



Equity and Inclusion Lens

Diversity Snapshot

SENIORS



**A City For Everyone
Une ville pour tous**



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By the year 2020, more than one in six Ottawa residents will be over the age of 65, as more of us will be entering the later years of our lives. Many seniors today remain physically fit, active, and continue to overcome countless challenges in our daily lives.

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This document is one of 11 Diversity Snapshots that serve as background information to aid the City of Ottawa and its partners in implementing the Equity and Inclusion Lens. To access, visit Ozone or contact us at EILens@ottawa.ca.

1. Who we are

By the year 2020, more than one in six Ottawa residents will be over the age of 65, as more of us than ever before will be entering the later years of our lives. Many seniors today remain physically fit, active, and continue to overcome countless challenges in our daily lives (SSCA 2009). While we may enjoy benefits by virtue of being a senior, many of us are not at ease with the label as it is associated with negative stereotypes.

We consider ourselves to be seniors at varying ages, for we all age differently. The federal government defines us as seniors when we reach 65 years of age or older. Since the 1990s, with an increase in the number of retirees due to government and institutional restructuring, the word “senior” has been attributed to a much younger category of people – from 60 years of age and older to as young as 50 years of age (Chappell 2003). For this reason, the City of Ottawa defines seniors at different ages according to the criteria of specific programs or services.

We experience our senior years differently depending on many factors in our lives:

- **If we are Aboriginal**, we are honoured as the historians and keepers of tradition. However, many of us live with the trauma of residential schools and the subsequent disintegration of our families and culture. Reclaiming our culture is key for our healing and quality of life.
- **If we are an immigrant**, we pass on the cultures, languages and traditions from our home countries to our younger family members in Ottawa. However, we may experience isolation due to language barriers and loss of traditional role in the community and extended family.
- **As visible-minority seniors raised in Canada**, we have contributed to building a stronger community in Ottawa over the years. However, we have also experienced racial barriers, and we are more likely to live in poverty.

IN OTTAWA

Seniors make up 12 per cent of city’s total population (102,595).

The average income for seniors is \$39,729, which is among the highest in Ontario.

66 per cent of seniors 65 years of age and over live with spouses or in a common-law relationship.

27 per cent of seniors live alone – 76 per cent of them are women.

Female seniors make up 53 per cent of the population 65-74 years of age, and 70 per cent of the age group 85 and over.

4.1 per cent of seniors in Ottawa have Aboriginal identity.

12 per cent of seniors are visible minorities. The five largest groups are: Chinese, South Asian, Black, Arab and Southeast Asian.

11.1 per cent of seniors primarily speak non-official languages at home.

(SPC 2008)

- ▶ **As gay, lesbian, bisexual or transgendered seniors**, some of us have been married and are parents and grandparents. Some of us have been living in long-term relationships, and others are living alone (Sage Ottawa). We may have hidden our sexual orientation or gender identity and now live with these contradictions.
- ▶ **If we are a woman**, we have supported our families, communities and the economy through unpaid and under-paid work. In our senior years, we are more likely than men to live longer, live alone, and live in poverty.

