”
4. Social Participation

Do older persons have opportunities for developing and maintaining meaningful social networks in their neighbourhoods? Are their needs and preferences considered in planning by a diverse range of agencies and institutions?

Positive Attributes
- The types of venues available for social activities and events available are generally appropriate for most older adults and there is a wide range of events and activities that older adults can choose to participate in.
- Most social activities and events are well promoted through a variety of means.

Identified Needs
- Some venues for social events and activities reduce the involvement of older adults with limited mobility because of accessibility, cost and convenience of transportation to venues.
- Affordability of events can be a key barrier to participation.
- Older adults with mobility limitations felt that they had less opportunity for social interaction than able-bodied seniors.
- There is a lack of options for intergenerational engagement.
- There is a lack of awareness of programs and services in Saskatoon that specifically address the isolation of older adults.
- The increasing use of electronic means of advertising of events and activities put some older adults at a disadvantage if they were not adept with computers.

Suggestions for Improvement
- Affordable and accessible transportation and adequate snow clearing are imperative in engaging older adults within the community.
- Social and recreational activities planned with and for older adults need to account for a range of abilities and incomes.
- Provide community outreach programs and services specifically designed for at-risk older adults.
- Explore the feasibility of income-adjusted rates for older adults (for example, seniors’ rates at leisure centres).

“Grandparents raising grandchildren full time have additional needs and no supports.”

Photo credits: Deborah Black
5. Respect and Social Inclusion

Are public services, media, businesses, faith communities and the public respectful of the diversity of needs among older adults and are they willing to accommodate them in all aspects of society?

Positive Attributes
- Overall older adults are treated respectfully in the community and by service providers.
- Older people are generally visible and depicted positively or celebrated in the media and images of aging are generally positively portrayed.
- Community activities to some degree allow for intergenerational interaction.
- The community recognizes older adult contributions.

Identified Needs
- Older adults, especially individuals of limited ability, are rarely included when specific needs and preferences are identified or when it is determined how needs can be better addressed.
  - Inclusivity does not always reflect ethnicity, sexual orientation, disability and mental illness.
  - Ageism and other sources of discrimination contribute to the root causes of disrespect and isolation in the community.
- New technologies have the potential to make generational divisions worse.

Suggestions for Improvement
- Develop awareness programs, educational materials, and sensitivity training to counter the stereotypes of ageism.
- Ensure eligibility and rights are the same for all older adults, including those perceived to be different or those with disabilities.
- Promote social inclusion programs through intergenerational programs such as “adopting a grandparent” or involving older adults in schools for story-telling and writing activities.
- Encourage older adults to take advantage of school-sponsored community participation programs.
- Promote discussion forums on societal changes between younger generations and older adults.

6. Civic Participation and Employment

Do older persons have opportunities to participate in community decision-making?
Do they have opportunities to contribute their experience and skills to the community in paid or unpaid work?

Positive Attributes
- There are numerous opportunities available to engage older adults in a full-range of volunteer work and civic participation.
- Older adults are a valuable resource to the volunteer sector, contributing a wealth of knowledge and experience. Many options are available to engage in a full-range of volunteer work.
- Generally, older adults are recognized and appreciated for their contributions.

Identified Needs
- Inaccurate perceptions include: older adults have nothing to do but volunteer; older adults are not as valuable on Boards of Directors and committees as younger adults who are still in the work force and have more current connections and networks.
- Lack of reimbursement of volunteers’ expenses such as parking and transportation costs prohibit full participation of many older adults.
- Older adults seeking employment largely feel rejected by employers. There is a perceived hesitation in hiring seniors, in part, due to tax disincentives and pension regulations, despite the abolishment of mandatory retirement.

