THE SCHOOL
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CAPSTONE PROJECT

Age-friendly Cities and Calgary:

Evaluating for Success

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Executive Summary

The demographic bubble represented by the Baby Boomer generation is beginning to graduate into that stage of life known as senior citizenry and, as such, there will be a shift in the overall distribution of the global population from a majority of young people to a majority of older people. By 2020, there will for the first time be more old people than there are young people in the world. The City of Calgary, however, lags far behind many other cities in Canada and in the world in terms of its preparation for this change.

The World Health Organization has produced frameworks and methodologies in support of their Age-friendly Cities initiative, and professionals and academics of all stripes have closely watched the unfolding of this program, the goal of which is to help communities to plan infrastructure and services to encourage the "active ageing" of their inhabitants. A survey of the literature reveals many different perspectives on the Age-friendly Cities program, including economics, human resources, sociology, psychology, community development, public health, architecture and design, and urban planning. Much of the literature is produced by governments or governmental agencies. Very little includes involvement by the private sector, and this paper proposes this as a gap in implementation.

The health and welfare of older persons depends on many environmental factors, including those that contribute significantly to any thriving community – private enterprises. While there are many opportunities for municipal governments to contribute to safer and more welcoming municipal services and facilities for older persons, their resources are often constrained by capacity and limited in their scope. Thus, it is important for them to use what capacity they have for influence and communications to encourage local businesses to demonstrate leadership in this respect for the wider community.

This project explores opportunities for the City of Calgary to leverage private enterprise to help Calgary become an Age-friendly City, as conceptualized by the World Health Organization. We did this by examining the experience and evaluation of three cities that have already joined the WHO's Network of Age-Friendly Cities: New York, Ontario, and Edmonton.

A survey of the literature, and the experience of other cities, suggests that there are untapped resources in the private sector that may be mobilized to attain a city that is friendly to all ages, even if it does not result in a WHO Age-friendly City designation.

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Contents

Introduction

The Age-friendly Cities concept is based on the World Health Organization (WHO) framework for active ageing, defined as "the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age."[1] The framework lists six influences – or determinants – on active ageing: Economic, social, behavioural, and personal determinants, as well as the physical environment and social services.[2]

From these six determinants, participants in a worldwide consultative process derived aspects of city life that came to constitute the core tenets of an Age-friendly City. Eight key aspects were identified by the WHO as being consistent with determinants of health, disability, and active aging models[3]:

1. outdoor spaces and buildings;
2. housing;
3. transportation;
4. respect and inclusion;
5. social participation;
6. civic participation and employment;
7. communication and information;
8. community supports and health services.

These eight areas, in turn, were used to create the comprehensive 82-page guide and checklists for Age-friendly Cities. The importance of each area is explained in terms of

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[1] World Health Organization, "Global Age-friendly Cities: A Guide," 5.
[2] Ibid.
[3] (Menec, et al. 2011) Verena H. Menec, et al, "Conceptualizing Age-Friendly Communities," *Canadian Journal on Aging* 30, no. 3 (September 2011): 479-493.

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its effect on people and business, and suggestions of how to address each one are included – provided by seniors who participated in the many focus groups conducted around the world.[4]

We can summarize the vision of WHO's Age-friendly Cities as a concerted effort to create an environment in which older adults can function as well as can young, able-bodied persons. Achieving this requires alignment among many areas of public policy:

- Public Health: The ability to age actively affects both the physical and mental health of older persons and is therefore a determinant of positive health outcomes for older adults.[5]

- Economics: The demographic shift will have economic implications for all levels of government that will be difficult to address quickly and therefore they must plan for it.[6]

- Discrimination: Discrimination against any person for qualities beyond their control is not socially acceptable, and therefore we must make the same effort to eliminate ageism as has been made to eliminate other "isms".[7]

- Universal Design: The built environment has a dramatic effect on the ability of older persons – as well as those disabled permanently or temporarily and

[4] World Health Organization, "Global Age-friendly Cities: A Guide," 9.
[5] United Nations Economic Commission for Europe, "UNECE Policy Brief on Ageing No. 13," June 2012, http://www.unece.org/fileadmin/DAM/pau/age/Policy_briefs/ECE-WG.1.17.pdf, 2.
[6] Frank T. Denton, and Byron G. Spencer, "Population Aging and Its Economic Costs: A Survey of the Issues and Evidence," SEDAP, March 1999, http://socserv2.mcmaster.ca/~sedap, 3.
[7] Margaret Hall, "Developing an Anti-Ageist Approach Within Law," Toronto, ON: Law Commission of Ontario, July 31, 2009, http://www.lco-cdo.org/en/older-adults-lco-funded-papers-margaret-hall-sectionIII, 4

those with small children – to navigate the activities of daily living and participate actively in society.[8]

This paper explores the literature to determine whether and how the private sector can be or has been engaged to address these factors. For the purposes of this work, private sector is taken to mean both private, for-profit enterprises, as well as private non-profit and voluntary organizations.

Note that the spelling, capitalization, and hyphenation practices of those creating the literature on Age-friendly Cities differ from one country and organization to another. The spelling of "aging" and "ageing" differs. This paper preserves the spelling preferences of each organization in the discussion of its own literature. We reserve the use of small letters for representing a city that is age-friendly, as opposed to the capitalization employed in World Health Organization's copyrighted designation of Age Friendly Cities.

The definition of both "seniors" and "older adults" differs from one work to another, and this paper seeks to preserve the meaning within the context of each discussion. Some sources use the two terms interchangeably, as does this paper. The word "senior" generally denotes the person above retirement age; however, this age changes from one country to another and even from one year to another. Similarly, "older adults" connotes those who are beginning to experience symptoms of ageing, which may begin with the need for reading glasses at 40, for example. The differences in these demographic definitions are not germane to the purposes of this paper.

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[8] Kelly Carr *et al*, "Universal Design: A Step toward Successful Aging," edited by Ioannis Trougakos, *Journal of Aging Research*, September 2012: 8, 4.

Methodology

This research took the form of a secondary data analysis, following the trail of documentation each jurisdiction created to commit itself to the creation of Age-friendly Cities. At the **international** level, evidence is presented by organizations such as the World Health Organization, the United Nations Economic Commission for Europe, and the International Federation on Ageing. At the **national** level, there are agencies such as the Public Health Association of Canada and CARP[9], and at the **provincial** level, Alberta Health Services and the Ontario Law Commission. **Municipal** documentation comes from the City of Calgary, Edmonton Seniors Coordinating Council, and Age-friendly NYC, among others. The purpose of this exploration was to discover the impetus for this initiative – from idea to framework to implementation – and to determine to what extent, if any, private enterprise may be involved.

Cities already accepted into the Global Network of Age-friendly Cities by the World Health Organization were studied in order to discover the extent of their private sector engagement. The Internet was scanned for public evidence of an Age-Friendly City program; because all initiatives may not necessarily include the exact words "Age-friendly City" or combinations thereof, this will not necessarily have caught all documentation about municipal programs to make their city more senior-friendly. In an effort to find hidden literature, we attempted to contact those responsible for running age-friendly programs.

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[9] Formerly known as the Canadian Association of Retired Persons.

The process of selecting sources for any paper is necessarily subjective in nature, and the contents of many documents overlap several areas of public policy. Of the categories that emerged, those of **public health**, **economics**, **discrimination**, and **universal design** were selected as representing the best potential for private sector leadership and involvement. This is because attracting new consumers to existing markets is the best possible motivation for this sector to change, and differentiating a business based on age-friendliness is a tool for doing so.

Most of the literature available on the subject of Age-friendly Cities is prepared by the cities themselves and by the various governmental and global bodies. While much of it mentions private businesses, there is little evidence that the sector has been significantly engaged in this process. **Edmonton** and **New York City**, however, present some experiences that are recommended to the City of Calgary in engaging private enterprises as advantageous to creating an Age-friendly City.

