

Canada's Aging Rural Population

The Role and Response of Local Government



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CANADA'S AGING RURAL POPULATION

THE ROLE AND RESPONSE OF LOCAL GOVERNMENT

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FOREWORD

On behalf of the Intergovernmental Committee on Urban and Regional Research (ICURR), we are pleased to present Dr. Gerald Hodge's report entitled, *Canada's Aging Rural Population*. Issues related to rural Canada's development and future challenges are an important area of interest for ICURR's research agenda.

Although the aging of Canada's population has already been well documented, the doubling of the number of Canadians aged 65 and over between 1961 and 1991 has only just brought about the realization that many trends, and difficulties will have to be addressed at the local and regional levels. Rural Canada now has an estimated 3,000 communities with populations of under 10,000, and concentrations of seniors significantly above the national average, and was a logical starting point to examine the demographic consequences that will soon confront most Canadian communities.

Dr. Hodge and his assistants, Lauri McKay and Pierre Beeckmans, surveyed over 200 small rural communities to determine the impact that an aging population has had on local governments in rural region of the country, and what the municipal response to these challenges has been. Despite the problems posed by overlapping federal and provincial jurisdictions, they were able to succinctly present the many issues that an aging population represents for small rural communities in Canada.

ICURR would like to sincerely thank Dr. Gerald Hodge and their study team for their commitment and dedication.

Michel Gauvin, MCIP
Executive Director

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BIOGRAPHICAL NOTES

Gerald Hodge is Coordinator of Research and Training for the Community Economic Development Centre as well as Adjunct Professor in Gerontology at Simon Fraser University. He is a professional community and regional planner and also directs COPLAN Consultants of North Vancouver. The focus of Dr. Hodge's work is the *economic and social development of rural regions and smaller communities*. For the past decade he has directed much of his work to the situation facing the elderly who live in small towns. He has conducted major studies on housing for the rural elderly (for CMHC) and transportation for the small town elderly (for SIP). He is the author (with M.A. Qadeer) of Towns and Villages in Canada (1983).

Dr. Hodge holds a doctorate in regional planning from MIT as well as an MCP (California) and BA (UBC). Dr. Hodge was Director of the School of Urban and Regional Planning at Queen's University, 1973-1986. He is a member of the British Columbia Seniors' Advisory Council.

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We would like to take the opportunity to thank those who helped bring this project to fruition, especially Dr. Claude Marchand and her staff at ICURR who conducted the Quebec surveys and generally eased our concerns and facilitated our progress. Government officials from the ten provinces, two territories, and CMHC provided helpful input during the study. The manuscript was prepared by Jeanette Paisley with her usual efficiency and good spirit. And, not least, we are grateful to the many officials in small rural municipalities across the country who took the time to answer our questions. Without them, this picture could not have been drawn. It is dedicated to them with the hope that they will continue to enjoy and serve their seniors. Of course, none of the above is responsible either for errors of omission or commission.

Gerald Hodge
Lauri McKay

February 1993
North Vancouver, BC



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EXECUTIVE SUMMARY

1. Data have been accumulating that show the aging of the Canadian population is nowhere more evident than in smaller and rural communities. High concentrations of the elderly have both social and economic implications for small municipalities given their limited financial and human resources as well as their lack of mandate to respond to seniors' needs.
2. In the Spring of 1992, The Intergovernmental Committee on Urban and Regional Research (ICURR) undertook a nationwide study to determine the impact of population aging on rural municipalities and to document the challenges facing them. A sample of 209 municipalities under 10,000 in population was selected by the provinces and territories and surveyed for this information. Responses were received from 183 (or 87.6%).
3. An array of 31 support services and facilities for seniors, both formal and informal, served as a model to gauge the presence of "supportive environments" for seniors in rural municipalities. Communities with a fully supportive environment would possess a variety of support services, health care services, housing options, means of transportation, and access to information.
4. Only eight of the 31 basic supports are found in half of the rural municipalities surveyed. The most common seniors' supports are, in order of incidence: homemaker service, family physician, seniors' public housing, home care nursing, seniors' centre, bus for the handicapped, intermediate care centre, and meals-on-wheels. The weakest sectors are in the area of transportation and social and recreation services.
5. The smaller the rural community the fewer the basic support services within its boundaries. The most numerous rural communities surveyed, those under 500 in population, tend to have only four basic supports. Only those communities above a population of 5,000 have a fairly complete supportive environment of 20 or more basic supports.
6. Overall population growth, the proportion of seniors in the population, and the extent of the local tax base may each affect the supportiveness of the local environment. While estimates of local population change were almost equally divided between growth, stability, and decline, nearly 70 percent of municipalities stated that their seniors' population had grown in the past decade. Less than six percent indicated a decline in the number of seniors.
7. Over 90 percent of municipalities claimed seniors comprised at least 10 percent of their current population. Estimated shares of seniors in the community population averaged 30 percent. One-sixth of local officials were not knowledgeable about their elderly populations.

8. Revenue from residential taxes are meagre in most rural municipalities, offering very limited resources to serve seniors. One-half of the municipalities surveyed indicated residential taxes accounted for \$500,000 or less in annual revenue.

9. The survey found only 15 percent of municipalities experience problems due to the number of local seniors. Problems mostly concern the need to provide additional services and pressure on existing services. Problems are no more prevalent in the smallest communities than in the largest.

10. About two-thirds, on the other hand, report benefits from the presence of seniors. They find that seniors participate in and volunteer for community activities, act as a source of historical and cultural background, and provide experience and expertise for community endeavours.

11. Three kinds of financial difficulties are encountered by municipalities: funding distinctive services for seniors, additional costs of infrastructure, and making up for provincial cut-backs in seniors' programs.

12. Over 30 percent of municipalities have taken steps to ensure continued economic viability in recognition of their aging populations. The kinds of steps include: undertaking an economic development program, promoting economic diversification, encouraging younger families to move in, and expanding the housing stock for seniors.

13. Encouraging seniors to move to their communities is a strategy being used by one-quarter of the municipalities, regardless of municipal size, concentrations of seniors, or part of the country. They use the following methods: providing services and facilities, advertising, and providing public housing.

14. Few municipalities (15%) incorporate seniors' needs into their official municipal plans. Similarly, only one-third have explicit line items in their current annual budgets devoted to expenditures in regard to seniors.

15. Nevertheless, over 30 percent are planning for projects to meet the needs of seniors. The following kinds predominate: new seniors' housing, health care facilities, social and recreation facilities, and transportation.

16. Considerable agreement exists on the difficulties faced by rural municipalities in achieving these needs: insufficient funding from the province, programs that are inflexible to local differences, complex regulatory and approval processes, and provincial down-loading of social programs.

17. The steps that some municipalities have taken to respond directly toward their seniors' needs are encouraging, but the majority (over two-thirds) are not making similar efforts.

Although most profess benefits from the presence of seniors, they take little direct action.

18. Since the vast majority of supports considered important for seniors are under the jurisdiction of municipalities, the small municipality cannot be held solely responsible for managing an aging population's needs.

19. Currently, municipalities may play a role in (a) lobbying the province for services and facilities, (b) encouraging and assisting local groups to develop seniors' services, (c) providing local infrastructure to make community environments more amenable to seniors, and (d) planning supportive land use arrangements.

20. The supportive environment required by rural seniors (even at a minimum level), is characterized by the need to form, energize, and service diverse partnerships. Municipalities are the governmental unit nearest the locus of seniors' needs. They can be the pivotal component in such partnerships, but they will need resources, knowledge, and support to do this, particularly from the provincial/territorial level.



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INTRODUCTION

PURPOSE AND CONTEXT

Purpose of the Study

Data have been accumulating that show the aging of the Canadian population is nowhere more evident than in smaller and rural communities. It has been estimated that over 3,000 rural communities under 10,000 population already have concentrations of seniors that the nation as a whole will not experience for two more decades (Hodge, 1987). Such high concentrations of the elderly have both social and economic implications for small municipalities.¹ Not only do most have limited local financial and human resources, but also they have no legislated mandate to respond to the needs of seniors. The latter is a provincial or territorial prerogative.

Thus, in the Spring of 1992, The Intergovernmental Committee on Urban and Regional Research (ICURR) undertook a nationwide study to determine the impact of the aging of the population on small rural municipalities. The overall objective was to document the challenges facing small communities with an aging population. This documentation could, in turn, serve as a basis for senior governments to develop appropriate policy.

The survey sought to determine, in particular, the kinds of impacts that an aging population makes on local governments in rural regions of the country as well as the municipal responses and initiatives to address the impacts. A sample of 209 small rural municipalities, selected by provincial and territorial departments of municipal affairs, was surveyed to collect this information. The results of the survey are presented in subsequent chapters.

