Final Report:

Elders of Abbotsford: An Exploration of Strengths and Issues.

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Introduction

In 2003, over 13% of the population of Abbotsford was over 65 years of age (Fraser Health, 2003). Seniors or elders[1] are one of the fastest growing demographic groups in British Columbia (Ministry of Health Services, 2004). An inevitable impact of demographic growth is the need for programs and services in local communities. Examining the strengths and needs of seniors in a community extends beyond traditional reviews of health and safety, although these are certainly important. With increasing numbers of active and mobile seniors, programs and services include the broad context of quality of life and community access.

In order to develop an overall perspective of the needs of the aging population in Abbotsford, the Abbotsford Elder's Committee (Sub-Committee of the Office of the Abbotsford Safer City Coordinator) identified a need for an exploratory research project on the issues of elders in the community. The Elder's Committee pursued the possibility through a partnership with the School of Social Work and Human Services, at the University College of the Fraser Valley.[2] This is an important initiative because it acknowledges that elders who live in Abbotsford are a group who need to be heard and recognized. The project also acknowledged that the lives and experiences of elders may go unnoticed, even when there are significant populations of elders in the community.

In 2005, the parameters of the study were established in consultation with the City of Abbotsford. The overall research objective was to gain a perspective from elders, and from stakeholders who work with elders, regarding the use of programs and services in Abbotsford. The objectives of the study were to identify:

- Existing programs used by elders in Abbotsford;
- 'Successful' programs and services used in the community;
- How these successes can be supported;
- Issues, problems, and gaps in programs and services--identified from the perspective of elders and stakeholders;

[1] We use the term elders throughout this report, although some individuals prefer seniors. This terminology is subject to discussion.

[2] The research project was made possible by substantial in-kind contributions by the School of Social Work and Human Services, UCFV, the Abbotsford Safer City Coordinator, the Abbotsford Elder's Committee (Sub-Committee of the Office of the Abbotsford Safer City Coordinator) and partial funding (grant) from the Union of BC Municipalities.

• Possible solutions to address these issues.

Within our overall aim, sensitizing themes in the research included seven broad topic areas. The project methodology included an exploration of program strengths and concerns through these sensitizing themes. It was understood that there might be additional themes that would emerge while the research was being conducted. The thematic areas included:

1. Transportation and mobility (e.g. scooters, pedestrians, and drivers);
2. Housing (e.g. availability, affordability, design);
3. Health and Wellness (availability, affordability, information dissemination, care provision);
4. Safety (e.g. injury prevention, accessibility, information dissemination);
5. Recreation (e.g. affordability, accessibility);
6. Legal Issues (e.g. estate planning, age-discrimination, and adult guardianship);
7. Support and Care-giving (e.g. affordability, accessibility, and appropriate levels).

The project and process were guided by a Research Advisory Committee.This committee consisted of members of the Abbotsford Elder's Committee and the researchers from the School of Social Work and Human Services at University College of the Fraser Valley.

Methodology

The research project was given approval in the fall of 2005. Eleven focus groups were conducted in Abbotsford, in community settings from October 2005 to February 2006. A total of 68 elders and 32 stakeholders attended the focus groups, for a total of 100 participants.

The participants in the groups were a purposive sample; that is they were identified through the committee, the researchers, and community agencies. Participants in the elder focus groups were recruited for these groups through various service organizations providing direct programs to elders in the community and recruited through elders who volunteered to arrange groups in adult oriented housing complexes. Participants in the stakeholder groups were recruited by invitation. In some cases, participants representing stakeholder groups were elders who used services as well as provided services[3].

Focus groups were chosen as a method because of the benefits and interactional nature of groups. Focus groups take advantage of the energy created by group discussion generating ideas and descriptions that might not be achieved through questionnaire or individual interviews. They provide some 'benefit' to participants because participants often gain information or make contacts as a result of the discussions. Focus groups are an accepted methodological approach for exploring people's knowledge and experiences. (Kreuger, 1988; Merriam, 1998; Yin, 1989)

[3] An example of elders who provide and use services are individuals who provide peer counseling or tax return assistance. These individuals also participate in programs in community services and seniors resources agencies.