Suggestions for Improvement
- Establish a volunteer ombudsman or clearing-house to match volunteers with needs and opportunities in the community.
- Explore models of compensating older adult volunteers (for example, through tax credits or reimbursement of transportation and parking expenses).
- Encourage companies and organizations, particularly those serving older adults, to ensure older adult representation on their boards along with publicizing board openings.
- Develop internship-type programs to facilitate the sharing of older adults’ valuable experience with younger people.
- Promote older adult political engagement and activity when addressing issues of concern to them.
- Ensure training programs are readily available to older adults who want and are able to work.
- Address tax implications for older adults accessing paid employment; expand allowable employment income and minimize the impact on pension plans and other related considerations (i.e. potential for loss or reduction of benefits).

“I commend the library staff for their courtesy and helpfulness when I am looking for information.”
7. Communications and Information

Are older persons aware of the diverse range of programs and services available within the community? Is information readily available, appropriately designed and delivered to meet their needs?

Positive Attributes
- Many programs and services provide older adults with necessary information to meet their various needs. For example, public forums such as the Alzheimer Society’s family series and Saskatoon Council on Aging Caregiver forums.
- Credit unions, banks and supermarkets that provide friendly one-on-one assistance to clients experiencing difficulty with automated machines were commended.
- SaskTel’s “Voice Carry Over Phone” is very useful and affordable for people who are hard of hearing.

Identified Needs
- Older adults with lower education levels, without family, with low incomes, and lacking in computer skills or computer access have difficulty obtaining information on matters of vital importance to their health, services, housing, and finances.
- Gaps in communication between service providers are a concern.
- Methods of communication used by service providers, such as small print size in written materials and non-user friendly telephone answering services are obstacles to building awareness of programs and services among older adults.

“Sometimes I find out something that’s really important by accident, from a friend of a friend of a friend. I don’t know why the service providers haven’t told me.”

Suggestions for Improvement
- Expand the SCO Directory of Services and Activities, and make it available in locations such as hospitals, clinics, and other health settings.
- Encourage older adult service providers to use plain language in concise sentences; print materials produced with large, easily readable fonts, simple formats and good colour contrast.
- Promote adaptations to electronic equipment, such as large buttons and lettering.
- Develop training programs to increase older adults’ skills and comfort level with technologies, delivered by high school students, teachers and other seniors.
- Provide skilled interpreters for one-on-one assistance (for example: language or hearing difficulties) as well as classes and support for life skills training.

8. Community and Health Services

Do older adults have access to social and health services they need to stay healthy and independent?

Positive Attributes
- Saskatoon has a wide range of health care and community services including: physicians; public health nurses; palliative care; specialty services; respite beds; day programs; medical equipment on loan; educational and support programs; and home supports that include personal care, housekeeping, meal programs, delivery services and escorted shopping.
- The community clinic is noted for its accessibility and provision of a number of health services under one roof.
- Professional service staff are generally respectful and helpful.

Identified Needs
- There are shortages of geriatric inpatient beds, geriatricians and geriatric services, mental health and addictions services for seniors, and palliative care beds.
- There are shortages of meal and grocery delivery programs for seniors who do not qualify for Meals On Wheels.
- Older adults moving to Saskatoon often experience difficulty finding family doctors who will accept new patients.

“The onus is on seniors to learn new technology. To do that they need affordable, accessible and senior friendly classes that incorporate the way seniors learn.”
• Older adults requiring considerable care are challenged by health services efficiency measures that may include limited time for medical appointments and policies on “one appointment, one problem”.
• There is a perceived inadequacy of regulations in the personal care home and supportive housing sectors, resulting in issues around quality of care and staffing.
• Economic barriers exist for some older adults to obtain health and community support services; families must manage the financial and other challenges of providing ongoing care to older relatives, while facing challenges in accessing information about the older adult’s health conditions and the services that are required.

