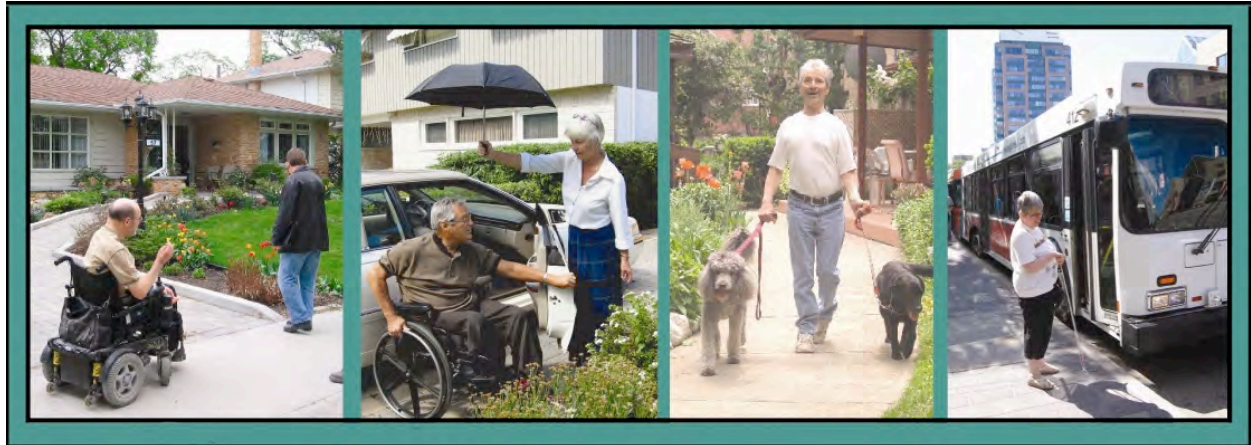


CANADIAN CENTRE ON DISABILITY STUDIES



AGING AND DISABILITY

**From Research and Knowledge to Better Practice:
Building Strategies and Partnerships for Livable
Communities that are Inclusive of Seniors with Disabilities**

Synthesis Papers:

**LIVABLE AND INCLUSIVE COMMUNITIES
FOR SENIORS WITH DISABILITIES:
TRANSPORTATION STRUCTURES**

**ANALYSIS OF HOUSING FOR SENIORS WITH DISABILITIES
USING A LIVABLE AND INCLUSIVE COMMUNITY LENS**



Government
of Canada

Gouvernement
du Canada

Disclaimer

This project is partially funded by the Government of Canada's Social Development Partnerships Program. The opinions and interpretations in this publication are those of the author and do not necessarily reflect those of the Government of Canada.

TABLE OF CONTENTS

TRANSPORTATION STRUCTURES

Institute of Urban Studies, 2009

| | | |
|--------------|--|-----------|
| I. | Introduction | 1 |
| II. | Mobility and Aging | 1 |
| III. | Analysis of CCDS Model | 2 |
| IV. | Policy and Practice Analysis | 4 |
| | A. Participation..... | 4 |
| | B. Community Connections..... | 6 |
| | C. Leadership..... | 7 |
| | D. Sustainability | 8 |
| | E. Universal Design | 9 |
| | F. Affordability..... | 10 |
| V. | Rural Case Studies | 11 |
| | A. Rural Transportation in Ontario..... | 11 |
| | B. Perth County, Ontario | 13 |
| | C. Rural Transportation in Saskatchewan | 13 |
| | D. Annapolis Royal, Nova Scotia..... | 14 |
| VI. | Urban Case Studies | 14 |
| | A. B.C. HandyDART | 14 |
| | B. Quesnel, BC | 16 |
| | C. Edmonton Community Shuttles | 17 |
| VII. | Summary and Conclusions | 17 |
| | A. Policy Recommendations Addressing Transportation | 17 |
| | B. Recommendations for CCDS Model | 18 |
| VIII. | References | 20 |
| | Appendix A: Winnipeg Handi-Transit | 23 |
| | Appendix B: Mobility Disadvantaged Transportation Program | 23 |
| | Appendix C: Winnipeg Transit DART | 24 |
| | Appendix D: Illinois Rides Mass Transit District Program | 24 |
| | Appendix E: BC Transit HandyDART | 25 |

ANALYSIS OF HOUSING FOR SENIORS WITH DISABILITIES USING A LIVABLE AND INCLUSIVE COMMUNITY LENS

Canadian Centre on Disability Studies, 2009

| | | |
|-------------|---|-----------|
| I. | Introduction and Purpose | 26 |
| II. | Introduction to the Livable and Inclusive Community Model | 26 |
| III. | Analysis of Current Canadian Housing Practices and Polices Related to Seniors with Disabilities | 27 |
| | A. Where Do Seniors Live?..... | 27 |
| | B. What are the Housing Issues?..... | 27 |
| | C. Lack of Affordability | 28 |
| | D. Design of the Homes: Lack of Accessibility in Current Housing Stock | 29 |
| | E. Lack of Housing Stock with Even a Basic Level of Access is a Major Issue..... | 30 |
| | F. Building Codes and Regulations..... | 30 |
| | G. Lack of Adequate Federal and Provincial Home Adaptation and Home Maintenance Programs..... | 31 |
| | H. Lack of Housing Options Available | 32 |
| | I. Federal Housing Policies and Practices..... | 33 |
| | J. Provincial Responses to Lack of Federal Policies..... | 34 |
| | K. Federal Call to Action Needed..... | 34 |
| IV. | Moving Forward: Integrating Urban Planning, Livable Communities and Needs of Older Adults | 35 |
| | A. Current Challenges..... | 35 |
| | B. Innovative Planning Practices..... | 35 |
| | C. Visitable Housing..... | 36 |
| | D. Age-Friendly Cities and Rural Communities Initiatives..... | 37 |
| | E. British Columbia as a Model | 37 |
| | F. Saanich, BC: A Model Official Community Plan..... | 42 |
| V. | Using the Livable and Inclusive Community Model to Analyze Current Housing Policies and Practices | 43 |
| | A. Livable and Inclusive Community Model Housing Assessment Framework/Tool | 44 |
| | B. How Does Canada Measure Up In Terms Of Housing Policy And Practices For Seniors With Disabilities Using the Livable and Inclusive Community Model? | 45 |
| | C. Saanich, BC Approach to Housing for Seniors: A Case Study | 48 |
| | D. Langford, BC: Approach to Housing for Seniors: A Case Study..... | 49 |
| | E. How Do Two Communities Measure Up In Terms Of Housing Policy And Practices For Seniors With Disabilities Using The Livable and Inclusive Community Model? .. | 50 |
| VI. | Recommendations for Policy, Practice and Process Change | 51 |
| VII. | References | 54 |
| | Appendix A: Housing Terms | 58 |
| | Appendix B: Various Housing and Community Assessment Tools | 59 |
| | Appendix C: Interview Guide and Consent Form | 64 |

LIVABLE AND INCLUSIVE COMMUNITIES FOR SENIORS WITH DISABILITIES: TRANSPORTATION STRUCTURES

Institute of Urban Studies, 2009



About the Institute of Urban Studies

Founded in 1969 by the University of Winnipeg, the Institute of Urban Studies (IUS) was created at a time when the city's "urban university" recognized a need to address the problems and concerns of the inner city. From the outset, IUS has been both an educational and an applied research centre. The Institute has remained committed to examining urban development issues in a broad, non-partisan context and has never lost sight of the demands of applied research aimed at practical, often novel, solutions to urban problems and issues.

I. INTRODUCTION

When examining issues of aging and mobility it is useful to conceptualize a continuum of transportation resources that recognizes a range spanning between independent (driving oneself) and dependent (para-transit services) mobility options. The adequacy of access to this continuum has important implications for well-being and overall quality of life for older adults. Furthermore, an older person's access to this transportation continuum is dependent on functional ability. Therefore, it is important to consider the transportation continuum in relation to its adequacy for a growing senior population that is increasingly experiencing disability and reduced access to community opportunities. In this analysis, transportation will be examined through the lens of a livable community that is inclusive for seniors with disabilities.

Communities should offer the same opportunities for all of its citizens regardless of their abilities. A community's social and built environments can have a direct impact on its citizen's overall health, well-being and quality of life. The social and built environment should be addressed in tandem in order to address its citizens' requirements including the needs of seniors with disabilities. A vital component of any community's environment is correlated with transportation. As presented by the Canadian Centre on Disability Studies (CCDS), public transportation should be available and affordable, and can accommodate individuals with different abilities. Thus, if a community is to be considered livable for seniors with disabilities, then transportation and mobility must be reflected in local transportation policies and practices (Canadian Centre on Disability Studies 2009).

This analysis considers a livable community model proposed by CCDS. Transportation is regarded to be a key element for a livable community, and an examination of the model will highlight issues surrounding mobility, as well as document policies, case studies, and good practices to inform communities regarding the improvement of mobility resources for older adults with disabilities. This analysis will provide a foundation for recommendations to changes in policy and practice, and it will serve as a resource document for the broad range of stakeholders engaged in the development of community plans.

II. MOBILITY AND AGING

In this first section, data from both the Canadian Census and the Province of Manitoba are discussed in the context of transportation for seniors with disabilities. Transportation facilitates access to health care services, socialization, continued independence and well-being. As transportation is critical to the health of aging Canadians, and increasingly older adults are experiencing barriers to driving, policies are required to ensure flexible transportation options (AARP 2007). This preliminary discussion provides background regarding the issue of aging and the importance of access to transportation within the framework of livable communities.

Previous work has noted that “very few countries in today’s world are actively getting “younger” in terms of their age profiles; the dominant world trend is towards an aging society in which elderly populations are not only growing in size but are also growing as a share of the total population” (Macey et al. 2003, 520). Between 2000 and 2030, the Centers for Disease Control and Prevention (2003) expect a dramatic global increase in proportions of individuals 65 years old and older. For those countries experiencing unprecedented growth in their older population, the need for improved living environments for older adults experiencing functional declines is becoming more imperative.

In Canada, data from the 2006 Census of Canada indicate that the number of seniors aged 65 years and over surpassed the four million mark for the first time with the proportion of older persons increasing from 13.0% in 2001 to 13.7% in 2006 (Statistics Canada 2007a). Moreover, between 2006 and 2026, this population is projected to increase from 4.3 million to 8 million seniors. Seniors over 65 years old will represent 21.2% of the total population (Statistics Canada 2007b).¹ Canadians living longer present unique opportunities and challenges. A specific challenge will be the full engagement of our older population in the community which is dependent on the provision of appropriate and affordable transportation that allows access to life-sustaining and life-enriching resources.

The need for improved access to transportation for older adults with disabilities will become more acute as the baby boom generation ages. A precursor to the unprecedented growth of seniors aged 65 years and over is the dramatic growth of the Canadian population aged 55 to 64 years. This growth will have particular implications for the segment of the older population that have disabilities. For example, while 56% of Manitobans with disabilities were seniors in 2001, that proportion is projected to increase to 68% by 2026 (Disabled World 2008). Therefore, analysis of the CCDS livable communities model is essential to examine how an increasing senior population with disabilities can be afforded appropriate and adequate transportation resources that allow for full community engagement.

III. ANALYSIS OF CCDS MODEL

A model to evaluate whether a community is livable and inclusive for seniors with disabilities has been developed by the Canadian Centre on Disability Studies (CCDS) Project Team. The CCDS livable community model includes ten elements that make up a livable and inclusive community, as well as six principles that act as a guide when examining the applicability of each element to a livable community. In this section, a framework is established to evaluate the significance of the transportation element as it relates to the principles of the model.

Livable and inclusive communities, as developed by the CCDS model consist of ten common elements that include housing, transportation, support services, health and well-being, education and training, spiritual and cultural, leisure/ recreation, outdoor

environment, employment and jobs, and volunteerism. According to the model, change in one element impacts other elements because the elements are interrelated. For example, in the case of accessible seniors housing on the outskirts of a community, reliable transportation is needed in order to connect disabled seniors with this housing, services, and all other activities of daily living.

In the present analysis, the six principles in the CCDS model were used to examine the applicability of the transportation element to a livable and inclusive community. Each of these principles acts as an indicator of whether a community is livable and inclusive, offering the same opportunities for all of its citizens, regardless of differing abilities. Therefore, in this analysis, each principle was defined in relation to its contribution to improved transportation resources for older adults with disabilities:

1. *Participation* addresses whether there are mechanisms for seniors with disabilities to be actively engaged in governance processes that influence transportation policies. Further, participation illustrates how meaningful the participation is, and the degree to which it fosters an active civil society.
2. The principle of *community connections* asks whether transportation services bridge seniors with disabilities to services, social interaction, the larger community, and places they want to go.
3. The *leadership* principle explores if there is government level leadership, such as municipal council, or community level leadership like a champion. If this leadership exists, does it formally acknowledge the need for appropriate transportation options and influence supporting policies?
4. The *sustainability* principle examines whether transportation options meet current needs without impeding the ability of future generations to meet their needs. Additionally, it explores what mechanisms are in place to evaluate needs and to adjust transportation availability accordingly.
5. *Universal design* addresses whether public transport is accessible to individuals with disabilities and whether policies exist to support accessible transit. Further, it should address the accessibility of routeways for seniors with disabilities or mobility challenges.
6. *Affordability* refers to whether the cost of public transportation is reduced or otherwise affordable for seniors.

These definitions are the foundation for the remainder of this analysis as they provide the framework to examine the application of the element of transportation to the CCDS model of livable communities for seniors with disabilities. The following sections will examine these principles and highlight policy and best practices that can inform improved transportation for the growing older population. In addition, this analysis will also demonstrate particular elements that are crucial to accessible transportation but are not featured in the present CCDS model.

IV. POLICY AND PRACTICE ANALYSIS

Transportation policies and programs exist throughout North America under a variety of circumstances and conditions. A community's livability and inclusiveness can be enhanced through a variety of policy actions. These can range from prescribed methods of operation, to financial investments in transportation. Across Canada different approaches have been used to address transportation for seniors with disabilities and have had varying degrees of success. Drawing from a variety of regions, transportation policies will be evaluated through the lens of CCDS' six principles of livable and inclusive communities, as outlined in Section 3.1.2. For each principle, policies and programs that successfully reflect the principle will be highlighted; as well, those that are lacking in the principle area will be addressed. Policy recommendations will be proposed following each principle.

A. PARTICIPATION

To address the need for improved transportation options for older adults with disabilities, a range of stakeholders must be involved. Specifically, the involvement of community members is vital to the decision-making process. As such, the principle of *participation* is particularly relevant to the element of transportation because it highlights the need for governance structures that allow for civil discourse. Community engagement is essential to address the issues that create mobility barriers. Ideally advisory or working groups of community representatives would be formed at the municipal level, as it is often the governing body that administers public transportation. An advisory group with linkages to municipal governance would provide political clout to assure that the needs of the aging population are addressed.

A strong partnership is required that allows advisory groups to be influential in the process of developing a mandate that facilitates accessible transportation within a community. Examples of the application of the *participation* principle in transportation forums include:

“Participation” Successes

An advisory committee in Lethbridge, Alberta, the Seniors Community Forum, was critical to the development of the city's Community Plan for Seniors. It is important to note that forum membership was open to all those representing the seniors population, caregivers and families.

The Montreal Steering Committee on Seniors led production of a report that provides recommendations to address the transportation needs of seniors. The role of this committee in Montreal is to ensure that older adults are appropriately represented, and to collaborate with the community on project goals. Recommendations included collaboration and partnerships advocating for accessible transit, promoting active transportation, universal design, and addressing medical transportation needs.

In Winnipeg, the Mayor's Seniors Advisory Committee is a volunteer based group that provides recommendations and counsel to the mayor and city hall on seniors related municipal issues. These include transportation, accessibility, safety, social and recreational services. The group's membership are community members over 55 years of age and supported by two senior city staff. Their reports and recommendations go directly to the mayor's office and thereby influencing policy and programs.

The *participation* element is also relevant in relation to the provision of transportation that allows the older population with functional limitations to participate as community members in the planning process and civil society. Engagement includes activities that support healthy communities such as volunteering. The economic value of seniors volunteering is estimated by Statistics Canada to be worth \$60.2 billion annually (Edwards & Mawani, 2006). While this type of participation is fundamental to the well-being of older adults, transportation is generally prioritized for reasons of work or health, while service to accommodate access to civic and volunteer opportunities is not guaranteed.

“Participation” Deficiencies

Winnipeg Handi-Transit (Appendix A), funded by the city and Manitoba Intergovernmental Affairs, operates with the same “fixed route” system as conventional transit. Aside from the benefits of Handi-Transit, it prioritizes employment and medical trips over all other uses.

In rural Manitoba the Mobility Disadvantage Transportation Program funded by Manitoba Intergovernmental Affairs and Rural Manitoba Municipalities operates similarly. The governing local board or authority prioritizes trips based on capacity, typically setting medical as the primary use. Typically there is little coordination of trips, reducing the number of passengers on any given trip.

However, transportation such as Dial-a-Ride Transit (DART), provided by Winnipeg Transit does not prioritize rides, while offering curb-to-curb service (Appendix C). The DART program is a flexible transportation option that not only enables *participation* in society; it bridges people with places in their community that are important to their quality of life.

Policy Recommendations

- Creation or expansion of seniors advisory groups and committees that engage seniors with disabilities in the policy making process. These groups must not merely be token, but have real and meaningful influence, with the supports and resources to address transportation issues.
- Ensure that transportation options are available for engagement in civil society, and that alternatives to prioritized service are developed.

B. COMMUNITY CONNECTIONS

Access to activities that impact on social well-being should be guaranteed, ensuring that seniors are able to be linked to all of their *community connections*. These connections can include trips to the grocery store, recreational activities, medical visits, volunteering and the social experiences inherent in all of these activities. Through supporting the mobility of seniors with disabilities, a bridge is created between all aspects of their life, reinforcing livable and inclusive communities.

Governance bodies that influence or are responsible for transportation have a key role in ensuring that *community connections* are enhanced for seniors. There are several means to address this, and amongst the strongest are government strategies and frameworks dedicated to aging and transportation.

