The population of [older adults] in Alberta continues to rise faster than other age groups" and is expected to double by 2040. 1 In Calgary, “this has huge implications on... health care, education, community services and so on”, says Nenshi. 2 Calgary has 1.28 million residents, and 24% are over fifty-five years old. 2 A vast majority of older adults live in private households. 3 Canada is home to “almost six million [older people who] represent a complex and dynamic cohort, with diverse living arrangements and housing needs”. 4 Older adults want to choose “where and how they age in place”. 5 As this issue becomes more pertinent, our society needs to consider the current systems surrounding aging in place.

The Government of Alberta defines aging in place as “having the health and social supports and services needed to live safely and independently in your home or community for as long as you wish and are able”. 1 Aging in place is “linked to greater health and happiness outcomes for [older people]” 6 and it’s seen as “an advantage in terms of a sense of attachment or connection and feelings of security and familiarity in relation to both homes and communities” and relates to sense of identity, independence and autonomy, and roles in relationships. 5 While aging in place can pose challenges in the realm of “self-care, mobility, and household management”, 7 people who choose to age in place are able to maintain relationships and roles within their established communities, keep autonomy, and continue contributing to society in a meaningful way.

24% of Calgary’s population is over fifty-five years old

92% of Alberta’s older adults live in private households

Research question

How might we design and build cities and communities that empower people to age in place?

Problem definition

“The population of [older adults] in Alberta continues to rise faster than other age groups” and is expected to double by 2040. 1 In Calgary, “this has huge implications on... health care, education, community services and so on”, says Nenshi. 2 Calgary has 1.28 million residents, and 24% are over fifty-five years old. 2 A vast majority of older adults live in private households. 3

Canada is home to “almost six million [older people who] represent a complex and dynamic cohort, with diverse living arrangements and housing needs”. 4 Older adults want to choose “where and how they age in place”. 5 As this issue becomes more pertinent, our society needs to consider the current systems surrounding aging in place.

The Government of Alberta defines aging in place as “having the health and social supports and services needed to live safely and independently in your home or community for as long as you wish and are able”. 1 Aging in place is “linked to greater health and happiness outcomes for [older people]” 6 and it’s seen as “an advantage in terms of a sense of attachment or connection and feelings of security and familiarity in relation to both homes and communities” and relates to sense of identity, independence and autonomy, and roles in relationships. 5 While aging in place can pose challenges in the realm of “self-care, mobility, and household management”, 7 people who choose to age in place are able to maintain relationships and roles within their established communities, keep autonomy, and continue contributing to society in a meaningful way.

Methodology

The report discusses the system that exists around aging in place in Calgary and highlight leverage points for actionable change.

The structure of the paper loosely follows the Impact Gaps Canvas 8 and the research comes from both academic and non-academic sources, showcasing qualitative and quantitative data through a literature review, as well as insights gleaned from the public participation opportunities throughout the fellowship.
Findings

In systems thinking, an impact gap is defined as “who or what is not being served in the gap between the problem and the current solutions”. 8

An impact gap identified in the report is the prevalence of ageism in our society. Western culture has very negative connotations around aging and death. This social construct makes aging shameful, limiting the questions we ask and the way we address the issue. 9 Aging in place needs to be a conversation everyone is included in, including younger generations, and it needs to be discussed without ageist undertones.

An additional gap exists in the idea that we need to create communities and neighbourhoods specifically catered to older adults. The age-friendly “movement needs to address how it can be more socially inclusive... [which] also means pushing for a narrative that doesn’t single out older people as the only group in need of urban redesign”. 10 In Calgary, specifically, walkability and density are a struggle due to the car-centric design of our city, making this a hugely impactful gap to work on.

Two other challenges are due to “the sheer diversity of health and functional states experienced by older people” 9 and financial stability as the traditional trajectory of life becomes longer.

Leverage points are “places within a complex system where a small shift in one thing can produce big changes” throughout. 11

One of the points identified in the report is “[changing] information structures and flows”. 11 Changing the system’s structure to help interdisciplinary silos better share knowledge and resources could make a drastic impact. Living labs combat silos with a partnered “Public-Private-People” approach, that aims to facilitate and manage innovation processes, focused on “real-life experimentation and active user involvement”. 12

By altering information structures and flows, organizations can collaborate on solutions and share knowledge more effectively.

