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Stranded in suburbia

Planning for aging populations

By Art Ladd

February 2012

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ISBN 978-1-926888-98-9

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Acknowledgements

This paper would not exist without the guidance and support of Dr. Christopher Leo and the CCPA-MB, who encouraged me to take this undergrad essay to the next level, evolving it into the article you see today. Major props to *Winnipeg Love Hate* founder and photographer Bryan Scott, who generously provided the photos. Finally, a very special thanks Drs. Gina Sylvestre and Jino Distasio at the Institute of Urban Studies who inspired this paper's inception and direction.

About the author

Art Ladd has been professionally immersed in applied policy research in the areas of sustainability, community development, transportation for aging populations, and homelessness for several years. Art holds a undergrad in Urban Policy and the Environment, and has spent most of his adult life working with under-represented populations and community-based organizations. Most notably, he chairs the Board of Directors for Art City, an artist-run community arts centre in Winnipeg's West Broadway neighbourhood, and has a long history in non-profit community media.

“Perhaps no part of life has been so neglected by our civilization — and so by the planner himself — as old age.”
— *Mumford, 1968, p. 41*

Introduction

Perhaps Mumford was right. One of the most significant demographic changes in modern history is on the verge of occurring. Children born during the baby boom of post World War II are coming around full cycle, and we do not appear to have a well thought out plan to deal with this phenomenon. The first of the baby boom generation will be reaching age 65 within the next decade, doubling the current population of seniors by 2036 (Statistics Canada, 2010b). How does Manitoba intend to prepare for these dramatic changes? Our provincial health care system will be pushed to the limits, as will our ability to provide the services that will be needed.

The aging baby boomers, largely living in Winnipeg’s suburbs, will likely want to continue to live there. Suburban regions are characterized by low-density development and land use separation; buildings are spread out, and homes are completely segregated from the vast majority of services. This poses significant problems for delivering services, ensuring appropriate housing and providing transportation. Are Manitoba’s policies and strategies for addressing the aging population sufficient?

In order to answer this query, we will examine suburban development patterns, the expected

population changes, as well as the aging process itself. In addition, we will review the social aspects of health, and how they relate to housing, transportation, and support service needs. This review is followed by a critique of the Government of Manitoba’s current strategies and policies on aging, illustrating how inadequate they are. Concluding, we offer a range of recommendations to address these policy shortcomings. It is not so much that the current approaches are failures, but they simply do not acknowledge the reality of the current urban landscape and the pressures it will face with an aging population.

Suburban Development

Since the end of World War II, suburban development and planning patterns have largely prescribed the separation of land uses. This approach to development located manufacturing outside and away from the central city, with the goal of improving the environmental living conditions for the new segregated and mass-produced residential districts (Gillham, 2002). Although these trends were initially a positive response to polluted urban living, the long term impacts of

these practices would be far reaching. Perhaps the most prominent impact has been the ubiquitous automobile and the environmental degradations caused by suburban roadway infrastructure, vehicle pollution and auto dependence. Uncontrolled suburban development is continuing to replace natural areas, consume large amounts of resources and agricultural land, as well as creating inefficient, underused infrastructure (Gillham, 2002; Roseland, 2005).

Exurban growth, most often taking the form of bedroom or commuter communities, is compounding these issues. These exurban developments share many of the characteristics of suburbs, but are predominantly residential, without employment opportunities and surrounded by agricultural land or undeveloped natural areas (Spectorsky, 1955). Despite opposition to sprawling suburban development, it continues to appear on the landscape as the accepted development pattern.

The range of impacts that these patterns have on the aging population and older adults is rarely discussed. In suburban developments, the shopping and retail facilities are separated from residential areas, and clustered with other similar uses, often accessible only by automobile. This pattern in suburban regions is in stark contrast to central city patterns where grocery stores, and most other retail and public services were traditionally scattered throughout residential areas within walking distance (Gillham, 2002; Jones, 2000). Historically, seniors aged in these central areas, and they were able to walk to the diverse services that meet their daily needs. These mixed-uses in central areas have since experienced a loss of services and amenities, partly attributed to suburbanization.

Land use planning in suburban environments has not provided an aging population with ways of meeting its needs in the same way. Conventional zoning, as a land use tool, has maintained certain characteristics within a land use area. In suburban areas, these have included low residen-

tial densities and separation of use types. This necessitates automobile dependency, as well as planning that focuses on automobile use as the primary means of transportation (Litman, 2002).

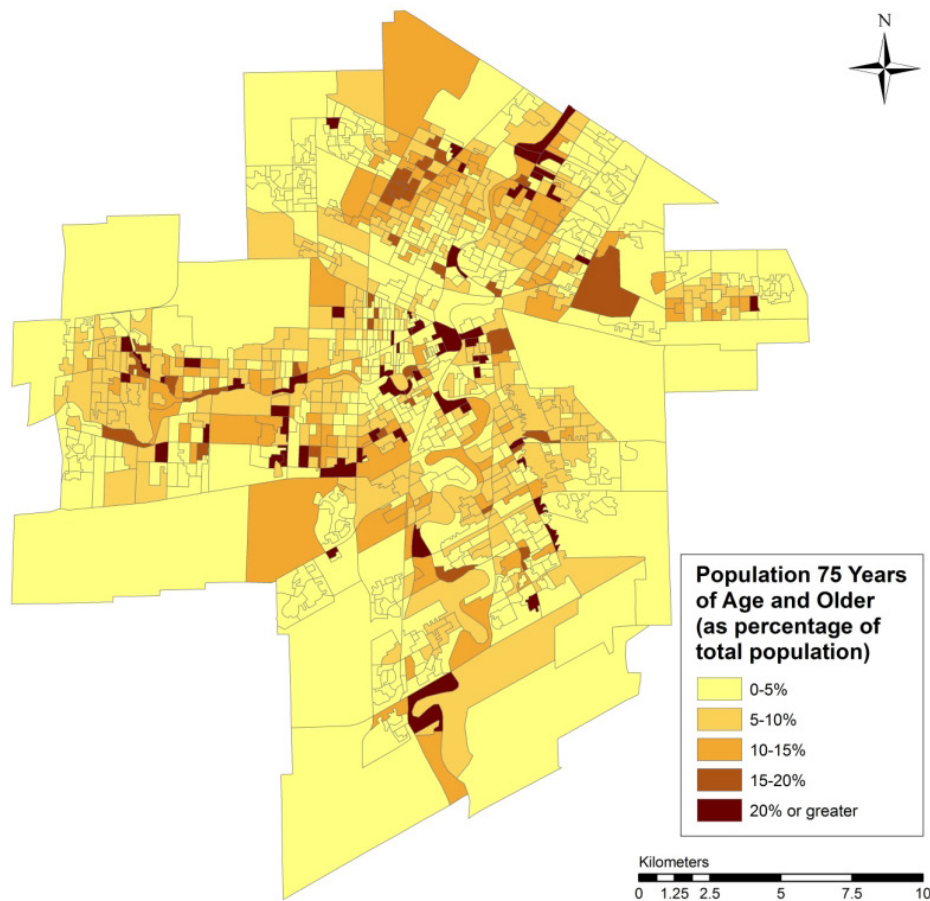
Although zoning has ensured that land uses have remained constant, this is counterproductive when it comes to the adaptation of neighbourhoods to an inevitably aging population. As neighbourhood populations age, the land uses and housing need to change: schools become underused or vacant and residents become over-housed. East (1992) argues that zoning and land use regulations have come to inhibit the ability of an aging population to meet its own needs (p.128).