Before the analysis begins, a few points to clarify the reason that the WHO began the Age-friendly Cities program: What "problem" were they trying to solve?

Aging of the population

It is no longer news in the developed world that there is an impending demographic bubble represented by the Baby Boomers moving into their retirement years. That the population of the world is growing older in general, for many reasons, has been evident for many years. Longer life expectancy has resulted from the better treatment or eradication of disease and declining fertility rates have resulted from access to birth control, personal choice, and changes in societal values. The resultant population ageing "can be seen as a success story for public health policies and for socioeconomic development, but it also

challenges society to adapt, in order to maximize the health and functional capacity of older people as well as their social participation and security."[10]

In order to tailor global expectations more carefully, the World Health Organization has begun to measure the additional years of life expected after age 60, which helps to compare life expectancies between countries more effectively (see chart below).[11] Based on this measurement, "life expectancy at 60 in high-income countries is increasing twice as fast as in low- and middle-income countries,"[12] which means that the demographic bubble is even more relevant to the creation of public policy in Canada than it would be in, say, Africa.

	Life expectancy at birth 2009		Life expectancy at 60 years			
WHO Region	Male (years)	Female (years)	Male 2009 (years)	Annual average rate of change 2000-2009 (%)	Female 2009 (years)	Annual average rate of change 2000-2009 (%)
World	66	71	18	0.5%	21	0.5%
Africa	52	56	14	0.3%	16	0.3%
Americas	73	79	21	0.7%	24	0.5%
Eastern Mediterranean	64	67	16	0.4%	18	0.4%
Europe	71	79	19	1.0%	23	0.7%
South-East Asia	64	67	15	0.1%	18	0.2%
Western Pacific	72	77	19	0.5%	22	0.6%

Source: *World health statistics 2011*. Geneva, World Health Organization, 2011.

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[10] "WHO Age-friendly Environments Programme," World Health Organization, 2013, http://www.who.int/ageing/age_friendly_cities/en/index.html.
[11] World Health Organization, "Good Health Adds Life to Years," Global brief for World Health Day 2012, http://www.who.int/world_health_day/2012, 13.
[12] "Interesting facts about ageing," World Health Organization, March 28, 2012, http://www.who.int/ageing/about/facts/en/index.html, 13.

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Urbanization of the population

While the world's population is ageing, it is also continuing to urbanize. People have been gradually migrating into cities from the rural areas in which they used to farm until by 2008 more people lived in cities than in rural areas. Urban dwellers are expected to make up 60% of the global population by 2030. [13] In some ways, urbanization should help deal with the impact of ageing. In others, urbanization compounds the challenges of ageing. There are features of living in a city that might make older adults retreat from participation in its social fabric, such as fear of being a victim of violence, of being unsafe on icy streets, of being treated in a condescending manner by business owners. Since social isolation is an important determinant of health,[14] it is "important to create physical and social environments that are 'age-friendly' and foster the health and participation of older people" [15] to counteract these fears.

Susan Kirkland, a community health epidemiologist at Dalhousie University, says she doesn't expect Boomers to accept physical limitations as complacently as previous generations did, and her opinion is borne out by the experience of orthopedic surgeons who are being pressed to replace joints in younger and younger patients.[16] Seniors centres are already feeling the pressure to provide rooms with Wi-Fi service and gluten-free menu options, and epidemiologists are scrambling to quantify the effects of this group's demands

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[13] "WHO Age-friendly Environments Programme," World Health Organization.
[14] Public Health Agency of Canada, "What determines health?", October 21, 2011,
http://www.phac-aspc.gc.ca/ph-sp/determinants/index-eng.php#determinants
[15] "Interesting facts about ageing," World Health Organization, 7.
[16] The Canadian Press, CBC News, May 29, 2012,
http://www.cbc.ca/news/health/baby-boomers-health-demands-will-pose-challenges-1.1151890.

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for earlier and more expensive health interventions.[17] As seniors come to represent a larger proportion of the population, they will exert growing pressure to adapt the urban environment to their needs.

Cost of health care

Many older adults now die of largely preventable conditions such as heart disease, stroke, and chronic lung disease. More importantly, these conditions – often suffered concurrently and for a protracted period of time – greatly increase the cost of care.[18] However, factors such as diet, exercise, smoking, alcohol, and drugs affect how quickly one's health will decline with age.[19] So does mental health. Social isolation of older persons results in depression and withdrawal from society, diminishing both the health of the person and of the community. Depression is a common cause of disability that is often unaccounted for in databases of public health statistics.[20]

A healthy older population represents more opportunity than cost. The myth that an ageing population will be the last straw for an overburdened health care budget has been busted: It is not getting old that is expensive, but dying, or – more precisely – the cost of chronic care.[21] It is the main position of the World Health Organization that

> good health must [lay] at the core of any successful response to ageing. If we can
>
> ensure that people are living healthier as well as longer lives, the opportunities will
>
> be greater and the costs to society less. This great demographic challenge of the first

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[17] Ibid.

[18] "Interesting facts about ageing," World Health Organization.

[19] Ibid.

[20] Ibid.

[21] "Myth: The aging population is to blame for uncontrollable healthcare costs," Canadian Foundation for Healthcare Improvement, Canadian Health Services Research Foundation, February 2011, http://www.cfhi-fcass.ca/PublicationsAndResources/Mythbusters.

half of the 21st century therefore demands a public health response, and WHO has identified this as a priority for the Organization.[22]

Marginalization

Some areas of concern for older adults are harder to address with public policy, but are no less important to their sense of wellbeing. According to Cuddy *et al*, the elders of society have lost the cachet and status formerly accorded their age and wisdom, and have become increasingly judged for their failing energy and value as producers. Policies such as mandatory retirement age serve to reinforce this perception.[23]

Whether policy- or society-based, stereotyping and discrimination against older persons constitutes "ageism".[24] It further isolates older adults from full participation in their communities, preventing them providing input to solutions which are then selected by the young. "Ageist stereotypes... prevent us meeting the challenges of population ageing since they can prevent us asking the right questions or finding innovative solutions."[25] One general observation that must be applied to the discussion is that, while the original concept was that of Age-friendly Cities that would be nurturing environments for a globally ageing population, this has evolved over time to recognize that there are many other demographic groups that can benefit from its implementation. Thus, some cities have turned from becoming Age-friendly Cities to becoming cities that are "friendly to all ages", in an approach that recognizes the whole lifecycle, rather than focussing solely on seniors.

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[22] Margaret Chan, "Foreword to WHO's Good Health Adds Life to Years," *Global brief for World Health Day 2012*, World Health Organization, http://www.who.int/world_health_day/2012, 3.

[23] A.J.C. Cuddy, M.I. Norton, and S.T. Fiske, "This old stereotype: The pervasiveness and persistence of the elderly stereotype," *Journal of Social Issues* 61, no. 2 (2005): 274.

[24] Margaret Hall, "Developing an Anti-Ageist Approach Within Law," Toronto, ON: Law Commission of Ontario, July 31, 2009, 4.

[25] "Interesting facts about ageing," World Health Organization.

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This in itself is a step towards inclusion and away from stigmatization, and is part of the reason that the exact age demographic represented by "seniors" or "older adults" was deemed to be of little relevance to this paper.