Another leverage point identified is redefining the “goals of the system”. 11 By redefining the goal, we are better able to tackle the issue. Common understanding is key to collaborative problem solving and bringing the fundamental goal of “choice” back to the forefront of aging in place is vital.

Recommendations and next steps

A multitude of resources detailing aging in place building standards and in-home adaptations already exist, so the larger concern is rooted in the stigma around aging in North America and the need to bring planning practices into our lives at earlier stages. At this point, with cities and older populations growing at a rapid pace, proactive rather than reactive solutions are needed. We need to work to reframe aging as an opportunity, both within our organizations and our communities.

The next step in this research is understanding the lives of people who are actively aging in place in Calgary, Alberta. Since 92% of [older people] live in private households, 2 a diverse collection of perspectives are available locally. Inclusive community engagement and participatory processes are essential in co-creating solutions with and for people with lived experience.

With a structure in place to collaborate with other organizations, such as a living lab model, 12 we can tackle aging and place. By working together, sharing knowledge and learnings, there is potential for significant collective impact.
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Fellowship Lead
Barb Davies, Social Impact Lead at the Institute for Community Prosperity

Mount Royal University is located in the traditional territories of the Niitsitapi (Blackfoot) and the people of the Treaty 7 region in Southern Alberta, which includes the Siksika, the Piikani, the Kainai, the Tsuut'ina, and the Iyarhe Nakoda. The City of Calgary is also home to Métis Nation 3 of Alberta.
Embroidery as a medium

Facts

Findings

Recommendations

Full report

Hand embroidery as a medium

Hand embroidery is a traditional craft practiced across the world, consisting of small stitches with a needle on fabric in decorative patterns. I chose to use hand embroidery as a medium for my creative work because “supplies are inexpensive and the techniques range from basic to advanced”, just like planning for and discussing aging in place.

There are many ways to learn about aging in place and bring those practices into your life. The freehand style you’ll find throughout this booklet alludes to the individuality and flexibility both aging in place and hand embroidery provide.

Hand embroidery is a skill often passed down from generation to generation. I used my grandmother’s embroidery hoops to create the pieces in this booklet. Intergenerational teaching and connection is vital to building strong, connected communities that can support aging in place.

In the accompanying report, Aging and Place, a key finding is that aging in place needs to be reframed as an opportunity. Hand embroidery has been reframed in recent years as a trendy hobby for twenty-somethings. Although it is an age-old craft, embroidery can now be found across digital platforms, like Instagram and Pinterest. A similar reframing needs to occur with the idea of aging in place — it needs to be something taken up by younger generations and brought up in conversation without the negative connotations surrounding old age in Western culture.

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Calgary has 1.28 million residents, and 24% are over fifty-five years old, which “has huge implications on... health care, education, community services and so on” (Fletcher, 2019).

The circle graph represents the portion of older people living in Calgary.

FACT

1.28 million people live in Calgary, 24% are older adults.
92% of older adults in Alberta live in private households.

As of 2019, there are over 13,500 Alberta residents living in seniors’ housing (Canada Mortgage and Housing Corporation, 2019, p. 1), but a vast majority of older adults live in private households, 92% according to Statistics Canada (2018). The Report on Housing Needs of Seniors shows that, “Canada’s almost six million [older people] represent a complex and dynamic cohort, with diverse living arrangements and housing needs (Ministers Responsible for Seniors, 2019, p. 6).

The circle graph represents 92% of older adults living in private households in Alberta.
Aging in place is seen as “an advantage in terms of a sense of attachment or connection and feelings of security and familiarity in relation to both homes and communities” and relates to sense of identity, independence and autonomy, and roles in relationships (Wiles et al., 2012, p. 357).

The network of blue circles represent older people scattered throughout Calgary’s neighbourhoods, maintaining autonomy and ties to community.