Demographic Transition

Between 1981 and 2006 the population of Canadians aged 65 and older rose from 2.4 million to 4.3 million. During this time the proportion of older adults increased from 9.7 percent to 13.7 percent of the total Canadian population. This trend is expected to continue as the baby boomers age, making older adults the largest age cohort in our society. These changes are tied to more than just the aging of a population. Increases in life expectancy have led to lower death rates among the existing older adult population; the oldest seniors, those over 84 years of age, are growing in number faster than ever before, doubling between 1981 and 2006 (Hodge, 2008, p. 37).

In Manitoba this demographic transition is also occurring. According to Statistics Canada (2010a), 25 percent of Winnipeg's population is over the age of 55; this is consistent with the nation as a whole. The Seniors and Healthy Aging Secretariat (2005) projects that, by 2021, 33 percent of the provincial population will be over 55 years of age. As the population becomes increasingly older, some scholars expect that there will be a growing tension between the older and younger generations. In its simplest terms, this tension will be over younger generations hav-

FIGURE 1 Winnipeg Dissemination Areas, 2006



DATA SOURCE: Statistics Canada, 2006

SOURCE: Prepared by and used with permission from the Institute of Urban Studies

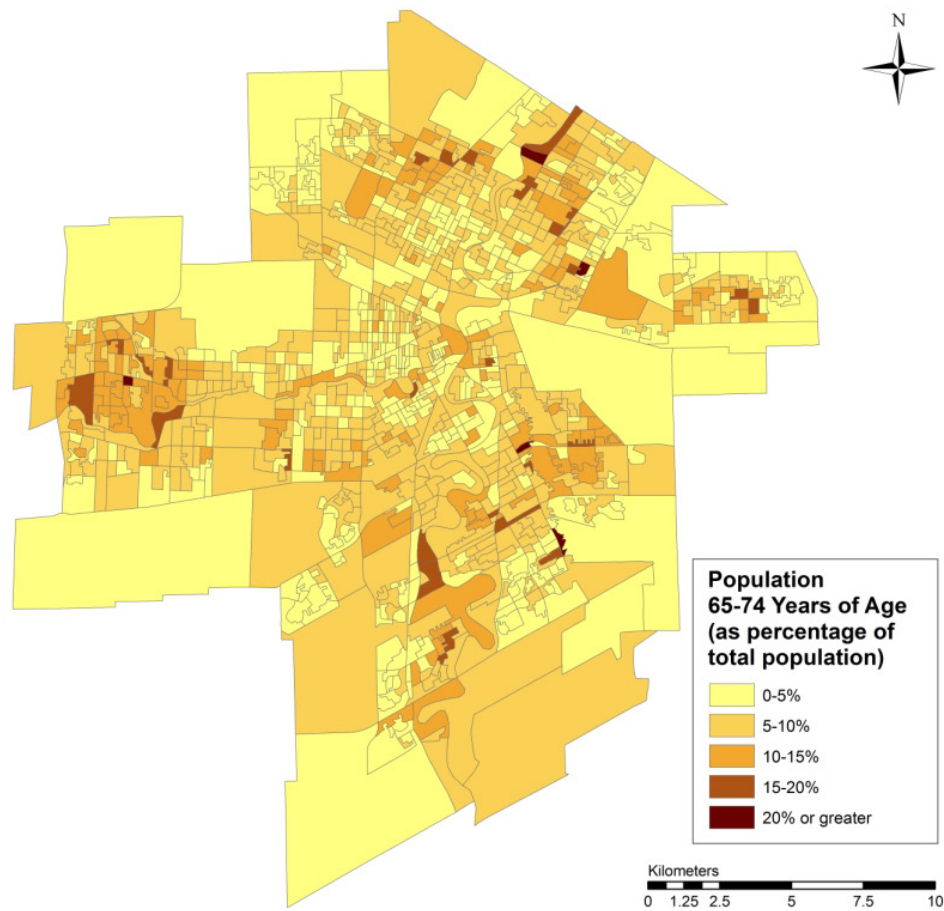
ing to make economic sacrifices to support the health and lifestyle choices of older generations (Tonn, Waidley, & Petrich, 2001).

This new surge of seniors will have characteristics that distinguish them from those of previous generations. The baby boomers will be “younger” older adults, healthier and living longer (Hodge, 2008, p. 173). It is also expected that baby boom seniors will be more financially stable and have different lifestyles (Silverstone, 1996). This demographic shift will require politicians and policy makers to rethink not only how we address older adults, but how cities are planned. The issues are not confined to aging and supporting older generations, but how cit-

ies can sustain the infrastructure, services and needs of dynamic population changes.