Cost of (opportunity for) social support

Nobody is quite sure what the net impact on social support will be from the increasing ageing of the population. Benefits – such as public pension plans – that accrue to older persons will be stressed, but these will be offset to a degree by the decrease in benefits – such as education – required for a younger population. Further offsets can be realized by using the resources represented by active seniors as volunteers, caregivers, and in the formal workplace. "The societies that adapt to this changing demographic can reap a sizeable 'longevity dividend', and will have a competitive advantage over those that don't."[26]

Many of the qualities of the environment that encourage older adults to become physically and socially active are the same ones that encourage this activity in younger people. If young citizens are encouraged to participate actively in shaping their community, they are less likely to become risks to others, and more likely to become older citizens who continue to participate actively. Nobody likes to feel unsafe, and nothing builds a habit of community engagement like life-long practice. When citizens of all ages participate in their community, it is good for the community's physical, social, and economic health.

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[26] "Interesting facts about ageing," World Health Organization.

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About the Age Friendly City Program

The Age Friendly City (AFC) program is adopted by communities acknowledging that the aging of the population is something for which they need to plan. By planning, rather than retrofitting or coping, cities will become more comfortable not only for older people, but for those with small children and with temporary or permanent disabilities.

What follows are brief examples – taken from the WHO Guide – of how cities that address the WHO's eight key aspects can encourage active aging.[27]

1. Outdoor spaces and buildings: Increasing seating availability in public places, such as when waiting in line at a bank.

2. Housing: Affordable, barrier-free, low-maintenance housing, with access to shops and availability of services that allow ageing in place.

3. Transportation: Taxis that can accommodate wheelchairs, as well as accessible, affordable, safe public transit, with priority seating available for the elderly and disabled.

4. Respect and inclusion: Protection from discrimination and harassment, inclusion in educational opportunities, and a place at decision-making tables.

5. Social participation: Variable, affordable, multigenerational, accessible activities that are advertised in a way that older people will find out about them.

6. Civic participation and employment: Availability of flexible employment, training to use new technology, and promotion of older workers as valuable assets.

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[27] "Global Age-friendly Cities: A Guide," World Health Organization.

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7. Communication and information: Clear communication using plain language and using appropriate media, as well as the ability to talk to a human.

8. Community supports and health services: Access to information, home care services, and a wide range of health care options, including fall prevention education.

The AFC program has been adopted by countries including Canada, France, Ireland, Portugal, Spain, and the United States. Many cities – including Geneva, Manchester, New York City, and Edmonton – have signed commitments to improve continually to become more age-friendly, and "many innovative models are emerging" to reflect local requirements.[28]

After joining the network, a city commits to a **five-year program** during which it must

- establish mechanisms that involve older people;

- conduct an assessment of the city's age-friendliness;

- develop an action plan and measures to show it is making a difference; and

- implement the plan and demonstrate progress.

To remain in the network, it must then demonstrate continuous improvement through cycles of implementation and evaluation.[29]

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[28] "Interesting facts about ageing," World Health Organization, 24.

[29] Jane Parry, "Network of cities tackles age old problems," *Bulletin of the World Health Organization* (World Health Organization) 88, no. 6 (June 2010): 406-407.

Literature Review: Age Friendly Cities

It is not the intent of this paper to describe all the activities of the cities chosen. We are interested, for the purpose of this paper, only in the role played by the private sector in their implementation. If the city has evaluated the success of their implementation, we are concerned with what form that evaluation has taken.

New York City, New York

In July 2010, New York City became the first city to join the WHO Network of Age-Friendly Cities and, like the Public Health Agency of Canada, was actively involved in helping to create the AFC framework in conjunction with the WHO. The city created an Age Friendly Commission, composed of leaders from both the public and private sector. The Commission was charged with "providing innovative leadership to engage all sectors throughout New York City to make changes that will encourage healthy and active aging for every New Yorker."[30] It created workgroups for each of four initiatives: Aging Improvement Districts; Age-friendly Business; Age-friendly Schools, Colleges and Universities; and Age-friendly Technology.

The workgroups collaborated with the Parks Department to make specific hours for pool openings for seniors, and with businesses to promote Age-Friendly businesses. While following strategies suggested on a global level by the WHO, they employed considerable creativity to implement the concepts at a local level.[31] This is particularly evident in the

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[30] "The Age-friendly New York City Commission," New York Academy of Medicine, accessed January 25, 2014, http://www.nyam.org/agefriendlynyc/about-us/commission-for-afnyc.html.
[31] "Age-Friendly Competition - New York City, USA," New York Academy of Medicine, International Federation on Ageing, 2013, http://youtu.be/GkhdDsm5rXs.

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formation of the Aging Improvement Districts, where local groups strategize "no or low-cost improvements"[32] to meet the needs of their own neighbourhood, rather than relying on one-size-fits-all programs. One area might focus on making the arts accessible, for example, while another has concentrated on ensuring laundry facilities are available locally.

A progress report released by the Office of the Mayor stated: "Since its launch in 2009, Age-friendly NYC has engaged the City's agencies, non-profit and business communities to better include and serve older adults."[33] Department for the Aging Commissioner Lilliam Barrios-Paoli credits their success to the "uniquely innovative partnership... of sister City agencies, the New York City Council and the New York Academy of Medicine," as well as "grassroots community efforts from local businesses and neighborhood organizations."[34]

NYC's public-private partnership means that there is considerable involvement from participants outside of the government realm. Some programs that were suspended due to the discontinuation of government funding have been kept running by the injection of funding by organizations such as the American Association of Retired Persons (AARP).[35] They have implemented projects such as artists in residence at seniors' centres, and using school buses during periods when they would otherwise be idle to ferry seniors to markets

[32] "Aging Improvement Districts," New York Academy of Medicine, accessed January 25, 2014, http://www.nyam.org/agefriendlynyc/initiatives/current/aging-improvement-districts.html.
[33] "Office of the Mayor," NYC, October 9, 2013, http://www1.nyc.gov/office-of-the-mayor/news/326-13/mayor-bloomberg-council-speaker-quinn-department-the-aging-commissioner-barrios-paoli-the/index.page.
[34] Ibid.
[35] "Business Resource Guides," Age-friendly NYC, accessed August 9, 2013, http://www.nyam.org/agefriendlynyc/docs/AFLBI-Resource-Guides.pdf.

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and arts events. In this way, private enterprise is not only involved, but also benefiting from the arrangement.

Recently, in a competition sponsored by the International Federation on Ageing, Age-friendly NYC was judged by a multi-national panel to be the world's best existing age-friendly initiative. Applicants (including the City of London, Ontario) for the 2013 Summa Age-friendly Cities and Communities Innovation Award were judged by "an international panel of experts representing... medicine, architecture, design, medicine, urban planning, international relations, public administration, social work, business, and economics."[36] The theme of the competition was "intergenerational solidarity", and short-listed applicants submitted projects that promoted "a new wave of intelligence, a new generation of age-friendly designs and initiatives that [form] the foundation of growth and sustainability."[37] The criteria also included transferability of knowledge gained through implementation of the projects to developing nations that will be significantly impacted by population ageing.

The city's progress report lists 59 initiatives that were taken and categorizes them as "fully launched", "ongoing", "needs more work", or "suspended".[38] While the 59 initiatives are laudable and impressive, the status of each is linked to outputs, not outcomes. For example, we can see how many community centres have implemented lower membership rates for seniors, but we do not know how many seniors have taken advantage of this rate, or whether it has improved their health.

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[36] "Office of the Mayor," NYC.
[37] "International Istanbul Initiative on Ageing," International Federation on Ageing, October 5, 2013. http://www.ifa-fiv.org/international-istanbul-initiative-on-ageing/.
[38] "59 Initiatives: Age-Friendly NYC," Age-Friendly NYC, October 9, 2013, http://www1.nyc.gov/office-of-the-mayor/news/326-13/mayor-bloomberg-council-speaker-quinn-department-the-aging-commissioner-barrios-paoli-the/#/0.