**FINDING**

Older adults staying in their communities creates **stronger support networks**.
The age-friendly “movement needs to address how it can be more socially inclusive... [which] also means pushing for a narrative that doesn’t single out older people as the only group in need of urban redesign” (Kirk, 2018, para. 8). Creating age-friendly cities needs to “enhance the independence of a cross-section of society”, not only older adults (Cinderby et al., 2018, p. 410).

The wreath represents the idea of "evergreen" communities, that can be flexible and adaptable for every generation.

**FINDING**

**Age-friendly community design serves everyone, not just older people.**
How might we design and build cities and communities that empower people to age in place? We know that having older people choose to stay in their homes and communities strengthens relationships and community ties, contributing to the social capital of our cities (Suttie, 2014).

The climbing, intertwined flowers represent the way people are interconnected within their communities and how they lift and support each other.
Inclusive community engagement and participatory processes are essential in co-creating solutions with and for people with lived experience. By working together, sharing knowledge and learnings, there is potential for significant collective impact. “No government or ministry can achieve these outcomes working in isolation. It takes the whole community, working together to make environments age-friendly, harnessing innovation and imagination from all sectors and all actors” (World Health Organization, 2018, p. 7).

The flowers represent the human capital available within our own cities and communities that can be harnessed to create a better future and sustainable systems change.

**RECOMMENDATION**

**Older people need to be involved in co-creating solutions, based on their lived experiences.**
Western culture has very negative connotations around aging and death. This social construct makes aging shameful, limiting the questions we ask and the way we address the issue (World Health Organization, 2015). Aging in place needs to be a conversation everyone is included in, including younger generations, and it needs to be discussed without ageist undertones.

The blue represents older people and orange represents younger generations. The blue stitches are meant to show that even the younger generations are aging, and they need to support older people and be an active part of the conversation around aging in place.

**RECOMMENDATION**

Aging in place is a conversation for everyone.
Aging and Place

The intersection between Calgary’s aging population and the way we build cities and communities
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About the fellowship

The **Catalyst Fellowship** is a cohort-based, community-engaged learning experience for Mount Royal University students committed to building a more just and sustainable future for all. Created by MRU’s Institute for Community Prosperity, the fellowship is one-part community-partnered research and one-part transformational learning. Fellows dive into social innovation frameworks, experiential learning, and deep listening with community, addressing real-world 21st-century challenges with community partners. They spend eight months exploring the root causes of complex ecological, social, economic, and cultural issues, collaborate and build meaningful connections across sectors and boundaries to engage multiple stakeholders, accelerate their personal and professional development, and deepen their ability to make meaningful change in their communities.

About the community partners

**Brookfield Residential**

**Brookfield Residential** is a builder and developer, creating master-planned communities and new homes and commercial properties throughout North America. Their focus is on creating an exceptional customer experience and sustainable, vibrant communities. Seton, Livingston, and Rockland Park are examples of these master-planned communities in Calgary.

**Universal Access**

**Universal Access** works to create equal access opportunities for all community members by reducing barriers. The team is guided by lived experience and Universal Design standards, with Certified Accessible consultants who work in the community to help people understand the unique relationship between spatial layout and social inclusion.

About the fellow

**Mackenzie Johnson** is a recent graduate of Mount Royal University, with a Bachelor of Communications - Information Design. She is an emerging changemaker with a human-centered design background and an interest in sustainable cities and communities. She can almost always be found with a coffee in hand.
Research direction and process

As a community-engaged research fellowship, Catalyst focuses on including the community in research design and sharing the findings of the fellowship with the community.

In our initial meetings, our team discussed the direction we’d like the research to take, landing on the following research question: “What are the lifestyles, wants, and needs of seniors and soon-to-be seniors, and how might we create inclusive, adaptable spaces that support them to age in place?”.

This question was iterated throughout the 8-month period, honing in on a more specific direction and scope: Aging in place, with a focus on the built environment and community design in Calgary, Alberta.

Methodology

This research paper is a deliverable for the 2019-2020 Catalyst Fellowship. It intends to discuss the system that exists around aging in place in Calgary, AB and highlight leverage points for actionable change. The structure of the paper loosely follows the Impact Gaps Canvas (Papi-Thornton, 2016).