The values of the aging and suburban baby boomer populations are very different from those of previous generations. Previous generations of seniors aged largely in the central city, while increasingly the current and upcoming generations are suburbanites (Frey, 2001; Hall & Lee, 2010; Smith & Sylvestre, 2001). In Winnipeg this is illustrated most clearly with the population over 75 years of age (Figure 1); although many of this cohort resides downtown, there are also concentrations in areas such as North Kildonan, St. James, River Heights and St Norbert. In contrast, the 65-74 year old population (Figure

FIGURE 2 Winnipeg Dissemination Areas, 2006



DATA SOURCE: Statistics Canada, 2006

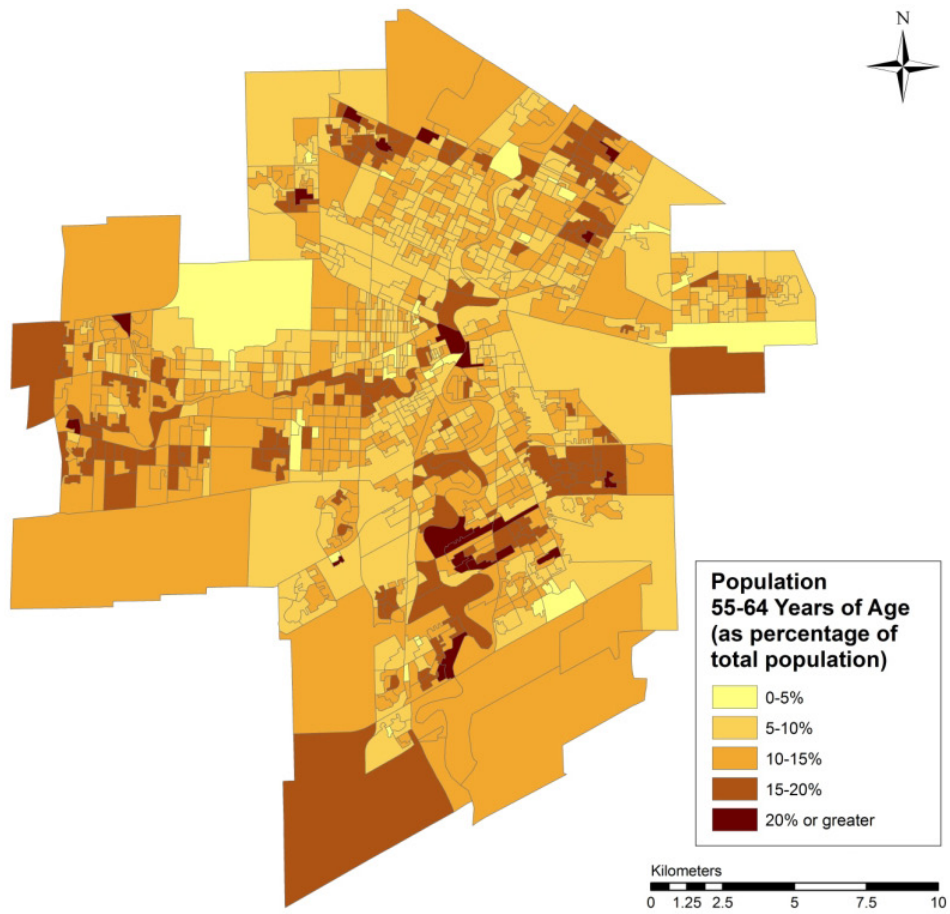
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TABLE 1 Older adult populations by region

Age Cohort	Winnipeg CMA % of population	City of Winnipeg % of population	Exurban Winnipeg (CMA, excluding City) % of population	Canada % of population
55 to 59	6.4	6.4	7	6.6
60 to 64	4.6	4.6	5.2	5
65 to 69	3.5	3.5	3.4	3.9
70 to 74	3.2	3.2	2.5	3.3
75 to 79	2.8	2.9	1.7	2.8
80 to 84	2.3	2.4	1.1	2
85 & over	2	2.1	0.9	1.7
Total over 55	24.8	25.2	21.8	25.3

DATA SOURCE: Statistics Canada, 2010a

FIGURE 3 Winnipeg Dissemination Areas, 2006



DATA SOURCE: Statistics Canada, 2006

SOURCE: Prepared by and used with permission from the Institute of Urban Studies

TABLE 2 Older adults by Winnipeg region as a percentage of the total population

Age Cohort	City of Winnipeg % of population	Downtown % of population	Inner City % of population	Non-inner City % of population
55-59	6.4	5.9	5.5	6.7
60-64	4.6	4.5	3.8	4.8
65-69	3.5	3.1	2.8	3.6
70-74	3.2	2.8	2.7	3.3
75-79	2.8	2.5	2.5	2.9
80-84	2.3	3.0	2.2	2.3
85+	1.7	2.2	2.0	1.6
TOTAL	24.5	24.1	21.5	25.2

DATA SOURCE: City of Winnipeg, 2009

2), is not as concentrated as those over 75, and largely resides outside the city centre, closer to the Perimeter Highway on the north, west and south of the city. Particularly striking is the location of adults 55-64 years of age (Figure 3). There are concentrations of this population in central Winnipeg, particularly in Downtown, St. Boniface, Point Douglas and River Heights, but the distribution is dominated by the suburban and fringe regions. This residential trend is worrisome if it continues to be the preference for this aging cohort.

These trends are quite apparent in Winnipeg (Table 1), and there are some noticeable patterns to consider for exurban municipalities just outside the city, like East St. Paul and Headingley, that accommodate commuters. Comparing the city of Winnipeg to the Winnipeg Census Metropolitan Area (CMA), the distribution of age groups is similar. However, excluding the city proper from the CMA (exurban Winnipeg for this discussion) shows differing distributions for baby boomers and the oldest adults. The percentage of exurban adults between 55 and 64 is higher than the city of Winnipeg and Canada.

Conversely, the percentage of older adults 70 years and over in exurban areas is much less than in the city and nation. This is particularly pronounced with adults over 80 years of age: the percentage of Winnipeg's exurban population over the age of 80 is less than half of what is seen in the city of Winnipeg, and only slightly more than half of the nation as a whole. This further illustrates a change in where the future older adults may reside. Currently, while many of the oldest of seniors may reside in the city itself, a higher proportion of the boomer generation simply does not.