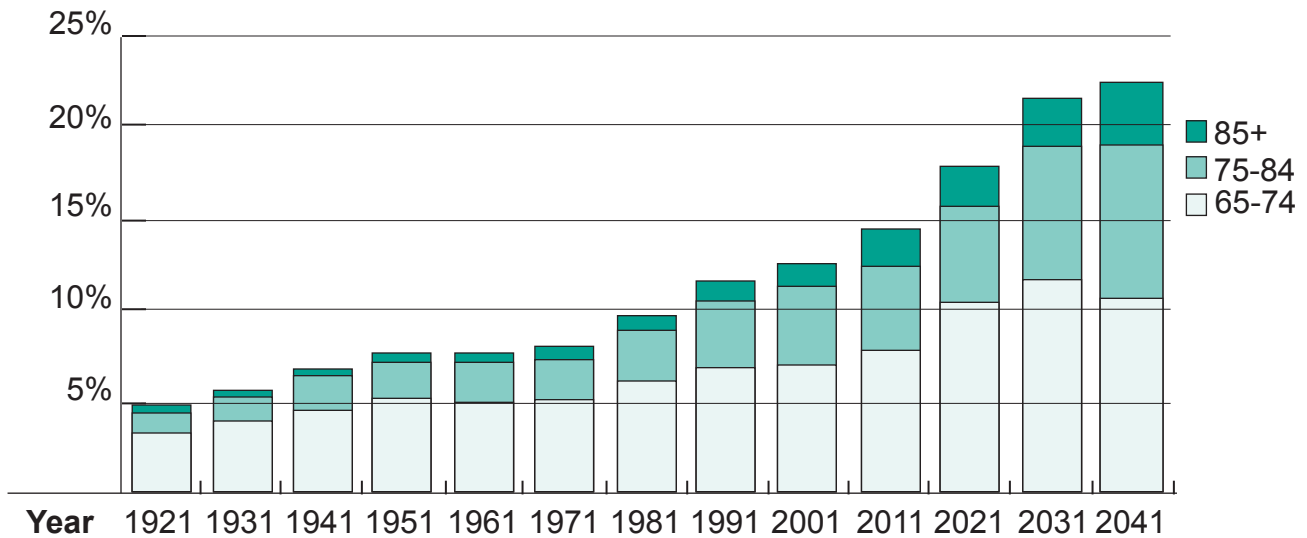
2. Contributions we make

As seniors, we play an irreplaceable role in the life of our communities, as caregivers and supporters of our families, volunteers and community leaders, taxpayers and caretakers of our community and family histories.

We are more likely to be providing help to others than to be receiving it (The Council on Aging of Ottawa 2008-a). Many of us help others with domestic work, home maintenance, outdoor work and childcare. We are among the most active volunteers in the community and significant donors to charitable organizations, providing 31 per cent of donations. Seniors today are more Internet savvy, educated and active than in previous generations, which allows many of us to continue working in the paid labour force well past typical retirement age.

“As seniors, we have the duty to act as *Stewards of Future Generations: elders working individually and together, to help make the world a better place for all who come after.*”
 (Roland Lecomte)

Seniors by age sub-groups, as % of the total population, Canada, 1921-2041



[Public Health Agency of Canada]

3. Barriers and inequities

1) Ageism

Aboriginal culture and traditional cultures around the world place significant value on their elders. In non-Aboriginal western culture, status increases from youth to middle age but declines as people approach retirement age and beyond.

Internalized ageism is often one of the biggest barriers for seniors, as they begin to believe they can no longer do things simply by virtue of being a senior. Seniors may come to believe stereotypes – that their memory automatically deteriorates as they age; that their body is on a continual decline; and that they will be depressed and bored after leaving the workforce (Novak 2005). Given these false but prevalent beliefs, service planners and providers may need to be proactive in empowering seniors.

2) Planning and provision of care

Seniors' needs for care change over time – as they reach different stages of aging, and if they experience various physical and mental illnesses. Appropriate care to allow a smooth transition between these stages is important for seniors. However, health and social service systems and different levels of government are not sufficiently coordinated. This makes it difficult for caring professionals and family members to pull together the right combination of services at the right time, and some seniors fall through the cracks as a result (SSCA 2009).

Many seniors prefer “**aging in place**” (i.e. continuing to live in the comfort of their own home while receiving appropriate care), while for others a long-term care facility is a better option. However, many seniors have difficulty accessing care in the place of their choice. For example, seniors who have a physical or mental illness may not need to stay in a hospital or a long-term care facility – yet they may not have the specific support to continue living at home (e.g., preparing meals, having a bath or taking medication).

This service gap often results in seniors receiving care in inappropriate settings. For example, patients awaiting Alternative Level of Care (ALC) are often placed in acute-care hospital beds rather than long-term care homes. This does not match the seniors' health-care needs nor their choice of residence, but can lead to other negative consequences (e.g., overload of patients in emergency rooms, cancelled surgeries, or compromised management of trauma patients). It also increases the wait times for hospital beds for other residents in the city (Ottawa ALC Strategic Committee 2006).