“Community Connections” Successes

Saanich, BC has a municipal active aging strategy, developed by Parks and Recreation that recognizes transportation is the key element for older adults' active involvement in the community. The strategy specifically states that affordable and accessible transportation for older people is required in order to assist access to recreation and leisure opportunities. This policy guarantees that there is a body to inform the transportation system, and illustrates how transportation issues are inherently interdepartmental.

In St. Boniface, Winnipeg, the DART (Appendix C) is used to connect users directly with their community services with low-floor buses. Cost effective when ridership is low, this service responds to direct call requests rather than operating on fixed routes. Part of what makes the St. Boniface DART work so well is the neighbourhood's high density of seniors and services.

Edmonton's Community Shuttles do use fixed routes, but the bus loops are specifically servicing seniors housing and destinations that are relevant to this population. Edmonton Transit System took an existing service and applied it to a specific population, creating a unique service that brings seniors closer to where they want to go, in an economical way.

“Community Connections” Deficiencies

Winnipeg Transit was designed primarily to commute citizens living in the outer rings with their workplace in the city centre, not seniors trying to get from their homes to their community groups to their grocery store during the day. Accordingly the fixed route system focuses on employment destinations at the beginning and end of the workday, and is insufficient to get seniors to where they want to go.

It is important to note that Winnipeg Transit's recognition of the fixed route system's inherent limitations led to the implementation of DART. This is a good illustration of the role government *leadership* plays in reinforcing access to *community connections*.

Aging strategies do not always address transportation. Manitoba Health's Aging-in-Place/ Long Term Care Strategy includes a variety of programs supporting seniors with disabilities. However transportation is not considered within the context of the strategy's programs. Many seniors are simply not able to make use of programs due to a lack of transportation, making the programs inaccessible. The absence of transportation in such strategies may lead to isolation and decreased quality-of-life for those with decreased mobility or accessibility to transportation.

Policy Recommendations

- Transportation providers can address community connections by developing community shuttle services with routes reflecting the transportation needs of seniors.
- Expanding DART services into higher density neighbourhoods, replicating the St. Boniface model providing transportation to variable destinations.
- Embed transportation provision interdepartmentally into housing, aging, participation and recreational policies and strategies.

C. LEADERSHIP

Leadership plays an important role at both the government and community levels. Although having government leadership dedicated to transportation is certainly important, community leadership is also essential. Having community champions that can develop meaningful and collaborative relationships with system administrators and government provide opportunities to influence in the policy networks. An effective champion is embedded in both seniors groups and the political process, accurately informing policy. Leadership ties directly into the *participation* element as community engagement plays a role in governance, but often requires a dedicated individual to guide the larger community.

Transportation for disabled seniors should be acknowledged by leadership at different levels, be it at the neighbourhood, municipal, or provincial levels. Additionally, information regarding appropriate transportation options should be made widely available to individuals with disabilities facilitating further *participation* in governance.

“Leadership” Successes

The Transportation Options Network for Seniors (TONS) in Manitoba is an example of community level leadership. An interconnected coalition of seniors organizations, TONS provides information and resources to ensure appropriate, affordable and accessible transportation options are available to aging Manitobans.

British Columbia's provincial *Seniors' Healthy Living Framework*, illustrates the leadership role that provincial government can take in providing policy structures to ensure transportation issues are addressed. Provincial leadership has led to the implementation of various policies and supporting programs to ensure transportation options for a diverse aging population. Government level leadership, such as in BC, can direct and inform transportation systems.

“Leadership” Deficiencies

Although TONS provides a leadership role within the seniors community, it has been unable to directly *participate* in policy with the comprehensiveness of a community champion.

Policy Recommendations

- Embedded with *participation* mechanisms, municipal governments can create volunteer leadership positions for community members who embrace the champion's role.

D. SUSTAINABILITY

Livable and inclusive communities, by their very nature must be sustainable socially, environmentally and economically. Drawing from the United Nations' Brundtland Commission, transportation that is sustainable must “meet the needs of the present without compromising the ability of future generations to meet their own needs” (1987). As such, ensuring transportation options exist for seniors with disabilities exist, in order to be sustainable, must also consider the expected population changes in the future. Creating *sustainability* is dependent on other principles of livable and inclusive communities. It requires structures that ensure *participation* and *community connections* in a proactive long-term strategy, as these inform policy makers and system administrators where needs and efficiencies exist. This requires strong *leadership* at all levels to address the balance between social, environmental and economic goals.

“Sustainability” Successes

British Columbia's *Seniors' Healthy Living Framework* is a good example of how addressing transportation in an aging strategy ensures that transportation options are sustainable. BC's framework recognizes that creating livable and inclusive communities contribute to sustainability, and this includes transportation for seniors.

The RIDES program in rural Illinois addresses sustainability through ongoing evaluation and consultations regarding service fulfillment, economic efficiency (Appendix D). Routes and services are continually adjusted to meet needs in the most efficient and effective way, while coordinating services across the entire region.

Winnipeg's Rapid Transit presents an exciting advance in sustainable transportation for seniors with disabilities. Particularly if new seniors housing is appropriately connected to transit nodes with direct and accessible routeways.

“Sustainability” Deficiencies

Where evaluations for sustainability exist, they typically do not assess the gaps in service. Although transportation may meet the measurable economic and environmental imperatives, there can be gaps where people are unable to access transportation, illustrating a socially unsustainable situation.

The Manitoba Handi-Van program (Appendix B), which is sponsored by the provincial government, issues grants to rural municipalities. Unfortunately, funding is inadequate and is unable to fill the social and economic aspects of sustainability.

As a response to this unsustainable funding source, volunteer driving programs attempt to fill the gaps left by Handi-Vans. Due to the inconsistency of volunteer drivers who are getting older, and the changing culture of volunteerism, the volunteer driving programs are equally unsustainable as the aforementioned Handi-Van programs.

Competition for access to limited transportation resources also exist. The social impacts of conflicts arising from competition create further unsustainable conditions within the seniors and disability communities.

As previously mentioned the provincial Aging-in-Place Strategy/ Long Term Care does not acknowledge the essential role that transportation plays in the health and social conditions of an aging population and seniors with disabilities. Social needs are not addressed and this leads to an unsustainable strategy for aging-in-place goals.

Policy Recommendations

- Facilitate more diverse income sources for locally controlled transportation services. For example, in rural areas that operate Handi-Van programs, facilitating conditions where rural municipalities will buy-in to their local or regional Handi-van services, expanding the income base for operators.
- Embed transportation into all provincial strategies and frameworks that address aging and seniors. Ensuring that transportation is a part of these guiding documents facilitates greater sustainability of transportation for seniors with disabilities and reinforces the livability and inclusiveness of communities.
- Conversely, embedding sustainability into all municipal transportation policies, contributes to overarching provincial sustainability policies.

E. UNIVERSAL DESIGN

Public transportation for disabled individuals should be accessible to persons with disabilities. Further, any new public buses must be made accessible to persons with disabilities. Also, designated and priority parking must be available for individuals with disabilities and mobility challenges. Universal Design in recent years has become widely accepted and continues to be incorporated into expansion and development of services such as transportation.

“Universal Design” Successes

Winnipeg Transit's fleet contains a growing number of low-floor buses and all new vehicles purchased are low-floor.

Winnipeg Transit has committed to make all new buses more accessible to persons with disabilities with 'kneeling' buses that reduce the step-up from the curb. Additionally, ramps can be lowered providing access to walkers, wheelchairs, scooters and strollers.

Upcoming changes to Winnipeg Transit include the implementation of Rapid Transit. Plans include enclosed (likely heated) shelters and better passenger loading.

GPS and real-time operation will allow riders to know when buses will actually arrive rather than when they are scheduled to arrive, and will be available online or by phone.

Increasingly audio and visual automated stop announcements are available on Winnipeg Transit buses, and they will soon begin having external speakers on buses to notify the visually impaired waiting at bus stops.

In Harrisburg, Illinois, RIDES provides a detailed brochure that is widely available in alternative formats, including Braille and large print (Appendix D).

“Universal Design” Deficiencies

Universal Design does not address the routeways from residences to a bus stop, impairing access to *community connections*. Although buses may be accessible through universal design, passengers may be hindered by distance to the stop, snow on city sidewalks, and lack of cut curbs.

Policy Recommendations

- Expanding Universal Design policies to include routeways that bridge seniors to the transportation nodes. These can include more direct routes to bus stops, shelters appropriate for seniors with disabilities, or cleared and safer routeways.

F. AFFORDABILITY

Many seniors, and seniors with disabilities live on fixed and limited incomes. After housing, utility and food expenses, there is often very little room in one's budget for transportation costs. Accordingly, transportation for seniors with disabilities should be affordable. Affordable transportation will allow users to access others elements of livable communities.

“Affordability” Successes

BC Transit and TransLink offer a Taxi Saver program for HandyDART (Appendix E) registrants providing a 50% subsidy towards the cost of taxi rides.

HandyDART acts like a regular client for the taxi company and the taxi company acts like an overflow service for HandyDART by using accessible cabs when HandyDART vehicles are unavailable. Regular cash or ticket fares still apply, and the taxi company bills HandyDART monthly for the difference of all trips not covered by the fares.

Funding from the City of Winnipeg and the province's Intergovernmental Affairs allows Winnipeg Transit to offer discounted fares to seniors aged 65 years and over as well as any individual with a visual impairment.

“Affordability” Deficiencies

Rural Manitoba's Mobility Disadvantaged Transportation Program (Appendix B) has allowed the sponsoring municipal government to operate the service directly or enter into an agreement or contract with a third party. Although this has allowed for flexibility in operation, it has also led to uncontrolled and inconsistent user fees, often reducing ridership.

Policy Recommendations

- Fostering *partnerships* between transportation providers can be a first step towards offering subsidized, discounted and coordinated services, such as those offered by BC Transit.

V. RURAL CASE STUDIES

In this section, a practical application of the project model through three rural case studies is presented. The case studies are: (1) a rural dispersed approach to community transportation in Perth County, Ontario; (2) rural transportation in Saskatchewan; and (3) rural transportation in Annapolis Royal, Nova Scotia. This section will provide a background for recommendations for changes in policies and practices throughout Canada.

A. RURAL TRANSPORTATION IN ONTARIO

In the Province of Ontario, the Community Transportation Action Program (CTAP), which began in September 1996, was a joint provincial initiative involving five ministries already carrying transportation budgets to support a program providing Ontario communities with the opportunity to develop sustainable, integrated, transportation programs. In particular, the CTAP was introduced to decrease gaps, duplication and inefficiencies of existing transportation services. It sought to increase service planning at the local level, increase the quality and access of services, to free up resources to meet service demands; and to empower local decision-making.

In order to reach these specified goals, addressing *participation* and *sustainability*, CTAP was designed to offer support for community efforts by acting as an agent of change. CTAP encouraged the coordinated use of preexisting resources by providing transitional funding to develop community-based transportation programs, and by attempting to remove provincial policy or legislative barriers that may have prevented or hindered communities from achieving coordination.

Ontario communities had the opportunity to obtain a maximum of \$50,000 to support two phases of individually designed integration plans. Typically, the first phase of each

program was to complete a “transportation resource inventory” in order to determine available resources for further coordination and to facilitate cross-sector planning. This process aids *sustainability* as it addresses the social needs in relation to the economic resources available. Following the inventory was the second phase, this “planning for implementation phase” was designed with community resources and needs in mind. Communities were encouraged to develop models of *coordination* to suit the needs of their area; this illustrates the potential *participation* from community members.

The majority of rural communities involved with CTAP included prospects of cost-sharing ideas in the proposals. This was not a requirement, but it was felt by CTAP staff that coordinated cost-sharing between programs would give the individual programs more credibility. It was also stated that this type of funding would increase the chances of a program’s *sustainability* when provincial funding ended.

While the CTAP program was based on the need for the elderly and disabled residents of Ontario to better access transportation services, many of the rural communities that received funding aimed to serve all residents of the area. Given the very diverse nature of rural Ontario, it was assumed that individual projects would be influenced by the geographic, social and economic circumstances of the rural areas. For example, it was assumed that rural areas with dispersed small towns and villages have different problems in delivering transportation services than rural areas with a dominant and central city.

From the review of communities using CTAP funding, three forms of transportation coordination in rural areas became evident: (1) urban centralized - high resource; (2) rural centralized- low resource; and (3) rural dispersed. The categories that have been developed are flexible and general in nature reflecting the uniqueness of each rural community and available transportation resource base.

The rural dispersed approach to community transportation coordination builds upon already existing transportation in rural areas. Typically, there is some form of transportation service in several small towns and villages, which serve the surrounding rural areas. All that is needed is better coordination between the numerous programs. A benefit of this model is autonomy is maintained by the individual community projects. To a regular user of the service, no notable changes would be evident, except perhaps the increased options of traveling further distances. This type of approach focuses on *coordination* and *partnerships*, allowing for the sharing of ideas, promotion of programs, and combined funding approaches.

B. PERTH COUNTY, ONTARIO

An example of a rural dispersed model used in rural areas is present in Perth, County, Ontario. Perth County is a county primarily consisting of villages and hamlets, and a small urban centre in Stratford. A centralized dispatch system was initially pursued for addressing coordination, but was dropped in favour of first enhancing existing transportation services in the towns and hamlets. *Coordination* and ongoing *partnerships* between five different local coordinators, under the leadership of the District Health Council, were driving factors in Perth County's success. Each locality has their own separate business plan, but shared a single funding source. When grant funding was received, each community's plan was pursued, but each of the five communities met on a regular basis to share information, ideas, cost sharing, and future coordination plans. In reflection, local administrators noted that due to the volume of paperwork, it would have been advantageous to have a municipal agency be the sponsoring body for funding. On the other hand, there were several factors that led to successful coordination. These included a history of organized services and communication between the five groups. Open communication and sharing between all stakeholders was seen as invaluable. Maintaining local autonomy ensured collaboration was non-threatening to local needs, but increased capacity through continual networking and communication, facilitating increased governance *participation*. The mix of programs from each group were all at different planning stages, and networking allowed for newer programs to learn from established programs.

The *partnership* and *coordination* approaches undertaken by the Perth County Group appear to have been effective. The success can be attributed to many different factors including leadership styles, local cultures, starting small, respect for partners, and effective communication. Most importantly, the individual community groups remained autonomous and felt able to collaborate without the threat of loss or dissension.

C. RURAL TRANSPORTATION IN SASKATCHEWAN

The second rural case study to be highlighted in this report surrounds the Saskatchewan Transportation Company (STC), a provincial Crown corporation operating 28 routes to 278 communities across Saskatchewan. STC has nodes in the main terminals in Regina, Saskatoon and Prince Albert with an additional 206 rural agencies in the Province. As a Crown corporation, the STC is able to provide broad service, province-wide in an effort to meet the needs of all residents of Saskatchewan, including seniors with disabilities. The STC offers a Wheel Chair Accessible Coach Service for people with special needs; when booking in advance, buses with wheel chair accessibility can be made available. STC also offers a variety of *affordability* measures, including:

- A 10% discount on regular fare for seniors;
- Medical Passes can be purchased for under \$55, allowing unlimited monthly travel on the route nodes connecting passengers to required medical visits.

- Disabled travelers who require an escorting attendant or companion animal can travel together on one ticket price purchased at the regular rate.

D. ANNAPOLIS ROYAL, NOVA SCOTIA

The third and final rural case study to be highlighted in this report originates from Annapolis Royal, Nova Scotia. Kings Transit Authority is a public transit system operating in the Annapolis Valley, Nova Scotia, where four municipalities in Kings County worked together coordinating finances, implementation and the operation of a regional public transit service, which was expanded in cooperation with Annapolis County. This is an example of regional *coordination* being used to create services that would otherwise be cost prohibitive. Kings Transit Authority, through this multi-municipality coordination, has been able to purchase Accessible Low Floor Buses (ALF). These vehicles employ *Universal Design*, providing easier access for existing transit passengers and increased mobility for others by offering no steps for entry or exit, deployable access ramps for wheelchair access, widened passenger doors, and large destination signs.

An ALF Route can be identified by a symbol for accessibility on all four sides of the bus, and on the bus stop signs along the ALF bus routes. If a bus is seen with these decals travelling along a route with bus stops marked with these symbols, it signifies that a fully accessible low floor bus is in service. However, this does not necessarily mean that the entire route it is servicing is accessible, as not all bus stops have suitable conditions for boarding and disembarking from the bus.

Kings Transit Authority has an attendant fare policy for disability clients, increasing *affordability*. Any rider with a disability that requires the need of an attendant to ride the Kings Transit bus system, the attendant shall be entitled to ride free of charge.

VI. URBAN CASE STUDIES

In this section, a practical application of the CCDS model is examined through three urban case studies. The three case studies are: (1) B.C. Transit's HandyDART, Taxi Supplement and Taxi Saver programs; (2) public transit in Quesnel, B.C.; and (3) Edmonton's community shuttles. This section will also provide a background for recommendations for changes in policies and practices in the Province of Manitoba.

B.C. HandyDART

A. B.C. HandyDART

In the Province of British Columbia, HandyDART provides convenient transportation for people with disabilities from and to accessible building entrances. Any person who is unable to use regular transit due to a physical or mental disability is eligible for HandyDART service. While the HandyDART tries to accommodate as many passengers as they can each day, there are times when this is not always possible.

Passengers sometimes request trips when HandyDART is fully booked or outside regular hours of operation. During those times when HandyDART is unable to meet passenger needs, taxi companies can play a valuable role in providing services to people with disabilities. BC Transit's Taxi Supplement and Taxi Saver Programs are two ways for taxi companies to help provide this type of transportation while maintaining *affordability*. While both Taxi Supplement and Taxi Saver involve the use of taxis and a *partnership* between the HandyDART operators, the Municipality, BC Transit and participating local taxi companies, the two programs are quite different in terms of how they are administered.

