# Diagram Description automatically generated with medium confidence**For Seniors, By Seniors: Community Conversations**

# Summary of discussion at “Community Conversations: Challenges of aging in place healthily and independently” on February 2, 2023.

Watch the recording here: <https://youtu.be/dNfhbGyR9mc> (in French only)

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**Key Themes**

An overview of comments shared by participants is described in the following sections.

# Resistance to the changes associated with aging

Participants have noticed a decline with age in their physical strength despite many still leading a very active and independent life. One individual mentioned that they were not prepared for the unexpected changes. They suggested that developing resources such as a guide might be a good way to help older adults plan early in order to age in place.

The female seniors in the group, especially those living alone, often expressed concerns about their future, because moving is sometimes impossible to imagine or accept. Since their environment fulfills them, moving does not seem to be an option. As a result, they find it hard to accept they are getting older and should prepare for the next stages of their life. In some cases, they go as far as refusing any assistance, fearing they might be forced to move to a retirement home.

# Concerns about continuing to live independently

Participants also voiced concerns about their ability to continue living without compromising their independence should unexpected changes to their health and needs occur in the future. Their comments are summarized below.

*Costs/Affordability*

Participants expressed concerns more specifically about the cost of living, the cost of services, and the cost of housing and home modifications.

For example:

* Ineligibility for seniors’ programs: Their personal income exceeds the eligibility thresholds, which are often equivalent to or slightly above the poverty line
* Available programs and services: Many seniors’ programs and services are based on a user-pay principle, and simply unaffordable for some people
* Cost of living: Rising costs of goods and services, food and housing
* Personal finances: Being a self-supporting single senior

*Services*

Participants also expressed concerns around access to the supports and services they need to continue living independently.

For example:

* Difficulty accessing supports and services available through organizations or health authorities
* Not knowing where to turn if resources do not meet their needs
* Not having anyone close to lend a hand, and not knowing who may be able to care for them in the future
* Slipping through the cracks in the system, and being ineligible for services they need
* No information on alternatives and remediation processes when experiencing quality issues with programs or services or if services fall short
* Insufficient information about which seniors’ programs are available unless you belong to / are a member of a specific organization or group
* Not having a family physician
* Additional resources needed when acting as a caregiver for their spouse or a loved one in order to avoid ending up replacing professionals
* Challenges in moving to the city and adapting to a new neighbourhood, and lack of information on local events
* Limited services available in rural areas (e.g., scarcity of local stores, insufficient housing arrangements available to those having to sell their home, inadequate number of community organizations capable of meeting their needs)
* Since the pandemic, a limited number of seniors’ program have resumed their activities in rural areas

*Health*

Participants said they were worried about changes or declines in their health, and the impact on their ability to live independently.

For example:

* Challenges due to weakened physical strength, especially for seniors living alone but are still active, in carrying out housework, including stacking firewood, changing a lightbulb, removing snow, washing the windows. These tasks become cumbersome and challenging.
* Onset of a neurocognitive disorder, including Alzheimer’s disease
* Lack of access to a family physician and other medical services
* Fear of falling
* Requiring medical support devices, mobility aids, and assistive devices
* Not knowing how to adapt to natural changes that come with aging
* Loss of functional capacity that may restrict access to certain physical spaces

*Home*

They also expressed their concerns about the home they are currently living in.

For example:

* Improving accessibility and making age-related modifications to their home
* No longer being physically able to complete housework, especially for single seniors
* Homogenous neighbourhood age structure not conducive to getting help nearby should they need it
* No family or friend available to provide help
* Having to make a decision about selling the home or not

*Transportation*

Older adults shared their concerns about their means of transportation and how to get to where they want to go, especially if they cannot continue driving at some point.

For example:

* Having to rely on walking (if able) or solely on transit services to get around
* Unreliability of or inadequate access to special transit services for people living with a disability or functional limitation
* Not knowing how to obtain information on special transit services for people who cannot use regular services
* Changes in mobility and being unable to walk to where they want to go for a long period of time
* Newer housing developments designed in such a way that you need to travel by car

# Anticipated future concerns

Participants also discussed their concerns about what to expect with aging. Their comments are summarized below.

*Supports and Services*

Participants raised concerns about the supports and services available in their community should they need them.

For example:

* Having a strong support system, especially if experiencing health issues
* Worrying about not having family or friends to count on for help
* Ineligibility to a number of programs and services due to restrictive criteria or long processes before receiving needed services
* Declining health may limit their ability to access services on their own
* Shortage of labour may become a barrier in obtaining needed services
* Lack of French-language services available locally

*Costs*

With the rising costs of food, housing, programs and services, many participants expressed concern about whether they will be able to afford to continue to live independently as they age.

* For example: Already facing financial insecurity because of the cost of living, and wondering how their financial future will unfold, especially if they need more services
* Uncertain about the savings needed without knowing the number of years left to live after retirement
* Apprehension about unexpected costs potentially impacting their savings
* Any physical or mental restrictions to access and manage their personal finances since they experience issues with both online and in-person services

*Transportation*

Participants expressed concerns about their means of transportation in the future.

For example:

* Considering the best alternative in getting around (e.g., medical appointments), while keeping in mind factors that might impact their abilities on a daily basis
* Insufficient transportation alternatives becoming a source of anxiety and a deciding factor in aging in place, including the ability to drive combined with limited public or alternative transit services in their community

*Psychological Readiness*

A recurring theme in the discussions with participants was their physical, mental, and emotional readiness to age in place while maintaining their independence as long as possible.

For example:

* Learning how to plan ahead and considering the natural changes that come with aging
* If both people in a couple get sick at the same time
* Social stigma around aging (i.e., ageism) and feeling as if they are forgotten
* Intimidation and discrimination from neighbors who want young families living in the neighborhood
* Feeling that moving from their home is inevitable
* Fear of social isolation and loneliness, especially since the pandemic

*Home*

Participants voiced their concerns about their future home arrangements and circumstances likely to precipitate a move.

