

# A Research & Evaluation Framework for Age-friendly Cities

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# A Research & Evaluation Framework for **Age-friendly** Cities

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# Foreword

## An Introduction to Age-friendly Communities\*

Professor Chris Phillipson  
University of Manchester

\* For a more detailed discussion on some of the themes in this Foreword see C. Phillipson, 'Developing Age-Friendly Communities: New Approaches to Growing Old in Urban Environments' in R. Settersten and J. Angel, eds., *Handbook of Sociology of Aging* (New York: Springer, 2011).

### *An Introduction to Age-friendly Communities*

Developing what has come to be termed 'Age-friendly' communities has become a significant dimension of work with older people. The reasons for this include: the complexity of demographic change, with the emergence of a wide spectrum of housing and community needs amongst those in the 50 plus age group; a growing awareness of the importance of the physical and social environment in ensuring security and support in later life; and ongoing policy debates about what constitutes 'good' or 'optimal' places to age.

The 'Age-friendly' agenda is especially important to consider in an urban context, given the variety of pressures facing cities in the Global North and South.

*By 2030, two-thirds of the world's population will be residing in cities; by that time the major urban areas of the developed world will have 25 per cent or more of their populations' people aged 60 and over.*

In the case of the UK, city regions will need to plan ahead both for an ageing population but also for one with larger numbers entering their late-70s, 80s and beyond.

To what extent cities in the future will develop as 'Age-friendly' communities remains to be seen. Cities produce advantages for older people in respect of access to services, provision of cultural and leisure facilities, shopping and general necessities for daily living. However, they may also be perceived as threatening environments, often creating insecurity and feelings of vulnerability arising from changes to neighbourhoods and communities.

### The Evolving History of Age-friendly Communities

The Age-friendly approach has proved helpful in thinking about how best to improve the lives of older people 'ageing in place' in urban environments. Debates about how best to secure this goal emerged from a number of policy developments during the 1990s/early-2000s.

The theme of 'Age-friendly communities' stemmed initially from policy initiatives launched by the World Health Organization (WHO). A precursor was the notion of 'active ageing' developed during the United Nations' *Year of Older People* in 1999 and elaborated by the European Union (1999) and the WHO (2002).<sup>1</sup> The idea of maintaining 'active' ageing referred to the notion of older people's '**continuing participation in social, economic, cultural, spiritual and civic affairs**, not just the ability to be physically active or to participate in the labour market'.<sup>2</sup> Achieving this was seen as requiring interventions at different levels, including maintaining effective supports within the physical and built environment. Here, the WHO acknowledged that:

*'Physical environments that are Age-friendly can make the difference between independence and dependence for all individuals but are of particular importance for those growing older. For example, older people who live in an unsafe environment or areas with multiple physical barriers are less likely to get out and therefore more prone to isolation, depression, reduced fitness and increased mobility problems'.<sup>3</sup>*

The idea of Age-friendly environments was subsequently applied to urban contexts, with work beginning in 2005 around the theme of 'Global Age-friendly Cities'. Subsequent work by the WHO, based upon focus groups with older people, caregivers and service providers, produced a guide and checklist of action

points designed to assist improvements in eight interacting aspects of city life: *Outdoor Spaces and Buildings, Transportation, Housing, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Communication and Information, Community Support and Health Services*.<sup>4</sup>

The WHO guidelines adopted the position that:

*'It should be normal in an Age-friendly City for the natural and built environment to anticipate users with different capacities instead of designing for the mythical 'average' (i.e. young) person. An Age-friendly City emphasises enablement rather than disablement; it is friendly for all ages and not just "elder-friendly".<sup>5</sup>*

Following the publication of these guidelines, the WHO launched the 'Global Network of Age-friendly Cities' in 2010 in an attempt to widen interest in the Age-friendly theme as well as encourage implementation of its guidelines. By 2014, some 140 cities and communities were participating in the Network, drawn from over 30 countries across the world.

### The UK Urban Ageing Consortium

In the UK, reflecting the growth of interest in Age-friendly issues, the UK Urban Ageing Consortium was formed (in 2012), a collaboration between the Beth Johnson Foundation, Keele University, the University of Manchester, and Manchester City Council – Manchester having been a founding member of the WHO Global Network. Committed to advancing practice and debate on Age-friendly issues, the aims of the Consortium include:

- > developing a strong research and evidence basis to inform work around Age-friendly issues

- > developing a WHO-affiliated 'UK Network of Age-friendly Cities' working on the Age-friendly theme
- > encouraging private, public and third sector partnerships of groups working to improve the quality of life of people living in urban environments
- > influencing the development of local, regional, national and European policies on Age-friendly issues.

#### A Research and Evaluation Framework for Age-friendly Cities

This *Research and Evaluation Framework for Age-friendly Cities* represents a significant step forward in delivering on the aim of improving knowledge of the evidence base for those seeking to implement Age-friendly policies. Using the WHO domains as a framework, it provides a comprehensive guide to the latest research in each area, as well as a summary of toolkits and resources to aid policy-makers and practitioners in developing their work.

This *Research and Evaluation Framework* will, it is anticipated, undergo further development, as those working with the document provide feedback based on their experience with the document in a range of urban environments.

Developing cities which meet the interests of all generations remains an important goal for economic and social policy. The future of communities across the world will in large part be determined by the response made to achieving a higher quality of life for their older citizens. A crucial part of this response must lie in creating supportive environments providing access to a range of facilities and services. However, the research and policy agenda will need to change in significant ways if this is to be realised.

At present, there is a substantial gap between the aspiration to produce Age-friendly environments and their realisation at a local



The future of communities across the world will in large part be **determined by the response** made to achieving a higher quality of life for their older citizens'

and regional level. A gap borne of: problems in influencing urban policy, especially as regards regeneration and planning; lack of awareness of Age-friendly issues among key professional groups; a perception that older people are marginal to the economic interests of cities; and limited understanding of the impact of negative urban change on the quality of daily living in later life.

The above factors underline the importance of producing a document such as this *Research and Evaluation Framework*.

**Age-friendly cities will only evolve through integration of the latest research and a critical approach to issues facing older people in their environments.**

The reality is that many groups within the older population feel largely excluded from the ambitious plans produced by cities competing in the global marketplace. Most cities will, in the next decade, have within or around their urban core one in four of their populations aged 60 and over. Creating 'Age-friendly' cities has, in consequence, become a significant challenge for all aspects of urban design, management and organisation.

Developing new policies and approaches to involving older people in the social and economic life of cities will be a crucial task for urban development in the years ahead. Drawing on the research brought together in the *Research and Evaluation Framework*, this document provides a major contribution to this process.

# Preface

## Why you should use this Framework

Paul McGarry  
Age-Friendly Manchester (Manchester City Council)

### Why you should use this Framework

Probably, like you, I have a cupboard of documents collected over the years that I seek out whenever I need 'evidence' or just a good argument for investing time and/or money in a particular piece of work. More recently Google has started doing the job well enough and the cupboard has become a Naturally Occurring Retirement Community for important reports on ageing. But how to make sense of the six million potential documents? There are various repositories of knowledge if you know where they are and can find your way around them. And some great websites (Age-friendly NYC take a bow).<sup>1</sup>

*However, if someone offered you a set of closely-argued, expertly-referenced and well-written documents that set out the latest evidence, and, a framework for you to use in your ageing plans and programmes? Snap their hand off I hope. So that's what's on offer here.*

Like many others involved in this work the aim of creating, or perhaps, re-creating expertise, capacity and infrastructure for Age-friendly Cities, is the goal. To put this aim in context we need to take a quick detour through recent history. Since the launch of Better Government for Older People in the late 90s, there has been a procession of initiatives aimed at enabling local authorities to develop strategies for – and sometimes with – their ageing populations that aimed at going beyond seeing older people as recipients of health and care services.

Space is too tight to mention them all, or even half of them, but suffice to say that these programmes represented significant financial investment, the mobilisation of expertise and commitment across many national and local partnerships, and some inspiring examples of great work. (Maybe like me, you are currently involved in at least one 'new' programme).

“

At the heart of the urban ageing endeavour, we need: structures linking **aspirational** local authorities together to work through the challenges that face us; a dynamic working relationship between researchers, policy-makers and practitioners and a **contemporary account of ageing** rooted in social research that is made relevant to local action.’

It’s all been good stuff: dig out the BGOP/Audit Commission report on developing ageing strategies, or the ‘Sure Start to Later Life’ produced by the Office of the Deputy Prime Minister.<sup>2</sup> How about some findings from Link Age Plus or POPPs?<sup>3</sup>

But.....there has been a persistent gap at the heart of this urban ageing endeavour: structures linking aspirational local authorities together to work through the challenges that face us; a dynamic working relationship between researchers, policy-makers and practitioners; a contemporary account of ageing rooted in social research and made relevant to local action.

So, why should you use this framework? Because it represents the best attempt we know of to provide you with the research and policy framework that will lead cities to put in place long-term Age-friendly strategies that really make a difference.

Happy reading!

## Introduction



## Introduction

This *Research and Evaluation Framework for Age-friendly Cities* has been developed by the UK Urban Ageing Consortium as a practical resource to help cities and community groups, policymakers and commissioners across the UK develop successful and innovative Age-friendly programmes and initiatives.\* Drawing on the latest academic research, this Framework provides up-to-date knowledge and practical tools to help guide and inform the development of Age-friendly programmes and initiatives.

## How to Use this Framework

Intended as an accessible, reader-friendly document, this Framework offers a basic foundation for understanding the key issues involved in developing Age-friendly cities.

Structured around seven of the WHO domains,<sup>§</sup> each section includes:

- > detailed summaries and critical research reviews of each domain;
- > key facts to bear in mind;
- > an index of useful resources and toolkits for reference; and
- > a series of recommendations – practical ‘Next Steps’ cities can take as they devise and deliver Age-friendly strategies and initiatives.

There is also a section in the Framework to help cities assess and evaluate the effectiveness of their programmes across each of the domains. These templates support the aspirational intentions that underpin the Age-friendly Cities movement: that cities committed to Age-friendly principles need to work towards and demonstrate, in alignment with the WHO’s own criteria, a ‘continuous cycle of improvement’.

## The Age-friendly Cities Movement

Since the publication of the *WHO Global Age-friendly Cities: A Guide* in 2007, and in the last couple of years in particular, the idea of developing Age-friendly Cities has become an increasingly popular phenomenon. There are currently 209 member cities and communities from 26 different countries signed up to the WHO Global Network of Age-friendly Cities – a substantial number of these having joined in the last year alone.

This escalation of global interest reflects acknowledgement that the Age-friendly Cities framework can assist cities in meeting the complex challenges and opportunities of demographic ageing and urbanisation.

*Moving beyond a traditional health and social care model of ageing, Age-friendly principles provide cities and their older residents with an empowering and holistic framework within which to understand and address people’s experience of growing old.*

In this framework the focus is on older people as citizens, where older people sit at the centre of decision-making and where notions of respect and social inclusion carry as much meaning as questions of functional mobility, health and understandings of ageing as a condition of mounting dependency and need.

## Sustaining Age-friendly Principles, Practices and Strategies

For Age-friendly initiatives to be sustainable and successful in the long term it is vitally important that those involved in shaping policies, strategies and initiatives:

- > are aware of the latest thinking and evidence on ageing;
- > have knowledge about current debates within the field;

- > understand emerging approaches to developing and assessing the effectiveness of Age-friendly initiatives and:
- > are aware of the particular social and ideological implications that certain policy messages can have on older people's everyday lives.

**This Framework should be seen as a starting point to encourage constructive reflection and positive action on Age-friendly principles, practices and ideas.**

Its production has drawn on the substantial expertise of its collaborating partners: the decade-long experience of the Valuing Older People team (now Age-friendly Manchester) in developing successful and innovative ageing programmes across Manchester (the first Age-friendly City in the UK); the input of two of the UK's leading research institutions on ageing (the Centre for Social Gerontology at Keele University and the Manchester Institute for Collaborative Research on Ageing at the University of Manchester). It also draws on the Beth Johnson Foundation's established expertise of working on ageing issues within the charitable sector, the grounded knowledge gained from the UK Network of Age-friendly Cities' shared learning programme (the UK's first national network of cities formally affiliated to the WHO's Global Network of Age-friendly Cities) – as well as a host of recent Age-friendly projects that have emerged from partner collaborations, from the Age-friendly Old Moat study through to the Manchester Ageing Study.

This breadth of experience and academic expertise has helped inform the narrative drive of this Framework – highlighting certain core issues and themes that Age-friendly Cities need to think about as they develop Age-friendly programmes and initiatives.

These issues, highlighted here, are not always so visible in public debates on Age-friendly Cities but they are emphasised here to

encourage cities to involve them as part of their overall Age-friendly approach. Most importantly, these include:

- > acknowledging the dynamics of **multiple exclusion** in older age – and developing programmes and strategies that actively address the disproportionate impact that social exclusion, deprivation and socio-economic disadvantage has on people's experience of growing old;
- > being conscious of the specific issues, needs and concerns that relate to older **minority and ethnic groups** – devising Age-friendly strategies that are sensitive to these particular groups.

There are other issues drawn out in this Framework too that provide a new perspective to some aspects of thinking on Age-friendly Cities. The Framework challenges the way in which certain domains have tended to carry a particular focus – to the neglect of others. It highlights, for example, the less visible but no less important way in which the domain of *Outdoor Spaces and Buildings* needs to be thought of beyond, simply, the bricks and mortar of spaces, streets and buildings – drawing attention to the role of an Age-friendly City in devising strategies and initiatives that acknowledge the social dynamics of urban space: the way in which older people use and re-make urban space.

There is also an attempt in this Framework to draw out those less visible aspects of Age-friendly approaches that cut across several domains: the particular role and value, for instance, that '**creativity**' has, not just as an activity for older people, contained within the domain of *Social Participation*, but as an approach relevant to Age-friendly practice across multiple domains – creativity, for instance, as an approach that might be applied to the domain of *Respect and Social Inclusion*, *Outdoor Spaces and Buildings*, or to the delivery of *Communication and Information*.

“

This Framework is offered as a practical resource to **support cities** across the UK develop the long term vision and strategy needed to create those kinds of **spaces, conditions** and **structures** that will make sure that older people, living in our cities, have a better experience of growing old.’

\* \* \*

Published online, this Framework is intended as a publicly available resource. It will, invariably, be updated over time to reflect changes: new evidence, additional resources and ongoing work, still in-progress, on Age-friendly indicators that will support cities in their evaluation of Age-friendly activity. There are other themes too, that will be incorporated into this Framework: issues around dementia-friendly communities, for instance, that are not explicitly addressed here – but which need to be better articulated as a strand of Age-friendly work.

These updates form part of the ongoing activity of the UK Urban Ageing Consortium. Committed to providing useful and practical resources to support cities, policy-makers, commissioners and community groups, the Consortium offers this Framework and its subsequent versions as a practical resource to support cities across the UK develop the long term vision and strategy needed to create those kinds of spaces, conditions and structures that will make sure that older people, living in our cities, have a better experience of growing old.

\* Developed in Manchester, this Framework carries a Manchester perspective. Each city may well want to refine and adapt this Framework to meet their own local needs.

§ This Framework covers seven of the original eight WHO Age-Friendly domains, leaving out the domain of ‘Community and Health Services’. This omission has been based on the WHO’s own acknowledgement that cities often have limited capacity to influence this last domain at local level.

# 1 Outdoor Spaces & Buildings

“  
*The outside environment and public buildings have a major impact on the mobility, independence and quality of life of older people and affect their ability to ‘age in place’.*”

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 12 ]

## Age-friendly Outdoor Spaces & Buildings

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## Key facts

- Around half of those aged 65+ **face problems getting outdoors** (largely due to environmental barriers).
- Those living in sheltered accommodation or in care homes are more than **three times less likely to get outdoors** for more than five hours per week than older people living in their own homes.
- Those living within ten minutes' walk of a local open space are **twice as likely to be satisfied with life** compared with those whose local open space is further away.
- Older people **spend more time in their immediate neighbourhood** compared to any other generational group.
- Older people are much **more likely to be dissatisfied with their local area** than they are with their home environment.

## Outdoor Spaces & Buildings

[ summary ]

*Outdoor Spaces and Buildings* are a key aspect of an Age-friendly City that can support (or hinder) physical health, wellbeing and quality of life in older age. Research in this area is, however, still in its infancy with both research and designed interventions tending to focus on the physical fabric (and health impact) of the built environment while neglecting those less visible social and subjective relationships that people have with their surroundings in older age.

This Framework provides a summary review of recent research in this area. Its key points draw attention to:

- the impact of obstructive, urban environments on older people (and the mitigating effects of accessible, inclusive design)
- the value of green, open spaces in fostering health and wellbeing in older age
- the vital role of older people in planning and design processes
- the impact of urban environments on people's identity, sense of self and belonging in older age
- the need for developers and planners to develop longer-term stakes in the places that they build
- the inherent value of public spaces as spaces that can be used, shared and appropriated (even in older age)

# Outdoor Spaces & Buildings

[ a review of recent research ]

## Outdoor Spaces and Buildings

Outdoor Spaces and Buildings are a basic feature of an Age-friendly City. They provide opportunities for social interaction, physical activity, and the opportunity to make use of the resources, services and amenities of the city.<sup>1</sup> But with the narrowing-down of movement that can often occur in older age, people's experience of the urban environment in older age may become severely limited.<sup>2</sup>

*Those living in sheltered accommodation or in a care home are nearly three times less likely to get outdoors for more than five hours per week than older people living in their own homes.<sup>3</sup>*

Questions around access are, therefore, key to ensuring older people's ongoing ability to step outdoors and make use of those public services and spaces – within an

immediate neighbourhood in particular – that support health and wellbeing and quality of life in older age.

## Disabling Environments

The Age-friendliness of Outdoor Spaces and Buildings depends, in the first instance, on the physical fabric of the built environment – and the degree to which it supports or obstructs people's ability to get out and about in older age. Research has identified a range of environmental obstructions and deficits that limit older people's ability to move through a city (identifying and focusing on the environmental – as opposed to bodily – deficits that disable, frustrate and, ultimately, discriminate against people's everyday ability to get out and about).<sup>4</sup> These range in form: from the restrictive height of a streetside curb (that makes crossing a street potentially difficult) to a cluttered streetscape (that can impede

mobility along a stretch of pavement particularly for those using walking aids, wheelchairs or mobility scooters).

Moreover, the evidence shows the **disproportionate impact** of the urban environment on older people's mobility, especially for those with physical and cognitive impairments.

Researchers have drawn attention to the way in which it is often the smallest of environmental factors – modulations of ground texture or 'formerly imperceptible changes in levels' – that can start to become 'problematic' in older age where these are not necessarily felt by younger generations.

## Environmental Deficits

The process of ageing is often accompanied by a greater sensitivity to the smallest of physical features of the built environment – what researchers describe as the 'amplification of impact' from 'micro environmental aspects' in older age.<sup>5</sup> Moreover, this may involve not only small-scale 'obstructions' that impede movement in a physical sense but the lack of facilities such as free and accessible toilets or adequate public seating, the absence of which can more insidiously inhibit

and discourage movement outdoors.

Research has repeatedly shown the way in which these kinds of missing amenities (public toilets, rest stops) can, as significant environmental deficits, negatively impact on older people's use and perception of urban space: challenging and diminishing the 'environmental confidence' needed to get out and about – particularly when there is a (sudden) change in an older person's health status. There are, moreover, significant health risks associated with these kinds of disabling environments and missing amenities. Studies have, for instance, suggested that older people are at a heightened risk of falls wherever:

- > there is inadequate distribution of public seating (insufficient benches, for instance);
- > the physical environment is poorly maintained (uneven, badly-maintained paving along a streetscape, for instance);
- > new, unfamiliar (confusing) design features are introduced (such as tactile paving – where stepping around to avoid an unfamiliar surface leads to a greater likelihood of falls).<sup>6</sup>



### Enabling Urban Features

The principle that environments should be designed and/or adapted in such a way that they are accessible to all – regardless of age or physical (dis)ability – is now enshrined in law via the *Disability Discrimination Act* (1995) and has been advanced in practice through the concepts of universal access and ‘inclusive design’.<sup>7</sup>

Design research in this area has identified those enabling features and design interventions within the built environment that render otherwise ‘resistant material environments’ into ones that actively support older people’s use of urban space – particularly for those with physical and cognitive impairments.

These features and characteristics can range from the ‘legibility’ of urban features – benches and public toilets that clearly signal and enable their intended use – through to the pedestrianisation of roads, to good quality public paths.

As research shows, there are clear correlations between the ‘quality’ of public paths that lead to open spaces and the amount of time that older people actually spend outdoors.<sup>8</sup>

### Design Recommendations

A significant amount of design research has focused on generating evidence-based design recommendations to **minimise barriers to movement** outdoors and transform disabling environments into supportive ones. Most recently, the research consortium I’DGO have called for the introduction of certain design features as standard to enable barrier-free movement at all levels.

These include:

- > wide and flat tarmac footways
- > easy transition at level changes
- > unobstructed navigation
- > controlled crossing points
- > clear, simple, easily visible and understandable signage
- > frequent, warm, supportive seating
- > sufficient bus stops with weather protection and seating
- > sufficient, well maintained, safe and open toilets

Other emerging areas of design research have focused on making design recommendations that look

to identify those environmental (or designed-in) features of a given environment that can support those with specific cognitive impairments such as dementia. This might involve something as simple as making sure that the existing aesthetic and functional features of a street are retained as wayfinding cues that might well allow some people with dementia to navigate the urban environment more confidently.<sup>9</sup>

It is worth noting, in this context, that many of these recommendations consider a variety of different factors as key to successful design: as they take account of, for instance, not only those basic design issues of practicality and ease of use – but are sensitive to issues of comfort, say, or ‘desirability’ of use.

In this way, well thought-out design recommendations will consider not only the bare minimum of functionality and utility – how ‘sittable’ a bench is, for instance – but how desirable and comfortable that bench is to use.

This might involve suggesting seating that is warm, not only ‘sittable’, or toilets that are clean and well-maintained, not just free and available to use. For an Age-

friendly City this close, considered and sensitive attention to the detail of people’s experience and use of the built environment is key.

### Creating Healthy Environments

The accessibility and Age-friendliness of a city can be understood – and designed – relatively clearly in terms of those physical features (present or absent) that disable, obstruct or support people’s ability and right to move outdoors and access public spaces and buildings in older age. But the Age-friendliness of an urban environment can also be understood in terms of specific health-related benefits associated with getting and being outdoors.

Research in this area has, for instance, established the clear **physical and mental health advantages** linked with mobility outside of the home and being in outdoor spaces in particular. These benefits of getting outdoors range from helping alleviate problems with insomnia (resetting the circadian rhythms and routines often lost in older age through the very act of walking and being outdoors and sensing the change of daylight and seasons) to encouraging physical

activity that supports physical and mental health in later life.<sup>10</sup> Research suggests that those neighbourhoods that are designed to make it easy and enjoyable to go outdoors is a significant factor as to whether people attain recommended levels of physical activity through walking (regardless of sensory or mobility impairment) and is, more generally, a significant predictor of health and life satisfaction.