Important recognition by New York that Age Friendly Cities represent an economic – not solely a moral – imperative comes from Linda I. Gibbs, deputy mayor for health and human services. "New York has become a safer city, and we have such richness of parks and culture that we're becoming a senior retirement destination. They come not only with their minds and their bodies; they come with their pocketbooks."[39]

Success cannot be measured solely by the winning of awards, however. Where is the "public evidence" that points to New York's success in the eight areas outlined by the WHO's program? People say what they want most of all is to "live in a neighborly place where it is safe to cross the street and where the corner drugstore will give them a drink of water and let them use the bathroom. They [want] personal shoppers at Fairway to help them find the good deals on groceries."[40]

The Milken Institute released a 2012 quantitative study that rated NYC as fifth overall "Best City for Successful Aging."[41] The downside of living in a major metropolis of over 18 million people is evidently buoyed by its transportation system, which earned a perfect score in the Milken Study.[42] Even the Milken work, however, counts outputs, not outcomes. Enumerating hospitals and recreation centres, while providing the ever-elusive objective measurement that allows comparison across jurisdictions, still does not actually measure the effect that this has on the lives of seniors living there. Recreation centres are unlikely to be making significant inroads into the health indicators of seniors unless they

[39] Anemona Hartocollis, "A Fast-Paced City Tries to Be a Gentler Place to Grow Old," *New York Times*, July 18, 2010.
[40] Ibid.
[41] Anusuya Chatterjee, Ross DeVol, and Paul H. Irving, "New York: Best Cities for Successful Aging," 2012, http://successfulaging.milkeninstitute.org/bcsa.taf?page=metro&mcode=C3562&pop=large.
[42] Noah Kazis, "New York's Transit and Walkability Keys to Age-Friendly City," OpenPlans, July 31, 2012, http://www.streetsblog.org/2012/07/31/report-new-yorks-transit-and-walkability-keys-to-age-friendly-city/.

make an effort to target their programming specifically – as did the New York City

swimming pools.

New York scored badly both in its own estimation and in the Milken study in the

area of housing and financial stability; it is an expensive place to live, and 46% of NYC

seniors live in poverty. Thus, it is surprising that there is no mention in either report of the

fiscal sustainability (for both the city and its inhabitants) that could result from the

implementation of age-friendly tenets. "For both public and private sectors, there can be no

success or fiscal sustainability if a full one-fifth of the population is drawing entitlements

without contributing."[43]

WHO Aspect	Evidence of Implementation in New York City
Outdoor spaces and buildings	"Initiatives include increasing seating for older adults inside and outside, especially in locations where people wait in line... reserving special hours for older adults at the Thomas Jefferson Park swimming pool (so successful that it was expanded to 14 different pools in the following year);"[44]
Housing	"Organizers say much remains to be done. No. 1: Making the notoriously expensive city more affordable for seniors. "How expensive it is to be housed in New York is a challenge," according to Ruth Finkelstein, who leads the group's private-sector efforts."[45] "[Improved] access to laundry in public housing" is one way of mitigating the expense.[46]
Transportation	"Transforming key intersections by giving people more time to cross the street, more benches at bus stops and extending curbs at crossings."[47]

[43] Michael Hodin. "Survey: Cities Thrive When They Harness Senior Power," *The Fiscal Times*, August 1, 2012, http://www.thefiscaltimes.com/Articles/2012/08/01/Survey-Cities-Thrive-When-They-Harness-Senior-Power.

[44] Grantmakers In Aging, "Age-Friendly Communities: An Introduction for Private and Public Funders," Community AGEnda, 2013, 20.

[45] Jason Kane, "8 Things Your City Should Be Doing to Help You Age Well," Twin Cities Public Television, September 12, 2013, http://www.nextavenue.org/article/2013-09/8-things-your-city-should-be-doing-help-you-age-well.

[46] Grantmakers In Aging.

[47] Bea Victor, "New York City is making strides to become more age-friendly," *Staten Island Advance*, October 6, 2013, http://blog.silive.com/as_we_are_column/2013/10/bea_victor_city_is_making_strides_to_become_more_age-friendly.html#comments.

WHO Aspect	Evidence of Implementation in New York City
Respect and inclusion	
Social participation	"NYC-Arts Cultural Guides [organized by borough] for Seniors... connect older adults to their local theaters and museums and... encourage these cultural institutions to see older adults as important patrons to be catered to. They offer brief descriptions of organizations and detail more than 85 senior-specific programs and discounts. They also include information about accessibility for those with sight hearing or mobility challenges."[48]
Civic participation and employment	"Age-Friendly NYC college link: Provides older adults with an easy way to learn about courses, programs, events and activities available to them at many New York City colleges and universities."[49]
Communication and information	"Age-Friendly Business: Recommendations older New Yorkers have made to business people — better customer service and friendlier physical layout of stores. Interested businesses are then given educational materials and support on how to become age-friendly and market [their business]. Participating businesses are promoted among older New Yorkers."[50]
Community supports and health services.	"Newly designated senior-only pool hours at 14 public swimming pools, improved lighting... free walking clubs and exercise classes."[51]

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[48] Ibid.
[49] Ibid.
[50] Ibid.
[51] Ibid.

London, Ontario

In 2010, London became the first Canadian city to join WHO Global Network of Age Friendly Cities. The City established the Age Friendly London Task Force in 2011, giving its 100 members the mandate to create a strategy to become an AFC.[52]

In 2013, the City of London approved Task Force's *Three Year Action Plan for an Age-Friendly London*,[53] which

- outlines the partners and resources needed to address goals in each of the eight areas identified by the AFC framework, and

- proposes the formation of an Age Friendly London Network to take the lead on many of the goals identified.

The Network was officially launched at its first meeting with 88 members on May 21, 2013.[54]

London's Working Groups collaborate with other groups to minimize duplication. The website of Age Friendly London lists the Working Groups that have been struck by the Network. There is one Working Group for each of the eight aspects outlined by the WHO Age Friendly Cities program. The Working Groups' web pages yield the minutes of their first meetings held in summer 2013. The minutes list each of the goals of the Working Group and the ways in which the group is working towards them, including monitoring existing programs created by other organizations to ensure coordination of effort. The

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[52] First Meeting of the Age Friendly London Network, September 23, 2013, https://www.london.ca/newsroom/Pages/Age-Friendly-Network.aspx.
[53] "Age-Friendly Communities Success Stories," Queen's Printer for Ontario, 2013, http://www.seniors.gov.on.ca/en/afc/stories.php.
[54] "Age Friendly London Network," City of London, October 8, 2013, http://www.london.ca/residents/Seniors/Age-Friendly/Pages/Next-Steps.aspx.

Outdoor Spaces and Buildings group has prioritized improving the connectivity of the pathway systems, for example, and is monitoring the efforts of the City of London to do likewise, to identify opportunities to focus their lobbying. The group also proposed that advertising be sold on park benches to fund their installation, thus cleverly shifting the cost of a program onto the private sector. In addition, they identified an area where one project undermined age-friendly objectives: Preservation of historical road signage led to poor visibility of directional signs. [55]

Many of the goals of the London project were listed as "potential student projects". While this is often seen by resource-strapped organizations as a way to get work done without a large budget, it seems contrary to the mandate to include older adults in the implementation of an age-friendly city. However, they collaborated with Western University's Faculty of Health Sciences to conduct community surveys of public perception before the formation of the Task Force, to serve as baseline indicators in later assessment of the success of the program.[56]

It is too early in London's plan to expect there to have been any substantial evaluation of their success, as they are still in the early stages of implementation. Consequently, this paper's assessment must be limited to evidence of implementation in each of the areas, rather than its success.

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[55] Working Group: Outdoor Spaces and Buildings, "Notes from July 2013 meeting," London, Canada, July 2013, http://www.london.ca/residents/Seniors/Age-Friendly/Documents/OutdoorSpaces_July3013.pdf.
[56] "Age-Friendly London," AFC University of Waterloo, Age Friendly Communities, March 2013, http://afc.uwaterloo.ca/Community%20Stories/london%20updated.html.

