

Inclusive Design Must Be Integrated With Drive for Sustainability

The Demographic Tsunami Continues

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Preserving mobility for older Canadians an emerging concern

The following is based on a presentation to the Special Senate Committee on Aging by the Canadian Urban Institute (CUI) in April. The committee, chaired by the Honourable Sharon Carstairs, P.C., has issued two interim reports to date. The CUI was asked to comment on the second interim report, "Issues and Options for an Aging Population."

IN ITS FIRST REPORT, the committee identified three categories of seniors—the "young old" who are healthy, fit and reasonably affluent; the "middle old" who are starting to slow down and have less money and resources; and the "frail old" who are very elderly and have special social and physical needs. This confirms the basis of the CUI's research into the impact of changing demographics on quality of life for older Canadians. We agree with the committee's finding that people who have been physically active throughout their lives are more likely to continue this pattern after retirement. The physical design and layout of Canada's communities plays a key role

in facilitating "active living." As a result of the World Health Organization's work in promoting Age-Friendly cities, there is growing awareness among Canadian policy makers regarding the need to prepare for and adapt to the demands of an aging society. But acknowledging the opportunity is not enough. We believe there are important reasons why the federal government should take concrete steps to address these matters.

Most people agree that "aging in place" is a desirable goal. But our research suggests that unless action is taken to address a variety of issues (ranging from urban design to the way that government services are delivered), the quality of life enjoyed by older Canadians will take a turn for the worse. The reality of urban living in this country is that most Canadians depend on the private car to get to work, carry out errands and accomplish the things that provide us with one of the most attractive qualities of life in the world. But if a majority of senior citizens lives in communities where one needs a car to be able to function, what happens when we get too old to drive? A majority of older

Canadians live in single-family houses, located in urban areas. Most residential suburbs built since the Second World War have developed as car-dependent communities where essential services and amenities such as shops, health care, libraries and community centres are not available within walking distance. Even when services are present in shopping malls, the lack of sidewalks and the width of suburban arterial roads is a daunting prospect for anyone whose agility and strength has started to decline.

The current generation of baby boomers, who over the coming decades will become "senior citizens," has higher expectations in terms of mobility than any other generation before it. This creates the prospect that reduced mobility, which will occur if and when seniors are forced to give up driving, will have a negative impact on quality of life if steps are not taken to address this issue.

Within a period of 25 years or so, by which time seniors will comprise one in four Canadians, the make-up of Canada's communities will "look and feel" very different from today's cities. The resulting impact on government finances, the delivery of public services and priorities for how the private sector responds to these changes, will likely see profound changes throughout society.

Our search for best practices has focused on two countries that are ahead of Canada in

MOTORING ALONG

Ontario Transportation Minister Jim Bradley recently introduced the notion of a graduated licence scheme that would make it easier for older motorists to keep driving by banning driving at night or driving on 400-series highways. At present, it is an "all or nothing" proposition, whereby physicians have a responsibility to recommend removal of driving privileges when tests show that patients are no longer capable of driving safely. This approach has been commented on favourably by the head of the Insurance Bureau of Canada.

These issues have been discussed in the *Ontario Planning Journal* over a period of several years. A key concept is whether driving is a right or a

AGING IN PLACE

Most people connote aging in place with remaining in one's home. This issue was addressed in the Ontario Planning Journal several years ago in an article by Gordon Harris, entitled "Suburbs are no place to grow old." Surveys by CMHC suggest that people aged 55–64 are just as likely to choose single-family dwellings when moving house as any other age group. In Britain, the Lifetime Homes, Lifetime Neighbourhoods program acknowledges that the desire of older citizens to remain in their homes results in costly accidents resulting from falls. This also has an impact on health care costs. The Ministry of Health successfully made the case that it is cost-effective for the government to take on the chore and expense of retrofitting houses with special railings and other modifications that reduce the likelihood of falls because this significantly reduces the length of stay in hospital for people recovering from accidents around the house. As well, the government recognizes that senior citizens often stay in their homes long

after they are able to keep up with routine maintenance. Arguing that it is in the public interest for property to be kept in good repair—and thus maintain its ratable value—the government is introducing a "handyman" program that not only subsidizes the costs of maintenance but which warrants the quality and legitimacy of those carrying out the work. This acknowledges that older people are particularly susceptible to being "ripped off" by unscrupulous tradesmen.

