

## **Making Sense of Ageing: Multidisciplinary Course Modules Provide Guide to Creating ‘Age-Friendly Communities’**

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### **Abstract**

The ideal age-friendly community makes sense of ageing by connecting all generations throughout the life course, providing a physical and social environment appropriate for all ages and abilities by promoting and being infused with reciprocal and inclusive language, structures, and services. Under the principles of active aging and the life course perspective, multi-disciplinary course modules were developed to create a body of knowledge in support of the next generation of researchers. Assisting communities in becoming ‘age-friendly’ may be one of the best ways to optimize health, foster a sense of security, and ensure older adults continued participation in society—all aspects of what the World Health Organization has labeled ‘active ageing’. Course materials are multidisciplinary in approach and consistent with the World Health Organization (WHO) definition of an age-friendly community. Age-friendly is defined in terms of eight domains: outdoor spaces and buildings; transportation; housing, respect and social inclusion; social participation; communication and information; civic participation and employment opportunities; and community support and health services. The interdisciplinary modules are designed at a theoretical level (community development), empirical level (case studies), and practical level (field study) to supplement current course programs and act as the basis for graduate and undergraduate programs offered for course credit.

**Key Words:** Age-friendly communities, active ageing, life course perspective, interdisciplinary course modules, community development.

My ideal age-friendly community should connect all generations and provide a physical and social environment appropriate for all ages and abilities by promoting and being infused with reciprocal and inclusive language, structures and services.<sup>1</sup>

There is much discussion world wide about the impact of an ageing population on cities as well as rural and remote communities. It is argued that

older adults have unique talents in the area of community development and citizenship.<sup>2</sup> The importance of health, participation and security is also recognized as important for well-being in the active ageing framework.

Why, then, explore active aging from a life course perspective? What would a policy framework in support of active aging look like? The first course module attempts to address these questions and lays the foundation for the remaining modules. Information in this module is taken from the document *Active Aging: A Policy Framework* developed by the WHO's Aging and Life Course Program as a contribution to the Second United Nations World Assembly on Aging held in April 2002.<sup>3</sup> The Policy Framework is the basis on which the *Global Age-Friendly Cities* initiative project was developed with the intent to inform discussion and the formulation of action plans that promote healthy and active aging.<sup>4</sup> According to the World Health Organization "active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age."<sup>5</sup> It applies to both individuals and population groups.

Heikkinen suggests that ageing is an integral, natural part of life, and the way we grow old and experience this process, depends on what sorts of things we have encountered in the course of our lifetime.<sup>6</sup> Ageing, then, is considered a highly complex, dynamic and variable phenomenon. There are important differences in the life course of men and women, and they become increasingly pronounced with age. For example, women may have lower degrees of independence and more restrictions on life choices with the result of poorer health. On the other hand, men are at a disadvantage, too, as higher mortality rates are experienced throughout life, including older age.<sup>7</sup>

Phillipson claims that important questions have been raised in social gerontology with respect to belonging and identity with the impact of globalization.<sup>8</sup> An age-friendly city approach seeks to focus the belonging and identity in the context of being included in community life. The second module introduces the *Guide for Age-Friendly Cities* (WHO). The purpose of the Guide is to help cities see themselves from the perspective of older people, in order to identify where and how they can become more age-friendly. The *Guide for Remote and Rural Communities* initiative (AFRRC) is introduced as well. This Guide, a Canadian project, is designed to illustrate what is meant by age-friendly and to provide communities with a starting point to identify common barriers and assets in their communities and foster dialogue and action that support the development of age-friendly communities. The module features the checklist of essential age-friendly cities features based on the results of the WHO Global Age-Friendly Cities project consultation with 33 cities in 22 countries. The

checklist is a tool for a city's self-assessment and a map for charting progress. The checklist is intended to be used by individuals and groups interested in making their city more age-friendly. For the checklist to be effective, older people must be involved as full partners. In assessing a city's strengths and deficiencies, older people will describe how the checklist of features matches their own experience of the city's positive characteristics and barriers. They should play a role in suggesting changes and in implementing and monitoring improvements. The module also supports the need to be more inclusive of all ages to reduce the likelihood of discrimination. And, it supports social policy reform to recognize the diversity of older populations.

The organizational framework for the modules is based on the World Health Organization eight domains of age-friendly communities: outdoor spaces and buildings; transportation; housing; respect and social inclusion; social participation; civic participation and employment opportunities; communication and information; and community support and health services.