Looking more specifically at where older adults live paints a clearer picture of Winnipeg's predicament (Table 2). As a percentage of the total population, older adults between 55 and 79 tend to live outside of the downtown and inner city neighbourhoods. That is, the proportion of these

cohorts is larger in the suburban regions, when compared to their counterparts in the downtown and inner city. That said, the very small downtown population has a high concentration of seniors 80 years of age and older. This is in part due to high-density seniors' residences, such as Lions Place and Lions Manor, housing the oldest of adults. As society continues to age in place, the prevalence of seniors in the inner city may decrease dramatically. If this occurs, the changes in the senior population's locality will provide many challenges to urban planning and policy makers. However, prior to addressing the changes presented by an aging population, it is critical to review the process of aging and its implications.

The Aging Process

Many people experience physical, sensory and cognitive changes as they age. These changes can include loss in sensation and perception of their environment, and can affect the activities of daily living (ADLs), employment or social activities. ADLs are of particular importance as they include the most basic activities, such as buying groceries, house cleaning, going to an appointment or simply climbing stairs in the home (Ferrucci, Giallauria & Guralnik, 2008). A common response to these changes is to lose confidence and discontinue regular activities, particularly those that are not absolutely necessary, such as social interaction.

Some older adults become overwhelmed by sensory stimulation. Trying to cross an intersection of busy traffic can be incredibly disorienting and confusing when quick decisions must be made. Vision and hearing can become less acute with age, in both the field of range as well as clarity, and this can heighten insecurity when crossing traffic. Aging can also have impacts on agility. Walking along uneven surfaces can become very dangerous, as can driving in busy traffic. Traffic signals are not usually timed or designed with

older adults in mind. Signals often change before a senior has been able to cross the road, or sometimes are not large or bright enough for an older driver to see in order to stop in time. Bad weather, especially snow and ice in the winter, can make both walking and driving even more difficult and sometimes dangerous (East, 1992, p. 29-30; Michael, Green & Farquhar, 2006).

In Lawton's *Ecological Theory of Aging* (1977), the physical environment presents older adults with obstacles or opportunities within their surroundings. An *environmental press* exists when the surrounding locale makes demands on behaviour. This can include walking conditions in winter, or having to walk up several flights of stairs to reach a destination. Each of these types of *environmental presses* forces older adults to make a choice of whether to go somewhere, or to avoid the journey. This can have a negative impact on ADLs and the maintenance of a healthy quality of life.

The changes in physical, sensory and cognitive functioning that are associated with aging can have impacts on every aspect of one's life. These declines do not necessarily happen to everyone, but are experienced by many, particularly with increasing age. When one's environment does not accommodate these changes, it often means ceasing activities and neglecting needs. This can result in increased isolation from society, and decreased health.

Isolation, Social Inclusion, and Health

There is a tendency to focus on the physical, sensory and cognitive changes that occur with age, but the social activities of an individual also contribute immensely to good health. The absence of active engagement in society can lead to degradation in physical health. Being socially active and avoiding isolation is essential for the older adult. Isolation and loneliness can have major negative health and psychological effects on older adults (Hawkey & Cacioppo, 2007).

In Manitoba, over one third of older adults is living alone and at risk of social isolation (Hodge, 2008, p. 46). Maintaining active engagement in society not only keeps one healthy, but also has additional positive effects. According to Bryant et al. (2002), older adults want to be actively involved in their communities and especially the political decisions that impact them. The authors cite research suggesting that the involvement of seniors in political decisions has a powerful effect on their quality of life and health.

There is some suggestion that inclusion and social involvement have other impacts. Older adults' community engagement, according to Leonard and Johansson (2008), contributes to lower crime and education dropout rates, as they have a positive influence on their neighbourhood. Seniors involved in political engagement, they argue, provide learning opportunities and socialization, increase productivity, spur economic spinoffs and affect the outcomes of policy, programming and service delivery. Additionally, volunteerism by the older adults is prominent in recreation, culture, sports, trade unions and social service.

The ability to be involved in society also contributes to independence. According to seniors, independence is largely related to the security of three key factors: health, income, and housing. Participation and integration into society are used as indicators of healthy aging and the overall health of a community (Keefe, Andrew, Fancey & Hall, 2006). In addition to these, transportation plays a very large role as it is related to health, income and housing, and can have either a positive or negative impact on each of these factors (Smith & Sylvestre, 2001).

Isolation and/or loss of independence can greatly affect older adults' health and quality of life, making these issues important when planning for an aging population. Ensuring that the physical and social environments that older adults inhabit are conducive to active engagement and independence will be paramount as this population grows.

Planning for Aging Populations

Environments for aging populations must not only address changes in their abilities and social needs, but also be responsive to lifestyles, preferences, as well cultural, recreational and service needs (McRae, 1988). Older adults report that their most important destinations are grocery stores, pharmacies, banks, doctors' offices, restaurants, post offices, churches, seniors' centres, and libraries. In addition to frequenting these amenities, visiting friends, taking walks, going to movies, watching sports and volunteering are cited as regular activities (Everard, 1999). Because aging baby boomers residing in suburban areas will likely age in place (Wright & Lund, 2000), the neighbourhoods where they live should have access to such opportunities, but suburban areas often do not.

Housing

The role of the home and housing in an older adult's life is significant, as it is the central location for many of their activities (Iwarsson et al., 2007). Housing presents a variety of challenges, mostly related to design, location and choice.

Adaptability, physical barriers in the home, and easy access to the outdoors are some of the

primary design concerns for people as they get older. These design issues are increasingly addressed with universal design (UD) and visitable (i.e. providing a basic level of accessibility) housing approaches. Typically when addressing accessibility, the building is adapted or retrofitted, providing specialized access. Universal design moves beyond adaption for accessibility; instead built environments, consumer products and communications technologies are designed for use by as many individuals as possible without costing more than traditional design techniques. Visitable housing approaches apply some of the UD strategies to residences, such as wheelchair access, but only address mobility limitations (Duncan, 2007). The use of UD and visitable housing can address design barriers experienced by many older adults.