// Those living within 10 minutes' walk of a local open space are **twice as likely** to achieve the recommended levels of **healthy walking** compared with those whose local open space is further away.

// Those who perceive their neighbourhood environments to be very or even fairly supportive are **more likely to be 'high-level' walkers** (i.e. walking at least 2.5 hours per week).

// Those living within 10 minutes' walk of a local open space are **twice as likely to be satisfied with life** compared with those whose local open space is further away.<sup>11</sup>

There is, moreover, a specific area of research that has focused on the particular value of natural environments and green, open spaces in terms of promoting older people's health and wellbeing.

Often discussed in terms of **'therapeutic environments'** these natural environments, whether a park or greened alleyway, associate green space – both views of and the actual presence of green space – as well as access to green space and the activity that takes place within them with improved sense of wellbeing and quality of life. Research has, for instance, shown that even the mere distribution of trees within a given neighbourhood has a direct correlation with older people's wellbeing.<sup>12</sup>

### Beyond the Physical Environment

Much of the research around older people's experience of the urban environment describes the built environment in terms of its more utilitarian, more easily measured benefits: assessing the environment in terms of how easy it is to navigate, to access physically and the degree to which it contributes positively to better mental and/or physical health.

People's experience of the urban environment in older age, however, involves more than its material experience and its impact on health. There are less tangible qualities and experience of place that can substantially affect older people's experience of and ability to make use of the built environment.

For an Age-friendly City this means thinking beyond the physical fabric of the built environment to account for its **social and emotional fabric** too.

This means thinking about:

- > the different ways in which people form **subjective connections** to a place;
- > the **meanings and values** attached to certain kinds of spaces; and
- > the different ways in which **perceptions** of a given environment can support (or inhibit) people from maintaining 'environmental confidence' in older age.<sup>13</sup>

>> **valuing perceptions of place**  
There are a whole number of different ways in which perceptions and feelings impact on actual use of space.

The sense of public 'humiliation', for instance, when as a wheelchair user you can only access a building by the back door, or the worry and embarrassment provoked by not being able to find a public toilet in time that can, in turn, lead to the self-restricting behaviour of deciding it might be better not to risk going outdoors at all.

Even concerns around 'safety and security' that can often inhibit older people's confidence in stepping outdoors have been shown to relate less to 'objective' security concerns – i.e. to actual incidents of crime in a given area – and more often to subjective readings and perceptions of place – eg. how safe and secure a given place feels.

In this context, the visual signs of disorder and neglect (e.g., broken street furniture for instance) can often generate **feelings of insecurity** as signs of disorder are often read as signs of indifference or lack of care.<sup>14</sup>

### >> acknowledging the relational value of spaces

Increasingly, researchers are identifying and specifying the particular qualities of spaces that offer older people opportunities for social interaction and



exchange in what can oftentimes be the impersonal environment of the city.

These might range from the sociability of a busy marketplace; the passing **opportunities for social interaction** on the public space of a bus; the value of shared spaces that provide moments of inter-generational contact in otherwise age-segregated environments; the 'mediating' space of a private balcony that offers 'pretexts for exchange'; and the kinds of spaces that offer through their different activities – the modest activity of gardening a window box or a front yard, for instance – with ways of 'being in touch' with the external world, beyond the self.<sup>15</sup>

These kinds of spaces – and the relational exchanges that they support – represent enabling features of the urban environment supporting and encouraging older people as they get out and about, offering assistance and the kind of acknowledgement that allows people to comfortably navigate and feel connected with a given place.

*Values of independence are important but, as disability scholars argue, relations of **interdependence** within an environment are important as well.*<sup>16</sup>

### >> recognising that a place can affect your sense of self

In this way a 'resistant material environment' can not only compromise a person's physical ability to move through a given space but can impact heavily on self-esteem too. The sense of losing mastery over movement and mobility, in a sense, more fundamentally represents losing a part of your former self. In a different way, 'environmental confidence' itself (the confidence to go outdoors) has been shown to be linked to a person's changing sense of their own self.<sup>17</sup>

Research suggests that the confidence to go outdoors can, at times, be affected as much by states of mind as by bodily, 'functional' capacity. The **loss of a lifelong partner**, for instance, (bereavement at the loss of a part of your identity) can often lead to a more general feeling of uncertainty and apprehension within an albeit familiar environment, inhibiting the confidence to move outdoors. In this way, people's connection to a place is not always so concrete and literal. It can rely as much on subjective feeling, perception and imagination (people's 'emotional geographies') as much as on objective reality.

Feeling connected to a place might, for instance, be cultivated through the recalled past of a place: the continuity offered by a location, that combines with a sense of biographical continuity contributing to a person's solid sense of identity and 'rootedness' within a given place.

Following the above, the meanings that people attach to places are particularly important to consider in contexts of rapid urban change and transition where maintaining a feeling of biographical connection with a place – and cultivating a firm sense of belonging – becomes all the more difficult.

### Planning, Development and Urban Change

Over the past ten years, there has been a noticeable disinclination to plan and design cities and urban spaces in ways that reflect the needs of different generations. And yet, there has been a growing acknowledgement of the vital role that well-planned, integrated communities can play in older people's lives.<sup>18</sup>

Concepts like *Lifetime Neighbourhoods* have demonstrated the importance of an integrated spatial planning

approach. There is a sense, here, that there is both a need and value to think more broadly about older people's experience of the built environment beyond the home setting and to attend to those specific needs and desires that older people have in relation to their wider neighbourhood.

For a *Lifetime Neighbourhood*, this involves both small-scale design interventions as well larger-scale questions around planning and provision of services to create neighbourhoods that are (in its recommendations):

- > **accessible and inclusive**;
- > aesthetically pleasing and **safe** (in terms of traffic and crime);
- > easy and **pleasant** to access;
- > foster a strong **social/civic fabric** (via services, facilities and 'community hubs');
- > provide a strong sense of **local identity** and place.<sup>19</sup>

Many of these recommendations have been developed subsequently through both design concepts, such as *Streets for Life*, and in design practice. At national policy level, however, there has been a reluctance to support these

recommendations and their underlying values that would (otherwise) commit planners, developers and designers to account for the needs of an ageing population. There has, in particular, been a noticeable reluctance among politicians to engage with concepts around *Lifetime Neighbourhoods* as compared with the concept of *Lifetime Homes*. This is even as the data suggests that older people are much more likely to be dissatisfied with their local area than they are with their own home environment.<sup>20</sup>

Current national policy on neighbourhoods barely references the idea of *Lifetime Neighbourhoods*. Community strategies, meanwhile, often fail to mention older people altogether. Indeed, urban planning and development is, as ILC-UK point out, still all too often seen reacting to short-term market-led imperatives (as seen in the push towards higher density living, for instance), as opposed to taking a longer-term strategic approach to planning for an ageing population.

### Urban Exclusion: Older People in Urban Planning

These trends in planning and public policy at national level are, arguably,

symptomatic of a more general sense in which cities, like transport infrastructure, tend to be designed with a different age group in mind.

Older people are not, historically, included in those processes that inform the planning and development of the cities within which they live. Research has shown the regular exclusion of older people from participation in urban development and change. More recently, studies have highlighted the exclusion of older people from urban regeneration programmes – particularly as compared with younger age groups.

Given the assumptions that are often made about older people's needs, there is a particular need to involve older people in processes of urban consultation not only to include them directly as citizens in the shaping of the cities within which they live but to ensure that planning and urban design account for the actual not imagined needs of an ageing population.<sup>21</sup> In this context it is important to note how older people living in deprived urban areas (already at risk of neighbourhood exclusion on a variety of different levels) can be particularly exposed to processes of urban change and gentrification.<sup>22</sup>

### Participation and Belonging in an Age-friendly City

Of all generational groups, older people spend the most time within their immediate neighbourhood. Moreover, many have long-standing relationship with their local area (often built up over an adult lifecourse). Thus the exclusion of older people from participation and engagement in urban change and development represents what has been described as a strange 'paradox' of urban citizenship.<sup>23</sup>

There is, however, a growing body of research that is focused on exploring dynamics of urban participation and identifying alternative ways of supporting participation within the city.

Guided by principles of **spatial justice**, this research emphasises the importance of thinking about the urban environment in terms of its inhabitants and the often marginalised 'users' of urban space, thinking about the urban environment not only from the top-down perspective of planning professionals, developers, architects and urban designers but thinking from the bottom-up too: about the way in which people participate in, experience and shape an urban environment through its everyday use.

For the design and development of Age-friendly Cities there is potential here to look beyond the design and provision of physically supportive and healthy urban environments and to think of the city and the built environment, instead, in a way that actively enables older people as actors (and citizens) within the city to participate in and help shape their own experience and use of the city in a variety of different ways.

### Supporting Participation, Use and Ownership of the City

Within the design world there are emerging forms of practice that support these processes of urban participation – processes that can be applied to involve older people. These forms of practice range from design strategies that are consciously participative – designs developed together with 'user groups', for instance, that extend participation **beyond formal consultation processes** – through to design strategies that focus not so much on the production of a final, physical design as on the programming of (shared) activities that might take place within a given space instead.<sup>24</sup>

This could involve, for instance, designing temporary interventions that challenge conventional perceptions and use of a given space or offer different ways of making use of a given environment.

More broadly, there is a sense in which an Age-friendly City might be better understood through the specific qualities and characteristics of spaces that openly invite participation, use and activities of different sort.

For an Age-friendly City this involves expanding the typology of what is conventionally understood by 'out-door spaces and buildings' to include not only parks and public, healthy environments and the navigable street but other kinds of spaces too.

These might include so-called 'third spaces' that blur the boundary between what is technically private but what feels, in fact, like a public space – the privatised space of a shopping centre, for instance. Or it might involve so-called 'loose spaces': in-between, threshold spaces that are casually appropriated – as in the informal use of 'leftover' green spaces.

In spaces like these the activities

that take place within them do not necessarily match up with the programmed intentions for that space. And yet there is, in these ambiguous spaces, always that possibility for different kinds of activities and uses to take place within them (whether those activities are formal or informal).<sup>25</sup>

*In this way, the 'public space' of the city can be seen positively as a 'shared ground' negotiated through its varied use.*

This broader definition of urban space is particularly important to consider within the context of the growing privatisation of public spaces in the UK and the tendency to design for age in age-segregated ways.

Given the narrowing down of spatial experience in older age there is a need to ensure that the planning and design of the built environment both signals and enables an openness to its older citizens to make full and varied use of the rich and diverse resources that urban environments have to offer.

“

Given the **narrowing down of spatial experience** in older age there is a need to ensure that the planning and design of the built environment both signals and enables an **openness** to its older citizens to make full and varied use of the rich and diverse resources that urban environments have to offer.”

## Next steps\*

> Strategy    > Programme    > Delivery

\* The following pages outline a series of RECOMMENDATIONS for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Buildings and Outdoor Spaces across the city. These recommendations are broken down into three categories, to support the development of city-wide STRATEGY, PROGRAMMES and forms of DELIVERY.

## Strategy



commit to the provision of **ENABLING, INCLUSIVE and INVITING** urban environments for older people across the city



secure city-wide commitments to **ACTIVELY INVOLVE** older people in planning processes and regeneration programmes (in all their different stages)



sign up to a **LONGER-TERM** strategic approach to Age-friendly urban development (acknowledging an Age-friendly approach in all local plans)

## Programme

- > devise programmes that implement and monitor **MINIMUM STANDARDS** of accessibility and minimise barriers to getting outdoors
- > develop initiatives that invite a **MIX OF DIFFERENT USES** in a variety of spaces across the city
- > promote programmes that enable access to **GREEN** and **OPEN SPACES** across the city
- > support programmes and interventions that champion **INNOVATIVE** and **CREATIVE** design and use of space
- > develop networks and forums that enable **CONSTRUCTIVE DIALOGUE** between different stakeholders involved in Age-friendly urban development
- > devise initiatives that promote **OLDER PEOPLE'S VOICES** in planning and urban development

## Delivery

- > ensure that older people from a range of backgrounds and with a range of experience are **INVOLVED** in all stages of design and planning processes
- > ensure that design interventions are both **SENSITIVE** to local context and **MAINTAINED** over time
- > promote and pilot programmes at **DIFFERENT SCALES** (from street to neighbourhood to city-wide level)
- > focus on providing an Age-friendly lense to work in areas already undergoing **DEVELOPMENT** and **CHANGE**
- > work with designers and architectural practices to encourage **INNOVATIVE** Age-friendly design
- > ensure that Age-friendly urban development is **INTEGRATED** in its approach across all of the **WHO** Age-friendly domains



## Resources and toolkits

**A Guide to Age-friendly Communities in the North**  
(Northern Architecture: 2013)

**Age-friendly Parks Checklist**  
(Philadelphia Corporation for Aging)

**Creating an Age-friendly NYC: One Neighbourhood at a Time**  
(Age-friendly NYC: 2012)

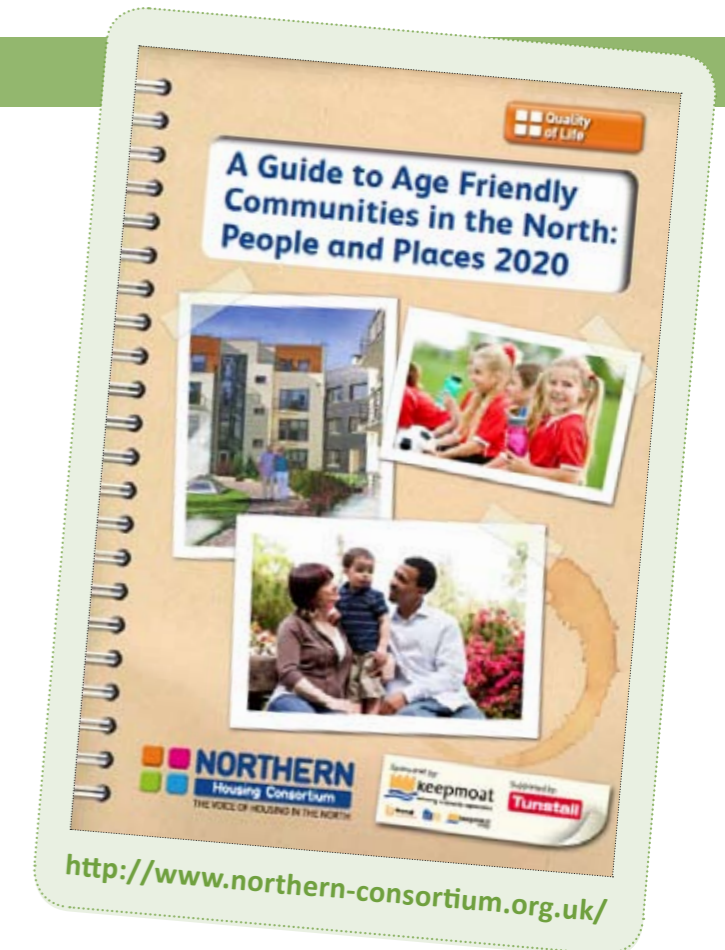
**Inclusive Design for Getting Outdoors**  
(IDGO: 2013)

**Lifelong Neighbourhoods: How Older People Can Add Value**  
(Housing Lin: Viewpoint # 49)

**Lifetime Homes: Lifetime Neighbourhoods**  
(Department of Health / DWP: 2008)

**Mobilising Knowledge**  
(Goldsmiths/Urban Buzz: 2007)

**Old Moat: Age-Friendly Research and Evaluation Toolkit**  
(Southways: 2013)





**“  
Transportation, including  
accessible and affordable  
public transport is a key  
factor influencing active  
ageing in particular, being  
able to move about the city  
determines social and civic  
participation and access to  
community and health  
services.”**

[ Global Age-friendly Cities: A Guide (WHO; 2007), p. 20 ]

## Age-friendly Transportation

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## Key facts

- **Mobility and movement outdoors** (or 'action range' - the regular distances travelled from home) **decreases** in older age.
- **Two thirds of all trips** made by older people are **restricted to the local neighbourhood**.
- There is a significant increase in **reliance on both walking and public transport** in older age.
- Older people are at **greater risk of serious and fatal injury** from traffic than any other generational group.
- **Fear of falling** is one of the main barriers for older people in getting outdoors – with pavement quality, and dilapidation one of the key environmental risk factors for falling.

## Transportation

[ summary ]

Good transportation is vital to an Age-friendly City. It supports changing mobility patterns in older age (particularly when these can change suddenly and radically in later life). It enables access to vital resources and services that support health and wellbeing. Moreover, good transportation encourages more equal access to the resources of the city. For an ageing population, however, transportation and mobility is about more than simply getting from A to B. Beyond supporting physical access to resources and maintaining good health, transportation and mobility represents a great deal more: not least, the ability to maintain independence and support a feeling of being connected to the 'real' world in some form.

This Framework provides a summary review of recent research in this area. Its key points draw attention to:

- the vital relationship between transportation, mobility, health and wellbeing in older age
- the physical and social barriers to movement that limit the use of different types of transport in older age
- the critical role of transportation in promoting social inclusion, wellbeing and independence in later life
- the role of transportation in maintaining a sense of self and connection with the world in later life

# Transportation

[ a review of recent research ]

## Age-friendly Transportation

Effective transportation has a key role to play in developing an Age-friendly City. Good transportation enables access to those vital resources and services that support health and wellbeing. It also assists with reducing social isolation in later life.

*Research shows, however, that for an ageing population **transportation and mobility is about more than simply getting from A to B.***

While transportation has a crucial role to play in terms of enabling physical access to vital resources, it also helps maintain independence in later life and supports that feeling of being connected with the 'real' world in some form.<sup>1</sup>

For these reasons, the domain of transportation, needs to be thought of not only in terms of its physical

dimensions but also in terms of those less tangible symbolic and psychological implications of what transportation and mobility can often start to mean in later life - particularly as mobility patterns start to change in older age.

## Changing Mobility Patterns in Older Age

People's ability to move around and remain mobile within a city changes in older age. Although people's experience of ageing will vary according to factors such as class, gender, ethnic group and geographic region, research has identified a particular mobility profile for an older population that is marked by more limited movement as compared with the working age population, around whom mainstream transportation systems tend to be designed.<sup>2</sup> That changing mobility profile is described, variously, as:

// a **decreasing action range** or 'shrinking activity rate' (the furthest distance travelled from home averaging out as 6.4 km or 37 km spread out over five journeys within a given week);

// a **larger fraction of time spent indoors** (according to one study 78% of a day is spent indoors, 14% of a day outdoors – according to another study 80% of 70+-year-olds, spend their time at home, indoors);

// an **increasingly sedentary lifestyle** (even among fairly active groups of fit and healthy people aged between 72 and 92 70% of a day spent can be spent sitting and lying, 22% of a day standing, 7% of a day walking);

// **mobility increasingly focused within a local neighbourhood** – '2/3 of all trips made by older people are restricted to their respective neighbourhoods (mainly on foot).'<sup>3</sup>

## Addressing Barriers to Movement

These changing mobility patterns are often related to quite specific physical factors associated with the ageing process (e.g., arthritis and osteoporosis) that make movement harder and less comfortable. But

there are a range of other social and psychological factors (beyond physical capacity) that can diminish older people's mobility within the city.

For an Age-friendly City these barriers – both psychological and physical – are important to bear in mind. Bad weather, darkness, feeling unsafe, physical obstacles, a fear of falling, lack of assistance and lack of money have all been shown to discourage, inhibit or prevent older people from getting out and about.<sup>4</sup>

These changing mobility patterns – reduced activity rates and narrowed-down action ranges – have a clearly negative impact on older people's physical and mental health and wellbeing: limiting access to vital resources, reducing opportunities for social interaction as well as curtailing the well-documented health benefits of physical activity that would otherwise take place (through everyday movement) as habitual, daily routine.

Indeed, as researchers and policy-makers are increasingly pointing out, diminished mobility carries significant costs to physical and mental health. Several studies have shown how (other-

wise) more 'active' forms of travel have the potential to reduce the impact of osteoporosis, dementias with a vascular dimension (half of all dementias) as well as actively improve mental health and wellbeing.

Walking and the **walkability** of a neighbourhood, for instance, have been directly linked not only to improved cardiovascular fitness, enhanced cognitive function and short-term protection from further mobility loss - but as a 'buffer' against depression in older age.<sup>5</sup>

Changing mobility patterns in later life can, however, impact on wellbeing in less obvious ways: altering feelings of self-reliance and **independence**, for instance, and on a more fundamental level affecting people's sense of self in later life.

Researchers have identified the '**negative feedback loops**' often associated with these changing mobility patterns in later life and the negative impact these can have on wellbeing.

Giving up a familiar mode of transport (e.g., driving a car) might force dependence on forms of mobility that are perceived to be problematic or undesirable - having to rely on

others to be driven out and about, for instance, or having to rely on more stigmatised forms of travel and assistance, such as a walking frame, or mobility scooters that carry their own 'negative' connotations - diminishing, potentially, a sense of autonomy and wellbeing.<sup>6</sup>

But research also suggests that some of the negative effects of giving-up driving can be mitigated if older people **remain in control** and have a say in the transport solutions that are designed for them. This might involve, for instance, planning to give-up driving with the support and help of family and friends over a long period of time, and trialling other forms of transport. It might also involve making sure that other forms of transport, including public and community transport, walking and cycling infrastructures might be improved through schemes such as lift-sharing.<sup>7</sup>

The perceived loss of independence and control over the means of your own mobility in later life leads, invariably, to greater dependence on public transport systems and informal social networks (reliance on family, friends and neighbours to give you a lift). Having to rely on others (when you can no longer 'function unaided') can

often affect, quite profoundly, your own sense of self. And which is why often assistance with travel, while welcomed, can also be accompanied by a strong sense that people want to be able to do it 'their way' symbolising their continued ability to cope and maintain independence in later life.

In this sense, mobility is about more than, simply, the physical ability to move and get out and about.<sup>8</sup>

*'Being able to stay mobile is crucial to older people's wellbeing, as loss of mobility means the loss of so many other things.'*<sup>9</sup>

### Supporting Mobility in an Age-Friendly City

As mobility patterns start to change in later life: enabling mobility - on public transport, in neighbourhoods, on the street - becomes a key area of work for Age-friendly Cities. Supporting older people where their physical ability to move comfortably has been curtailed; ensuring equal access to resources across the city - these become core responsibilities of the Age-friendly City.

Research has also demonstrated the critical role of a supportive urban environment and an effective transpor-

tation system in promoting quality of life. Walkable and accessible roads and streets, effective, affordable and accessible transportation have a key role to play in:

- > ensuring access to basic health and other services;
- > promoting social inclusion, wellbeing, and in maintaining and supporting independence in later life;
- > enabling older people to meet friends, socialise, pursue hobbies and interests, and maintain social contacts; and, more generally,
- > supporting people's desire 'to go out and interact with others.'<sup>10</sup>

It is worth, moreover, noting that this desire and need to go out and interact with others has been shown to apply equally to **the journey route itself**.

There is growing recognition that transportation needs to be understood not only as a support mechanism for getting people from A to B but that the route - the journey itself - might be considered as a destination in its own right. In this sense, public transportation might be considered as a place in itself - to meet and chat to people

(on the bus, or at the bus stop, for instance). For an Age-friendly City it is important to remember that this **latent conviviality** of public transport carries a particular importance for those who lead more isolated lives in older age.<sup>11</sup>

### Enabling Barrier-free Mobility

There are a number of measures that can help eliminate many of the day-to-day problems that currently deter older people from using public transport and the pavements and roads in their locality.

