

**From:** "Mochrie, Paul" <Paul.Mochrie@vancouver.ca>  
**To:** "Direct to Mayor and Council - DL"  
**Date:** 5/26/2023 12:52:04 PM  
**Subject:** Council Memo - Report Back on Reviewing Age Friendly Action Plan and Aligning with WHO's Age-Friendly Cities Framework - RTS# 15576  
**Attachments:** ACCS - GM - Memo (Council) - Report Back on Reviewing Age Friendly Action Plan and Aligning with WHO's Age-Friendly Cities Framework - RTS 15576 (2023-05-26)).pdf

---

Dear Mayor And Council,

Attached please find a memo from Sandra Singh, GM, Arts, Culture and Community Services regarding a Report Back on Reviewing Age Friendly Action Plan and Aligning with WHO's Age-Friendly Cities Framework – RTS 15576. A few key points:

- Vancouver has a large, growing, and diverse population of older residents, with 110 thousand people age 65 or older and another 84 thousand age 55-64 as of the 2021 Census.
- The previous Age-Friendly Action Plan concluded in 2015, but staff have continued work in a number of age-friendly policy areas within the Healthy City Strategy, such as the Accessibility Strategy and upcoming Seniors Housing Strategy.
- The WHO's Age-Friendly Cities Framework resonates with Vancouver's overall social sustainability goals and with issues identified by community partners in the age-friendly services sector.
- A new Age-Friendly Action Plan is not specifically resourced at this time, but the Seniors Planner funded in the 2023 budget will help to coordinate and align existing work toward Vancouver becoming a more age-friendly city.

Should Council have any further questions please contact Sandra directly at [sandra.singh@vancouver.ca](mailto:sandra.singh@vancouver.ca) and she will make sure to respond through the regular weekly Q&As.

Best,  
Paul

**Paul Mochrie** (he/him)  
City Manager  
City of Vancouver  
[paul.mochrie@vancouver.ca](mailto:paul.mochrie@vancouver.ca)



The City of Vancouver acknowledges that it is situated on the unceded traditional territories of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and səliłwətał (Tsleil-Waututh) Nations.

## MEMORANDUM

May 26, 2023

TO: Mayor and Council

CC: Paul Mochrie, City Manager  
Armin Amrolia, Deputy City Manager  
Karen Levitt, Deputy City Manager  
Rosemary Hagiwara, Acting City Clerk  
Maria Pontikis, Chief Communications Officer, CEC  
Teresa Jong, Administration Services Manager, City Manager's Office  
Mellisa Morphy, Acting Chief of Staff, Mayor's Office  
Trevor Ford, Director of Operations, Mayor's Office  
Aftab Erfan, Chief Equity Officer  
Theresa O'Donnell, General Manager, Planning, Urban Design and Sustainability

FROM: Sandra Singh  
General Manager, Arts, Culture and Community Services

SUBJECT: Report Back: Reviewing Vancouver's Age-Friendly Action Plan and  
Aligning with the World Health Organization's Age-Friendly Cities Framework

RTS #: 15576

---

### Purpose

This memo responds to a [motion](#) passed by Council on December 7, 2022, directing staff to (a) report on the current status, accomplishments, challenges, and emerging issues relating to Vancouver's Age-Friendly Action Plan; (b) to explore alignment with the World Health Organization (WHO)'s Age-Friendly Cities framework and other global standards or best practices; and (c) to consult with the Seniors' Advisory Committee and other relevant stakeholders.

### Context and Background

#### Elders, older persons, and seniors in Vancouver

There is no single experience of becoming an Elder, senior, or older person: this occurs at the intersection of people's individual experiences, relationships, health, ability, socioeconomic status, and cultural identities. Age 65 is a common age of retiring from the workforce, and is often used as a milestone for governments, service providers, and institutions to define people as "seniors". However, equity considerations, such as disabilities, low incomes, or ongoing health conditions, may lead to some people experiencing aging at a faster rate than others. For

example, some DTES residents and service providers consider the age of 45 as qualifying as being an older person, which also reflects extreme life expectancy differences in the DTES community when compared to other Vancouver neighbourhoods. Conversely, the 2021 Census counts over 4,500 persons age 85 and older who live alone independently in the city, a majority of whom are women+.

The number of Vancouverites in older age groups is increasing, in line with trends across Canada. As of the 2021 Census, 110,000 Vancouverites are age 65 or older, making up 17% of the city's population. This group grew at five times the rate of the under-65 population from 2016 to 2021. Another 84,000 people, or 13% of the population, are age 55 to 64. This trend has important implications for how cities plan and deliver services and infrastructure to ensure that older persons continue to achieve the highest possible levels of health and well-being. Although there is a broad trend of an aging population, the City can make policy decisions that affect its age-friendliness across the age spectrum and impact its demographics over time.

For example, the rate of growth of an aging population depends on factors like the ability of current and future generations to stay in the city, access to mobility such as curb cuts and transit, health and social services, and other determinants of health that make the city accessible and liveable for people of all ages. Appendix A provides more data on demographic trends including those related to housing, income security, identity and diversity, chronic conditions, and intersections with disabilities.

### Age-Friendly Action Plan: Accomplishments and Challenges

In January 2012, Council supported a grant application to the Union of British Columbia Municipalities (UBCM) to engage older adults and caregivers to identify barriers to being an age-friendly city. In May 2012, Council passed a motion directing staff to report back on policy supporting people with dementia. Staff combined these two directions and presented Council with an Age-Friendly Action Plan (2012-2015) for information in 2013. The Age-Friendly Action Plan had over 60 short-term actions, including applying to the Province of British Columbia to be [recognized](#) as an age-friendly community. The City was also recognized by the Public Health Agency of Canada through the Pan-Canadian Age-Friendly Communities Recognition program, enabling membership in the WHO's Global Network of Age-Friendly Cities and Communities. However, these relationships are not currently active and the City does not have a current profile in the WHO network.

The Age-Friendly Action Plan was intended to be implemented without additional resources, so Council was not asked to formally adopt the Plan. Several City departments undertook actions over the remaining 2.5 years; however, without clear Council direction or dedicated resources, implementation was not formally tracked or monitored after the plan concluded in 2015.

### Related City-led age-friendly policy work

Examples of staff work following the conclusion of the Age-Friendly Action Plan includes the following (see Appendix B for details):

- 2015-2018: the first [Healthy City Strategy \(HCS\) action plan](#) supported specific actions such as staff training and capacity-building to work effectively with people with dementia.
- 2017-2018: staff partnered with the Seniors' Advisory Committee to conduct research on Social Isolation and Loneliness Among Seniors ([SILAS](#)), with funding from VCH.

- 2018-2019: staff convened community partners to identify barriers to age-friendliness and to prototype innovative projects. This was discontinued because resources were not allocated in the 2020 budget due to other pressures and priorities of Council.
- 2018-present: Council directed work toward an Accessibility Strategy, including convening an Accessibility Task Force with representation from the Seniors' Advisory Committee. Council adopted the [Accessibility Strategy](#) in 2022 and work continues on implementation.
- 2020-2021: guidelines were created for senior-serving organizations to re-open safely with Vantage Point and funding from the Partnership for Healthy Cities.
- 2022-present: within the [Housing Vancouver Strategy](#), City staff are working toward a Seniors Housing Strategy. [Engagement](#) and policy development will take place throughout 2023, with the final strategy expected in 2024.

Other City funded initiatives supporting older persons includes the following:

- The City and Park Board provide direct services through community centres, such as recreation programs and facilities.
- An estimated \$1.6 million of the 2022 Social Policy grants budget, or 13% of total funding, benefitted older persons directly. Fourteen organizations with a focused mandate to serve older persons received social grants, and organizations estimate that about one third of people accessing services provided by other social policy grant recipients such as neighbourhood houses are 55 or older.
- The City supports space for many non-profit organizations that serve older persons, and provides capital investment toward social infrastructure for older persons, such as the new Killarney Seniors Centre (opened in 2018) and the future Sunset Seniors Centre.

In addition to financial supports, Social Policy has engaged the seniors serving sector through convening, information sharing, and capacity-building.

Seniors' Advisory Committee research and advocacy

The Seniors' Advisory Committee (SAC) has completed significant independent work and advocacy toward an age-friendly city. In 2020, the SAC released a discussion paper, [Time for Action Now](#), advocating for an update to the Age-Friendly Action Plan within the broader Healthy City Strategy and identifying key priorities. In 2022, the SAC conducted a detailed [jurisdictional scan](#) of policies, organizational structures, and resources allocated to age-friendly work in other cities. In recent years, the SAC has advocated for a dedicated staff lead for age-friendly work, which Council directed in the 2023 Operating Budget.

## **Discussion**

To fulfill Council's motion, staff engaged members of the previous SAC and a range of stakeholders, mainly through an online survey. Staff also collected direct feedback through conversations with former SAC members and key partners such as VCH and the United Way.

Feedback from SAC, VCH and United Way

Former members of the SAC noted the need for ongoing monitoring, metrics, and reporting on age-friendly policy. They also noted gaps in following through on previous work, and re-iterated the significant work completed in recent SAC initiatives such as the jurisdictional scan.

VCH population health leadership support efforts toward becoming more age friendly, emphasizing the importance of a balanced approach so that upstream interventions are applied across the lifespan; investments in earlier stages of life are essential to supporting people as they get older. Many VCH staff who provide direct care to older persons also completed the online survey with recommendations for greater integration of supports.

Staff from the United Way made referrals to a number of agencies and highlighted positive practices of age-friendly policy and planning taking place in other municipalities in the region.

### Survey results (February 2023)

In total, 163 people participated in the online survey. Survey participants were asked open-ended questions on challenges and emerging issues, impactful past work, good practices from other jurisdictions, a vision for what an age-friendly Vancouver could look like, and benefits and challenges of aligning with international frameworks. A detailed summary of the engagement process and feedback is included in Appendix C. Important perspectives from groups not represented in the survey such as Indigenous Elders are not included because of lack of time and capacity for engagement from urban Indigenous serving groups.

#### *Challenges and emerging issues*

Challenges/issues experienced by older persons in Vancouver include: affordable housing; access to homecare; access to services; adequate income; transportation; the built environment, such as uneven sidewalks; and social connections. This feedback underscores the need for strong coordination with senior government partners that have jurisdiction in some of these areas.

COVID-19, heat emergencies, and the toxic drug crisis have created disproportionate inequities for some older persons in the city. These emergencies surface how inequities in housing, income, and social connections can have profound consequences for well-being, including a rise in homelessness and food insecurity. COVID-19 was the still the fourth-most common cause of death for Vancouver Coastal Health residents age 80 or older in 2022.