The focus groups were facilitated by one or both of the researchers. Each researcher conducted groups with both elders and with stakeholders. Questions asked of the groups were intended to elicit participants' views and did not require the disclosure of any confidential or sensitive information. A semi-structured interview schedule of questions was used to direct the discussions of the focus groups. (See appendix.) With some groups, it was necessary to ask more probing questions to gain an understanding of the experiences of elders. Participants were assured of anonymity and confidentiality. No quotes are attributed to any individuals. The focus groups discussions were audio-taped with the consent of the participants. Groups lasted between one and two hours. Senior social work students were utilized as research assistants who assisted with note taking and other administrative tasks.

Thematic analysis was made possible by the review of the audiotapes and the notes taken at the groups. Thematic analysis required a summary of ideas and issues that arose out of the groups. Specific details and examples are minimized in order to keep this report brief and understandable.

Focus group composition

Elders who participated in the groups live in the community, mainly in the central and eastern parts of the city. The range of elders included the newly retired to older elders. The age span was from 65 to the mid 80s. This age span is significant because we begin to see the emergence of two distinctly different groups of elders: the "younger" group tends to be more verbal, more educated, and active, while the "older" group is active pursuant to health and safety concerns, and ability to maintain access to social and recreational activity.

A total of 68 people attended the elders focus groups. This included one specific group at the Sikh temple to include the participation of the cultural community. The group at the temple was facilitated by a Punjabi speaking community member who assisted in the organization of the group and interpretation with a number of the participants. Numerous attempts were made to conduct interviews with the Aboriginal community with an offer and understanding that the researchers would need to meet with them in their territory. However, due to various factors including time constraints, Aboriginal elders were not available and did not participate in the discussions.

Stakeholders who participated in the groups included Coordinators and directors of programs (e.g. meals, recreation, volunteer drivers, specific health services, peer support, and bereavement). This group comprised the balance of stakeholder group. Participants from a variety of departments of the City of Abbotsford included the Abbotsford Fire Rescue Service, Abbotsford Police Department, and City Council. Other organizations represented included Abbotsford Community Services, ICBC, and the Abbotsford Safer City Coordinator. Social workers and nurses from a variety of programs of the Fraser

Health Region attended the focus groups. A total of 32 people attended the stakeholder groups.

Services and programs for elders in Abbotsford

Given that the research asked for participants who could attend the focus groups, this limited attendance of participants to elders who are relatively active in Abbotsford. However, participants acknowledged that there were services and programs that individuals were not aware of, and the focus groups often provided new information about services and programs, through the sharing of experiences. Elders spoke about a range of services used including health care services, homecare services, mental health, hospital, bereavement groups, Abbotsford Community Services (e.g. volunteer visitors, peer support, meals on wheels, 'lunch with the bunch'), Seniors Resource Centre, supportive housing and assisted living, Office of the Public Guardian/ Public Trustee, Valley Alert Line, HandyDART, Life Line, Department of Veterans Affairs, Red Cross Equipment, Library, Seniors Hall, Abbotsford Seniors Association, church and faith-based services, safety and crime prevention programs, and recreation, parks, and social programs. Not every program mentioned is listed here. These represent a range of services that are well used by elders. Social, peer and meal programs were especially well accessed. Stakeholders listed a similar range of services, but also included Friendship House, Abbotsford Hospice Society, programs that provide education and learning, volunteer tax return service, and housing information programs.

Elder participants identified satisfaction with services provided by Home Heath Care. They perceive the service to be valuable, respectful, and focused on the care that is needed. Elders consider there to be a good range of services supporting elders who wish to stay at home. The assistance provided by the home health care system is perceived to be instrumental in keeping elders independent.

Participants generally expressed satisfaction regarding the services they used. The use of services and programs was contingent on awareness and accessibility. There is a wide range of support services available to elders in Abbotsford. Once an elder is "plugged in" they can become "well connected" to the broader support system in Abbotsford. The communication network between the different service providers appears to be good.

Awareness of services is exemplified by the idea of "cluster care." An example of this is where the same homemaker provides services for a group of elders who live in the same apartment building. The delivery of home support services is perceived to be helpful to elders because of the flexibility it provides and the responsiveness to the particular needs of elders.