Location is a critical component of housing for older adults. Housing location can connect or disconnect individuals from resources to meet their needs, and affects access to services, transportation, social and cultural activities, and other aspects that have impacts on their quality of life (Iwarsson et al., 2007). Planning for this population's housing must take into account their needs and circumstances.

However, providing these choices presents a challenge. Seniors are not a homogeneous group; they have a variety of preferences, needs, and incomes. The available options must be able to respond to these different characteristics, including location.

Most housing in which older adults age in place was never designed for the later stages of aging. Typically, it was designed for young families, and not surprisingly, does not address the variety of needs that an aging population requires. Addressing needs can be costly, as homes may require physical modification to address physical mobility limitations as they emerge. This is compounded by the fact that housing stock deteriorates over time and requires maintenance that may not be within the financial reach of many seniors. If seniors do move out of their aging or inappropriate homes to more manageable accommodation, the new locations may be in unfamiliar neighbourhoods, which can lead to a variety of stresses that negatively affects their health (Gilleard, Hyde & Higgs, 2007; Iwarsson et al., 2007).

Acknowledging the stresses that come with moving away from a place one is attached to, luxury residences and retirement communities are being developed for seniors, particularly for younger and more affluent older adults. These are often located alongside park-like recreational facilities, such as golf courses, and can also include some form of health services. Including health services is a valuable element, but in many of these communities, older adults remain segregated from all other services and supports. In order to gain access to groceries, or even visit friends, they require transportation to another region (Smith & Sylvestre, 2001). Duany, Plater-Zyberk, and Speck (2000) argue that once older adults lose their ability to drive, they become stranded, even prisoners, in the auto-dependent suburban landscapes (p. 122-124). They further assert that unless seniors are wealthy they will not have access to viable forms of transporta-

tion that allow them to access services located beyond their isolated enclaves.

Transportation is just as critical as housing, and is indeed interrelated with it. The same land-use regulations that govern housing affect transportation infrastructure as well.

Transportation

Accessible modes of transportation are critical to the vitality of the aging population because they allow access to a myriad of social, recreation and health services (Smith & Sylvestre, 2001), as well as community participation, inclusion and engagement (Dahan-Oliel, Mazer, Gélinas, Dobbs & Lefebvre, 2010). Conventional automobile transportation should be supplemented with appropriate and sufficient public transit and paratransit services. According to Hodge (2008), these forms of transit should accommodate a wide range of users including those with mobility impairments, limited financial resources and diverse usage patterns. Designing for accessibility of transit vehicles, routes, stops, and the pathways that lead to them should take into account the physical and cognitive changes of aging people.

Most seniors use automobiles (Dahan-Oliel et al., 2010); however, there are segments of the older adult population who cease driving for one reason or another, as well as those who have never driven. This latter group may include those who have low or limited incomes, as well as women who have depended on others for transportation. Suburban environments, created for automobile use, are simply not designed for pedestrians or the easy access of any other form of transportation. Those who do not drive are especially susceptible to isolation (Webber, Porter & Menec, 2010) and dependence on informal support networks (Smith & Sylvestre, 2001).

Walking, as a mode of transportation, is a safe and healthy form of exercise that can be immensely satisfying. The choice of older adults

to walk is related to a range of factors, including destinations. Common destinations include grocery or drug stores, parks, coffee shops, banks, churches, doctors' offices and seniors' centres. An early study by Smith (1984) examined the grocery shopping patterns of Winnipeg seniors in the central city, inner suburbs and outer suburbs. This study illustrated that over 50 percent of outer suburban seniors never walk to grocery stores, while 80 percent of central city older adults walk for groceries at least some of the time. Although this study is almost 30 years old, it illustrates the impact of the built environment on transportation patterns of older adults trying to meet their most basic needs.

Choosing to walk to these destinations relates closely to other factors such as attractiveness of the route and path conditions. The aesthetic appeal of a walking route will be a factor on determining how appealing a walk will be, particularly with longer trips. The conditions of the pedestrian environment are also important. These conditions include the gradient of the pathway, state of the walking surface, traffic, weather, time of day, and fear for personal safety, especially falling (Hodge, 2008, p. 117-119). Infrastructure, such as well designed, routed and maintained sidewalks are critical for senior-friendly pedestrian environments. Yet most outer suburbs and the suburban fringe have partial to no sidewalk infrastructure. Typically the further from the city centre a neighbourhood, the scarcer sidewalk infrastructure will be (Hodge, 1994).

Support Services

Older adults may receive a range of supports that include a wide spectrum of services addressing the varying needs people may have as they age. These are provided by formal public, non-profit and private services, and predominantly, informal supports from friends and family. Where supports are formally provided, they should be especially mindful of the different degrees of mobility that older adults may have. This may mean that transportation to these services is provided, as coordination of transportation between service providers is absolutely essential, particularly with informal family supports (Hodge, 2008, p. 27-28).

As the baby boom generation continues to age, the oldest age cohorts are expected to have significantly less, if any, support from family. At the same time, it is expected that older adults will significantly increase the demand for health care services. This is not just tied to the increasing numbers of aging adults using health care, but to the fact that retiring and affluent baby boomers are increasingly willing to pay for services (Tonn, Waidley, & Petrich, 2001).

Services that are wanted and needed by older adults should be accessible and close to where they live (East, 1992, p. 31). The majority of the senior-serving organizations and facilities are not located in suburban areas, but in the central city where seniors have historically lived. Providing these services in suburban areas is not easily replicable as the densities are much lower, and transit does not have the same efficiency as the central city (Gillham, 2002, p. 208).

Existing Policies

The previous sections outlined the process that occurs as people age, as well as the basic needs for appropriate housing. Mobility and access to transportation were also addressed, which are required for drawing on the essential supports and activities that maintain a healthy and engaged lifestyle. The absence of these elements can lead to isolation and deterioration of quality of life. Existing suburban development patterns are highly problematic given the expected demographic expansion of older adults.

In an attempt to address these challenges with the surge in the senior population, the Province of Manitoba and other organizations are developing strategies and frameworks to acknowledge the housing, transportation and service needs of an aging population. However, they generally fail to provide any real solutions for these needs in the suburban landscape. It is clear that there is an understanding and acknowledgment of the issues related to an aging population. However, the policies and approaches that exist fall short in that they do not accomplish much outside of raising awareness with groups that are already engaged with the older adult community. A brief examination of some of these policy level responses will illustrate how they fail.