#### *Previous City policy work*

Some survey respondents noted the importance of previous policy work and cited the Age-Friendly Action Plan, ongoing funding to community organizations, initiatives led by the SAC, the 2018-2019 innovation lab process, and emergency response efforts.

Participants expressed general support for initiatives like the Seniors Housing Strategy. Many actions advancing through the Accessibility Strategy, such as universal design principles and accessibility upgrades to sidewalks and crosswalks, will also advance age-friendly policy priorities given that the prevalence of some disabilities increase with age, noting that it is important not to conflate age and disability.

#### *Good practices from other places*

Many survey respondents shared examples of good practices, including a mix of specific policies or programs from other places and more general impressions of practices that Vancouver can learn from. These suggestions are summarized in a table in Appendix C.



### *Vision for an age-friendly city*

A common theme through many responses was the importance of a comprehensive strategy, both across the lifespan (i.e. an all-ages approach) and across determinants of health (i.e. a holistic approach).

Many participants emphasized the importance of undertaking preventive, upstream planning given the scale of demographic change and to reduce the costs of acute health and emergency response services. Many participants also emphasized the diversity of the older population in Vancouver, and the importance of an intersectional approach.

### *Aligning with WHO's framework:*

Many respondents were supportive of the City joining the WHO's [Age-Friendly Cities Framework](#). Some suggested the need for a more localized or culturally-grounded framework, or risks of further delaying actions if time and resources are spent on frameworks rather than implementation.

### *Additional comments*

Respondents noted the importance and urgency of the City proactively responding to demographic change; worry for the future quality of life for current and future generations of older persons; the importance of a connected, collaborative and holistic approach; and appreciation for the chance to provide feedback and the hope that it will result in action.

## WHO Alignment and other global standards

WHO's [Global Age-friendly Cities Guide](#) details specific actions and checklists that cities can use to work toward becoming more age-friendly, and additional resources are available to support monitoring and evaluation.

There is alignment between the WHO's framework and the issues shared by engagement participants. The domains of urban life also resonate with Vancouver's overall goals for social sustainability in the HCS.

## Joining the Global Network for Age-Friendly Cities and Communities

Membership in the WHO's network is open to any level of local government in a WHO member state, and [a number of Canadian municipalities](#) are members. Cities must commit to working toward age-friendliness and investing time and resources to develop age-friendly policy. Specific [membership requirements](#) include:

- Sharing and promoting the values and principles of the WHO's Age-Friendly Communities approach: respect for diversity; equity; participation and valuing contributions; rights; co-design and co-creation; combining a participatory bottom-up approach with top-down resources; and an intergenerational life-course approach.
- Undertaking a participatory age-friendly assessment; developing an age-friendly action plan; implementing the plan; conduct and report on monitoring and evaluation.
- Actively participating in the network, by sharing reports, practices, guidelines, and tools; by maintaining an up-to-date profile; and (optionally) by organizing and participating in meetings and opportunities for collaboration.

Should Council wish to pursue joining the WHO network, the application will require a letter of support from the Mayor and a designated contact person. Cities do not have to have completed all of these steps noted above but must have concrete plans to deliver them. Further scoping would be required to determine the resources needed to sustain Vancouver's participation in this network and deliver on membership requirements.

#### Other opportunities for alignment

The WHO's Age-Friendly Cities Framework can also be incorporated into other work that is underway, such as the Seniors Housing Strategy, Accessibility Strategy, or community planning projects. Examples of alignment could include: reporting on contributions to age-friendliness in the eight domains; applying the WHO's checklists; and/or developing metrics and indicators harmonized with the WHO's framework. Engagement participants recommended other examples, and Council may wish to pursue an approach that incorporates elements from multiple sources.

#### **Next steps**

A new age-friendly action plan will require Council direction, resource allocation, or the reprioritization of current work. Meanwhile, the hiring of a new Seniors Planner, the Seniors Housing Strategy, funding to non profits serving older persons, and renewal of the HCS, and tracking indicators that align with global networks like the WHO will continue to contribute to Vancouver becoming a more age-friendly city.

While the work to develop and implement population-based social development strategies is the work of the Social Policy Division within ACCS, due to significant staff turnover, including the imminent departure of the current Managing Director and the onboarding of a new Managing Director, the hiring of a staff member to coordinate seniors-related work will happen through the Business Planning and Project Support division in the City Manager's Office. Once the staffing transitions in Social Policy have settled, the leadership of the work will be transferred back to the Social Policy team.

#### **Final Remarks**

If you have questions please contact Sandra Singh, and responses will be provided through the weekly Council Q&As.



Sandra Singh  
General Manager, Arts, Culture and Community Services

[sandra.singh@vancouver.ca](mailto:sandra.singh@vancouver.ca)

## **APPENDIX A**

### **Demographics and Trends for Older Persons in Vancouver**

This appendix provides a high-level summary of population-level data on age and aging in the City of Vancouver. Key sources include the 2021 Census of Population and population health surveys conducted during the COVID-19 pandemic. The City will be accessing additional datasets throughout 2023 and 2024, including neighbourhood-level profiles and more disaggregated profiles across age groups, and will incorporate these datasets into future reports such as citywide and neighbourhood [Social Indicators Profiles](#), the [Healthy City Dashboard](#), and current planning initiatives such as the Seniors Housing Strategy.

A nuanced and intersectional approach is especially important when analyzing and interpreting data on older residents. Considerations and caveats when reading this appendix include:

- Population data necessarily places people into categories based on their numerical age. For example, many datasets disaggregate information for people 65 and over, reflecting a common age of retirement. But people reach this transition at many different ages, and employment is not the only factor in shaping how people perceive their own aging. Many people continue the same level of activity into older ages. Conversely, intersecting inequities and barriers can create a younger threshold for aging: in the Downtown Eastside, for example, some seniors programs are targeted to people age 45 or older. As noted in the Accessibility Strategy, the experience of aging for persons with disabilities often occurs more quickly than for other groups.
- In aggregate, many datasets on older persons show positive socioeconomic outcomes compared to younger age groups. However, other factors show a more nuanced picture: for example, older persons are more likely to be homeowners and less likely to experience housing affordability challenges. But, older renters often face more acute affordability challenges than younger people, and the risks and health consequences of insecure housing can be more acute when they intersect with age.
- Older persons face different barriers in completing surveys, so collection methods impact the validity of the data. For example, population surveys conducted online are more likely to reflect the participation of active, online, able-bodied, English-speaking respondents. While surveys are often conducted with intentional efforts to enable participation by groups who face barriers, a more representative sample is especially difficult to achieve for the oldest age groups in voluntary surveys.

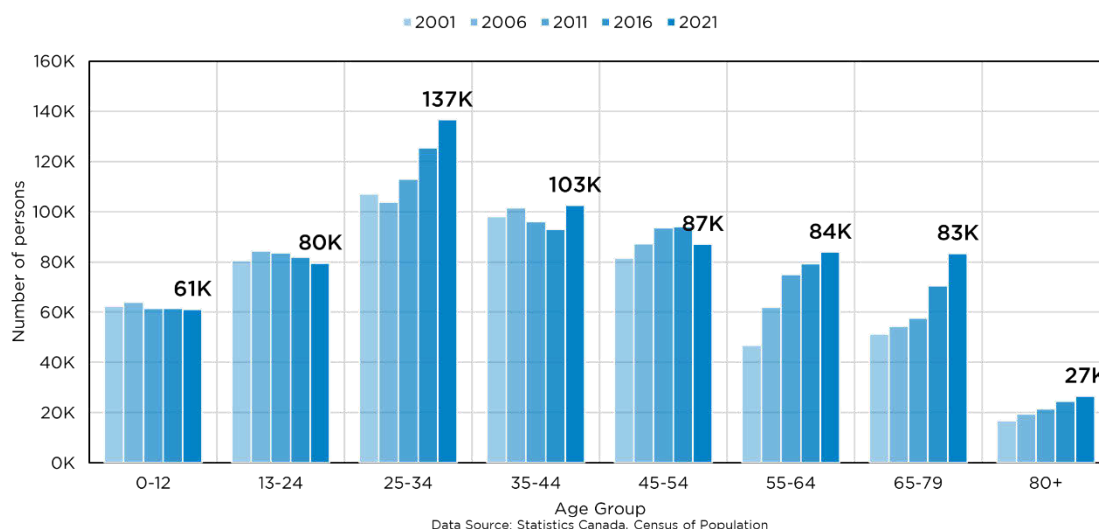
Population-level data is still important for understanding broad trends and informing policy interventions, but it should be complemented with other data sources, understood in the context in which it was collected, and interpreted collaboratively with members of the community.

#### Population growth and trends

As we all age, the number of older residents in the City of Vancouver continues to increase. As of the 2021 Census, 110,000 residents are age 65 or older, and another 84,000 are age 55 to 64. As shown below, there has been consistent growth in older age categories in recent years.

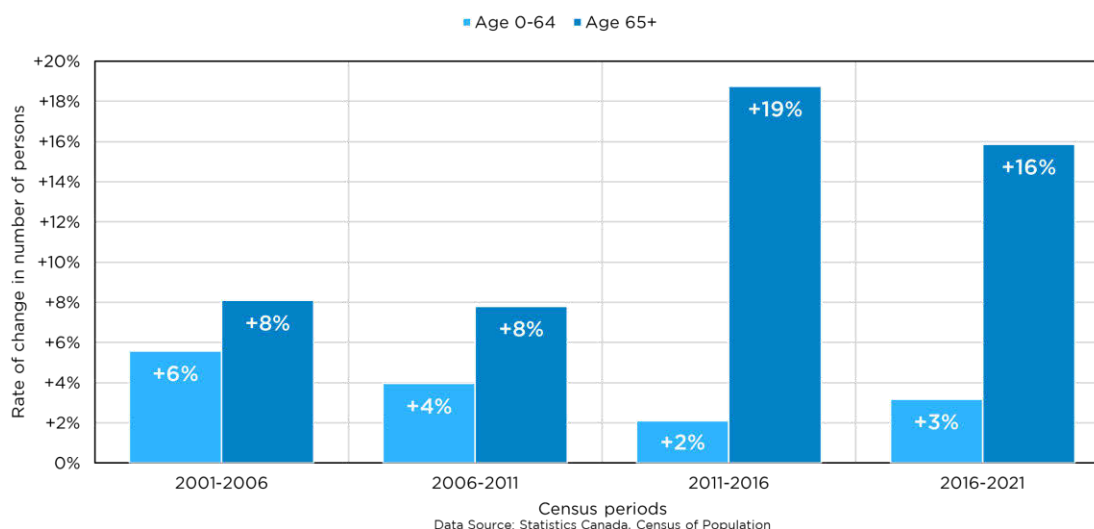


### City of Vancouver: Population by Age Groups 2001-2021



Using age 65 as a cut-off, the population growth rate for people 65 and older has been substantially higher than the growth rate for people under age 65.