The Taxi Supplement Program enables the HandyDART operator to book trips in taxis when a regular vehicle is unavailable, either because of capacity issues or because the trip cannot be accommodated in a timely manner. In essence, the HandyDART operator becomes one large regular client to the taxi company, while the vehicles of the taxi company act like extra vehicles for the HandyDART operator, contributing to the *sustainability* of both transportation options. Just as on HandyDART, the passenger must pay the regular HandyDART cash fare or ticket to the taxi driver. Any escort of the passenger should also pay the HandyDART fare, however an attendant required to help the HandyDART rider may ride for free. These attendant and escort rules are identical to those used in the HandyDART vehicle. As with regular HandyDART service, other passengers may be picked up and dropped off by the taxi en route. This program provides great flexibility and increased *sustainability* to HandyDART through its innovative *partnership*.

The Taxi Saver Program, on the other hand, puts more control into the hands of the actual HandyDART user, providing greater convenience for spontaneous travel to *community connections*. Taxi Saver provides a highly *affordable* 50% subsidy towards the cost of taxi rides. Eligible individuals can purchase a \$60 package of Taxi Saver coupons at a cost of \$30. This package can be purchased once every month, or once every two months in some locations. Denominations of \$1 and \$2 Taxi Saver coupons are included. The purchaser is then free to book the taxi trip of his or her choice directly with participating taxi companies and uses the coupons to pay the dollar meter rate of taxi fare. The Taxi Saver Program can be administered by either the HandyDART operator or Municipality.

Any individual who is 16 years or older and who is registered with the HandyDART system can obtain a HandyPass. A HandyPass is a photo identification card, issued by BC Transit, that is needed to buy Taxi Saver coupons. A HandyPass must also be presented to the taxi driver at the time of fare payment.

As mentioned above, passengers are responsible for directly contacting participating taxi companies to arrange Taxi Saver trips. Use of Taxi Savers is entirely at the discretion of the registered user and so trips may be taken at any time and may be of any dollar amount, as long as the rider has the ability to pay. The passenger may have one or more friends accompany him or her free of charge, up to the capacity of the

vehicle. However, the taxi company may only provide trips within the specified Transit Service Area.

It should be noted that since both the Taxi Supplement and Taxi Saver Programs are provided for the benefit of HandyDART users, the passengers who will use these programs are people who have physical or mental disabilities. As such, passengers may require special assistance and care. Participating taxi companies are encouraged to do their best to assign drivers and equipment capable of providing these passengers with the assistance and care they require, and additional driver training is available.

In terms of equipment, taxi companies are encouraged to invest in accessible vehicles if none currently exist in their fleets, promoting *Universal Design*. Since HandyDART operators and passengers with mobility difficulties much prefer to use those taxi companies that can provide wheelchair-friendly vehicles and excellent service, accessible vehicles are a sound investment. As the population ages, this market will only grow. Finally, maintaining a healthy relationship with the local HandyDART operator is an invaluable way to learn more about the transportation of people with disabilities and improve service to the general public

B. QUESNEL, BC

Quesnel, British Columbia is a small community of 10,000 residents. In 1999, a Quesnel city councilor took a *leadership* role creating a long-term vision for public transit. Quesnel previously had dial-a-ride service for seniors and people with disabilities, and previous fixed-route service attempts had been ceased due to low ridership. City hall acknowledged that a transit system could address *sustainability* by meeting the social, economic and environmental needs of the community. This included meeting the needs of seniors and people with a disability.

The City of Quesnel Official Community Plan of 1999 created local transit objectives and a vision that included paratransit, taxis, custom transit, as well as subsidies for existing transportation networks. At Quesnel's request, BC Transit conducted a transit study considering all the *sustainability* of the plan. BC Transit and the City formed a funding *partnership* in 2001 to provide integrated transit to residential, educational and commercial areas. Since 2002 ridership has increased by about 20% annually. The long-term growth of transit in Quesnel was so successful that the city continued to invest in expanded service even when BC Transit was unable.

The transit system has created *partnerships* with medical and educational institutions, seniors centres, and other associations and agencies to facilitate the optimal service for Quesnel citizens. Transit drivers are regularly engaged in the community and attend neighbourhood meetings. They communicate one-on-one with citizens to clarify routes and schedules. The City seeks *participation* from riders, community groups and transit drivers to keep tabs on the evolving needs of the community.

C. EDMONTON COMMUNITY SHUTTLES

Edmonton community shuttles are a senior oriented door-to-door service in smaller buses, providing service from large seniors housing to places like senior centres, medical buildings, or shopping centres, facilitating *community connections*. Buses are wheelchair accessible, have kneeling functions and have space for two wheelchairs or scooters, embracing *Universal Design*. Edmonton community shuttles were initially designed to service emerging neighbourhoods, areas that didn't warrant full bus service, or streets that could not accommodate traditional buses. More recently, specific routes were developed two years ago to serve senior communities during off-peak hours looping past seniors centres, residences, shopping malls and the like. Passenger usage is high, and overhead is much lower than regular buses. This application of public transit clearly addresses the social, environmental and economic aspects of *sustainability*, and the public has responded accordingly. Edmonton has received positive feedback from seniors who like the more intimate feel of the buses, and have developed family-like relationships with other passengers. These buses are felt to be less intimidating than the larger buses that carry significantly more people. Bus routes are designed to transport people, particularly seniors, to areas that transit does not normally service, and closer to their *community connections*. In some cases, such as shopping complexes and seniors centres, this means they can be dropped off at the front door of their destination. The biggest challenge of operating this service has not been the routes or service provision, but the buses themselves. Edmonton has not yet found a particular make or model of bus that is durable enough for the weather conditions and long operating hours.

VII. SUMMARY AND CONCLUSIONS

Public transportation should be available and affordable, and able to accommodate individuals with different abilities. Thus, if a community is to be considered livable for seniors with disabilities, then transportation and mobility should be reflected in the transportation policies and practices of that community. Analysis of the CCDS model led to several policy suggestions addressing the mobility needs of seniors with disabilities. Additionally, a secondary outcome emerged through analysis; recommendations regarding the applicability of the model itself will be addressed.

A. POLICY RECOMMENDATIONS ADDRESSING TRANSPORTATION

Through examination of the CCDS model, alongside the presentation of rural and urban case studies, a number of policy recommendations can be made which communities should consider in their development plans for transportation.

- Support *participation* through seniors advisory groups and similar bodies; additionally ensuring that transportation options exist for these activities.
- Modeled after Winnipeg's DART and Edmonton's community shuttles, develop routes, specific to the needs of seniors with mobility challenges;

- embed transportation provision into all government policy related to seniors. These will address strengthening *community connections*.
- Foster community *leadership* development through *participation* policies that ensure seniors with disabilities are part of the transportation policy process.
 - *Sustainability* can be increased with the promotion of partnerships, and ensuring sustainability and transportation become rooted in all government strategies or frameworks related to seniors with disabilities.
 - Expand *Universal Design* policies to include pedestrian routeways in accessibility plans.
 - Ensuring coordination and partnerships with other programs, institutions, or municipalities as a means of increasing *affordability*.
 - Ontario's CTAP and Annapolis Royal in Nova Scotia illustrate the importance of engaging in *coordination* and *partnerships* in order to address principles such as *participation*, *sustainability*, and *Universal Design*.
 - Based on the rural case of Perth, Ontario, we found that strong leadership is the basis for:
 - Coordinated actions and partnerships between groups making the provision of transportation *sustainable* and effectively linked to *community connections*;
 - Increased funding to allow program leaders to concentrate on efficient and cost effective implementation of programs. Sound *leadership* and funding will also facilitate *Universal Design*.
 - Drawing from the British Columbia examples, such as in Quesnel and BC Transit's HandyDART, leadership appears to be a crucial factor needed for success. The absence of government leadership (which translates into funding) prevents increases in the number of vehicles available, and planning cannot meet the needs of the user. Further, funding and subsidies will not be available to make programs affordable without the vision of a strong leader.
 - The case of Saskatchewan illustrates how *affordability* can be addressed through initiatives such as the Medical Pass, significantly reducing costs associated with regular medical travel.

B. RECOMMENDATIONS FOR CCDS MODEL

In addition to using the CCDS model to evaluate transportation's contribution to an inclusive and livable community, the model itself is examined for its applicability, with supplementary recommendations.

- Each principle appears to be applicable to addressing transportation for seniors with disabilities.
- The *leadership* principle appears to be integral to the successful integration of all other principles into a program.
- *Participation*, as a principle, speaks to both participation in governance, as well as transportation options allowing seniors with disabilities to engage in civil society.

- Closely related is *Universal Design*, whereby transportation options (and the pedestrian environment) should allow seniors with disabilities to participate in their communities.
- However, the model suffers from two key gaps in accessing whether transportation provides for a livable and inclusive community. Partnerships are not addressed, yet they contribute greatly to binding different groups in a community together, supporting each other. These partnerships can take place between community groups, government, institutions and service providers. Partnerships speak to the role organized relationships play in addressing challenges in innovative ways.
- Increasingly coordination is also essential for communities who wish to provide transportation to their aging population. Coordination, as a principle, centres around how municipalities or transportation providers pool their resources together, and coordinate programs to serve their neighbouring communities.

The CCDS model provides a strong set of indicators for assessing the livability and inclusiveness of a community. Including *partnerships* and *coordination* as additional principles in the model, would complement an already effective model for addressing the transportation needs for seniors with disabilities.

VIII. REFERENCES

- AARP. 2007. *2007 Colorado Transportation Survey: Aging and Mobility*
http://www.aarp.org/research/housingmobility/transportation/co_transport_07.html (accessed: February 22, 2009)
- BC Transit. 2009a. *Government of BC Bus Pass Program*.
<http://www.busonline.ca/regions/kel/transitplus/bcbuspass.cfm>
(accessed February 22, 2009)
- BC Transit. 2009b. *Information circular: Taxi Supplement and Taxi Saver Programs*.
<http://www.busonline.ca/corporate/resources/pdf/res-serv-28.pdf> (accessed: April 13, 2009)
- BC Transit. 2005. *Best Practices in Public Transit*. <http://www.bctransit.com/corporate/resources/pdf/res-other-44.pdf> (accessed: April 13, 2009)
- British Columbia. 2008. *Seniors in British Columbia: A healthy aging framework*.
http://www.hls.gov.bc.ca/seniors/PDFs/seniors_framework_web.pdf
(accessed: April 13, 2009)
- Canadian Centre on Disability Studies. 2009. *Working Group Session - Evaluation Model and Tool*.
- Centers for Disease Control and Prevention. 2003. *Public health and aging: Trends in aging--United States and Worldwide*.
<http://www.cdc.gov/MMWR/preview/mmwrhtml/mm5206a2.htm> (accessed: October 1, 2008).
- City of Lethbridge. 2007. *Lethbridge community plan for seniors*.
<http://www.lethbridge.ca/NR/rdonlyres/58C7117D-5BF3-4332-9757-4E435AD11D2A/10588/LethbridgeCommunityPlanforSeniorsElectronic.pdf>
(accessed: April 13, 2009)
- City of Winnipeg. 2007. *Seniors Advisory Committee*. http://www.samkatz.ca/htmlfiles/MAYORS_OFFICE/seniors.asp (accessed: April 17, 2009)
- Department of Health and Human Services. 2009. *Seniors Benefit From Transportation Coordination Partnerships: Case Studies of Successful Coordination Transportation Services for Older Adults*. <http://www.aoa.gov/prof/transportation/media/TransportationChoicesToolbox/CaseStudyGuide.PDF> (accessed: February 22, 2009)

- Disabled World. 2008. *Disability Statistics Canada*. <http://www.disabled-world.com/disability/statistics/disability-statistics-canada.php> (accessed February 22, 2009)
- Edmonton Transit System. 2009. *ETS and seniors information package*. http://www.edmonton.ca/transportation/transit/ets_seniors.pdf (accessed: April 12, 2009).
- Edwards, Peggy, Mawani, Aysha. 2006. *Healthy aging in Canada: A new vision, a vital investment from evidence to action*. http://www.phac-aspc.gc.ca/seniors-aines/pubs/haging_newvision/pdf/vision-rpt_e.pdf (accessed: April 13, 2009).
- Government of Canada. 2002. Community-based responses to rural transportation issues in Ontario: A review of the Ontario Community Transportation Action Program (CTAP) 1998-2000. http://www.rural.gc.ca/researchreports/transport/no1_e.phtml (accessed February 22, 2009)
- King's Transit. 2008. *The Friendly Bus Service*. <http://www.kingstransit.ns.ca> (accessed April 13, 2009)
- Kinsella, K, and V. Velkoff. 2001. U.S. Census Bureau. *An Aging World* Washington DC: U.S. Government Printing Office, 2001; series P95/01-1
- Macey, Susan M, Geoffrey C. Smith, and John F. Watkins. 2003. Aging and the aged. In *Geography in America at the dawn of the 21st Century*: eds. Gary L. Gaile and Cort J. Willnott. New York: Oxford University Press.
- National Advisory Council on Aging. 1999. *1999 and Beyond: Challenges of an Aging Canadian Society*. Ottawa: Minister of Public Works and Government Services Canada.
- Rapid Transit Task Force. 2005. *Made in Winnipeg rapid transit solution: Final report*. www.winnipeg.ca/cao/pdfs/news_releases/RTTFFinalReport.pdf (accessed: April 13, 2009)
- Rogers, Andrei. 1989. The elderly mobility transition: Growth, concentration, and tempo. *Research on Aging 11*, no. 1:3-32.
- Saanich Parks and Recreation. 2004. *Yours is a lifetime!: Active aging strategy*. <http://www.gov.saanich.bc.ca/resident/community/services/pdfs/aastrategy.pdf> (accessed: April 14, 2009).
- Saskatchewan Transportation Company. 2008. <http://www.stcbus.com/home.aspx> (accessed: April 13, 2009)

Society For Manitobans with Disabilities. 2004. *Aging and Disability in Manitoba: Converging Opportunities*. <http://smd.mb.ca/uploads/DoublelensreportFinal.pdf> (accessed: February 22, 2009)

Statistics Canada. 2006. *2006 Census of Population, population from 1921 to 2006 (Canada, provinces, territories)*. <http://www.estat.statcan.ca.proxy1.lib.umanitoba.ca/cgi-win/cnsmcgi.pgm>. (accessed October 1, 2008)

Statistics Canada 2007a. *The Daily: Tuesday, July 17, 2007: 2006 Census: Age and sex*. <http://www.statcan.ca/Daily/English/070717/d070717a.htm>. (accessed October 1, 2008).

Statistics Canada 2007b. *The Daily: Tuesday, February 27, 2007. A portrait of seniors*. <http://www.statcan.ca/Daily/English/070227/d070227b.htm>. (accessed October 1, 2008).

Table de concertation des aînés de l'Île de Montréal. 2008. *Seniors mobility and transportation in Montréal*. http://www.tcaim.org/Rapport_Transport_et_Mobilite_TCAIM_Summary.pdf (accessed: April 13, 2009)

United Nations General Assembly. (1984). *Report of the World Commission on Environment and Development: Our common future*. <http://www.un-documents.net/wced-ocf.htm> (accessed: April 19, 2009).

APPENDICES

Appendix A: Winnipeg Handi-Transit

Winnipeg and Brandon “Handi-Transit” services are parallel to regular transit service for people who cannot use the “fixed route” transit system because they are legally blind or have a physical disability that impairs their mobility. Handi-Transit operates within the same geographical service area as the “fixed route” public transportation system. To make the service cost effective, Handi-Transit operates a pre-book, shared ride service. However, “in vehicle” travel times are kept to a minimum.

Handi-Transit transports individuals who are ambulatory or travel in a wheelchair/scooter. Drivers physically assist passengers from the ground floor doorway, to and from the vehicle, to the ground floor doorway at the destination. Drivers do not ring buzzers/doorbells or search for passengers. They do not provide personal attendant service or supervision during the trip, or place passengers into the hands of someone else at the destination point (i.e. wait for a caregiver to arrive). Passengers who require assistance during or after a trip should arrange for an attendant to travel with them. Handi-Transit will reserve a seat for an attendant. The fare for Handi-Transit is \$2.30 per one way trip. This is the same as the full fare for riding on regular transit.

Appendix B: Mobility Disadvantage Transportation Program

The Province of Manitoba sponsors Handi-Vans to assist communities to provide transportation services for mobility disadvantaged persons. The program makes provision for grants to assist in paying for the cost of acquiring and operating equipment, and to provide transportation for communities without existing transport infrastructure.

To qualify for funding, the sponsoring community must demonstrate a commitment to keep a service in operation once it is established. The transportation provided must also meet minimum standards for service and safety as set out in the program guidelines. The service must be available to all mobility disadvantaged individuals in the community. The sponsoring community will be required to cover any deficit after receipt of grants, donations and user fees.

The service is available to the community for at least 40 hours per week and include weekends. Services provide door-to-door pickup, that is the door of pickup to the door of destination. However, there are no centralized pickup or drop off locations. In cases where demand exceeds capacity, priorities are established by the local board or authority overseeing operation of the service. Escorts or attendants shall be allowed to ride with those mobility disadvantaged persons requiring escorts or attendants.

Appendix C: Winnipeg Transit DART

Similar to the DARTS program in West St. Paul, Minnesota, Winnipeg Transit's Dial-a-Ride Transit (DART) is a demand responsive transit (DRT) system that offers greater routing options than a traditional fixed route system. This is accomplished through residential street pickups. However, service is limited within a certain geographical area of the city and only offered during off-peak times. Winnipeg has four DART routes which operate in the communities of St. Boniface, St. Amant, Southdale, and St. Norbert. These buses are operated, in part, to provide residents a feeder route to the main bus line. In St. Boniface, the DART is used to connect users with the community services rather than to provide access to main bus routes. The buses have low-floor access and DART is effective when ridership is low.

Important considerations for DART expansion include logistical and technical considerations for where buses can and cannot operate. For example, buses cannot back-up. This is important because DART is a door-to-door service but on something of a fixed route. Further, buses cannot enter and exit cul-de-sacs. In addition, local roads don't hold up to the weight of buses and are narrower. The width of a bus (eight feet wide) makes it difficult to get down the street and this is a barrier to local traffic. Thus, collector streets are preferred because bus routes get cleaned before side streets. Further many newer streets don't have a lot of houses on them and are missing sidewalks. Cul de sacs and bays branch off of them. This is a challenge to the development of transit. Frontage streets are advantageous for transit with respect to keeping parked cars out of the way of bus traffic.