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Aging Trends in Canada

The number of Canadians aged 65 and over more than doubled between 1961 and 1991! From about 1.4 million in 1961, their numbers grew to 2.7 million in 1986 and to 3.2 million in 1991. This represents about 128 percent growth in thirty years. During the same period, the growth of the overall population, by contrast, was only 50 percent. As a proportion of the population, the elderly segment grew from 7.6 percent of the total to 11.7 percent. Current Canadian forecasts are for this percentage to double in the next 40 years. The commonly accepted prediction is that, by the year 2031, the elderly will comprise 22 percent

¹In this report, references to "the elderly," "seniors," or to "senior citizens" denote persons aged 65 and over.

of the population (Stone and Fletcher, 1986).

TABLE 1: CHANGES IN THE NUMBER OF CANADIAN SENIORS LIVING IN RURAL AND URBAN AREAS, 1961-1986

Settlement Type	Number Aged 65 and Over			
	1961	1971	1981	1986
Rural Areas	601,200	657,900	803,200	851,500
Rural Farm	134,700	82,400	56,100	55,600
Rural Non-Farm (Including towns and villages under 1,000 population)	288,700	340,900	461,600	516,800
Small Towns (Covers towns and villages 1,000 to 10,000 population)	177,800	234,600	285,500	279,100
Urban Areas	789,800	1,086,200	1,558,100	1,849,000
Small Cities (Covers urban areas between 10,000 and 100,000 population)	195,500	287,000	361,800	389,100
Large Cities (Covers urban and metropolitan areas of more than 100,000 population)	594,300	799,200	1,196,300	1,459,900
TOTAL ELDERLY	1,391,000	1,744,100	2,361,300	2,700,500

Source: Census of Canada.

The seniors' segment of the Canadian population is expanding in size because people are living longer than ever before. In particular, the 1961-1991 growth in seniors is attributable to:

- the rapid growth of population from 1900 to 1930,
- the larger families of these early decades, and;
- reduced adult mortality rates after 1940.

Moreover, Canada is not unique in experiencing the aging of its population. A number of Western European countries and the United States, for example, all have significantly higher concentrations of the elderly than Canada (Crandall, 1991).

Geographical Patterns of Aging

About one-third of Canada's population lives in rural areas and two-thirds live in large urban areas. The seniors' population is similarly distributed according to the 1986 census (see Table 1). While both urban and rural areas have similar concentrations of the elderly, it must be remembered that the rural elderly are distributed over a much larger area. The result is a much lower density of rural as compared to urban elderly that, in turn, has consequences for the delivery of services to rural seniors.

By province, Ontario has the largest number of senior citizens, but Saskatchewan has the highest concentration. In 1986, the concentrations of seniors 65 and over in Saskatchewan, Prince Edward Island, Manitoba, and British Columbia all exceeded 12 percent, compared to 10.7 percent for the nation. Above-average levels of rural seniors prevailed in Prince Edward Island, Nova Scotia, Ontario, Manitoba and Saskatchewan in 1986 (Stone and Frenken, 1988). The latter provinces also have the highest proportions of rural seniors aged 75 and over, the age group that requires most support.

Rural Aging Trends

Clustering Tendencies

The total population in rural areas of Canada, including small towns up to 10,000 population, grew by only eight percent from 1961 to 1986. This is a mostly urban country, even for seniors, as Table 1 shows. Despite this, the number of persons 65 and over in rural areas grew by 250,000, or 42 percent in this period. On the farm, there was considerable decline in the number of seniors, while in the towns and villages, both incorporated and unincorporated, the number of seniors mushroomed. Two tendencies explain this clustering: (1) small town seniors are no more likely to move away from their communities than urban seniors are to move from their neighbourhoods (Hodge, 1987; Northcott, 1988); and (2) retiring farmers are more likely to move to a nearby town than move away.

TABLE 2: PERCENTAGE OF POPULATION AGED 65 AND OVER BY SIZE AND TYPE OF SETTLEMENT, CANADA, 1986

Settlement Type	Percent Population 65 and Over
Rural Areas	9.6
Rural Farm	6.2
Rural Non-Farm	10.2
Small Towns:	
1,000 - 2,499	14.7
2,500 - 4,999	13.8
5,000 - 9,999	12.2
Small Cities:	
10,000 - 29,999	11.4
30,000 - 99,999	11.9
Large Cities:	
100,000 - 499,999	11.2
500,000 and Over	10.2
TOTAL CANADA	10.7

Source: Stone and Frenken, 1988.

This has led to levels of seniors in rural towns and villages much higher than in cities, on farms, or in the countryside. As early as 1971, there were concentrations of 16 percent — twice the national average — in towns of less than 500 (Hodge, 1987). The concentrations of elderly in all sizes of small town have continued to grow and, by 1986, towns in the 1,000 to 2,500 range were averaging nearly 15 percent elderly, more than one-third higher than the national average (Table 2).

If present trends continue, the concentration of the elderly in small towns will be considerably higher than the figure predicted nationally. It has been estimated that the majority of small towns could have concentrations of at least 25 percent by the turn of the century, long before the nation does (CMHC, 1991).

Age Distribution Patterns

Older people are not affected by aging in identical ways, but there are some general tendencies associated with one's numerical age. For example, one's ability and/or willingness to drive a car tends to decline as does one's ability to climb stairs. Gerontologists distinguish three broad age groups of the elderly because of many associated behaviours and needs: the 65-74 group (the "young-old"), the 75-84 group (the "old"), and the 85+ group (the "very old"). The two oldest groups are the fastest growing among the elderly (Stone and Fletcher, 1986). Further, this is so for both urban and rural seniors.

The very old in small towns have a strong tendency to live in their familiar communities. Indeed, if they do move it is often only to a larger town nearby with more support services (Hodge, 1987). Conversely, one finds very low concentrations of those 75 and older living on farms or in the countryside, the majority having moved earlier to a nearby town. Thus, small towns are fast becoming the home of the old and very old.

Gender Patterns

In Canadian cities, elderly women significantly outnumber elderly men (Stone and Frenken, 1988). However, this pattern is not repeated in most Canadian small towns. Indeed, the number of males exceeds the number of females in the 65-74 age group in small towns up to 1,000 population. Although the excess of elderly men compared to women in small towns has been declining in recent years, elderly men are still 20-30 percent more numerous there than in cities. This is even true in the 85+ age group (Hodge, 1987).

Implications and Challenges for Small Communities

Typically, communities in rural areas are small and so are their local governments. Almost by definition their resources — financial, technical, and human — are bound not to be very extensive. The growth in the number of elderly people in a small community can have significant social and economic impacts for the municipal government. Impacts ranging from the maintenance of public services, to the provision of new services, to the economic viability of business are not uncommon for rural municipalities to be facing, as the survey results will show.

The high concentrations of the elderly found in many small communities do not, at the same time, mean large numbers of seniors. Thus, rural municipalities are often faced with finding solutions to serve small numbers of seniors. The large distances between rural communities and cities may pose other problems in providing direct services to seniors. Furthermore, many services seniors need may not be under the jurisdiction of the municipality.

The challenges to a rural municipality regarding its aging population are both insistent and difficult, as we learn from the survey. The first is to recognize that the elderly, most of whom

are very long-time residents, are a population with special needs in health care, housing, support services, and transportation. The second is to mobilize very limited local resources to meet seniors' needs in areas of municipal jurisdiction. The third is to encourage other sectors of the community to support seniors. The fourth is to lobby other jurisdictions for services and facilities required by local seniors.

Perspective on the Study

Each of the ten provincial and both territorial governments provided a list of municipalities to be surveyed. Together, the sample totalled 209. The sampling frame sought municipalities under 10,000 population, in rural areas, and covering a range of population sizes. Small deviations from these criteria exist within the sample. For example, two municipalities over 10,000 in population, Whitehorse and Yellowknife, are included to provide a wider array of population sizes in the northern territories. The sample also contains a mixture of incorporated small towns and large area municipalities such as townships, parishes, and districts. At the same time, the sample is a good reflection of the range and diversity of municipal arrangements in rural Canada.

The provincial and territorial distribution of municipalities included in the survey, and the number responding, are listed below. The participation rate was 87.6 percent

<u>Province/Territory</u>	<u>Number</u>	
	<u>Sampled</u>	<u>Responding</u>
Newfoundland	11	8
Prince Edward Island	15	13
Nova Scotia	8	8
New Brunswick	13	10
Quebec	39	34
Ontario	34	30
Manitoba	13	11
Saskatchewan	14	14
Alberta	17	14
British Columbia	25	24
Yukon	7	7
North West Territories	13	9
TOTAL	209	183

By 1991 population levels, the municipal units that responded to the survey are distributed as follows:

<u>Population 1991</u>	<u>Percent</u>
500 or less	12.0
501 - 1,000	20.6
1,001 - 2,500	33.7
2,501 - 5,000	20.6
5,001 - 9,999	12.0
Over 10,000	1.1

The survey instrument used in the project is included in Appendix A along with a brief description of the methodology employed.