### City of Vancouver: Net Population Growth by Age Group, 2001-2021

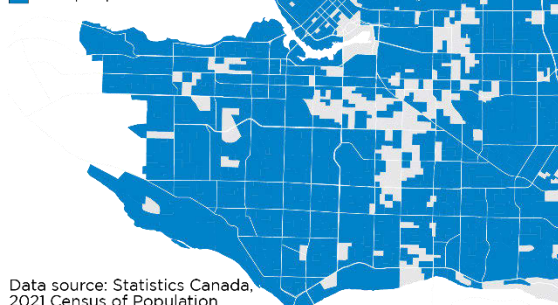


Two national trends relating to an aging population have emerged in recent years. First, Canada now has more older residents (people 65 and older) than children (people under age 15). Across Vancouver this has been true since the 2006 Census, and as of 2021 it is also the case for the majority of the city's neighbourhoods, as shown below left. A second trend relates to so-called "naturally occurring retirement communities", in which neighbourhoods come to be dominated by older residents as they age in place. If these areas are located in areas with less diversity in housing or access to services it is challenging to meet the needs of aging residents. As shown below right, using age 55 or older as the cut-off, many lower-density areas of Vancouver have a substantial proportion of the population in this category.

## More Younger or Older Residents?

Population under 15 vs population 65 and older, 2021

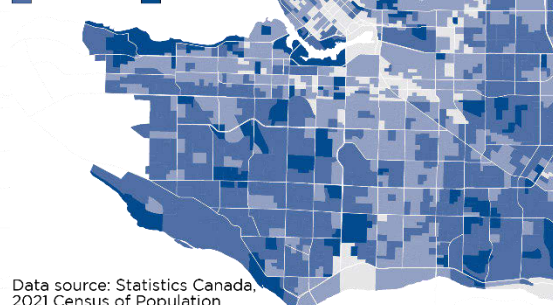
- More people under 15
- More people 65 or older



## Potential Retirement Communities

Percentage of population 55 or older, 2021

- 0-20%
- 20-30%
- 30-40%
- 40%+

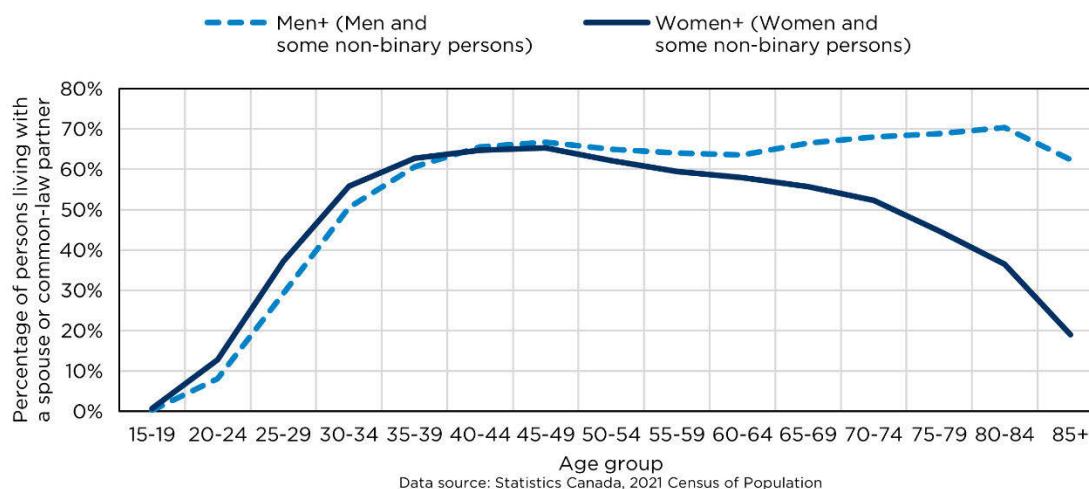


Demographic projections generally expect the trend of an aging population to continue, with older persons making up both a larger number and greater share of the city's population over time. However, the exact rate of growth will depend on a number of factors, including the ability of current and future generations to stay in the city, the level of access to mobility and services, and other determinants of health that make the city accessible and liveable for people of all ages. For example, Vancouver's challenges in accessibility and affordability also result in a smaller population of children, youth, and families than other cities. Although there is a broad trend of an aging population, the City can make policy decisions that affect its age-friendliness across the age spectrum and impact its demographics over time.

## Families and household living arrangements

Overall, 58% of Vancouver residents age 55 or older live with a spouse or common-law partner. However, as shown below, the percentage of women+ living with a partner decreases substantially in older age groups. Older women+ are more likely to have experienced separation or divorce, and much more likely to experience being widowed, compared to older men+. A corollary of this is that older women+ are more likely to live alone.

### City of Vancouver Residents Living with a Partner by Age Group and Gender, 2021



Local data is not yet available to fully report on the household living arrangements and caregiving roles of older residents, but a few preliminary indicators from currently available 2021 Census data include:

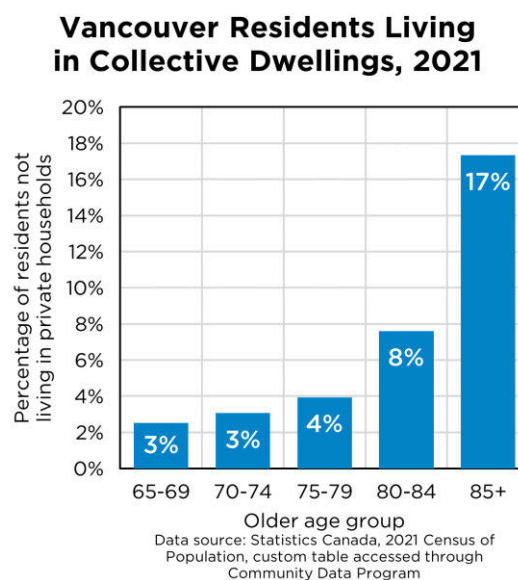
- There are over 8,000 multigenerational households, in which children live with both parents and grandparents, in the City of Vancouver.
- Across Metro Vancouver, 16% of children age 0-14 live with a grandparent. While most of these children also live with a parent, 0.4% of children—and 2.3% of Indigenous children—in Metro Vancouver live only with their grandparent(s).

### Housing

Older age groups are a time of transition in housing and care needs for many people. One high-level indicator shown at right is that people are more likely to move into collective dwellings, such as health or institutional settings as they age. Across the City of Vancouver, the 2021 Census estimates that there are at least:

- 3,270 persons living in nursing homes;
- 1,480 persons living in residences for seniors; and
- 375 persons living in hybrid facilities with both nursing care and independent residence.<sup>1</sup>

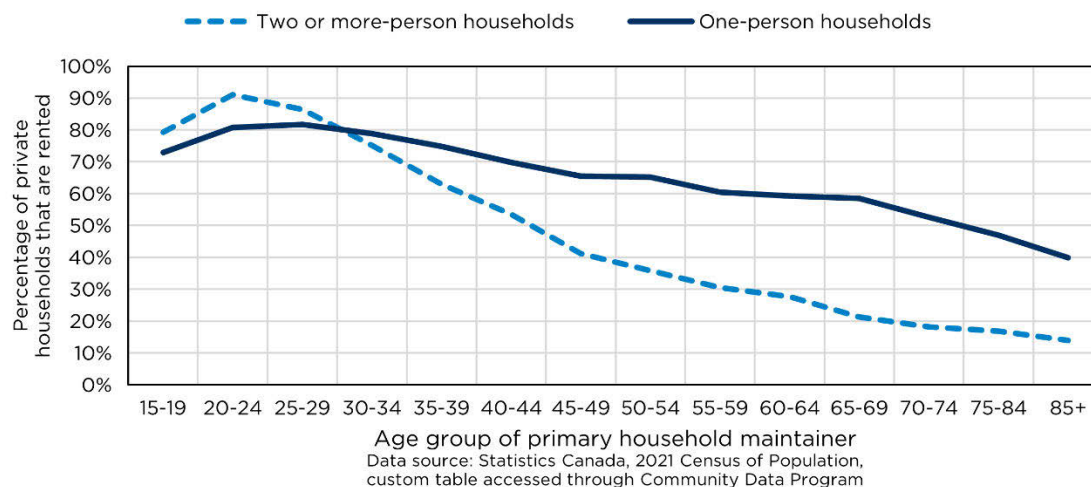
The 2021 Census estimates nearly 70,000 private households led by a person 65 and older, and over 50,000 additional households led by people age 55 to 64. In aggregate, private households led by older residents are more likely to be owned than rented, and more likely to be living in ground-oriented housing rather than in apartments. However, older residents living alone are much more likely to be renters than those living with others. as noted above, older women+ are more likely to be living alone. The chart below shows the percentage of households that are rented, disaggregated between one-person and multiple-person households.



---

<sup>1</sup> Data on collective dwellings from Statistics Canada, 2021 Census of Population, custom table accessed through Community Data Program. Some facilities may have had data suppressed so these numbers may undercount some health and institutional residents.