For example:

* Spouse/partner getting sick or passing away and being unsure if they are capable of managing housework on their own
* No longer being physically able to maintain their home and not getting the support they need to do so
* Uncertainty about the feasibility of continuing to live together as a couple adding stress to a potential move
* Apprehension about having to move into a retirement home or a long-term care home
* Burden of emptying or decluttering the home in preparation for a future move
* Need for affordable housing or financial assistance to help cover costs of required supports and services

*Caregiving*

Lastly, participants mentioned they were worried about becoming caregivers themselves.

For example:

* Limited respite care options coinciding with their own schedule
* Having to care for an older adult in their family
* Being a senior providing care to a spouse with impaired mobility
* Potential inability to care for their spouse
* Having a strong support system, with friends helping one another

# Knowing what is available and how to access it

Participants discussed barriers that prevent them from finding and accessing appropriate programs and services. Participants who succeeded in finding and accessing programs and services shared information about these resources. Discussions are summarized below.

*Barriers*

Participants identified multiple barriers to receiving supports and services.

For example:

* No single point of access to services and programs
* Unsure where to obtain a list of available services
* Zero access to the internet or lack of reliable connections in rural regions, so uncertainty about how else to find valuable information
* Discontinuation of printed newspapers, which were always a useful source of information on local services and resources
* Not asking doctors and specialists for information, as they are not reliable sources of information
* Discontinuation or unavailability of services
* Not knowing if services found online are reliable and legitimate and how to recognize potential scams
* “Choke point” – having to go through certain people/programs to access services which usually have months-long waitlists
* Rates of functional illiteracy amongst older adults are a barrier to providing information on resources
* Lack of French-language services available locally

*Access to Information*

Participants were quick to share information with the group on how to access needed resources.

For example:

* A number of organizations (e.g., The Royal Canadian Legion, Canadian Red Cross) lend mobility aids
* Other organizations (e.g., Arthritis Society Canada, Alzheimer Society) provide quality resources and information on specific diseases/illnesses
* Seniors’ fairs
* Public advertising
* Meals-on-wheels
* Community centres, especially senior centres

# How being proactive helps participants live independently

Participants mentioned proactive actions they were taking to ensure their ability to maintain their independence as long as possible. Discussions are summarized below.

*Health*

A commonly recurring theme was the importance of making informed healthy choices to promote healthy aging. Proactive actions include:

* Regular physical activity, like going outside, and staying mentally and physically active, even on days when they feel under the weather
* Monitoring and assessing any changes in their level of health
* Adapting their lifestyle (e.g., food intake) to current and future level of health
* Engaging in different networks and advocating for seniors’ rights at all levels of government
* Benefit of part-time work (or volunteer work or other) to support brain health

*Home*

Participants also mentioned how they were proactively adapting their home and living situation to meet their current and future needs, including:

* Installing a walk-in shower and raised garden beds
* Living in a rent-controlled apartment or condominium building
* Moving to a new location, near a bus stop, and within walking distance of the mall and library
* Applying for government programs, benefits or tax credits to help cover the cost of modifying the home to age in place

*Other*

Participants said they understood the advantage of living in a safe and supportive environment, paying for services when needed (if financially feasible), and understanding their own limitations, including:

* Starting a cohousing community where people of all ages live in one home to help and support one another
* Set up a Red Hat chapter to promote social interactions while having fun, and caring for and supporting each other
* If financially possible, hiring help for lawn care, snow removal, grocery shopping, grocery delivery, etc.
* Maintaining lifestyle habits until it is no longer possible
* Considering registering for services beforehand due to waiting lists and labour shortages

**Participants’ Suggestions**

Participants readily provided potential solutions and discussed topics to include in future resources, including:

* Developing a guide with information to help older adults prepare for the future and make appropriate lifestyle and home changes to age in place for as long as possible
* Engaging seniors, getting involved in decision-making related to community services and resources
* Redefining the way we think about retirement
* Identifying safe spaces to build connections, help one another, and cook together to promote healthy aging
* Learning to appreciate moments of solitude and the later stages of life to support a healthy aging process and the ability to adapt to future transition periods and losses (e.g., mourning, independence, development of chronic disease, etc.)
* Financial/support requests to get the help needed from an informal caregiver
* Cohabiting (intergenerational concept of row-houses-condominiums for elderly people and their family where they can support one another, prepare meals together, etc.)
* Appointing a Minister of Seniors in every province and territory

# Summary

Ultimately, the biggest concern raised by participants was the lack of access to programs and services and the lack of information to help find those programs and services. The participants stressed that they were unable to find a list of available resources and programs, and that they were often ineligible to meet the minimum requirements to obtain services. They also mentioned they could not afford services and supports, or drive/use transit services to access them. In some cases, there were no French-language services available locally. As a group, they recommended creating a central database containing reliable and current information on resources available in every community, as well as assistance or referrals to access appropriate services.

Participants also discussed the rising cost of living making services unaffordable and out of their financial reach. They voiced concerns about unreliable means of transportation and that most newly developed neighbourhoods were designed specifically for those able to drive.

Participants commented on the benefit of thinking proactively about their future, although the onus should not fall on them exclusively. Currently, older adults are responsible to seek the services they require on their own. Participants were aware that they might face unexpected health changes and needs, and become a caregiver for their spouse, a friend or family member. They are concerned about loneliness and being unable to access services should they need them down the road to fulfill their wish of ageing in place.

Lastly, participants pointed out that the aging process is not an illness. They said they were determined to continue contributing to the community in their own way for as long as possible.