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WHO Aspect	Evidence of Implementation in London, Ontario
Outdoor spaces and buildings;	Ontario has a multi-phase project to make all public spaces accessible. A new building code slated for 2014 will stress universal design. There is cross-participation between Age Friendly London and the City of London Accessibility Advisory Committee. Age Friendly London has established a partnership with University of Western Ontario faculty of Gerontology in Practice. [57]
Housing;	
Transportation;	"Improvements already made include the installation of countdown timers on crosswalks, improved readability of street signs, and the advertisement of the London Transit Commission's "Get On Board" program."[58]
Respect and inclusion;	The goals are largely education through media delivery, and appear to rely heavily on student participation for support.
Social participation;	
Civic participation and employment;	"We now have a virtual army of supporters (residents, service providers, service groups, care givers, academics, businesses) across the City sharing the Plan and engaging others to participate in making London more age friendly."[59]
Communication and information; and	Community Engagement and Decision-Making: "Full and equitable inclusion must become a standard, not something that one group decides to do to include another group...Everyone [talks] about what to do for, or to, or on behalf of "them"...[and not] about ordinary, full, equal membership , participation, power, determination, and leadership as an older person."[60]
Community supports and health services.	"Future improvements include the creation of a "check-in" service for isolated seniors and a recognition program for older adult volunteers."[61]

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[57] Working Group: Outdoor Spaces and Buildings.
[58] "Age-Friendly Communities Success Stories," Queen's Printer for Ontario, 2013, http://www.seniors.gov.on.ca/en/afc/stories.php.
[59] "Age-Friendly London."
[60] "Age-Friendly London."
[61] "Age-Friendly Communities Success Stories."

Edmonton, Alberta

The first city in Alberta to have joined the WHO's Network of Age Friendly Cities, Edmonton received its designation in December 2010. Edmonton City Council was the first municipality in Canada to approve a "Seniors Declaration", describing the value of seniors and aging. It also released *Edmonton Seniors: A Portrait*, "a description of the contributions, needs and interests of Edmonton's seniors."[62] The booklet emphasizes the need for housing and social services above all else. While the provision of housing may involve the development industry as well as public provision, however, there is little other mention of private enterprise in this *Portrait*. The closest it comes to considering older adults as continuing consumers is a passing note that seniors who continue to work usually wish to work part-time.

This represents a lost opportunity to have engaged the private sector in the pressing need for housing and home care services. A CARP poll indicates that "it is clear increased home care services [is the top idea to make cities more age friendly] by a large margin followed by a range of municipal planning amenities, which would indicate personal services are more important to members than infrastructure."[63]

One of the concerns of the planning community regarding Age Friendly Cities has been that other programs already address many of the same concepts: Smart Growth, Healthy Communities, and New Urbanism, Universal Design, Child Friendly Communities, LEED ND, WHO Safe Communities, Heat Resilient Communities, and Active Living

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[62] "Making our Houses Lifelong Homes: Accessible Housing for Seniors," The City of Edmonton Seniors Services and Programs, accessed December 1, 2013,
http://www.edmonton.ca/city_government/news/world-health-organization-recognizes-edmonton.aspx
[63] "Age-Friendly Cities Poll Report," CARP, October 9, 2009, http://www.carp.ca/2009/10/23/age-friendly-cities-poll-report/.

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Communities. [64] Edmonton's implementation has neatly sidestepped this criticism by

incorporating the participation of groups espousing these paradigms in order to avoid

duplicating effort and, in the result, has likely reduced the cost of their research and

increased their capacity.

Urban planning is not the only area in which Edmonton has hitched its buggy to

organizations already well situated to implement age-friendly programs. The mayor's office

hired a Seniors Liaison who worked with the Edmonton Seniors Coordinating Council to

lead the program from the very beginning. Age-Friendly Edmonton's *2013-2017 Proposed*

Workplan Summary includes a budget item to "develop and implement an Evaluation

Framework which will include recruiting and supporting an age friendly audit team."[65] This

is the only one of the three cities studied where there is evidence that they have

contemplated evaluating their success in the future.

Keating argues that one of the most important predictors of success in programs

targeted to seniors is that the "objectives are consistent with helping seniors age well by

finding the 'best fit' between their situation and resources available to them."[66] Edmonton's

programs, by being closely coordinated with those agencies and organizations that have

been serving the cities seniors for years, appear to strike the necessary balance between

public policy and community delivery. The Edmonton Seniors Coordinating Council, in

particular, has been instrumental to the coordination efforts. In a recent internal

qualitative evaluation, a recurring response to the question of the mandate of the ESCC was

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[64] Glenn R. Miller, and Allison Annesley, "Re-Positioning Age Friendly Communities: Opportunities to Take AFC Mainstream," *Canadian Urban Institute*, June, 2011, 5.
[65] Age-Friendly Edmonton, "2013-2107 Proposed Workplan Summary," City of Edmonton, May 2013, http://www.edmonton.ca/city_government/documents/VAFE-ProposedWorkplanSummary.pdf.
[66] Norah Keating *et al.*, "The Role of Social Capital in Aging Well," Edmonton, AB, November 2004, www.veterans.gc.ca/pdf/pro_research/social-capital-in-aging-well.pdf, 19

that it "[addresses] social issues for seniors as they relate to service delivery... beyond the mandate of any single organization".[67]

Correspondence from the Edmonton Seniors Coordinating Council to the author indicated that grassroots support for business involvement is strong. For a start, several Edmonton Business Revitalization Zones, in consultation with local seniors, have been invited to submit project ideas for which they will be eligible to win up to $10,000 in municipal funding.

Since there was evidence of an Age-friendly Business initiative to be launched in Edmonton, the Mayor's Office was contacted to determine whether this had yet taken place. In e-mail correspondence with the author, they indicated that they had hired a retired long-time civil servant to be champion of the Age-friendly Cities project, working directly for the mayor. They also divulged that 67% of workers at Edmonton Municipal Hall had already been through intergenerational training programs, and that they were ready to take on private business. They have already implemented "train the trainer" programs for taxi companies that have indicated interest, and are holding a job fair at City Hall for seniors. In e-mails to the author, they were extremely collegial and offered to share contacts, tools, and resources for Calgary's use.

The partnership between the Mayor's office and the Edmonton Seniors Coordinating Council appears to be paying the dividends predicted by those touting the benefits of leveraging existing organizations, as well as those who assert that the participation of seniors is critical to the success of an Age-friendly Cities initiative. Edmonton's Westend

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[67] Tim Osborne and Gene Chan, "Edmonton Seniors Coordinating Council Interim Evaluation," Civitas Consulting, Edmonton, AB, August 15, 2012, http://www.seniorscouncil.net.

Seniors Activity Centre Pilot Project – "Establishing an Age Friendly Community" – is taking

this advice seriously, using senior volunteers as auditors for the initial phase of contact

with businesses in three city shopping malls.

WHO Aspect	Evidence of Implementation in Edmonton, Alberta
Outdoor spaces and buildings	
Housing	Mayor's Roundtable for Accessible Housing and Universal Design for Seniors held in 2011 and published findings and recommendations for improving the adoption of universal design in new construction.[68] Assisted waste collection means that the garbage will be picked up at the house.[69] Social marketing attempts to normalize accessibility features, working with developers and in conjunction with the Building Code Development Process.[70]
Transportation	"Driving Angel" partnership with taxi companies to train drivers for dealing with seniors; plan to expand to accreditation model. "Seniors on the go" implemented to assist seniors using public transit.[71] Resources created to identify alternative modes of travel after cessation of driving.
Respect and inclusion	Employees at City Hall have been trained to deal sensitively with older adults. Piloting an Ageism Workshop.[72]
Social (and recreational) participation	Provide financial support to the "Creative Age Festival".[73] (Other initiatives are educational in nature, promoting the benefits of exercise and activity.)
Civic participation and employment	Working in conjunction with several other agencies to engage seniors as volunteers and workers.[74]
Communication and information	
Community supports and health services	Westend Seniors Activity Centre is piloting Age-Friendly Business programs with selected malls. Planning an "Age Friendly Innovation Fund" to support community-based resident-led projects.