Aging In Place

The Province of Manitoba's Seniors and Healthy Aging Secretariat (SHAS), adopted an aging-in-place strategic approach that identified key areas of importance, including a focus on health care, community living and security. The aging-in-place and long-term care approaches are linked with each other, providing support services to seniors so they can live independently longer (Manitoba Health, n.d.).

Aging in place, as an approach, grew out of awareness that older adults are less mobile, and that remaining in one's home helps maintain health due to place attachment and a sense of security. Even when older adults do move into a new home, it tends to be within the same neighbourhood. Hodge (2008) notes that when a move is into a completely different area, aging in place also occurs, as the intent is to remain in the new home permanently (p. 227-229). Aging in place promotes and plans for older adults to remain in their homes for as long as possible.

On one hand, aging in place is a wise and prudent policy approach for maintaining the healthiest environment for adults as they age. On the other hand, given that many seniors and soon-to-be seniors are living in suburban regions,

aging in place will pose some serious problems. This will be most pronounced when considering the delivery of services and providing transportation, as when working to ensure that older adults can carry out their ADLs. In short, while the aging-in-place approach does support the social and physical health of older adults who are living in suburban areas, existing land use patterns and infrastructure do not easily accommodate aging-in-place policies. If policy makers continue to embrace aging in place without providing meaningful resources to address land use and infrastructure, service delivery will be financially unsustainable.

Advancing Age

The Manitoba Government's senior strategy "Advancing Age: Promoting Older Manitobans", developed by SHAS, was designed to ensure the province is prepared for the needs of a growing aging population. Wide in scope and reach, Advancing Age extends across senior communities and involves many government departments. The strategy covers a broad spectrum of issues, but can be illustrated through three key areas: health care, community living and security (SHAS, 2005). This strategy largely focuses on network and relationship building, with the intent of having a wider body informing government policy.

Community living, as a thematic area of the Advancing Age strategy, includes a variety of issues such as housing and transportation. Housing should be affordable and adequate, and be available in rural and remote areas. Transportation, similarly, must be affordable and accessible, and be appropriate for pedestrians who are older adults. One of the most tangible elements of Advancing Age was the funding it provided to senior serving organizations (e.g. groups such as Age and Opportunity received financial support for bus transportation shuttles (SHAS, 2005)). This type of support attempts to

address the challenges that older adults can have with getting around. However, change should be systemic and not limited to short term funding. Providing regular and ongoing access to shuttles would be a more concrete response.

Other organizations, such as Creative Retirement, and the Manitoba Society of Seniors receive provincial support with capacity building exercises (SHAS, 2005). Although strengthening capacity within senior-based organizations is valuable, it does not consider the future challenges. Rather, Advancing Age maintains the status quo by being within reach of the segment of the senior population that is already active and engaged.

The Advancing Age strategy acknowledges the importance of preventing isolation, exclusion and marginalization of the senior population (SHAS, 2005), although it is unclear how it hopes to achieve this given trends in residential preferences and the suburban landscape. Advancing Age as a strategy lacks any real substance. Although it pays lip service to the issues related to an aging society through its network of partners, it does little to actually plan for the expected population shift.

Age-friendly

Age-friendly cities is an approach promoted by the World Health Organization (WHO) that uses active aging as a means of making cities more inclusive and appropriate for an aging population. This method seeks to improve the health of people as they age, while ensuring safety, security and active engagement in society (2007). Manitoba's age-friendly focus is interested in promoting healthy aging, a policy focus that predates the age-friendly strategy, having been simply embedded into the new approach (SHAS, 2008).

Manitoba's age-friendly approach focuses on adapting existing physical and social services to be more responsive and inclusive to older adults. However, the Province's response to the

age-friendly model appears to be little more than providing a checklist for municipalities to carry out age-friendly audits and self evaluations. Portage la Prairie was one of two Canadian municipalities examined for the WHO report on age-friendly cities (2007). The report showed that the barriers to age-friendliness outnumbered the local age-friendly features (Menec, Button, Blandford and Morris-Oswald, 2007). The primary barriers were related to housing, transportation, social services and infrastructure. Since receiving this report, Portage la Prairie embraced the age-friendly ideology and has developed an Age-Friendly Cities Advisory Committee to advise the local city council on age-friendly priorities (City of Portage la Prairie, 2010).

There are some municipalities, such as Pinawa, that have embraced the age-friendly approach at the community and government level. In these types of cases, it is successful as an awareness-raising campaign. SHAS consultations with the Pinawa community resulted in the identification of local priorities that had political traction. The buy-in from the local Age-Friendly Committee and City Council has led to action on local priorities and service needs (Sheppard, 2009).

Age-Friendly Manitoba's means of promoting this initiative is just that — promotion. Age-friendliness, in many communities, appears to be nothing more than a branding campaign. Age-Friendly Manitoba doesn't actually provide any meaningful support for communities to become more age-friendly; they simply recycle other agencies' guides and toolkits, and attach the Age-Friendly title to existing programs and partnerships.

Auditing age-friendly features can be a powerful tool, but many of the features that make a community age-friendly are based on land uses, transportation and social service infrastructure. A community that participates in the age-friendly program is certainly becoming more informed through their local audits, but the question is whether they can do anything about it. Unfortunately, local governments have limited financial resources, and major infrastructure adaptations risk falling to the wayside in favour of more affordable or short-term political goals. As useful as it is, adding park benches alone does not make a community friendlier to older adults in any significant way. Although these are important first steps, the Province's interpretation of the age-friendly approach does not offer significant supports or meaningful resources for addressing the barriers that seniors face in their physical environments.

Each of these policies presents a valuable view of what can be done to address the looming needs that will be created by this demographic change. Unfortunately, none of these approaches actually accomplish the changes that are required. The Province is merely supporting community level information, awareness and rudimentary service supports. There appears to be very little effort to work with the municipal governments to address the planning-related aspects at the heart of the issue. Unless the Province is effectively collaborating with local planning departments to prepare for the demographic shift, change is unlikely to happen. How can current land use schemes enable individuals to age in place, while maintaining active, healthy lifestyles and meeting their social and physical needs?