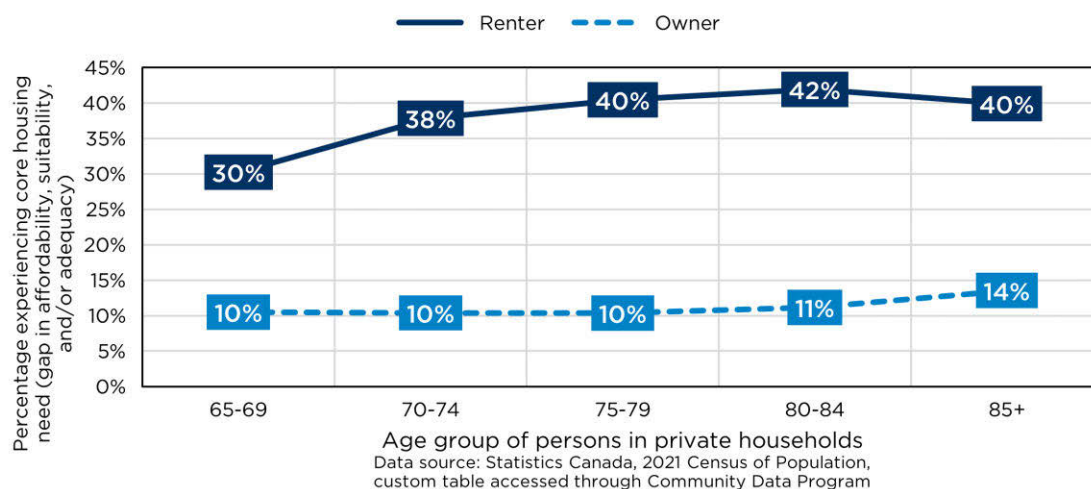
### Vancouver Private Household Tenure by Household Size and Age, 2021



Housing tenure can be reflected in inequities in both income and wealth for older residents. Among people age 65 and older in Vancouver, 73% live in an owned dwelling, and 74% of those residents do not have a mortgage. On average, owners age 65 and older self-report an average home value of \$1.9 million. However, many older residents are not able to access this wealth for day-to-day expenses and basic needs, and may struggle with increasing costs.

Meanwhile, it can be challenging to find housing that meets the needs of older residents based on their incomes, and especially so for renters. As shown below, older residents who rent are more likely to experience core housing need—that is, an inability to find housing that is affordable based on their income; or experiences of housing unsuitability or adequacy, such as a need for major repairs.

### Vancouver Residents' Experience of Core Housing Need by Older Age Groups and Housing Tenure, 2021

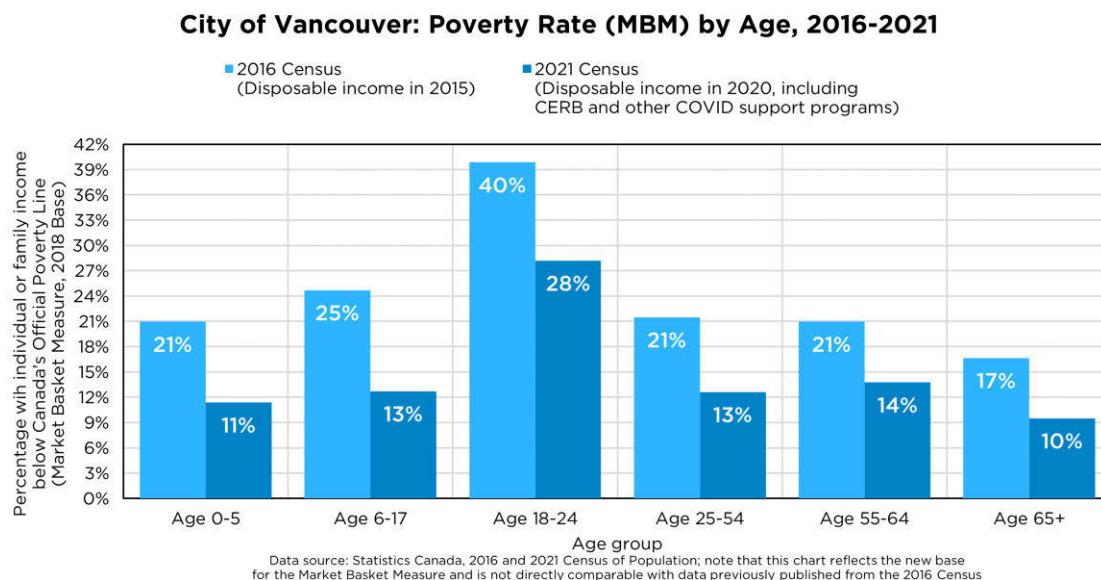


At their most extreme, gaps in affordable and accessible housing can create experiences of homelessness. In the 2020 Vancouver Homeless Count, 23% of people counted were age 55 or

older, and older residents have been making up an increasing share of the population counted. In 2020, 10% of people counted reported that they first experienced homelessness at age 55 or older. The health consequences of homelessness can be especially acute for older residents.

### Income and economic security

In aggregate, older persons in Vancouver are less likely to experience income poverty; however, this is not universal and many older persons experience gaps in income and basic needs. The chart below shows trends from in the 2016 and 2021 Censuses using Canada's Official Poverty Line, which measures the cost of the most basic needs. Income data from 2020 is challenging to interpret because of the significant impact of support programs that increased incomes and reduced inequity during the COVID-19 pandemic. Preliminary data suggests that the end of temporary COVID support programs and the increasing cost of living have increased the poverty rate back to similar levels as in 2015.<sup>2</sup> Even with that caveat, though, another important observation is that support programs mainly benefitted people in the workforce. The poverty rate declined for older age groups, but not to the same extent as it did for children, youth, and some working-age groups.



Poverty is also variable among older persons depending on their living situation and social context. The poverty rate based on 2020 income among people living alone in Vancouver is 30% for people age 55-64, and 17% for people age 65 and older. The rate for people living with non-relatives is 38% for people age 55-64, and 35% for people age 65 and older. And, as noted above, some older residents live in healthcare or institutional settings, and they are not included at all in most census income data.

### Identity and diversity

Vancouver's racial, cultural, and linguistic diversity are reflected across all age groups. Older persons in Vancouver come from a wide range of backgrounds, identities, and experiences.

<sup>2</sup> Statistics Canada, Market Basket Measure poverty thresholds and provisional poverty trends for 2021 and 2022. <https://www150.statcan.gc.ca/n1/pub/75f0002m/75f0002m2022008-eng.htm>



### *Indigenous identity and racialized population groups*

Vancouver is home to a larger and diverse Indigenous population, including many people considered to be Elders. While there is not a statistical definition of an Elder, the 2021 Census estimates about 2,900 people age 55 or older with Indigenous identity who are living in Vancouver. This estimate is only for the Urban Indigenous population living in Vancouver; it does not include the 225 Indigenous people age 55 or older who are living at Musqueam, or a much larger number of older persons and Elders living elsewhere who may be connected to communities, services, organizations, or supports in the city.

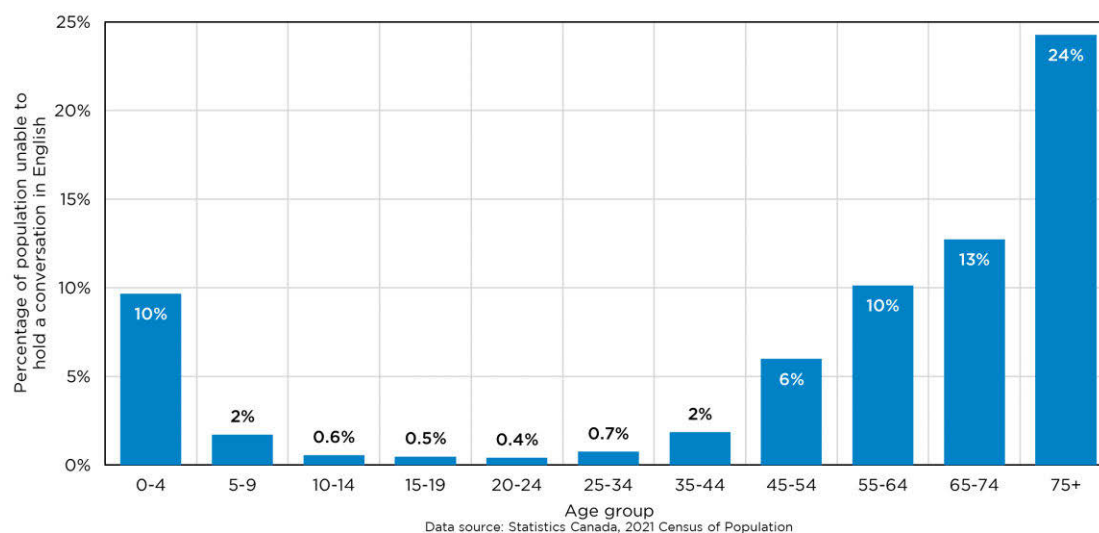
A majority of people of all age groups in Vancouver are identified with racialized (“visible minority”) groups, including 53% of people age 55 or older. Within this age group, this includes more than 62,000 Chinese residents, nearly 10,000 Filipino residents, 9,400 South Asian residents, and 4,900 Southeast Asian residents.

### *Language*

A majority of older residents have a mother tongue (first language) other than English, including 54% of people age 55-64, 54% of people age 65-74, and 62% of people age 75 or older. The most commonly-reported non-English mother tongue is Cantonese, with almost 42,000 people age 55 and older reporting Cantonese as their mother tongue. Older residents are also much more likely to use a non-English language at home. As of the 2021 Census, 38% of people age 65-74 and 46% of people age 75 or older usually use a non-English language, compared to 26% of the overall population in Vancouver.

Many people who use non-English languages also use English to access employment, services, and participation in the community. However, this is not the case for many older residents. As shown below, the rate of people who are not able to hold a conversation in English is higher among older age groups, and nearly one in four people age 75 or older do not have knowledge of English. While some older residents may be able to find communities and services in their language, particularly for relatively prevalent non-English languages, others rely on informal translation from family members or caregivers.

**City of Vancouver: Pop. Without Knowledge of English by Age, 2021**

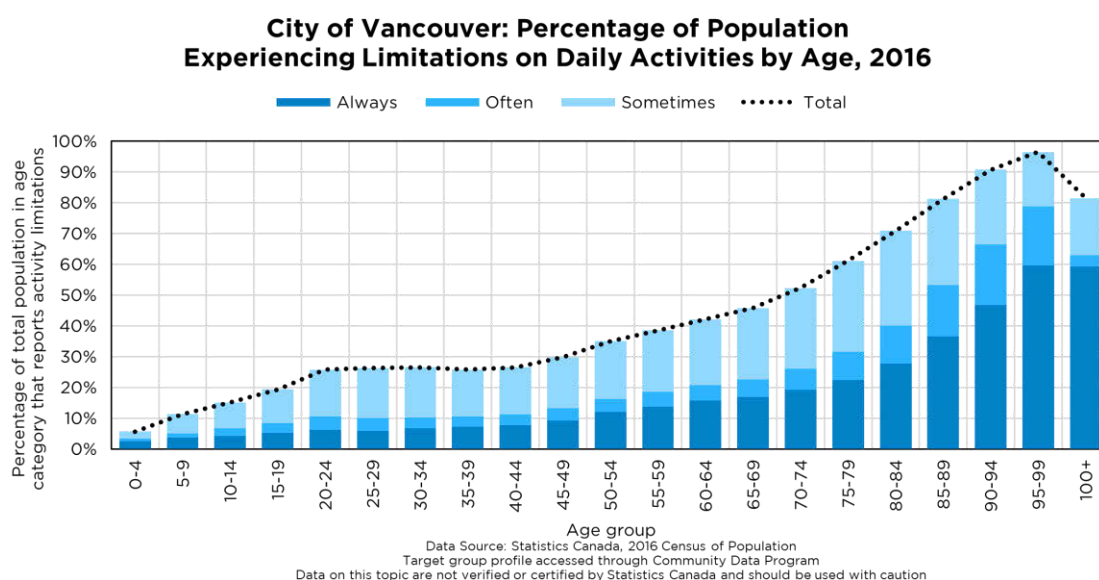


### *Immigration and place of birth*

Almost two-thirds of Vancouver residents age 55 or older were born outside of Canada, though 97% immigrated to Canada more than five years prior to the 2021 Census. About 90% of immigrants age 55 or older in Vancouver are Canadian citizens. The ten most common places of birth among this age group are: China, Hong Kong, Philippines, the United Kingdom, Vietnam, India, Taiwan, the United States, Iran, and Italy.