Many elders in Abbotsford are involved in a variety of formal and informal volunteer situations (e.g. local social services agencies and the local hospital). The church communities and temple plays an important role for many elders in Abbotsford (e.g. fulfilling their social needs). However it was recognized that not all elders are affiliated

with a church group. Participants named several examples of "elders helping elders" through either a formal or informal "buddy system." This is one of the benefits of social networking as well as services that provide this function.

Issues and concerns

Population growth and urbanization has an affect on the elder population. There is an anticipated growth of the older population as a result of the pending opening of the Regional Health and Cancer Centre in Abbotsford. Elders may want to retire and locate closer to a major health care facility. Urban growth is an issue for elders who moved to Abbotsford in order to live in a "smaller" community and are now faced with living in a growing urban area.

Population growth will also affect demography and the cultural diversity of the Abbotsford area. South Asians (i.e. Indo-Canadians) comprise over 60% of the visible minority population in Abbotsford-Mt Lehman-Clayburn[4] and comprise over 20% of the overall population of Abbotsford-MtLehman-Clayburn (2001, Statistics Canada). South Asians also represent one of the fastest growing immigrant groups in Canada, comparable only to Chinese immigrants (Tran, Kaddatz & Allard, 2005). The majority of this population group is Punjabi speaking Sikhs.

Issues emerged from group discussions and articulated what is needed or what is lacking for elders, in order for them to live in an "elder-friendly" community (Cuyahoga County Planning Commission, 2004; Feldman & Oberlink, 2003). The notion of an elder-friendly community relies on home life indicators and community life indicators. A model for elder-friendly communities includes addressing basic needs, promoting social and civic engagement, optimizing physical and mental health and well being, and maximizing independence for people who are frail and disabled (Feldman & Oberlink, 2003). Indicators imply a sense of livelihood and participation at an individual/ familial level as well as social and community living. Home life indicators refer to housing, programs and services while at home, and accessibility. Community life indicators refer to mobility, accessible transportation, facilities, resources, and a diverse range of programs and services. These indicators are relevant to our sensitizing themes.

1. Transportation and mobility

Transportation and mobility refers to bus transportation, the use of HandyDART, the use of scooters, sidewalks and crosswalks, and volunteer driver programs. There was a high level of agreement across groups regarding concerns about transportation. Public transportation (the bus) is not viewed as elder-friendly: schedules are not adequate, routes are limited to specific areas (some areas receive no service at all). Bus stops are "far

[4] 2001 Census profile based on BC Provincial Elector Districts. Abbotsford-Clayburn and Abbotsford-Mount Lehman are separate electoral districts. For the purposes of this discussion, the figures are combined.

apart" and elders are often required to walk quite a distance between stops. There is also perception that some elders have a fear about using the bus service because of lack of knowledge about how it works. This perception indicates a need to encourage and educate seniors to use the bus service. At the same time, there were a number of specific areas where there is either no bus service or limited bus service. (e.g. Mt Lehman to Aldergrove, Clearbrook to Huntington, Downes Road).

One safety reason that elders may not use the bus service is that the "Bourquin exchange" is perceived by some elders to be unsafe and intimidating because of the high number of younger people congregating at the exchange. The Bourquin exchange was discussed by a number of groups. Elders are sometimes harassed at this location, and this includes racial harassment. Sikh elders talked about being called names and having cans of coke thrown at them when at the Bourquin exchange, or near the exchange.

Transportation is a key concern regarding travel to and from appointments, particularly appointments to health services. The HandyDART was described as "not always serving the needs of elders". The service has restricted destinations, restrictions on the number of shopping bags you may have with you, restricted times, and day service (e.g. the service is not available on Sundays). The reservation system requires 48 hours notice, and this is not always possible for elders who have unscheduled, emergent transport needs or elders with cognitive impairments. The travel time may also be long depending on the number of pickups and drop offs that are scheduled within one trip: "a 30 minute trip runs into a 3 hour trip because of waiting to be picked up." It was suggested that, in the case of applying to use the HandyDART service, a physician must complete a form. There was discussion regarding the use of the local taxi service. However, this is a limited option, and not an option for low income elders.