An important caveat regarding the study is that its results *apply only to those parts of rural areas covered by municipal units*. The southern rural portions of the Prairie Provinces, Ontario and Quebec, and Prince Edward Island are almost fully covered. But in rural British Columbia, Newfoundland, New Brunswick, and Nova Scotia, about one-half of their rural populations live in areas that have no municipal organization. Thus, many rural seniors have no local government unit to respond to their needs.

COMPONENTS OF A SUPPORTIVE ENVIRONMENT

Bases of Seniors' Independence

Through their actions and opinions, seniors say, "we want to continue to live independently in our communities." The watchword is seniors' independence (SI), and it is not an idle phrase. For example, over 92 percent of seniors in Canada live in and manage their own dwellings. However, as the National Advisory Council on Aging (NACA) points out (1989), many seniors "encounter barriers to maintaining an independent lifestyle." Among the most crucial "barriers" are those that limit seniors' access to three basic components of SI — housing, transportation and support services. Each of these components pertains to communities (of all sizes) and their local governments.

One also needs to grasp that these basic components of SI, along with health care, are closely related to each other. All of them have to be there in adequate quantity and quality to provide the foundation for seniors' independence. They should function in concert with one another since a senior's need for one component often triggers a need for one of the others. Take, for example, the ability of older people to get around their own communities and regions. Transportation, in NACA's words, "means access to health, recreation, and social services" as well as ensuring "that older people can contribute to the community" (NACA, 1989), while the Ontario Advisory Council on Senior Citizens titled one of its reports "The Freedom to Move is Life Itself" to denote the crucial interrelations among the components of SI.

Serving seniors' need essentially involves matching the components of SI with the needs of the seniors population in the particular community. The starting point is to pose certain basic questions about one's seniors' population: what is their age structure, income level, and health status? how many live alone? and how mobile are they? In practice, most communities have begun to respond to such questions with a variety of services and facilities for their seniors, e.g., meals-on-wheels, extra-mural hospitals, lodges, support groups, homemakers, handi-vans, etc.

The Idea of a Supportive Environment

The array of support services and facilities for seniors, such as those just mentioned, constitute part of a "supportive environment" for seniors. That is, they support seniors in their pursuit of independence. (This is akin to NACA's notion of an "enabling environment.") Communities with a fully supportive environment would possess a variety of formal and informal support services, health care services, housing options and means of transportation, access to information, and safe walking and shopping environments. Of course, the full extent

TABLE 3: BASIC SERVICES AND FACILITIES TO SUPPORT SENIOR CITIZENS.

- A. Health Care**
- 1) family physician(s)
 - 2) nursing home/intermediate care
 - 3) extended care hospital
 - 4) acute care hospital
 - 5) home care nursing service
 - 6) adult day care centre
 - 7) palliative care
 - 8) special care (Alzheimer's)
 - 9) medical equipment loan service
 - 10) foot care clinic
- B. Housing**
- 1) seniors' apartments (public)
 - 2) retirement housing (private)
 - 3) congregate housing/lodge
 - 4) supportive housing
 - 5) home sharing match-up
- C. Home Support**
- 1) homemaker service
 - 2) handyman service
 - 3) meals-on-wheels
 - 4) wheels-to-meals
 - 5) emergency response system
 - 6) seniors' counselling
 - 7) hospice service
 - 8) support group(s)
 - 9) information and referral service
- D. Social/Recreation**
- 1) seniors' activity centre
 - 2) wellness program
 - 3) community centre programs for seniors
- E. Transportation**
- 1) regular community bus service
 - 2) taxi
 - 3) bus for handicapped
 - 4) volunteer drivers

of such an environment for seniors usually doesn't begin to emerge until communities reach 30-40,000 population or more, and even then there may be gaps. However, it does serve as a general target, or model, of what ought to be available.

The extent of a supportive environment for seniors may differ from place to place. The number of seniors living in a community may determine whether a certain service can be offered or facility built. The size of community may determine whether financial and/or human resources are available to provide services. Therefore, to place the idea of a supportive environment in perspective one may start with an accepted array of seniors' facilities and services. Those listed in Table 3 comprise the supportive environments typically found in small and medium cities and, thus, provide a reasonable basis for gauging differences among smaller communities.

Such a supportive environment also may be expressed in the form of a matrix, such as the one developed in British Columbia and shown in Figure 1.

Sources of Support

The supportive environment matrix is more than a description of needed services and facilities. It may be seen as a "map" of the support service terrain and how services are delivered to seniors. Thus it illustrates the nature of the task of managing an aging population.

One feature of the matrix relates to an important functional issue: the need for professionally qualified personnel to deliver the support service. In general, as one views the matrix from left to right, the services require fewer and fewer professional staff. This is a reflection of the number of clients required to justify a service. For example, an acute care hospital offering emergency medical services or an extended care centre are more highly specialized than homemaker services or a seniors' centre. The latter, therefore, are found more widely dispersed than the former. In the context of the low populations, low densities, and large distances of rural regions, the difficulty of distributing seniors' services is exacerbated. This is a major obstacle to providing services to the rural elderly, as Steinhauer (1980) noted in her observations of rural U.S.A.

A second important feature revealed by the matrix is the variety of ways to provide services as well as the different agencies likely to be involved in their provision. Four typical ways of delivering services needed by seniors are:

- (1) directly by the provincial government (as with ambulance service in B.C.);
- (2) through community or regional non-profit agencies under contract from the province (as with homemakers through Local Community Service Centres in Quebec);

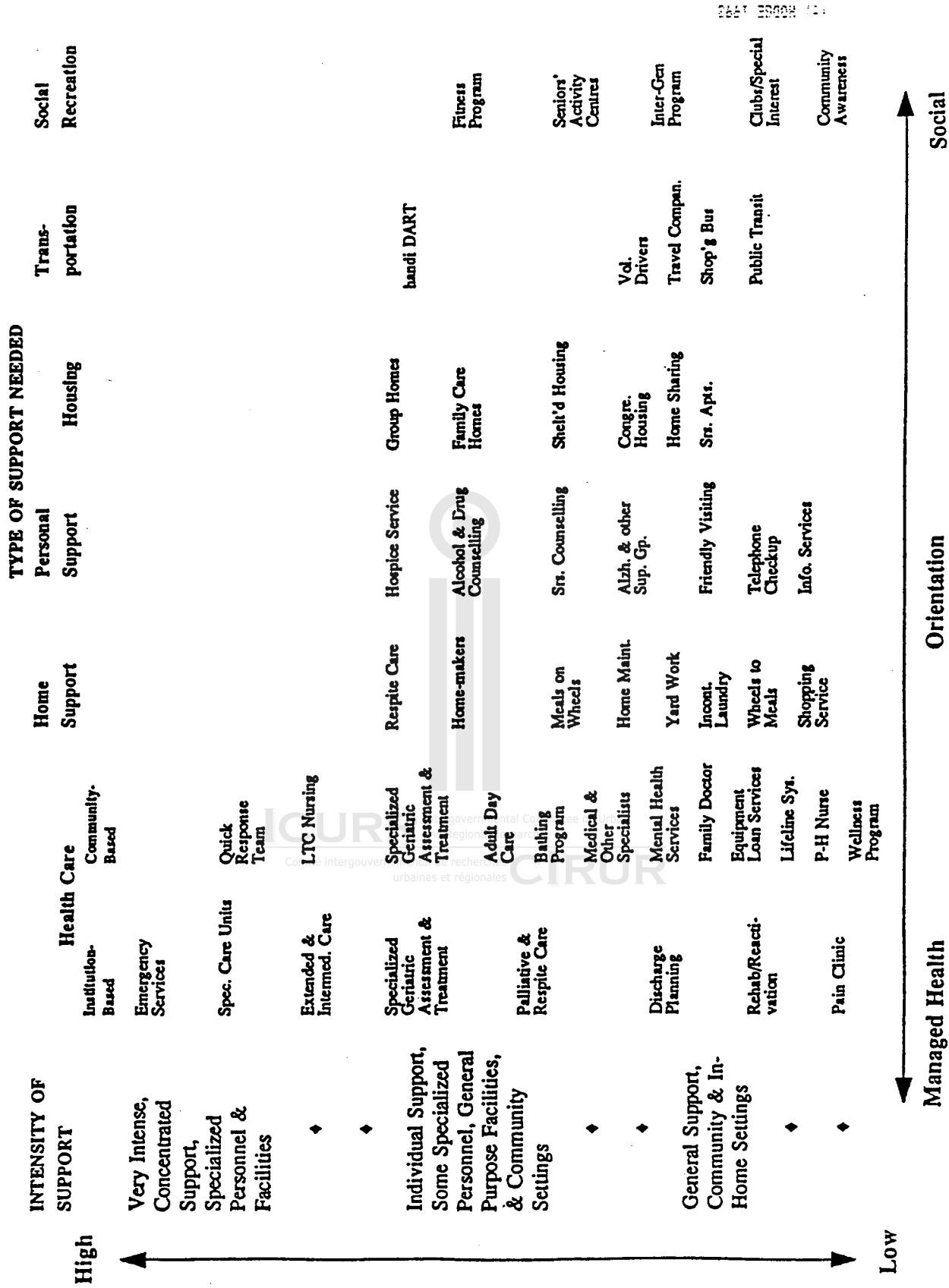
(3) directly by non-profit societies with senior government funding (meals-on-wheels in almost all provinces), and;

(4) spontaneously by community-based, volunteer-led service groups (such as with support groups and volunteer drivers).