Suggestions for Improvement
• Encourage governments to make the necessary changes to public policy and service provision to support the longer life expectancies.
• Re-evaluate policies and programs that currently cause high social and financial costs for older adults.
• Develop programs that offer financial assistance to individuals based on care needs, rather than subsidies attached to facilities.
• Address the affordability challenges of older adults on low income for health services such as ambulance, dental care and mobility aids.
• Eliminate efficiency measures in health care that have negative impact on seniors.
• Improve and enforce regulations for personal care homes, retirement homes, assisted living facilities and enriched housing models.
• Enhance staff training and monitor performance.
• Develop resources to enable couples to stay together when one of them develops significant care needs.
• Eliminate health care terminology such as “involuntary separation”; it causes confusion and pain about marital status.
• Give higher priority to supporting seniors requiring care to live in their own homes including; increased home care services and housekeeping services available on a longer-term basis; more day program spaces and respite beds; and the expansion of grocery and meal delivery programs and transportation services for seniors.
• Establish an ombudsman for persons in care.
• Provide age-friendly information and training resources for health and community services staff including training on cultural sensitivity, geriatrics, chronic diseases, palliative care, the musculoskeletal system, living with disabilities, ageism, sexism, and interviewing skills.

Summary of Interviews

Summary of Interviews with Organizations and Individuals from Groups Not Otherwise Represented

Data from the interviews with the major organizational participants showed that these groups are largely aware of the major issues facing seniors and are acting on this awareness. While there are many organizational initiatives underway, the availability of financial and other resources limited the ability of the organizations to fully address the multiple areas of need. However, it was clear that many of the positive comments on the age-friendliness of Saskatoon outlined in the previous sections were a result of the deliberate and focused actions of these organizations. Their ongoing awareness of issues and challenges faced by older adults, and efforts to address them, offer hope for further advancements in community age-friendliness.

An outcome of the interview data was the confirmation of the heterogeneous nature of the older adult population and their needs. For example, seniors interviewed that were also First Nations, immigrants, or gays and lesbians, have concerns in common with the general senior population, as well as significantly unique characteristics that demand separate and distinct treatment. Both commonalities and uniqueness must be addressed in Phase 2 of the Age-friendly Saskatoon Initiative.
The Way Forward

The goal of the Phase 1 of the Age-friendly Saskatoon Initiative project was to complete an assessment of the age-friendliness of Saskatoon, along the eight dimensions outlined by the World Health Organization. This findings report is the conclusion of Phase 1.

This report describes positive and age-friendly attributes of our community. It also identifies aspects of the city that require work to improve its age-friendliness so that it is a community that fully supports the dignity, health and independence of its older citizens. The completion of Phase 1 of the Age-friendly Saskatoon Initiative provides the critical foundation for future policy development and program implementation.

The project was managed by a Steering Committee of community volunteers and representatives from community agencies. Much of project work was undertaken by older adult volunteers. The participants clearly identified their desire for meaningful participation and involvement in the planning and development of future age-friendly initiatives. They also emphasized the importance of acknowledging and recognizing the diverse needs of older people in the community when considering future directions.

The following describes next steps of the Age-friendly Saskatoon Initiative. SCOA has submitted a grant proposal to the New Horizons for Seniors Program for funding to undertake Phase 2.

Phase 1 - Assessment Phase - Completed Fall 2011. 500+ participants

Phase 2 - Action Planning and Seniors Strategy Development

• Step One - Transition from Phase 1 to Phase 2: October 2011 to January 31, 2012
  a) Maintain momentum and engagement; reviews of Phase 1 reports and designing of Step Two data gathering instruments and administrative procedures.
  b) Documentary and directory scans and compilation; continue literature review.
• Step Two -A - Determine current community resources and identify gaps: February 1, 2012 to April 30, 2012
  a) Compilation of current activities and current five-year plans; asset map
  b) Review findings report (Phase 1) with partner organizations; gap analysis
  c) Review gap analysis with participating and partner organizations; gap report

“The Internet is an information boon to seniors. Readability is better than some print – for example Canada411 is easier to read than phone books.”
Saskatoon’s aging population will significantly impact services and programs provided by key stakeholders in the community in the future. The demands of increasing numbers of older adults will shape the future policy direction and actions needed to create an age-friendly community.

References


Age-Friendly Saskatoon Initiative: Findings

Positive Aging For All

January 2012

A full transcript of findings is available on the SCOA website

www.scoa.ca

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