Imagining age-friendly communities within communities: International promising practices

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Care Watch is proud to collaborate on this international, seven-year project funded by the Social Sciences and Humanities Research Council (SSHRC). The project builds on the World Health Organization's (WHO) "Age-Friendly Communities" global initiative.

The project will address critical knowledge gaps identified by the World Health Organization (WHO), including how culture and gender matter in creating age-friendly cities. The goal is to enhance the effectiveness of age-friendly practices in light of demographic shifts associated with both population ageing and diversity.

Led by Dr. Tamara Daly of York University, the team of researchers will:

- **Ask**: *How can age-friendliness support conditions in which all senior citizens not only maintain healthy active lives, but can participate and create meaning in later life?* Promising practices in ageing focuses on "adding life to years", and rejects so-called apocalyptic notions of population ageing. The age-friendly strategy operates at the city-community level with a one-size-fits-all approach. Attention to "communities within communities" across 7 cities in Canada and 5 others in Denmark, Norway, Australia, New Zealand and Taiwan guide us to account for differences in ageing.

- **Investigate** how inequalities and differences between and among women, men and non-binary people play out in seniors' lives and policy assumptions. Our approach to culture assumes diversities due to global migrations; imperatives for Truth and Reconciliation with indigenous peoples; intra-cultural gender roles; and rich community cultures among people with disabilities and LGBTIQ2S groups, which affect what it means to grow old with dignity and respect.

- **Investigate** what makes age-friendly communities promising places with "promising practices" for women, men and non-binary people; those living in poverty; LGBTIQ2S, ethno-racial, indigenous, disability and Dementia communities; families who require specific supports and services; and those who support seniors, especially migrants and domestic carers, who are aging on the job. We

recognize that seniors are a mobile population, moving across neighbourhoods and the globe for many reasons, from fleeing persecution to downsizing.

The international comparative methods incorporate ethnographic, survey, policy network, social work, cultural studies and arts-based methods, and will unfold over a seven-year period in communities in Canada, Australia, New Zealand, Denmark, Norway and Taiwan.

Twelve international city case sites have been selected for their diversity and their age-friendly initiatives. Seven Canadian Cities: Toronto, Ottawa, Halifax, Yellowknife, Lethbridge, Victoria and Montreal. Five International Cities are: Bergen, Copenhagen, Melbourne, Auckland, and Taipei.

Themes:

I.   Policies and Systems

What social, political and economic policies and systems best integrate and coordinate to meet needs and balance the rights of diverse groups of aging individuals, the spectrum of paid and unpaid carers, and broader communities across the case sites? How are gender and culture implicated? How is accountability for services that address diversity enacted? How, and to whom, are policy and decision-makers held accountable?

II.   Environments, Designs and Technologies

What universal and technological design elements are feasible, desirable and equitable for aging individuals and their carers, while encouraging and supporting inclusive social citizenship? How are gender and culture implicated? What type(s) of "community" are imagined through supports and technologies that aim to keep seniors at home? How does technology impact community, relational and leisure space for aging?

III.   Approaches to Aging

What philosophical, cultural and gendered approaches to aging are most promising for individuals, families, and the spectrum of carers across communities? What are the pathways, choices and conditions available to people ageing in different communities? How are intergenerational knowledges and stories impacted by being in urban spaces — off 'the land'? How does the elasticity of space, contraction of space, and stretching of space impact families separated by distances and those forced to leave or relocate to urban environments? Who gets to be old, when and where? How are aging experiences shaped by intersecting forms of privilege?

IV.   Care Relationships: Conditions and Quality

What practices show promise in ameliorating living and working conditions to affect experiences of quality of life, work and care for aging individuals, as well as the range of paid/unpaid carers across settings? How do gender and notions of feminized work shape who does what? How can we understand the roles of multi-generational families and impacts of migration? How do people navigate transitions in spaces (home, community, institution) and places (jurisdictions)? How is quality care for seniors defined? How is age-friendliness impacted by permanent and temporary in-migration in later age? How do migrant care workers experience age-friendliness? How can we better understand safe spaces in aging and risk? What is 'active' aging in context? How do age-friendly initiatives address institutionalized and criminalized populations?

Project Director:
Dr. Tamara Daly, York University, dalyt@yorku.ca

🌐   https://imagine-aging.ca/

✉   agequity@yorku.ca

🐦   @Imagine_Aging