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[68] "Making our Houses Lifelong Homes: Accessible Housing for Seniors."

[69] "World Health Organization Recognizes Edmonton as 'Age-friendly City'," The City of Edmonton, June 24, 2011, http://www.edmonton.ca/city_government/news/world-health-organization-recognizes-edmonton.aspx.

[70] Age-Friendly Edmonton, "2013-2107 Proposed Workplan Summary," 3.

[71] "World Health Organization Recognizes Edmonton."

[72] Age-Friendly Edmonton, "2013-2107 Proposed Workplan Summary," 4.

[73] Age-Friendly Edmonton, "2013-2107 Proposed Workplan Summary," 3.

[74] Age-Friendly Edmonton, "2013-2107 Proposed Workplan Summary," 2.

Findings from other Levels of Government

It is important to recognize the participation of and roles played by international agencies and national and provincial governments in the creation of Age-Friendly Cities. This is because many of the policy areas identified are beyond the purview of, or not easily influenced by municipal governments. At the international level, the WHO explains the mission and purpose of Age-friendly Cities, as well as outlining ways in which cities can become more age-friendly. Their Guide is "intended to be used by individuals and groups interested in making their city more age-friendly, including governments, **voluntary organizations, the private sector and citizens' groups**" [emphasis added].[75] Many other global groups have convened to discuss what should be done in preparation for an ageing population.

The WHO also provides a list of Canadian cities that have qualified as AFCs – something that proved impossible to obtain from Canadian sources. This may be due to a more stable organizational infrastructure at the WHO, without the vagaries of reorganization to which a public sector is subject. International literature is also the best source for comparing policy responses across jurisdictions. The report of the International Federation on Ageing is one of the most comprehensive discovered during this research, examining the possible policy response at many levels from different countries; it also covers all of the crosscutting facets of healthy ageing, including that of reducing

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[75] "Global Age-friendly Cities: A Guide," World Health Organization, 11.

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discrimination.[76] Most international bodies, however, limit the discussion to frameworks and cooperation between states, rather than concentrating on grassroots implementation.

The WHO conceived the Age-friendly Cities project in 2005 and produced its guide to Global Age-friendly Cities in 2007 with the substantial support of the Public Health Agency of Canada (PHAC).[77] Thus is it not surprising that the major thrust of the Canadian position is that of public health; PHAC lists the "ultimate outcome" of age-friendly cities as "positive health outcomes for older Canadians and reduced health inequalities."[78] Under the heading of "immediate results" it includes "public awareness", as well as "inter-organization, inter and intra-sectoral and multi-sectoral engagement." This appears to indicate the involvement of private enterprise, but the word "business" appears nowhere else in the presentation except as a target of provincial "strategic engagements".[79] Canada's submission to the United Nations Economic Commissions for Europe Ministerial Conference on Ageing in September 2012 lacks evidence, for example, that there was significant input from the private sector.[80]

The PHAC website outlines a plan of milestones for which "provinces or territories may seek additional recognition for their communities from the Public Health Agency of Canada. This... facilitates a connection to resources, tools and the Pan-Canadian Age-

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[76] "Current and Emerging Issues Facing Older Canadians," International Federation on Ageing, March 30, 2012, http://www.ifa-fiv.org/ifa-publication/social-inclusion-and-integration/current-and-emerging-issues-facing-older-canadians/.

[77] "Global Age-friendly Cities: A Guide," World Health Organization, iV.

[78] Louise Plouffe, "Age-Friendly Cities and Communities: WHO and Canadian Initiatives," Public Health Agency of Canada, August 16, 2011, http://www.queensu.ca/sps/events/conferencesandworkshops/qiisp/201112/videospresentations/Louise Plouffe.pdf, 26.

[79] Plouffe, 27.

[80] "National follow-up to the United Nations Economic Commission for Europe (UNECE) Regional Implementation Strategy for the Madrid International Plan of Action on Ageing (MIPAA)," Canada, HRSDC, accessed April 2, 2013, http://www.hrsdc.gc.ca/eng/seniors/reports/madrid_followup.shtml.

Friendly Communities Network."[81] Over the past several years, the federal government has considerably reduced its influence on provincial healthcare delivery but, accepting the theory that community engagement improves health results, it can still create policy to encourage the labour market for older adults, thus supporting active ageing. UNECE stresses that policy makers cannot work alone, however, and require the participation of private firms and careful integration practices to prevent discrimination.[82] Its research says that, "active labour market participation may be supported by establishing flexible retirement arrangements, by forming a working environment that is adapted to the needs of all generations, through continuous education and training, as well as by promoting positive images of older employees and anti-discrimination policies."[83] Here is evidence of the intersection of the three policy areas of health, economics, and human rights.

Several provinces – British Columbia, Alberta, Manitoba, Ontario, Quebec, Nova Scotia, Prince Edward Island, and Newfoundland and Labrador – followed Canada's participation in Age-friendly Cities with their pledges to create Age-Friendly Communities.[84] Between them, they have produced scores of web "tools" and "resources", as well as brochures for businesses as evidence that they are championing the cause. The provincial body of literature focusses heavily on frameworks – not on the implementation of the work. Edmonton is piloting some Age-Friendly Business projects using the materials produced by Alberta. Alberta Health Services' contribution to the Age-Friendly Business literature points out that "no Alberta community would be complete without the business

[81] "Age-Friendly Communities," Public Health Agency of Canada, November 19, 2012, http://www.phac-aspc.gc.ca/seniors-aines/afc-caa-eng.php#sec4.
[82] Ibid, 6.
[83] United Nations Economic Commission for Europe.
[84] "Age-Friendly Communities,"Public Health Agency of Canada, November 19, 2012, http://www.phac-aspc.gc.ca/seniors-aines/afc-caa-eng.php#sec4.

sector" and that becoming more age-friendly is "socially responsible" and "good for business".[85]

Policy Implications and Lessons for Calgary

According to the Calgary & Region Economic Outlook, the population of Calgary residents aged 65 and older will increase from 134,800 people in 2011 to 213,300 in 2022.[86] This represents an increase of 58%, with those between 25 and 54 increasing only 13%. This indicates that, while the proportion of seniors will increase, it will likely remain a younger city than most in Canada, as Alberta's bustling economy continues to attract young workers.[87] However, the number of persons with disabilities **at all ages** is projected to increase, as indicated by Figure 1 on the following page.[88] This illustrates the need to plan for – rather than react to – this increase, and create policies that are friendly to all ages and abilities.

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[85] "Age-friendly businesses," Government of Alberta, Alberta Health, accessed August 3, 2013, http://www.health.alberta.ca/seniors/age-friendly-businesses.html.

[86] "Calgary's Population Overview," Calgary Economic Development, accessed September 2, 2013, http://www.calgaryeconomicdevelopment.com/research/demographicspopulation/overview.

[87] Josh Wingrove, "Alberta bucks demographic trend as young families come in droves," *The Globe and Mail*, June 19, 2012, http://www.theglobeandmail.com/news/national/alberta-bucks-demographic-trend-as-young-families-come-in-droves/article4217687/.

[88] The City of Calgary, Community and Neighbourhood Services (CNS), Social Policy and Planning Division, "Universal Design Handbook", (2010), http://www.calgary.ca/CSPS/CNS/Documents/universal_design_handbook.pdf, 9.