It is important to note that even where these delivery modes are being used, they function mostly through *ad hoc* arrangements in all provinces. There is no overall plan for delivering services to seniors and there is no coordinated system of services in rural regions in Canada. Indeed, the bulk of support services in the matrix are delivered from the non-governmental sector by a host of independent organizations.

In general, local and regional governments have no mandated role in the supportive environment, although many do take advantage of provincial programs (e.g., transportation). In this report we shall see that about 70 percent of municipalities surveyed had growing seniors' populations and that many are concerned about current levels of services. Many municipalities have taken the initiative to serve seniors better in rural Canada. From these efforts, perhaps we can learn how the energies and strategic position of municipalities can be harnessed in managing an aging population. A role still must be worked out for rural municipalities in this increasingly important realm of serving seniors.

Figure 1
Support Environment Matrix



SUPPORTIVE ENVIRONMENTS IN RURAL CANADA

Approach of the Study

Following the general model of a supportive environment for seniors presented in the last section, the survey started by determining the nature and extent of support in rural municipalities. Municipal officials were asked to consider a list of 31 separate facilities and services, falling into five categories, that comprise a complete supportive environment. They cover health care, housing, home support, social/recreation support, and local transportation (see Table 3). Provision was also made for noting additional supports that may exist in a community.

The survey sought to determine if the community provided at least one of each of the listed facilities and services. In short, these data provide a picture of the extent to which a supportive environment exists for seniors in rural communities. The entire picture has been stratified by the population size of the municipality to assess the degree to which size makes a difference in the support environment. It is helpful to examine each of the five categories of the support environment in terms of particular areas of strength or weakness for rural seniors. These facets of the picture are described in the text and tables below.

Prevailing Support Environments

The availability of support services, facilities, and programs for seniors in rural Canada is far from complete. Only eight of the 31 basic supports are found in at least 50 percent of the rural municipalities surveyed (see Table 4). These most common seniors' supports are, in order of incidence:

1. Homemaker service (77.6%)
2. Family physician (74.2%)
3. Seniors' public housing (73.2%)
4. Home care nursing (72.1%)
5. Seniors' activity centre (63.9%)
6. Bus for the handicapped (56.8%)
7. Intermediate care centre (56.8%)
8. Meals-on-wheels (53.0%).

TABLE 4: SHARE OF RURAL MUNICIPALITIES WITH BASIC SUPPORTS FOR SENIORS, CANADA, 1992.

		Percent (n=183)
A. Health Care		
1)	family physician(s)	73.8
2)	nursing home/intermediate care	56.8
3)	extended care hospital	26.2
4)	acute care hospital	35.5
5)	home care nursing	72.1
6)	adult day care centre	19.1
7)	palliative care	17.5
8)	special care (Alzheimer's)	12.0
9)	medical equipment loan service	43.7
10)	foot care clinic	25.1
11)	other (e.g., dentist, ambulance)	25.1
B. Housing		
1)	seniors' apartments (public)	73.2
2)	retirement housing (private)	29.2
3)	congregate housing/lodge	19.7
4)	supportive housing	2.2
5)	home sharing match-up	0.0
6)	other (e.g., granny flats, group home)	5.5
C. Home Support		
1)	homemaker service	77.6
2)	handyman service	36.1
3)	meals-on-wheels	53.0
4)	wheels-to-meals	9.3
5)	emergency response system	45.4
6)	seniors' counselling	24.0
7)	hospice service	18.0
8)	support group(s)	33.9
9)	information and referral service	4.4
10)	other (e.g., church visiting)	
D. Social/Recreation		
1)	seniors' activity centre	63.9
2)	wellness program	26.2
3)	community centre programs for seniors	41.0
4)	other (e.g., library, drop-in centre)	19.7
E. Transportation		
1)	regular community bus service	15.3
2)	taxi	42.6
3)	bus for handicapped	56.8
4)	volunteer drivers	44.3
5)	other (e.g., shopping bus)	8.7

Source: Field Survey, 1992

The five supports with the lowest incidence are:

27. Regular community bus service (15.4%)
28. Special care units (12.0%)
29. Wheels-to-meals (9.3%)
30. Supportive housing (2.2%)
31. Homesharing matchup (0.0%).

Only fifteen percent or fewer of the municipalities have the latter services available for seniors. In general, it is apparent from Table 4 that the *strongest* sectors of support for rural seniors are health care, followed by home support, and housing. The *weakest* sectors are in the area of transportation and social/recreation support. However, it is important to note that the situation in individual municipalities is not directly expressed here.

The Level of Support

Support coverage differs from place to place, and even the eight most common services do not regularly appear as a group. Indeed, as Table 5 shows, half the places surveyed (median value) have at least 11 services. However, the most frequently observed situation (modal value) is a rural town or township with only four services. Again, health care and home support services are most prevalent with two to three different types being available. Housing, transportation, and supports for social/recreation are minimal, tending to be present in one form only, if at all.

Many of these differences are reflected in the size of the community, as we see when we examine the modal values for the total number of services present in a community. Figure 2 shows the number of existing services among the 31 basic services for five population size groups (1991) of the municipalities surveyed. Here we see that *the smaller the rural community the more likely it is to have fewer basic support services for its seniors within its boundaries.*

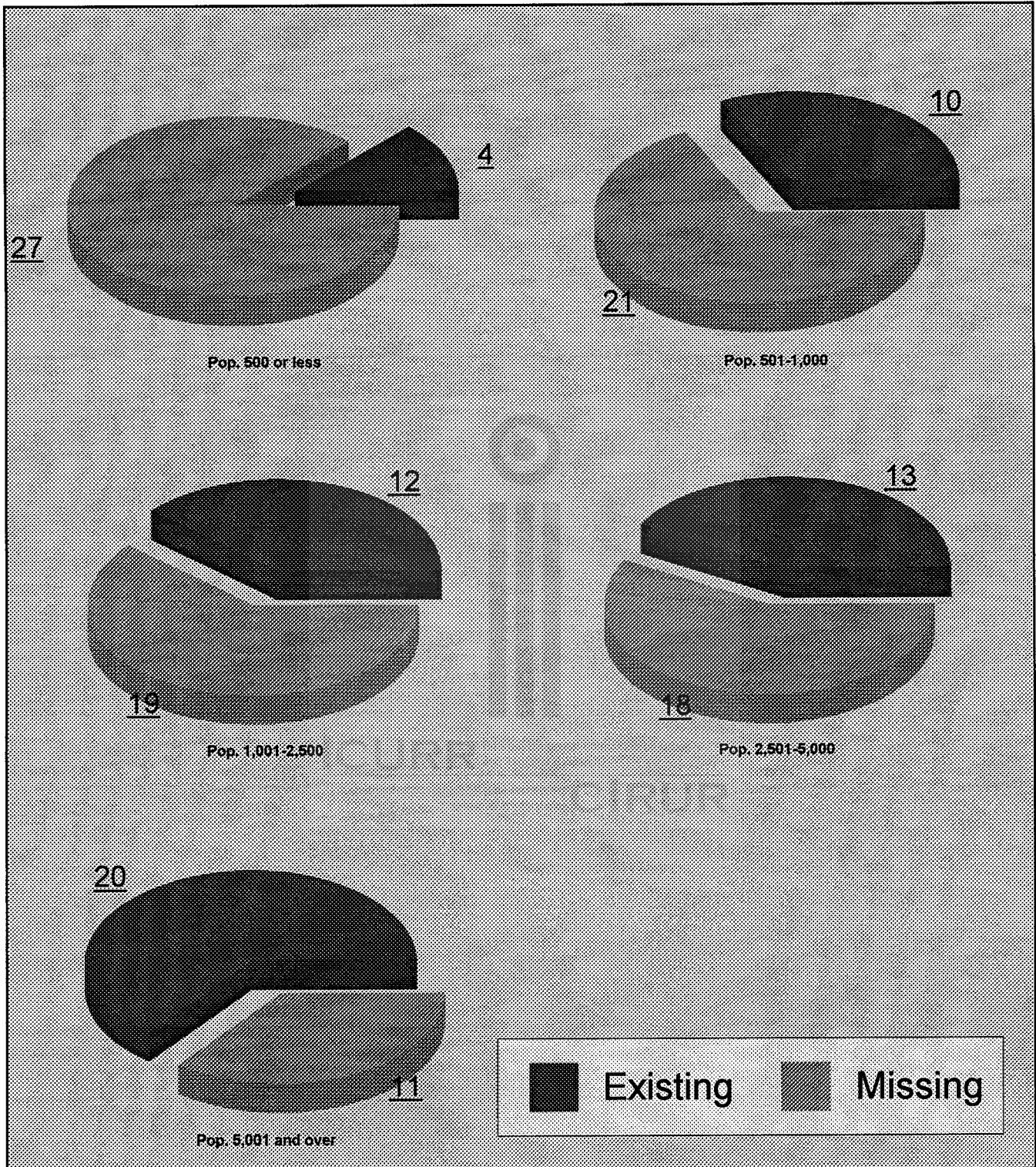
Indeed, the survey also shows that *many rural communities have a complete dearth of some or all basic support services.* Table 6 presents the incidence of communities without any senior supports overall and in each of the five categories of support. A very small proportion of places lack any services at all and almost all are in the lowest population group. However, nearly one-fifth of all rural municipalities, regardless of size, lack any dedicated housing for seniors and an almost equal share lack any social or recreational services especially for seniors.