Ageism is discrimination on the basis of age that:

- ▶ makes assumptions about capacity
- ▶ removes decision-making processes
- ▶ ignores an older person's known wishes
- ▶ treats the older adult as a child

(SSCA 2009)

3) Income

Canada's income security system has resulted in the lowest incidence of low income among all developed countries (SSCA 2009)¹. In Ottawa, seniors aged 65 and over had a lower rate of poverty compared with the general population (11.9 per cent vs. 15.2 per cent before tax) (SPC 2008). However, many seniors live on a fixed income and often work part-time jobs after retirement in order to make ends meet. In 2006, 21 per cent of male seniors and 43 per cent of female seniors in Ottawa had an annual income of less than \$20,000 (SPC 2006).

“Eligibility to continue to work should be based on competency, not on some magical age.”
(SSCA 2009)

Legal regulations may compound their risk of living in poverty. For example, immigrant seniors may not yet qualify for a Guaranteed Income Supplement (GIS) (SSCA 2009). Senior women often find themselves living in poverty, as women spend less time on average in the paid labour force due to childrearing and family responsibilities, and work lower paying jobs than men. As a result, women end up contributing less overall to the Canada Pension Plan (CPP) and the Quebec Pension Plan (QPP), which are earnings-based (SSCA 2009). In the past, women working on farms were not eligible for CPP – this has contributed to the higher incidence of poverty among senior women today.

4) Access to information

Some seniors who prefer human contact, or who are not yet accustomed to new technologies, do not find the Internet or the automated attendant systems comfortable. Many seniors living in rural areas may not have access to high-speed Internet, as cable is not installed throughout the rural regions. This limits their access to information about the City and its services.

Seniors may require assistance in advocating on their behalf in order to have their needs met. For example, some seniors are not comfortable with touch tone telephone or triaged phone systems. Recent immigrant seniors may not speak English or French, and may need services and information in their own language. For those with visual and hearing loss, information available to the general public may not be accessible to them (City of Ottawa 2005).

1 The income system for seniors is composed of four pillars: the Canada Pension Plan or Quebec Pension Plan (CPP/QPP), employer-sponsored pensions, Old Age Security/ Guaranteed Income Supplement (OAS/GIS), and private income from earnings and savings (Canada's Aging Population: Senate Report, 2009)

5) Mobility

For seniors to remain connected to the community and to access recreation, it is important for them to be physically mobile. Many facilities may not be accessible to seniors with physical disabilities – for example, stairs may be the only way to get into the building or to the upper floors. Physical mobility aids (e.g., motorized scooters, wheelchairs and walkers) are often very expensive. Public transportation can facilitate senior mobility by lowering ramps, allowing enough time for seniors to get on the bus, and by passengers giving up seats for seniors.

Pedestrian safety is a concern for seniors. For example, walking along busy streets without sidewalks can be dangerous. Sidewalks that are not maintained properly, or not cleared of snow and ice, can also result in falls and accidents. Skateboarders and cyclists on sidewalks can startle and injure seniors. In other cases, the length of time given to cross the road at a crosswalk may not be sufficient for seniors with limited mobility (City of Ottawa 2005).

6) Transportation

Transportation is related to seniors' health issues. Seniors who lack access to appropriate transportation find it difficult to stay connected with their communities or access medical services, recreational programs and social activities. This leads to isolation, which affects their physical and emotional wellbeing. Since many seniors live on a fixed income, and some cannot afford a car, public transportation is a vital component of their active participation in the community.

Public transportation is often very crowded, and priority seating may not be available. Bus routes are not always accessible for seniors living in rural areas, as bus stops may be located far from their homes and the buses do not run very often. Not all seniors qualify for Para Transpo service, and for those who do, there are long wait times and a shortage of rural routes (City of Ottawa 2005). When caretakers need to reach seniors in rural communities, lack of public transportation can impede their efforts as well.

“A senior's independence, physical, emotional and social health as well as the ability to remain engaged in the outside world is dependent on one or another mode of transportation.”

(Ottawa Seniors Transportation Committee – cited in SSCA2009)

7) Isolation

Many factors may contribute to seniors spending long periods of time alone. If they experience reduced mobility, have low income, or lack transportation options, they are less likely to leave their home. Many seniors live in separate cities – or even countries – from their children, which limits their contact with their family. Because women tend to live longer than men, they are more likely to live alone in their senior years after their loved ones have passed away.