Scooters were discussed by most of the groups. There is a general agreement that scooter use will increase in Abbotsford in the future. The scooters give elders mobility and freedom to continue with activities in the community. There was a general consensus that scooters should not be banned but rather, they should be regulated. Concerns about the use of scooters include driving on the road because sidewalks are not conducive to scooters; scooter accidents with pedestrians or other vehicles; conditions of the sidewalks and lack of 'slipways'; instruction and training for elders who use scooters; scooter parking; and insurance and liability issues when scooters are involved in an accident. There was disagreement in the groups about who should be responsible for addressing the issues of scooter safety. Some participants felt it is a police matter and others felt there should be another group (e.g. ICBC or an insurance company) that would take on both "education and enforcement." It was further suggested that some kind of "medical form" be completed for scooter divers to indicate that they are physically and cognitively suitable to operate a scooter in public places, including on the street.

Sidewalks and crosswalks were discussed with regard to mobility. Winter conditions for sidewalks creates a safety issue with the potential for slippery walks and thus increasing the possibility for falls and accidents. Sidewalks are often narrow and do not allow for wheelchairs or scooters to pass. Curbs are high and sometimes uneven. Crosswalks lights

are often changed too quickly, (i.e. the "walk" sign is not in effect long enough for a pedestrian to get across the street). The "tweetie bird" system is not installed at many busy crossings, and safety becomes an issue for the visually impaired. Sidewalks and crosswalks were also considered unsafe with regard to the behaviour of cyclists. Cyclists often pass without ringing a bell or giving a warning. Because of population growth, the volume of traffic and pedestrians has increased and elders may continue to see this as a potential issue. One possible "solution" is to develop more bike paths that can also be used for scooters.

Possible solutions were discussed regarding transportation and mobility. The possibility of having companies with shuttle busses available for elders to provide transportation to the stores that are not in the centre of town was explored. This kind of service might be provided one day a week, and would be considered an additional helpful resource. A suggestion was made for the use of smaller busses that will make it easier for elders to travel from neighborhoods to the city centre.

Volunteer drivers are a community service provided in Abbotsford. Many of the volunteer drivers are elders themselves. This is a service that is well used and very much appreciated, but volunteers cannot provide as much service as some individuals and groups would like. It is a limited resource for elders.

2. Housing

The subject of housing included a discussion of continuum of care, (e.g. availability, affordability, design) financial considerations, and accessibility. Participants were in general agreement that there is a need for assisted living in the community. Examples were discussed regarding situations in the community where elders do not need nursing home care, but find it difficult to live independently in spite of a variety of home care services. Assisted living care that includes meal services and housecleaning may be a more appropriate housing option for them. This sentiment was echoed by stakeholders. Opinions were expressed that elders with complicated mental health issues (e.g. depression and anxiety) and some cognitive issues may benefit greatly from assisted living. Assisted living can support some elders in becoming less socially isolated.

There was a general perception in the groups with elders that "assisted living is only private care, provided by for-profit companies, and is too expensive for most elders." Some of the participants provided information about housing options and it become clear that there is confusion about what semi independent housing options are available in Abbotsford and at what cost. The perception that assisted living is "only private care" and that it is "too expensive for most elders," was shared in some of the stakeholder focus groups. Stakeholders were aware that there is an increase in "government subsidized assisted living beds" that will make assisted living more affordable and accessible for elders. Some stakeholders expressed concern about the group of elders who may not be able to qualify for "a funded bed in assisted living" but may not have the means to pay for, what is perceived to be "expensive private assisted living care."

The placements in facility care can also be problematic with regard to location and proximity to family members. Some elders are concerned that the "first available bed" policy may lead to elders being placed initially out of the area. Some of the opinions expressed revealed the perception that the placement policies for elders are "system – centred" and do not focus on the individual placement needs of an elder and her/his family. Certainly, the system does not 'feel' elder friendly by many participants.

Independence is a key theme for elders. This is a consideration of living in a facility or continuing to live in their current homes, apartments or townhouses. Elders expressed the importance for the community and the City to support them to maintain their independence. Stakeholder groups were generally in agreement with this objective of maintaining independence. Concurrent with this theme is the need for house maintenance repairs within a context of safety and reliability. Elders who are at home sometimes find it difficult to locate and sustain reliable maintenance services. There was an expressed need for some form of central information that would provide referrals for reliable services. Participants provided examples of "being taken advantage of" by repair and maintenance contactors.