Again, the lack of services in each of the five categories becomes increasingly apparent with

Figure 2

Support Services for Seniors

Modal Values



Source: 1992 ICURR Survey

TABLE 5: NUMBER OF SENIOR SUPPORT SERVICES IN RURAL MUNICIPALITIES, CANADA, 1992.

	Median Value (middle)	Modal Value (most common)
All Support Services	11	4
A. Health Care	4	2
B. Housing	1	1
C. Home Support	3	2
D. Social/Recreation	1	1
E. Transportation	2	1

Source: Field Survey, 1992 (n = 183).

TABLE 6: PERCENT OF RURAL MUNICIPALITIES LACKING ANY SUPPORT SERVICES FOR SENIORS BY POPULATION SIZE, CANADA, 1992.

Percent Without Senior Supports

	Under 501	501 - 1,000	1,001 - 2,500	2,501 - 5,000	Over 5,000	All Places
All Support Services	9.5	0.0	0.0	2.8	0.0	1.6
A. Health Care	19.0	16.7	11.9	5.6	0.0	10.4
B. Housing	52.4	22.2	18.6	11.1	4.3	19.1
C. Home Support	28.6	13.9	10.2	8.3	0.0	10.9
D. Social/Recreation	47.6	25.0	10.2	11.1	4.3	17.5
E. Transportation	33.3	11.1	13.6	11.1	0.0	13.1

Source: Field Survey, 1992 (n = 183).

decreasing size of the community. However, *there are substantial gaps in the support environments among all sizes of community up to and including the 2,501 - 5,000 category.* Only above 5,000 population do communities begin to have a fairly complete supportive environment, but even in these fairly urban situations weaknesses may exist in housing, transportation, and social/recreation support for seniors.

Regional Variations

The survey was not designed to compare levels of rural support for seniors among the provinces and territories (due to differences in the number sampled in each and small sub-samples overall). However, some general tendencies do emerge in the data that indicate substantial differences among jurisdictions. Broadly, and looking only at the overall incidence of services, rural municipalities in the three Prairie Provinces have median and modal values well above those shown in Table 5 for the nationwide sample (i.e., 1.5 - 3 times higher). Also well above average, but below Prairie levels, are municipalities in New Brunswick and British Columbia. The remainder are at levels comparable to the overall sample values.

Reflections

1. One cannot be precise about what constitutes an adequate supportive environment for seniors. Nevertheless, the support levels found in rural municipalities are far below those generally present in medium size and larger cities. Furthermore, larger places usually possess *several forms* of transportation and housing, more than one hospital and nursing home, and medical specialists as well as family physicians, and so on. However, even in rural centres over 5,000 in size, which begin to approach urban levels of support, there is generally only one of each type available. In short, *not only are fewer support services available to seniors throughout rural Canada, but also there is usually no choice among them where they do exist.*

2. Clearly, there cannot be a wide array of support services available in every community large and small. Thus, for many seniors certain services will, of necessity, be available only in a larger town of the region. Accepting this reality there are several issues to be considered. Foremost is the availability of collective transportation at affordable rates for seniors to be able to access needed services in other centres. Closely related is the extent of the trip involved and the physical accessibility of the vehicles being used. As the survey shows, *transportation options in rural communities are often very limited, where they exist at all, thereby also rendering other centres' services inaccessible.*

COMMUNITY TRENDS AND RESOURCES

Revealing the Local Context

The supportive environments discussed above occur within various community settings. The prevailing population growth trends, or degree to which the population is aging, or the size of the local tax base can all affect the need and the ability to provide a supportive environment for seniors. It will help to understand the present picture of available senior supports by placing them in context with these resources and trends.

The survey asked municipal officials to describe several demographic tendencies for their communities: (1) whether they were experiencing general population growth; (2) growth in their seniors' population, and; (3) the share of seniors in the population. They were also asked about the amount raised by residential property taxes in 1991, as a measure of the resources available to municipalities to provide services.

Rural Population Tendencies

Community Population Growth

The average 1991 population of the municipalities surveyed is just over 1,000. Over the past decade, according to local officials, these municipalities experienced population change almost equally divided between growth (38.5%), stability (31.3%), and decline (30.2%). These and other tendencies are shown in Table 7. None of these trends are a regular function of the size of community. That is, *growth or decline or stability happens at all population levels in rural regions.*

Seniors' Population Growth

Regardless of general community population trends, an overwhelming percent of municipalities (69.4%) stated that their seniors' population had grown in the past decade. Only a very small proportion (5.8%) indicated a decline in the number of seniors and about one-fifth had a stable seniors' population in the 1980s (see Table 7). When officials were asked to estimate the share seniors comprised of the community population, the average was about 30 percent. Over 90 percent of municipalities claimed seniors comprised at least 10 percent of their current population; for one-tenth, seniors exceeded 40 percent of the total.

Noteworthy in the foregoing responses is the fact that a sizable proportion of *officials were not knowledgeable about their elderly populations.* Over 19 percent didn't know the share of

TABLE 7: ESTIMATED POPULATION TENDENCIES AMONG RURAL MUNICIPALITIES, CANADA, 1992.

	Change 1981 - 1991		Seniors in 1991 Pop.
	Total Pop.	Seniors	
	(n = 182)	(n = 171)	(n = 148)
	percent		
Growing	38.3	74.3	
Stable	31.3	19.9	
Declining	30.2	5.8	
		10% or less	10.8
		11 - 20%	34.4
		21 - 30%	24.3
		31 - 40%	18.9
		Over 40%	11.6

Source: 1992 Field Survey; estimates of local officials.

seniors in the population and nearly 7 percent didn't know whether their seniors' population was changing. Even among those offering information there was considerable uncertainty.

Local Tax Resources

Municipalities were asked to supply residential tax base data for 1991. *One-half indicated residential taxes amounted to \$500,000 or less in annual revenue* (see Table 8). Indeed, about 10 percent of municipalities surveyed reported tax revenues under \$100,000 while only 36 percent reported revenues to be over \$1 million.

There is a close correspondence between population size and residential tax revenue as one would expect. For example, half the municipalities (the median) with less than 1,000 people had 1991 revenues under \$189,000. Half of those with populations between 1,000-2,500 had revenues under \$450,000, while for those between 2,500 and 5,000, the median was \$1.5 million.

At all levels of population there is considerable variation in the financial circumstances of individual municipalities. In general, however, it appears that *rural seniors live in municipalities without sizable local resources* to devote to competing community demands.

Knowing that seniors are preponderantly home owners, information was sought regarding the proportion seniors contributed to residential property taxes. Of those municipalities responding (51.3%), the average estimate was that *seniors provided 20 percent of residential taxes*. These data are, however, weakened by the lack of response on this issue by almost half the officials surveyed.

Reflections

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1. Nearly 70 percent of rural municipalities, by their own estimates (and those of others), are faced with a growing seniors' population and over half already have proportions of 20-30 percent. But what do these numbers mean in real terms? If we take the average population of the sample towns, 1,000, there would likely be only 200-300 seniors. Even with their numbers continuing to grow, the increments will be small. *Planning for seniors' needs at this small scale can prove difficult*, especially where physical facilities are involved. Small scale is endemic in this aspect of rural planning, as it is in others.

2. Municipal officials clearly need more and better information about seniors. Small scale aside, an essential feature of managing an aging population (or any component) is having factual information about the situation of the community's elders. They are a population with special needs and, usually, are major contributors to the community's financial base, factors municipal managers need to keep in mind.

TABLE 8: REVENUE BASE FROM RESIDENTIAL PROPERTY TAXES FOR RURAL MUNICIPALITIES, CANADA, 1991.

1991 Revenue Base	Percent of Municipalities
	(n = 152)
Under \$100,000	10.5
\$100,000 - \$250,000	19.8
\$251,000 - \$500,000	21.7
\$501,000 - 1,000,000	11.2
\$1,001,000 - \$2,000,000	17.1
Over \$2,000,000	19.7

Source: 1992 Field Survey

IMPACTS OF THE SENIOR POPULATION AND MUNICIPAL RESPONSES

Given the generally meagre assembly of support services for seniors, lack of local resources, small population bases, and the growing number of seniors in rural communities, how do smaller municipalities respond? The survey sought to identify the nature of the problems encountered by municipalities in the face of growing elderly populations. The survey also sought information on how municipalities have responded to these challenges so that this experience can be shared and compared.