For an Age-friendly City these measures (based on the principles of inclusive, barrier-free design) are key to supporting older people's ability to move freely, with minimum obstruction, across the city. Studies have identified a number of simple measures to support comfortable mobility on the roads and streets:

- > the provision of **dropped kerbs** and raised crossings on the street;
- > **minimising obstructions** that might slow down pedestrian traffic or which present a safety hazard;
- > ensuring that surfaces are **non-slip** and non-reflective;

- > making sure that any steps and stairs conform to certain **manageable** standards;
- > providing **road crossings** at a greater number of wide or busy junctions;
- > **phasing traffic light signals** at road crossings to allow pedestrians a longer time to cross.<sup>12</sup>

Measures to support confident and comfortable use of public (and private) transport systems, meanwhile, might range from:

- > ensuring that transport vehicles are **accessible** (eg. low-floor buses and minimum door widths and heights to facilitate access, providing secure handholds inside transport vehicles);
- > positioning bus stops at **key locations** and designing them to ensure that people sitting down inside a bus shelter can easily see their on-coming bus (without repeatedly having to get up and down to check);
- > providing clear, legible and **standardised signage** at transport intersections (mindful that the number of falls increases at points where people consider and look for signs indicating a change of direction).<sup>13</sup>

Moreover, the application of these measures is key. Age-friendly Cities need to bear in mind that accessibility, for instance, depends on the **consistent** and **universal application** of barrier-free design standards for these to be effective.

The introduction of a fleet of low floor buses, for instance, can only really be considered as fully accessible if low-floor buses are used on routes throughout the course of a day. Similarly, signage needs to be familiar, legible and, to a degree, standardised – i.e., universally applied.<sup>14</sup>

### Beyond the Physical Hardware of Supported Mobility

Many of these measures to support mobility involve intervening in and altering the physical hardware of transport and traffic systems, and the street itself. For an Age-friendly City, however, it is important to acknowledge and address those less concrete, less visible factors that inhibit mobility in older age. This might involve:

- > addressing psychological fears about falling over outdoors;<sup>15</sup>
- > acknowledging uneasiness around walking pace and traffic speed;<sup>16</sup>

- > addressing the unsettling experience of using confusing, newly-introduced traffic controls – or features of the street;<sup>17</sup>
- > providing reassurance and a relative sense of safety that many older people often feel is lacking when using public transport (from the unsettling experience of anti-social behaviour to the literally, physically de-stabilising experience of a badly-driven vehicle);<sup>18</sup>
- > or challenging stereotypes that otherwise inhibit certain forms of mobility (the popular misconception, for instance, that older adults are less safe/unsafe drivers).<sup>19</sup>

Moreover, for mobility to be **sustainable** and **relevant** to older people's lived experience and daily lives, Age-friendly Cities need to consider mobility and transportation fully and holistically. This means accounting for and integrating the full range of transport options that are available across the city. This, in turn, requires an Age-friendly City to:

- // acknowledge the value of specialist **user-oriented** forms of public, sometimes informal forms of public transport that operate on a flexible

schedule, on flexible routes – filling in, oftentimes, those gaps in transport provision where conventional forms of public transport are absent (or have been scaled back);<sup>20</sup>

// ensure that the latest **technologies** in personal mobility (motorised mobility scooters as an alternative to walking stick, wheelchairs and walking frames) are successfully accommodated into day-to-day patterns of movement.

Researchers have, for instance, pointed to the uncertainties and potential conflicts surrounding the use of these new technologies, where the use of mobility scooters in public contexts is not yet guided by clear regulations or guidelines;<sup>21</sup>

// promote **walkable neighbourhoods** as a basic planning principle to ensure that key activities and resources are located within walking distance (or within walking distance of a bus stop at least);<sup>22</sup>

// acknowledge that, in spite of the drive in transport planning to diminish reliance on car

use, **reliance on a car** and the continuing ability to drive is often felt to be of increasing not decreasing importance to many older people, fulfilling a number of social and ‘aesthetic’ needs);<sup>23</sup>

// make provision for **other forms of transport** not conventionally associated with the stereotyped picture of elderly mobility (encouraging and making space for cycling, for instance, as a viable transport option for older age);<sup>24</sup>

// acknowledge the value of a public transportation network that is not only effective and fully **accessible** but also **affordable**.<sup>25</sup>

Numerous studies have, for instance, pointed to the vital role of concessionary fares for older adults in, variously: compensating for reduced ‘physical functioning’; providing a more affordable travel alternative when other transport options can often start to fall away (having to give up driving a car, for instance); ensuring continued access to key resources; and being able to maintain social contacts in later life.

Concessionary fares are also important insofar as they allow older people to

make journeys that would otherwise be perceived as ‘non-essential’ – with a significant impact on wellbeing.<sup>26</sup>

### **Transport Planning in an Age-Friendly City**

Transportation and movement across the city has, historically, tended to be designed with a younger, working age demographic in mind. Increasingly, however, transport planners are starting to look at ways in which transport planning can support older people.

Primarily, this support is understood in terms of promoting physical and mental health in older age as transport planners promote certain forms of transport to minimise the onset of certain health conditions (such as osteoporosis or dementia). Bus use, for example, is often encouraged in the knowledge that bus trips tend to involve an element of physical activity (walking) at either end of a journey.<sup>27</sup>

Termed ‘**active travel**’, this transport planning approach has meant that transport networks are, increasingly, being planned in such a way to maximise physically-active forms of mobility – conscious of their associated health-benefit.<sup>28</sup>

### **The Relative Value of Active Travel**

For an Age-friendly City there is a particular value in thinking about transport and mobility in this way through the notion of physical activity – as exercise becomes planned into the ordinary, everyday activity of getting out and about. Studies show that physical activity of this ordinary, everyday type is ‘self-reinforcing’ and ‘habit-forming’ – and a particularly good ‘start up activity’ for less active older people, promoting independence and social well-being.<sup>29</sup>

And yet, it is important for Age-friendly Cities to reflect on the particular context in which these values of active transportation and mobility are advanced and understood.

A number of researchers have started to sound a note of caution around the promotion of these kinds of values as mobility in older age is increasingly discussed in terms of ‘active ageing’, lifelong fitness and healthy ageing.

There is a growing sense of unease that these ideas, insofar as they have become standard, ‘prescribed’ ways of being active have, at times, unhelpfully, over-emphasised values of self-reliance (over and above those other values of inter-dependence and



mutual support that a more integrated and flexible transport planning strategy might also support).<sup>30</sup>

### **Towards a User-led Transport Planning Strategy**

While transport planning has started to acknowledge the health needs of older people within its transport planning strategies, there still remains a divergence between the priorities of transport planners and older people's actual transport use and needs.

Transport planners will often, as studies have shown, prioritise essential journeys (such as trips to shops or to the hospital), while many older people are actually making journeys that are classed by transport planners as 'inessential' (i.e., journeys to meet friends and family that are essential in their own way).<sup>31</sup>

Current trends within transport planning to automate planning processes and accessibility planning systems (using GIS mapping to identify 'problem areas', for instance) can reinforce this mismatch between planning and need. GIS systems do not always match up with those 'problem areas' experienced by older people on-the-ground.

Overly-mechanistic, these systems often fail to take account of older people's **real-life situations** and underestimate the vital role that accessibility planning and supported mobility, in the broadest sense of the term, play in enabling older people to: maintain connections with families, friends and neighbours; retain independence; and stay in touch with 'normal life'.<sup>32</sup>

There is a risk that accessibility planning software can often make assumptions that Age-friendly Cities will need to actively challenge: the failure of software to account for the slower walking speeds of many older adults; the failure to acknowledge shorter accessible distances to bus stops; the limitations of this software that identifies only a small number of key destinations (hospitals, GP surgeries, churches, friends' houses, day centres, parks etc.) that recur in the day-to-day mobility patterns of many older adults.

*Research suggests that 'a more community-based, user-led approach [in transport planning is far more] likely to deliver the inclusive transport system that transport planners say they wish to develop and that older people would like to travel on.'*<sup>33</sup>

In the last analysis, it is this **user-led approach** to the planning of transport and mobility across the city that an Age-friendly City needs to bear in mind – as it works to support older people's ability to move around and take advantage of the rich resources that the city has to offer.

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**Accessibility planning and supported mobility in the broadest sense of the term has a vital role to play in an Age-friendly City: enabling older people to maintain connections with families, friends and neighbours, retain independence and stay in touch with 'normal life'”**

## Next steps\*

> Strategy    > Programme    > Delivery

\* The following pages outline a series of RECOMMENDATIONS for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Transportation across the city. These recommendations are broken down into three categories, to support the development of city-wide STRATEGY, PROGRAMMES and forms of DELIVERY.

## Strategy



commit to the provision of **EFFECTIVE, ACCESSIBLE and AFFORDABLE** transportation options for older people across the city



ensure that transport planning decisions across the city **TAKE FULL ACCOUNT** of older people's **MOBILITY NEEDS** (including discretionary travel needs)



encourage an **INTEGRATED APPROACH** to transport strategies across different forms of mobility and transport types



ensure older people's needs are taken into account and **EXPLICITLY REFERENCED** in local transport strategies

## Programme

- > implement **MINIMUM ACCESS STANDARDS** across the city's public transportation system
- > support training programmes to raise **AGE AWARENESS** (for drivers and passengers) across transport types
- > develop programmes that encourage **COMMUNITY, USER-LED APPROACHES** to transport planning
- > devise programmes that provide **TIMELY SUPPORT** to help older people manage critical points in **MOBILITY TRANSITIONS** (e.g., loss of driver's licence)
- > develop initiatives that capitalise and build on the less visible **SOCIAL CAPITAL** that public transport provides

## Delivery

- > ensure accessibility standards are applied in a **CONSISTENT** fashion across the city's transport network
- > monitor the **AFFORDABILITY, REGULARITY** and **RELIABILITY** of public transport across the system
- > work with **PUBLIC** and **PRIVATE** transport providers to support the principle of **SEAMLESS** mobility across the city
- > accommodate **ALTERNATIVE FORMS** of transport and mobility in transport planning (from mobility scooters to cycling)
- > make sure that older people are actively **INVOLVED** in transport planning decisions



# Resources and toolkits

**'Journey to a Friend 1-8' Kilburn Older Voices Exchange (KOVE)**  
([www.kove.org.uk](http://www.kove.org.uk))

**Go-Far Going Outdoors: Falls, Ageing and Resilience**  
(Go-Far: 2013)

**Creating an Age-friendly NYC: One Neighbourhood at a Time**  
(Age-friendly NYC: 2012)

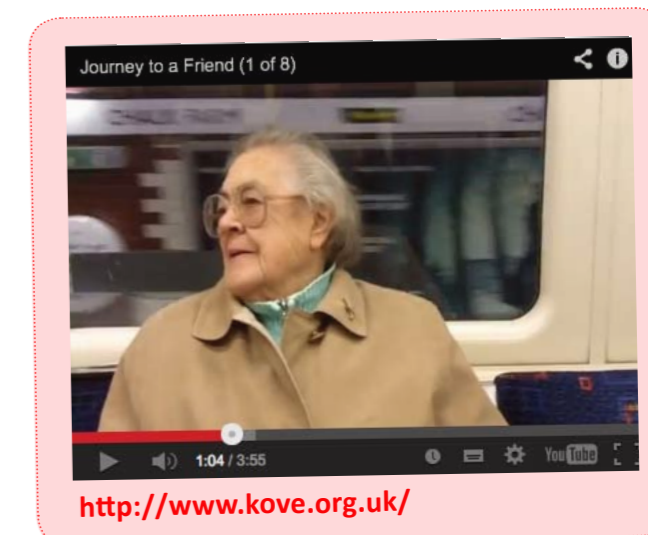
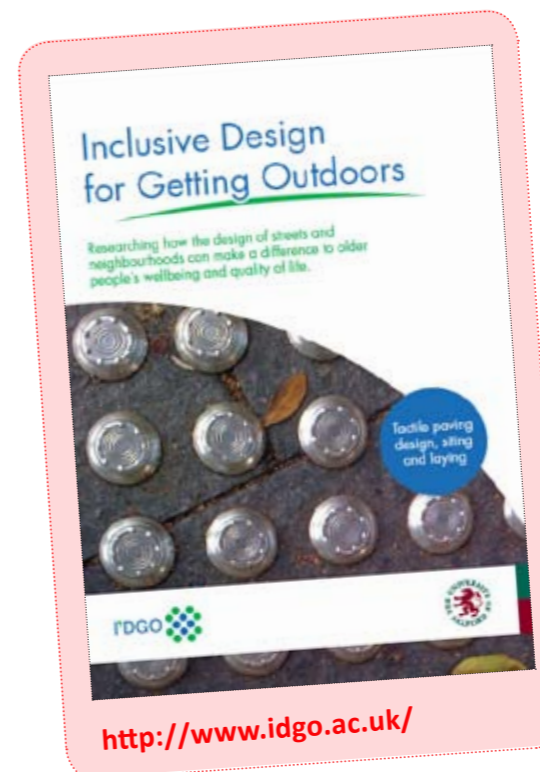
**Inclusive Design for Getting Outdoors**  
(IDGO: 2013)

**Getting Out and About: Keeping Bus Services Free and Sustainable**  
(Age UK: 2012)

**Be Safe by Bus: Practical Training for Older Passengers (Handbook)**  
(AENEAS / Centre for Generations & Accessibility: 2010)

**Age-friendly BC - Transportation**  
(<http://www.youtube.com/watch?v=XNprI6t5CQE>)

**National Center on Senior Transportation**  
(<http://www.seniortransportation.net/>)





**“  
It is clear that housing and support that allow older people to age comfortably and safely within the community to which they belong are universally valued.”**

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 30 ]

## Age-friendly Housing

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## Key facts

- **Time spent at home indoors increases** in older age: 80% of a day for those 65 and over and 90% for those aged 85 and over.
- Older people are more likely than any other age group to **live in homes that are in a poor state of repair**, that lack reasonable bathroom and/or kitchen facilities, that are not sufficiently warm in winter, and that pose a significant risk to health.
- Risk of **falls and winter deaths** are closely related to poor housing.
- The majority of older people **live in mainstream housing** and would prefer to remain living **independently** in their own homes.
- In spite of declining spaces standards, there is a **growing not lessening need for space 'at home'** in older age.

## Housing

[ summary ]

Good quality, affordable, well-designed housing is an important element in an Age-friendly City: helping redress health inequalities in later life; supporting wellbeing; and reinforcing a sense of identity and stability in older age. Given the growing proportion of time spent in the home in older age, housing and the meanings attached to 'home' take on considerable importance. However, in a changing and increasingly complicated climate of housing provision, tenure and support, there are real concerns around the possibility of genuine housing choice and constructive transition in later life – particularly in relation to unsettling transitions out of 'mainstream' living.

This Framework provides a summary review of recent research in this area. Its key points draw attention to:

- the relationship between housing conditions and health inequalities in later life
- the vital role of housing adaptations and repair in supporting independent living in older age
- the impact of new forms of housing tenure on pensioner poverty and choice
- the vital meaning of housing and home to people's social identity, status and sense of continuity, place and self
- the role of housing design in cultivating liveable home environments that account for the needs and desires of its older inhabitants

# Housing

[ a review of recent research ]

## Housing and the Age-friendly City

Housing is one of the fundamental dimensions of an Age-friendly City. With a growing proportion of time spent at home in older age,<sup>1</sup> issues around housing become all the more important in older age – whether those issues relate to housing conditions, design and affordability or more subjective meanings that are attached to a sense of ‘home’. Moreover, housing has a key role to play in redressing health inequalities in later life – supporting (or hindering) older people’s changing health and social care needs over time.<sup>2</sup>

In an increasingly complicated climate of housing provision, tenure and support there is a particularly urgent need for the Age-friendly domain of housing to be understood and addressed in terms of genuine choice and positive transition in later life. Age-friendly

housing policies need to be able to support the possibility of independent living in older age as well as minimise the entrenchment of housing-related social inequalities in later life.

The following sections explore these issues, examining in particular the impact of housing conditions and changing patterns of living in older age.

## Housing Conditions and Healthy Living in Older Age

The condition and suitability of the homes in which older people live plays an important part in addressing health inequalities in later life.<sup>3</sup> For an Age-friendly City this is particularly important to bear in mind given that older people tend to live in disproportionately worse conditions than the rest of the population.<sup>4</sup> Research has identified a historic and persisting over-representation of older people in poor

housing, particularly among those aged 75+/85+. Compared to the rest of the population, there is a greater likelihood that older people will live in homes that are in a state of disrepair,<sup>5</sup> in homes that lack reasonable bathroom and/or kitchen facilities, in homes that are not warm enough in winter, and in homes that pose a significant risk to health.

Research has, moreover, established a strong causal link between poor housing and chronic health conditions and early death. Heart disease, stroke, mental health, respiratory conditions, arthritis and rheumatism have all been linked to poor housing.<sup>6</sup> Close causal links have also been established between substandard housing and the risk of falls (where the likelihood of falls is greatest)<sup>7</sup> and the prevalence of winter deaths.

*‘A significant minority’ of older people in mainstream housing either do not have central heating or have difficulties meeting fuel expenses.’<sup>8</sup>*

Research indicates that older people are particularly vulnerable to both rising and fluctuating fuel prices and cold winters – with a close correlation identified between winter temperature and death rate among older adults.<sup>9</sup>

## Home Adaptations and Repairs in an Age-friendly City

‘Preventative’ health and social care strategies emphasise the importance of supporting older people to live independently, in their own homes (in mainstream housing). Moreover, as several studies, suggest the majority of older people want to continue to live independently in their own homes and avoid moving into institutional care settings.<sup>10</sup>

But to **enable independent living** within a home environment will often require adaptation of that environment to support independent living and maintain health<sup>11</sup> and quality of life in older age<sup>12</sup>.

In addition, rising disability rates will require further housing adaptations. While men can currently expect to live their last 7.2 years in disability, and women their last 9.4 years in disability,<sup>13</sup> the number of disabled older people in England is expected to double between 2002 and 2041. With that rise will come a commensurate need for housing adaptations.<sup>14</sup>

For an Age-friendly City there is an obvious need to **support effective adaptations** of the home environment



to enable independent living within the context of later life disability. But it is important to stress the importance of home adaptations among lower-income groups. Given that **housing and health inequalities reproduce along a social gradient of ill health**, older people on lower incomes are more likely to require home adaptations to support independent living.<sup>15</sup> This in turn raises questions as to the affordability of housing adaptations and repairs at the point where these are needed most.

In this context, it is worth noting that over the last two decades, there has been a noticeable value shift, reflected in public policy, from state responsibility for the maintenance of housing stock (based on assessment of the property alone) to a growing emphasis placed on the role and responsibilities of the individual householder. Current discretionary forms of assistance have resulted in greater emphasis being placed on the ‘use of home equity’ and ‘preventative provision’ – eg. via handyman services) to support home adaptations.<sup>16</sup>

### Housing, Poverty and Affordable Living

The last 40 years have seen radical shifts in patterns of home ownership

with particularly significant implications for housing poverty in later life. Since the 1970s, the substantial focus of housing policies has been to enable home ownership.<sup>17</sup> This has meant that there has been a radical **shift into owner-occupation**, particularly among lower-income groups.<sup>18</sup> There are currently as many low-income home-owners as low-income tenants.<sup>19</sup>

Compared with the rest of the population (where levels of home ownership are falling dramatically among young people), home ownership among older people remains high at around 75%,<sup>20</sup> with home ownership now ‘the majority tenure’.<sup>21</sup>

Research points to a clear **link between home ownership and poverty** in later life:

- > many of those living **below the poverty line** in older age either own their own home outright or are **paying a mortgage**;
- > a significant minority of people entering older age are entering older age with substantial **mortgage debts**.<sup>22</sup>
- > studies have, moreover, shown that for those on a low income, retiring on low pensions, the **burden**

**of mortgage debt** can be ‘utterly debilitating’ with knock-on effects in terms of maintaining home repairs and accessing social care.<sup>23</sup>

In this context, keeping up with costs associated with repairing and maintaining a home (to support independent living) can become increasingly difficult and problematic for many older home owners.<sup>24</sup>

Moreover, as housing itself becomes increasingly bound up in questions of financial investment, asset-based welfare and pensions provision<sup>25</sup> there has been a growing polarisation and widening gap in state support between low income homeowners and low-income tenants. Accessing social care is increasingly tied to the concept of home equity release (selling a home to pay for care home fees).<sup>26</sup>

While research clearly demonstrates the way in which home ownership determines the degree to which advantage or disadvantage is transferred across generations<sup>27</sup> there is also a sense in which the promotion of home ownership for a certain generation can unfairly broaden the gap between low income homeowners and low income tenants.<sup>28</sup>

### Housing ‘Options’ and Choice in Older Age

Contrary to popular perception, the majority of older people (90%) live independently in mainstream housing<sup>29</sup> – with approximately 6% living in sheltered housing and a remaining 4% in residential settings.<sup>30</sup> Research shows that older people tend to want to remain in their own homes for as long as possible.<sup>31</sup>

There is, however, a great deal of variability in people’s experience of housing in older age. For some, this may involve stability (the continuity of living in one place). For others this may involve multiple moves.

At a certain point, however, new and progressing care needs can often involve older people seeking out different forms of housing – moving into more specialist housing, for instance (e.g., sheltered housing, extra care or retirement facilities) or moving into a lower maintenance property, for instance, that is easier to manage.

### ‘Option Recognition’

In the research literature the idea of re-engagement with the environment (both inside and outside of home) is

termed ‘option recognition’: the point where moving becomes more desirable than staying put.<sup>32</sup>

Option recognition can be seen as an opportunity to consider new forms of housing to suit particular needs in older age. This may involve a variety of different options: from downsizing into lower maintenance property or moving into forms of housing that provide additional levels of support and specialist care (whether that is the low level support of extra care housing and retirement communities or the more intensive care provided by institutional care).<sup>33</sup>

There are also a number of **emerging housing typologies** that are starting to offer older people a new array of housing options such as ‘home-sharing’<sup>34</sup> and ‘co-housing’<sup>35</sup> schemes that challenge institutional and corporate models of living, through principles of social inclusion, reciprocity and inter-dependence.

People’s decision to move, or stay in their own homes, can be affected by a range of factors such as changing health needs, sudden changes in life circumstance, a desire to be nearer family members, lifestyle choices, etc.

– all of which push and/or pull people into certain decisions.

There are, however, many practical difficulties, as well as a great deal of uncertainty including lack of transparency and clarity, that surround housing decisions in later life.

Studies have pointed to the way in which the landscape and **language around housing choice** is often highly **confusing** and **unclear**. This may be especially the case where choices involve shifting into new (at times unfamiliar) housing types and tenure. In these kinds of situations, there can be a feeling of ‘loss of control over where and how one lives in older age’.<sup>36</sup> Even when a decision is deliberately made – to move into new form of tenure – there can often be difficulties that follow on from that change: the practicalities of adjusting and adapting to new forms of tenure, for instance.