Poverty is an issue for many elders who live on low income. There are elders in the Abbotsford community who can be considered poor and are at times in need of emergency food services. The food bank is considered a good resource. However for an elder with transport and mobility problems, the food bank is difficult to access. There was agreement that we need a resource in the community that will be responsive to the financial and material needs of elders. Poverty generally refers to elders who have difficulty managing on a single income, and in which this is considered a limited or low income. This is particularly true for older women who are on their own. Stakeholders identified poverty is an issue that they hear about. Elders with limited financial resources have limits on many aspects of their lives, including access to services, social and community activity.

3. Health and wellness

Health and wellness refers to availability of services, affordability of services, information, care provision, and general self care. In this theme, isolation and disconnectedness to the community were pointed out as an important issue for elders in Abbotsford.

Participants reported mixed experiences and perceptions of effectiveness of home health care. Generally, elders perceive the services from home health care very positive. Other elders experience some dissatisfaction because different support staff visit an elder during the course of a day. A lack of continuity and familiarity with different support staff can be difficult for elders, especially with respect to developing a trusting relationship with a support worker. It was also reported that there are "mis-matched expectations" because of language barriers that may exist between home support staff and the elders they serve.

These perceptions create reluctance in some elders to use the home support services. Some elders experience the home health care services not being tailored to their needs or to how the elders perceive their own needs. The service plans are not individualized and the elders have to "fit" into the service.

It was pointed out that using services at the emergency department of the local hospital can sometimes cause some difficulties for elders, such as long waits and overcrowding. Some elders voiced concerns about medication management and the need for services available to assist elders with ongoing medication management and education. There was an agreement amongst participants that continuing support for caregivers was important, especially those caregivers who "are not connected" to the health care system (home health care, mental health, or the local hospital).

New elderly residents in Abbotsford find it difficult to identify and connect with a family physician. There was a high level of agreement that the use of a walk-in clinic is not a suitable solution for elders in the long term. Most elders have chronic medical conditions and the care and continuity of a family physician is crucial in the management of chronic conditions. Elders are aware of the existence of a "list" of physicians who take new patients, but find it difficult to locate the list. A solution that was suggested was that a "central registry" of physicians who take new patients be kept by a "central information centre" at a central location (e.g. a seniors centre). Elders also identified overcrowding at MSA, with a three to five hour wait in emergency. The hospital was discussed as "unclean" due to lack of cleaning staff or the contracting out of cleaning services.

4. Safety

Safety refers to injury prevention, accessibility, and information dissemination. Urbanization of Abbotsford has raised fears about safety, isolation, and crime. Although official statistics may show that there is not a high number crimes with elders as victims, often crimes are underreported. This is particularly the case with financial crimes against the elderly. While the City of Abbotsford is considered a "safe city for people to live in," crime is reported, rather than safety, in the media.

Elders do not always "feel" safe and report that they install sensor lights around their properties to increase a sense of safety. The Bourquin exchange was cited as an area that needs police patrol. Concerns were voiced by some elders not feeling safe when walking in their communities. There was an expressed need for a crosswalk needed from the bus stop to Rotary Stadium. Lighting at busy intersections was also identified as a need for pedestrians. Other specific intersections were identified.

As part of injury prevention, a number of participants cited the need for more information about "falling," how to prevent falls, and how to fall "safely." The Fire Department provides a senior's education program about injury prevention and fire safety. Elders are identified as a high risk group by the Fire Department.

Structural modifications are still a concern among elders. Many large buildings rely on strata councils, and internally built in safety systems. However, these systems can still fall short with lack of railings and bath/shower rails, and identifying safety procedures in the event of emergencies (e.g. fire). Even though the BC Codes require bath/shower rails, there are still units in which this is a deficit. Personal safety is addressed by many elders individually, especially those who live alone. These elders use Alert buttons, rely on buddy systems, and friendly visitors to maintain a sense of connection and to have someone "check up" on them on a regular basis.