The information in this paper comes from both academic and non-academic sources, showcasing qualitative and quantitative data through a literature review, as well as insights gleaned from the public participation opportunities throughout the fellowship.
Problem definition

“The population of [older people] in Alberta continues to rise faster than other age groups. As of June 30, 2019, over 615,000 Albertans were over the age of 65. That number is expected to double within the next 2 decades. Today’s [older adults] are living longer and healthier lives, have higher education levels, are working longer, serve their communities through volunteering, civic engagement and charitable donations” (Government of Alberta, 2020b, para. 22).

When you combine an aging population with the United Nations prediction that two-thirds of the world population will be living in urban areas by 2050 (n.d., para. 2), creating cities and communities that support aging in place becomes a very important conversation point. In Calgary, “this has huge implications on every single thing that we do whether it’s health care, education, community services and so on” (Fletcher, 2019, para. 18), says Nenshi. Calgary has 1.28 million residents, and 24% are over fifty-five years old (Fletcher, 2019). As of 2019, there are over 13,500 Alberta residents living in seniors’ housing (Canada Mortgage and Housing Corporation, 2019, p. 1), but a vast majority of older adults live in private households, 92% according to Statistics Canada (2018). We know this population can be better served. The Report on Housing Needs of Seniors shows that, “Canada’s almost six million [older people] represent a complex and dynamic cohort, with diverse living arrangements and housing needs. Within this context, it is generally understood that most [older adults] desire to age in place” (Ministers Responsible for Seniors, 2019, p. 6).

As this issue becomes more pertinent, our society needs to consider the current systems surrounding aging in place. The goal is to allow people to stay in their own community and keep as much of their lifestyle as intact as possible, with a focus on people maintaining autonomy and living standards. The Government of Alberta defines aging in place as “having the health and social supports and services needed to live safely and independently in your home or community for as long as you wish and are able” (2020b, para. 1). Aging in place is “linked to greater health and happiness outcomes for [older people]”, especially in terms of battling social isolation (Kalita, 2017, para. 4). Older adults want to choose “where and how they age in place”, found Wiles et al. (2012, p. 357). It’s seen as “an advantage in terms of a sense of attachment or connection and feelings of security and familiarity in relation to both homes and communities” and relates to sense of identity, independence and autonomy, and roles in relationships (Wiles et al., 2012, p. 357). While aging in place can pose challenges in the realm of “self-care, mobility, and household management” and most older adults’ homes are not designed to support them as they age (Forsyth, Molinsky, & Ye Kan, 2019), there are many positive
attributes. People who choose to age in place are able to maintain relationships and roles within their established communities, keep autonomy, and continue contributing to society in a meaningful way.

To have a holistic understanding of aging in place, as a system, we must also acknowledge the other areas it interacts with, including health, home, transportation, finances, connections, safety, supports and services, community, spouse/partner (Government of Alberta, 2020b, para. 3). Related issues span from [older adult] isolation and public health to familial structures and food insecurity to affordable housing.

Current solutions

The challenge of creating age-friendly communities is a topic being discussed across the world, spearheaded by the World Health Organization (WHO). Age friendly communities “recognize the wide range of capacities and resources among older people; anticipate and respond flexibly to aging-related needs and preferences; respect older people’s decisions and lifestyle choices; reduce inequities; protect those who are most vulnerable; and promote older people’s inclusion in and contribution to all areas of community life” (World Health Organization, 2018, p. 11). The WHO’s Global Network for Age-Friendly Cities and Communities was founded in 2007. Since then, the Global Network has “enabled cities, communities, and other sub-national levels of government around the world to become increasingly age friendly” (World Health Organization, 2018, p. 15). Members engage in a continuous improvement cycle: engage and understand, plan, act, measure, and repeat. As part of this network, members are able to encourage each other and share best practices from around the world.

There are a number of resources available addressing designing homes and communities to accommodate the aging population:

- **Age-Friendly Alberta** provides information and resources for making cities and communities “more accessible and inclusive for [older people]” (Government of Alberta, 2020a, para. 1). You can even apply for the Age-Friendly Alberta Recognition Award for taking the steps to make your community more age-friendly.

