

Comprehensive Age-Friendly Community Planning Framework

by

Catherine McLean

A thesis

presented to the University of Waterloo

in fulfillment of the

thesis requirement for the degree of

Master of Arts

in

Planning

Waterloo, Ontario, Canada, 2017

©Catherine McLean 2017

Author's Declaration

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners.

I understand that my thesis may be made electronically available to the public.

Abstract

Planners, urban designers and policy-makers are continuously shifting their planning approach to accommodate the latest planning lens. Each approach addresses different planning issues, presents new concepts and sets new priorities; however, little attention is given to determine whether these ideas overlap and whether there are efficiencies in tying these concepts together. This study sought to determine to what extent age-friendly community planning overlaps or is similar to established planning frameworks and evaluate whether there is merit in developing joint policies.

Age-friendly communities (AFC) have become particularly important today with the aging baby-boom generation and the resulting increase in demand for supportive and enabling physical and social environments that help compensate for the physical and cognitive changes associated with ageing (World Health Organization, 2007). Despite the growth of this movement, planners and policy makers have been faced with a number of challenges with integrating age-friendly initiatives into mainstream planning due to the lack of differentiation from other well-known planning frameworks and the competing demands for financial resources and human capital (Miller et al., 2011; Cerda & Bernier, 2013; Golant, 2014). These challenges raise the following research questions:

- 1) To what extent do established planning principles overlap with age-friendly community planning principles?
- 2) Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

These research questions were addressed using a multi-phased qualitative approach, which entailed: a policy document analysis using the City of Waterloo as a case study and in-depth interviews with planning professionals from across Ontario.

This study revealed that there is an overlap and similarities between age-friendly community planning and established planning frameworks, specifically: accessibility planning, Smart Growth, transit-oriented development, universal design, healthy communities, sustainable communities, New Urbanism and complete communities. The planning professionals viewed this overlap as policy alignment as these policies support and reinforce each other. Alternatively, several planners suggested that AFC should be regarded as a subset of other planning frameworks, rather than its own distinct planning approach. As such, planners would look at all their planning decisions, regardless of the planning framework, through an age-friendly lens. Despite the overlap, most planning professionals were cautious about creating a comprehensive planning approach due to the: sheer size of the approach, diversity of community contexts, challenges associated with public participation and difficulties coordinating the various stakeholders and jurisdictions. A number of supplementary findings were uncovered through the in-depth interviews that provided key insight into the strengths and weaknesses of current age-friendly community planning initiatives across Ontario and lay the foundation for this study's policy recommendations. This study recommends: 1) providing additional funding for the implementation of AFC plans; 2) offering additional resources for small and remote communities; 3) expanding existing AFC resources; 4) mandating AFC policies into provincial legislation; 5) facilitating communication and coordination between the lower tier and upper tier municipalities; and 6) seeking greater involvement from planners in AFC initiatives.

Acknowledgements

I would like to take this opportunity to thank all those who supported me throughout my Masters. This thesis would not have been possible without the continued support and encouragement from a number of individuals who were there for me every step of the way.

I would like to thank my academic supervisor, Dr. John Lewis, for your critical insight and valuable feedback throughout my thesis research. I appreciate you taking the time to share your knowledge and expertise on age-friendly community planning. Thank you to my committee member, Dr. Jennifer Dean, and reader, Dr. Mark Seasons, for your participation on my thesis committee and all your feedback and invaluable critique.

A special thank you to Brandon McCarroll for supporting my decision to continue my education and encouraging me during the difficult times. I especially appreciate your understanding when I had tight deadlines and could not spend time with you. Thank you for being there for me throughout the entire process and helping me balance work and my Masters, among others. I could not have done it without you.

A heartfelt thank you to my parents, Charlotte and David McLean, who have always supported and encouraged me throughout my academic endeavours. Thanks for your continuous understanding when I had to do school work and always believing in me. To my brother, Paul McLean, thank you for checking up on me and reminding me to take time to myself.

I would like to say a special thank you to my co-workers at the Township of Oro-Medonte for your keen interest in my progress and your kind words of encouragement along the way.

Last but not least, I would like to thank all the planning professionals who took time out of their busy schedules to share their knowledge and passion for age-friendly community planning with me. This study would not have been possible without your valuable insights which lay the foundation for the recommendations put forward in this study.

I am sincerely grateful. Thank you!