### **1. Outdoor Spaces and Buildings**

"A lot of the doors are extremely heavy, very heavy. I've had two falls. I broke my wrist walking on an uneven sidewalk, and then I fell and hurt my shoulder badly."<sup>9</sup>

The outdoor environment provides older people with many opportunities to enhance their physical well-being and quality of life. There is a consensus in the research literature that outdoor environments have benefits for older people. Sugiyama and Ward Thompson suggest the benefits of outdoor environments consist of physiological benefits, concerned with the maintenance and enhancement of physical health and functioning, and psychological benefits that include stress reduction, satisfaction with life, and sense of well-being.<sup>10</sup> But, how should we design outdoor spaces and buildings in cities, towns, and neighbourhoods to enhance age-friendliness?

A supportive environment including age-friendly outdoor spaces and building designs was created in the development of McKenzie Towne-A Towne within the city of Calgary Alberta, and considered a planned pedestrian friendly community. McKenzie Towne was founded on "New Urbanist" principles of community. New Urbanist principles support the design of McKenzie Towne with its neo-traditional community old style neighbourhood feel and classic homes featuring welcoming front porches, as well as a town square featuring a Victorian bandstand. McKenzie Towne boasts a feeling of genuine neighbourliness.<sup>11</sup> In this module on outdoor spaces and buildings the focus is on design that puts people first. Students will have an opportunity to advance their

understanding of environmental influence on active aging and quality of life with an understanding of principles of 'inclusive design' and 'smart growth'. Students will also gain an understanding of important issues and opportunities when it comes to planning for age-friendly outdoor spaces and buildings through community development. Content in this module will include what older people themselves have to say about the topic as well as best practice and case studies.

## **2. Transportation**

"Now that I'm getting older, and I am old, I should say, I know that one day they're going to say, 'Well, no more license for you.' That's going to happen to all of us."<sup>12</sup>

Access to transportation provides older people with many opportunities to enhance their physical well-being and quality of life. But how do communities address the safety and mobility needs of an aging population? We know, for example, that age-related declines in visual acuity, coordination, flexibility, and reaction times all combine to reduce older people's ability to operate a motor vehicle.<sup>13</sup> This can present a problem in environments specifically designed for automobile mobility. For older adults who have driven all their lives, the transition from driving to finding alternative available transportation can be extremely difficult. In fact, few drivers plan for the day when they are unable to drive. In response to this concern, a transit training program for older drivers piloted by Stepaniuk, Tuoko, McGee, Garrett, and Benner found that training may be an effective way of assisting older adults with the transition.<sup>14</sup>

In this module on transportation the focus is on safety and mobility utilizing a social ecological model for reconnecting road safety with age-friendly communities that value quality of life, improving neighbourhood planning and community cohesion. Dumbaugh claims through adoption of a universal approach to community design it is possible to address the needs of an ageing population in a manner that is inclusive, integrated and beneficial to persons with a full spectrum of abilities.<sup>15</sup> One suggestion by May et al., is to develop a "Slow City" movement-an ecological and humanistic response favoring local, traditional cultures, a relaxed pace of life and conviviality. In general, Slow Cities are concerned with environmental protection and social equality.<sup>16</sup> Alternative forms of transportation that are elder friendly and affordable are considered, such as scooters and smart cars.

### 3. **Housing**

“Everything that’s being built here and in other communities is condos for very comfortably-off people.”<sup>17</sup>

The ability to remain independent and healthy for as long as possible are the primary goals of older adults. There is increased interest in helping older adults to remain independent in their homes. A supportive environment and helping older adults to age in place are also important goals of age-friendly communities. In this module the focus is housing that puts people first.<sup>18</sup> Students have the opportunity to gain an advanced understanding of housing options for older adults as well as health and aging in place. A key focus is on person-environment interaction based on the social ecological model of aging. The ecological model developed by Lawton links the aging individual with her or his environment. This model of adaptation and aging includes the macro-environment (the community where people live) and the micro-environment (the housing where people spend most of their time). This model is based on the premise that adaptation involves the interaction of individual competence and environmental press or demands.<sup>19</sup> Students will gain an understanding of the importance of person-environment interaction in relation to the life course perspective in planning for age-friendly housing. Students will have the opportunity to hear what older people themselves have to say about the topic as well as learn from case studies and best practice.

### 3. **Respect and Social Inclusion**

“They (seniors) need to feel that they’re still a vital part of the community.”<sup>20</sup>

In age-friendly communities older people are respected and visible in the media and community activities for their past and present contributions and presented positively. Old age was found to be under-represented in prime-time television series with messages about the aging process construed as negative.<sup>21</sup> Cornwell, Laumann and Schumm found frequency of neighborly socializing, religious services attendance, and volunteering to be positively related to the feeling of social inclusion.<sup>22</sup> A sense of community was found to be related to participation in community improvement activities for older residents in small towns and rural communities.<sup>23</sup>

In this module on respect and social inclusion we are focusing on social connectedness of older adults with their communities. One way to build respect and social connectedness is through intergenerational activities. Bringing young and old together promotes mutual care, transmits cultural values, and enriches the

lives of everyone involved.<sup>24</sup> We will take a look at technologies that aim to transform the aging experience. Through all of this students will have the opportunity to gain an understanding of how to plan for age-friendly respect and social inclusion. We take a look at what older people themselves say about the topic. As well, there is an emphasis on ageism, what it means and how pervasive it is.