### **The Realities of Housing Choice in Later Life**

For an Age-friendly City it is important to acknowledge that the realities surrounding housing ‘options’, ‘opportunities’ and ‘choice’ in older age do not always match up with the language that surrounds the promotion

of these options as open and available opportunities.<sup>37</sup> So while there has, for instance, been a growing emphasis on promoting equal treatment in the provision of choice and housing-related services (as the role of the state has shifted from housing provider to enabler over the last 40 years), in practice, studies have shown a noticeable **inequality of treatment** as the range of housing choices made available to older people are still severely limited.<sup>38</sup>

*Moreover, the language around housing ‘choice’ may over-emphasise the **sense of agency and control** that many older people have in this area.*

A number of recent reports and studies have started to emphasise the importance of increasing supply and choice for older home owners, suggesting that many older owner occupiers would choose to move and downsize if sufficient choice were available.<sup>39</sup>

But the current push to promote ‘downsizing’ and tackle ‘under-occupancy’ (among older homeowners) can bely what is a more complicated reality: from the lack of availability of specialist housing for older people (that

is attractive both in terms of location, design quality and having room enough); through to what can often be a reluctance among older homeowners to take on new forms of housing tenure (leasehold tenancies); through to psychological and social reasons that encourage many people to ‘stay put’.<sup>40</sup>

In addition, it is important to bear in mind the degree to which older people’s ‘**housing histories**’ can **often limit choice**. Equity release, for instance, which has often been championed as a way of funding changing care needs in later life is, for many, in the current economic climate no longer the feasible or practical option that it might have been a decade or two ago. High levels of mortgage debt combined with the recession’s impact on housing prices, makes equity release, and homeowners’ ability to respond to ‘new or progressing care needs’<sup>41</sup> highly vulnerable to market variability.

Anecdotal evidence, moreover, suggests that a major problem in recent years is that older people who want to move to accommodation that might better suit their needs are struggling to sell their homes, with knock-on effects on the construction

of retirement housing schemes that have seen a marked slowdown in recent years.<sup>42</sup> Older homeowners' vulnerability to market variability can, in this context, be seen to limit the degree to which homeowners can seek out and afford a lower maintenance property, or find accommodation within sheltered housing or an extra care facility to maintain quality of life.

### Housing, Identity and a Sense of Home

For an Age-friendly City it is also important to bear in mind that decisions relating to housing choice in older age need to be understood within the context of people's more **deep-seated relationship to their home environment**. The meanings that we attach to home invariably draw the question of housing closer to questions of social identity, status, identity construction and maintenance in later life – i.e., to a person's **sense of self**.<sup>43</sup> In this sense,

*'understanding the psychological impact of environment is [...] essential when considering the future of housing and living arrangements in later life.'*<sup>44</sup>

'Continuity', for example, in the meaning of home and attachment to

a present place can often underly the importance of staying put for some<sup>45</sup> as home represents, beyond anything else, simply part of the self which they don't want to change.<sup>46</sup> In this context it is important to acknowledge the time that it might take some people in later life to re-establish social patterns and psychological attachments if moving.<sup>47</sup>

### Housing Design, Planning and Space at Home

The physical environment and design of housing is a key consideration when thinking about housing for an ageing population and developing age-inclusive neighbourhoods in an Age-friendly City. As daily life and routines become increasingly confined within the home,<sup>48</sup> the material, physical environment of domestic space can be seen to take on added significance.<sup>49</sup> Moreover, research suggests that (within the general population) there is currently a higher expectation of retirement housing than among previous generations.<sup>50</sup>

But while expectations of retirement housing may be higher than ever before, the reality is, as studies have repeatedly shown, that a great deal of **housing does not reflect the needs of its older inhabitants:**

*// Much of the **current housing stock** in the UK was built before the end of WWII,<sup>51</sup> and mirrors the needs of a younger as opposed to older age group (matching the bottom-heavy demographic profile of a pre-1945 population).<sup>52</sup>*

*// Many **housing developers** are reluctant to build to Lifetime Home standards because of concerns about additional costs and the perception that first-time buyers and families represent a more lucrative market.<sup>53</sup>*

*// Planners and housing providers are still often seen to be making **'false assumptions about older people'**, their needs, and the way they choose to live their lives.<sup>54</sup>*

*// Moreover, despite innovations in new forms of specialist housing for older people, **the architecture of 'later life living'** in both the public and private sectors is still considered to be limited. Researchers have, for instance, drawn attention to the way in which the specialist housing sector continues to perpetuate a 'uniform and formulaic design stereotype'<sup>55</sup> for older people that expresses and stigmatises the 'neediness' of its older inhabitants.<sup>56</sup>*

### Downsizing and Space Standards

Research has also drawn particular attention to the declining space standards in housing for older people in the UK (already the lowest in Europe).<sup>57</sup> This has been shown to be a particular problem in relation to the bottom end of the private specialist housing sector (where homes can often fail to meet the minimum Lifetime Homes Standards)<sup>58</sup> but these problems apply to the sheltered housing sector too.

*Studies have shown older people living within a smaller square footage within sheltered housing complexes compared to equivalent provision for younger people,<sup>59</sup> leaving little room for design adaptations to support any changing mobility needs and 'function' among its older occupants.<sup>60</sup>*

Researchers have also pointed out the degree to which the more 'specialised' the type of accommodation the less space is made available for everyday activities – with **significant impact on quality of life**.<sup>61</sup>

These **declining space standards** are reinforced by the concept of 'under-occupancy' where older people are encouraged to 'free up' space for family housing to maximise perceived space



efficient forms of living.<sup>62</sup> Older people are, in this context, encouraged to downsize in order to free up housing stock ‘more suitable’ for families.

However, the concept of ‘**under-occupancy**’ and reductions in space standards, more generally, need to be understood within the context of what current research suggests is a growing not declining need for space in older age.

The **accumulation of possessions over a lifecycle**, accommodating visiting relatives and friends, the need to introduce adaptations and devices to support changing mobility needs and ‘function’ in older age (through, for instance, assistive technologies) and the increasing focus of life within the home all suggest that, if anything, more not less space is required in later life to support quality of life and wellbeing in older age.<sup>63</sup>

### **Housing, Home and Design in an Age-friendly City**

Over the last two decades, architects and designers have introduced a number of design innovations and recommendations to actively support independent living in older age.

For an Age-friendly City these design innovations are a key consideration in making housing more ‘Age-friendly’, though their form may vary. Innovation might, for instance, refer to new design standards, the 16 design criteria of **Lifetime Home Standards**, for instance, (minimum door widths for doorways or bathroom walls strong enough to support adaptations such as grab rails etc.) to ensure the accessibility and adaptability of the home environment over time. Or design innovation might refer to **assistive devices** that support the confident and independent functioning for those with age-related cognitive and physical impairments in particular.<sup>64</sup>

### **Smart Technologies**

Smart technologies, for instance, have been developed to enable more efficient use of the home environment and aid specific physical and health-related needs<sup>65</sup> (assisting people with dementia, for instance, or supporting those increasingly reliant on a different sense).

These offer a compensatory function within the home environment, providing ‘memory joggers, lifestyle monitors and facilities which give

people a feeling of independence and enhance their self image as a person with abilities.’<sup>66</sup>

For an Age-friendly City good quality and **innovative design** can and needs to be championed in order to improve older people’s everyday lived experience of the home.

Studies already suggest that the growing use of a wide range of technologies among older people promises a willingness to use other forms of assistive technology within the home environment.<sup>67</sup> And though much of this smart technology, though fully developed and available, is not yet in general use<sup>68</sup> there is a real sense that the future these kinds of innovative designs will more likely be mainstream.

### **Innovative Design**

Beyond assistive technologies, there are a whole range of other forms of good quality, innovative design for housing in older age that Age-friendly Cities can champion. These might involve supporting new housing typologies that challenge stereotyped design of ‘age-appropriate’ housing, for instance, or it might involve championing designs that build in

flexibility into design to maximise use of space (a particular issue in the context of declining space standards).

Design innovation might also involve ensuring that designs are **sensitive to changing needs** over time (the issue of ensuring adequate daylighting in extra care housing, for instance, in the context of growing incidence of sight loss in older age) or the need to ensure that designs are energy **efficient** (again, key in the context of older people’s vulnerability to fuel poverty and cold-related winter deaths).

Supporting good quality design also means ensuring that design innovations are sensitive to context: that assistive technologies, for instance, do not unduly medicalise and unsettle the homeliness of a home environment (as a place of security, familiarity and belonging) or that new technologies (such as innovations in Passivhaus living) are made familiar and are ‘useable’ as systems – relevant to the daily life and lived habits within the home.<sup>69</sup>

### **Home and Neighbourhood in an Age-friendly City**

In the last analysis, though, as many design recommendations have also

sought to point out, homes and housing cannot be thought of outside of the wider context in which they sit.

Homes are parts of neighbourhoods and people's everyday lives and their sense of home are, invariably, bound up in this broader context. This might involve thinking about – and attending to – those vital **'threshold spaces'** that support interaction between the private space of a home and the street and neighbourhood beyond (the significant role that balconies, windows and gardens all play as spaces of social interaction). It might involve attending practically to the detail of **where key services are**

**located** (within walking distance of a home), or that an extra care facility is **integrated into the community**, not cut off as an age-segregated facility.

The sense of being 'at home', in this sense, applies equally to the broader neighbourhood.

“

As daily life and routines become **increasingly confined within the home**, the material, physical environment of domestic space can be seen to take on **added significance.**”

## Next steps\*

> Strategy    > Programme    > Delivery

## Strategy



secure city-wide commitment to provide **GOOD QUALITY** and **AFFORDABLE** housing for older people across the city



develop strategies that enable older people to **REMAIN LIVING INDEPENDENTLY** in their own homes and neighbourhoods



ensure the city is signed up to commit all its new housing developments to **LIFETIME HOMES STANDARDS**

\* The following pages outline a series of **RECOMMENDATIONS** for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Housing across the city. These recommendations are broken down into three categories, to support the development of city-wide **STRATEGY**, **PROGRAMMES** and forms of **DELIVERY**.

## Programme

- > develop CO-ORDINATED PROGRAMMES to promote high quality housing for older people across PUBLIC and PRIVATE SECTORS.
- > support programmes that empower older people to make INFORMED and POSITIVE DECISIONS about housing options in later life
- > promote a RANGE of initiatives (from home share schemes to assistive technologies) that allow older people to remain LIVING INDEPENDENTLY in their own homes
- > support a VARIETY of schemes that make living at home AFFORDABLE (whether through support for home repairs/adaptations to access to benefits advice)
- > develop programmes that MONITOR the quality of public and private HOUSING DEVELOPMENT for older people across city

## Delivery

- > champion good QUALITY and INNOVATIVE housing initiatives for older people in the city
- > work with architects, designers and older people to develop new schemes that CHALLENGE STEREOTYPED housing DESIGN for older age
- > provide access to CLEAR and EFFECTIVE INFORMATION about housing options and support through formal and informal channels
- > focus on housing IMPROVEMENTS in KEY target AREAS (e.g., thermal efficiency, daylighting and liveable space standards)
- > ensure that programmes and initiatives are co-ordinated across DIFFERENT forms of HOUSING TYPE and TENURE

## Resources and toolkits

**A Guide for Assisted Living: Towards Lifetime Home 21**  
(RIBA: 2011)

**Newcastle: an Age-friendly City. Older People's Housing Delivery Plan**  
(Newcastle City Council: 2013)

**Evaluation of Older People's Living Environments (EVOLVE) Toolkit**  
(The University of Sheffield: 2010)

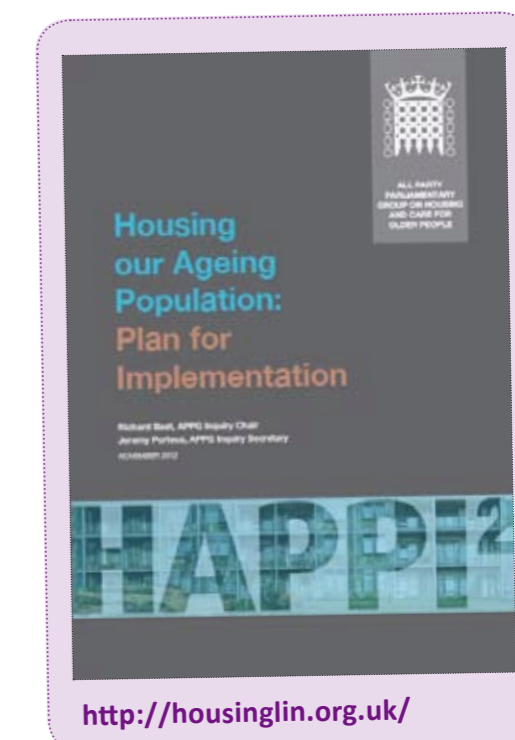
**Housing and Care for Older People Research Network (HCOPRN)**  
(<http://www.housinglin.org.uk/AboutHousingLIN/HCOPRN/>)

**Housing our Ageing Population: Panel for Innovation (HAPPI)**  
(Homes and Communities Agency: 2009)

**Housing our Ageing Population: Plan for Implementation (HAPPI 2)**  
(All Parliamentary Group on Housing and Care for Older People: 2012)

**Housing Lin**  
(<http://www.housinglin.org.uk/>)

**Lifetime Homes: Lifetime Neighbourhoods**  
(Department of Health / DWP: 2008)







**“  
Participating in leisure, social,  
cultural and spiritual activities  
in the community, as well as  
with the family, allows older  
people to continue to exercise  
their competence, to enjoy  
respect and esteem, and to  
maintain or establish supportive  
caring relationships. It fosters  
integration and is the key to  
staying informed.”**

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 38 ]

## Age-friendly Social Participation

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## Key facts

- The number and variety of **social interactions** tends to **decline** with advancing age, even as the need for social support and participation increases.
- Compared with the general population social **networks tend to be relatively small** in older age.
- Social isolation is associated with a **higher risk of death** among older people.
- Social **inequalities** have a direct impact on social **detachment** in older age.
- The sustainability of social networks depends in large measure on the **reciprocal nature of social support**.

## Social Participation

[ summary ]

While health status or financial security can be seen to impact directly on people's quality of life in older age it is important to remember the degree to which that same quality of life is dependent on those less visible – and less easily measurable – social dynamics and relationships that make up our everyday lives.

This Framework considers the degree to which social participation in its different forms fosters good quality and meaningful lives in older age. Its key points draw attention to:

- the relationship between social participation, health and wellbeing
- the risks of social detachment in older age
- the value of meaningful, productive and stimulating social activities
- the value of social networks in providing both practical and emotional support
- the critical role of reciprocity and exchange in networks of social support

# Social Participation

[ a review of recent research ]

## Social Participation

Social participation is a basic aspect of life. Having and maintaining social relations, feeling part of a network of family, friends and community, being involved in social activities that are meaningful, productive, stimulating, having people you can rely on to talk about things that matter to you – these are all a basic aspect of life. They help promote self-worth, provide a sense of purpose and link individuals to the affairs of others, the community and the wider world.<sup>1</sup>

For an Age-friendly City, this social dimension of everyday life is important to bear in mind: the degree to which people's lives are social in nature and reliant on those dynamics of social attachments, networks and activities that people can oftentimes lack or lose in older age.<sup>2</sup>

## The Positive Impact of Social Participation

The research evidence points to the positive impact of social participation in older age, emphasising the opportunities and benefits of pursuing an active and 'engaged lifestyle' in older age.<sup>3</sup> This challenges the traditional characterisation of ageing as a period of progressive disengagement and withdrawal. Advanced through the 'activity theory' of ageing (and now, increasingly, through the active ageing agenda), researchers have been able to show the real extent to which social engagement and participation in older age supports quality of life, health and wellbeing.<sup>4</sup>

Those with 'rich networks of active social relationships', for instance, have been shown to be more likely to be happier with their lives.<sup>5</sup> Those actively involved in social and leisure activities are also less likely to

report poor health and depression.<sup>6</sup> Maintaining or increasing your range of activities in older age is seen to act as a 'buffer' against the likely 'detrimental effects' of a variety of needs: from 'functional impairments, widowhood or lack of family support.'<sup>7</sup>

Involvement in a 'social support network' has been shown to boost morale, 'protect' health in older age and provide a buffer that mitigates against the effects of cognitive ageing.<sup>8</sup> Moreover, studies have highlighted the way in which older people themselves associate participation in social activity and social relations with their own sense of (self-rated) quality of life.<sup>9</sup> For the 'baby boom' age group, the evidence suggests that social activity and social relations are seen to be a particularly important aspect of their own social representations of good health.<sup>10</sup>

## The Risks of Social Detachment in Older Age

These findings demonstrate that there is a clear and obvious value that social participation brings in older age – providing social activities, networks, attachments and practical and emotional support that sustains physical and mental health, quality

of life and wellbeing in older age.<sup>11</sup> Moreover, as studies have repeatedly shown, the need for social support and participation actually increases with older age.<sup>12</sup>

*And yet the stark reality is that the number and variety of social interactions tends to decline with advancing age.<sup>13</sup>*

Compared with the general population, social networks in older age tend to be relatively small – particularly within certain income, gender and ethnic groups.<sup>14</sup> Rates of exclusion from social relationships have been rising steadily among older people.<sup>15</sup> There is, moreover, a growing sense of urgency at public policy level around questions of loneliness and social isolation – an urgency driven in part by the knowledge that people's quality of life in older age not only declines as their experience of social detachment increases but that the longer people experience social detachment the lower their quality of life is likely to be.<sup>16</sup>

## The Risk Factors of Detachment

There are a number of factors that can expose older people to an 'elevated risk' of becoming socially excluded and

‘detached’ in some form.

#### >> **changing life experiences**

Particular experiences, such as widowhood and the transition to living alone<sup>17</sup> have been shown to narrow down formerly robust networks of social connections and engagements with detrimental effect. Research has, for example, shown the particular way in which *‘[m]any widows [will] have experienced an intensive period of caring for an ailing partner before [their death], during which [time] social activities beyond the household [become] difficult’* which, after widowhood are often difficult to recapture and sustain.<sup>18</sup>

#### >> **poor health**

Those in poor health, meanwhile, have been shown to experience a reduction in support from social networks and relations as they age – putting them at greater risk of social detachment.<sup>19</sup> Ironically, as research also shows, the health benefits of strong social networks are difficult to realise for those already in poor health. It is worth noting in this context that while research can often imply that activity promotes health and wellbeing, the relationship between the two is not so easy to

disentangle.<sup>21</sup> Many studies suggest, for instance, that it is wellbeing that influences activity as opposed to activity influencing wellbeing.<sup>20</sup>

#### >> **changing cultural trends**

There are also those broader societal trends that can place particular groups of older people at a greater risk of social isolation. Researchers have, for instance, pointed to the changing character of social networks in older age, from independent to dependent relationships, a greater reliance upon a more limited set of social ties that raise the risk of social isolation.<sup>22</sup>

Some studies link this to general shifts in contemporary culture, the geographic ‘dispersion of generations’ and a ‘fading solidarity of care’ within families.<sup>23</sup> But the evidence on this is mixed, with many studies suggesting that older people are, increasingly, relying on ‘personal communities’ for support, relying on networks focused on friends as much as kin, with support from a family group just one of a number of options.<sup>24</sup>

Studies do, however, point to the particular challenges of an ageing society where a growing proportion of older people will be childless with

an increasing number of divorced older men, in particular especially vulnerable to social isolation.<sup>25</sup> Within this context it is important to note groups particularly vulnerable to social exclusion: older men, for example, are statistically significantly more likely to be excluded from social relationships than older women.<sup>26</sup>

#### >> **changing urban environments**

Researchers have also pointed to the way in which the changing physical fabric of the environment can also affect people’s experience of social participation and attachment in older age.

The closure of local pubs and Post Offices, to take just two examples, have been shown to reduce the potential for place-based interactions.<sup>27</sup> Meanwhile, the decline of working men’s clubs is shown to put ‘working-class people at particular risk of relative exclusion from the non-family contacts that might generate friendship and support.’<sup>28</sup>

It may also be the case that processes of urban change and regeneration can in themselves be alienating and isolating especially for those with long-standing relationships to a given neighbourhood and place.

#### >> **social inequalities**

Perhaps most fundamentally, though research suggests that **inequality may also be a major factor influencing levels of social participation.** Those with poorer health or fewer resources, as studies show, are less able to participate in as many activities. Those with limited education, on low income, in poor health, who lack access to services, transport or modern IT are at a heightened risk of social detachment – this is particularly true for those not living with a partner.<sup>29</sup>

Moreover, a lifetime’s-worth experience of disadvantage and inequality impacts not only on a person’s ability to lead an engaged older age in material terms but can affect the *internal* psychology and skills that would otherwise enable confident social participation and interaction.<sup>30</sup>

*It should be noted that, compared with other groups, those of higher educational and occupational background tend to maintain or increase their involvement in activities over time, and that those living in more prosperous areas participate in a far more diverse and rich range of pursuits than those from more deprived neighbourhoods.<sup>31</sup> Older people living*

*in deprived areas are more likely to exhibit what are often referred to as 'meagre activity patterns'.*

### Promoting Social Participation in an Age-friendly City

For an Age-friendly City there is a particular need to develop policies which encourage social participation as a way of tackling social isolation in older age. But as an Age-friendly City takes on the role of promoting engagement and social participation in older age, what forms of social participation does it promote and what sort of values might underpin new networks, interactions and activities?

### Active Ageing and 'the Busy Ethic'

Social participation is often described and understood in terms of activity: assessing levels and rates of participation and drawing a correlation between those activity rates and levels of wellbeing.<sup>32</sup> This builds on the ingrained idea that 'successful' ageing involves ageing through engaged activity which in its simplest definition involves: maintaining fitness, remaining active and staying involved.<sup>33</sup> There is, however, growing controversy within the academic community

around what has been termed 'the busy ethic' or '**the universal prescription of activity in later life**' – holding older people to 'a standard of keeping busy, or risk being less valuable members of society.'<sup>34</sup>

As older people are increasingly being sold the virtues of active ageing, there is a rising expectation that older adults ought to be productive in a way that suggests these goals and expectations are more about serving the needs of society than enhancing the good of the older person.<sup>35</sup>

For an Age-friendly City, what is key here is to understand social participation not through rates and intensity of activity but participation in terms of its quality and form and what it brings. Social participation may, for instance, boost self-esteem, provide opportunities to explore creativity, or act out comforting personal routines – or it may, simply, provide access to information and resources.

Given the sheer breadth of what social participation involves, there is a need for Age-friendly Cities to focus on the particular nature and role of these activities, and to pay close attention to those particular relationships

and meanings that older people might attach to any given activity.