5. Recreation

Recreation refers to affordability and accessibility of facilities, programs, and services. There are competing perceptions of how recreational needs are being met. On one hand, there are "good" swimming facilities and parks with walkways that are suitable for walking. On the other hand, recreational activities not perceived as well organized in the community. There is a need to provide more leadership, more planning and better utilization of current services.

Recreational facilities are a major source of socialization and the prevention of isolation. This is of particular concern for elders who do not have adequate transportation. Abbotsford also faces criticism about fragmentation and availability of services. A number of participants said that services lacked coordination throughout the city. The consequence of this fragmentation and lack of coordination is that services are not always well utilized. Elders express a concern about "where to begin" to look for information on services. A central information service needs to provide information in printed form, individual assistance by phone, and a referral service. Elders also identified a need for a central point where they can receive information about volunteer opportunities in the community. A specific interest was voiced that elder volunteers be connected to assist other elders in the community.

Generally, the Sikh community makes limited use of elder services in Abbotsford. Many of them were not familiar with the Seniors Centre. Many of the elders in the Sikh community would like to have space that they can access specifically for the Indo-Canadian community. The community centre in Langley was given as a Sikh-elder-friendly example, where there are Punjabi newspapers, a library, and a gym for exercise. Sikhs are often unable to access seniors/ elders programs in Abbotsford because there are language barriers, and a lack of cultural inclusion. Many Sikhs currently participate in the rental of a room at Rotary stadium, but this is extremely costly.

There were some strong opinions expressed by one group about the benefits of pets for elders including companionship and exercise. Issues were raised concerning the restrictions of pets in some of the housing complexes. Issues exist around the availability of affordable services to take care of pets when the owners are away.

6. Legal issues

Legal issues include dealing with government, estate planning, discrimination, and elder abuse. Dealing with government bureaucracy was identified as a concern. Examples were given of the difficulty elders experience when they have to deal with government institutions (e.g. after the death of a spouse). Individuals receive "tons" of forms and documents, most of the time printed in small letters that are difficult to read and to complete. The need was expressed for a "central place" an elder can go to or contact for assistance to deal with these issues. Issues include finding information, understanding the bureaucratic requirements of the specific situation, and some advocacy, where needed. Elders express a high level of frustration when they try to contact any level of government organization to find information. Elders are referred constantly from one department to the next. They also find the use of the automated telephone systems another source of frustration. "We want to talk to a real person on the other end of the line." Learning Plus has held sessions regarding legal issues, and these have been well attended. However, Learning Plus only reaches a small population of elders. Many elders do not have this information and do not know how to access it.

The elders in the Sikh community identified the need for information about wills. Public information regarding wills should be provided in translated materials. There is a significant enough population in Abbotsford that the translation of materials regarding legal matters is becoming an important issue.

Age, race, and disability discrimination is experienced by elders. The elders pointed out that on the whole they have a good experience and people are nice to them (particularly whem they are customers who are shopping). Nevertheless, other elders experience people talking to them in a patronizing way, talking "down" to them, and calling them "dear" (which many do not like). Sikh elders revealed that young people in vehicles drive by shouting racists comments at them. Some young people also throw things at them and blow smoke at them; smoking is contrary to the beliefs of the Sikh religion. Cultural sensitivity and awareness is needed for service providers in the Abbotsford, including City employees and services.

Elders voiced a need to be "treated normally" and like "any other individual" and they do not want people to make assumptions about them based on their age. Even elders with cognitive impairments want to be treated as individuals. "What we want, is for people to get to know us, as individuals." One elder who is visually impaired was treated as if she was deaf and incompetent to make her own choices. There can be assumptions and stereotypes based on age and being less able because of individual impairments. "People associate all kinds of limitations with you because you are older."

The subject of elder abuse was raised by participants in some of the groups. When this occurs, older parents are afraid of their children and often will not admit that there is a problem. Elders will not charge their children with abuse, even if it is occuring. It is important that elders be made aware of their rights and have information about how they might protect themselves from abuse. Even when there are caring attitudes expressed

from adult children of elders, sometimes these adult children treat the elders as if they are less competent or less able.