Appendix D: Illinois RIDES Mass Transit District Program

The RIDES Mass Transit District program, offered in Harrisburg, Illinois, provides a highly coordinated public transportation service in a large rural area encompassing nine counties in southeastern Illinois. Approximately one-third of the rides provided to social service agencies in the region are for senior transportation, including people with disabilities.

The RIDES Board is comprised of representatives from each of the nine participating counties, and meets on a regular basis to coordinate and plan necessary services for their partnership. RIDES conducts semi-annual meetings with client agencies to assess current service and address any problems or issues. As a result of this community participation, RIDES has developed a number of new transportation programs as a result of consultations with agencies and local representatives.

To prevent service duplications, "RIDES" reviews routes monthly. Four dispatch centers have computer-aided programs that identify duplications in trips during the reservation period. For trips between counties, the dispatchers have an e-mail system through which they coordinate cross-county trip requests and identify potential options for coordinating these rides. RIDES is establishing a Web-based network that will connect all of the dispatch centers, while maintaining the current reservation and scheduling software.

Appendix E: BC Transit HandyDART

HandyDART program is a shared-ride public transit service. It uses specially equipped vehicles to accommodate passengers with physical, sensory or cognitive disabilities who are unable to use public transit without assistance. Passengers may telephone their local HandyDART operator to request a trip. HandyDART passengers are picked up at the outside door of their residence and dropped off at the outside door of their destination. Services are delivered by local contractors through individual operating contracts with TransLink and B.C. Transit. This is a joint provincial program between B.C. Transit and Translink and is not transferable between the federal government and the province.

Taxi Supplement Program: when regular HandyDART vehicles are unavailable, operators book rides through a taxi company. HandyDART acts like a regular client for the taxi company and the taxi company acts like an overflow service for HandyDART. Regular fares still apply (cash or ticket), and monthly the taxi company bills HandyDART for the difference of all trips not covered by the fares paid. For the passenger, these trips are identical to how HandyDART operates, with the exception of the type of vehicle being traveled in. At the end of each month the taxi company participating in the Taxi Supplement program invoices the HandyDART operator for the total amount of Taxi Supplement trip costs minus the total amount of fares collected by drivers. After reimbursing the taxi company, the HandyDART operator then invoices BC Transit for the total trip meter amount. For participating communities, a Taxi Supplement Program budget is specified for each year. While HandyDART operators may exceed the monthly budgeted amounts from time to time, dispatchers make a concerted effort to not exceed the budgeted amount.

B.C. Transit and TransLink offer a Taxi Saver program for HandyDART registrants living in Vancouver, Victoria, and other B.C. municipalities. This program provides a 50 percent subsidy toward the cost of taxi rides. Passengers use coupons for taxi travel by booking directly with a participating Taxi company, without having to pre-plan the trip. Taxi Saver coupons are sold by local HandyDART offices to any adult who has been issued a B.C. Transit HandyPass or Translink HandyCard, which are available to any permanent registered HandyDart user.

ANALYSIS OF HOUSING FOR SENIORS WITH DISABILITIES USING A LIVABLE AND INCLUSIVE COMMUNITY LENS

Canadian Centre on Disability Studies, 2009

Laurie Ringaert, MSc.

About the Canadian Centre on Disability Studies

The Canadian Centre on Disability Studies (CCDS) is a consumer-directed, university-affiliated centre dedicated to research, education and information dissemination on disability issues. The Centre promotes full and equal participation of people with disabilities in all aspects of society. CCDS is guided by the philosophies of independent living and community living, emphasizing human rights, self-determination, interdependence, equality, a cross-disability focus, and full and valued participation in the community. Members of the disability community are key participants in directing CCDS policies and activities.

I. Introduction and Purpose

The purpose of this paper is to provide an analysis of housing for seniors with disabilities through a livable and inclusive communities perspective. This analysis paper is part of a larger project led by the Canadian Centre on Disability Studies (CCDS) and funded by Human Resources and Social Development Canada (HRSDC), called “*From Research and Knowledge to Better Practice: Building Strategies and Partnerships for Livable Communities That are Inclusive of Seniors with Disabilities*” (2008-09). The central purpose of the larger project was to develop and test a model of livable and inclusive communities that includes the needs, preferences, and circumstances of seniors with disabilities. A participatory method was used to accomplish this goal by identifying the key principles and elements of what makes communities livable and inclusive for seniors with disabilities and to develop and test a Livable and Inclusive Community Evaluation Tool and process to measure the extent to which the community meets their needs. In addition, a Livable and Inclusive Community Planning Tool was developed and introduced to several pilot communities across Canada. This portion of the project provides a focus on one of the model’s elements, namely housing, and provides an analysis using the livable and inclusive communities’ framework that has been developed. The objectives of this paper are to:

- Provide an introduction to the CCDS Livable and Inclusive Community model in terms of housing
- Provide an analysis of current Canadian housing practices and policies related to seniors with disabilities in the context of the livable community concepts showing the impact on health and well-being, social and economic inclusion and participation
- Propose ways forward through integrative planning approaches
- Provide practical applications of the CCDS Livable and Inclusive Communities model to housing
- Provide recommendations for changes in policies, practices and processes

This discussion does not focus on personnel supports needed for housing and community living, although that is highly recognized that that both are needed for successful community living for seniors with disabilities. An analysis of supportive services will be the topic of discussion in subsequent papers by CCDS. In this discussion the terms “seniors” and “older adults” are used interchangeably reflecting the flexible use of the terms in the North American context. Definitions of various housing types discussed in the paper are provided in Appendix A.

II. Introduction to the Livable and Inclusive Community Model

The Canadian Centre on Disability Studies has had a multi-year focus on aging and disability (both aging into disability and aging with a disability) and community design. In 2005 CCDS was asked to prepare a position paper on Aging and Disability for the Federal Office of Disability Issues. This led to a contract with the Office to assist in the development of the Advancing the Inclusion of People with Disabilities 2005 report that focused on Aging and Disability. In 2005-06, CCDS was awarded a grant from New Horizons for Seniors to begin to focus on Aging and Disability and conducted study on Manitoba studying the intersections between programs and policies. The study brought non-profit and policy sectors together, in some cases for the first time. In 2006, CCDS was awarded a funding from the Canada Mortgage and Housing Corporation External Research program to conduct a study on the current status of visitable housing in Canada. This was the first study of its kind and brought to further focus the

intersection of disability and aging and the design of the community. Subsequently CCDS was awarded one year funding (2007-08) from the Federal Office of Disability Issues to study Aging and Disability issues on housing, transportation and support services in three provinces: British Columbia, Manitoba and Nova Scotia. As a continuum in the process, CCDS was awarded funding for the current project by the Office of Disability Issues again, this time focusing on creating a Livable-Inclusive Communities Model.

This portion of the project, focusing on housing, provides for more in-depth analysis of one element, housing, both from a broad scale policy and practice level as well as from a community level. It moves the model forward in terms of understanding its strengths and utility.

Ways to apply the Livable and Inclusive Communities model to various case studies will be shown in Part V of this paper.

III. Analysis of Current Canadian Housing Practices and Policies Related to Seniors with Disabilities

A. Where Do Seniors Live?

The vast majority of seniors live in their own homes: nearly 92%. Only 7% of seniors live in nursing homes & health care facilities. (Special Senate Committee on Aging, 2009). Some live in social housing units that receive federal government assistance. There are approximately 630,000 social housing units in Canada that receive federal government assistance and about one-third are occupied by seniors. (Wellman, 2008). In 2003, about 86% of seniors aged 75 and over lived in private dwellings and had been in the neighbourhood for five years or more. (Statistics Canada, 2006).

B. What are the Housing Issues?

Housing issues need to be considered in the context of overall community design issues. There appears to be a paucity of Canadian quantitative studies that have examined the housing issues facing seniors and seniors with disabilities. However, there is a great deal of qualitative evidence that seniors are facing significant housing issues and community design issues. (Halseth et al, 2006, Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007) A recent report of the Special Senate Committee on Aging (2009) discusses that many Canadian seniors live in isolation or in inappropriate homes because of inadequate housing and transportation (p.7) A recent qualitative study of rural and remote communities conducted by the Federal/Provincial/Territorial Ministers Responsible for Seniors 2007 and indicated three main areas of concern:

- Affordability (including maintenance);
- Lack of accessibility features,
- Lack of supports and a lack or shortage of adequate housing supply.

These are familiar emerging themes in several Canadian studies. (Halseth et al, 2006, District of Saanich 2007, Shiner, 2007). Many seniors are forced to move due to “health” reasons. More than twice as many older seniors as younger cite health as a reason for moving (42 per cent for those 85+ compared to 17 per cent of those 65 to 74). (Lewis, 2006) We can assume that

“health” and the need to move in these studies can relate to the need for supports or to lack of accessible home design.

C. Lack of Affordability

Affordability is a common theme amongst numerous studies. Housing affordability is one of the key components of the WHO’s Age-Friendly Cities study and Guide. A recent report of the Special Senate Committee on Aging (2009) shows that affordability is “*one of the most pressing issues facing seniors*” (p. 43). Aboriginal organizations reporting to the Senate Committee also emphasized that lack of quality and affordable housing is “*one of the greatest challenges to Inuit, Métis, and First Nations seniors. Some Inuit communities have 10-15 year waiting lists for social housing*”. p. 44. Nearly 1 in 7 Canadians with a disability has an affordability problem with respect to housing, (CAILIC). A survey conducted by the American Association of Retired Persons (AARP, 2005) showed that nearly 55% of older renter households have “excessive” expenditures for housing that exceed 30% of income. Many older adults face difficult choices of not purchasing adequate food or medicines due to their housing costs (National Association of Area Agencies on Aging, 2006). Many cannot afford the upgrades and adaptations that are needed. (Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007). General maintenance, utility bills, repairs and upgrades were all cited as home affordability issues that older home owners and renters are facing (Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007) A quote from that study illustrates the point: “*Taxes are high and the fuel bills are scaring them. Quite often they keep their heat so cold that they only turn the heat up when they know someone is coming. They have a sweater and a coat on, the shawl over their shoulders. The doors, they have a quilt wrapped at the bottom to stop the draft from coming through*”. P. 18.

Hurford (2002) describes seniors with fixed incomes as having few housing options due to their “*monetary disability*”. Many Canadian cities and communities are facing affordability issues. In a study by Hurford (2002) seniors were over-represented among New Westminster’s two lowest income brackets. In the study, fifty percent of seniors in New Westminster had an annual income of less than \$20,000, and over 20% have an annual income of less than \$29,999.21 (Hurford, 2002) Another study conducted by the University of Northern BC (Halseth et al, 2006) examined the city of Terrace, BC which is a service centre for the region. Focus groups with seniors revealed a lack of affordable and accessible housing; the need to locate homes near amenities such as shopping and social and cultural events; and the need for support for independent living as well as maintenance and repair. In the 2004 Successful Aging Ottawa (SAO) Seniors Survey, (Social Data Research, 2007) **only 26%** of respondents agreed that there were enough affordable housing options for seniors and 56% were concerned that there were not enough home support services for seniors staying in their own home. The survey also found that most Ottawa seniors (80%) intended to stay in their homes and had never seriously considered moving. (Social Data Research, 2007). The same study found that 127 Ottawa seniors were waiting to be placed in long-term care for every 100 beds that are available. This situation is exacerbated by the fact that about 20–25% of seniors currently placed in long-term care could be more suitably placed in affordable, supportive, community-based housing. They estimated that the basic cost for a long-term care bed is \$132.32*/day, which compares to \$33/day for supportive community-based care. The study *estimated that about 1,400 low-income seniors in Ottawa have unmet needs and could benefit from supportive housing*. High repairs and maintenance costs can place a heavy burden on low income homeowner seniors. This can be a particular problem in areas outside urban centres where homeownership rates for senior households are high (82 per cent compared to 68 per cent in urban centres) and the

overall housing stock is much older (34 per cent built before 1961) than in urban centres (29 per cent built before 1961) Source: 2001 Census of Canada

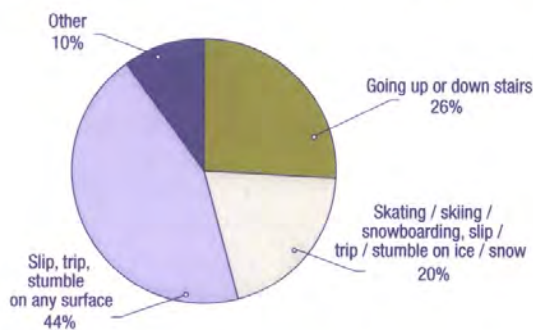
D. Design of the Homes: Lack of Accessibility in Current Housing Stock

Lack of accessibility of the home is a major issue identified in several studies (Halseth et al, 2006; Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007, Shiner, 2007) According to the Canadian Association of Independent Living Centres (CAILIC), 53% of people with disabilities in Canada need adaptive features in their homes but do not have them. A study conducted by *Atlantic Seniors Housing Research Alliance (Shiner, 2007)* found that a major seniors housing problem identified in their survey was problems at entrance areas, with seniors stating that icy front steps were their primary concern . Almost half (43.9%) of the seniors surveyed were aware of home improvement programs, but only 15.3% of those who were aware actually received this type of financial assistance. Nearly 41% of respondents in the study indicated that they planned to move if they could find better or more suitable housing (41%) A quantitative study in the USA conducted by (Bayer & Harper, 2000) showed that 3/10 Americans say they are concerned about the design of their homes and voiced the following issues:

- Having a home where friends and family with disabilities can get around (31%)
- Being forced to move to a nursing home because they can't get around (31%)
- Being able to afford home modifications (30%)
- Finding reliable contractors and handymen (28%)
- Being able to provide care for a friend or relative in the home (27%)

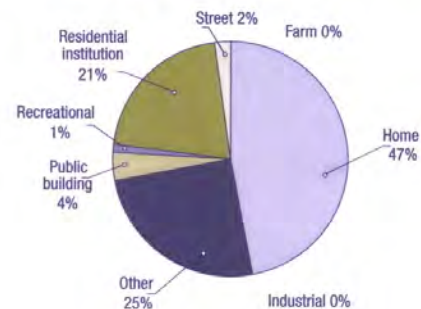
The Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007 study also found that design problems were a frequently mentioned barrier. One of the biggest issues facing seniors in their homes is the rate of falls due to poor design. According to Jake Pauls (presented at the *Creating Universally Designed Healthy Sustainable Communities Conference*, Prince George, BC April 2009) every hour in North America, 150 people find themselves in an emergency room due to falls in the home. In a Canadian study (Public Health Agency of Canada, 2005) 47% of falls of those aged 65+ occur in the home. The findings depicted in Figure 4 of the report are similarly reflected in the National Trauma Registry according to the report where 23% of severe injuries due to a fall among those aged 65 and over were due to a fall on or from stairs or steps. (p. 26).

Figure 4 SELF-REPORTED FALLS RESULTING IN INJURY, BY TYPE OF ACTIVITY, AGE 65+, CANADA, 2002/03



Source: Canadian Community Health Survey, Cycle 2.1.

Figure 11 FALL-RELATED HOSPITAL CASES, BY PLACE OF OCCURRENCE OF FALL, AGE 65+, CANADA, 1998/99 TO 2002/03



Source: Acute separations from 1998/99 to 2002/03, Canadian Institute for Health Information Discharge Abstract Database.

E. Lack of Housing Stock with Even a Basic Level of Access is a Major Issue

It is estimated that nearly 80-90% of single family homes do not have even a basic level of access or visitability features (personnel communication with Eleanor Smith, Concrete Change 2009). According to definition, basic access or visitable features include one no-step entrance on an accessible route; doorways through out the main floor that have a minimum clearance of 32" (810mm); and at least a half bath on the main floor with the wider doorway. As a result of this problem, older adults and persons with disabilities are forced unnecessarily into institutions, are "forced to migrate" (Maisel, Smith, Steinfeld, 2008) are unable to participate and contribute fully in society, are unable to visit friends and relatives. (Salvesen, Ringaert, Smith, Shay, 2008). Several jurisdictions in North America, the United Kingdom and Australia have taken steps towards visitable housing policy including several with mandatory laws requiring all new homes to be visitable. Canada is sadly lacking in this area with only a few jurisdictions across the country with voluntary mandates, one with a percentage mandate (Canada Mortgage and Housing Corporation, 2008) and a few with by-laws regarding multi-family housing only (District of Saanich 2004). A major problem is that the majority of seniors housing policy statements refer to "housing" including assistive living designs and rarely does it address mainstream private housing where most seniors live.

F. Building Codes and Regulations

Canada falls behind other countries in terms of building codes for housing. The National Building Code serves as a model code for all the provinces. They are free to adopt the code as is or improve upon it. The National Building Code addresses accessibility for public buildings but does not provide little guidance in terms of accessibility for housing. Canada does not have a federal regulation on accessibility of multifamily housing as does the USA with its Fair Housing Act. The Act's requirement for new housing type buildings include provisions for accessibility (see box below). The National Building Code, Part 9, on housing fails to address private dwellings, thus there are no provisions there to ensure no-step entrances, wider doorways or more accessible bathrooms. There also seems to be problems with enforcement of current provisions. A recent report by the Special Senate Committee on Aging (2009) discussed that the Ontario Human Rights Commission reported that "*the standards for barrier-free design that are already contained in the Building Code Act are often not met by builders or enforced by inspectors*" p. 45. The CAN-CSA-B61: Accessibility for the Built Environment Standard provides guidance for all federally owned or leased properties. In this document technical guidance is provided for both fully accessible and visitable dwellings, but does not provide application requirements which are enforced by the various jurisdictions. Federal agencies generally use this standard or can improve upon it. For instance the Department of National Defence/Canadian Forces has enhanced the requirements in some areas including provisions for space requirements for mobility devices in public spaces. It has also required that all new multi-family housing be visitable in its application statements.

Fair Housing Act: USA Provisions for Accessibility in New Construction

In buildings that are ready for first occupancy after March 13, 1991, and have an elevator and four or more units:

- Public and common areas must be accessible to persons with disabilities
- Doors and hallways must be wide enough for wheelchairs
- All units must have:
 - An accessible route into and through the unit
 - Accessible light switches, electrical outlets, thermostats and other environmental controls
 - Reinforced bathroom walls to allow later installation of grab bars and
 - Kitchens and bathrooms that can be used by people in wheelchairs.