Figure 1. Number of Persons with Disabilities in Calgary, 2006-2013 (by age group)

■ 2006 ■ 2013 (projected) ▬▬ Projected increase 2006 – 2013
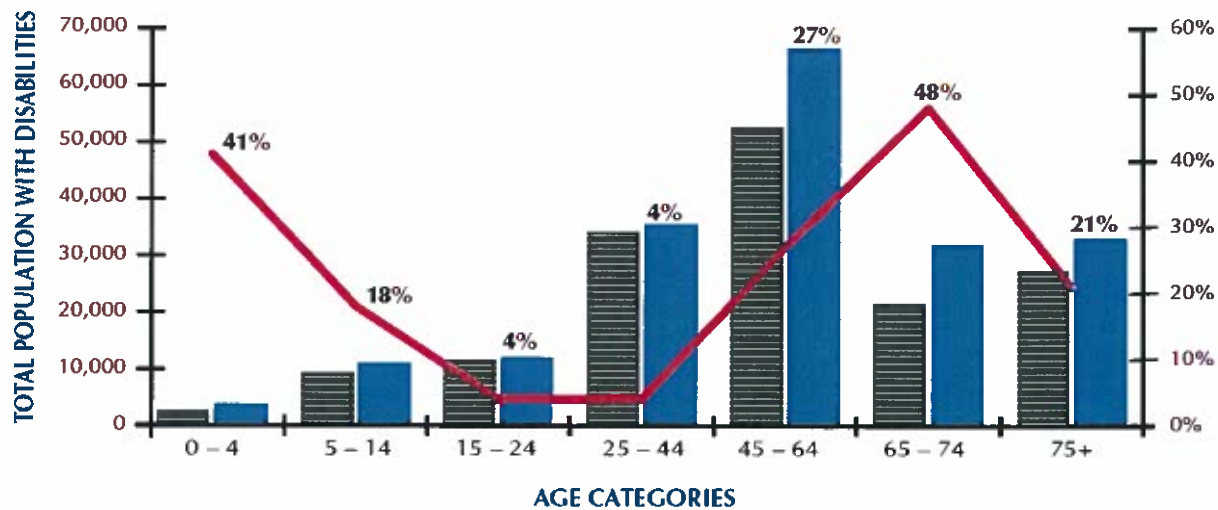
Source: *Statistics Canada, 2006g & 2006h; The City of Calgary 2008b*

One of the tenets of Calgary's "*2020 Sustainability Directions*" is to be an age-friendly city by 2020, but this is a generic reference and refers only to targets, not to any strategy to achieve them. There is so far no "project" to become a WHO Age-friendly City.

- There is an unofficial "Age-friendly Cities Working Group" that is chaired by staff from the Community and Neighbourhood Services business unit. The author and only two of the 11 members attended a meeting of the group on April 2, 2013. At the meeting, it was noted that the attendance for the meetings has been dropping and that this is one reason that it is difficult to gain political traction. The Chair informed attendees that the Council did not really have the WHO Age-friendly Cities initiative on their radar yet.

- There is an Issue Strategist for disabilities at The City of Calgary who touches on the age-friendly initiative; the opportunities for overlap between features that would be age-friendly and those that would be disability-friendly are clear. That office has

produced the *Universal Design Handbook*, which includes sections on ageing and disability, as well as a Universal Design Checklist that are requirements "for all City buildings, but are also recommended for all other buildings and construction developments throughout Calgary."[89]

- Several Aldermen at the City of Calgary filed "Notice of Motion RE: Intergenerational Support Strategy" on February 28, 2013. The Notice was referred back to Community and Protective Services (CSPS) to request a "report detailing what work was already being done within The City and in the community on senior friendly strategies, and a potential work plan for this work going forward, no later than 2013 June." The result was CSPS's "Seniors Age-Friendly Strategy", along with assessment reports for Programs and Services and for Strategic Services, a Work Plan, and a letter of support from the Older Adult Service Providers of Calgary (OASPOC) steering committee.

The City of Calgary must first **conduct a review of its existing policies** to ensure they are equitable to older adults, and **employ a lens of active ageing** in the creation of new ones. All policies should recognize the specific duty to accommodate the needs of older adults, subject to the same undue hardship standard exacted in employment and other law. However, municipal policy without supporting legislation is toothless. When protection is missing for certain groups, it is the role of government at every level to rectify that. The Alberta Human Rights Code is missing specific protection for older persons and Calgary's municipal liaison office must **bring pressure to bear on the province** to rectify this.

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[89] The City of Calgary, Community and Neighbourhood Services (CNS), Social Policy and Planning Division, "Universal Design Handbook", (2010), 9.

Alberta's *Aging Population Framework* lists eight outcomes that "reflect the broad goals Alberta will pursue in preparing to meet the needs of an aging population," in which all sectors and levels of government are to play a role.[90] The provincial government's role is listed as "encouraging Alberta municipalities to become more age-friendly". Certainly patching the hole in the Human Rights Code would help.

Evaluation

The goal of the WHO Age Friendly Cities is to enable seniors to age well. However, there is no way to know whether AFC programs are effective unless they are evaluated in terms of their outcomes. Keating *et al* stress that "we can't know whether programs are enhancing social capital or fostering aging well unless there are clear evaluation strategies in place that use a social capital lens as the framework."[91] A graduate of the Harvard School of Public Policy, Calgary's Mayor Naheed Nenshi was also a professor at Mount Royal University, teaching students of non-profit management how to evaluate program outcomes. Thus, it should require little convincing that Calgary's Age Friendly Cities initiative must first consider the specific and measurable societal outcomes to be desired and expected, and decide how those will be best evaluated.

The rationale for Age-friendly Cities is to encourage healthy active ageing, but the changes proposed are recognized as being friendly to **all** ages and abilities, including seniors, older adults, parents with small children and persons with permanent or

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[90] Government of Alberta. "Aging Population Policy Framework." Policy Framework, Edmonton, 2010, www.health.alberta.ca/documents/Aging-Population-Framework-2010.pdf, v.
[91] Keating.

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temporary disabilities. Members of all affected communities must be included in this process to determine whether they can identify with the vision of each of the outcomes.

The literature reviewed generally agrees that keeping older adults active and civically engaged is a good thing for their health and for the economy. The implication for public health outcomes *vis-à-vis* the Age-friendly City initiative is that anything that enables universal participation in civil society will reduce the strain on health care budgets, as civic engagement is an important determinant of health. Therefore, many areas of policy – economics, protection of human rights, and universal design – have overlapping effects on public health, particularly where they affect universal participation.

The WHO Ageing and Health Knowledge Transfer (KT) Framework identifies seven key elements in its guiding principles for linking knowledge and research to action. Its author posits, "Researchers and policymakers live in two different communities... with different values, reward systems, and languages".[92] The City of Calgary, if it decides to launch a WHO Age-Friendly City initiative, must remember that there is a third: the actual community served by the research and the policies. Research must drive policy, and policy affects the community. Community, in turn, must be included in the research and in the evaluation of the ensuing policies. "Involving the target users in the selection, design, development and implementation of the research can ensure that the research is more applicable."[93]

Calgary's CSPS report notes that the benefits of creating a made-in-Calgary plan to address the impending demographic change are outweighed by those available from using

[92] Dr. Moriah Ellen, "Knowledge translation framework for ageing and health," World Health Organization, Edited by World Health Organization, McMaster Health Forum, April 2012, http://www.who.int/entity/ageing/publications/knowledge_translation.pdf, 36.
[93] Dr. Moriah Ellen, 47.