Reduced access to services contributes to seniors' experience of isolation. For example, social and recreational programs may not be designed to include seniors with physical or mental health issues. Male or female seniors may find themselves uncomfortable or isolated in social activities if gender difference is not taken into account. Aboriginal seniors or immigrant seniors may not be able to participate in recreational activities in their language.

Visible minorities living in a senior's residence may experience racism from their neighbours or staff members. Same-sex senior couples are often prohibited from sharing a room in a long-term care facility due to heterosexist policies (City of Ottawa 2005).

8) Housing

The vast majority of seniors live in private homes. For many, this is feasible without additional supports (SSCA 2009). About a quarter of seniors need help with one or more activities of daily living, yet many must manage alone if they do not have resources to access appropriate support.

Providing access to resources to enable seniors to continue to live in their home can promote their independence (e.g., affordable housing, home care, or dwellings designed to meet seniors' needs). Affordable and high-quality retirement homes and long-term care facilities can promote health and reduce isolation for seniors who require specialized care in their day-to-day living (City of Ottawa 2005).

Even among seniors with incomes below \$20,000 who own their home, many have difficulties paying the rising utility and maintenance costs or undertaking in renovations (Council on Aging of Ottawa 2008). Retirement residences are usually costly, and very few affordable units are available. Of the 4,530 spaces in the City of Ottawa in 2007, only 226 units (5 per cent) have rents less than \$2,000 per month, and the average rent is \$1,560 (Council on Aging of Ottawa 2008-b).

“Many seniors cannot afford upscale private “adult lifestyle” or retirement homes. Seniors’ housing developments should not focus on “the gold in the grey” only.”

(National Advisory Council on Aging – cited in SSCA 2009)

9) Elder abuse

Seniors who require assistance in their day-to-day lives tend to be at risk of elder abuse. Elder abuse can take many forms: physical, emotional, sexual, financial, or neglect of the individual being cared for. It does not only occur in the home; it can also happen in institutional or community settings. Those with physical or mental health issues are most at risk of experiencing elder abuse and women are likely to experience the greatest physical harm as a result of elder abuse. Abuse is most commonly perpetrated by family members or professional caregivers and most victims of elder abuse are isolated from friends, neighbours and other people they are close to (Wohl and Purdy 2008; SSCA 2009).

4. We envision – a senior-friendly city

- Discrimination on the basis of age alone does not exist in hiring and decision making.
- A range of flexible and appropriately paid opportunities for older people to work is promoted. Training in post-retirement is provided for older workers.
- Advocacy and support services are available to seniors when we need it.
- Seniors are not only recipients of services, but we contribute to the planning, research and development of the services and policy.
- Delivery of services is coordinated and administratively simple.
- Information is presented in an accessible manner in a variety of languages and media.
- Health and social services for different stages of aging are available, along with respite care for caregivers.
- Affordable and accessible recreation services that are appropriate to the different stages of aging are available.
- Sufficient and affordable housing options are available to meet the needs at different stages of aging.
- Public transportation is safe, secure, affordable and accessible in urban and rural areas.
- Outdoor spaces are clean, safe and accessible to seniors, including adequate crosswalks and well-maintained sidewalks.
- Consistent outreach exists to include people at risk of social isolation. Awareness is raised about elder abuse; services specifically to deal with abuse are in place and readily accessible (WHO 2007).

WHAT CAN I DO?

- ✓ **Learn** about the contributions that seniors have made and are currently making.
- ✓ **Learn** about the nature of ageism in our society.
- ✓ **Get familiar** with the phenomenon of internalized ageism among some seniors.
- ✓ **Be aware** of my own attitudes, stereotypes and generalizations about seniors.
- ✓ **Object** to behaviors or statements reinforcing a distorted view of seniors.
- ✓ **Avoid** paternalistic language and behaviors in dealing with seniors.
- ✓ **Be well-informed** about the diversity of seniors in our community.
- ✓ **Advocate** for the rights of seniors to receive appropriate services and policies.
- ✓ **Involve** seniors in the development and planning of services and policies.
- ✓ **And, if I am a senior**, I will know that my knowledge and experience can enrich the city.