- **Universal Design Standards** dictate the “design and composition of an environment so that it can be accessed, understood and used to the
greatest extent possible by all people regardless of their age, size, ability or disability” (National Disability Authority, 2020, para. 1).

- IDEO has developed two books, Independent Living and Connected Living, as “organizations tools for designing human-centered products and services for older adults” (2018).

- Kalita (2017) lists a number of simple home renovations to consider in her Architectural Digest article.


- Become a certified Aging in Place Specialist through the Canadian Home Builders’ Association (2020).

In Calgary, a community-wide strategy was developed to prepare for the aging population, targeting six areas: access to information and services, community support and health, housing, participation and inclusion, prevention of and response to elder abuse, and transportation and mobility (City of Calgary, 2014). The steering committee’s 2017-2018 Report to the Community “highlights the progress that has been made on Age-Friendly Calgary initiatives” (City of Calgary, 2018a, p. 1). A number of projects are mentioned, including a lane-way house project from the University of Calgary, an intergenerational play initiative as part of the 20th International Play Association Triennial World Conference, and a dementia-friendly community pilot project (City of Calgary, 2018a). Another project in Calgary is Jack Long Foundation’s Elderhouse. Elderhouse is rooted in dignity, respect, and belonging, a balance between independence and support, located in Inglewood, with the vision to build one in every community (2019). It features a mix of private and shared spaces, allowing residents to maintain independence and autonomy as well as have support nearby.

Impact gaps

In systems change, an impact gap is defined as “who or what is not being served in the gap between the problem and the current solutions” (Papi-Thornton, 2016). By identifying these impact gaps, we can better understand what’s missing (Papi-Thornton, 2016).

An impact gap exists due to the prevalence of ageism in our society. Western culture has very negative connotations around aging and death. Despite “substantial evidence that older people contribute to society in many ways, they are instead often stereotyped as frail, out of touch, burdensome or dependent” (World Health Organization, 2015, p. 10). This inequity breeds inequity. If older people are constantly told they aren’t able to contribute to society in a meaningful way, eventually they will stop contributing. Applewhite calls ageism “the last
acceptable form of prejudice” and points out that “all -isms are socially constructed, which means we make them up and they can change over time” (2017).

This social construct makes aging shameful, which severely limits the questions we ask, the way challenges are discussed, and the way we address opportunities (World Health Organization, 2015, p. 10). In an Architectural Digest article, Susan Wright comments “It’s really traumatic for people to be forced out of their homes” (Kalita, 2017, para. 5). She “advises homeowners in their 50s and 60s” to begin thinking about renovations to aid in the transition, but finds that “nobody likes to think about it” (Kalita, 2017, para. 6).

For aging in place to be successful, it needs to become a conversation everyone is included in, including younger generations, and it needs to be discussed without ageist undertones.

An additional gap that exists is the idea that we need to create communities and neighbourhoods specifically catered to older adults and that these neighbourhoods won’t serve the general population. Chris Phillipson, co-author of Age-friendly Cities and Communities: A Global Perspective, thinks the age-friendly “movement needs to address how it can be more socially inclusive... [which] also means pushing for a narrative that doesn’t single out older people as the only group in need of urban redesign” (Kirk, 2018, para. 8). This was found by Cinderby et al. in the UK as well: creating age-friendly cities needs to “enhance the independence of a cross-section of society”, not only older adults (2018, p. 410).

CityLab reports, “young children living in cities face many of the same issues as older residents” particularly due to a stricter range of movement to their immediate area (Kirk, 2018). “Studies show that a safe neighborhood with green spaces, well-maintained sidewalks, and the like encourage children, the elderly, and everyone in between to go out and exercise and socialize—and that has real health benefits” (Kirk, 2018, para. 9). Jane Jacobs preached that “cities have the capability of providing something for everybody, only because, and only when, they are created by everybody” (1992). In Calgary, walkability and density are a struggle due to the car-centric design of our city, which makes this a hugely impactful gap to work on.