If a building with four or more units has no elevator and will be ready for first occupancy after March 13, 1991, these standards apply to ground floor units.

<http://www.hud.gov/offices/ftheo/FHLaws/yourrights.cfm>

G. Lack of Adequate Federal and Provincial Home Adaptation and Home Maintenance Programs

Canada is lacking in adequate home adaptation programs. According to the Special Senate Committee on Aging Report (2009), 82% of seniors own their own homes in rural areas, while 68% own their homes in urban areas. Of these homes, many were built prior to 1961: 34% in rural areas and 29% in urban areas. This implies added repair and maintenance costs along with lack of accessibility of these homes that were built over 40 years ago. The major home adaptation programs available are two from Canada Mortgage and Housing Corporation: the Residential Rehabilitation Assistance Program and the Home Adaptations for Seniors' Independence Program. The Special Senate Committee on Aging Report (2009) showed that many seniors are unaware of these programs. Issues of eligibility for the programs have been raised (Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007) and issues with waiting times have also been discussed. According to (Vachon & Despres, 2008) waiting times can be lengthy: up to three years. Researchers studied 34 cases by the Société d'habitation du Québec (SHQ) and funded by the SHQ and Canada Mortgage and Housing Corporation (CMHC). They found that some people were sometimes waiting 13 months from the application submission to the process beginning; 13 months for completion of drawings; 2 months for approval by professionals; and 6 months bidding until work began. Other issues with lack of home adaptations have been illustrated by other studies such as inability to do it themselves (37%), not able to afford it (36%), not trusting home contractors (29%), and not knowing how to find a good home contractor (22%). (Bayer & Harper 2000). Other supportive services have been discussed as critical for successful community living such as availability of housework, gardening, yard maintenance, home repair services. (Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007).

Age-Friendly Rural and Remote Communities Recommendations

(Federal/Provincial/Territorial Ministers Responsible for Seniors, (2007)

- **Housing Options**
- A range of appropriate and affordable housing options (for sale and for rent) is available and includes apartments, independent living, smaller condominiums and family homes.
- Housing is affordable and includes subsidized housing.
- Home sizes reflect the needs and lifestyles of seniors today.
- Housing is located in close proximity to services.
- Housing is adapted for seniors and those with disabilities.
- *Aging in Place*
- Affordable supports are available to enable seniors to remain at home.
- Assisted living options are available to all.
- “In-between” housing is available (i.e., options between the large family home and the small apartment, but with more assisted living options that can be considered an “intermediary” step).
- “Alert systems” are available for seniors living alone (i.e., systems that alert someone when a senior needs help).

- **Maintenance and Modifications**
- General maintenance of homes is affordable by seniors on fixed incomes.
- Affordable or free general maintenance (e.g., yard work) is available for seniors.
- Housing is modified for seniors as needed and new housing is built with seniors in mind.
- Housing (including houses and apartments) meets the needs of those with disabilities.
- Housing modifications are affordable, with financial assistance provided in the form of grants and subsidies.
- Information on financial assistance programs for home modifications is readily available and easily accessible by seniors.
- Home insurance is affordable.
- **Long-Term Care**
- Affordable long-term care options are available that prevent the separation of families and the need to move out the community.

H. Lack of Housing Options Available

Hurford (2002) conducted a study in British Columbia and found that many seniors may not be living where they prefer to live due to lack of options. She found that many do not move due to lack of affordability, location or lack of accessibility options in the market. A large percentage of seniors considering a move from a current location express affordability and the desire to be closer to community supports and amenities as an important trigger for moving. (Hurford, 2002). Lack of options in terms of housing close to services was also discussed in the study by the Federal/Provincial/Territorial Ministers Responsible for Seniors (2007). The desire for community and support also proved an important motivation for considering a move. Home sharing can be an option for seniors considering sharing a home for reasons such as affordability, companionship, and/or required assistance with chores such as vacuuming or yard work. (Hurford, 2002) She also found that seniors with higher incomes may have fewer choice limitations. There is also lack of options due to zoning restrictions such as large home on large

lots or lack of zoning for accessory dwellings and shared accommodations. The Federal/Provincial/Territorial Ministers Responsible for Seniors, (2007) study showed that many Canadian seniors want the option to rent or own smaller homes or condos; living arrangements that provide a continuum of care; and “in-between” options : between a large family home and an apartment and assistive living options. The study showed that most communities lack options. Another issue addressed in the study was that people were forced to go to long-term care facilities or to leave the community due to lack of housing options. Oberlink (2008) has critiqued current approaches in community design as having a lack of options that restrict choices particularly for older adults. Included in the lack of options discussed is lack of affordable and accessible units as well as lack of creative housing ideas. She points out that creating connections between various community services and facilities are often restricted due to rigid separations between residential, recreations, commercial components. A critical point emphasized by Oberlink is that permitting and regulations may unintentionally discourage livable communities’ objectives such as restrictions on multi-family units, levels of density, attached housing, and secondary suites (Oberlink, 2008). This latter point has been found to be true regarding zoning and bylaws around no-step entrances (personal experience by the author). Seniors across the country have expressed their desire for housing options as described in the Federal/Provincial/Territorial Ministers Responsible for Seniors, (2007) study and shown below.

I. Federal Housing Policies and Practices

The issue of housing policy and urban planning for seniors with disabilities cannot be understood without understanding the broader context of affordable housing and the backdrop of Federal housing policies in Canada. According to (Hulchanski, 2002) there have been only two attempts by the Federal Government to deal with urban affairs. In 1909: the Creation of the Commission on Conservation: promoted urban planning as a way to deal with the urban poor and urged the provinces to adopt legislation. The Commission was dissolved in 1929. In 1971 saw the creation of the Ministry of State for Urban Affairs to coordinate federal activities in housing, public works and transportation However, this ministry was dissolved in 1979 since the provinces felt that urban affairs should be a municipal responsibility. According to Hulchanski, 2002, the seventies were the boom years for Federal Government policies and programs around affordable and specialized housing for disability, seniors and aboriginal groups. However, by 1993 all federal support for housing was withdrawn and by 1995 the withdrawal of the Canada Assistance Plan led to drastic cuts to social assistance programs in the provinces which had major effects on marginalized lives. Hulchanski (2002) discusses that the Prime Minister’s Caucus Task Force on Urban Issues (2001) identified the shortage of affordable housing as “*one of the biggest challenges affecting economic competitiveness and quality of life*” During that year, the Federal Government announced \$136 million/year for five years to assist in construction of affordable rental housing however this was sufficient to build only 5400 units per year. According to Carter & Polevychok, (2004) housing should be recognized as *good social policy*. They indicate that housing can be instrumental in the health and well-being of individuals and communities yet, little affordable housing has been built in recent years. According to the authors, affordable housing has become a “policy orphan” with lack of admission of ownership by the various levels of government. Recently, however, the Federal government announced the allocation of \$400 million over two years for the construction of social housing units for low income seniors in its 2009 budget (Special Senate Committee on Aging, 2009)

J. Provincial Responses to Lack of Federal Policies

The provinces have been forced to act in terms of urban planning and housing as a result of the lack of federal involvement. British Columbia is illustrative of provincial initiatives that have been created. In 1994, BC Housing initiated a supportive housing program in response to the Federal withdrawal of funding. British Columbia recognized the need to create partnerships with non-profit societies, health authorities, municipal governments, and community agencies in order to provide a wider range of options for affordable housing. In the 2007 the Province launched *Housing Matters BC*, which includes providing priority housing assistance for seniors with low income, accessibility requirements or those who require support services. The demand for *supportive housing* continues to increase as the population ages, and *Budget 2007* provided \$45 million, over four years, to upgrade/ convert up to 750 social housing units to supportive housing units, primarily for older persons with lower incomes. This builds on the success of the *Independent Living BC* program, which offers a middle option between home care and residential care. (www.seniorsincommunities.ca). In 2004, The Union of British Columbia (UBCM) launched the Seniors' Housing & Support Initiative. This was created through a one-time \$2 million grant from the (now) Ministry of Community Development to assist local governments to prepare for an aging population. In 2007, the (now) Ministry of Healthy Living & Sport provided a \$0.5 million grant to further support the initiative and to incorporate a focus on Age-friendly projects. In the initial phases of the program, the emphasis was on information sharing, including workshop sessions at all five Area Association meetings, the development of a seniors' website (www.seniorsincommunities.ca) and grants for 'Seniors in Communities Dialogues.' Feedback and analysis of these initial grants led to the creation of pilot project funding, which was available to local governments in 2006, 2007 and 2008. In the fall of 2008, the first round of Age-friendly Community Planning grants was available to local governments

K. Federal Call to Action Needed

A recent report from the Special Senate Committee on Aging (2009) revealed several problems in housing for seniors in their discussions with experts across the country. They developed several recommendations challenging the Federal government to take action on housing and urban planning for seniors.

Framework Recommendation IV: Facilitate the desire of Canadians to age in their place of choice with adequate housing, transportation and integrated Health and social services.

(Special Senate Committee on Aging (2009))

- That the federal government, in consultation with the provincial and territorial ministers responsible for housing, increase the stock of affordable housing for seniors across the country, including supportive housing, by developing a long-term national affordable housing action plan
- That the federal, provincial and territorial ministers responsible for housing work to ensure that the standards for barrier-free design are consistently met by builders and enforced by inspectors
- That the federal government actively promotes both the Age-Friendly Cities Guide and the Age-Friendly Rural and Remote Communities Guide to Seniors organizations, provincial governments and municipal governments; and that it provide financial assistance to support the implementation of the Age-Friendly Cities and the Age-Friendly Rural and Remote Communities guidelines.

IV. MOVING FORWARD: INTEGRATING URBAN PLANNING, LIVABLE COMMUNITIES AND NEEDS OF OLDER ADULTS

It is clear that we are facing a major problem in the design of our communities with the rapidly increasing population of seniors. Ensuring that seniors remain in the community is critical for several reasons. One less mentioned fact in various reports is that enabling residents to age in their own homes is critical to the tax base of the community. The National Association of Area Agencies on Aging (2006) describe that 80% of persons over the age of 65 own their own homes which is higher than the national average. One of the major ways to move forward with creating livable-inclusive communities that include the needs of older adults and persons with disabilities is to fully integrate these notions into all urban and community planning. Making these concepts “mainstream” in all planning needs to become an ultimate goal if we are to ensure communities that are built for all people. ***To move forward we need good planning for livable communities with seniors with disabilities in mind: We must incorporate age-friendly, disability-friendly, universal design into all official community plans.***

A. Current Challenges

Planners and policy makers need to think beyond the medical or “sick” model of aging and disability to an understanding of creating communities that are vibrant, active places for all to participate in: in effect creating more livable communities for all. The problem is that generally this is not happening in the mainstream yet. Initiatives such as smart growth, sustainability and new urbanism which promote concepts such as higher density, walkability all of which are better for seniors and persons with disabilities, often do not include universal design concepts and have been critiqued for the lack of sensitivity to accessibility especially with regard to housing. For instance a recent cross Canada smart growth report card provided no indicators to assess age or disability-friendliness in a community (Tomality & Alexander 2005) Many planning documents neglect these issues (Wake) often refer only to “social housing” for instance with regard to seniors and persons with disabilities and neglect market rate housing. For instance the Ontario government has developed a municipal planning tool “*Planning for Barrier-Free Municipalities: A Handbook and Self-Assessment Tool*” (Province of Ontario, 2005) which is very good at addressing universal design issues but which refers to only “social housing” in the body of the tool. However, later in the checklist, it asks about whether the municipality has considered visitability and it is unclear as to the public or private context of this statement. Indeed, many well-meaning initiatives, reports and documents targeted toward age-friendly planning neglect the entire broad spectrum of market rate housing and focus on supportive housing only. On the other hand, many American documents and initiatives do address market rate housing through visitable housing concepts (AARP, 2005; National Association of Area Agencies on Aging, 2006)

B. Innovative Planning Practices

The literature review provides several suggestions for innovation in planning for housing and community design. Several studies and reports provide information on what is needed to create age-friendly communities that address seniors housing needs. The AgeFriendly and Rural/Remote Communities -Federal/Provincial/Territorial Ministers Responsible for Seniors, (2007) calls for innovative housing arrangements that allow maximum independence while ensuring their access to services they need. It and other reports suggest a variety of housing types including single family, multi-unit, supportive living, accessory dwelling units. It is important that restrictive zoning laws be revised so that innovations can occur. Many

communities are considering accessory dwelling units (also called garden suites, granny flats/suites or carriage houses) which are separate structures that are placed on subdivided lots. (Canada Mortgage and Housing Corporation 2006). Several reports discuss the critical need for planning so that seniors housing is located close to amenities such as shopping, recreation, cultural venues and that accessible and affordable transportation be readily available. (AARP, 2005). One study suggested that when considering housing location for seniors, that geography be considered such that hilly are avoided (Hurford 2002). Another consideration for location of future seniors housing is natural occurring retirement communities (NORC's) where clusters of already live.

Innovations to assist with affordability are critical. One of the ways to address affordability issues is to Institute property tax relief programs for older homeowners. The Blue Print for Action (National Association of Area Agencies on Aging 2006) suggests the following ways to provide tax relief.

- Senior homestead exemptions: such as exemptions from school taxes
- Limiting assessed values of properties
- Property tax assistance: tax assistance granting programs

Other jurisdictions have addressed affordability through innovations with zoning and with incentives with developers (See the Langford Case Study in Part 5). An innovative broad spectrum and future planning approach is to address all new housing that is built. This will be the only way to even attempt to “catch up” with our growing issue of lack of accessible housing. The answer is to build visitable housing.

C. Visitable Housing

Visitable housing is an important concept to consider for all new housing. “Visitability” is an affordable and sustainable design strategy aimed at increasing the number of basic-access family homes and neighbourhoods. “Visitable housing” is the design of houses with a no-step entrance; wider doors; a bathroom on the main floor. With these three main features, a house can be more functional and safer. It is easier to maintain, easier to move furniture in and out of, easier to get into and out of with a baby carriage, bicycle or cart; easier to have older friends and relatives visit; and an easier living place for people with a mobility impairment. (Ringaert & Krassioukova-Enns, 2007). The North American visitability movement began in the late 1980s with the dual goals of ensuring access by people with mobility impairments to their neighbours' homes and providing a basic “shell” of access to permit people to remain in their own homes if they develop a disability. Visitability doesn't offer total access, but does allow people with disabilities to enter the first floor of a home without being lifted up, and provides access to the rooms and bathrooms on the first floor. (Salvesen, Ringaert, Smith, Shay, 2008). There have been several visitability initiatives in the U.S.A., Great Britain and Australia. (Maisel, Smith, Steinfeld, 2008). The CCDS conducted a study in 2005-06 funded by CMHC to study the status of visitability in Canada. (Ringaert & Krassioukova-Enns, 2007) and found voluntary guidelines in several jurisdictions but no mandatory regulations for single family housing. At that time the District of Saanich and the Department of National Defence had mandatory visitable (adaptable) regulations for multi-family dwellings with elevators. Since that time the City of Langford has instituted an affordable housing strategy where every 10 new home built must be both affordable and visitable. Three cities in the USA have mandatory regulations for visitable housing for new housing. Bolingbrook, Illinois serves as the model for Canada as every new home built since 2003 must be visitable. In this location they build basements and they also deal with snow illustrating that many myths regarding no step entrances are unfounded. Since 2003

over 3000 homes have been built in Bolingbrook and represent a variety of housing types and price points. Great Britain has also had a regulation in place for several years requiring that all new homes built be visitable. Visitable Housing was recently mentioned in the Special Senate Report on Aging (2009) as an important universal design concept. In this context the report was referring to the Measuring Up The North Initiative which is actively working with over 41 communities in Northern British Columbia to adopt visitable housing policies for all new housing.

At this point, no jurisdiction in Canada has instituted a mandatory policy on visitable housing for all new market rate housing. As well very few documents, including age-friendly documents promote visitable housing as a solution.

HOUSING and ACCOMMODATION QUESTIONS from *“Planning for Barrier-Free Municipalities: A Handbook and Self-Assessment Tool”* (Province of Ontario, 2005)

- Does your municipality promote and provide incentives to developers to build adaptable and accessible housing, and is visit-ability a consideration?
- Is there a sufficient inventory of barrier-free residential/rental units in the municipality to accommodate people with disabilities and seniors?

D. Age-Friendly Cities and Rural Communities Initiatives

There is positive movement forward in incorporating age-friendly, disability-friendly concepts into general planning in Canada. The recent WHO Age-Friendly Cities (2007) and Federal/Provincial/Territorial Ministers Responsible for Seniors, 2007 Initiatives raised awareness and created an age-friendly focus for three provinces in Canada: British Columbia, Manitoba and Nova Scotia. Three cities and three rural communities in each of those provinces began to address the issues older adults are facing. The provinces of British Columbia and Manitoba have since expanded their age-friendly initiatives to encompass involvement of more communities. Quebec has now also moved forward with this initiative and the provincial government has provided funding for seven age-friendly pilot projects. Other cities and communities across the country are starting various age-friendly initiatives, however a formal survey of which communities and how many does not appear to have been done at this time.

E. British Columbia as a Model

British Columbia has taken further action in several ways which has created opportunities for changes in the way community planning is occurring. Involvement in the Age-Friendly Cities project as well as the recognition of an increasing ageing population lead to the following: endorsement of the age-friendly concept by the Union of British Columbia Municipalities (UBCM) which now supports the age-friendly website; support and development of the Age-Friendly implementation team by the Ministry of Healthy Living and Sport; development of the Healthy Aging Framework (2008); development of targeted funding including “Seniors Dialogues” and Age-Friendly Planning Grants. Housing has been discussed as critical issues in all of the reports produced by these senior-focused initiatives. BC Seniors Healthy Living Framework has the intent of creating Age-friendly Communities which the province describes as “critical”. The Province will provide tools and incentives for local governments to lead this process. Their suggested measure of success is that official community plans will include strategies for age-friendly communities.