Impacts of an Aging Population

Problems From Seniors

A relatively small proportion of rural municipalities indicate experiencing any problems resulting from the number of seniors in their communities. *Only 15 percent acknowledge such problems*; of those responding, the problems tend to fall into two broad categories:

- Difficulties in providing additional services (44.8%), and;
- Pressure on existing services and infrastructure (28.0%).

These manifest themselves in a number of ways; for example, in a lack of beds in the local nursing home or in the need to expand recreation programs to suit seniors' demands. These problems are no more prevalent in the smallest rural communities (under 1,000) than they are in the largest (over 5,000). Communities with higher concentrations of the elderly are slightly more affected (or inclined to notice problems).

Benefits From Seniors

Conversely, a *large proportion* of municipalities, about two-thirds, *experience benefits* from the presence of seniors. They find seniors willing to participate in and volunteer for community activities (48.2%), acting as a major source of historical and cultural background (14.8%), and providing experience and expertise for community endeavours (11.6%). Many officials mentioned how civic-minded seniors are. The benefits seniors bring to communities are experienced by about two-thirds of the municipalities surveyed in all size categories, large and small.

**TABLE 9: INCIDENCE OF ECONOMIC IMPACTS AND FINANCIAL DIFFICULTIES
DUE TO SENIORS IN RURAL MUNICIPALITIES, CANADA, 1992.**

	Percent
Economic Impacts: (n = 72)	
Seniors buy goods/services locally	43.0
Seniors' spending generates jobs	20.8
Seniors pay taxes promptly	11.1
Seniors spend less than others	10.4
Financial Difficulties: (n = 33)	
Seniors require new services	45.5
Provincial cutbacks limit local programmes	18.2
Need for additional infrastructure and maintenance	9.1
Seniors block capital projects	6.1

Source: 1992 Field Survey.

Economic Impacts From Seniors

Municipalities experience a number of specific economic impacts. Over 40 percent of those surveyed identify such impacts. Most of the impacts are positive (see Table 9), such as seniors buying goods locally and paying taxes promptly. The largest negative impact (10.4%) was seen in seniors spending less money for goods and services than younger families and thereby contributing to a reduced local economy. Neither positive nor negative impacts were perceived as strongly in smaller rural municipalities as in larger ones (i.e., those 2,500 and larger), especially those with high concentrations of seniors.

Regarding financial difficulties, *less than one-fifth of the municipalities reported trouble in responding to the needs of seniors*. When they do, three kinds of difficulties account for over 75 percent of the concerns (see Table 9), such as funding services especially for seniors and having to make up for provincial cut-backs in seniors' programs. These issues are common across all sizes of rural municipality in the survey.

It is worth noting that a difficulty often-cited by others — of seniors *not supporting* needed capital projects — was cited by only two municipalities in this survey.

How Rural Municipalities Respond

Steps for Stability

Over 30 percent of the municipalities surveyed, regardless of population size, have *taken steps to ensure continued economic viability and municipal stability* in recognition of their aging populations. Of the nearly 70 communities that provided details of their approaches, the following five responses dominate the list:

- Undertaking an economic development program (31.8%)
- Promoting economic diversification (e.g., tourism) (24.6)
- Encouraging younger families to move in (11.6%)
- Conducting a community futures/visioning program (8.7)
- Expanding housing stock for seniors (4.4%).

These strategies were favoured by large and small municipalities and were being employed by rural communities in all provinces.

Encouraging Migration of Seniors and Continued Residence

About one-quarter of all the municipalities surveyed, regardless of size or current concentrations of seniors, are *actively encouraging seniors to move to their communities*. Of the nearly 50 municipalities taking such initiatives, the following methods are most prominent:

- Providing services and facilities for seniors (29.8%)
- Advertising and other direct promotion (21.3%)
- Providing public housing (14.9%)
- Informal means of promotion (12.8%).

Again, one finds rural municipalities in all parts of the country, not just in southern British Columbia, pursuing this strategy. They grasp that it is as important to retain their seniors' populations as to attract new migrants.

Commonly mentioned services and facilities being provided by municipalities (usually with provincial assistance) are local transportation, medical clinics, and senior centres. A few municipalities also indicate they have taken steps to develop a safe, quiet environment that would appeal to seniors and some offer financial incentives (by way of local tax rebates) to encourage seniors to stay.

Administrative Responses

The responses of a municipality to an aging population could be evident in one or more of the following ways: in the community's plan, in its budget, and in an on-going planning committee. The survey explored each of these possibilities.

1. *Municipal Plans*: Few municipalities have made an explicit commitment to seniors' needs in their official municipal plans. *Fewer than one-sixth* have taken such a step. Where this does occur, the areas of transportation and housing for seniors are most likely to be mentioned in the plan. The plans for two municipalities (one in New Brunswick and one in Ontario) explicitly allow "granny flats" to be used in the community. However, survey responses give the impression that most local plans provide only a general acknowledgement of seniors, if any mention is made at all. Larger municipalities are no more forthcoming in their planning than are small ones, regardless of the proportion of seniors in the community.

2. *Municipal Budgets*: Fully *one-third* of rural municipalities, regardless of size or concentration of seniors, have explicit line items in their current annual budgets devoted to expenditures related to seniors. The financial allocations are most often in the area of transportation, such as contributions to mandated programs for providing a local bus or van. Contributions may also be made toward the cost of a seniors' centre, of seniors' recreation and activity programs, to home supports or, in some provinces, homes for the aged.

3. *Planning Seniors' Services*: *One-third of rural municipalities have some form of planning mechanism* to address seniors' needs. In 75 percent of these communities there is a committee of council or local group performing the planning and coordinating function. Thus, only about *one-quarter of all municipalities get actively involved planning for seniors*. In a further 20 percent, of the one-third of rural municipalities that have some form of

planning mechanism, a provincial agency or provincially-funded health care or home-support society undertakes the task. These mechanisms are used no more frequently in larger municipalities than in small ones. Seniors are actively involved in the majority (85%) of the communities where planning initiatives exist.

Future Plans to Fill Seniors' Needs

Largely under the stimulus of an increasing seniors' population, just *over 30 percent of rural municipalities surveyed are planning for or participating in the planning of projects to meet the needs of seniors*. Municipalities with populations of 2,500 and over are more likely to be actively planning seniors' projects than those below this level.

Of these projects, the following predominate:

- New housing for seniors (48.2%)
- Obtaining extended or intermediate care facilities (26.8%)
- Providing social and recreation facilities (21.%)
- Obtaining additional health care services (10.7%)
- Expanding transportation (5.3%).

In many ways, these needs parallel the problems that rural communities are experiencing (as identified earlier). Only a few municipalities indicate they are prompted to plan such projects as a result of a study of seniors' needs. About an equal number report an initiative by seniors or a provincial initiative as the stimulus for planning new projects.

Reflections

1. *The presence of a large number of seniors appears not to pose major problems for smaller municipalities*. The relatively few (15%) that acknowledge problems see them in terms of shortages of services for seniors. Moreover, the shortages are often in areas that municipalities have no jurisdiction in and/or little leverage over (e.g., nursing home beds, subsidized housing units). Somewhat noteworthy is the reaction to the conventional wisdom that seniors will block new capital works projects not meant for them. This has proved to be illusory in the survey responses and probably should be laid to rest.

2. Not only is the "down" side of seniors minimal, but the "up" side proves to be substantial. Both in community terms (by active participation, extensive knowledge and ready volunteering) and economic terms (by buying locally and paying taxes promptly), *seniors are considered a boon* by many rural municipalities.

3. The response by municipalities to an aging population is mixed to say the least. About one-third are taking steps to diversify and invigorate their local economies, although it is not clear if these efforts are due to seniors' impacts. On the other hand, a significant proportion (25%) see *definite economic benefits in attracting seniors to retire locally* (thereby bearing out

technical studies). Direct promotion is usually coupled with expanding housing stocks, improving transportation, and enhancing the physical environment. Interestingly, these efforts to attract retirees are occurring not just in B.C., but in all provinces.

4. In regard to administrative and legislative initiatives that respond to the presence of seniors, municipalities are not very forthcoming. A small proportion (16%) have a section in their *official municipal plans dealing with the needs of seniors*. This is precisely where steps toward developing an "enabling environment" could be taken. Only one-third of the municipalities have financial commitments pertaining to seniors in their current budgets. These efforts are, of course, encouraging. However, when 60 percent of rural communities already have concentrations of seniors of 20 percent or more, the lack of a more general effort has to be of concern.