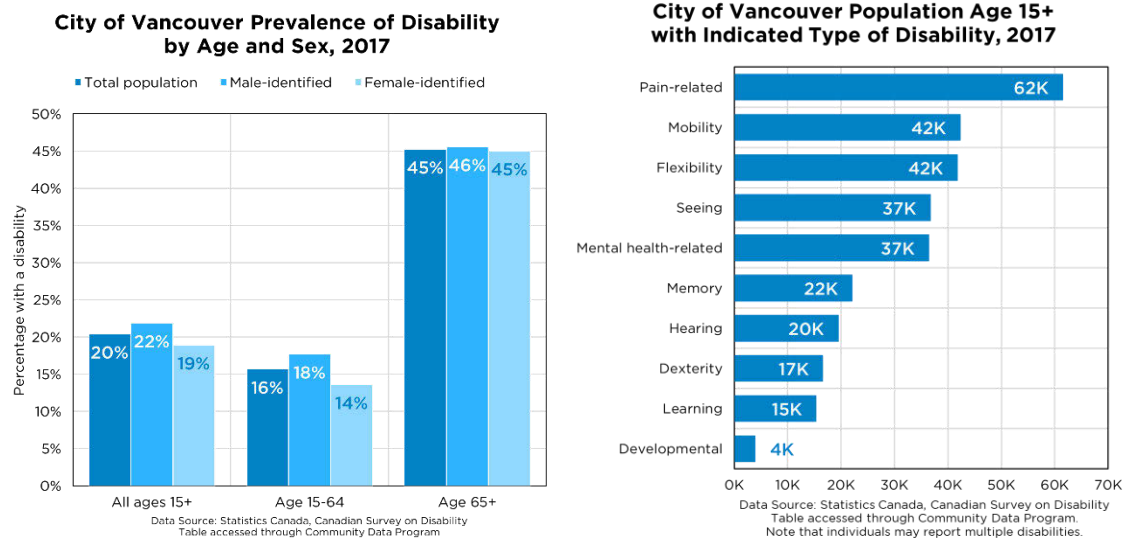
### Activities of daily living, chronic conditions, disabilities, and dementia

Age increases the likelihood of needing supports to manage the tasks of daily living. Data from the 2021 Census is not yet available, but 2016 data in the chart below shows a clear gradient in both the likelihood and frequency at which people report experiencing limitations on their daily activities.



Chronic health conditions are also more prevalent with age: in the 2013/2014 My Health My Community survey, 21% of people age 65 and older reported multiple chronic illnesses, compared to 6% of the overall adult population. Chronic conditions are costly to manage for individuals who experience them, for family members and caregivers, and for society overall through the healthcare system. Supporting healthy communities and addressing gaps in the determinants of health can reduce the likelihood of some chronic conditions.

People of all ages may experience disabilities, but the prevalence is much higher among older persons. Based on the 2017 Canadian Survey on disability, 45% of people age 65 and older have one or more disabilities. The most common types reported (across all ages 15 and older) include pain-related, mobility, flexibility, seeing, and mental health-related disabilities.



Cognitive illnesses also increase in likelihood with age, and their prevalence has increased over time as people's life expectancy increases. As of 2019/2020, about 6% of people age 65 and older in BC have Alzheimer's disease or dementia. The incidence of dementia diagnoses increases substantially through older age groups, from approximately 1 in 350 people age 65-69 up to 1 in 16 age 90 or older across Canada who received a dementia diagnosis in 2019/2020.<sup>3</sup>

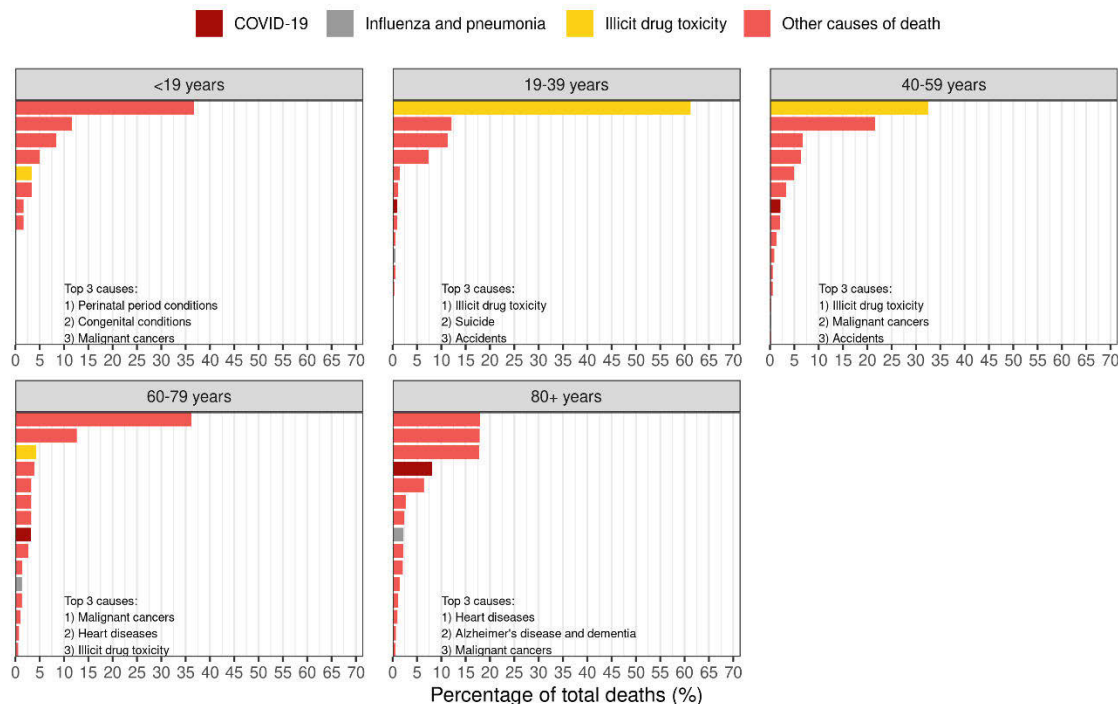
### Mortality and health emergencies

Aging is an inevitable part of life, as is its end. Both overall life expectancy and quality of life until its end are strong indicators of health promotion and prevention, and of the age-friendliness of a community.

In recent years, the presence of ongoing health emergencies has disrupted progress toward improved life expectancy, and these emergencies have had disproportionate impacts on different groups in the population. And, preventable inequities in the determinants of health throughout the life course are reflected in rates of some noncommunicable disease and injuries. The image below is excerpted from the BC Centre for Disease Control's [Mortality Context App](#), and shows a 2022 snapshot of leading causes of death across the Vancouver Coastal Health region by age group.

<sup>3</sup> Public Health Agency of Canada, Public Health Infobase. <https://health-infobase.canada.ca>.

### Top 15 causes of death by age group in Vancouver Coastal Health for 2022



Cause unknown or pending in Vital Statistics data: 13.9%. This figure may change as cause of death data become more complete.  
Data sources: 1) BC Vital Statistics; 2) Data on deaths due to illicit drug toxicity, accidents and suicides provided to BCCDC by BC Coroners Service.

Copyright © BC Centre for Disease Control, a part of the Provincial Health Services Authority



### Toxic drug supply

A public health emergency has been declared in BC since 2016 due to a substantial increase in overdose deaths. As shown above, drug toxicity is the leading cause of death in adults younger than 60, but it remains in the top three causes for people age 60 to 79 as well. From January 2016 to January 2023, the BC Coroners Service reports 1,288 people age 60 or older who have died from this emergency across the province.<sup>4</sup>

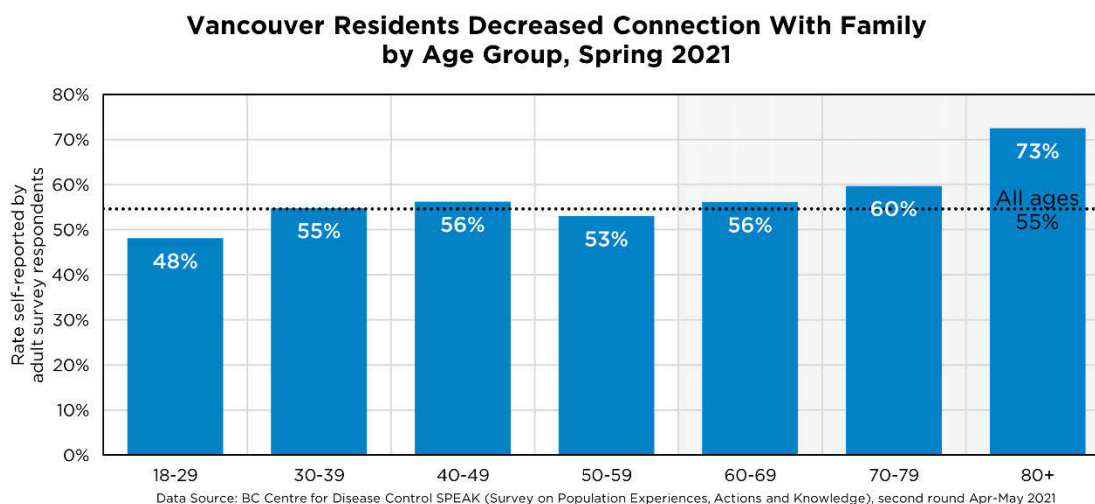
### COVID-19

Throughout the COVID-19 pandemic, older persons have been at disproportionate risk of severe illness and death. In the early stages of the pandemic, transmission in residential care settings was an early indication of the risk that older persons face. Even though the magnitude of the pandemic may have decreased in some ways, the broad trend of greater risk by age continues. As shown above, COVID-19 was still the fourth-most common cause of death for Vancouver Coastal Health residents age 80 or older in 2022. Weekly epidemiological reports from the provincial government show continued hospitalizations and deaths from COVID-19 among older residents.