Nova Scotia now has a similar planning grant program. The Nova Scotia Age-Friendly Communities grant program assists municipalities in creating or adapting structures and services that are accessible and inclusive of seniors with varying needs and capacities in order to ensure they are able to lead healthy, active lives. All municipal units in Nova Scotia are eligible to apply for an Age-Friendly Communities Program grant. This includes regional municipalities, towns, rural municipalities and villages. Successful applications will receive up to 50 per cent of their project cost, to a maximum of a \$5,000 grant, where the municipality matches the fund's contribution. See: <http://www.gov.ns.ca/scs/agefriendlyComm.asp>

The 2010 Olympics and Paralympic Games have provided an impetus for British Columbia to create more accessible and inclusive communities. In 2006, British Columbia launched the 10 x 10 challenge focusing on increasing the employment of persons with disabilities by 10% by 2010. In 2006, 2010 Legacies Now began an Initiative called "Measuring Up" with the goal of assisting communities to become accessible and inclusive to persons with disabilities. The initiative included providing a framework for assessment and setting priorities as well as funds for completing community assessments and small projects. 2010 Legacies Now also has an accessible tourism initiative that focuses on tourism businesses and parks. Several provincial tourism businesses were assessed and assessment tools were developed as part of this initiative. Both the Measuring Up and the Accessible Tourism programs can be viewed at: <http://www.2010legaciesnow.com/include-everyone/>

The BC provincial government has created several funding streams for "mainstream" projects for communities that promote incorporation of age-friendly and disability-friendly principles: Towns for Tomorrow, Local Motion, LiveSmart BC Green Cities Awards, and BC Spirit Squares. Federal and provincial funding are combined for these initiatives. The five-year, \$71-million Towns for Tomorrow program provides funding for infrastructure providing up to 80 per cent of project funding for municipalities and regional districts with less than 5,000 residents, to a maximum contribution of \$400,000. For communities of 5,000 to 15,000 residents, the program covers up to 75 per cent of eligible project costs, with a maximum contribution of \$375,000. Since 2007, a total of 154 Towns for Tomorrow projects have been funded across the province, helping B.C. communities act on their infrastructure needs, while creating jobs and supporting the economy. Since 2007, LocalMotion has funded 122 projects across British Columbia – vital pedestrian and cycling infrastructure projects that promote healthier, greener and more accessible communities, while creating jobs and stimulating the economy. The \$40-million LocalMotion program supports projects that promote physical activity, a reduction in car dependency and associated greenhouse gas emissions, as well as increased mobility for seniors and people with disabilities. LocalMotion funds are also available for community playgrounds and children's parks activities. LocalMotion provides up to 50 per cent of eligible projects costs, with a maximum contribution of \$1 million per year. (Funding descriptions adapted from the BC Ministry of Community Development website: http://www.cd.gov.bc.ca/ministry/whatsnew/supporting_communities.htm)

In 2007, Northern British Columbia launched an initiative called "Measuring Up The North" (www.measureupthenorth.com) which combines concepts of age-friendly and disability-friendly communities. The goal of Measuring Up The North is assist over 40 communities to become livable age-friendly, disability-friendly universally designed, inclusive communities for all residents and visitors. The MUTN initiative includes concepts of accessible tourism, economic development, smart growth/smart planning, sustainability, active living by design, healthy built environment, universal design and visitable housing in its principles. The partners for the Initiative include the North Central Municipal Association (NCMA) and the BC Paraplegic

Association with supporting partners 2010 Legacies Now, the Ministry of Healthy Living and Sport; BC Healthy Communities and Northern Health. The project is unique in that it was initiated by a municipal association.

One of the key goals and expected outcomes of the Initiative is that the communities will incorporate age-friendly, disability-friendly, universally designed concepts into their official community plans. The major supporting partners, 2010 Legacies Now and the Ministry of Healthy Living and Sport (Age-Friendly Communities) are also promoting this idea outside of the North into their respective initiatives that fall outside of the NCMA region. The MUTN Initiative has been the only initiative to focus on market rate housing and has promoted visitable housing to all participating communities and has encouraged policy changes. The Initiative recently held a capacity-building conference (*Creating Universally Designed Healthy Sustainable Communities April 6-8, 2009*) www.measureupthenorth.com attracting participants from the entire province that had official community planning and visitable housing as two of its focal areas. The NCMA passed several resolutions related to creating more livable age-friendly, disability friendly communities including one centred on visitable housing, one on ensuring that all official community plans contain the principles as well as ones on accessible transportation, incentives for businesses to become accessible and another on accessibility standards to be used by communities. Several of these have been passed by the Union of British Columbia Municipalities and the others will be presented to them in the fall of 2009. As a result of this resolutions and the unique approach of MUTN, it has become a model for the entire province.

Creating Healthy Communities: Tools and Actions to Foster Environments for Healthy Living

by Smart Growth BC. (Miro & Siu, 2009) All Stakeholders

Involving All Stakeholders

- Ensure the Implementation of early and meaningful public engagement processes
- Actively reach out to stakeholders who may not normally participate in community affairs, including youth , families with small children, people with disabilities, people who are homeless and recent refugees and immigrants

Making the Community Accessible to Everyone (Universal Design)

- Identify and address accessibility gaps, areas for policy improvement and investment priorities related to the built environment
- Ensure universally accessible design for both public and private projects
- Permit or require housing for seniors and people with disabilities in locations that are safe and close to amenities

Providing Affordable Housing Choices

- Assess and address the community's housing needs and gaps
- Allow for a variety of housing types throughout the community and within neighbourhoods
- Permit secondary suites in all neighbourhoods in which there is infrastructure (sewer, roads, water lines, etc)
- Support the establishment and administration of an affordable housing fund and/or an affordable housing authority
- Support price restricted housing
- Require developers to contribute to affordable housing (inclusionary zoning)
- Provide developers with incentives to contribute to affordable housing
- Engage the community to identify and acquire land that is appropriate to meet a variety of housing goals and reserve this land for provision of affordable housing.

MUTN has recently worked with Smart Growth BC and contributed to a recent planning document “*Creating Healthy Communities: Tools and Actions to Foster Environments for Healthy Living* (Miro & Siu, 2009). In this document several pages are dedicated to universal design; age-friendly and disability-friendly (see p. 15-17). The tool emphasizes several points related to designing communities for older adults and persons with disabilities including: *Including All Stakeholders*; *Making the Community Accessible for All (Universal Design)* and *Providing Affordable Housing Choices*. Smart Growth BC works at a “mainstream” level with all communities in British Columbia so that this document is a true model for smart growth/smart planning agencies across North America. In June 2009, Smart Growth BC, MUTN, the Ministry of Healthy Living and Sport, Northern Health and BC Healthy Communities will be working together on delivery of an integrative workshop series targeted at planners and health professionals in Northern BC.

In summary, British Columbia serves as a model in its actions regarding creating livable age-friendly and disability friendly communities. It does this in the following ways:

- There are several provincial initiatives focused on age-friendly and disability-friendly community transformation
- The Province provides targeted funding toward age-friendly and disability-friendly community planning
- The Province incorporates age-friendly and disability-friendly goals into several infrastructure funding programs and rates such applications requests higher
- Various Ministries and agencies have developed tools to assist in age-friendly, disability-friendly community development
- The Province and several municipalities have developed policies on age-friendly and disability-friendly concepts
- Leadership is shown through work in several provincial Ministries

Ontario is moving forward with integrating age-friendly, disability-friendly, universally designed concepts into its planning process. As a result of the adoption of the Ontarians with Disabilities Act (ODA) in 2005, several innovations have occurred. Prior to the ODA, barrier-free design was up to each municipality voluntarily. The ODA now mandates accessibility planning for all municipalities. (Province of Ontario, 2005) Ontario has now mandated that public health and planning work together in planning communities. (See following information box).

Several reports have provided guidance on ways to create more age-friendly, universally designed communities. Checklists have been developed and several of them (extracting their housing components) are provided in Appendix III. The following are included:

Appendix III:

- A AARP Livable Communities Housing Survey (2005)
- B Blue Print for Action: National Association of Area Agencies on Aging and Partners for Livable Communities (2006)
- C Age Friendly Cities Guide: Housing Checklist (2007) World Health Organization
- D Age Friendly Cities Guide: Essential Features Checklist (2007) World Health Organization
- E: Age Friendly Rural and Remote Communities: A Guide (2007) Federal/Provincial Territorial Ministers Responsible for Seniors.
- F Community Indicators for an Aging Population (Helman, 2008)

It is interesting to note the differences between the checklists. Some emphasize visitable housing while others do not; some focus on planning and zoning, some on accessory suites, one mentions environmental conditions, some on services and others mention home modification programs. Future validation work studying these and other surveys along with the CCDS Livable-Inclusive Communities Model will have to be done to determine best approaches and indicators.

The ODA Requires That Accessibility Plans

Include The Following:

(Province of Ontario, 2005)

- **A report on the measures the municipality has taken to identify, remove and prevent barriers to persons with disabilities;**
- **The measures in place to ensure that the municipality assesses its proposals for bylaws, policies, programs, practices and services to determine their effect on accessibility for persons with disabilities;**
- **A list of the bylaws, policies, programs, practices and services that the municipality will review in the coming year in order to identify barriers to persons with disabilities;**
- **The measures that the municipality intends to take in the coming year to identify, remove and prevent barriers to persons with disabilities; and**
- **All other information that the regulations prescribe for the purpose of the plan.**

Several Canadian communities are beginning to address seniors' issues through innovative planning solutions. Burnaby, BC (Union of British Columbia Municipalities) provides an interesting case study where gathered information on the seniors housing issues and developed an action plan including amendments to zoning bylaws, density bonusing, assistance to non-profit housing agencies and requirements of developers. As a result several new seniors housing units have been developed

Burnaby, BC: Approach to Housing for Seniors: A Case Study
(Union of Municipalities of British Columbia: www.seniorsincommunities.ca)

- **Population: 202,966**
- **2001 Census revealed that 43,165 (22%) of all citizens in the City are 55 years or older**
- **Difficulties or Limitations:**
 - **Insufficient affordable, suitably sized and located sites for seniors housing**
 - **Limited funds for non-market seniors housing developments**
 - **Aging care facility stock and closure of various care facilities**
 - **A lack of clarity on parameters of assisted living development**
- **Actions Taken:**
 - **The City has supported the development of seniors housing in various ways.**
 - **Amended the Zoning Bylaw to include provisions for supportive housing**
 - **Leased city land to non-profit housing providers**
 - **Secured affordable housing units through density bonus**
 - **Made unused road right of way available for non-profit seniors housing development**
 - **Assisted non-profit seniors housing and care providers with strategic planning efforts**
 - **Required developers of large publicly owned sites to provide 20% of units as non-market (including seniors) housing**
- **Present Status:**
 - **Currently, 2,041 independent living units, 738 assisted living/supportive housing units, and 434 cooperative housing units are available for seniors.**
 - **The units are located in 21 non-market independent living and nine assisted living/supportive housing developments, and 24 cooperatives (that have units available for seniors).**

F. Saanich, BC: A Model Official Community Plan

Saanich, British Columbia developed a comprehensive official community plan in 2008 (District of Saanich, 2008) which provides a model for incorporating age-friendly, disability-friendly, universal design concepts. These concepts are woven throughout the plan Saanich was one of the sites for the WHO Age-Friendly Cities (District of Saanich, 2007) and developed a comprehensive age-friendly strategic plan in 2006. This model official community plan is a result of many years development work including long standing committee on healthy community development since the 1970's Saanich provides several broad statements that reinforce its adoption of universal design principles:

- Urban Design brings together three primary components of “place-making” – environmental concerns, social equity, and economic viability – to create places that work and are sustainable in the long term.
- Successful communities are welcoming, safe and accessible for all its citizens. (Saanich Vision)

The Official Community Plan is available on the District of Saanich Website: (<http://www.gov.saanich.bc.ca>). Saanich has been chosen for the case study analysis that follows in the next section.

V. Using the Livable and Inclusive Community Model to Analyze Current Housing Policies and Practices

CCDS has developed a framework and tool to assess the how housing policies and practices measure up to the proposed model. The framework includes the Livable and Inclusive Community model principles, indicators and methods of measurement. (See Table 1). The framework and tools are in a pilot phase and will be refined as CCDS carries out further validation of the model and the tools. In this section of the document, the author will show how the framework can be used to conduct assessments. The first analysis will provide an analysis of what has been discussed so far in this document and examine: ***How does Canada measure up in terms of housing policy and practices for seniors with disabilities using the Livable and Inclusive Community model?***

The second analysis performed will show how the framework can be used to assess specific community policies and practices using two case studies: Saanich, BC and Langford, BC.

These analyses are limited and need to be considered to be preliminary and rather subjective as they are performed by one analyst and do not necessarily reflect the opinions of CCDS. However they do show how the Livable and Inclusive Community model can be used for analysis, for a livable and inclusive view of policy and practices.

Analysis One: How Useful is the Livable and Inclusive Community model in analyzing collective federal/provincial/municipal housing policies and practices?

The Livable and Inclusive Community model Housing Assessment Framework/Tool is shown in Table 1. This format was used to do a high level analysis of the current status of seniors with disabilities housing policy and practices in Canada from a livable and inclusive community lens. (See Table 2). This preliminary analysis, using the Livable and Inclusive Community model, shows that there is need for improvement related to all the principles. This analysis table could provide the federal, provincial and municipal governments with a simplified overview of a complex situation and help determine priorities and actions. Assessments are provided in the “analysis” column. It appears that the Livable and Inclusive Community model is useful in providing a livable and inclusive communities lens for policy and practice analysis at a provincial or federal level. However, more validation and reliability studies will need to be done to refine and perfect this process.

A. Livable and Inclusive Community Model Housing Assessment Framework/Tool

| PRINCIPLES | INDICATOR | MEASUREMENT |
|-----------------------|--|---|
| PARTICIPATION | Seniors with disabilities are required to participate directly in the planning process as it relates to housing development as well as neighbourhood design. Participation can take place at the provincial, municipal or community levels. Policy(s) exists making the participation of seniors in the planning process mandatory. | <ul style="list-style-type: none"> Identify, count, and describe existing policies. Count the number of seniors with disabilities that are currently involved in municipal and community planning processes. |
| COMMUNITY CONNECTIONS | The location of the housing occupied by seniors with disabilities is within a 5 minute walk, 10 minute drive by car, or 15-20 minute ride using public transportation to core amenities. (CMHC: Community Indicators for an Aging Population) | <ul style="list-style-type: none"> The time taken to travel by foot, by car or public transportation between seniors housing and a grocery store and pharmacy. |
| LEADERSHIP | The leadership of government and non-government organizations in the community formally acknowledges and addresses the housing needs of seniors with disabilities. Evidence of such leadership would include strategic planning and community planning processes and subsequent documents that highlight the different housing options for seniors with disabilities. | <ul style="list-style-type: none"> Identify, count and describe the strategic planning and other community planning processes that have occurred over the past 5 years that incorporate the housing needs of seniors with disabilities. Identify and describe the planning documents that specifically mention these needs. |
| SUSTAINABILITY | The community conducts pre and post evaluation activities to ensure a balance between the social, economic and environmental factors in the development of housing. For example, does the housing development meet the needs of the community members, is it economically affordable to build and maintain in the long run, and does it address the impact on the surrounding natural environment? | <ul style="list-style-type: none"> Identify and describe the evaluation and decision-making process (i.e. what factors are taken into account) undertaken by the community/municipality when reviewing a housing development proposal. |
| UNIVERSAL DESIGN | Policy exists to guide the planning of new housing | <ul style="list-style-type: none"> Identify and describe existing policy to incorporate universal |

| | | |
|---|--|--|
| | construction (private and public) that ensures basic accessibility (no step entrance, wider doorways, and main floor bathroom). For existing housing stock, assistance (i.e. financial and design/construction knowledge) is available to adapt the home to meet and individual's needs. | design principles in new construction. <ul style="list-style-type: none"> Identify and describe the types of assistance available to individuals who require adaptations to their existing home. |
| AFFORDABILITY | Percentage of individuals in the community age 65 and over that spend more than 30% of their income on housing. The number of seniors subsidized housing units in the community in proportion to the number of individuals age 65+ that spend more than 30% of their income on housing. | <ul style="list-style-type: none"> Obtain statistical information (CMHC, Statistics Canada) that indicate the number of individuals age 65 and over in the community that spend more than 30% of their income on housing. Count the number of subsidized housing units in the community allocated for seniors. |
| RANGE OF OPTIONS (additional for housing) | Available housing stock consists of a range of options including public (subsidized) and private housing, assisted living accommodations, co-housing, life lease accommodations, and universally designed housing (e.g. visitable housing). | <ul style="list-style-type: none"> List the variety of housing types available including number of units of each type |

B. How Does Canada Measure Up In Terms Of Housing Policy And Practices For Seniors With Disabilities Using the Livable and Inclusive Community Model?

| Principle | Analysis | Need for Improvement |
|-------------------------------|---|-----------------------------|
| PARTICIPATION: | There appears to be progress made in terms of older adults involved in planning processes at the community level. There appears to be more community dialogues occurring and more committees being formed. Recent efforts such as the Age-Friendly communities' initiatives and the Special Senate Committee on Aging show evidence of increased participation. | Yes |
| COMMUNITY CONNECTIONS: | There is an increasing awareness of the need for community | Yes |

| | | |
|-------------------|--|------------|
| | connections. This is happening through general smart growth/smart planning and active transportation efforts as well as through age-friendly planning efforts. There are still many communities where housing is located far from other amenities as many communities were designed with the car in mind. | |
| LEADERSHIP: | There appears to be more leadership occurring provincially at this time with the development of a variety of initiatives, reports and tools by provinces such as British Columbia, Manitoba, Nova Scotia and Ontario. The Federal government appears to be lagging behind on several fronts and has been encouraged to a call to action by the recent Special Senate Committee on Aging (2009). | Yes |
| SUSTAINABILITY: | The needs of seniors and persons with disabilities are beginning to be recognized in sustainability initiatives but there is still a long way to go. Oftentimes, these groups and their needs are missing from these discussions, reports and recommendations. Generally, there is still not a consistent link between these efforts. | Yes |
| UNIVERSAL DESIGN: | Currently there are few provisions in building codes and bylaws that mandate a more universal design approach to public and private housing design in Canada. Canada lags behind other countries such as Great Britain and the USA in this regard where visitable housing and accessibility are mandated in several jurisdictions. Some Canadian communities are beginning to address this issue; however there is no formal approach to this issue. Several Canadian studies and reports indicate that lack of accessible housing is a major issue facing older adults in Canada. | Yes |

| | | |
|-------------------|---|------------|
| AFFORDABILITY: | Several Canadian studies and reports indicate that lack of affordable housing is a critical issue facing older adults. Affordability also includes issues around taxes, utility bills, maintenance, and modifications for accessibility. Many seniors in Canada are faced with not purchasing needed devices, food, services or medication in order to afford housing. Many do not have the housing choices they need or desire because of lack of affordability. | Yes |
| RANGE OF OPTIONS: | Reports indicate that generally there is a lack of housing options in many Canadian communities. Several communities are exploring accessory dwellings, shared accommodations, co-housing options at this time. | Yes |

Analysis Two: How Useful is the Livable and Inclusive Community model in analyzing housing policy and practices at a municipal level from a stakeholder perspective?