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TOWARD MANAGING AN AGING POPULATION BETTER

The majority of rural local governments are aware that many needs of seniors remain unmet. Furthermore, most are not hopeful about their ability to meet these needs. These observations begin to define a basic agenda for managing an aging population in rural areas. Reflections on the substance and process of realizing this agenda conclude this section.

Items for an Agenda on Rural Aging

Rural municipalities, in general, are not content with the levels and quality of support currently available for their seniors. The survey concluded by asking them to identify facilities and services *still needed* in their communities to serve seniors better and whether they anticipated any difficulty in meeting these needs.

Issues of Substance

A total of 67.9 percent of municipalities declare that several facilities and services are still needed for seniors in their communities. Considerable consensus exists on the types of needs to be filled. Housing for seniors tops the list in all parts of the country, followed by transportation and health care needs, as indicated below:

- Housing (37.0%)
- Transportation (23.4%)
- Intermediate or extended care facility (20.2%)
- Recreational and social services and facilities (20.2%)
- Home support services (15.3%).

These topics, which are integral parts of the supportive environment model, reflect a high degree of awareness by local governments of the important needs of seniors. There will, of course, be local variations on the precise needs to be filled. However, as a basic slate of needs, one should not be distracted from this substantive content for a rural agenda.

Issues of Process

The realities faced by rural municipalities in achieving the agenda of seniors' needs are found in their responses to the final question in the survey. They expect, or already experience, the following difficulties:

- Insufficient funding from the province (79.4%)

- Provincial programs inflexible to local differences (25.2%)
- Complex regulatory and approval processes (9.8%)
- Provincial down-loading of social programs (6.9%).

These reactions reflect clearly *the dependent position* in which municipalities see themselves in regard to senior governments, primarily the provinces and their agencies. Whether this perception is imagined or real, or both, it militates against achieving the agenda of seniors' needs. This constraint and others are reflected on below.

Conclusions Regarding Survey Outcomes and Latent Issues

1. While the steps that many municipalities have taken to respond directly and positively toward their seniors is encouraging, *at least two-thirds stand virtually motionless on this issue*. Not infrequently, respondents argue that they treat all population groups as worthy of attention. Whether this results in all groups, including seniors, receiving due attention to their needs is something on which one can only speculate. That the majority profess benefits from the presence of seniors, but take so little direct action, *leaves the impression of benign neglect of seniors' needs by most municipal governments*.

2. Even in the most enlightened circumstances, there are *two significant limitations on municipalities* managing an aging population; one is *geographical* and the other is *functional*. On the one hand, municipal boundaries seldom cover the entire community of seniors in a rural area. Many may live outside incorporated municipalities, which are the locus of vital services. The converse also occurs where seniors congregate in unincorporated towns and villages within district municipalities that have dispersed responsibilities. In either situation, it becomes difficult to effectively mobilize resources on behalf of all seniors.

3. On the other hand, municipalities are limited in the functions they can perform and the financial resources they can mobilize to meet seniors' needs. *None of the 31 supports considered important for seniors are under the explicit jurisdiction of municipalities*. In particular, the provinces retain responsibility over the crucial areas of health care, home support, housing, and transportation, either directly or through regional agencies. Considering the process issues cited above of complex regulations and "cookie cutter" solutions, not to mention inter-ministerial conflicts, *the small municipality cannot be held solely responsible for managing an aging population's needs*.

4. Currently, municipalities may play a role in (a) lobbying the province for services and facilities; (b) encouraging and assisting local groups to develop services for seniors; (c) providing local infrastructure to make more amenable community environments for seniors, and; (d) planning supportive land use arrangements. As important as these may often be, *the municipal role is essentially marginal in meeting seniors' needs at the present time*.

5. The supportive environment required by rural seniors, even at a minimum level, is

characterized by the need to form, energize, and service diverse partnerships. The agenda items cross ministerial lines, municipal boundaries, and private and nonprofit sector lines, often all at the same time for some facilities and services. No single jurisdiction, whether it be provincial, municipal or community board, can manage all the aspects of an aging population in a rural (or urban) area. *Partnerships are essential, but how will they be established and who will service them and promote their effectiveness?* Municipalities are the general governmental unit nearest the seniors and their needs. They could be the pivotal component in such partnerships, but they will need resources, knowledge and support to do this, not least from their provinces.

6. Lastly, *small municipalities do have opportunities to serve seniors better*. Even with their very limited financial resources, small local governments can take positive steps through regulations of land use, noise, safety and security, and traffic. Explicit support of local organizations who serve the elderly and establishing a seniors' advisory committee to the mayor or council (with senior members having a role in decision-making) are two basic ways of making a municipal commitment to elderly citizens.

These and other initiatives that a municipality might take on behalf of its seniors are covered in the following checklist developed by National Advisory Council on Aging. A municipality could start in no better place than to evaluate its current situation regarding seniors.

A Municipality's Checklist for an Aging Population (National Advisory Council on Aging, 1987)

1. Understand that *older persons enhance a community*: they are consumers, volunteers, tax-payers and voters.
2. Establish an Advisory council or Mayor's Committee on aging; engage older persons in decision-making.
3. Support seniors' centres, especially multi-cultural and multi-purpose centres that promote meaningful programs such as health maintenance. Foster mutual self-help, opportunities for friendships at a time in life when this is most important.
4. Improve public transportation in both rural and urban centres; older people prefer to be independent and not depend on friends or family for transportation.
5. Challenge developers and ensure that locations for adult residences are near amenities such as shops, banks, etc.
6. Provide green space. Many older persons were raised in rural areas and value natural resources, gardens and trees.

7. Ensure a choice of suitable, *affordable* housing; quality of life is partly dependent on housing and living environment.
8. Control noise levels; coping with high noise levels is difficult for many older people and can cause undue stress.
9. Ensure that older home owners are not forced out of their homes through high maintenance costs and high taxes. A home is more than bricks and mortar; it is an opportunity to create the type of environment that is most fulfilling.
10. Ensure safety and security; a general sense of insecurity may accompany old age.
11. Mandate coordinated community supports. Appropriate supports mean less institutionalization; often an older person needs help with small maintenance jobs.
12. Provide emergency response for critical situations. Often assurance of help in time of crisis enables an older person to maintain autonomy for a longer period.
13. Provide traffic signals that allow for disabilities.
14. Make your winter community more habitable; provide sheltered walkways, remove snow from bus stops.
15. Above all, develop the *political will to age well*.

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APPENDIX A

Survey Methodology and Survey Instrument

The survey process began in April 1992 with the request for lists of sample municipalities from each of the ten provinces and two territories. The two selection criteria were that the municipalities be located in rural areas and that they reflect a range of populations under 10,000 in size. These were generally met in all jurisdictions except the two northern territories where it was requested to include Whitehorse and Yellowknife.

The municipal address and the name and telephone number of the chief official were also requested. These formed the basis for contact. First, a letter describing the survey's purposes and containing a request for participation was sent along with a copy of the basic survey questions. Second, telephone contact was initiated to establish a suitable time to conduct the survey. Surveys were translated into French and those for Quebec were conducted separately by staff at ICURR.

A total of 209 municipalities comprised the consolidated sample from each province and territory. The distribution of the original sample and of the responses is described in the first section of this report. Altogether, 183 municipalities responded for a participation rate of 87.6 percent.

A minimum of three attempts were made to contact each municipality in the sample. In some instances, respondents preferred to complete the survey themselves and to mail it back. Those not participating in the survey included two refusals, twelve where no contact could be made after repeated calls, and twelve where surveys were not returned by mail as promised (despite follow-up calls).

The survey instrument used in this survey is provided in the following pages.

ICURR SURVEY/1992/Managing an Aging Population/ID No. _____

Province/Territory _____ Municipality _____

First, I would like to ask you about the services that exist in your municipality for seniors.

1. CURRENT SERVICES

a. Health Care

- ___ 1) family physician(s)
- ___ 2) nursing home/intermediate care
- ___ 3) extended care hospital
- ___ 4) acute care hospital
- ___ 5) home care nursing
- ___ 6) adult day care
- ___ 7) palliative
- ___ 8) special care
- ___ 9) medical equipment/loan
- ___ 10) foot care clinic
- ___ 11) other _____

b. Housing

- ___ 1) seniors' apartments (public)
- ___ 2) retirement housing (private)
- ___ 3) congregate housing/lodge
- ___ 4) supportive housing
- ___ 5) home sharing match-up
- ___ 6) other _____

c. Home Support

- ___ 1) homemaker service
- ___ 2) handyman service
- ___ 3) meals-on-wheels
- ___ 4) wheels-to-meals
- ___ 5) emergency response system
- ___ 6) seniors' counselling
- ___ 7) hospice service
- ___ 8) support group(s) _____
- ___ 9) information & referral
- ___ 10) other _____

d. Social/Recreation

- ___ 1) seniors' activity centre
- ___ 2) wellness program
- ___ 3) community centre programmes for seniors
- ___ 4) other _____

e. Transportation

- ___ 1) regular bus around town
- ___ 2) taxi
- ___ 3) bus for handicapped
- ___ 4) volunteer drivers
- ___ 5) other _____

Other than the above services and facilities for the elderly:

f. Is your municipality planning any new projects?