### The Different Forms and Contexts of Social Participation

Social participation can be defined in a number of different ways: as activity that is formal or informal in nature; as activity that is solitary, productive, spiritual or creative. Moreover, it is the particular content and context of any form of social participation that is key.<sup>36</sup> There is, in this sense, a real need for Age-friendly Cities to:

**// acknowledge the demands and challenges of a given activity** and attend to the nature of an activity's mental or physical demand whether that means registering the physical mobility demands of a particular activity, or acknowledging the way in which certain activities are, by nature, intellectually challenging;<sup>37</sup>

**// acknowledge the spatial and relational contexts of a given activity:** i.e., whether a given activity is defined by its particular environmental context (as in gardening, fishing, travelling); whether or not it is **self** or other-directed (as in volunteer work, community, solitary hobbies); whether

an activity is about being alone or being with others (with family members, for instance, friends, neighbours or caregivers – even being with animals or a pet); and attending to the 'qualitative factors' – the level of warmth or intimacy – that defines the relational dimension of a given activity.<sup>38</sup>

As studies have shown, it is the social intimacy of certain kinds of activities that has been shown to be one of the most important aspects of social participation that influences wellbeing – i.e., that it is the quality, the warmth, the relational and affective aspect of a given activity that is key.

### The Multiple Benefits of Social Participation

To attend to the particular context and content of social participation can be a good way of revealing the broad range of benefits and meanings that different forms of social participation can provide:

> the ways in which **social activity** can variously: reduce the risks of social isolation; supply emotional intimacy and socio-emotional support; and reinforce one's self-concept and social roles and the sense of being valued;<sup>39</sup>



> the ways in which **productive activity** can provide: satisfaction with outcomes; economic gain; mental stimulation; comforting personal routines; a sense of purpose; increased self-efficacy or self-esteem;<sup>40</sup>

> the ways in which recreational or **leisure activity** can offer: challenging intellectual or physical demands; enjoyment or pleasure in company or surroundings; reinforcement of self-concept;<sup>41</sup>

> the ways in which **creative activity** can provide: opportunities for self-expression; skills development; personal growth; self-confidence and a sense of well-being; as well as the simple pleasure derived from being involved in creative activity.<sup>42</sup>

Moreover, the particular, nature of community arts activity (as a collaborative practice), has been shown to create real opportunities for older people 'to come together, share ideas and communicate their views' and, via a collective project, construct 'a sense of identity and belonging.'<sup>43</sup>

> Research has also pointed to the way in which **spiritual activity** and faith-based allegiances in particular

provide not only opportunities for social interaction; meaningful social roles; an 'appetite for life'; a source of coping (e.g., with bereavement) but a certain continuity as well.<sup>44</sup> Faith-based allegiance has been shown to last on into older age in a way that bucks the more general trend that sees involvement with non-faith-based organisations decline in old age.<sup>45</sup>

Within this context it is worth bearing in mind the overlapping 'function' and meaning of these activities. Lifelong learning, for instance, might be seen, by some, as recreational, by others as activity that is productive, goal-oriented in some form – a way back into work, for instance. For others still lifelong learning might be seen as a whole combination of these: recreational, productive, social, creative.

It is worth noting too that '**joining behaviour**', participation in a given activity, organisation or group, is highly varied across different groups. Studies have identified, for example, particular gender and class-based variation in the types of groups and activities that older people are likely to join.<sup>46</sup> Different types of social activities are valued by different groups in different ways – as

in the perceived importance of 'instrumental activities' in male working-class culture, for instance.<sup>47</sup> This is important to bear in mind given the degree to which (non-)participation in social activities, organisations and groups can have a severe impact on people's opportunities to form friendships or even access vital support for health and other problems in older age.<sup>48</sup>

### Supporting Networks of Social Support in an Age-Friendly City

In its broadest sense, social participation involves those less structured social interactions and networks of friends, neighbours, colleagues and acquaintances that people develop, sustain, or lose in older age. These 'social support networks' might be family and friendship structures that support an older person in a more obvious way – through informal care, for instance – to those looser social connections, casual interactions of a more fleeting, everyday nature that give support and social recognition in a different way.

### The Value of Social Networks

For an Age-friendly City it is important to acknowledge and support the real value that these networks and the

interactions that take place within them bring to older people.

> There is the **social capital** inherent within social networks that provides substantial opportunities through which older people can **access** practical and emotional support, information and advice in an environment based on mutual trust, shared values and shared support.<sup>49</sup> Indeed, as studies have shown people with locally-integrated or family-dependent support networks (networks that are common in stable communities) are unlikely to need statutory services to help with personal care.<sup>50</sup>

> Networks and social interaction, moreover, play a vital role in terms of **building a sense of community** and belonging. Most obviously these might involve: place-based interactions and networks that have been shown by studies to foster a sense of 'community', belonging, a sense of 'interdependence' and place – even where those interactions are of a relatively 'fleeting and everyday nature.'<sup>51</sup> Evidence shows that 'for people aged 65 and over neighbours tend to also be good friends, where for younger age groups local social



interaction is more likely to take on the form of casual “head nodding”).<sup>52</sup>

> Interactions can also be more ‘**virtual**’ and, increasingly, more flexible in form. Emerging social networks are, increasingly, defined by interactions that are no longer tied to a specific ‘place’ but are maintained and nurtured through phone calls, texts, and the internet, nurturing those ‘hidden solidarities of friendship.’<sup>53</sup>

These emerging, less visible networks are a vital way of supporting virtual connections across geographical boundaries, helping maintain otherwise ‘geographically dispersed’ families and friends stay in touch. Although these networks are, however, dependent on access to technology and the ability to fund and afford their use.

### Reciprocity in an Age-friendly City

There is inherent value in the formation and maintenance of all these different types of networks and the interactions that take place within them. But as studies have repeatedly shown, it is the reciprocal nature of the support that is provided within these networks that is seen as key to the sustainability of these networks.<sup>54</sup>

Based on the principle of exchange, reciprocity is defined by the ability to give as well as receive. The majority of older people, as studies show, help each other with shopping, gardening, lifts, domestic help and care of keys or pets – although helping others diminishes sharply over the age of 80 years which raises the question as to whether access to help continues for those who are no longer able to give it.

*‘Frail or sick elders in the community may depend for social support on the unreciprocated solidarity of others, which raises the question of how this can be secured when personal communities are becoming less kin-based.’<sup>55</sup>*

And yet, as researchers, have shown even those who are frail tend to continue to reciprocate help by cooking meals, or caring for grandchildren.<sup>56</sup>

Even the very old and housebound have the social capital (the potential) to give help. ‘Talking, telephoning and keeping in touch are forms of help that a sick person can often give.’<sup>57</sup>

Moreover, the nature of help, the nature of **reciprocity can take on different forms** – and might involve something as ‘simple’ as talking

“

People can choose with whom to associate [.....] but they cannot choose **how helpful** their friends, neighbours and relatives are when needed, or whether these people have the **time**, physical capacity and above all **inclination to talk, help and visit.**”

and listening. Studies have, for instance, identified the specific value of ‘health talk’ – talking with peers about each other’s health. Casual conversational expression of caring concern can often be a way of sharing information and advice, informally, on the effective use of health services, and checking whether friends or neighbours are in difficulty.

\* \* \*

For an Age-friendly City, it is important to bear in mind that people’s ability to participate socially is not wholly self-determined. Social participation is a **collective responsibility** that relies on supportive, engaged and skilled resources and networks of support. This might involve, for instance, acknowledging the central **role of a facilitator** to encourage participation in and ensure the sustainability of (self-organised) social activities and networks.<sup>58</sup> It might involve supporting older people to take on leadership roles within social activities, networks and groups. Studies have shown that while there is often real enthusiasm to get involved in

social activities there is sometimes an anxiety among older people to take on leadership roles. Providing **training opportunities** here is key: enabling older people to acquire and develop those skills that are needed to organise and sustain a committed social network, activity or group.<sup>59</sup>

In the last analysis, though, people’s ability to participate socially is not wholly self-determined – but is a collective responsibility that relies, as much, on the engagement, personality and commitment of others:

*‘People can choose with whom to associate – subject to the constraints of their health and mobility, their neighbourhood, family and social environment, and barriers of class, ethnicity and gender – but they cannot choose how helpful their friends, neighbours and relatives are when needed, or whether these people have the time, physical capacity and above all inclination to talk, help and visit.’<sup>60</sup>*

## Next steps\*

> Strategy    > Programme    > Delivery

## Strategy



a city-wide commitment to ensure a **DIVERSE RANGE** of social activities on offer for older people across the city



pledge to **SUPPORT** and **EXTEND NETWORKS** of social support for older people in local neighbourhoods



develop a coherent, city-wide strategy to mitigate against the impact of the closure of key social facilities



actively promote the social contributions of older people across the city

\* The following pages outline a series of **RECOMMENDATIONS** for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Social Participation across the city. These recommendations are broken down into three categories, to support the development of city-wide **STRATEGY**, **PROGRAMMES** and forms of **DELIVERY**.

## Programme

- > support the development of **NEW PROGRAMMES** to **DIVERSIFY** the range of social activities available to older people across the city
- > **COMMUNICATE OPPORTUNITIES** for social participation across the city through regular and accessible information
- > devise **TAILOR-MADE** programmes to reduce social isolation among older people at particular **RISK** of **SOCIAL EXCLUSION**
- > support initiatives that **STRENGTHEN** committed networks of social support and **RECIPROCITY** within local communities (e.g., via skills exchange, time banks)
- > offer **TRAINING PROGRAMMES** to support older people taking on leadership and facilitator roles (to help set up and sustain **SELF-ORGANISED** social networks)
- > create opportunities for older people to explore **NEW FORMS** of social networks and types of interaction (e.g., via social media)
- > (wherever possible) ensure that programmes **ACKNOWLEDGE** the contributions that older people make in the social life of the city

## Delivery

- > ensure programmes are **AFFORDABLE** and **ACCESIBLE** (i.e., 'no hidden costs', activities are within easy reach, are scheduled at the right times, etc.)
- > ensure programmes are **INCLUSIVE** and broadly spread (in a variety of different settings and contexts) to maximise **DIVERSITY** of opportunity and uptake
- > cultivate **PARTNERSHIPS** with small, medium and large-scale organisations to help **DEVELOP** and **SUSTAIN** opportunities for social participation and support across the city
- > help local organisations and individuals develop and sustain self-organised, **INFORMAL NETWORKS** of social activities and support – particularly in areas where public facilities have closed
- > raise **PUBLIC AWARENESS** of the diversity of opportunity available to older people across the city
- > make older people's **CONTRIBUTION** to the social life of the city **MORE VISIBLE**

# Resources and toolkits

**Ageing Artfully: Older People and Professional Participatory Arts in the UK**  
(Baring Foundation: 2009)

**An Incredible Journey: A Review of Manchester's VOP Cultural Offer**  
(Audience Agency: 2013)

**Creating an Age-friendly NYC one neighbourhood at a time**  
(Age-friendly NYC: 2012)

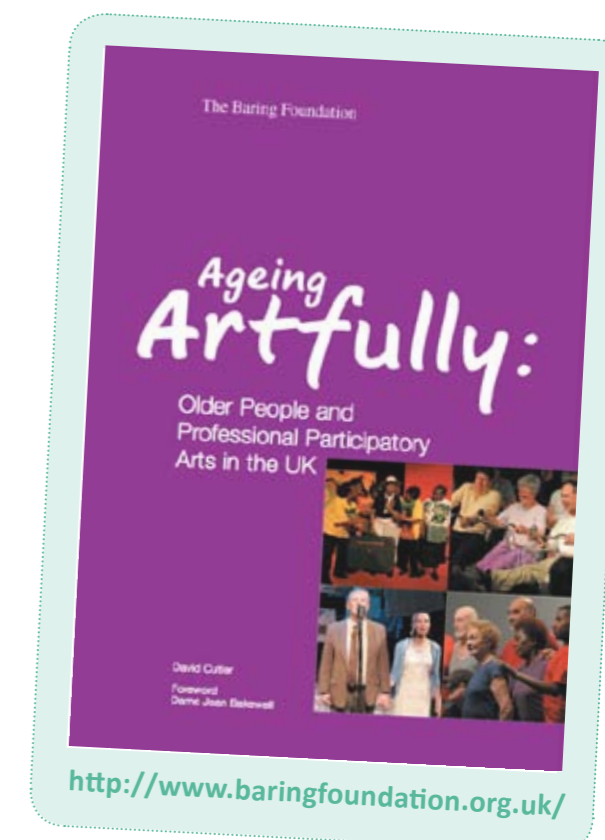
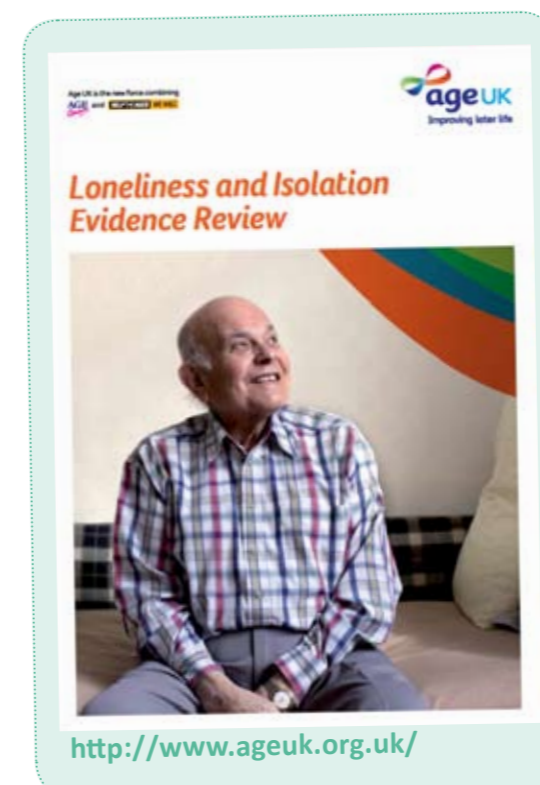
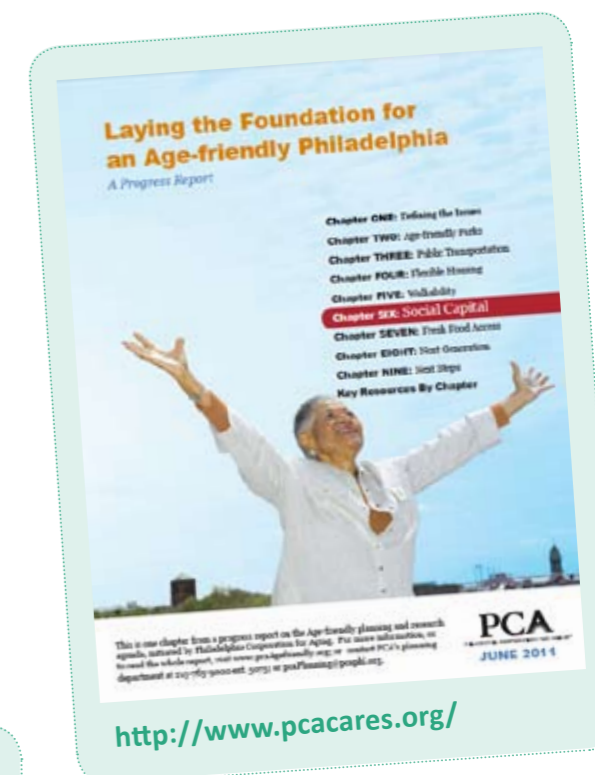
**Men's Sheds and Other Gendered Interventions for Older Men**  
(Lancaster University Centre for Ageing Research: 2013)

**Loneliness and Isolation: Evidence Review**  
(Age UK: 2010)

**That Little Bit of Help**  
(Joseph Rowntree Foundation: 2006)

**'Social Capital': Laying the Foundation for an Age-friendly Philadelphia**  
(Philadelphia Corporation for Aging: 2011)

**VOP Locality Working - What's the Evidence? Report**  
(VOP: 2011)





“  
*Older people report experiencing conflicting types of behaviour and attitudes towards them. On the one hand, many feel they are often respected, recognised and included, while on the other, they experience lack of consideration in the community, in services and in the family.*”

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 45 ]

## Age-friendly Respect & Social Inclusion

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## Key facts

- Negative attitudes towards older people are still **widespread**, overlooked and accepted.
- Ageist stereotypes inform everyday interactions, behaviours, perceptions and attitudes towards older people – and, ultimately, **normalise ageist attitudes within policies** and practices of society at large.
- The manifestation of ageist attitudes, behaviours and beliefs are often obscure, and can **vary in intensity** both in how they are expressed but also experienced.
- Ageist attitudes have a **negative impact** on older people's **health** – including cardiovascular stress.
- Structural inequalities (poverty, deprivation, material disadvantage) put older people at a **heightened risk of social marginalisation** and exclusion – more so than for any other age group.

## Respect & Social Inclusion

[ summary ]

The domain of Respect and Social Inclusion addresses those public attitudes, behaviours and representations of older age that prevent the full and meaningful social inclusion of older people within society. It is a domain that seeks to address those less visible, oftentimes discriminatory 'ageist' attitudes, behaviours and beliefs that structure interactions with older people. These easily overlooked aspects of society impact on people's experience of older age not only on a personal and emotional level but at a broader, societal and structural level too.

This Framework provides a summary review of recent research in this area. Its key points draw attention to:

- the prevalence and acceptance of negative attitudes and behaviour towards older people
- the impact of ageist attitudes on physical and mental health and wellbeing
- the way in which accommodated negative attitudes and behaviours are insitutionalised
- the degree to which social inclusion is dependent on fundamental structural inequalities that underpin social exclusion in older age

# Respect & Social Inclusion

[ a review of recent research ]

## Respect and Social Inclusion in an Age-friendly City

Respect, recognition, feeling socially included and accepted in older age are vital – and defining – aspects of an Age-friendly City. And yet, social attitudes, behaviours and beliefs around ‘older people’, ‘older age’ and the ageing process itself are often characterised by stereotypes and prejudices that, far from fostering respect and social inclusion, are more often than not highly negative, demeaning and, in practice, profoundly marginalising.

*Unlike other forms of social prejudice, negative attitudes towards older people (in western societies at least) are still ‘widespread’, ‘overlooked’ and commonly ‘accepted’.*<sup>1</sup>

For an Age-friendly City, there is a **need to acknowledge** how these deeply ingrained beliefs **affect older people in real terms**: as they obsucre

understanding of the ageing process, reinforce structural inequalities, and shape patterns of behaviour that exclude older people in a whole variety of different ways.

## Social Perceptions of Ageing and Older Age

Recurring social stereotypes of older age (commonly accepted perceptions of what ‘being old’ is seen to be) have built an image of ageing and older age as a process and group set increasingly ‘apart’ from the social mainstream.

This **deficit-based model of older age** portrays older people as a collective, homogenous group who occupy a particular, usually devalued place in society: seen as non-contributing, dependent, as having specific needs, as recipients of services, as reliant on government hand-outs, as a drain on resources with the process of ageing itself equated to a process of mount-

ing decline, dependency and need. ‘Old’ easily becomes a proxy term not for chronological age – but a state of being: of frailty, of being out-of-date, engaged in meaningless activity, withdrawn, isolated, self-oriented, living outside the mainstream, unattractive, over the hill, narrow-minded, a burden, lonely, vulnerable, dowdy, unproductive.<sup>2</sup> While challenged, increasingly, by alternative, ‘re-negotiated’ models of ageing, studies show the way in which ‘these stereotypes and stereotyping of older age persist, informing everyday interactions, behaviours, perceptions and attitudes towards older people and, more insidiously, solidifying and normalising ageist attitudes within the policies and practices of society as a whole.’<sup>3</sup>

## The Expression of Ageism

As studies show these deeply ingrained attitudes, behaviours and beliefs affect older people on a number of different levels. And they are, moreover, experienced, expressed and reproduced in a number of different ways:

- > through **daily interactions and personal relations**;
- > as **expressions of power**;

- > within **organisational cultures**;
- > through **media representations**;
- > through subtle **turns of phrase, gestures, and tones of voice** that exclude and marginalise in their own way.<sup>4</sup>

In its most legible form there are those small-scale everyday interactions that betray a lack of respect and consideration for older people: the everyday discourtesies of being shoved in the street, being treated rudely, impatiently or dismissively in a shop simply on account of age. These everyday discourtesies can, often, in turn inhibit the confident desire and ability to go out at all. But there are countless other contexts, situations and ways in which these attitudes are played out:

- > through **advertising campaigns** and marketing strategies that perpetuate and reinforce negative stereotypes of old age;<sup>5</sup>
- > through ageist stereotypes within the **workplace** that define older workers as increasingly marginal within the workforce;<sup>6</sup>
- > through **‘elderspeak’** speech patterns (‘a slow, exaggerated speech similar to baby talk’), that **structure intergenerational interactions**

with older people in stereotyped, **patronising** ways;<sup>7</sup>

> through to those stereotypes that, at a more fundamental level, have been shown to ‘negatively influence’ **policy** and programming for older people, impacting, even, on government allocation of resources for older people.<sup>8</sup>

### Challenging the Impact of Ageism

It is difficult to disentangle the scales and contexts in which ‘ageist’ behaviours and beliefs play themselves out particularly when the manifestation of these attitudes, behaviours and beliefs are often obscure, and can vary in intensity both in the way in which they are expressed but also experienced.<sup>9</sup>

There is, however, a real need for an Age-friendly City to **be alert to** – and to **challenge** – the way in which deeply ingrained attitudes and beliefs, in all their different forms, play themselves out – particularly within those age-related and service-oriented functions of health, income, housing and social welfare.<sup>10</sup> For while these behaviours and attitudes might be obscure, or difficult to pin down their effect on older people themselves is, nonetheless, real:

- > sidelining and marginalising older people through **discriminatory practices** – from outright age discrimination through to those exclusionary but commonly accepted practices of age segregation;
- > denying the **autonomy, voice** and egalitarian decision-making processes that are **taken for granted with other age groups**. Here, even the adoption of a less optimistic, less engaged, tone of voice can close down, subtly inhibiting the confident voicing of decisions, opinions and views;
- > a failure to **support older people to fulfill their potential**. Studies have observed a curious disparity in the way that younger people are supported to fulfill their future potential where older people are typically supported to maintain independence and autonomy instead;
- > a **denial of personhood** that might range from rudeness to a failure to care that, in its most extreme form, might manifest in the worst cases of elders’ abuse.<sup>11</sup>

In its most literal sense ageist attitudes and behaviour have been shown to **impact on the physical health** of older people. Negative age stereotypes have

been shown to increase cardiovascular stress in older people as well as impact on older people’s ability to respond to ‘stressors’ in the environment.<sup>12</sup>

But perhaps the most insidious effect of these negative attitudes, behaviours and beliefs is the degree to which they can be accommodated and internalised by older people themselves – accepted as a given. An older person who is treated rudely or impatiently in a shop might simply disregard this behaviour rather than think it is their right to challenge that behaviour as inappropriate. An older person who finds themselves in a situation where they have to assert themselves and ask for special treatment that would enable them to continue with a certain activity (e.g., asking for supported access to a facility) may, in this case, choose not to.<sup>13</sup>

Studies have shown that older people are often **uncertain about making claims that they are being discriminated** against because they are old. However, the acceptance of this kind of behaviour as inevitable creates a climate which can often heighten the likelihood of abuse and oppression of older people.<sup>14</sup> There is, moreover, a complicated dynamic of anxious watchfulness and compensation

surrounding the experience – or fear – of ageism in older age.