“In a well-designed neighborhood unit, the aged should be able to go to any part of it, including the shopping area, the library, the church, the community centre, without crossing a traffic artery; indeed, without, if possible, climbing a step.”
— Mumford, 1968, p. 50

Recommendations

Indeed, this is the real challenge — how do we provide older adults with the services they need within walking distance and in the neighbourhoods where they choose to reside, which are increasingly suburban? Hodge (2008) argues that any urban planning for an aging population must consider the impact aging in place has on housing, as well as the relationship of auto dependence with mobility and safety (p. 222). This may seem like a simple challenge to address, but when one considers the explosive growth of the seniors’ demographic and the facile provincial policies in place to address the municipal realm, a monumental crisis emerges.

Address Suburban Sustainability

There are a few key roles that governments can play when planning for an aging population. Perhaps the most important one will be to respond to the suburban lifestyle in a way that does not continue to degrade the environment. Tonn, Waidley, and Petrich (2001) suggest that new developments focus on compact mixed land uses adjacent to natural areas. Wright and Lund (2000) argue that sustainability is one of the principles that should guide planning and development for aging populations in gateway or retirement

communities. They consider this particularly important in areas where there is high population growth from migration of older adults.

Apply Appropriate Principles of New Urbanism

New Urbanism and its variations offer an alternative development and planning approach to traditional suburbs. The principles of this approach include mixing land uses, with commercial and office uses alongside residences, allowing for pedestrian-oriented environments that are scaled for to accommodate mass transit as well as automobiles (Duany, Plater-Zyberk, & Speck, 2000, p. 254). This marriage of land uses means that there are people in the area for more hours of the day. The higher density built form can make public transportation more efficient, and allow services to be located within walking distance from housing. This planning approach values green spaces, and is typically designed with families, children and seniors in mind (Roseland, 2005, p. 139).

Although New Urbanism has many merits with its highly compact approach, it is not necessarily appropriate for seniors. Typically the compact design involves many steps, stairs and

narrow walkways that can reduce the accessibility of environments for many older adults (Hodge, 2008, p. 272-273). This is where universal design and visitable housing approaches become valuable. A New Urbanist approach that embraces UD, or at the very least requires a significant percentage of housing to be visitable, can ameliorate this shortcoming in new developments.

Facilitate Livable Communities

Other planning approaches, such as “livable communities,” can be used to complement New Urbanism. Livable communities, according to AARP (2005), have a variety of features including: direct and meaningful involvement from people of all ages; appropriate design and modification of homes for older adults; affordable and diverse housing options; safe and inclusive design for all ages; provision of opportunities for seniors to continue driving; and improved mobility and accessibility. According to Howe (2004), the development of senior-inclusive communities can do more to address the needs of all members of the community regardless of age. One of the remarkable things about the livable community lens is that it is not age specific, but acknowledges the range of needs of all people.

In a discussion paper from Manitoba Local Government (formerly Intergovernmental Affairs; 2010), the notion of livable communities is tied to mixed-use development. That is, livable communities and mixed-use neighbourhoods are considered interchangeable terms. Manitoba Local Government appears to be proposing a livable community model (albeit oversimplified) for the Winnipeg Capital Region. If the Province wants to move forward with this model, the real challenge will be to have it adopted by developers and planning departments.

Increase Mixed Housing Options

Perhaps one of the more important variables that should be considered with aging in place, accord-

ing to Hodge (2008), is the relationship between supports and housing (p.229). These supports must be planned and administered on a community-by-community basis, so needs are appropriately met while ensuring safety and security.

In addition to broad-based planning models, a variety of housing types must be embedded in land use regulations. Permitting non-traditional housing, such as “granny flats”, multiple-family and supportive housing, could provide more appropriate options (Hodge, 2008, p. 263-269; East, 1992, p. 132). Granny flats and accessory suites refer to a secondary basic housing unit on an existing property, often converted from a garage for an aging parent, or existing within the residential home as a separate suite.

The provision of supportive housing is another valuable option. Supports, often facilitated by a personal assistant, allow individuals to live independently with dignity, while ensuring that their needs are being met and they have the support for their activities of daily living (Owen & Watters, 2005). Supportive housing refers to a wide range of housing forms, including planned-care environments, which disperse the services that would normally be found in long-term care facilities into the surrounding community. This approach focuses on community engagement and social relationships, and counters the institutional seniors’ home model, while ensuring services are available (Cannuscio, Block & Kawachi, 2003).

Each of these methods provides alternative forms of seniors’ housing, but requires a more flexible approach to zoning, allowing for uses beyond the conventional single-family dwelling. Okotoks, an exurban town outside Calgary, is already doing this. The Town, as part of its development plan, requires 30 percent of housing to be non-traditional, ensuring different forms of housing are mixed into the residential landscape (Town of Okotoks, n.d.). It is essential that mixed housing is also affordable to mixed incomes, especially for older adults with limited incomes.

Improve Pedestrian Environment

Walking in the suburbs, even with nearby destinations, can be difficult for older adults; sidewalks, where they exist, are typically disconnected from each other. The overall land use patterns and winding streets have negative impacts on older adults' mobility. There are a variety of strategies that could address aging populations in the suburban environment. These include improving sidewalk conditions and connections, and designing them to be appropriate for seniors and those requiring mobility aids, such as walkers, wheelchairs or canes. Pathways should be comfortable and safe, providing plentiful benches and resting areas. Connectivity between community facilities and services should also be addressed, ensuring that existing and new subdivisions are suitable pedestrian environments.

Provide Flexible Transportation

The need for appropriate public transportation vehicles and routes is related to the pedestrian environment. Unless population densities increase, it is unlikely that mass transit will accommodate suburban residential areas. That said, there are ways that senior-oriented condominium apartment developments and higher density dwellings could be serviced by transit.