The pandemic and public health response have had other impacts across the population, such as social and economic challenges and gaps in basic needs; social impacts from loss of community services and education; and decreased connection at times when people were asked to stay apart. Population health surveys show different impacts across different age

<sup>4</sup> BC Coroners Service, Illicit Drug Toxicity Deaths in B.C., current as of March 7, 2023.  
<https://www2.gov.bc.ca/gov/content/life-events/death/coroners-service/statistical-reports>

groups: older residents in Vancouver, for example, were less likely to report challenges with income, food security, housing, mental health, or access to services. However, gaps in some forms of connection appear to have been greater among older residents, and the consequences of not having access to family members, who may also be providing different forms of care, may be more severe. The chart below shows an example of data on impacts during the spring 2021 wave of COVID-19.



And, as with other indicators, it is important to consider both the number of people who experience an inequity and the consequences of it. For example, fewer older residents reported experiencing financial stress, but the consequences of an older person being food or housing insecure are much greater.

### *Environmental emergencies*

During the 2021 heat dome emergency from June 25 to July 1, the BC Coroners Service reported 99 heat-related deaths in the City of Vancouver.<sup>5</sup> More than 90% of these deaths were among people age 60 or older, and virtually all of these deaths took place in people's residences. Risk factors included living alone, not being mobile, not having access to information, and not having people checking in regularly.

<sup>5</sup> BC Coroners Service, Heat-Related Deaths, Knowledge Update.  
[https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/heat\\_related\\_deaths\\_in\\_bc\\_knowledge\\_update.pdf](https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/heat_related_deaths_in_bc_knowledge_update.pdf)



## APPENDIX B

### Policy Timeline 2012-Present

Date	Event	Contribution to Age-Friendly Work
January 2012	Council supports application for <a href="#">funding from UBCM</a> to support age-friendly community planning	<ul style="list-style-type: none"> <li>Enables engagement through Seniors Dialogues process</li> </ul>
May 2012	Council passes <a href="#">motion</a> to report back on policy supporting persons with dementia	<ul style="list-style-type: none"> <li>Incorporates a dementia lens into Seniors Dialogues, Age-Friendly Action Plan, and development of Healthy City Strategy</li> </ul>
Fall 2012	City hosts six <a href="#">Seniors Dialogues</a> as well as focus groups and interviews	<ul style="list-style-type: none"> <li>Engages 400 community members in understanding age-friendly opportunities, gaps, and needs</li> </ul>
June 2013	Council receives a presentation on the <a href="#">Age-Friendly Action Plan</a>	<ul style="list-style-type: none"> <li>Staff initiative; no formal decision or direction from Council</li> <li>Identifies 60+ actions in five policy areas: built environment, active living, training, human services, safety</li> </ul>
October 2013	Council passes <a href="#">motion</a> to seek provincial age-friendly recognition	<ul style="list-style-type: none"> <li>Vancouver recognized by BC in 2014</li> <li>Vancouver included in pan-Canadian age-friendly communities recognition program in 2015, including connection with WHO Age-Friendly Cities network</li> </ul>
October 2014	Council adopts <a href="#">Healthy City Strategy</a>	<ul style="list-style-type: none"> <li>Overall social sustainability framework for City of Vancouver, taking holistic, upstream, preventive approach</li> <li>Commits to long-term goals, targets, and indicators to address gaps and inequities in determinants of health</li> </ul>
July 2015	Council adopts 2015-2018 <a href="#">Healthy City Action Plan</a>	<ul style="list-style-type: none"> <li>Develops City contributions to collective Healthy City goals</li> <li>Includes specific actions around staff training to respond to needs of persons with dementia; supporting social connections and addressing loneliness; and working toward inclusive, welcoming, safe city for all ages and identities</li> </ul>
January 2016	Council supports application for <a href="#">funding from UBCM</a> for dementia-friendly staff training	<ul style="list-style-type: none"> <li>Enables implementation of Healthy City Action Plan commitment to support staff training and capacity-building</li> </ul>
November 2017	Council adopts <a href="#">Housing Vancouver Strategy</a>	<ul style="list-style-type: none"> <li>Commits to action to increase supply of affordable housing for those in greatest need, including older persons at risk of homelessness</li> <li>Includes strategy to develop new housing types that meet diverse household and population needs, including those of older persons</li> </ul>
May 2018	<a href="#">SILAS Report</a> (Social Isolation and Loneliness Among Seniors) published by Seniors' Advisory Committee	<ul style="list-style-type: none"> <li>Contributes extensive research and knowledge about importance of social connections for older persons</li> <li>Includes recommendations to City, other governments, and service providers</li> </ul>



Date	Event	Contribution to Age-Friendly Work
December 2018	Council supports application for <a href="#">funding from UBCM</a> to support Age-Friendly Action Research Lab	<ul style="list-style-type: none"> <li>Enables work to engage with complex and interconnected areas of age-friendly work and more closely link policy and practice</li> </ul>
2018-2019	City convenes Age-Friendly <a href="#">Solutions Lab</a> on potential policy approaches to creating a healthy city for all seniors	<ul style="list-style-type: none"> <li>Convenes City staff and community members for in-depth policy innovation process</li> <li>Supports ethnographic research on experience of diverse older persons in the city</li> <li>Maps systems to identify root causes and feedback loops that prevent an age-friendly city: these included meaning/value, physical infrastructure, social infrastructure, and scaling projects and interventions</li> <li>Generates policy questions and projects to prototype, with intention to inform age-friendly policy update in 2020</li> </ul>
April 2019	City joins <a href="#">Partnership for Healthy Cities</a> network supported by Bloomberg Philanthropies with the WHO and Vital Strategies	<ul style="list-style-type: none"> <li>Commits the City to making interventions to support better public health data and monitoring of the Healthy City Strategy</li> <li>Provides funding to support online data platforms and tools and prototype community-generated data with Indigenous communities</li> </ul>
June 2019	City develops <a href="#">Resilient Vancouver Strategy</a>	<ul style="list-style-type: none"> <li>Identifies potential resilience stress of an aging population and older persons' need for resilience supports</li> </ul>
September 2019	Council awards <a href="#">Social Innovation Project Grants</a> to support prototyping age-friendly strategies and actions	<ul style="list-style-type: none"> <li>Funds projects developed in response to prompts and questions from the Age-Friendly Solutions Lab</li> </ul>
January 2020	Council passes <a href="#">motion</a> to explore alignment with UN Sustainable Development Goals (SDGs)	<ul style="list-style-type: none"> <li>Many SDG goals, targets, and indicators reference needs of older persons in access to housing, transit, green space, and full participation in society</li> <li>Initial alignment to SDGs through Healthy City Dashboard is template for linking with other frameworks and networks</li> </ul>
March 2020	BC Provincial Health Officer declares COVID-19 pandemic a public health emergency	<ul style="list-style-type: none"> <li>Older persons disproportionately likely to experience severe illness and death</li> <li>Initial response closes services, includes direction to stay home and avoid contact</li> <li>City activates emergency operations centre, including focus on equity-denied populations, but older persons identified as gap area</li> </ul>
December 2020	Vantage Point creates Seniors Safety Plan builder	<ul style="list-style-type: none"> <li>Addresses disproportionate impacts of service closures on older adults by helping senior-serving organizations reopen sooner</li> <li>Supported by City through funding from the Partnership for Healthy Cities</li> </ul>
June 2021	Extreme heat event	<ul style="list-style-type: none"> <li>Heat-related deaths disproportionately impact older persons living alone</li> <li>Prompts greater resilience and capacity-building efforts from City and health authority</li> </ul>



Date	Event	Contribution to Age-Friendly Work
July 2021	Council adopts <a href="#">Equity Framework</a>	<ul style="list-style-type: none"> <li>• Makes equity commitments around long-term engagement, learning, representation, relationships, resources, and accountability</li> <li>• Takes Indigenous-centred, race-forward, intersectional approach</li> <li>• Acknowledges age as a protected ground in human rights legislation and names ageism as an intersecting form of oppression</li> </ul>
January 2022	Council passes <a href="#">motion</a> on advancing efforts for an age-friendly city	<ul style="list-style-type: none"> <li>• Motion brought forward by Council liaisons on behalf of the Seniors' Advisory Committee</li> <li>• Directs staff to report back on a plan to advance age-friendly policy with ongoing intersectional approach</li> <li>• Directs report back on request for dedicated staff resources</li> </ul>
April 2022	City develops initial <a href="#">Housing Needs Report</a>	<ul style="list-style-type: none"> <li>• Notes disproportionate experience of housing insecurity among older renters</li> </ul>
April 2022	City adds disaggregated datasets to <a href="#">Healthy City Dashboard</a>	<ul style="list-style-type: none"> <li>• Public reporting on outcomes across determinants of health disaggregated by age, and platform for reporting on specific social sustainability strategies</li> <li>• Creates platform for alignment with international frameworks, initially SDGs</li> </ul>
July 2022	Council passes <a href="#">motion</a> requesting that a position dedicated to older persons be included in the 2023 Budget for Council consideration	<ul style="list-style-type: none"> <li>• Motion brought forward by Council liaisons on behalf of Seniors' Advisory Committee</li> </ul>
July 2022	Council adopts <a href="#">Accessibility Strategy</a>	<ul style="list-style-type: none"> <li>• Commits to eight focus areas: built environments, transportation, housing, information, employment, engagement, capacity, and advocacy</li> <li>• Includes age-related impairments in definition of persons with disabilities</li> </ul>
December 2022	Council passes <a href="#">motion</a> directing review of Age-Friendly Action Plan and aligning with WHO Age-Friendly Cities Framework	<ul style="list-style-type: none"> <li>• This report responds to this motion</li> <li>• Online stakeholder survey conducted February 2023</li> </ul>
Winter 2022-present	City begins work on Seniors Housing Strategy	<ul style="list-style-type: none"> <li>• Action within implementation of Housing Vancouver Strategy</li> <li>• Engagement begins spring 2023</li> </ul>
February 2023	Metro Vancouver adopts <a href="#">Metro 2050</a> as new Regional Growth Strategy	<ul style="list-style-type: none"> <li>• Requires municipalities to prepare regional context statements demonstrating policies for resilient, healthy, connected, and complete communities</li> </ul>
February 2023	Council <a href="#">directs staff to fund a Seniors Planner</a> position in the 2023 Budget	<ul style="list-style-type: none"> <li>• Sets direction to create dedicated position focused on older persons</li> </ul>

## Appendix C Engagement Summary

In the [motion](#) of December 7, 2022, Council directed staff to prepare this report “in consultation with the City’s Seniors’ Advisory Committee and other relevant stakeholders”. Because of the limited time to report back, a full engagement process was not possible, so staff used an online survey tool to collect open-ended feedback on age-friendly policy work in Vancouver.