This aligns closely with another challenge in the system, due to “the sheer diversity of health and functional states experienced by older people” (World Health Organization, 2015, p. 7). Healthcare and government policy is often framed to serve older adults who experience a functional decline.

A peripheral concern to note has to do with financial stability. “Public system sustainability and personal affordability will be twin challenges” (Ambachtsheer & Nicin, 2020, p. 3), particularly in relation to Canada’s current pension programs. There has been a significant shift in what was the “traditional course of life” 50 years ago when the social programs were originally designed to support a person’s retirement (Ambachtsheer & Nicin, 2020, p. 3).
Leverage points

Donella Meadows describes leverage points as “places within a complex system where a small shift in one thing can produce big changes in everything” (1999, p. 1). Each lever has varying feasibility within the context of our defined system.

“Constants, parameters, and numbers” is a popular intervention point (Meadows, 1999, p. 5). In our system, this may refer to the number of people who are able to age in place, the number of services that can support people from within their homes, and the amount of healthcare resources available. This logic also works for another of Meadow’s leverage points: the structure of material stocks and flows and nodes of intersection.

By creating more mobile services and programs that can support older adults in their homes as they age or creating better, centralized networks with nodes where health services can be accessed, more people will be able to age in place. While this is feasible, Meadows points out that “physical building is usually the slowest and most expensive kind of change to make in a system” (1999, p. 7-8).

For the “sizes of buffers and other stabilizing stocks, relative to their flows” (Meadows, 1999, p. 7), a possible intervention can be modifying current homes and communities to suit the needs of current older adults. This will create a larger buffer to create the next generation of healthcare facilities and services.

The “lengths of delays, relative to the rate of system changes” refers to delays in feedback loops being critical to the changes within a system (Meadows, 1999, p. 8). The length of the delay can be a factor that causes more damage in a system rather than good changes over time. Building age-friendly communities and cities, and even planning the initiatives, takes years. Due to this delay, solutions need to be dreamed up for the next generation of people who will need them.

Feedback loops are another useful lever to consider. “A positive feedback loop is self-reinforcing” (Meadows, 1999, p. 11), and can be seen as the aging population move into traditional facilities. As the aging population moves into facilities, more facilities need to be built to support the growing demand. Over time, this has become the standard, meaning that even more people move into these facilities, seeing it as their only option. More facilities must be built to meet higher demands. This feedback loop can be shifted to encourage aging in place and create more demand for inclusive, adaptable communities.

“Changes to information structures and flows” refers to intervention through constant awareness (Meadows, 1999, p. 12). Combined with “the power to add, change, evolve, or self-organize system structure” (Meadows, 1999, p. 14) there is high feasibility for impactful intervention. Changing the system’s structure to help interdisciplinary silos better share knowledge and resources could make a drastic impact, since “health systems are often better designed to cure acute conditions than to manage and minimize the consequences of the chronic states prevalent in older age. Moreover, these systems are often developed in professional silos and
Aging and Place / Catalyst Fellowship

Acute care facilities were originally created to support people as they age, but in practice they have earned a stigma as the last choice option. Most people “probably have a picture of a nursing home in your head: It’s a hospital-like institution, maybe a little smelly, with long hallways, old people slumped around a large nurse’s station, harried staff and a set schedule that residents — perhaps 200 or more — must abide by” (Baker, 2017, para. 7). These places are a “last resort... just 4% of [people] would choose a nursing home if they were old and needed long-term help” (Baker, 2017, para. 9). If the goal of the system is to allow people to choose how and where they’d like to age, this traditional trajectory is a failure.

Reiterating and even redefining the goal of the system is hugely important when approaching problems with a systems lens. Bringing the fundamental goal of “choice” back to the forefront is vital to educate people on aging in place.

Living labs are a great way to combat this. Living labs are a partnered “Public-Private-People” approach that aims to facilitate and manage innovation processes, focused on “real-life experimentation and active user involvement” (Bodi et al., 2015, p. 12). The City of Calgary is currently partnered with Calgary Economic Development on a Living Lab project that opens up City-owned assets in order to test solutions and add to the city’s innovation ecosystem (2018b). By altering information structures and flows, organizations can collaborate on solutions and share knowledge more effectively.