7. Support and care-giving

Support and caregiving takes many different forms. In Abbotsford, church communities play an important role for many elders in Abbotsford in fulfilling their social needs. However it was pointed out that not all elders are affiliated with a church group. Elders also rely on social structures in place and support from the municipality. One of the components of the Police Board's vision is to make Abbotsford a "senior friendly city." The Police Department recognizes that elders as a significant part of the community. The Fire Department provides a "senior's education program" about injury prevention and fire safety. The position of the City Social Planner will also focus on senior's issues in the City. There is also a Social Sustainability Advisory Committee and a Social Development Plan" that will take seniors' issues into consideration.

Abbotsford has strong "special interest" senior groups. This is a strength in the sense that if elders are connected to one of the groups, they generally receive good support. Elders reported on the benefits of "organized informal support" they provide to each other in their specific neighborhoods or adult-oriented housing complexes. There was strong agreement that this type of support network may enable elders in housing complexes to stay independent longer.

A number of elders volunteer in the field of safety and crime prevention. Elders help in projects like "Speed watch" and in the Citizens Patrol, Community Policing office. They become visible for the community and other seniors and set examples on how elders can be involved in the community. This is a mutually supportive activity for elders. Elders are often involved in doing volunteer work in the community by participating on a wide range of committee and boards and serve as trainers for new volunteers or as chairpersons and on executive committees. Volunteer elders are perceived to be dedicated, passionate, and motivated to get involved with people from different age groups, not just with elders like themselves.

Recommendations

In this report, we have identified a number of issues identified by elders and by stakeholder representatives working with elders. From these discussions, some suggestions were made by elders themselves. While these discussions provide a long "wish-list," we suggest a number of possible actions at this time.

Based on an analysis of the elements of an "elder-friendly city," the findings of this study reveal that the City of Abbotsford can be described as "becoming an elder-friendly" community. The community of Abbotsford shows strengths and issues in the areas identified as indicators of "elder friendly communities." The main indicators for "elder

friendliness" address basic needs, promoting social and civic engagement, optimizing physical and mental health and well being, and maximizing independence for people who are frail and disabled (Feldman & Oberlink, 2003). Six recommendations are made here.

1. Acknowledgement and celebration of strengths of the elders of Abbotsford.

A number of systemic and individual strengths were identified in this study. The overall impression is that, government agencies, including the local health region and local government, provide a good level of service. The diversity of service providers and community groups also make significant attempts to meet the needs of elders with sensitivity and dedication to provide services, programs, and support. The elders of Abbotsford identified a desire to be involved in the community on different levels. Not only are they willing to support each other, but they also remain involved in the community, and continue to make contributions to improve conditions for themselves and for others.

It is recommended that the City of Abbotsford takes leadership in celebrating the strengths of elders in Abbotsford by initiating projects like:

- Abbotsford elder advisory committee: An advisory committee will provide an opportunity for elders to concentrate their collective wisdom and experience for the benefit of the community. Input and guidance can be provided to local government, health region, service providers, and community groups on issues of importance to seniors and other community matters. The establishment of an elder advisory committee will serve as an acknowledgment of the contributions elders are able and willing to make to the community.
- A yearly celebration of the strengths and contributions of elders in Abbotsford. This celebration could coincide with the International Day of Older Persons that is celebrated on October 1st of every year.

2. Mobility and transportation

It is recommended that the City of Abbotsford departments including the Police, Engineering, Parks and Recreation, and the office of the Safer City Coordinator initiate strategies to further research and address the issues concerning the problems elders experience with the bus service, HandyDART service, and sidewalks.

A number of concerns were identified concerning scooter use including safety, storage, competency and education of drivers, and safety of pedestrians. It is recommended that a task force being formed to research and develop strategies for the safe use of scooters in Abbotsford.

3. Housing

In order to support and enable elders to stay independent in the community, elders, family members, service providers and the community at large need to be informed about the different options along the continuum of care (housing). There appears to be a lack of

clarity around the more recent developed living options including supported housing and assisted living. It is recommended that information and education about the range of care and housing option that exists in the Abbotsford community be provided not only to elders but also the general public.