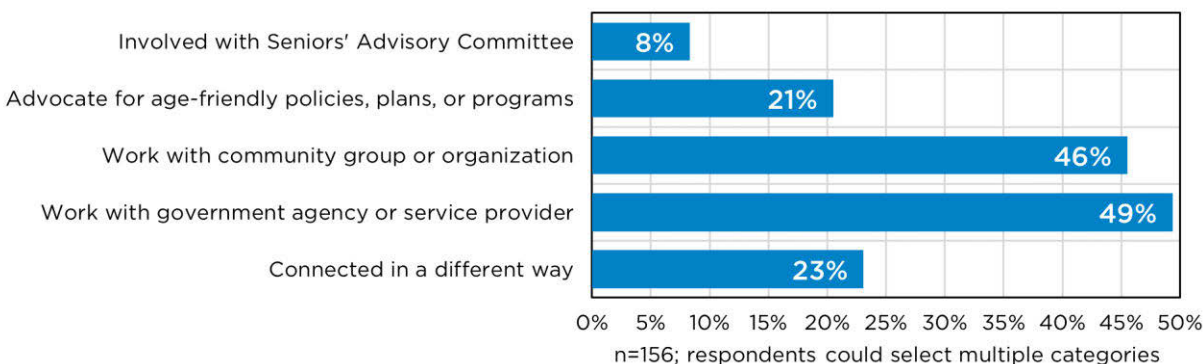
The Seniors’ Advisory Committee (SAC) was disbanded with the end of the previous Council term, and the new Older Persons and Elders Advisory Committee struck by the current Council has not yet begun work. Staff reached out to former co-chairs and members of the SAC in the previous term who continue to be engaged in City processes. Other stakeholders included contacts for seniors-serving organizations that receive City grants; the United Way of the Lower Mainland; Vancouver Coastal Health, including both population health and direct service staff; the Hey Neighbour Collective and partners engaged in enabling community connections; and organizations that have been engaged in the forthcoming Seniors Housing Strategy. All respondents were invited to refer the survey to others, and many respondents, including former members of the SAC, also provided feedback directly to staff through calls and emails. SAC members also emphasized the importance of reviewing their existing work on age-friendly policy, notably the jurisdictional scan completed in 2022.

At deadline (February 21, 2023), the City received 163 responses to the survey. Respondents were not required to answer every question on the survey, and could leave any part blank. Responses have been coded using a mix of deductive (e.g. organizing responses by existing policy goals and frameworks) and inductive (i.e. identifying common themes shared by participants) methods. The full dataset will be shared with the new Seniors Planner once that position is filled.

### Respondents’ relationship to age-friendly work

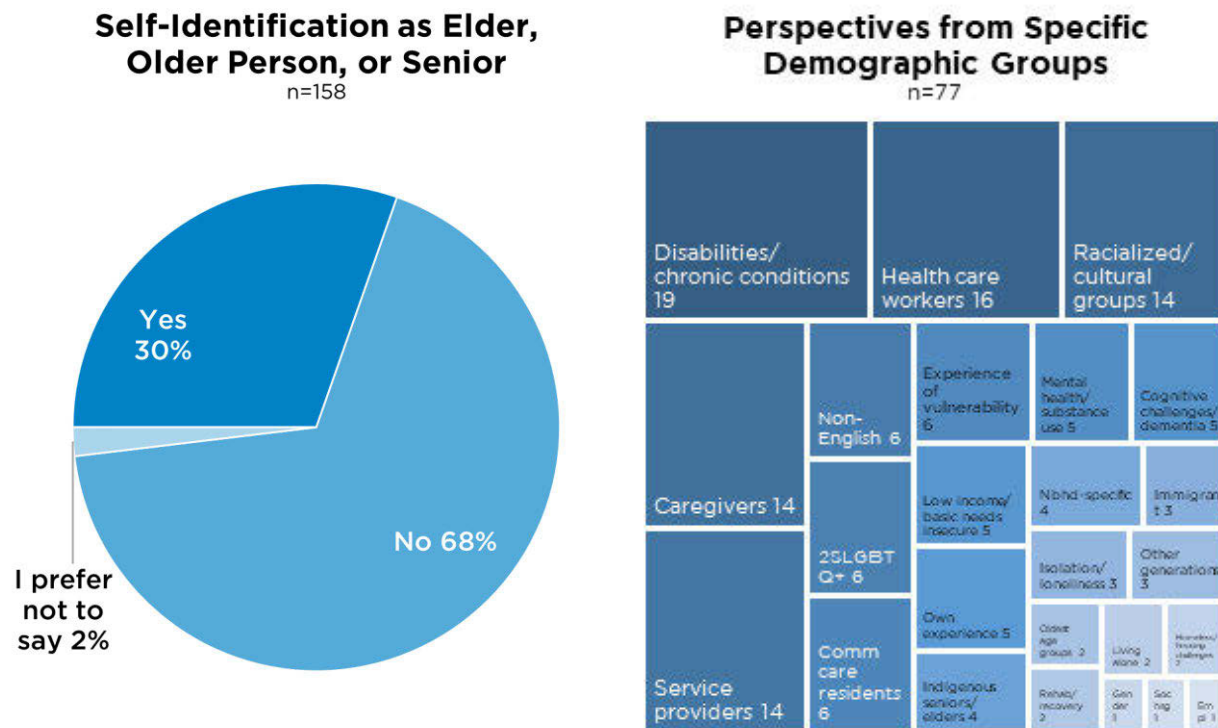
Respondents indicated their relationship to age-friendly policy work, and the results reflect the individuals and organizations contacted. Thirteen respondents indicated that they had been involved with the SAC. Nearly half of respondents identified as working with a government agency or service provider. People connected in different ways included caregivers, volunteers, as well as people who identified specific roles or organizations instead of a category.

### Relationship to Age-Friendly Work at the City of Vancouver



### Respondents' demographics and perspectives offered

Nearly a third of respondents self-identified as an elder, older person, or senior. Nearly half of respondents also shared an intersecting identity or demographic group whose perspectives shaped their responses. The most common intersecting perspectives were people with disabilities; health care workers; racialized or cultural groups; caregivers; and community service providers.



### Current challenges and emerging issues

In total, 155 respondents identified challenges and emerging issues relating to older persons in Vancouver. Some key themes in the survey included:

- A majority of respondents gave feedback relating to housing and the need for integrated access to healthcare and homecare services. Themes within these categories included challenges with housing affordability, including the increased risk of older persons experiencing homelessness; difficulties transitioning between different types of housing as people age and their needs change; and significant financial barriers, limited scope, and waitlists for homecare services.
- Many respondents identified issues relating to transportation and the built environment, particularly emphasizing the importance of accessible and reliable public transit while sharing their concerns about specific experiences (accessing priority seats, bus stop consolidation, reroutes caused by street closures, a lack of benches and shelters, and barriers to using HandyDART services). Many respondents identified uneven sidewalks as a barrier to people navigating their neighbourhood, and emphasized the importance of accessible design features. Some respondents were concerned about conflicts between older persons when sharing space with people using bikes and scooters.
- Many respondents identified social connections and isolation as a key issue to address. Examples included reduced mobility making it more difficult to connect with friends and



neighbours; family members who cannot afford to live in Vancouver being farther away; and the challenges of finding community spaces and programs that are safe, accessible, and meet people's language and cultural needs.

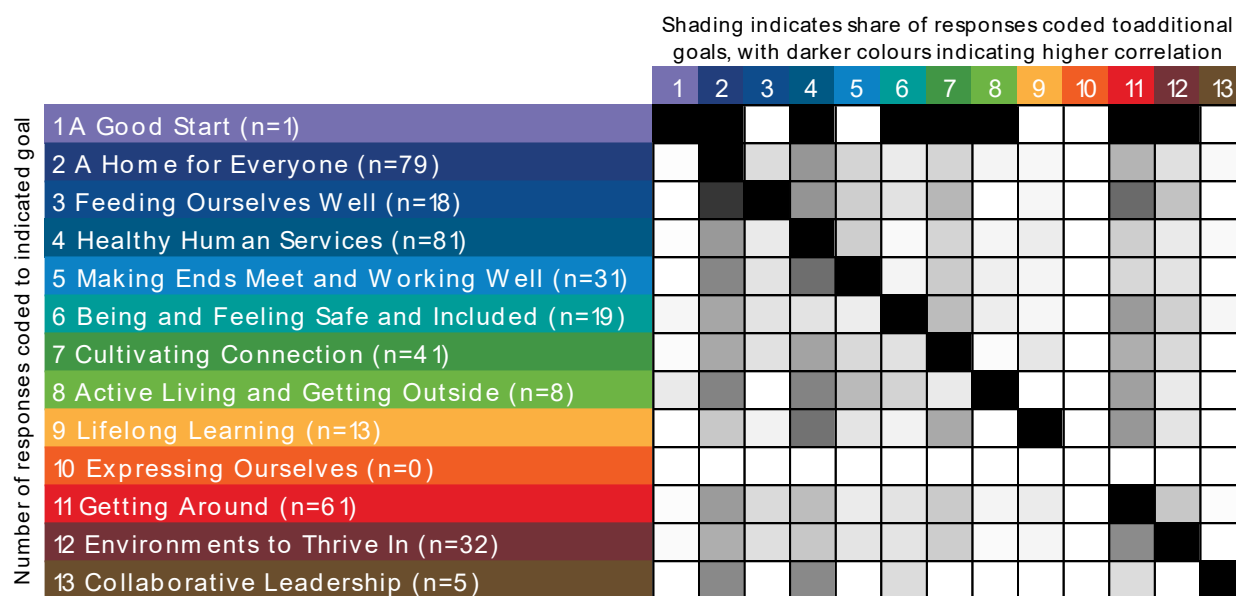
- Income was reported as both an important issue by itself, and also in the context of these themes of housing, services, transportation, and social connections. Many respondents shared examples of older persons experiencing food insecurity because of their housing costs, or being unable to access opportunities for socialization because of income barriers.
- Many respondents noted challenges with accessing information in an increasingly online world, and the need for supporting older persons with technology and training.