- ___ 1) No
- ___ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____

g. What needs have stimulated these new projects?

- ___ 1) Growth in number of elderly?
- ___ 2) Other (specify) 1) _____
- 2) _____

Now I'd like to ask you some questions about the population in your municipality, particularly the seniors' population.

2. POPULATION CONTEXT

a. Has your total population been changing in the past decade?

- ___ 1) growing in numbers
- ___ 2) declining in numbers
- ___ 3) stable

b. Has your elderly population been changing in the past decade?

- ___ 1) growing in numbers
- ___ 2) declining in numbers
- ___ 3) stable

c. What percent are the elderly (65+) of your total population?

- ___ 1) 10% or less
- ___ 2) 11-20%
- ___ 3) 21-30%
- ___ 4) 31-40%
- ___ 5) over 40%
- ___ 6) don't know.

d. What was the total amount raised in residential property taxes in 1991?

e. What proportion of this came from elderly homeowners?

_____ percent

_____ don't know

3. PLANNING AND MANAGING AN AGING POPULATION

The last set of questions has to do with how your municipality is responding to its aging population.

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a. Has your municipality experienced any problems from the numbers of seniors in the community?

- ___ 1) No
- ___ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____

b. Has your elderly population had any significant impacts on the economy of your community?

- ___ 1) No
- ___ 2) Yes (specify) 1) _____

- 2) _____
- 3) _____

c. Has your municipal government experienced any financial difficulties in responding to the needs of the elderly?

- _____ 1) No
- _____ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____

d. Have you taken steps to ensure continued economic viability and municipal stability as your population has aged?

- _____ 1) No
- _____ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____

e. Are there any specific mechanisms or processes in your community for planning services for the elderly?

- _____ 1) No
- _____ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____



f. Does your municipality take a role in this?

- _____ 1) No
- _____ 2) Yes (specify) 1) _____
- 2) _____
- 3) _____

g. Do seniors get involved in this planning?

- _____ 1) No
- _____ 2) Yes (specify) 1) _____

2) _____

3) _____

h. Do you have a specific section in your official municipal plan devoted to the needs of the elderly?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____

i. Do you have any line items in your current municipal budget that cover services or programs for seniors?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____

j. Has your municipality experienced benefits from the presence of large numbers of elderly in the community?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____



k. Is your municipality actively encouraging elderly people to move to your community?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____

l. Are there any facilities or services still needed in community to serve seniors better?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____

m. Will you have any difficulty obtaining these?

_____ 1) No

_____ 2) Yes (specify) 1) _____

2) _____

3) _____

Now, I've come to the last question.

n. Are there any other issues or concerns regarding the presence of an elderly population in your municipality you would like to comment on?

THANK YOU VERY MUCH FOR TAKING THE TIME TO HELP US

GH/05-22-92

APPENDIX B

Municipalities Participating in the Survey

Newfoundland

Badger's Quay
Clarke's Beach
Springdale

Bonavista
George's Bank
Whitbourne

Catalina
Lewisporte

Prince Edward Island

Alberton
Cardigan
Miscouche
O'Leary
Tignish

Belfast
Georgetown
Montague
Parkdale

Borden
Kensington
Murray Harbour
Summerside

Nova Scotia

Argyle
Digby
Shelbourne

Barrington
Guysborough
Victoria

Clare
St. Mary's

New Brunswick

Baker Brook
Harvey Station
Sackville
Woodstock

Bath
Petitcodiac
Saint-Louis-de-Kent

Dalhousie
Rogersville
St. Andrews

Quebec

Ayer's Cliff
Bedford
Caplan
Disraeli

Baie St-Paul
Black Lake
Champlain
Donnacona

Beauceville
Brome
Cloridorme
East-Broughton

Ham-Nord
La Durantaye
Lac-Etchemin
Lyster
Mont-Laurier
Roxton Falls
Saint-Thuribe
Ste-Genevieve

Iberville
La Malbaie
Lac-du-Cerf
Madeleine-Centre
Riviere Pentecote
Sainte-Anne-de-Beaupre
St-Adelphe

Kamouraska
Lachute
Les Eboulements
Marieville
Price
Saint-Laurent
St-Clement

Ontario

Alborough
Bexley
Brock
Dorion
Enniskillen
Harwich
Howard
Matheson
Oakland
Stonewall

Airy
Brantford
Collingwood
Dunwich
Gosfield North
Herschel
Kennebec
Morris
Portland
Tilbury West

Atwood
Brantford
Darling
Eastnor
Hagerman
Hilton
Manitowaning
Mulmer
Stanhope
Wolfe Island

Manitoba

Elkhorn
Lac Du Bonnet
Pilotmound
Steinbach

Gimli
Mileta
Roblin
Swan River

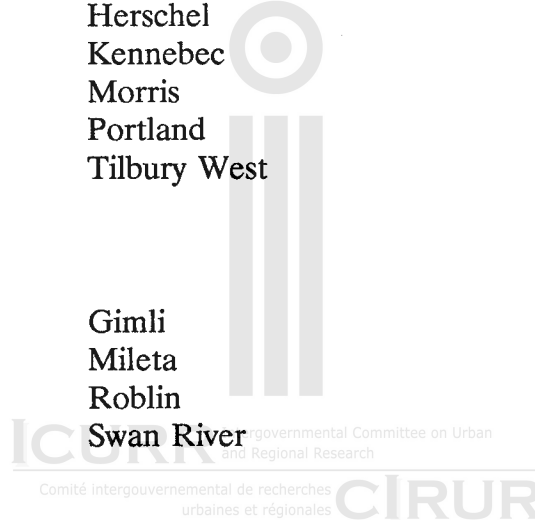
Glenboro
Neepawa
Ste. Anne

Saskatchewan

Assiniboia
Blaine Lake
Canora
Esterhazy
Fort Qu'appelle

Bengough
Broadview
Carrot River
Eastend
Grenfell

Biggar
Dalmeny
Churchbridge
Foam Lake



Alberta

Brooks
Delburne
McLennan
Stetler
Vegreville

Castor
Drumheller
Oyen
Thorhild
Vulcan

Crowsnest
Lamont
Spirit River
Tofield

British Columbia

Chase
Cumberland
Harrison Hot Springs
Lillooet
Osoyoos
Qualicum Beach
Silverton
Trail

Clinton
Duncan
Kaslo
Lumby
Peachland
Salmo
Slocan
Vernon

Creston
Greenwood
Keremeos
Oliver
Pouce Coupe
Sidney
Summerland
Warfield

Yukon Territory

Carmacks
Haines Junction
Whitehorse

Dawson
Teslin

Faro
Watson Lake

Northwest Territories

Cambridge Bay
Town of Hay River
Wrigley Dene

Fort Smith
Igaluit
Yellowknife Band

Hay River Dene
Inuvik
Yellowknife



ICURR Intergovernmental Committee on Urban and Regional Research
Comité intergouvernemental de recherche CIRUR

The Intergovernmental Committee on Urban and Regional Research (ICURR) was set up in 1967 following a Federal-Provincial Conference on Housing and Urban Development. The Committee comprises senior officials from the Federal, provincial and territorial governments of Canada who meet regularly to oversee ICURR's activities - the operation of an information exchange service and research program. ICURR's major objective is to foster communication between policy-makers across Canada working in the fields of urban, rural and regional planning, economic development, public administration and finance, housing, recreation and tourism, transportation and the environment. It also seeks to increase the level of understanding of urban and regional issues through research and consultation.

ICURR's core funding is provided by the Canada Mortgage and Housing Corporation and by the ministries of municipal affairs of the provinces and territories. Canada's municipal governments also participate in ICURR through annual membership as do consultants and universities.

Créé en 1967 à la suite d'une conférence fédérale-provinciale sur l'habitation et l'aménagement urbain, le Comité intergouvernemental de recherches urbaines et régionales (CIRUR) regroupe des représentants des administrations fédérale, provinciales et territoriales du Canada qui se réunissent régulièrement pour orienter le champ d'activités du CIRUR : la gestion d'un service d'échange de renseignements et d'un programme de recherche. Le CIRUR a pour objectif principal de favoriser les communications entre les décideurs d'un bout à l'autre du Canada travaillant dans les domaines de l'urbanisme, de l'aménagement rural et régional, du développement économique, des finances et de l'administration publiques, du logement, des loisirs et du tourisme, des transports et de l'environnement. Il a également pour but d'élargir le champ de connaissance des questions urbaines et régionales par le biais d'activités de recherche et de consultation.

Le financement de base du CIRUR provient de la Société canadienne d'hypothèques et de logement ainsi que des ministères des affaires municipales des dix provinces et des deux territoires. Les municipalités canadiennes, de même que les experts-conseils et les universités, peuvent participer aux activités du CIRUR moyennant une cotisation annuelle.

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