There are two components to this analysis: one is through examination of policies and practices “on paper” and the other is to hear stakeholder’s perspectives. The idea is that the stakeholders will assist in providing context, detail, history and an outcome perspective to add to what is found “on paper”. To conduct this analysis the author developed a series of interview questions based on the Livable and Inclusive Community model. An interview guide was developed (see Appendix 4) and approved by the CCDS Ethics Committee. The intent was to “pilot” this interview guide and process during this study, make refinements and then carry on a larger scale study in the future. For this pilot study one stakeholder was interviewed from the District of Saanich and one from the City of Langford. These two sites were chosen because of their innovations in housing and community design for seniors and persons with disabilities.

The following provides background information on each site as well as a table showing comparison of the two communities based on the Livable and Inclusive Community model. Once again, this is a very preliminary analysis based on interviews with one stakeholder in each community. To do a complete analysis, one would want to interview a variety of stakeholders from each community and combine the results to obtain an overall assessment.

This pilot exercise does however show the utility of the Livable and Inclusive Community model in providing a framework for analysis. Discussions could ensue at the municipal level to assist in making improvements at each of the “principle” areas.

C. Saanich, BC Approach to Housing for Seniors: A Case Study (extracted from District of Saanich, 2008)

In 2006, 23% of the population of Saanich was over the age of 55. By 2026, it is expected that one in three people will be over the age of 55. The District of Saanich Official Community Plan was developed in 2008 and includes the following:

- Encourage accessibility through the incorporation of “universal design” in all new development and redevelopment.
- Advocate for changes to the BC Building Code to require all buildings to incorporate “universal design” principles to improve accessibility in new construction.
- Undertake ongoing updates to the Saanich “Engineering Standards” to support people with accessibility issues (mobility, visual, auditory challenges).
- Encourage the creation of affordable and special needs housing by reviewing regulatory bylaws and fee structures to remove development barriers and provide flexibility and incentives.
- Review existing regulations to consider the provision of a wide range of alternative housing types, such as “flex housing” and “granny flats”
- Review existing regulations to consider legalizing secondary suites in a strategy, possibly implemented on a phased and/or pilot area basis.
- Consider the potential for affordable housing in conjunction with municipal community centres and surplus lands
- Encourage the retention of older multiple family rental accommodation by considering higher density redevelopment proposals on these sites
- Investigate criteria for considering “inclusionary zoning” (% of units for affordable or special needs housing) and density bonusing
- Promoting Centres and Villages concepts
- Integrate seniors and special needs housing into the community where there is good access to public transit and basic support services.
- Support the provision of a range of seniors housing and innovative care options within
- **Saanich: visitable housing approach for multi-family housing: The following Basic Adaptable Housing features are required in all newly-constructed buildings serviced by an elevator containing apartment or congregate housing uses.**
 - Barrier Free access into the building
 - Wider doors throughout
 - Minimally accessible bathrooms

**D. Langford, BC: Approach to Housing for Seniors: A Case Study
(extracted from Canada Mortgage and Housing Corporation, 2008)**

The City of Langford, BC, population 25,000 wanted to address its lack of affordable housing. The first step was to create an Affordable Housing Policy in 2004.

- **2004 Inclusionary zoning requirement one in 10 homes built must be affordable**
- **Developers contribute land and building costs for one tenth of the units, which are then priced at about 60 per cent of market value.**
- **The City provides free administrative support, such as processing applications and designs, along with density bonusing and streamlined development approvals as incentives.**
- **Local realtors provide real estate services free of charge for these units, while credit unions, mortgage brokers and insurers (including CMHC) streamline mortgage pre-approvals.**
- **In 2007, Langford put into place the Affordable Housing Parks and Amenity Contribution (AHPAC) Policy which expanded the original policy and ensured connections with the municipalities Smart growth and sustainability initiatives. It also introduced that all of the one in 10 homes that are built must also be visitable**
- **For every new dwelling, the AHPAC requires a \$500 contribution to the City's Affordable Housing Reserve Fund which is used for rent subsidies and the construction of new subsidized units**
- **Langford was awarded a CMHC Affordable Housing Award in 2008**

E. How Do Two Communities Measure Up In Terms Of Housing Policy And Practices For Seniors With Disabilities Using The Livable and Inclusive Community Model?

| Principle | Saanich Analysis | Langford Analysis | Need for Improvement |
|------------------------|--|--|---|
| PARTICIPATION: | Seniors and persons with disabilities are involved in several committees at the town level. The Healthy Communities Committee focuses on accessibility issues. Input was also received during the WHO Age-Friendly Communities study. Planning a post-occupancy evaluation of the adaptive housing. Not clear on how citizens are feeling about accessibility. | There is no designated accessibility or seniors committee. Not clear on how citizens are feeling about accessibility. | Appears that there could be more community connections, more formal communication between seniors with disabilities and the municipalities |
| COMMUNITY CONNECTIONS: | Housing for seniors is part of an integrated planning process that takes into account community connections, transportation, and community hubs. Saanich promotes the “village” and “centres” concept. Conducted a study on Access to Transit related how seniors and persons with disabilities went from home to destinations. Made changes to transportation policies, designs and to housing designs as a result. | Housing for seniors is part of an integrated planning process that takes into account community connections, transportation, | Appears to be a good process |
| LEADERSHIP: | Leadership is shown through the development of the 2008 OCP universal design, involvement in the WHO Study, Healthy Communities studies. long standing adaptive housing | Leadership is shown in the 2008 OCP: universal design, the Affordable/Visitable housing strategy | Success has been shown both through policy development and through leadership in the municipality |

| | | | |
|-------------------|--|--|--|
| | policy. “Champions” have assisted with progress. | | |
| SUSTAINABILITY: | The three aspects of sustainability are woven into all planning including planning for seniors and persons with disabilities housing and community design. | The three aspects of sustainability are woven into all planning including planning for seniors and persons with disabilities housing and community design. | This area appears to be well integrated |
| UNIVERSAL DESIGN: | Adaptive housing policy for multi-family housing; will be enhancing their engineering and building standards to be more universal, include statements on universal design in their OCP | Includes statements on universal design in the OCP, visitable housing policy for all affordable housing that is built | Both municipalities show attention to universal design aspects in policy and practices. |
| AFFORDABILITY: | Very few affordable housing options available. | Has in place an affordable housing strategy: 1/10 must be affordable: \$165,000 | Langford appears to be leading in this area compared to Saanich |
| RANGE OF OPTIONS: | A range of options are available in terms of type, tenure and location | A range of options are available in terms of type, tenure and location | Both Municipalities provide a good array of housing options |

VI. Recommendations for Policy, Practice and Process Change

The purpose of this report has been to provide an analysis of Canadian housing policies and practices for seniors with disabilities from a livable and inclusive communities lens. It has particularly focused on overall planning responses to this issue. It has also examined how the Livable and Inclusive Community model can serve as a framework of analysis of this complex issue.

In summary, there is an increasing population of older adults in Canada. We know that with age there is an increase in disability. We have a crisis with our current housing situation as our seniors face a lack of accessible and affordable housing options in Canada. Housing should be seen as a human right. As stated by Hulchanski, (2002) there is an urgent need for the recognition of the human right to adequate housing for all Canadians to promote sustainable urban development, human development, and social cohesion. Housing should be seen as good social policy as urged by Carter et & Polevychok (2004). Several of the provinces are taking the lead with age-friendly initiatives; however the federal government has been called to take a more active role in this cross-country issue. (Special Senate Committee on Aging, 2009). Efforts must be

ramped up now municipally, provincially and federally to ensure that housing and entire communities meet the needs of the growing number of seniors. While several provinces are addressing this issue, British Columbia is showing leadership in the country with a number of initiatives and tools to assist with community design.

Efforts are required on several fronts. There needs to a national survey done to determine the extent of current housing conditions, unmet needs to assist with baseline assessments so that specific goals and actions can be set. We know through a number of qualitative studies including innumerable focus groups of the issues, however, we don't have quantifiable data from across the country showing the true extent of the problem. Successful outcomes will occur when age-friendly, disability-friendly, universally designed principles are incorporated into all official community plans, smart growth principles, affordable housing, sustainability principles and appear in related documents and all federal, provincial, and municipal planning efforts. Health and planning professionals and policy makers must work together and avoid silos. Progress is being made in many provinces on this front including British Columbia and Ontario. In Ontario it is now mandated that public health work with planning departments. Housing for seniors and persons with disabilities must be part of overall community/neighbourhood planning principles and initiatives.

There needs to be a focus on market rate housing and innovative housing options for older adults rather than just a focus on social supportive housing. There is too much emphasis on a "medical model" of aging which negates future innovative planning options. We need more housing options that include mixed-age options, mixed designs, sizes, rent/own options, shared versus family centred options, etc. There is an **urgent need** to develop federal, provincial and municipal building codes, zoning and by-laws and incentives that mandate **visitable housing**, accessible housing, universally designed housing for all types of new public and private housing. There is also an urgent need for the federal government and the provincial governments to work together to develop more comprehensive and accessible **home adaptation programs** to meet the growing need for home accessibility renovations and repairs.

Supportive housing with personal supports as well as provision for a variety of services such as home repair, home maintenance, grocery delivery, transportation options, community services and opportunities must be considered in the equation. We can no longer afford to have separations between departments addressing housing design community design and provision of supports. There must be an effort to communicate and integrate between departments. It is clear that more affordable supportive housing needs to be built in Canada. There also needs to be an increased program of effort across the country including funding to support provincial and municipal efforts to create age-friendly, disability-friendly communities, increase funding for infrastructure programs in this regard and an increase research funding to studies in this area.

Above all, seniors and persons with disabilities must be engaged at all levels of decision making and planning Full engagement at all levels will ensure well designed communities and housing that promote full participation and societal contribution

The Livable and Inclusive Community model provides a framework for planning as well as a framework for assessment. It can be used at the community level but also at a broader policy and practice level. Further development and validation of the model and its tools will be important to assist in community planning and policy development to ensure the creation of livable communities that are designed for all people.

VI. REFERENCES

American Association of Retired Persons. (AARP) (2005). *Livable Communities: An Evaluation Guide*. AARP Public Policy Institute. Washington, DC.

Bayer AH. & Harper, L. (2000). *Fixing to Stay: A national survey of housing and home modification issues*. American Association of Retired Persons. Washington DC.

Canada Mortgage and Housing Corporation. (2006). *Garden Suites. About Your House Series*. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Canada Mortgage and Housing Corporation. (2008) *City of Langford Affordable Housing Strategy*. Canada Mortgage and Housing Corporation Affordable Housing Awards. <http://www.cmhc-schl.gc.ca/en/corp/nero/nere/2008/2008-11-03-1500.cfm>.

Carter T. & Poleyvychok C. (2004) *Housing is Good Social Policy*. Canadian Policy Research Networks. Research Report F|50Family Network Canadian Policy Research Networks Inc. Ottawa, Canada.

District of Saanich. (2004). *Mandatory Building Standards For Adaptable Housing*. District of Saanich Planning Department. Saanich, BC.

District of Saanich (2008). *Sustainable Saanich Official Community Plan*. Prepared by the District of Saanich Planning Department in partnership with Urban Aspects Ltd.

District of Saanich (2007) *World Health Organization's Global Age Friendly Cities Project*. District of Saanich, British Columbia.

Federal/Provincial/Territorial Ministers Responsible for Seniors (2007). *Age-Friendly Rural and Remote Communities: A Guide*. Federal/Provincial/Territorial Ministers Responsible for Seniors. Ottawa, Canada.

Halseth, G., Ryser, L., Martin, C. & Hanlon N. (2006). *Terrace and Area Seniors' Needs Project: Executive Summary Report*. Community Development Institute University of Northern British Columbia

Health Canada (2002). *Canada's Aging Population*. http://www.phac-aspc.gc.ca/seniors-aines/pubs/fed_paper/pdfs/fedpager_e.pdf

Helman, A. (2008) *Community Indicators for an Aging Population*. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Hurford, D. (2002) *Seniors Housing Development Forecast Tool BC. (SHDFT): A Guide for Thinking About Developing Seniors Housing*. Seniors Housing Information Program. New Westminster, BC. www.seniorshousing.bc.ca

Hulchanski (2002). *Housing Policy for Tomorrow's Cities*. Canadian Policy Research Networks. Discussion Paper F127. Family Network. Canadian Policy Research Networks Inc. Ottawa, Canada.

Lewis, R. (2006). 2001 Census Housing Series: Issue 10 Aging, Residential Mobility and Housing Choices. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Maisel J., Smith E., Steinfeld E. (2008). Increasing Home Access: Designing for Visitability. Prepared for the American Association of Retired Persons AARP Policy Institute.

Maxwell, G. (2007). Respect All Voices: Neighbourhood Councils as a Tool for Building Social Inclusion: A Policy and Practice Paper. Community Development Halton and Inclusive Cities Canada. www.inclusivecities.ca/publication/reports/2006/burlington-report.pdf

McMaster University. (Date unknown). The Inclusive Community Project. Human Rights and Equity Services, McMaster. <http://www.mcmaster.ca/hres/inclusivecommunity.htm>

Ministry of Healthy Living and Sport (2008). British Columbia Seniors: A healthy living framework. . Ministry of Healthy Living and Sport, Province of British Columbia.

Ministry of Housing. Housing Matters BC: A housing strategy for British Columbia. Province of British Columbia.

Miro, A. & Siu J. (2009). Creating healthy Communities: Tools and Actions to Foster Environments for Healthy Living. Smart Growth BC. Vancouver, BC.

Montgomery County Planning Department (2003). *Montgomery County 2025 Glossary.* <http://gis.montva.com/MC2025/2025plan/glossary/gloss2.htm>

National Association of Area Agencies on Aging and Partners for Livable Communities (2006). A Blueprint for Action: Developing a Livable Community for All Ages. National Association of Area Agencies on Aging Washington, DC.

Oberlink, M. (2008). Opportunities for Creating Livable Communities. Centre for Home Care Policy and Research: Visiting Nurse Service of New York. Prepared for the American Association of Retired Persons. (AARP) Policy Institute. Washington DC.

Office of Disability Issues (2005). Advancing Inclusion of Persons with Disabilities Report. Human Resources and Skills Development Canada. Ottawa, Canada.

Province of Ontario (2005). Planning for Barrier-Free Municipalities: A Handbook and Self Assessment Tool.

Public Health Agency of Canada. (2005). Report on Seniors Falls in Canada. Minister of Public Works and Government Services Canada

Ringaert, L. & Krassioukova-Enns O. (2007) Understanding the Status of Visitability in Canada. CMHC Research Highlight. Canada Mortgage and Housing Corporation.

Salvesen, D., Ringaert L., Shay E., Smith E. (2008). Housing Visitability: A Necessary Trend. Urban Land Institute.

Shiner D. (2007) Highlights of the Atlantic Seniors' Housing and Services Survey Report. Atlantic Seniors Housing Research Alliance Halifax Nova Scotia Canada

Social Data Research (2007) Affordable Supportive Housing for Seniors: Developing a Framework and Action Plan for Ottawa. Prepared by Social Data Research in partnership with the Flett Consulting Group. Ottawa, Ontario.

Social Planning and Research Council of British Columbia: Accessible Urban Space: A facilitated Discussion on Inclusive Communities. Vancouver, BC.

Special Senate Committee on Aging (2009). Canada's Aging Population: Seizing the Opportunity. The Special Senate Committee on Aging. Ottawa, Canada. www.senate-senat.ca/age.asp.

Statistics Canada (2007). The Daily. Participation Activity Limitation Survey. Monday December 3, 2007. <http://www.statcan.gc.ca/daily-quotidien/071203/dq071203a-eng.htm>

Statistics Canada (2006). A Portrait of Seniors in Canada. Statistics Canada. Ottawa. Canada.

Tomalty R. & Alexander, D. (2005). SMART GROWTH IN CANADA: a report card. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Union of British Columbia Municipalities. Burnaby Case Study. Resources for Local Governments Housing. www.seniorsincommunities.ca

Vachon G. & Després, C. (2008). Adapting Homes to Extend Independence Case Study of 13 Frail Seniors in Québec City Suburbs. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Wake, T. Review Of Best Practices In Affordable Housing. Smart Growth BC. Vancouver, BC.

Wellman, T. (2008). Impacts of the Aging of the Canadian Population on Housing and Communities. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

World Health Organization. (2007). Global Age-Friendly Cities: A Guide. World Health Organization. www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf

World Health Organization (2007). Checklist of Essential Features of Age-friendly Cities. World Health Organization

Other Resources

(2003) A Quiet Crisis in America: A Report to Congress by the Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century..

Ball, M. 2001. Aging in Place: A Toolkit for Local Governments. Atlanta: Atlanta Regional Commission and Community Housing Resource Center. www.atlantaregional.com

British Columbia Ministry of Health (2005) Healthy Aging Through Healthy Living: Towards a comprehensive policy and planning framework for Seniors in B.C.: a discussion paper

Drover, G. & Wade, W. (2006) . Seniors' Housing for Seniors: A Feasibility Study, CMHC Research Highlight. Canada Mortgage and Housing Corporation.