“Goals of the system” (Meadows, 1999, p. 16) are often less obvious than those of feedback loops within the system. For example, long-term care and acute care facilities were originally created to support people as they age, but in practice they have earned a stigma as the last choice option. Most people “probably have a picture of a nursing home in your head: It’s a hospital-like institution, maybe a little smelly, with long hallways, old people slumped around a large nurse’s station, harried staff and a set schedule that residents — perhaps 200 or more — must abide by” (Baker, 2017, para. 7). These places are a “last resort... just 4% of [people] would choose a nursing home if they were old and needed long-term help” (Baker, 2017, para. 9). If the goal of the system is to allow people to choose how and where they’d like to age, this traditional trajectory is a failure.

Reiterating and even redefining the goal of the system is hugely important when approaching problems with a systems lens. Bringing the fundamental goal of “choice” back to the forefront is vital to educate people on aging in place.
Conclusion

How might we design and build cities and communities that empower people to age in place?

We know that having older people choose to stay in their homes and communities strengthens relationships and community ties, contributing to the social capital of our cities (Suttie, 2014). We know that cities and neighbourhoods that are designed to be inclusive and accessible benefit everyone. We need to shift the way we think, and ask, “How might we see the aging population as an opportunity and not just a problem?” (Silkstone, 2019).

Since many resources already exist detailing aging in place building standards and in-home adaptations, the larger concern is rooted in the stigma around aging in North America and the need to bring planning practices into our lives at earlier stages. At this point, with cities and older populations growing at a rapid pace, proactive rather than reactive solutions are needed. We need to work to reframe aging as an opportunity, both within our organizations and our communities. Sustainable systems change requires common ground, and that begins with the terminology we use -- specifically around the aging population, as well as the goals and steps involved to aged in place.

The next step in this research is understanding the lives of people who are actively aging in place in Calgary, Alberta. Since 92% of [older people] live in private households (Statistics Canada, 2018), a diverse collection of perspectives are available locally. Inclusive community engagement and participatory processes are essential in co-creating solutions with and for people with lived experience. Living lab models (Bodi et al., 2015) are an interesting avenue to explore. With a structure in place to collaborate with other organizations, we can tackle aging and place. By working together, sharing knowledge and learnings, there is potential for significant collective impact.

Cinderby et al. argue we must not try to create a non-existent ideal scenario, but work to “[understand] the complex interrelationship between urban living and aging” (2018, p. 410-411). Looking at the actual opportunities and constraints will act as a better starting point to find actionable steps (Cinderby et al., 2018, p. 410).

Despite all the new solutions and innovations noted in the above sections, “systemic change is needed” (World Health Organization, 2015, p. 6). As the Director of the WHO Department of Aging and Life Course, Beard, says, “No government or ministry can achieve these outcomes working in isolation. It takes the whole community, working together to make environments age-friendly, harnessing innovation and imagination from all sectors and all actors. Initiatives must partner within communities, but we also can learn across communities. A global network of cities and communities can help to catalyze progress by providing the inspiration and support that can inspire change and motivate action in creative ways” (World Health Organization, 2018, p. 7).
Reading list
Suggested reading (and listening and watching) to further your understanding of aging and place:

- **World Report on Aging and Health (2015)** from the World Health Organization outlines a framework for action around a new concept of aging

- **Aging Up (2019)**, from AtlanticLIVE, an event exploring aging and exactly what that means for society today

- TED Talk on ending ageism with Ashton Applewhite (2017)

- The Washington Post calls for a major redesign of life for the twentieth century life expectancies (Carstensen, 2019)

- An article from Harvard Business Review on combating ageism by valuing wisdom (Conley, 2018)

- Redefining aging for the 100-year life, an episode from the Design for a Better Future podcast

- A study on the meaning of “aging in place” to older people from The Gerontologist (Wiles et al., 2012)

- Great commentary on the correct term to use for “people in late life” (Pinsker, 2020)

- A fun article about the cities designing playgrounds for older people (Traverso, 2019)

- A short documentary called The Blessings of Getting Old, directed by Jenny Schweitzer-Bell (2019)
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