4. Central information service and a seniors' centre for Abbotsford.

The need for a user-friendly, accessible, central information service was clearly identified. It is recommended that stakeholders who provide services to elders work together, in collaboration, to develop and maintain a "one-stop information service" for elders to access. This service should provide information and referral to a wide range of services including locating a family physician, home repairs, and information on safety and legal issues.

It appears that the debate over the future, purpose and location of a seniors' centre for Abbotsford is alive and will continue in the future. This debate is not only highly relevant, but is also dynamic, complex, and multi-dimensional. It is recommended that the debate be encouraged and stimulated to be inclusive of all groups of elders. The City of Abbotsford may consider continuing to play a facilitative role (possibly by the use of an external facilitator) as well as a supportive role.

5. Combating ageism and racism.

Some elders in Abbotsford experience ageism and racism. It is essential for the community to develop anti-ageist and anti-racist strategies. An Elder Advisory committee can play a vital role in this regard. There appears to be a need for cultural sensitivity education that could include discussions of age, culture, and race. This is particularly important for departments and services that work with the public (e.g. bus drivers, reception desks). The increasing population of elders and immigrant families into Abbotsford makes this an important and pressing need. There is also a need for translated materials for the Punjabi-Sikh community.

6. Abbotsford: An elder-friendly city.

It is recommended that the elders of Abbotsford form a partnership with a range of stakeholders to continue in the development of Abbotsford as an elder-friendly city. This community development model may be explored in partnership with the university college, through planning and research.

Community development involves an engagement with the community by providing access to resources, and by facilitating a process of how to access and use resources. Community development is also about the building of a community, supporting existing strengths and assets, and providing education and communication. The City of Abbotsford can build on strengths as well as continue to make efforts to improve resources and access.

Conclusion

The elders of Abbotsford are valued contributors and participants in the social fabric of the community. The elders who participated in the groups were very articulate and interested in the work that the researchers were doing with the City of Abbotsford. Many of them asked to be kept informed of future developments. The focus groups themselves provided a positive interactive experience for many of the elders and they expressed appreciation for the opportunity to voice their opinions and concerns as well as receiving new information about resources in the discussions. It will be important to have continuing dialogues with elders and stakeholders working with elders in the community.

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APPENDICES

1. **Focus group questions for elders**

2. **Focus group questions for stakeholders**

Elders research project:

Focus group questions for elders*

1. What existing services and programs for elders do you primarily (mostly) access in Abbotsford?

2. What services and programs have been good for you or are seen as 'successful'?

3. What are some of the issues in services and programs for you as an elder, or for elders that you know?

4. If there are issues – how do you think these might be addressed or solved?

Some of the areas where there may be successes or issues include:

- Transportation and mobility (scooters, pedestrians, and drivers);
- Housing (availability, affordability, design);
- Health and Wellness (availability, affordability, information dissemination, care provision);
- Safety (injury prevention, accessibility, information dissemination);
- Recreation (affordability, accessibility);
- Legal Issues (estate planning, age-discrimination, and adult guardianship);
- Support and Care-giving (affordability, accessibility, and appropriate levels).

5. Please comment on any other service and program areas that we have missed.

6. Any other comments about services to elders?

*Focus group questions were reviewed and approved by the Abbotsford Elders' Committee August 31, 2005

September 15, 2005

Elders research project:

Focus group questions for stakeholders*

1. What existing services and programs for elders do you primarily work with in Abbotsford?

2. What services and programs are seen as 'successful'?

3. What are some of the issues in services and programs for elders that you know?

4. If there are issues – how do you think these might be addressed or solved?

5. Some of the areas where there may be successes or issues include:

- Transportation and mobility (scooters, pedestrians, and drivers);
- Housing (availability, affordability, design);
- Health and Wellness (availability, affordability, information dissemination, care provision);
- Safety (injury prevention, accessibility, information dissemination);
- Recreation (affordability, accessibility);
- Legal Issues (estate planning, age-discrimination, and adult guardianship);
- Support and Care-giving (affordability, accessibility, and appropriate levels).

6. Please comment on any other service and program areas that we have missed.

7. Any other comments about services to elders?

*Focus group questions were reviewed and approved by the Abbotsford Elders' Committee August 31, 2005

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