But aging in place can also refer to the ability to remain in one's neighbourhood by encouraging the location of age-friendly apartments and long-term care facilities as part of the development mix. The inclusive design approach advocated by the CUI addresses this issue. Research carried out in Edmonton found that facilities to which seniors move after they can no longer stay in their homes are often located "out of district," making it hard for friends and relatives to maintain regular contact.

terms of the aging of the population: Japan and the United Kingdom. Building on insights from these places, we urge this Committee to consider recommending that the government adopt the principles of universal or inclusive design to guide the actions of all government departments and its relationships with provincial and territorial governments. Japan did this nearly a decade ago and the positive impact of inclusive design is being felt throughout Japanese society. Even though Japan has the most elderly population in the developed world, everything from the design of transportation systems to the delivery of government services is now viewed through the lens of equal access for everyone. This pro-active approach is also helping Japan mitigate the impact of ageism.

A second recommendation, which builds on the first, is to borrow an idea from the U.K. The government there is implementing a "cross departmental" policy called "Lifetime Homes, Lifetime Neighbourhoods." Nested

privilege. Assuming the latter, the CUI has argued that the current approach that allows seniors to self-regulate is problematic. It is also not appropriate to ignore reality by acquiescing to the opinions of those who argue that targeting seniors is a form of ageism. There is clearly a massive problem to be addressed, namely that we have created car-dependent suburbs and that seniors who live in these suburbs, and who lose their ability to drive (for whatever reason) will be severely affected by a loss of mobility. The Minister's proposals need to be discussed openly and rationally. The current system would need to be dramatically overhauled to fairly address the issues raised, making this a matter of public policy rather than shifting the onus onto physicians.

within broader initiatives to promote sustainability, this program has set aggressive targets for introducing inclusive design into the private housing market, planning and municipal service delivery. A key attribute of this program is that its principles are to be embedded across government departments. Health is a key player, but, unlike the situation in Canada, the role of departments affecting the built environment such as planning, housing and transportation, as well as delivery of government services for matters such as income support and communications, enjoy equal consideration.

The report, less than a month old, states "Good design works well for people of all ages, but for those with mobility problems, or with cognitive impairments it can make the difference between independent living and social exclusion . . . It is not just lifetime homes that are needed, but lifetime neighbourhoods, where older people are not left out because they cannot access buildings or public spaces. . . . these are neighbourhoods where transport, good shops, green spaces, decent toilets, and benches, are consciously planned for people of all ages and conditions."

Canada's future prosperity depends on how well our cities and towns adapt to what the CUI calls the "demographic tsunami." As with demographics, there are powerful forces at play that drive the tsunami forward. The impact will vary across the country, reacting to differences in climate, immigration levels, and regional economic drivers. How well we learn to retrofit existing communities and change our approach to the design of new places in the coming decades to accommodate an environment where a quarter of the population is eligible for retirement will decide our future.

To achieve the goal of active aging referred to in its report, the CUI recommends the following:

- First, the federal government will need to broaden its understanding of the impact of an aging society beyond health care and fiscal issues to fund research and work collaboratively with its many agencies, departments and commissions as well as other levels of government. Adopting the principles of universal or inclusive design will go a long way towards advancing this goal.
- Second, urban planners, led by organizations like the Canadian Urban Institute, the Canadian Institute of Planners, and provisional affiliates like the Ontario Professional Planners Institute, are well placed to foster collaborative partnerships with all levels of government, other design professionals, health care professionals, developers and other investors, to creatively approach the design of new communities and the retrofitting of existing ones.

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Presentations and other articles dealing with the demographic tsunami can be found at www.canurb.com/aging.