Studies have shown that older people may go to considerable lengths to be perceived as still ‘trying’ (to participate in life, and remain healthy, engage in meaningful activity, maintain their physical presentation and remember things) because they are aware of the cost of being categorised as ‘not trying’.

Underlying these discussions about keeping watch is a potentially damaging sub-text: observing and watching an older person for evidence to show whether or not they are still trying whether they are ageing well, successfully, in a ‘positive’ **normative way**.<sup>15</sup>

**For an Age-friendly City it is vital to ensure that these pressures to age a certain way are not perpetuated.**

### Cultivating Social Inclusion in an Age-friendly City

For an Age-friendly City, the domain of respect and social inclusion involves, in the main, working to effect a shift in attitudes and behaviour, in language, policy, in organisational culture and personal belief to lessen the social marginalisation and the experience of social exclusion of older people in

society. This might involve Age-friendly Cities in:

- > developing and supporting initiatives that **emphasise future potential** rather than solely values of independence and autonomy;
- > thinking **beyond the health and social care model** of older people as patients or customers but as citizens;
- > ensuring that local policies do **not reactively subscribe to the ‘moral panic’ around ageing** (as a drain on resources etc.); and
- > acknowledging the **diversity of ageing experience** – rather than establish new ‘norms’ or pressures to age a certain way.<sup>16</sup>

It is important, however, to bear in mind that exclusion and marginalisation relate not only to beliefs and behaviours and organisational cultures but to a **more** fundamental question of **social justice and equality** – how exclusion itself as ‘the process of marginalisation’ involves an older person becoming progressively more ‘excluded and marginalised from various aspects of social and community life.’<sup>17</sup>

Historically, the concept of social exclusion – including policy interventions

around social exclusion – have tended to focus on the needs of children, young adults and those of employment age to the exclusion of older people (in itself a marginalisation of older age). And yet, research shows that structural inequalities put older people at a heightened risk of social exclusion.

Growing disparities in income inequalities among older people are placing older people from deprived neighbourhoods at particular risk of social exclusion: from material resources, social relations, civic activities, basic services and their neighbourhoods.<sup>18</sup>

To cultivate *Respect and Social Inclusion*, therefore, there is a need for an Age-friendly City not only to address those deep-seated attitudes and behaviours that marginalise and exclude older people more generally, but a highly specific need to address those **structural conditions** (issues of poverty, deprivation and material disadvantage in particular) that marginalise and exclude older people from the social mainstream.

“  
To cultivate respect and social inclusion in an Age-Friendly City there is a need to address not only those **deep-seated attitudes and behaviours** that marginalise and exclude older people more generally, but also those **structural conditions** (issues of poverty, deprivation and material disadvantage in particular) that marginalise and exclude older people from the social mainstream.”

## Next steps\*

> Strategy    > Programme    > Delivery

## Strategy



secure a city-wide commitment to **MONITOR** and **CHALLENGE** AGEIST attitudes and practices in local authority policy-making



secure city-wide commitments to **ACTIVELY INVOLVE** older people in programmes and initiatives across the city



commit to the public promotion of **POSITIVE MODELS** and images of ageing across the city

\* The following pages outline a series of RECOMMENDATIONS for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Respect and Social Inclusion across the city. These recommendations are broken down into three categories, to support the development of city-wide STRATEGY, PROGRAMMES and forms of DELIVERY.

## Programme

- > devise age awareness training and education programmes that **CHALLENGE** ingrained stereotypes and ageist practices
- > promote a **POSITIVE** image of the **DIVERSITY** of people's experiences of ageing through city-wide public communications campaigns
- > devise programmes and initiatives that support older people in more marginalised groups (e.g., LGBT and BME communities)
- > develop programmes and networks that support cross-generational **INTERACTION**
- > devise initiatives that **BUILD ON** and **PROMOTE** the skills and experience of older people

## Delivery

- > promote age awareness training across a variety of **DIFFERENT** public and private **SECTORS** and organisations (from public education to service delivery to the workplace)
- > actively involve a variety of **DIFFERENT** groups in social inclusion programmes (i.e., devise cross-generational not just inter-generational projects, work to include more marginalised groups of older people)
- > work in partnership with Higher Education Institutions, businesses, community groups to capitalise on both the **EXISTING** skills and untapped **POTENTIAL** of older people
- > ensure positive images of ageing **AVOID** promoting a single 'successful' (and potentially exclusionary) way of growing old





## 6 Civic Participation & Employment

**“  
Older people do not  
stop contributing to  
their communities on  
retirement.”**

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 51 ]

## Age-friendly Civic Participation & Employment

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## Key facts

- By 2021, close to **32% of the working age population** will be **aged 50–65**.
- **Discriminatory attitudes** towards older people persist in the workplace and make work difficult for older people.
- Health changes in older age can lead to **premature withdrawal** from the workplace – though for many workers with life-long limiting illnesses withdrawal from the workplace is not a viable financial option.
- **58% of 65+ year-olds take part in volunteering** activities each year (compared to 37% for the whole adult population).
- Volunteering in older age **supports both physical and mental health and wellbeing**.
- The **more volunteering activity** older people engage with over time, the greater the likelihood of improved wellbeing.

## Civic Participation & Employment

[ summary ]

The domain of Civic Participation and Employment represents a key domain that acknowledges and recognises the different ways in which older people continue to contribute to and participate in society in some form – whether that involves employment in the workplace, volunteering, or taking on citizenship roles in a variety of different arenas.

This Framework outlines some of the research in this area and considers the degree to which civic participation and employment can support good quality, meaningful and empowered lives in older age. Its key points draw attention to:

- the significant social contributions that older people make through employment, voluntary work and active citizenship
- the particular needs and challenges that older people face in relation to the increasingly complex issues around employment in later life
- the vital role of volunteering for older people in promoting health and wellbeing (and supporting later life transitions)
- the need to acknowledge older people as equal citizens and facilitate rights to civic participation as a matter of course

# Civic Participation & Employment

[ a review of recent research ]

## Civic Participation

An Age-friendly City recognises that later life should be seen as a period for active participation within the community. This challenges traditional views which have often emphasised more passive views about the role of older people within social and economic institutions. In this way, the domain of civic participation and employment represents a key domain that acknowledges: the different ways in which older people **continue to contribute to and participate in society** in some form – whether that involves employment in the workplace, volunteering, or taking on different types of citizenship roles.

## Employment in Older Age

One of the main issues around participation and contribution to society in older age concerns questions of employment in later life. The last twenty years has seen a steady growth

in the number of people working into older age.

Where in 1992 just over a fifth of the working age population was aged 50-65, by 2004 a quarter of the working age population was aged 50-65. Projections put that number closer to 32% by 2021, pointing to a fast-ageing workforce.

Moreover, the idea of extending working life into older age has become an important concern for public policy. This has involved a significant policy shift over the last 40 years. Where the 1970s/80s saw policy initiatives focused on replacing older workers with younger workers ('supporting the institution of retirement') current initiatives are looking to delay retirement and extend working life, encouraging more people to work beyond State Pension Age.<sup>1</sup> The active and healthy ageing agenda,

for instance, (as promoted by the European Innovation Partnership) can be seen as a clear example of that policy ambition to extend working life.

In one way, this debate can be seen, primarily, as a macro-economic debate: the pressure to plan for an ageing population and accommodate shifting age dependency ratios on the one hand versus arguments that question the viability of extending working life at all.

But the question surrounding the extension of working life raises a more fundamental set of issues around employment in older age: from societal attitudes and barriers to working in later life; through questions surrounding the value and meaning of continuing to work in some form, given the strong associations of older age with the period of retirement; through issues related to rights and discrimination (within the workplace); and an acknowledgement of the growing diversity of people's experiences of moving out of, and back into work in later life.<sup>2</sup>

Studies are, moreover, showing a growing ambiguity and flexibility around work and 'work-ending' phases of life for those in the 'third

age' and a blurring of boundaries between dependence and independence in late old age.<sup>3</sup>

This is a complex and evolving area where issues and debates around employment in later life are heightened by political pressures and agendas. For an Age-friendly City, however, thinking about the implications of employment in older age there is a need to reflect more closely on a number of key areas addressed by research in this area.

## Acknowledging Skills that Older People Bring into the Workplace

For an Age-friendly City one of the key aspects of employment in older age involves acknowledging the particular (often overlooked) skills and contributions that older people bring into the workforce. Myths surrounding working in older age and assumptions of declining age-related performance are commonplace – but research has demonstrated the specific contributions that older people bring into the workplace. Studies in this area have, for instance, been able to identify the particular value that older people bring as workers: in helping to retain the **'collective memory'** of an organisation; in helping firms better understand

the needs of an ageing market; in providing what has been termed a more representative 'age-balanced interface' with customers. Researchers are also starting to draw attention to the growing body of evidence around entrepreneurship in older age.<sup>4</sup>

#### **Addressing Challenges and Barriers to Work in Later Life**

For an Age-friendly City another key challenge involves addressing barriers to (ongoing) work in older age. Research in this area has drawn attention to a wide variety of factors that make both access to and the actual experience of work in later life difficult and less than satisfactory. These challenges might include:

>> **discriminatory attitudes** to older people within the workplace that make work difficult for older people (e.g., working environments that demean older people, are less 'age-aware' or managers who hinder the re-employment of workers approaching retirement age).

Employment trends have seen a disproportionate increase in unpaid overtime for older workers compared to the rest of the workforce -- and

these discriminatory pressures have almost certainly increased during the economic recession since the 2007 financial crisis. Those 50 and over are finding it harder to get back into work than younger people, and older people have seen the biggest increase in redundancies over this period;<sup>5</sup>

>> **the impact of health changes** (and the pressures of ill-health and disability) in older age that can lead, for instance, to premature withdrawal from the workplace (this is especially true for those in routine or manual jobs). Older workers can also find themselves compelled, out of financial necessity, to remain in employment in spite of major health problems. There are an increasing number of workers in this position working with a long-standing limiting illness that present significant challenges within the workplace in terms of managing physical and mental health conditions.<sup>6</sup>

>> **difficulties in juggling caring roles and responsibilities** while working. For many older workers who carry informal caring responsibilities -- women, in particular -- there are a particular set of issues around employment as many informal carers are prevented from returning to work. For many looking

for work becomes difficult, is often discouraged and finding suitable, flexible conditions of employment that meet their needs is not easy.<sup>7</sup>

#### **Supporting Transitions Out of or Back into Work in Later Life**

Barriers such as these can severely limit people's ability to make full use of (new) employment opportunities in later life or exercise choice in following different routes into or out of work. In a climate where work and retirement transitions are becoming increasingly 'blurred' there is a need for Age-friendly Cities to focus on developing initiatives that support older people in making positive employment choices for their older age.

There is, as research points out, a growing diversity and complexity in older people's experience of work and of the work-end phases of their life with the question of 'choice' in making these transitions an important area of concern. Studies have, for instance, demonstrated the way in which the decision to retire or to return back into work is highly varied but often dependent on socio-economic circumstance. For those who have experienced long-term unemployment, the opportunity

to build and choose 'new types of engagement' are particularly limited. Paid work, in these contexts, may not be a realistic prospect.<sup>8</sup>

Alongside this, studies are also starting to demonstrate a growing diversity in people's experience of employment types in older age, with particular interest focused on flexible models of employment in older age. These flexible models might range from part-time work, self-employment through to job sharing (though these flexible arrangements tend to be more commonly available in the public as opposed to the private sector -- and are more likely than not to be more poorly paid, with limited opportunities for training and skills development).<sup>9</sup>

#### **Identifying and Responding to the Needs of Older Workers**

In addressing these employment challenges and opportunities in later life, an Age-friendly City needs to actively support the needs of older workers in a number of different ways:

- > tackling **age discrimination** in the workplace;
- > supporting **informal carers** in the workplace;



- > encouraging employers to generate **healthy and supportive working environments** (in the context of later life illness and disability);
- > supporting **entrepreneurship**, and:
- > improve workplace **training, refresher courses** and access to **continuing education** and **skills development** to support older workers.<sup>10</sup>

Research has shown that older workers ‘continue to be disadvantaged in relation to work-related training’, particularly those on part-time employment or fixed-term contracts.<sup>11</sup> Moreover, many older workers are often reluctant to take up training offers because of lack of confidence or the perception that the training does not offer enough benefits or advantages. There are a number of policies, however, that could be introduced to address these issues:

- > developing entitlements to ‘third age learning’;
- > re-assessing techniques for training older workers;
- > extending training provision for those in non-standard forms of employment, and:

- > involving higher and further education institutions.

These could be vital mechanisms for developing a more Age-friendly employment environment.<sup>12</sup>

#### **Building the Age-friendly City: the Role of Volunteering**

One of the most significant and visible ways in which older people are seen contributing to society is through volunteering. From ‘one-to-one acts of good neighbourliness’ through to more structured, formal types of volunteering (undertaken through an organisation or group), volunteering represents a key form of social contribution: committing unpaid time for the benefit of others – and to society as a whole.<sup>13</sup>

Rates of volunteering among older people are relatively high, compared to younger age groups. 58 per cent of those aged 65+ (i.e., almost 4.9 million people) take part in volunteering activities each year (where the average for all adults is ‘only’ 37 per cent).<sup>14</sup>

And while, it should be noted that compared to some other countries volunteering rates among older people in the UK are relatively low, research suggests that the aspiration to volunteer in older

age – i.e., the sense that ‘volunteering’ is a goal that people look to set for themselves in later life – is high. It is worth noting here that the likelihood of volunteering is higher among those who have already had a history of volunteering earlier in their lives.<sup>15</sup>

#### **The Value and Benefits of Volunteering**

For an Age-friendly City it is important to think about the particular qualities and experiences that older volunteers bring to the volunteering process. Voluntary organisations, for instance, have expressed the particular advantages of recruiting older volunteers specifically. According to these organisations older volunteers are highly valued for their loyalty; for their experience (with skills accrued over a lifetime); their confidence and authority; and also, more practically, for their availability (there are obvious advantages to recruiting volunteers who have retired from paid work and no longer have caring responsibilities).

Research has also shown the more subtle way in which older volunteers are often seen to carry a maturity of experience (being able to understand problems of others) that allows them

both to engage with other older people (with a greater empathy than younger volunteers) and ‘to engage in a different way’ with children and younger people. Studies, for instance, show a ‘calming influence’ among older volunteers that is able to nurture and help children ‘feel more confident’.<sup>16</sup>

Studies such as these, suggest, the particular value that older volunteers bring to society and the way in which society gains from the contributions of older volunteers specifically. But research on volunteering in later life also highlights quite clearly the way in which volunteering in older age benefits older volunteers themselves – particularly in terms of health and wellbeing. Studies have demonstrated a whole variety of, often quite specific, physical health benefits that result from volunteering in older age, including:

- > improved cognitive functioning;
- > improvements in self-rated physical and psychological health;
- > increase in ‘healthy behaviours’.<sup>17</sup>

One of the strongest and clearest benefits, however, associated with volunteering in older age is the benefit

that volunteering brings in terms of life satisfaction, wellbeing and mental health, particularly for those suffering from depression.<sup>18</sup> Studies have repeatedly shown the way in which volunteering in older age contributes to happiness, improves satisfaction with life, provides older people with a 'greater sense of control' and 'sense of purpose' in life.<sup>19</sup> Volunteering, in this way, is seen to provide:

#### >> meaning and value in later life

As studies show, volunteering can provide a role and greater sense of purpose in older age (the sense that volunteering can make you feel useful to society); can boost confidence, self-esteem and identity; and cultivate a 'sense of belonging.' Moreover, volunteers aged 65 plus are more likely than younger volunteers to report the value of volunteering in these kinds of terms, helping them to: meet people; get 'out of myself'; feel needed; gain position and status within the community; and accomplish a personal sense of achievement.<sup>20</sup>

#### >> social interaction

Studies also show the degree to which volunteering offers opportunities to meet new people, build new friendships and expand (oftentimes lost)

social networks. There is a perceived 'protective function' to this social dimension of volunteering. Research suggests that volunteering, by improving a person's social network, helps buffer stress, and protects older volunteers from isolation in difficult periods.<sup>21</sup>

In short, people who volunteer in older age are less likely to develop physical and mental health problems than their non-volunteering peers – although it should be noted that there is a 'dose effect' to volunteering. Studies shows, that the link of volunteering to wellbeing is cumulative – i.e., the more volunteering activities you take part in and the more frequently you engage in that volunteering work the more likely that will lead to wellbeing.<sup>22</sup>

There is, moreover, an important supportive function attached to volunteering in older age: with studies that suggest one of the key benefits of volunteering is the way that it can help older people manage and cope with transitions experienced in later life. So that while volunteering can be seen to be motivated, in part, by the desire to be useful to others (helping others, wanting to make a difference), there is also a more self-oriented set of motivations behind volunteering

that can be seen to help older people cope with particular transitions that they might face in their later life. Volunteering in this sense might mean supporting transitions from paid work into retirement: filling in spare time during the working week; having something to do; keeping active after retirement. It could mean helping older people move back into paid work: volunteering as an opportunity to gain new skills. Or it could mean mitigating the effects of an 'empty nest syndrome': volunteering filling the gap when children have moved out of the home; or volunteering as a mechanism that helps someone cope with the death of a spouse or partner.<sup>23</sup>

#### Tackling Barriers to Volunteering in an Age-friendly City

The benefits and value of volunteering in older age to both society as a whole as to older people themselves are well-documented. But there are also significant challenges and barriers that can inhibit and complicate the experience of volunteering in older age – barriers that Age-friendly Cities need to address.

// On an ordinary, practical level, **inadequate transportation** and **lack**

**of information** on how to get involved can limit the uptake of volunteering opportunities. 34 per cent of 65-74-year-olds are not aware of volunteering opportunities and help needed in their local area.<sup>24</sup>

// More insiduously, **negative perceptions and stereotypes** about volunteers and volunteering, can turn people away from volunteering in older age. Organisational biases, for instance, can often limit the recruitment and retention of older volunteers (whether by imposing upper age limits on volunteers or by offering stereotyped 'age-appropriate' tasks for older volunteers despite their skills and abilities).<sup>25</sup>

// Volunteering activity itself, and the particular nature and structure of that activity, can bring its own set of complications: from 'role strain' ('not having the capacity to cope with competing demands on one's resources – time, energy, emotion, etc.) through to **lack of autonomy** and control over the volunteering activity itself (the extent to which a volunteer feels adequately appreciated for the work done) can all impact negatively on the volunteer.<sup>26</sup>

// Lack of time and **other commitments** (to family or to caring responsi-

bilities – e.g., for grandchildren, spouses, parents) have also been shown, like health problems, to complicate and limit people’s ability to take up or continue volunteering. Just as practical issues like **financial security** are a significant barrier to continuing participation (particularly for low-income volunteers).<sup>27</sup>

// Studies have, moreover, highlighted a number of **cultural barriers** (from fear of racist attitudes to language-, caste- and gender-based barriers) that limit the uptake of volunteering among certain groups. Research shows that those from Asian backgrounds are ‘significantly less likely to be involved in volunteering’.<sup>28</sup>

// Complications in volunteering can also arise where there is a strong **expectation to volunteer** as in caring roles. Here, there is a risk that the act of volunteering becomes intertwined in a more problematic relationship of mutuality. An issue more likely to arise in the realm of informal volunteering.

### Extending Age-friendly Volunteering Opportunities

For an Age-friendly City wanting to promote the civic contributions of its older

citizens there is a real need, as research suggests, to support volunteering opportunities in older age particularly for those most likely to benefit from volunteering – i.e., those in poor health or those who are relatively isolated.<sup>29</sup> This might involve addressing those practical barriers to participation (lack of adequate information on volunteering opportunities, for instance) through supporting efforts to improve the quality and experience of the volunteering activity itself. This could mean:

- > providing **challenging volunteering tasks**, as opposed to mundane, routinised work;
- > acknowledging the value of **hands-on tasks** that involve direct contact and impact (versus more superficial roles);
- > raising awareness around the need to be **flexible** and sensitive in terms of volunteering arrangements and timetabling (to accommodate different pressures and the specific needs of older volunteers);
- > providing appropriate and well-delivered **training** for volunteers; and,
- > involving volunteers in **decision-making processes** so that volunteers

are (and feel they are) being listened to and not just treated as a form of ‘cheap labour’.

It is not insignificant, that research shows that those volunteers who feel appreciated as volunteers report a higher quality of life and improved sense of satisfaction with life than those who do not feel valued or involved in some way. The central values that underpin volunteering and that contribute in turn to wellbeing are the values of **reciprocity**: the principle that what you give is acknowledged and reciprocated in some form.<sup>30</sup>

### Civic Participation in an Age-friendly City

The last decade has seen evolving ‘citizenship-based models’ of older age highlight and recognise older people as engaged and active citizens in society. Moving beyond more conventional health and social care models of older age (that describe older people as patients or consumers of services), this citizenship-based model of older age acknowledges older people as self-determining citizens with rights and roles, like all other citizens, to take part in different forms and styles of citizenship: ‘taking part in collective

decisions-making processes, voicing concerns, making suggestions, engaging with, and being democratically engaged in turn by the government, a public institution, or any organisation of civic life.’<sup>31</sup> It is a model that recognises the vital importance of civic participation in older age both for the older inhabitant (acknowledged as expert citizen, user, inhabitant) and for the local authority where the civic participation of all generations is vital to the ‘good health of local powers’.

Increasingly, studies are starting to show that opportunities for older people to take part in decision-making processes around public policies and services in particular are expanding in the UK and elsewhere (even though historically, older people have tended to be denied rights to self-determination).<sup>32</sup> But while these decision-making processes are expanding in some public policy and service areas – in others they are still highly limited.

Studies have, for instance, shown the often still limited degree to which older people are involved, as a matter of course, in consultation processes in urban planning. Within the context of residential settings (from sheltered housing to residential care) researchers

have identified the striking degree to which residents are **excluded** from processes that would otherwise allow them to decide how the residential settings in which they live might be organised and managed. Expectations of democratic participation in these contexts is very low.

As studies suggest there is an almost default assumption of **'structured dependency'** in these settings where it is social *not civic* participation that constitutes the main form of participation. In these settings there is often 'little or no importance attached to the 'possibility of democratic participation'.<sup>33</sup>

### Promoting a Healthy Culture of Civic Participation

For an Age-friendly City there is a need both to:

- > be **alert to particular contexts** in which the expectation and possibility of democratic participation is limited; but also to,
- > identify ways in which attitudes and practice within those contexts can be changed to **enable and empower** older people to participate more fully.<sup>34</sup>

An Age-friendly City, in this way, needs to encourage an atmosphere of healthy participation: where participation and discussion is made to feel legitimate and 'permissible.' Studies suggest this is particularly true for those 'service' contexts where feelings of 'gratitude' for service provision can inhibit people from making suggestions. Moreover, that sense of healthy participation is often highly dependent, as studies suggest, on the sense that views are being listened to and that the act of participating in some form (making suggestions, for instance), will in itself be effective in some form.<sup>35</sup>

Fostering this more inclusive participative culture within organisations, institutions and procedures involves a whole range of other shifts in organisational behaviour and cultures. There is the need, as studies suggest, to both encourage and attend to 'dissenting as well as majority voices' as well as incorporate different styles and processes of exchange that can support and encourage civic participation and engagement in older age.<sup>36</sup> This might involve:

- > focusing on the **process** of participation not just on its outcomes;
- > investing in the **active facilitation** of civic participation;

“

Civic participation and employment represents a key domain that acknowledges: the different ways in which older people **continue to contribute** to and participate in society in some form - whether that involves (ongoing) employment in the workplace, volunteering, or taking on different types of citizenship roles.