Table of Contents

Author’s Declaration	ii
Abstract	iii
Acknowledgements	iv
List of Tables	ix
List of Abbreviations	x
Chapter 1: Introduction Chapter	1
1.1: Study Context.....	1
1.2: Age-Friendly Communities.....	1
1.3: Research Problem.....	4
1.4: Research Questions	7
1.5: Research Objectives	8
1.6: Methodology	8
1.7: Structure of the Thesis	9
Chapter 2: Literature Review Chapter	11
2.1: Introduction	11
2.2: Background and Rational for this Study’s Research Questions	12
2.3: Planning Framework Selection	18
2.4: Smart Growth	19
2.5: Sustainable Communities.....	23
2.6: New Urbanism	26
2.7: Healthy Communities.....	31
2.8: Universal Design.....	35
2.9: Accessibility Planning.....	40
2.10: Transit-Oriented Development.....	44
2.11: Age-Friendly Communities.....	49
2.12: Conclusion.....	59
Chapter 3: Methodology Chapter	60
3.1: Introduction	60
3.2: Literature Review Strategy	61

3.3: Policy Document Analysis	65
3.3.1: Case Study of the City of Waterloo.....	66
3.3.2: Content Analysis Methodology	67
3.4: In-depth Interviews	71
3.5: Methodological Rigour	78
3.5.1: Credibility.....	79
3.5.2: Transferability	82
3.5.3: Dependability	82
3.5.4: Confirmability	84
Chapter 4: Findings Chapter	86
4.1: Introduction.....	86
4.2: Summary of Findings.....	86
4.3: Research question 1: To what extent do established planning principles overlap with age-friendly community planning principles?.....	88
4.3.1: Literature Review	88
Table 3: Summary of the Overlap and Similarities between AFC and Mainstream Planning Approaches as evidenced through the Literature Review Analysis.....	89
4.3.2: Policy Document Analysis	89
4.3.3: City of Waterloo Official Plan Objective Analysis	93
4.3.4: Interviews	96
4.4: Research Question Two: Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?	105
4.5: Supplementary Findings.....	112
4.5.1: Diversity of Age-friendly Community Planning Initiatives across Ontario.....	112
4.5.2: Limited Involvement of Planning Departments in AFC Initiatives	115
4.5.3: Are AFC Planning Initiatives Over-ambitious?	116
4.6: Strengths and Weaknesses of Current AFC Initiatives.....	119
4.6.1: Strengths of Current AFC Planning Initiatives	120
4.6.1.1: Raise Awareness about Aging Issues	120
4.6.1.2: Political Acceptance of AFC Planning at all Levels of Government	120
4.6.1.3: Benefits of a Bottom-up Consultation Process	121
4.6.1.4: Benefits of Current AFC Resources	123

4.6.2: Weaknesses of Current AFC Planning Initiatives	123
4.6.2.1: Lack of Funding and Resources.....	123
4.6.2.2: Challenge Maintaining Momentum throughout the Implementation Process .	127
4.6.2.3: Lack of Awareness of Current Programs and Services	129
4.6.2.4: Which Level of Government should be responsible for AFC Planning?	130
4.6.2.5: Lack of Coordination between the Upper Tier and Lower Tier Municipalities	132
4.6.2.6: Challenges Implementing AFC Initiatives that are not mandated in Provincial Policy	132
4.6.2.7: Additional Challenges for Rural and Remote Communities	133
4.7: Conclusion.....	135
Chapter 5: Discussion and Conclusion Chapter	137
5.1: Introduction	137
5.2: Discussion of the Key Findings	137
5.2.1: Overlap Between Age-friendly Community Planning and Established Planning Frameworks	137
5.2.2: Is there Merit in Working towards a Comprehensive Planning Framework?	142
5.2.3: Planning should be comprehensive by nature and include everyone	146
5.2.4: Lack of Planning Involvement in Age-friendly Endeavours.....	149
5.2.5: Supplementary Findings	152
5.2.5.1: Additional funding is required for implementation	152
5.2.5.2: Rural and Remote Communities.....	155
5.3: Contributions.....	159
5.4: Study Limitations	160
5.5: Recommendations for planning practice.....	163
5.5.1: Additional Funding is Required Particularly for Implementation of AFC Initiatives	163
5.5.2: Additional Resources for Rural and Remote Communities	163
5.5.3: Expand on Existing Resources	164
5.5.4: Mandating AFC into Provincial Policy	165
5.5.5: Better Communication and Coordination between Lower Tier and Upper Tier Municipalities	166
5.5.6: Seek Greater Planning Involvement in AFC Initiatives	166
5.6: Recommended Areas of Future Research	167