#### **4. Social participation**

“I have to say that I moved here when we retired and it was very hard to break into any friendly circles until I went out and got involved.”<sup>25</sup>

Social participation is a central topic in research on aging due in part to life course transitions that occur at this stage such as retirement and the transition to widow/erhood.<sup>26</sup> Promoting social participation of the older population is seen as a promising strategy for ‘healthy aging’<sup>27</sup> as it emphasizes social networking experiences<sup>28</sup> and access to social support even for older adults with physical disabilities and chronic illness and thus helps promote quality of life.<sup>29</sup>

In this module we focus on social participation in leisure, social, cultural and spiritual activities in the community, as well as with family, that allows older people to continue to exercise their competence, to enjoy respect and self esteem, and to maintain or establish supportive and caring relationships. We also consider the capacity for older people to participate in formal and informal social life as the WHO suggest social participation depends not only on the offer of activities, but also on having adequate access to transportation and facilities and on getting information about activities.

#### **5. Civic Participation and Employment Opportunities**

“This town would collapse without the volunteers.”<sup>30</sup>

The term civic engagement or participation has been used in reference to a wide variety of activities, including voting, being involved in political campaigns, participating in paid and voluntary community work, staying up to date on news and public affairs, and helping one’s neighbour suggest Martinson and Minkler.<sup>31</sup> Research suggests both paid and unpaid volunteer work after retirement have been linked to longevity, health, and psychological well-being.<sup>32</sup>

Volunteering has long been recognized as an important activity in later life, and it represents the cornerstone of civic engagement.<sup>33</sup> However, associating the act of volunteering, in itself, with civic engagement may no longer be appropriate for retired older people, but instead be considered a separate ‘retirement role’.<sup>34</sup> As well, elevating civic engagement as an ideal for aging may further marginalize those people, who for a number of reasons, are not civically

engaged and thus do not reflect this ideal warns Martinson.<sup>35</sup> In response, a number of authors suggest to advocate for an environment that enables older people to live with dignity and to create their own meaning for later life. The point here is that the creation of an environment honoring and enabling diverse civic engagement opportunities must be broadened to respect those older adults who do not volunteer but look to seek *mino-pimatisiwin* (the good life).<sup>36</sup>

In this module we look at the opportunities for civic participation and employment for older adults in age-friendly communities. As well, we comment on older adults for whom civic participation is inaccessible. And, finally, we discuss the changing nature of work, the impact on the health and culture of an aging society, and the meaning of retirement from the life course perspective.

## 6. Communication and Information

“The gossip mill is still the fastest way to get anything around.”<sup>37</sup>

“Now I’m sending e-mails and it’s very nice.”<sup>38</sup>

The ability to use information and communication technology is now assumed by most commentators to be a prerequisite to living in the “information age.”<sup>39</sup> However, for many older adults the digital divide is difficult to bridge as products like computers and mobile phones are frustrating, alienating, difficult to see and forever changing features.<sup>40</sup>

Focus group participants from the WHO Age-friendly Cities study on communication and information strongly agree that staying connected with events and people and getting timely information, practical information to manage life and meet personal needs is critical for active ageing.<sup>41</sup> The biggest universal barrier to communicating with older adults is the visual and auditory presentation of information. For example, font size of text material, hard copy and visual displays is too small to read. Product labels and instructions, especially on medications, are hard to decipher. Auditory information is spoken too quickly and commercials on radio and television make older people lose their train of thought.<sup>42</sup>

What, then, are alternative ways of reshaping communication and information so that older adults become interested in using programs and services? Who will support the design of such products for age-friendly community consumption? The answers to these questions will be explored in this module on communication and information.

### **7. Community Support and Health Services**

“My only comment would be when someone gets to the point when they can’t take care of themselves they’re shipped out of the community. They’ve grown up here. You remove them for all their friends and possibly relatives.”<sup>43</sup>

Ultimately the design of our communities-both physically and socially- and our approach to retirement must be reconstructed to support the distinctive needs of an aging population.<sup>44</sup> Bookman suggest we must transform our communities with the notion of ‘aging in place’ where elders remain in their own homes and communities.<sup>45</sup> A look at a community coming together to meet the needs of older adults such as with ‘neighbors helping neighbors programs’<sup>46</sup> fits with the ideals of the age-friendly communities initiative of the World Health Organization.

In this module we will review community-based services such as home health care, in-home care and outreach services, that help older adults and persons with physical disabilities live independently and remain in their homes for as long as possible.