- > allowing and supporting **different deliberative models** (including storytelling) as valid, recognised and legitimate forms of exchange;
- > deploying **'greeting' techniques** that allow conflicting views to be expressed within an environment without participants falling out;
- > being conscious of the degree to which **'styles of exchange** familiar in formal debate' are seen to limit the development of 'alternative' discourse.<sup>37</sup>

At its most basic level, though, civic participation is reliant on older people being able to access, get involved in and to act as representatives in different areas of civic and public life:

- > on governing body committees;
- > in working groups and parties;

- > in formal (and informal) consultation processes that occur as a matter of course (in public policy and planning);
- > being involved in advocacy and in self-help groups.<sup>38</sup>

These fundamentals of civic participation are, however, dependent in turn on access to information and, within formal processes of democratic participation, on knowledge of actual procedures. As studies suggest, the gap between a person's desire to participate in civic affairs (broadly defined) and the reality of taking on these civic responsibilities is often based on inadequate access to the kind of information that is needed in the first place for people to be able to 'make judgements', 'exercise choice' and express views with authority and confidence.<sup>39</sup>

## Next steps\*

> Strategy    > Programme    > Delivery

## Strategy



generate city-wide commitments to acknowledge the **VALUE** that older volunteers bring into the city (supporting opportunities for volunteering in later life)



secure city-wide commitments to **ACTIVELY PROMOTE** older people's **RIGHTS** and ability to participate in the civic life of the city



sign up to a **LONGER-TERM** strategic approach to support the employment options and welfare of older people post-retirement

\* The following pages outline a series of RECOMMENDATIONS for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Civic Participation and Employment across the city. These recommendations are broken down into three categories, to support the development of city-wide STRATEGY, PROGRAMMES and forms of DELIVERY.

## Programme

- > work with public and private sector employers across the city to PROMOTE the SKILLS and VALUE of older workers
- > work with employers to generate HEALTHY and SUPPORTIVE and NON-DISCRIMINATORY working environments for older workers
- > improve access to CONTINUING EDUCATION and SKILLS DEVELOPMENT to support older workers and those out of work back into work
- > devise programmes that make volunteering an ATTRACTIVE, AFFORDABLE and ACCESSIBLE option for older people to take up
- > develop TRAINING schemes and initiatives that support older volunteers gain new skills and encourage professional and PERSONAL DEVELOPMENT
- > work in partnership with public and private sector organisations to MAXIMISE and PROMOTE volunteering OPPORTUNITIES for older people across the city
- > support programmes and initiatives that foster a LIVELY CULTURE of civic participation together with older people

## Delivery

- > work closely with employers to ensure that the delivery of Age-friendly work environments meets the DIVERSE NEEDS of an older workforce (e.g., from informal carers to those with illness or disability)
- > work in partnership with local HIGHER EDUCATION institutions to provide training opportunities for older people: both for those looking to get into work as well as for those already in work
- > ensure the delivery of work-related schemes support older workers in NON-STANDARD types of employment
- > promote GOOD QUALITY volunteering schemes for older people across the city (i.e., support meaningful and purposeful volunteering activities)
- > address CULTURAL BARRIERS to volunteering in older volunteers (e.g., target schemes to less well-represented groups)
- > promote and disseminate practical examples of how civic participation can be ENCOURAGED and NURTURED in a variety of different ways in a variety of different settings



# Resources and toolkits

**Older People as Volunteers**  
(Age UK)

**Engagement Toolkit**  
(Age UK)

**Involving Older People**  
(Joseph Rowntree Foundation: 2005)

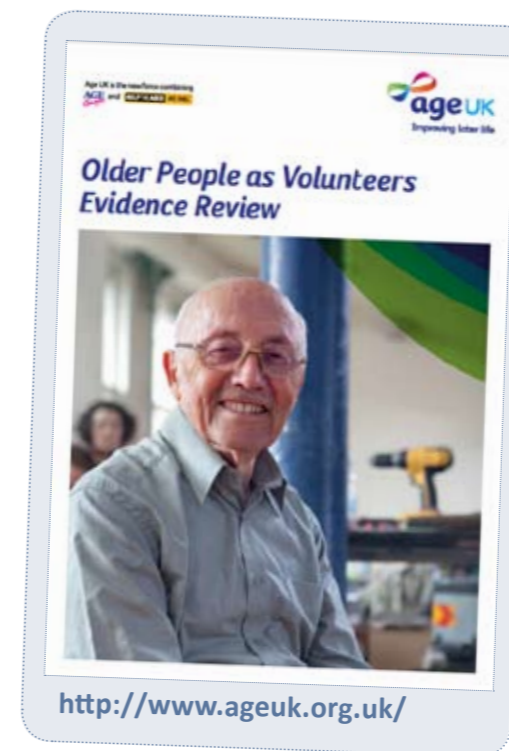
**The Age and Employment Network**  
(www.taen.org.uk)

**Understanding the Older Entrepreneur**  
(ILC-UK: 2011)

**Older People 'Getting Things Done'**  
(Joseph Rowntree Foundation: 2006)

**Civic Engagement, Older Adults and Inclusion**  
(Generations: 2006)

**Guide for Civil Dialogue on Promoting Older People's Social Inclusion**  
(Age Platform Europe: 2010)





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*Staying connected with events and people and getting timely, practical information to manage life and meet personal needs is vital for active ageing.”*

[ Global Age-friendly Cities: A Guide (WHO: 2007), p. 60 ]

## Age-friendly Communication & Information

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## Key facts

- Good quality information and communication provides older people with the **necessary resources** to make informed decisions, secure rights, and act in their own best interests.
- Older people – in common with all age groups – value **familiar, regular** and **established** forms of communication.
- Communication by **word of mouth** is among the most effective forms of communicating and generating opportunities for certain kinds of activities in older age.
- Access to good quality information leads to specific **gains in health and wellbeing**.
- Failure to access information and advice when it is needed can increase the risk of long-term, multiple problems, increasing the **risk of social exclusion**.

## Communication & Information

[ summary ]

Staying in touch and connected with the world is a vital aspect of an Age-friendly city. Communication and information supports that ongoing connection with the world in a variety of ways: providing effective signposting to key services, leisure and social resources; advocacy and practical advice.

This Framework outlines some of the research in this area and considers the degree to which both formal and informal communication and information supports good quality and meaningful lives in older age. Its key points draw attention to:

- the vital role of communication and information in supporting social and civic participation, health and wellbeing in older age (particularly around life-changing events associated with older age)
- the high value that older people place on both formal and informal forms of information and communication
- the barriers and challenges to the effective provision of communication and information (from affordability and 'cultural legibility' to the challenges of emerging technology)
- the vital role of communication and information in supporting informed and meaningful choice

# Communication & Information

[ a review of recent research ]

## Communication and Information in an Age-friendly City

Communication and information is a vital part of an Age-friendly city. It is the key mechanism through which older people gain access to advice, are signposted to key services, become aware of social and leisure opportunities, as well as access emotional support through formal and informal social networks.

Moreover, for an Age-friendly City, communication and information can be seen as one of the principal vehicles upon which the different domains depends. *Social and Civic Participation, Respect and Social Inclusion like Housing and Transportation* are each, in their own way, reliant on **effective** and **timely** communication and information, whether that communication is delivered through formal, structured channels or gained informally through personal social networks and interac-

tions – where, as studies have shown, there is a heavy reliance on others within networks for the provision and dissemination of information.<sup>1</sup>

For an Age-friendly City it is important to bear in mind that there is both an **informal** as well as **formal** dimension to this particular domain. Communication by word of mouth, for instance, has been shown to be among the most effective forms of communicating and generating opportunities for certain kinds of activities in older age.<sup>2</sup>

## The Real Value of Communication and Information

The value of effective and timely communication is a vital aspect of older people's everyday lives. Particular transitions associated with later life, if they are to be managed properly, depend on the provision of reliable and effective information and communication.<sup>3</sup>

On a practical level, timely and good quality information allows older people to access basic resources, facilities, entitlements and benefits, gain access to the 'right' help and resources at the right time.

The provision of information and communication is a key resource helping older people to, for example:

- > secure better housing;
- > gain improved access to transport;
- > navigate and access support and social care services more effectively; as well as,
- > access financial entitlements (being made aware of and being able, for instance, to access new and 'backdated' benefit claims).<sup>4</sup>

But research has also drawn attention to the way in which good quality information and communication can:

- > promote the 'independence', 'involvement' and 'interests' of older people; and,
- > provide older people with the necessary resources through which to make informed decisions, 'secure rights', and act in their own best interests.<sup>5</sup>

In this way, the provision and availability of good quality information and communication: expands and supports opportunities for civic and social participation in later life; enables older people to access the resources of the city; helps reduce the likelihood of social isolation; and contributes, in turn, to improved physical and mental health and wellbeing. Case studies have demonstrated particular improvements in health and morale that result from being able to access good quality information, from 'greater confidence' and 'increased social contact' through to greater 'involvement in the community'.<sup>6</sup>

## The Challenges & Barriers to Effective Communication

There are, as this research shows, clear and wide-ranging benefits associated with the provision and availability of good information and communication. These benefits can be seen to work on a number of different levels – **practical**, **material** and **emotional**. These benefits include:

- > signposting to key services and other resources (that can also alleviate pressures on health and social care services);

- > helping solve problems (providing some practical gain, improve a particular situation, remove an issue or barrier);
- > relieving frustration or anxiety – reassuring, dispelling myths (particularly in relation to recently diagnosed health conditions).

Moreover, the evidence suggests that older people themselves place a particularly high value on information – more so than for any other generational group – particularly in areas such as health, income, finance, recreation and leisure.<sup>7</sup>

There are, however, a number of challenges and barriers associated with the provision and availability of ‘Age-friendly’ communication and information. Many of these challenges relate to the quality, nature and timeliness of that communication.

#### >> information at the right time and right point

Research has demonstrated, for instance, the importance of information and advice given at the right point in time for it to be at all useful – and the advantages and disadvantages of particular ways of accessing communication and information.

Studies have, for instance, examined the relative benefits of ‘one-stop-shop’ communication and information hubs that provide a single source of information versus communication and information strategies that operate via a ‘multiple entry doors’ system, ensuring that older people’s opportunity to access information and services are maximised through multiple points of contact.<sup>8</sup>

#### >> the quality of communication and information

There is also the question of the quality of information and trust in the form of communication delivered: i.e., that information is trusted and felt to be reliable. This relates, in part, to the high value that is placed among older people on familiar (regular) and established forms of communication, with particular trust placed in face-to-face communication.

*It is important, in this context, to note the obverse to trusted and supportive forms of communication. Targeted scams, for instance, that communicate in ways that deliberately exploit older people (e.g., for financial gain) play on and potentially undermine trust in more reliable forms of communication.*

There are other, more obvious material and physical barriers that prevent older people from accessing good quality information and communication. These range from questions of:

#### >> affordability and availability of information

The availability and affordability of information – both for older people themselves as well as local authorities, charities, and services providers – are key issues given that communication costs can prevent the effective dissemination, outreach and uptake of information.<sup>9</sup>

#### >> clear communication and ‘legibility’ barriers

Changing ‘functional ability’ – age-related impairments in sensory and cognitive function (vision, sight loss, cognitive difficulties) – means that, on a practical level, clarity of information delivery is all the more vital in older age given that the interpretation of information can often be an issue. As studies have shown, communication impairments can, ‘significantly reduce’ the quality of life for older people.<sup>10</sup>

There is, therefore, as studies have pointed out, a need to communicate information in a way that is clear,

digestible, accessible but also to **avoid information overload, complexity** and confusion. This might involve, for instance, making sure that information is correctly labeled – i.e., avoiding the kind of confusion that arises when the delivery of information and advice is, for instance, being delivered by services that are actually called something else (e.g., Welfare Benefits Service).<sup>11</sup>

#### >> sensitive communication

Other barriers to effective communication revolve around issues of cultural and **linguistic difference**. This involves providing information and communicating in ways that are linguistically and culturally appropriate and in ways that accommodate languages other than English.

There is a sense too in which culturally sensitive forms of communication involve avoiding stereotyped patterns of communicating with older people too which can in themselves be barriers to effective communication. The use of ‘elderspeak’, for instance, verbal expressions and gestures that demean and undermine older people have been shown to negatively impact on effective communication.<sup>12</sup>



### New Forms of Communication

For an Age-friendly City there are a more complicated set of challenges that are starting to surface as changing communication patterns start to emerge within society, raising the broader question: how far do these emerging forms of communication make themselves open and available to those in older age?

The increasingly digital and virtual nature of contemporary communication, in this sense, presents specific challenges as well as opportunities for older people who have grown up with and developed a working familiarity with different forms of communication, whether that is print-based media, landline phones or reliance on non-virtual modes of communication.

For many older people there are significant advantages to be found in the use of these emerging technologies that range from:

- > accessing specific pieces of information and advice (oneself);
- > financial benefits (being able to take advantage of cut-price offers on goods and services that are only available online);

- > being able to stay in touch with those at a distance (with family and friends overseas). This is, arguably, particularly relevant to immigrant populations)
- > exploring opportunities for new forms of social communication and participation: from the flexibility of mobile communication technologies to social networking sites that are, increasingly, accommodating an older age group.

For a great many, however, there are significant challenges associated with accessing and making use of this technological change.

These challenges involve issues around:

// **adapting to new technologies** (on a practical level) and the challenge of navigating and learning new systems that are unfamiliar and oftentimes designed with a different generational group in mind;

// a more deep-seated challenge in 'adapting' to new technology that involves not only learning and developing new digital skills but involves a cultural shift and loss of something else too. Giving up on more familiar forms of communication (e.g.,

away from the personal) can be a challenge in itself. But there is also a certain **discomfort** that can accompany this shift towards new technologies (particularly when there is a familiarity and comfort in using 'older' forms of communication).

Research in this area of new technologies has suggested policy evolve recommendations that support older people in adapting to new ways of communicating – via digital training, for instance. But there is also a need for these emerging technologies, its designers and for technological change to adapt to and respond to the valid needs of older people: developing new communication and information systems in ways that are co-designed with and that meet the needs of older people – particularly around questions of design accessibility and useability.

It is important, however, to note that researchers have also pointed out that there is a need to accommodate and make space for 'old-fashioned' technologies and ways of communicating as current and valid and not simply to dismiss these as redundant if they are being currently used (in which case they are, to state the obvious, still 'contemporary' and not redundant).

// One of the major and most significant barriers, however, to accessing and making use of the resources and opportunities offered by new digital technology is its **cost** and affordability. Access to new technology involves hardware, software and infrastructural costs that, while affordable for a particular segment of the older population is for many others unaffordable. This puts those already at risk of social exclusion at risk of further exclusion from vital channels of communication, resources, benefits.

### Communication and 'Choice' in an Age-friendly City

In the current political climate there is, arguably, a particular and urgent need to attend to the domain of communication and information (both new and old), given the growing focus in government policy on extending choice in public services, in increasing independence and in giving people more personal responsibility.

There are, however, as researchers have identified, serious risks that this 'widening of choice' will actually, given the context of budgetary constraints and scaling back within which this widening of choice is being made,

result in: a confusing shifting around of where sources of information and advice can be found and a reduction in tangible, familiar and trusted forms of communication (e.g., printed newsletters) that are so important to older people in particular.

Moreover, the basic premise of ‘extending choice’, whether that means managing a personal budget or thinking about housing choice in later life, depends on a person’s ability to make informed, well-judged decisions that are made genuinely in their **own best interest**. That ability to make informed choice, however, is reliant on the availability of effective and good quality communication and information. As Age UK argues:

*‘If older people are to benefit from these developments [of widening choice, independence and personal responsibility], the state has a crucial enabling role to play by ensuring that they have access to the information and advice they need to make informed decisions.’<sup>13</sup>*

For those on the margins of society, where questions of affordability, low literacy levels, language barriers or lack of confidence are more of an

issue, there is a particular risk that social exclusion is perpetuated through the non-availability of, or inability to access good quality information and communication.

*‘Failure to access Information and Advice when it is needed can increase the risk of long-term or multiple problems, leading to increased risk of social exclusion.’<sup>14</sup>*

Given the ‘overriding importance’ of communication and information as a key mechanism through which to access resources, entitlements and services (and relieve social isolation) there is a particular need to ensure that older people in deprived neighbourhoods are, as a priority, able to access an effective and good quality information and communication infrastructure.<sup>15</sup>

“

The provision and availability of good quality information and communication expands and supports, opportunities for both civic and social participation in later life; enabling older people to better extract the resources of the city.”

## Next steps\*

> Strategy    > Programme    > Delivery

## Strategy



commit to promoting the particular **VALUE** of providing reliable, effective and affordable communication and information to older people



secure city-wide commitments to ensure that there is a **BASIC** and **EFFECTIVE** communications system in place for older people across the city



commit to promoting **BEST PRACTICE** in communication with older people: advancing examples of quality, clarity and accessibility of information

\* The following pages outline a series of **RECOMMENDATIONS** for policymakers and commissioners to consider as they look to develop initiatives to improve older people's experience of Communication and Information across the city. These recommendations are broken down into three categories, to support the development of city-wide **STRATEGY**, **PROGRAMMES** and forms of **DELIVERY**.

## Programme

- > develop **MINIMUM STANDARDS** for legibility, clarity and quality of communication with older people (across a variety of different media)
- > develop programmes to support older people **ADAPT** to new forms of communications technologies (e.g., social media and digital technologies)
- > devise initiatives that maintain and support **TRUSTED** forms of communication (e.g., via word-of-mouth, informal networks to seemingly 'outdated' technologies)
- > support initiatives that ensure information is provided across a **VARIETY** of different aspects of everyday life (from essential, basic services to opportunities for cultural participation and leisure activities)
- > develop programmes to monitor the **EFFECTIVENESS** of different communication and information systems (from information hubs, 'multiple entry door systems' to local champion schemes)

## Delivery

- > work with older people to devise **MINIMUM STANDARDS** of communication
- > work with designers, technology companies and design students to encourage **AGE AWARE** product design to be built into all new public communication and information systems
- > ensure communication and information with older people is **CULTURALLY APPROPRIATE** and **ACCESSIBLE** to a variety of different groups
- > promote principles of **CLARITY, REGULARITY AND RELIABILITY** in the dissemination of information (**AVOID** information **OVERLOAD**)

## Resources and toolkits

**Older People and the Internet**  
(ILC-UK: 2011)

**Transforming Lives**  
(Age Concern: 2008)

**Information and Advice for Older People: Evidence Review**  
(Age UK)

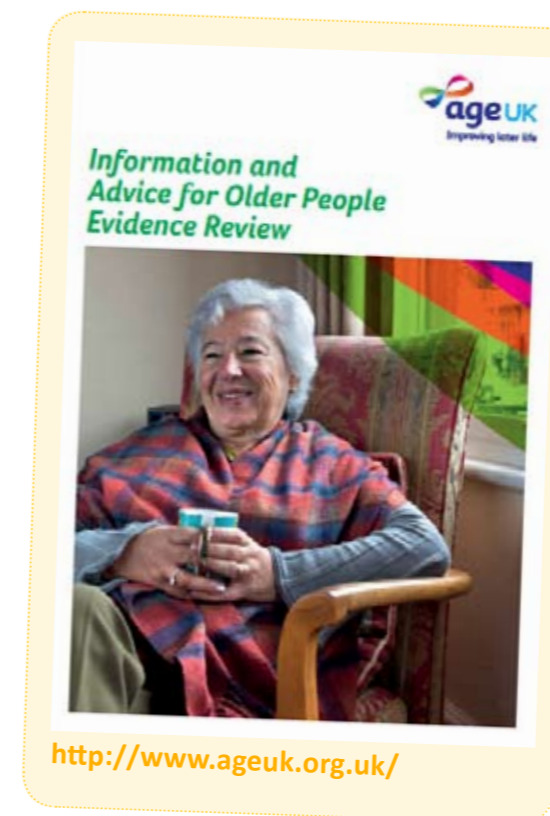
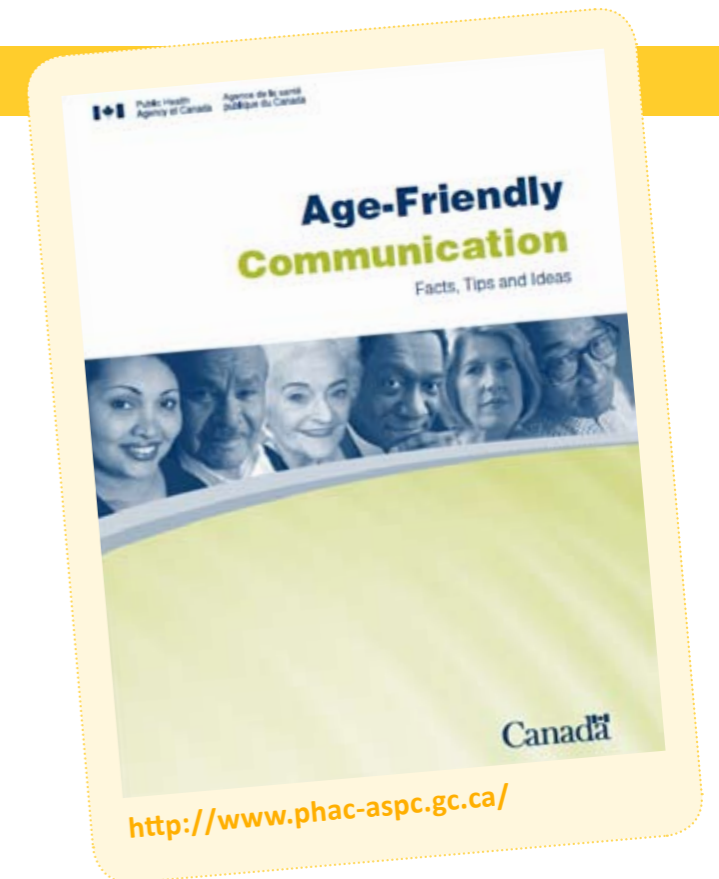
**Involve, Engage, Empower**  
(Age UK)

**Age-friendly Communication: Facts, Tips and Ideas**  
(Public Health Agency Canada: 2010)

**Creating an Age-friendly NYC: One Neighbourhood at a Time**  
(Age-friendly NYC: 2012)

**'That Little Bit of Help'**  
(Joseph Rowntree Foundation: 2005)

**Ireland's Age-Friendly Cities and Counties Programme**  
(Age-Friendly Cities and Counties, Ireland)







# On Evaluation

## Developing a Framework for Evaluating an Age-friendly City

Appendix A contains a sample template for Age-friendly evaluation that cities can use and fill out once a year for each of the Age-friendly domains. This sample template (for the domain of *Outdoor Spaces and Buildings*) has been drawn up in a way that will help cities structure their **annual assessment** of the 'Age-friendliness' of their city across each of the WHO Age-friendly domains. It offers what is, hopefully, a realistic framework within which cities can evaluate their Age-friendly programmes and initiatives – even where cities find themselves constrained by limited resources.