A private report from the Transportation Options Network for Seniors (TONS) examined Winnipeg's Dial-a-Ride-Transit (DART) service (2009). The DART service, running in four neighbourhoods (St. Boniface, St. Norbert, St. Amant and Southdale), is a demand-responsive bus service providing curbside pick-ups usually during off-peak hours. In St. Boniface, a higher density neighbourhood with a high proportion of seniors, the DART service offers flexible transportation to destinations such as nearby health services or grocery stores. The St. Boniface DART is different from the other three neighbourhoods, uniquely operating during peak hours. It also provides more than conventional feeder service,

offering flexible transportation to destinations such as nearby health services or grocery stores. The TONS report (2009) noted that expanded use of this service requires increased funding and cannot be universally replicated; efficient use is dependent on key neighbourhood characteristics, such as density, ridership, and street design.

The Edmonton Transit System (ETS) has begun using community buses, a slightly different approach than Winnipeg's DART. These are smaller buses that would typically be used for emerging neighbourhoods that do not warrant full transit service (Edmonton Transit System, 2010). Community bus routes are specifically designed for the senior population. Destinations include shopping malls and services of interest to older adults; operation times tend to be during off-peak hours when seniors use transit more often. Community buses are more cost effective than most transit service shuttles and are highly used by the older adult population (M. Dorey, personal communication, February 18, 2009).

Readapt Underused Facilities

Readapting community facilities in aging suburban neighbourhoods could provide a solution to some of the challenges experienced by older adults. Re-using schools or community centres for a mix of uses has a lot of potential. Uses could include supportive housing, health support services, a leisure centre, a post office or a grocery store. East (1992) suggests turning these central structures into a small town centre hub. She believes this could allow for a myriad of public and private services for the surrounding community (East 1992, p. 140).

Embrace Flexible Zoning

Zoning should promote mixed-use, mixed-income development, allowing for a variety of smaller shopping and services in walk-able locations scattered throughout suburbia. Com-

FIGURE 4 Portage and Main pedestrian barricades



SOURCE: © 2011 Bryan Scott

pact neighbourhoods should provide pedestrian access to every community facility or service and be coordinated with public transit to keep transportation, shopping and services affordable (AARP, 2005). This combination of mixed use zoning, increased densities and alternative transportation modes can reduce auto dependency (Litman, 2002).

Make Living Downtown Affordable

Each of the aforementioned recommendations is aimed at adapting the suburban landscape to be more appropriate for an aging population. This certainly responds to the preferences of the coming generation of seniors. However, a larger

issue involves ensuring that the downtown has appropriate housing and services for older adults. Despite the decline in services in Winnipeg's city core, there are large numbers of older adults currently living downtown. Where services do exist, access is not necessarily within walk-able distances. That said, there is great potential for further residential living for aging adults in the central city. Centre Venture (2010) boasts of the boom of high-end condominium housing available downtown, such as Waterfront Drive, despite a lack of nearby amenities like grocery stores.

This form of housing, albeit expensive luxury residences, does provide an attractive option for affluent older adults who want a walk-able urban experience, but still plan on driving for

FIGURE 5 Portage Avenue, hostile to pedestrians, dividing high density seniors' housing



SOURCE: © 2010 Bryan Scott

most amenities. Unfortunately many older adults do not have the financial resources to purchase premium housing; ensuring a range of affordable housing options for seniors is needed. Fortunately there is substantial developable land (in the form of surface parking lots) for a range of mixed-income housing and complementary services.

Improve Downtown Walkability

If the City of Winnipeg is serious about increasing residential life downtown, it must consider the absence of essential services, as well as the walk-ability of neighbourhoods. Opening up Portage and Main for pedestrian traffic would be a powerful and highly symbolic gesture towards walk-ability in the downtown area (see Fig. 4). Further, making road crossings safer on busy

Portage Avenue would make the lives of many seniors easier and less stressful (see Fig. 5). Compare the experience of crossing Provencher (see Fig. 6) or Broadway to Portage. The latter has no median greenspace or benches for resting. A break in the trees with seating makes crossing traffic far less intimidating for older adults and other pedestrians.

Looking at the larger picture, most of these recommendations are based on land use policies, the built form and the role of prudent planning. If Winnipeg or the surrounding municipalities are seriously going to plan for an aging population, they must have support and oversight from the Province. Manitoba's municipal development patterns are not adapting to the aging population, largely due to inadequate financial resources. Each of the existing provincial policies related to aging does very little to address these

FIGURE 6 Pedestrian oriented Provencher Blvd with benches and a landscaped median



SOURCE: © 2008 Bryan Scott

issues. Preparing for an aging population is not simply a health issue, it is also a planning issue. Although the Seniors and Healthy Aging Secretariat and Manitoba Health have experience with the aging population, more players are needed to address aging in our cities.

Manitoba Local Government's Provincial Land Use Policies play a key role in bridging the gap between aging strategies and municipal planning. Winnipeg and other municipalities need this support through strong guidance and sustained targeted funding for specific municipal projects to support the local direction of community priorities. Ensuring that the resources exist for land uses to change is critical for success.

Politicians and policy makers are in a position to endorse and enable city planners to focus on addressing key areas. Housing, transportation and community support are well understood

to be some of the most important factors that can be addressed by policy makers. Integrating these three factors with each other in a holistic manner, where they mutually support each other ensures that the spectrum of needs can be met (Hodge, 2008, p. 207).

Recognizing that older adults will likely choose to reside in suburban areas certainly raises a range of problems. The low population density means that service delivery will be inefficient. The Province needs to shift away from a solely information- and health-based approach to aging. The addition of strong land use oversight and targeted funding is needed to facilitate municipal action. Zoning must promote increased density and appropriate housing options. Ensuring physical accessibility, appropriate public transportation, and encouraging mixed land uses can alleviate these stresses. Further, mixed-use de-

velopments can facilitate more walk-able communities, shifting away from the auto dependence of most suburban developments. Adaptive re-use of underused suburban infrastructure can also create meaningful places for the community.

The suburban form does not need to be characterized by auto dependence and isolated hous-

ing. Land use planning, if used thoughtfully with strong leadership from the provincial government, can provide powerful tools for changing the suburban landscape for seniors who wish to live there. These approaches can do more than merely make cities better places for older adults, but for people of all ages.

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