5.7: Overall Thesis Conclusion	168
References	174
Appendices	190
Appendix 1: Research Strategy	190
Appendix 2: Content Analysis Coding Scheme	191
Appendix 3: Interview Guide	194
Appendix 4: Overlap and Similarities between AFC and Mainstream Planning Approaches	195
Appendix 5: City of Waterloo Official Plan Objective Analysis	199
Appendix 6: Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan	203

List of Tables

Table 1: Chronology of the Selected Planning Paradigms.....	11
Table 2: Participant Characteristics.....	75
Table 3: Summary of the Overlap and Similarities between AFC and Mainstream Planning Approaches as evidenced through the Literature Review Analysis.....	89
Table 4: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis).....	94
Table 5: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis).....	94
Table 6: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis).....	95
Table 7: Summary of the Findings from the City of Waterloo Official Plan Objective Analysis.....	96
Table 8: Number of planners that discussed the overlap between the selected planning frameworks and AFC.....	97

List of Abbreviations

ADA	Americans with Disabilities Act
AFC	Age-friendly communities
AODA	Accessibility for Ontarians with Disabilities Act
AP	Accessibility planning
CIP	Canadian Institute of Planners
CMHC	Canada Mortgage and Housing Corporation
CNU	Congress for the New Urbanism
EPA	(United States) Environmental Protection Agency
GNAFCC	Global Network of Age-friendly Cities and Communities
HC	Healthy communities
LEED ND	Leadership in Energy & Environmental Design for Neighbourhood Development
MMAH	Ministry of Municipal Affairs and Housing
MSA	Ministry of Seniors Affairs
NCHRP	National Cooperative Highway Research Program
OMB	Ontario Municipal Board
OPPI	Ontario Professional Planners Institute
OSGN	Ontario Smart Growth Network
OSS	Ontario Seniors' Secretariat
P-E Fit	Person-environment Fit
NU	New Urbanism
SG	Smart Growth
SC	Sustainable communities
SHKN	Seniors Health Knowledge Network
SOAFN	Southern Ontario Age-friendly Network
TOD	Transit-oriented development
TCRP	Transit Cooperative Research Program
UBCM	Union of British Columbia Municipalities
UD	Universal design
UNICEF	United Nations Children's Fund
WHO	World Health Organization

Chapter 1

Introduction Chapter

1.1: Study Context

Planners, urban designers and policy-makers are continuously shifting their planning approach to accommodate the latest planning lens, whether it is Smart Growth, universal design or age-friendly communities (AFC). Each approach addresses different planning issues, presents new concepts and sets new priorities; however, little attention is given to determine whether these ideas overlap and whether there are efficiencies in tying these concepts together. This study sought to examine the similarities between age-friendly community planning and established planning frameworks, and determine whether there is merit in developing a comprehensive age-friendly community planning framework that incorporates principles from other planning approaches, specifically: accessibility planning, Smart Growth, transit-oriented development, universal design, healthy communities, sustainable communities and New Urbanism.

1.2: Age-Friendly Communities

The concept of age-friendly communities can be traced back over 50 years to the development of the discipline of environmental gerontology, which examined the relationship between people and their environment, and its impact on quality of life (Ontario, 2013). Age-friendly communities have gained worldwide momentum since the World Health Organization (WHO) launched its Global Age-friendly Cities Project back in 2005 (Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; Novek & Menec, 2014; World Health Organization, 2007). In 2007, the WHO published the ‘Global Age-Friendly Cities: A Guide’

(2007) and an associated ‘Checklist of Essential Features of Age-Friendly Cities’ (2007b) as a tool to assist governments and organizations in making their cities more age-friendly (WHO, 2007). In 2010, the WHO launched the Global Network of Age-Friendly Cities and Communities for municipalities who were committed to becoming more age-friendly and share information with communities (World Health Organization, 2014). Since 2010, the network has grown to include 11 affiliated programs in 300 cities and communities, which represents 26 countries and consists of a total of 88 million people, and this figure does not include all the non-member communities that have pursued AFC endeavours (Moulaert & Garon, 2016; World Health Organization, 2014 and n.d.).