There are a spread of different evaluation techniques offered in this sample evaluation template. These range from: **indicators** of global and local Age-friendly measures; **qualitative data** and information that provide a direct, experiential review of Age-friendliness across the city; through to a **geographic picture** of the city, here articulated for Manchester – that spatialise the spread of Age-friendly initiatives, programmes and the effectiveness of Age-friendly policies across the city.

There is also a section identifying 'Next Steps' for each domain, based on mitigating risks, addressing concerns and highlighting key points and conclusions drawn from the process of annual assessment.

## On Evaluation and Measuring: A Spread of Techniques

This broad spread of evaluation techniques is deliberate. By providing a palette

of different approaches to evaluation within a single framework, these templates allow cities to gain a more holistic picture of the Age-friendliness of their city. With quantifiable data drawn from indicators (including the WHO's global set of indicators, still in development) through to qualitative information, commissioned pieces of evaluation and research (specific to particular Age-friendly projects) – these templates provide, on a single page, a more realistic snapshot image of the success and experience of Age-friendly programmes across each of the WHO domains.

This '**mixed-method**' approach is a key part of Age-friendly evaluation as cities work to gain an integrated picture both of the city and the lived experiences of its older residents. In this context, it is particularly important to be mindful of the kinds of measures that are valued and given weight within Age-friendly evaluation to ensure that the evaluation techniques used support cities' 'continuous cycle of improvement' across *all* aspects and domains of Age-friendliness.

It is worth noting that, historically, certain kinds of metrics have tended to favour and give more weight to particular domains, and aspects of certain domains over others even as the Age-friendly Cities framework gives an equivalence of status to each of the Age-friendly domains. Invariably, there will always be certain aspects of a city (the physical fabric of the built environment, for instance) that are more easily quantifiable, measurable and thus more easily able to demonstrate improvement in (or a step backwards) in tangible terms. But there is more to the evaluation of *Outdoor Spaces and Buildings* than quantifying what is physically absent or present: the number of publicly-available toilets or benches, for instance. A similar set of concerns could be applied to issues around how cities assess those less quantifiable approaches to Age-friendliness: the question of creativity or the dynamics of reciprocity that are so key to the domain of *Social Participation*, for instance.

In this sense, it is vitally important, for cities to include and seek out **alternative 'measures'** so that these other aspects of Age-friendliness (creativity, respect and social inclusion, notions of reciprocity) are included and integrated within an overall evaluation process. This may involve, for instance, giving weight and

visible space to: subjective data, ethnographic measures, anecdotal evidence, visual data, the ‘metrics’ of older people’s own experiences as conveyed directly to the city – alongside more familiar metrics and measures.

Beyond a broad spread of evaluation tools and techniques, Age-friendly evaluation also demands a **sensitivity to the scale** at which Age-friendly programmes, strategies and initiatives are assessed. In each template overleaf, there has been a deliberate attempt to draw out the different levels at which Age-friendly strategies, programmes and initiatives need to be addressed: from city-wide through to neighbourhood level and the street down to the individual – the older resident – themselves.

**Any meaningful evaluation of Age-friendliness needs to take place at multiple scales in order to account for the various initiatives, strategies and experiences of Age-friendliness that occur across the city.**

#### Participation and Inclusion in Age-friendly Evaluation

In the last analysis, Age-friendly evaluation is reliant on the participation and involvement of its older residents. Participatory approaches to evaluation are key in the assessment of Age-friendliness. Within Manchester that involvement has, so far, been structured through the formal mechanisms of the *Valuing Older People Board* and *Forum* that meet on a regular basis throughout the year and hold the city’s ageing programme to account. Through these structures Manchester has a well-established mechanism through which it can share information and gain feedback on its ongoing Age-friendly strategies, programmes and initiatives.

There is, however, a need for Age-friendly Cities to develop more embedded approaches to evaluation that reflect older people’s views and experiences from across the city – in different neighbourhoods and contexts – outside those more formal structures and mechanisms that may, inadvertently, exclude certain groups of older people. Within Manchester Dr Tine Buffel is developing, together with Professor Chris Phillipson, a new Manchester-wide survey to assess Age-friendly

“

A ‘**mixed-method**’ approach is a key part of Age-friendly evaluation as cities work to gain an **integrated picture** both of the city and the lived experiences of its older residents”.

activity, aspirations and experiences at neighbourhood level. Developed as a participatory study, based on the pioneering Belgian Ageing Survey, this study will provide an invaluable framework that will help support Manchester (and, ultimately, other Age-friendly Cities) in developing an Age-Friendly evaluation Framework that is more fully representative and inclusive.

**Links for more details on this study and other resources to support evaluation are provided overleaf.**

>>

# Evaluation Resources

## WHO Cycle of Continual Improvement

The WHO Cycle of Continual Improvement is a 4-stage process that members of the UK Network of Age-friendly Cities commit to as part of their membership of the Global Network. The cycle involves an ongoing process of: planning, progress evaluation, implementation and continual improvement. Membership of the global network is dependent on cities' commitment to progress through this cycle of improvement over a 5-year period. Further details can be found at:

[www.who.int/ageing/age\\_friendly\\_cities\\_process/en/](http://www.who.int/ageing/age_friendly_cities_process/en/)

## WHO Age-friendly City indicators

The WHO Centre for Health Development (WKC) is currently working to develop a new set of indicators for use across the Global Network of Age-friendly Cities. The aim behind the development of these indicators is to provide both technical guidance as well as a framework to help cities members monitor the 'Age-friendliness' of their cities. More information on the development of these indicators can be found at:

[www.who.int/kobe\\_centre/ageing/age\\_friendly\\_cities/AFC\\_Quebec-mtg\\_SEP13/en](http://www.who.int/kobe_centre/ageing/age_friendly_cities/AFC_Quebec-mtg_SEP13/en)

## Active Age Index

The Active Age Index is a new tool for measuring 'active and healthy ageing' across the European Union (EU). Developed as a joint project between the European Commission (EC) and the United Nations Economic Commission for Europe (UNECE), the index measures the degree to which older people across the EU are able to 'age actively'. Individual country scores show the extent to which older people are able to lead independent lives and participate in paid employment and social activities. To access and use the Active Age Index, visit:

[www1.unece.org/stat/platform/display/AAI/Active+Ageing+Index+Home](http://www1.unece.org/stat/platform/display/AAI/Active+Ageing+Index+Home)

## Old Moat Age-friendly Old Moat Research and Evaluation Toolkit

The Old Moat Age-friendly Research and Evaluation Toolkit is a practical resource to help communities assess and evaluate the Age-friendliness of their local neighbourhoods over time. From focus groups to community audits to spatial data analysis, the toolkit outlines a range of Age-friendly assessment techniques that have already been tested out in the Old Moat ward of Manchester. Sample participation diaries and consent forms are also provided for reference. To download a copy of the toolkit, visit:

[www.southwayhousing.co.uk/my-neighbourhood/age-friendly-neighbourhoods.aspx](http://www.southwayhousing.co.uk/my-neighbourhood/age-friendly-neighbourhoods.aspx)

## Manchester Ageing Study

The Manchester Ageing Study is a new Manchester-wide project assessing Age-friendly activity, aspirations and experiences at neighbourhood level. Developed as a participatory study, based on the pioneering Belgian Ageing Survey, the Manchester study provides a helpful framework for thinking about how to develop an inclusive Age-friendly evaluation framework. More details about the Manchester Ageing Study and the original Belgian Ageing Study Survey (including sample questionnaires), can be found at:

[www.micra.manchester.ac.uk/research/featured-projects/promoting-active-ageing](http://www.micra.manchester.ac.uk/research/featured-projects/promoting-active-ageing) | [www.belgianageingstudies.be](http://www.belgianageingstudies.be)

## Directory of Data Sources

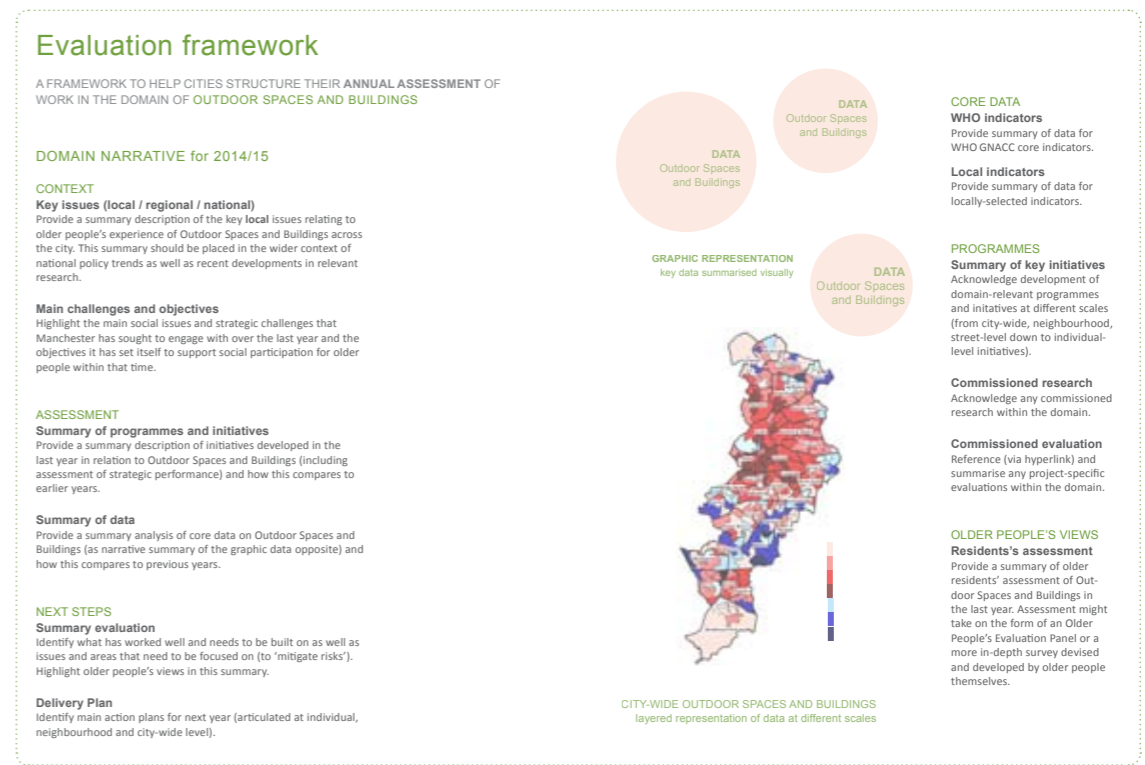
The Directory of Data Sources is a compendium of age-related data sources produced by Manchester City Council as a useful resource for accessing currently-available local data. Compiled, recently revised and to be shortly updated to reflect the different Age-friendly domains, this directory is available for reference from the Age-friendly Manchester team.

[www.manchester.gov.uk](http://www.manchester.gov.uk)

# Appendix A

## A template for Age-friendly Evaluation\*

# Evaluation Template\* Outdoor Spaces and Buildings



\* The following page provides a SAMPLE TEMPLATE for evaluating the domain of Outdoor Spaces and Buildings. This outline framework aims to help cities structure their annual assessment of work for a given domain. The template overleaf (drawn up to represent Age-friendly Manchester) can be adapted and applied to be used for any of the Age-friendly domains.

# Evaluation framework

A FRAMEWORK TO HELP CITIES STRUCTURE THEIR **ANNUAL ASSESSMENT OF WORK** IN THE DOMAIN OF **OUTDOOR SPACES AND BUILDINGS**

## DOMAIN NARRATIVE for 2014/15

### CONTEXT

#### Key issues (local / regional / national)

Provide a summary description of the key **local** issues relating to older people's experience of Outdoor Spaces and Buildings across the city. This summary should be placed in the wider context of national policy trends as well as recent developments in relevant research.

#### Main challenges and objectives

Highlight the main social issues and strategic challenges that Manchester has sought to engage with over the last year and the objectives it has set itself to support social participation for older people within that time.

### ASSESSMENT

#### Summary of programmes and initiatives

Provide a summary description of initiatives developed over the last year in relation to Outdoor Spaces and Buildings (including assessment of strategic performance) and how this compares to earlier years.

#### Summary of data

Provide a summary analysis of core data on Outdoor Spaces and Buildings (as a narrative summary of the graphic data opposite) and describe how this compares to previous years.

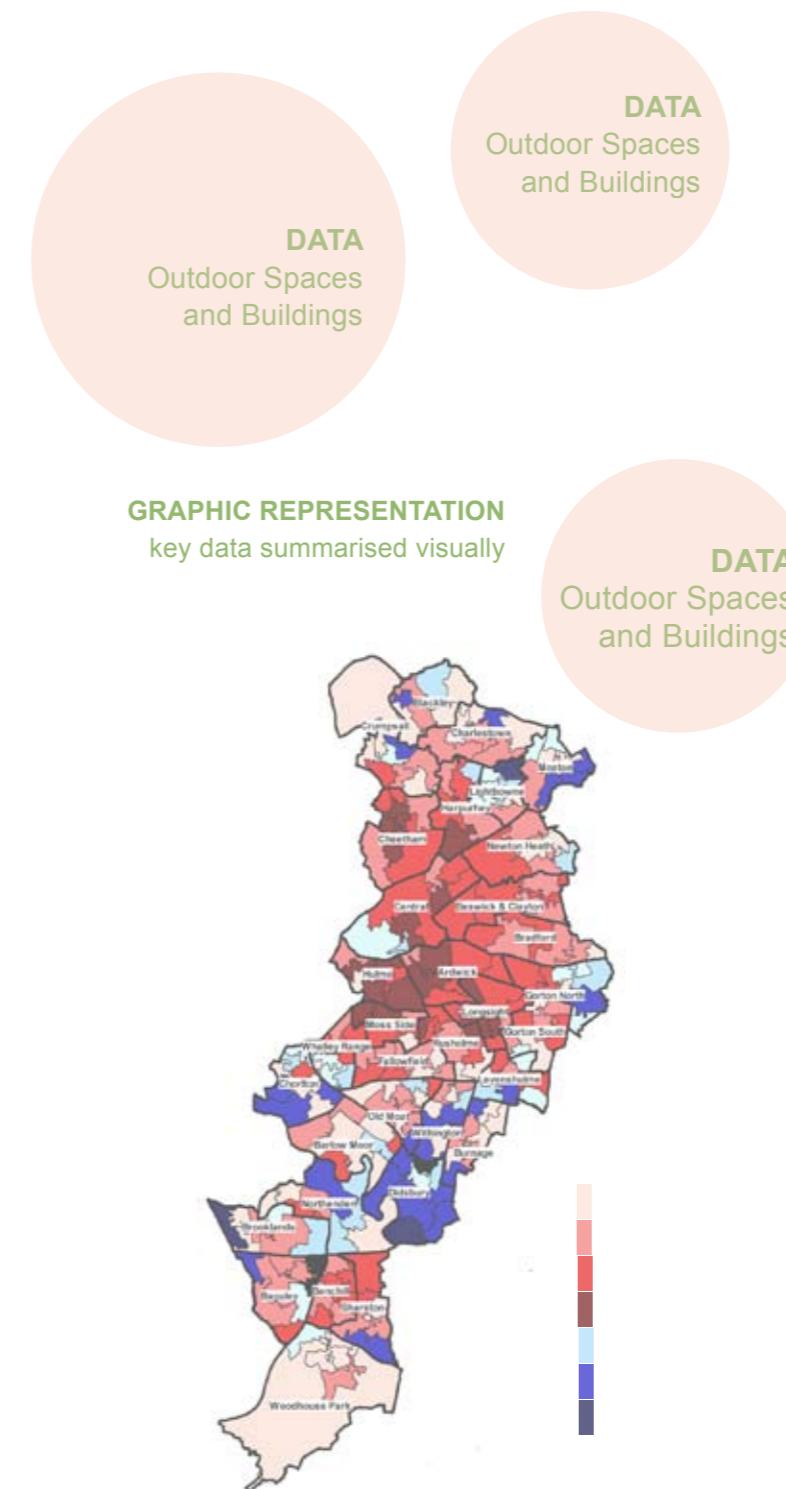
### NEXT STEPS

#### Summary evaluation

Identify what has worked well and needs to be built on as well as issues and areas that need to be focused on (to 'mitigate risks'). Highlight older people's views in this summary.

#### Delivery Plan

Identify main action plans for the next year (articulated at individual, neighbourhood and city-wide level).



### GRAPHIC REPRESENTATION

key data summarised visually

CITY-WIDE OUTDOOR SPACES AND BUILDINGS  
layered representation of data at different scales

### CORE DATA

#### WHO indicators

Provide summary of data for the WHO GNACC core indicators.

#### Local indicators

Provide summary of data for locally-selected indicators.

### PROGRAMMES

#### Summary of key initiatives

Acknowledge development of domain-relevant programmes and initiatives at different scales (from city-wide, neighbourhood, street-level down to individual-level initiatives).

#### Commissioned research

Acknowledge any commissioned research within the domain.

#### Commissioned evaluation

Reference (via hyperlink) and summarise any project-specific evaluations within the domain.

### OLDER PEOPLE'S VIEWS

#### Residents' assessment

Summarise older residents' assessment of Outdoor Spaces and Buildings over the last year. Assessment may take on the form of an Older People's Evaluation Panel or a more in-depth survey devised and developed by older people themselves.

## Appendix B

### A template for an Age-friendly Action Plan\*

## Action Plan Template\*

### Respect & Social Inclusion

Strategy	Narrative	Indicators
<ul style="list-style-type: none"> <li>&gt; secure a city-wide commitment to MONITOR and CHALLENGE AGEIST attitudes and practices in local authority policy-making</li> <li>&gt; secure city-wide commitments to ACTIVELY INVOLVE older people in programmes and initiatives across the city</li> <li>&gt; commit to the public promotion of POSITIVE MODELS and images of ageing across the city</li> </ul>	<p>Provide a narrative summary of the action to be taken to address each of the recommendations outlined under strategy, programme and delivery (opposite).</p>	<p>Detail indicators to be used to monitor and assess actions (as outlined opposite).</p>
<p><b>Programme</b></p> <ul style="list-style-type: none"> <li>&gt; devise age awareness training and education programmes that CHALLENGE ingrained stereotypes and ageist practices</li> <li>&gt; promote a POSITIVE image of the DIVERSITY of people's experiences of ageing through city-wide public communications campaigns</li> <li>&gt; devise programmes and initiatives that SUPPORT older people in more MARGINALISED GROUPS (e.g., LGBT and BME communities)</li> <li>&gt; develop programmes and networks that support CROSS-GENERATIONAL INTERACTION</li> <li>&gt; devise initiatives that BUILD ON and PROMOTE older people's skills and experience</li> </ul>		
<p><b>Delivery</b></p> <ul style="list-style-type: none"> <li>&gt; promote age awareness training across a variety of DIFFERENT public and private SECTORS and organisations (from public education to service delivery to the workplace)</li> <li>&gt; actively involve a variety of DIFFERENT groups in social inclusion programmes (i.e., devise cross-generational not just inter-generational projects, work to include more marginalised groups of older people)</li> <li>&gt; work in partnership with Higher Education institutions, businesses, community groups to capitalise on both the EXISTING skills and untapped POTENTIAL of older people</li> <li>&gt; ensure positive images of ageing AVOID promoting a single 'successful' (and potentially exclusionary) way of growing old</li> </ul>		
<p><b>Action Plan</b> <b>Respect &amp; Social Inclusion</b></p>		

\* The following page provides a SAMPLE TEMPLATE for an Age-friendly Action Plan. Building on the recommendations outlined for each domain, this action plan template provides a framework for cities to outline the narrative, the actions and indicators against which cities will build on, implement and measure the effectiveness of recommendations (the 'Next Steps') outlined for each domain. The following page provides a sample view of how those recommendations under the domain of Respect and Social Inclusion might be turned into concrete and measurable actions.



## Strategy

- secure a city-wide commitment to MONITOR and CHALLENGE AGEIST attitudes and practices in local authority policy-making
- secure city-wide commitments to ACTIVELY INVOLVE older people in programmes and initiatives across the city
- commit to the public promotion of POSITIVE MODELS and images of ageing across the city

## Programme

- devise age awareness training and education programmes that CHALLENGE ingrained stereotypes and ageist practices
- promote a POSITIVE image of the DIVERSITY of people's experiences of ageing through city-wide public communications campaigns
- devise programmes and initiatives that SUPPORT older people in more MARGINALISED GROUPS (e.g., LGBT and BME communities)
- develop programmes and networks that support CROSS-GENERATIONAL INTERACTION
- devise initiatives that BUILD ON and PROMOTE older people's skills and experience

## Delivery

- promote age awareness training across a variety of DIFFERENT public and private SECTORS and organisations (from public education to service delivery to the workplace)
- actively involve a variety of DIFFERENT groups in social inclusion programmes (i.e., devise cross-generational not just inter-generational projects, work to include more marginalised groups of older people)
- work in partnership with Higher Education Institutions, businesses, community groups to capitalise on both the EXISTING skills and untapped POTENTIAL of older people
- ensure positive images of ageing AVOID promoting a single 'successful' (and potentially exclusionary) way of growing old

## Narrative

Provide a narrative summary of the action to be taken to address each of the recommendations outlined under strategy, programme and delivery (opposite).

## Indicators

Detail indicators to be used to monitor and assess actions (as outlined opposite).

## Action Plan

# Respect & Social Inclusion

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## Foreword

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2. WHO, *Active Aging: A Policy Framework* (Geneva: WHO, 2002), p. 12.
3. Ibid., p. 27.
4. WHO, *Global Age-friendly Cities: A Guide* (Geneva: WHO, 2007).
5. Ibid., p. 72.

## Why you should use this Framework

1. <http://www.nyam.org/agefriendlynyc/>
2. *Older people, independence and well-being: the challenge for public services* (Audit Commission and Better Government for Older People: 2004) and *A Sure Start to Later Life: Ending Inequalities for Older People. A Social Exclusion Unit Final Report* (Office of the Deputy Prime Minister: 2006).
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  6. IDGO TOO [http://www.idgo.ac.uk/new\\_projects/index.htm](http://www.idgo.ac.uk/new_projects/index.htm)
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  14. Tine Buffel, Chris Phillipson and Thomas Scharf, 'Ageing in urban environments: Developing 'age-friendly' cities', *Critical Social Policy* (May 2012), p. 7.
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## Further Reading\*

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The UK Urban Ageing Consortium is a collaborative partnership that is actively supporting the development of Age-friendly environments. Building on the combined expertise of its partners (Manchester City Council, Keele University, the University of Manchester and the Beth Johnson Foundation) the Consortium is committed to developing learning around 'Age-friendly' cities – and advancing public debate on urban ageing.



UK Urban Ageing Consortium

# **This Research and Evaluation Framework for Age-friendly Cities**

is a practical resource for cities looking to develop age-inclusive programmes and initiatives.

With key facts, evidence reviews and summaries for each of the WHO Age-friendly domains, this Framework provides a series of practical steps that cities can start to take to set up and evaluate their own successful Age-friendly initiatives.