5. Council mandates and legislation

Ottawa Older Adult Plan – October 14, 2009, City Council mandated the **Organizational Development Branch** (ODP) to work in partnership with the Seniors Advisory Committee to develop an Ottawa Older Adult Plan by refining and refreshing the Seniors Strategy and action plan development.

6. What's happening in Ottawa

As our population ages, the City is responding to the needs of seniors in many ways.

The City is working towards:

- Widening the range of housing options open to seniors.
 - Providing more options to enable seniors to remain independent in their homes and active in their communities.
 - Investing in transportation.
 - Promoting healthy active living.
 - Improving how we communicate with seniors and their caregivers.
 - Encouraging seniors' participation in civic life.
- City of Ottawa Seniors Advisory Committee (SAC) – acts as a liaison to enrich and enhance the lives of seniors in the city, identify barriers, form partnerships with the community, and act as a public forum for issues affecting seniors.
 - City of Ottawa Seniors Agenda – focuses on building capacity to identify senior's issues and opportunities to meet needs in creative ways. In collaboration with Successful Aging Ottawa and in consultation with the Seniors Advisory Committee and other stakeholders, the Seniors Agenda agreed upon three action areas: communication about services, transportation and housing.
 - Ottawa Police Service Elder Abuse Section – investigates all allegations of elder abuse. The section works closely with front-line workers to educate them and to raise public awareness of elder abuse and support for seniors.
 - The Council on Aging of Ottawa – a bilingual, volunteer-based organization dedicated to enhancing the quality of life for all seniors in Ottawa. Works with and for seniors to voice issues and concerns to all levels of government and to the general public.
 - United Way/Centraide Ottawa's Affordable Supportive Housing Framework – works with partners to create an affordable supportive housing program for seniors living on low to modest incomes in Ottawa, so as to enable seniors to remain in their homes for as long as possible.

“Ottawa has been a leader among Canadian cities in fostering a strong community support system for seniors but the City's changing demographic will require the City to increase its effectiveness and efficiency in its provision of services to seniors to meet this challenge.”

(City of Ottawa 2005)

- The Ottawa Community Support Coalition (OCSC) – consists of 20 local organizations mandated to provide home-based community support services to seniors and adults with physical disabilities.
- Active Independent Aging: A community guide for falls prevention and active living – provides materials to help leaders understand issues related to falls and physical activity among older adults.

7. Relevant practices in other cities

- In 2007, the World Health Organization established the Age-Friendly Cities project. Informed by the active aging approach, this guide helps cities become more age-friendly and tap into the potential that older people represent for humanity. It had participation from the Canadian Public Health Agency and included four Canadian Municipalities as part of the project. The following measurement criteria were used: outdoor spaces and buildings, transportation, housing, social participation, respect and inclusion, civic participation and employment, communication and information, community Support and healthy services.
- In 2005 the City of Toronto Seniors Forum identified five priority areas to address: seniors' financial resources/costs/fees/access issues; housing and accommodation/long-term care; individual health environment, community and culturally sensitive services; safety, security and legal protection; participation and leadership/advocacy.
- The City of London established a 53 page Community Action Plan “Working Together to Support London’s Seniors”.
- In 2008 the City of Mississauga published their 51 page “Older Adult Plan”. This comprehensive plan had action areas for:
 - Organization and Management
 - Programs for Subsidy
 - Policies, Procedures, and Guidelines
 - Collaboration and Partnerships
 - Marketing and Communications
 - Older Adult Programs, Services, and Facilities
- In Spring 2009, the Senate of Canada produced a 223 page report on Canada’s Aging Population. It has chapters on “Active Aging in Age Friendly Cities” and “Supporting the Voluntary Sector”.

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9. Acknowledgements

The Equity and Inclusion Lens is the product of a collaborative partnership between the community and the City of Ottawa. This partnership was coordinated by the Diversity and Employment Equity Unit of the City of Ottawa and the City for All Women Initiative (CAWI).

City staff and community leaders contributed their knowledge and insights in the creation of this Diversity Snapshot.

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Photography: [Wabano Centre for Aboriginal Health](#)

Graphic Design: www.jwalkerdesign.ca

All this was made possible thanks to a partnership grant between Status of Women Canada and the City of Ottawa which funded the City for All Women Initiative (CAWI) to engage in this important work.



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