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solutions that have already been tried and tested by the WHO, by other countries, and by other municipalities. There are certainly lessons in program assessment to be learned from other AFCs. The 2012 Annual Report from CSPS enumerates the initiatives that involve recreational and intergenerational activities to increase the community engagement of seniors. Once again, outputs are being counted. Programs are being implemented, but it is far from sure that they are having the outcomes envisioned by the WHO initiative.

Branding

The concept of AFCs can be used by the private sector as well as by public sector planners, just as the concept of market competition can be used by public sector planners as well as by the private sector. The rationale for creating Age Friendly Cities as a policy framework at the global level was to encourage planning for the advent of an older population, but it was underlined in the formative process that the changes proposed would benefit more than just older adults. The founders of the framework recognized that Age Friendly Cities are friendly to **all** ages and abilities, which means that there is considerable skin in the game for many other interest groups, including businesses. Age friendly businesses would be rewarded with increased market share. To encourage them to start, however, cities could offer **property tax credits** to age-friendly businesses, in order to defray the expense of new practices (much in the same way as homeowners got credit for decreasing their energy footprint). Credits help to preserve tax progressiveness,[94] and are politically attractive.

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[94] Hamilton Council on Aging, "Hamilton: A City for All Ages - Three Years On," accessed July 21, 2013, http://www.coahamilton.ca/HCoA-2013-Report.pdf, 233.

The literature from other Age-Friendly Cities indicates that there are roles to be played by the private sector, such as

- providing health care and home care services;

- creating welcoming places to work and conduct business;

- working within the business context to eliminate ageism;

- eliminating barriers to participation in the activities of daily life.

It appears that, given a municipality with sufficient resources to adapt them for local needs, tools and resources provided at the provincial level and federal levels can galvanize the business community into action without having to finance significant additional research and development. As pointed out by participants in New York City, however, chances of success improve by hiring at least one full-time employee and using some method of encouraging active participation by businesses.[95]

"Age-Friendly" is a brand that cities can market and sell, just as the LEED model of building has grown to be an integral part of infrastructure planning. "AFC-accredited" could be developed as a brand for businesses addressing the seniors market, creating shared value for both business and clientele. Leveraging the WHO model to market the AFC concept to other agencies and the private sector would help the City of Calgary build capacity to implement the programs needed.

Privatization is one option for public agencies that have many initiatives but not enough resources; this may include "the contracting-out of the provision of a good that was

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[95] New York Academy of Medicine, "Creating an Age-Friendly NYC One Neighbourhood at a Time," accessed July 21, 2013, http://www.nyam.org/agefriendlynyc/docs/Toolkit_Report_0321-VA-new.pdf, 19.

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previously produced by a government bureau."[96] Industries such as food manufacturing

and long-term care have institutionalized third-party audits to indicate their compliance

with standard practices. While enforcement of age-friendly business policies would be

costly to a municipality, customers could provide **private encouragement** via reviews,

through agencies like the Better Business Bureau or Yelp. (When contacted by the author,

the Better Business Bureau's representative expressed a desire to discuss this research

when completed.) In Portland, "an 'elderly-friendly' business guide and audit system has

been developed by a voluntary group."[97]

Masotti et al list as two characteristics of healthy Naturally Occurring Retirement

Communities (NORCs) that "local governments progressively demonstrate senior-friendly

policy decisions" and that "private sector markets progressively respond to the needs of

seniors."[98] The public policy implication here is that it is the government's responsibility to

set policy regarding accessibility of buildings, as has Ontario, and then private

businesses will begin to understand that the market is influenced by the needs of seniors as

well as others with disabilities.

Partnering with existing organizations

Policies that support healthy ageing are in short supply due to lack of attention to

the matter. One way to advance policies that favour diffuse interests is to mobilize

organizations already in place.[99] It is suggested that, as a practitioner of public policy, "you

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[96] David L. Weimer, and Aidan R. Vining, Policy Analysis, 05, San Francisco, CA: Longman, 2011: 214.
[97] "Global Age-friendly Cities: A Guide," World Health Organization, 17 & 49.
[98] Paul Masotti, *et al*, "Healthy Naturally Occurring Retirement Communities: A Low-Cost Approach to Facilitating Healthy Aging," *American Journal of Public Health* 96, no. 7 (July 2006): 1167.
[99] David Weimer, Aidan R. Vining, 267.

can contribute to the public good by identifying... values that receive too little attention in political arenas."[100] Since there is no Calgary equivalent to the Edmonton Coordinating Council, they could start with the Seniors Advisory Council for Alberta, which "serves as a link... to the Government of Alberta... [gathering] views and concerns from seniors, seniors' organizations and senior serving stakeholders through direct communication and engagement."[101]

Calgary has already **harnessed the power of organizations** such as the Older Adult Service Providers of Calgary (OASPOC). While this may cover the advocacy needs of seniors, however, it does little to include the business sector or other groups that may be affected. In Ontario, the Accessibility for Ontarians with Disabilities Act Alliance (AODA) reached out to CARP members to join with them in advocating for a barrier free Ontario – they have already been successful in finding the policy window to bring their needs to the agenda. Their missive has the revolutionary flavor of being fresh from victory:

How did our disability community win the enactment of the AODA back in 2005? How are we waging our campaign to get this law effectively implemented and enforced? We used widely followed email Updates, an informative website and other internet tools to spread the word and bring people together. What followed was a very successful grassroots campaign.[102]

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[100] David Weimer, Aidan R. Vining, 449.

[101] Government of Alberta, "Seniors Advisory Council for Alberta 2012-13 Annual Report," Annual Report, Edmonton, 2013, www.health.alberta.ca/documents/SACA-AnnualReport-2013.pdf, 2.

[102] "A Message and Warm Invitation to CARP Members from David Lepofsky, Chair of the Accessibility for Ontarians with Disabilities Act Alliance," CARP, October 19, 2012, http://www.carp.ca/2012/10/19/a-message-and-warm-invitation-to-carp-members-from-david-lepofsky-chair-of-the-accessibility-for-ontarians-with-disabilities-act-alliance/.

One economic policy response from Alberta and its cities has been to allow seniors to defer the education portion of property taxes in order to be able to afford to stay in their own homes for longer.[103] However, the demand for smaller and more accessible types of housing will continue to grow. There is an opportunity for property developers to increase their market in this area, and scope for municipal policy to **encourage development of accessible housing**.

The City of Calgary can emulate other Age-friendly Cities by engaging the private sector in order to build capacity.

- Edmonton showed the success that came from **a charismatic champion of the cause** who would get the momentum going. It illustrated CARP's finding that the **formation of an Age-friendly City Advisory Council** must be accorded high priority, but also that it need not be resident at City Hall.
- New York showed a massive **coordinated effort** that recognizes that policies affecting seniors will eventually affect everyone.

Calgary is at an optimal place in its history to implement an Age-friendly City program. The floods of 2013 placed enormous stress on the region, both economically and psychologically, but the immediate and determined response by a massive army of volunteers proved that municipal intervention is not always necessary. Similarly, Calgary's "3 Things for Calgary" campaign was born in the Mayor's Civic Engagement Committee and

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[103] "Seniors Property Tax Deferral Program," Government of Alberta, Alberta Health, accessed September 15, 2013, http://www.health.alberta.ca/seniors/property-tax-deferral.html.

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brought to life by "a group of dedicated volunteers."[104] This illustrates the efficacy of the combination of a little political will and a lot of civic pride.

Whether the City of Calgary chooses to become an Age-friendly City or a city that is friendly to all ages and abilities, it will be important for Calgary to find an influential leader to fan grassroots participation, leverage all available resources and instil a sense of competition in the private sector. Evaluating programs in terms of their outcomes will provide The City of Calgary with the ammunition needed to galvanize private enterprise into action.

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[104] "About Us," 3 Things for Calgary, accessed August 3, 2013, http://www.3thingsforcalgary.ca/about-us.

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