The SAC jurisdictional scan identified six key challenges and priorities: safe and affordable housing; home care; transportation; social isolation and community engagement; funding for seniors; and emergency preparedness.

A key finding is that issues experienced by older persons are often connected; gaps in age-friendliness can reinforce each other. Social isolation, inaccessible transportation, food insecurity, inadequate housing, a lack of physical activity, and barriers to health services all interact and contribute to poorer outcomes for older persons.

The chart below provides one illustration of the interconnection between these issues, using Healthy City Strategy goals as a high-level framework: it shows, for example, that survey responses related to transportation (Goal 11, Getting Around) were highly correlated with many other issues and goals. Public transit is then not just a necessity for mobility, but also for food security, safety, and social connection.

### Challenges and Emerging Issues Relating to Elders, Older Persons, and Seniors Correlations Between Healthy City Goals



### Impacts of age-friendly work at the City of Vancouver

Respondents were asked if they were familiar with past and present work at the City, and what has been the most impactful. 133 respondents answered this question. About 50% of

respondents could not identify any specific work by the City, and another 5% also commented on a general loss of momentum from previous work.

People commented positively on a number of past City policies and projects, including:

- Work led by the previous SAC (e.g. SILAS report, jurisdictional scan);
- The previous Age-Friendly Action Plan (2013-2015);
- The overall Healthy City Strategy (2014-present);
- The Age-Friendly Solutions Lab (2018-2019);
- Ongoing funding to community organizations through grants (although some respondents also noted that funding is inadequate); and
- Emergency response initiatives e.g. more proactive planning for heat emergencies.

### Good practices and examples from elsewhere

The SAC jurisdictional scan provides a detailed study of practices in Canadian cities, including advisory bodies; age-friendly strategies, plans, and implementation approaches; engagement approaches; human resources; and financial resources. Networks like the WHO Age-Friendly Cities Network also offer structures for connecting with other jurisdictions.

101 survey respondents shared examples of good practices, including a mix of specific policies or programs from other places and more general impressions of practices that Vancouver can learn from. These suggestions are summarized in the table below. Ideas are presented in alphabetical order, but the most frequently-mentioned suggestions included universal accessibility, intergenerational services and communities, and dementia-friendly spaces.

Practices and examples that Vancouver could learn from	
Within Canada	<ul style="list-style-type: none"> <li>• Accountability and monitoring (Toronto)</li> <li>• Discount programs (Sunshine Coast)</li> <li>• Education campaigns (Surrey)</li> <li>• Indoor walking track (Calgary)</li> <li>• Overall policy work (Richmond; Surrey; Langley; Edmonton; Calgary; Toronto; Ottawa; Montréal)</li> <li>• Public spaces (North Vancouver)</li> <li>• Racial equity and support for cultural diversity (Toronto)</li> <li>• Senior housing models (Ontario in general; North Vancouver)</li> <li>• Transit accessibility and custom transportation (Toronto; Richmond)</li> </ul>
Americas	<ul style="list-style-type: none"> <li>• Automatic ownership of long-term rental housing (Central America)</li> <li>• Free, fun events (Mexico City, Mexico)</li> <li>• Intergenerational centres (San Diego, California)</li> <li>• Intergenerational housing (Portland, Oregon)</li> <li>• Outdoor gathering spaces (Latin America in general)</li> </ul>
Asia	<ul style="list-style-type: none"> <li>• Accessible washrooms (Taipei, Taiwan)</li> <li>• Courtyards and park space (Guangzhou, China)</li> <li>• Local government leadership (Ōsaka, Japan)</li> <li>• Overall aging policies, and long-term care system (Japan)</li> <li>• Signage and education on etiquette (Singapore)</li> <li>• Signage, lighting, intersection design, crossings with accessible features (Asia in general)</li> <li>• Value and respect for elders embedded into all areas (Okinawa, Japan)</li> </ul>



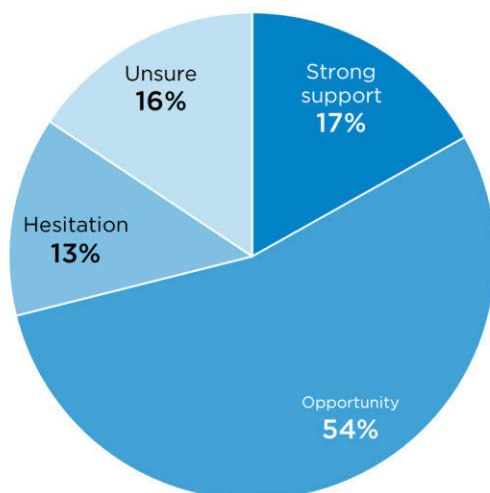
Practices and examples that Vancouver could learn from	
Europe	<ul style="list-style-type: none"> <li>• Drug policy and safety (Portugal)</li> <li>• Dementia villages (Netherlands; Denmark; Europe in general)</li> <li>• Dementia-friendly neighbourhoods (Manchester, UK)</li> <li>• Intergenerational housing and communities (England; Denmark; Europe in general)</li> <li>• Long-term care supports and volunteerism (Norway)</li> <li>• Social support system and redistributive policies (Finland; Sweden; Denmark)</li> <li>• Public education on dementia (Netherlands)</li> <li>• Space for people instead of cars (Europe in general)</li> <li>• Wellness checks by postal workers (UK)</li> </ul>
Good Practices, Location Not Given	<ul style="list-style-type: none"> <li>• Accessibility</li> <li>• Affordable housing</li> <li>• Assisted living</li> <li>• Better home care and outreach</li> <li>• Dementia villages</li> <li>• Evidence-informed policy</li> <li>• Financial compensation for caregiving</li> <li>• Food security programs</li> <li>• Intergenerational communities, households, and services (e.g. childcare and eldercare together)</li> <li>• Intergenerational engagement</li> <li>• Lighting of trails and walkways</li> <li>• Normalizing aging</li> <li>• Regular engagement with and about seniors</li> <li>• Safer public spaces</li> <li>• Support for existing services, including longer-term funding</li> <li>• Transit signage e.g. to give up seats for elders</li> <li>• Transit-oriented communities</li> <li>• Volunteer service matching platform</li> <li>• Walkability, including age-friendly design and maintenance</li> </ul>

### Benefits and challenges of aligning with an international framework

Following Council's direction to review the WHO's Age-Friendly Cities Framework and other global standards and best practices, 106 respondents shared benefits and challenges of aligning with these frameworks. Of the 83 responses that offered an opinion or direction for the City, a majority of respondents saw a potential positive opportunity to align with an international framework, and many respondents commented on specific policy areas that Vancouver could improve on by applying international practices.

### Sentiment About Alignment with WHO Framework

n=83



### Policy Areas That Could Benefit from International Framework



The most commonly-identified benefits of aligning with the WHO's Age-Friendly Cities Framework were:

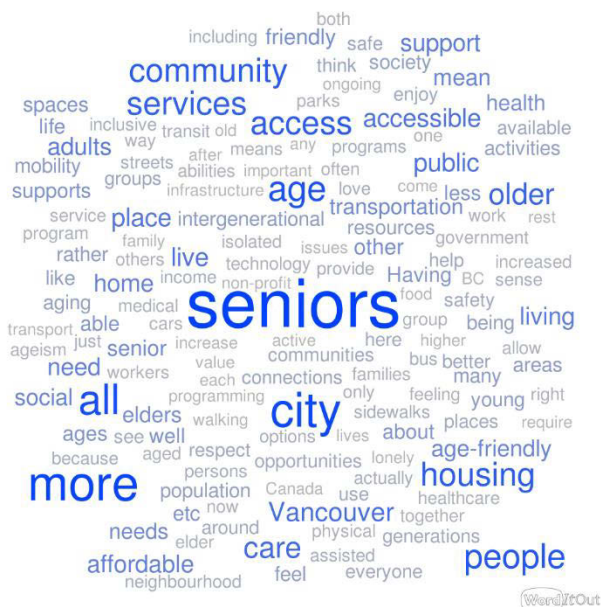
- Vancouver improves outcomes that benefit older persons' everyday lives;
- Contributing to an international network promoting best practices;
- Age-friendly policy requires a holistic framework;
- Vancouver would gain ideas from other cities;
- Reduce long-term costs (e.g. in the health care system) with a preventive approach;
- Align with an international set of values; and
- Support more intentional monitoring and evaluation of age-friendly policy.

The most commonly-identified challenges of aligning with the WHO Framework were:

- Potential costs and loss of focus on implementing existing policies and strategies;
- International frameworks do not account for community-specific needs i.e. localized issues in Vancouver or specific neighborhoods;
- Challenges around coordination and compliance;
- International frameworks do not account for cultural needs or differences;
- There is a more urgent need to take action on known issues such as housing affordability.

Respondents were asked what it would mean to them for Vancouver to be an age-friendly city. 138 respondents shared a response; the word cloud at right illustrates some of the words and phrases used most often.

The most common responses related to the issues and challenges identified by respondents: housing, services, transportation, and social connections. But a common theme through many responses was the importance of a comprehensive strategy, both across the lifespan (i.e. an all-ages approach) and across determinants of health (i.e. a holistic approach). Some specific outcomes that these approaches could lead to include:



- An accessible city, with universal design in public and private spaces;
- Opportunities for everyone in all neighbourhoods to age in place in a diversity of affordable housing options;
- A culture of care and support within families, communities, and social groups coming together to support people as they age;
- Intentionally-designed intergenerational communities where people share experiences across the age spectrum;
- Increased in-home services and supports so that needs are met where older persons already are;
- Addressing ageism and building respect for older persons;
- Recognizing the value and contributions older persons make, rather than seeing them as a burden or cost;
- Clearer leadership within the City of Vancouver for age-friendly policies; and
- The opportunity for everyone to stay within the City of Vancouver regardless of their age, ability, income, or other circumstances.

Survey respondents were invited to provide any additional information, and 55 respondents left an additional comment. Most people reiterated policy suggestions around housing, transportation, healthcare, and access to services, but some more general comments included:

- The importance and urgency of the City proactively responding to demographic change.
- The importance of understanding the diverse makeup of older persons in Vancouver.
- Worry for the future quality of life, both of people who are currently of older age and those that will be.
- The importance of a connected, collaborative, and holistic approach.
- Appreciation for the chance to give feedback and the hope that it will result in action.