### **8. Advanced Age-Friendly Community Practice**

The purpose of this last module is for students in an aging graduate program in gerontology to learn and use advanced theories, approaches, and skills in community practice in age-friendly community development. The module uses a community-based service-learning approach designed to help students develop an analytical and empirical approach to communities. It builds on the ‘person in environment’ perspective and focuses on the life course perspective, an emerging interdisciplinary perspective that has the ability to help community development workers to bridge the micro and macro worlds.<sup>47</sup>

The module is designed to be used as an advanced two semester course that includes the first 10 modules and a service learning project that requires additional outside class time to complete. Students will periodically meet at a classroom in the community or be actively engaged in an age-friendly community activity at the partner site during class periods and/or outside class time.

Assignments include a course project that involves advocacy, networking and community collaboration skills with an advisory committee working towards making their community more age-friendly. The course project includes community mapping, community asset/needs assessment and writing a funding proposal for a specific age-friendly feature related to one of the eight domains identified by the World Health Organization.

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### Notes

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<sup>6</sup> RL Heikkinen, 'Growing Older: Staying *Well*' *Ageing and Physical Activity in Everyday Life*, Geneva: World Health Organization, 1998, p. 1.

<sup>7</sup> C Stein & I Moritz, 'A Life Course Perspective on Maintaining Independence in Older Age', *Ageing and Health*, World Health Organization, Geneva, 1999, p. 15.

<sup>8</sup> C Phillipson, 'The Elected and the Excluded: Sociological Perspectives on the Experience of Place and Community in old Age', *Ageing & Society*, vol. 27, 2007, p. 321.

<sup>9</sup>Quote of Senior from Focus Group, 'Age-Friendly Rural and Remote Communities: A Guide (AFRRCI), Federal/Provincial/Territorial Ministers Responsible for Seniors, Public Health Agency of Canada, 2007, p. 11.

<sup>10</sup> T Sugiyama & C Ward Thompson, 'Outdoor Environments, Activity and the Well-Being of Older People: Conceptualizing Environmental Support', *Environment and Planning A*, vol. 39, p. 1944.

<sup>11</sup> McKenzie Towne Community Info Site, Updated On 4/29/2009, viewed on 29 April 2009,

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<sup>12</sup> Quote of Senior from Focus Group, op. cit. AFFRCI, p. 14.

<sup>13</sup> E Dumbaugh, 'Designing Communities to Enhance the Safety and Mobility of Older Adults: A Universal Approach', *Journal of Planning Literature*, vol. 23, August 2008, p. 17.

<sup>14</sup> J Stepaniuk, H Tuuoko, P McGee, DD Garrett, & EL Benner, 'Impact of Transit Training and Free Bus Pass on Public Transportation use by Older Drivers', *Preventive Medicine*, vol. 47, 2008, p. 335.

<sup>15</sup> E Dumbaugh, 2008, op. cit. p. 31.

<sup>16</sup> M May, Pj Tranter, & JR Warn, 'Towards a Holistic Framework for Road Safety in Australia', *Journal of Transport Geography*, vol. 16, 2008, p. 395.

<sup>17</sup> Quote of Senior from Focus Group, op. cit. AFFRCI, p. 19.

<sup>18</sup> K Black, 'Health and Aging-In-Place: Implications for Community Practice', *Journal of Community Practice*, vol. 16, Issue 1, 2008, p. 79.

<sup>19</sup> BD McPherson, & A Wister, 'The Lived Environment: Community Housing Alternatives in Later Life, in *Aging as a Social Process: Canadian Perspective*, 2008, (Lawton, 1980, cited on p. 230).

<sup>20</sup> Quote of Senior from Focus Group, op. cit. AFFRCI, p. 19.

<sup>21</sup> EM Kessler, K Rakoczy, & UM Staudinger, 'Their Portrayal of Older Adults in Prime Time Television Series: The Match with Gerontological Evidence', *Ageing & Society*, vol. 24, 2004, p. 531.

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<sup>23</sup> AQ Liu, & T Besser, 'Social Capital and Participation in Community Improvement Activities by Elderly Residents in Small Towns and Rural Communities', *Rural Sociology*, vol. 68, Spring 2003, p. 343.

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<sup>31</sup> M Martinson, & M Minkler, 'Civic Engagement and Older Adults: A Critical Perspective', *The Gerontologist*, vol. 46, issue 3 2006, p. 319.

<sup>32</sup> P Moen, 'Midcourse: Navigating Retirement and a New Life Stage', in *Handbook of the Life Course*, J. T. Mortimer & M. J. Shanahan (eds), Springer, USA, 2004, p. 283.

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<sup>37</sup> Quote of Senior from Focus Group, op. cit. AFRRCI, p. 27, 28.

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<sup>44</sup> A Bookman, 'Innovative Models of Ageing in Place: Transforming our Communities for an Aging Population', *Community Work and Family*, vol. 11, November 2008, p. 419.

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