Eberle M. & Serge L. (2007). Urban Form and Social Inclusion. CMHC Research Highlight. Canada Mortgage and Housing Corporation. Ottawa, Canada.

Federal/Provincial/Territorial Ministers Responsible for Seniors (2007). Working Together for Seniors A Toolkit To Promote Seniors' Social Integration In Community Services, Programs And Policies.

Goldberg, David. 2005. Choosing Our Community's Future: A Citizen's Guide to Getting the Most Out of New Development. Smart Growth America. www.smartgrowthamerica.org.

Guthrie, S. (2006) Affordable and Accessible Housing in the Upper Fraser Valley: Issues and Opportunities Fraser Valley Housing Research Project. The Guthrie Consultants Group Inc. Abbotsford, British Columbia

Howe, D. (2001). Aging and Smart Growth: Building Aging-Sensitive Communities. Translation Paper Number Seven. December 2001. Funders Network for Smart Growth and Livable Communities.

Lawler, K. 2001. Aging in Place: Coordinating Housing and Health Care Provision for America's Growing Elderly Population. Cambridge, A: Joint Center for Housing Studies of Harvard University and Neighborhood Reinvestment Corporation. www.nw.org/network/comstrat/aginginplace/reports.asp

McNiven, J. (2004). More Than Shelter Housing Policy Kit for Seniors in Atlantic Canada. Atlantic Seniors Health Promotion Network. www.asphn.ca.

Neighborhood Reinvestment Corporation. 2002. Aging in Place: Solutions to a Crisis in Housing and Care. www.nw.org/network/comstrat/aginginplace

The Maturing of America: Getting Communities on Track for an Aging Population, can be downloaded at www.aginginplaceinitiative.org.

Social Planning Council Of Ottawa (2003). Our Homes, Our Neighbourhoods: Building an Inclusive City Report on the Community Forum. The Social Planning Council of Ottawa

Trottier H., Martel L., Houle C. Berthelot JM, & Légaré, J. (2000). Living at home or in an institution: What makes the difference for seniors? Health Reports, Spring 2000, Vol. 11, No. 4. Statistics Canada. Ottawa, Canada.

APPENDICES

Appendix A: Housing Terms

(From: AARP, 2005: *Livable Communities: An Evaluation Guide* prepared for the American Association of Retired Persons (AARP) Policy Institute by the Arizona State University Herberger Center for Design Excellence p. 89

Single-Family Homes: These homes offer an individualized living environment; however, they are often not designed to meet the unique needs of older residents. Some single-family homes are located in age-restricted retirement communities.

Multifamily Housing: These units, including apartments or condominiums, are several connected homes that also offer independent living situations. Some of these facilities are age restricted (e.g., "seniors' apartments").

Shared Housing: This involves a group of unrelated, independent older individuals living together and sharing household duties and companionship. In some communities, zoning restrictions in single family neighborhoods may pose difficulties for these living arrangements.

Accessory Dwelling Units: These take several forms, including independent 600- to 700-square-foot cottages in the backyards of single-family homes. Some elder cottages (ECHO units) are modular units that can be located temporarily in a backyard. Other units can be attached to a home or located over a garage. Accessory units are frequently associated with the home of a relative, offering independence along with nearby care when needed.

Congregate Care: This type of older resident apartment typically offers hospitality services, such as group meals, light housekeeping, social and recreational opportunities, and scheduled transportation to shopping and cultural activities.

Assisted Living Facilities: These facilities offer housing that allows direct personal care along with independence. Residents live in private apartments that include supportive services to help individuals with basic living needs such as personal care and medication management. These facilities also offer the hospitality services found in congregate care facilities.

Continuing Care Retirement Communities: These three-stage facilities provide for life care in a managed community. They provide separate homes or cottages with optional hospitality services, assisted living, and nursing care. Residents can use the services that they need as their lives change. An initial down payment and regular monthly charges pay for the possible use of more costly nursing home care.

Appendix B: Various Housing and Community Assessment Tools

AARP Livable Communities Housing Survey (2005) (pp. 95-101)

From: AARP, 2005: Livable Communities: An Evaluation Guide prepared for the American Association of Retired Persons (AARP) Policy Institute by the Arizona State University Herberger Center for Design Excellence

Available Housing

1. Is each of these types of housing available within your community?
 - Single-family homes? YES NO
 - Multifamily homes? YES NO
 - Accessory dwelling units? YES NO
 - Assisted living facilities? YES NO
 - Continuing care retirement communities? YES NO
 - Nursing homes? YES NO
 2. Is affordable housing available in each of these housing types?
 - Single-family homes? YES NO
 - Multifamily homes? YES NO
 - Accessory dwelling units? YES NO
 - Assisted living facilities? YES NO
 - Continuing care retirement communities? YES NO
 - Nursing homes? YES NO
 3. Are affordable housing options located near basic shopping opportunities or near a regular transit route? YES NO
 4. Are affordable housing options located near recreational opportunities? YES NO
 5. Do the legal requirements in your community permit shared housing among a group of older residents? YES NO
 6. Does your community permit accessory dwelling units in an area zoned as a single-family district? YES NO
 7. Does your community encourage or require visitability standards for new housing units? YES NO
 8. Are there multifamily housing units that are accessible to people with varying or changing physical abilities? YES NO
 9. Are there any special housing complexes or apartment buildings especially for older people in your community? YES NO
 10. Do public transit routes serve areas of town that offer accessible and affordable housing? YES NO
 11. Does the land-use plan or zoning ordinance allow multifamily housing to be developed in your community? YES NO
- If so, in which locations in your community?

12. Are these locations within walking distance of basic shopping and recreational activities? YES NO

13. Are you aware of individuals who are unable to find appropriate housing within your community? For example, do affordable, accessible multifamily housing or assisted living facilities have long waiting lists? YES NO If so, which types?

Property Tax Relief

14. Does your community offer any property tax reductions for homeowners over age 65? YES NO

15. If so, are such programs limited to individuals whose income is below a specific threshold? YES NO

16. Is this program well publicized? YES NO

17. Is the application process easy to complete? YES NO

Repairing and Modifying Homes

18. Do lending agencies in your community offer reverse mortgages to homeowners over age 62? YES NO

19. Does your community offer a weatherization assistance program? YES NO

20. Does your community offer a financial assistance program for home modifications? YES NO

21. Does your community offer a financial assistance program for maintenance and repairs? YES NO

22. Does your community offer tips on finding appropriate financing through conventional lenders? YES NO

23. Does your community offer a list of agencies or qualified individuals that specialize in affordable, reliable repairs for older residents?

24. In addition to assistance with these activities, does your community have a program that helps older persons evaluate the need for home repair, modification, weatherization, etc.? YES NO

25. Does your community have a program to assist with routine or seasonal home maintenance chores (snow removal, yard work, gutter cleaning)? YES NO

Assessing Your Community's Aging-Readiness: A checklist of key features of an aging-friendly community: from A Blueprint for Action: Developing a Livable Community for All Ages (National Association of Area Agencies on Aging and Partners for Livable Communities: 2007)

Housing and Planning Component

Housing

- What proportion of households headed by someone age 65 and above pay more than 30 percent of annual
- income on housing?
- Are skilled, reasonably priced home modification and repair services available to residents?
- Does your community provide modified services for older and disabled residents (such as snow shoveling and

- backyard trash pickup)?
- Are assisted living options available and affordable to a broad range of residents?

Planning and Zoning

- Does your zoning code allow flexible housing arrangements, such as accessory dwelling units and home sharing?
- Does the zoning code allow mixed-use and pedestrian-friendly development in appropriate areas (such as
- town centers)?
- Does your comprehensive plan take into account an aging population and the needed adjustments in land
- use to accommodate this trend?
- Can residents safely and conveniently get necessary goods and services without having to drive?
- Do most residents (a) understand the process by which decisions about development are made, and (b)
- consider the process fair and predictable?

Age-friendly housing checklist: From The World Health Organization (2007) Global Age-Friendly Cities: A Guide

Affordability: Affordable housing is available for all older people.

Essential services: Essential services are provided that are affordable to all.

Design Housing is made of appropriate materials and well-structured.

- There is sufficient space to enable older people to move around freely.
- Housing is appropriately equipped to meet environmental conditions (e.g. appropriate air-conditioning or heating).
- Housing is adapted for older people, with even surfaces, passages wide enough for wheelchairs, and appropriately designed bathrooms, toilets and kitchens.

Modifications • Housing is modified for older people as needed.

- Housing modifications are affordable.
- Equipment for housing modifications is readily available.
- Financial assistance is provided for home modifications.
- There is a good understanding of how housing can be modified to meet the needs of older people.

Maintenance

- Maintenance services are affordable for older people.
- There are appropriately qualified and reliable service providers to undertake maintenance work.
- Public housing, rented accommodation and common areas are well-maintained.

Ageing in place Housing is located close to services and facilities.

- Affordable services are provided to enable older people to remain at home, to “age in place”.
- Older people are well-informed of the services available to help them age in place.

Community integration

- Housing design facilitates continued integration of older people into the community.

Housing options

- A range of appropriate and affordable housing options is available for older people, including frail and disabled older people, in the local area.
- Older people are well-informed of the available housing options.
- Sufficient and affordable housing dedicated to older people is provided in the local area.

- There is a range of appropriate services and appropriate amenities and activities in older people's housing facilities.
- Older people's housing is integrated in the surrounding community.

Living environment

- Housing is not overcrowded.
- Older people are comfortable in their housing environment.
- Housing is not located in areas prone to natural disasters.
- Older people feel safe in the environment they live in.
- Financial assistance is provided for housing security measures.

Checklist of Essential Features of Age-Friendly Cities: From The World Health Organization (2007)

Housing

- Sufficient, affordable housing is available in areas that are safe and close to services and the rest of the community
- Sufficient and affordable home maintenance and support services are available
- Housing is well-constructed and provides safe and comfortable shelter from the weather
- Interior spaces and level surfaces allow freedom of movement in all rooms and passageways
- Home modifications options and supplies are available and affordable and providers understand the needs of older people
- Public and commercial rental housing is clean, well-maintained and safe.
- Sufficient and affordable housing for frail and disabled older people with appropriate services is provided locally

Housing Checklist from Federal/Provincial/Territorial Ministers Responsible for Seniors: Age Friendly Rural and Remote Communities: A Guide (2007)

Housing Options

- A range of appropriate and affordable housing options (for sale and for rent) is available and includes apartments, independent living, smaller condominiums and family homes.
- Housing is affordable and includes subsidized housing.
- Home sizes reflect the needs and lifestyles of seniors today.
- Housing is located in close proximity to services.
- Housing is adapted for seniors and those with disabilities.

Aging in Place

- Affordable supports are available to enable seniors to remain at home.
- Assisted living options are available to all.

- “In-between” housing is available (i.e., options between the large family home and the small apartment, but with more assisted living options that can be considered an “intermediary” step).
- “Alert systems” are available for seniors living alone (i.e., systems that alert someone when a senior needs help).

Long-Term Care

- Affordable long-term care options are available that prevent the separation of families and the need to move out the community.

Maintenance and Modifications

- General maintenance of homes is affordable by seniors on fixed incomes.
- Affordable or free general maintenance (e.g., yard work) is available for seniors.
- Housing is modified for seniors as needed and new housing is built with seniors in mind.
- Housing (including houses and apartments) meets the needs of those with disabilities.
- Housing modifications are affordable, with financial assistance provided in the form of grants and subsidies.
- Information on financial assistance programs for home modifications is readily available and easily accessible by seniors.
- Home insurance is affordable.

**Availability of Housing Choice : CMHC Research Highlight:
Community Indicators for an Aging Population (Helman, 2008)**

- Types of tenure available in the community—freehold homeownership, rental, condominium, co-operative housing, co-housing, leaseholds, shared equity ownership, life leases, life tenancies, flexible tenure.
- Proportion of residents 65 years old or older who spend 30 per center more of their before-tax household income on housing.
- Proportion of residents 65 years old or older living in housing with unmet home modification needs (such as, narrow hallways, unsafe stairs, lack of bathroom grab bars, inadequate lighting).
- Proportion of households living in “acceptable” housing (meeting adequacy, suitability and affordability standards) in the community, categorized by age cohort.
- Proportions and numbers of residences in the community categorized by housing type: multi-family, single-family, duplex, townhouse, row house, mobile home, FlexHousing™, garden (granny) suites, accessory dwelling units and other (could be further categorized by new versus existing housing stock).

APPENDIX C: Interview Guide and Consent Form

Livable, Inclusive Communities Initiative: Topic: Housing

Interview Question Guide

Interviewer: _____ Date of Interview: _____

Introduction: “Your community has been involved in a variety of community design, planning and housing initiatives that benefit seniors and person with disabilities. I am interested in finding out how these initiatives housing initiative came about and how they are working for persons with disabilities and older adults. I also want to know how it works for anyone: parents of small children, movers and others. Is this a livable community that will attract others to want to come to live in it? Overall, what if anything is working well for you planning and living in this community? And what if anything is not working so well?”

Grand Question: “How livable is this housing and community especially for seniors and persons with disabilities?”

1. **Describe the initiative to me:** How did it begin? Why did it begin? What does it contain/look like? Who lives there?
2. **Tell me about yourself:** how you are involved with the initiative, for how long, do have experience with aging or disability that brought you here?
3. Is the initiative considered part of a **livable community vision**?
4. Describe how the housing initiative has been considered in relationship to **other community elements** such as transportation, support services, leisure/recreation, spiritual/cultural venues, the outdoor environment, walkability?
5. Describe how concepts of **affordability** have been incorporated into the initiative.
6. Describe how concepts of **environmental sustainability** have been incorporated into the initiative.
7. Describe how successfully **accessibility (universal design)** features have been incorporated.
8. Describe how the **design of spaces** is working for seniors and persons with disabilities. How do you know?
9. Describe how this initiative supports **community connections/socialization** for seniors and persons with disabilities?.
10. Describe how seniors and persons with disabilities have been involved in **planning and leadership** in the initiative.
11. What changes in policies, zoning, building practices, had to be made and how were these received?
12. Describe how the design of the initiative assists seniors and persons with disabilities to **participate** more fully in the community (also including volunteer/employment)
13. What has been the **impact** of this initiative for seniors and persons with disabilities? On their health and well being? On social and economic factors?
14. What are the **benefits** of the initiative for non-disabled and non-senior residents and visitors?
15. What **changes in practice** were needed for policy makers, builders, and developers to make this initiative happen?
16. What's the **“buzz”** what are people saying about the initiative?
17. What are the **lessons learned** from this initiative? What **impact** has it made on the community?
18. Are the policy makers, builders, developers planning to incorporate these features into **future** initiatives?
19. Anything else you wish to add?

Consent Form for Semi-Structured Interviews for the Project Entitled

I, _____ (*print name*) agree to take part in the project entitled “From Research and Knowledge to better Practice: Building Strategies and Partnerships for livable Communities that are inclusive of Seniors with Disabilities” I understand that the purpose of this study is to contribute to understanding of the design policies and practices of communities, the issues and needs of persons with disabilities and older adults in order to develop effective models for livable communities.

I understand that this research is being conducted by the Canadian Centre on Disability Studies (CCDS) and is funded by Human Resources and Social Development Canada (HRSDC), Office of Disability Issues.

I understand that participation will involve answering a series of questions (either in an in-person interview, by telephone or on-line). The purpose of the Interviews is to collect the “*lived experience*” of residents living in existing communities and the professional experience of those who are directly involved in creating livable communities. (Such as policy makers, builders, developers, government officials, etc). The interview guide is built on the topics from the literature review including specific areas such as elements of livable communities, principles that livable communities contain, and outcomes of living in livable communities. These questions will address the following areas:

(1) Demographic information, such as the age category into which I fall, whether my disability limits my ability to participate in the community, my living arrangement and whether any of my family members live with me;

(2) Specific Information:

- a) Perceptions of beneficial features of the housing and community
- b) Perception of problem areas of the housing and community
- c) How the housing and community design influences my ability to interact and participate in the community
- d) Recommendations for future policy and practice designs

The interview will take approximately 45 minutes to an hour to complete. I understand that telephone interviews will be tape recorded to allow the researchers to review and transcribe my answers. The tape will be erased after my interview has been transcribed.

I understand that due to the nature of the interviews, my identity may be obvious, however I can request the interviewer to hide my identity in the report.

The information collected from the interviews will be securely stored in a locked cabinet for a period of 2 years where after it will be destroyed.

As part of the analysis, we will provide you with a draft of the analysis of your interview for your comments.

The analysis of the interview data will be included in a final synthesis paper and final project report. A copy of the paper and report will also be given to the project funder (Human Resources and Social Development Canada), as well as to study participants.

I understand that my participation is voluntary and that I may withdraw from the study at any time without penalty by verbally stating to the Canadian Centre on Disability Studies researchers that I wish to discontinue the interview. I also know that I may refuse to answer any questions without explanation.

I understand that if I have any further questions about the study, I can contact the Canadian Centre on Disability Studies (1-204-287-8411):

- 1) Dr. Olga Krassioukova-Enns, CCDS Executive Director: executivedirector@disabilitystudies.ca
- 2) Laurie Ringaert, Senior Researcher:

3) Colleen Watters, Researcher

.....

If I have ethical concerns about the project, I can contact the Chairperson of the CCDS Research Committee at (204) 287-8411.

I agree to participate in the project entitled: ""From Research and Knowledge to better Practice: Building Strategies and Partnerships for livable Communities that are inclusive of Seniors with Disabilities"

(In situations where informed consent cannot be obtained in writing due to the nature of a disability, tape-recorded or e-mail consent will be accepted.)

Participant signature

Date

Researcher signature

Date

Mailing Address

City

Province

Postal Code

Area code

Telephone number

E-mail address

I wish to receive a summary of the project once the study is completed: Yes ___ No ___

Copy one to participant

Copy two to CCDS

CANADIAN CENTRE ON DISABILITY STUDIES



Contact:

Canadian Centre on Disability Studies
56 The Promenade
Winnipeg MB R3B 3H9

Tel: 204.287.8411

Fax: 204.284.5343

TTY: 204.475.6223

Email: ccds@disabilitystudies.ca

Website: www.disabilitystudies.ca