Age-friendly communities are particularly important today with the aging baby-boom generation and the resulting increase in demand for barrier-free private and public spaces. According to the WHO, population aging and urbanization will present major challenges this century as more older adults live in cities (World Health Organization, 2007). As indicated by the World Health Organization (2007), “the world is rapidly ageing: the number of people aged 60 and over as a proportion of the global population will double from 11% in 2006 to 22% by 2050. By then, there will be more older adults than children (aged 0–14 years) in the population for the first time in human history” (p.3). According to the 2016 Census, there are already more older adults than children in Canada, with older adults 60 years of age and older representing 22.9% of the population and children 14 years of age and younger representing 16.1% (Statistics Canada, 2016). In Ontario, the oldest portion of the baby-boom generation turned 65 years old in 2011 and the population of older adults will more than double to 4.1 million by 2036 (Ontario, 2013). Concurrently, the world is rapidly urbanizing; it is

anticipated that by 2030, two-thirds of the world's population will be living in urban centres and of that population, approximately a quarter will consist of older adults (Moulaert, Garon & Biggs, 2016; Phillipson, 2011). The current demographic trends of population aging, increasing longevity and urbanization have a number of implications on housing requirements, mobility patterns and public health systems (Colangeli, 2010; Lewis & Groh, 2016; Moulaert, Garon & Biggs, 2016; Miller et al., 2011). Consequently, this thesis is timely considering the aging baby-boom generation and the growing interest in making communities age-friendly.

Most older adults¹ are faced with some form of age-related impairment that limits their ability to perform daily activities. Older adults' ability to age successfully depends greatly on the relationship between their physical and mental abilities, and their environment, which is what environmental gerontologists refer to as 'environmental press' (Ontario, 2013). This older cohort requires supportive and enabling environments to compensate for cognitive and physical changes associated with ageing (World Health Organization, 2007). Age-friendly communities provide accessible and inclusive physical and social environments, programs and services to meet the needs of the older population with varying needs and capacities (Ontario, 2013; World Health Organization, 2007). These communities promote accessibility, mobility, independence, healthy and active ageing. Since active ageing is a lifelong process, age-

¹ Note, the term 'older adult' is used throughout this thesis, to describe adults aged 60 years of age and older, which corresponds to the age used in the World Health Organization's AFC Guide (2007). The terms 'elderly' and 'seniors' were omitted from this study due to their condescending nature, as some older adults consider these terms to be insulting.

friendly communities are designed to benefit people of all ages and abilities (World Health Organization, 2007).

1.3: Research Problem

As indicated by Miller et al. (2011), planners and policy makers “are constantly challenged to adopt new ideas and adjust how they respond to issues such as demographic change” (p. 5). Each new planning paradigm is introduced independently or as an additional concept to be integrated into professional practice and therefore AFC risks being perceived as just another planning approach (Miller et al., 2011). Due to funding constraints and limited resources, planners and policy makers struggle to integrate new planning frameworks into professional practice (Miller et al., 2011). Furthermore, the task of introducing a new planning framework becomes particularly challenging when the concepts overlap or present conflicting priorities (Miller et al., 2011).

Despite the growth of the AFC movement, planners and policy makers have been faced with a number of challenges with integrating age-friendly initiatives into mainstream planning (Cerde & Bernier, 2013; Golant, 2014; Miller et al., 2011). Many of the initiatives set out in age-friendly community planning frameworks overlap or are similar to principles set out in other well-known planning paradigms such as: Smart Growth, New Urbanism, Universal Design, Healthy Communities and Sustainable Communities (Cerde & Bernier, 2013; Golant, 2014; Miller et al., 2011). With each planning initiative competing for funding from the same source, it makes it more challenging for local municipalities to support age-friendly community initiatives (Cerde & Bernier, 2013).

Age-friendly community initiatives are often criticized for having overly ambitious agendas that seek to address a wide range of policy areas yet cannot adequately respond to the diverse needs of the older adult population (Cerde & Bernier, 2013; Golant, 2014). Golant (2014) and Cerde & Bernier (2013) question the feasibility of addressing all components of the age-friendly community planning framework and recommend a more focused approach that prioritizes the initiatives to better serve the needs of the community.

Another major challenge in the successful implementation of age-friendly initiatives is the lack of communication and coordination between: all levels of government; municipal departments such as public health, social services, housing and planning department; health care providers (long-term care institutions, community care providers and hospitals); service agencies; community organizations; and the public (Cerde & Bernier, 2013; Miller et al., 2011). This lack of open collaboration among stakeholders has caused: the duplication of services, inefficient use of resources and the lack of a broader vision for AFC (Cerde & Bernier, 2013). These stakeholders are all operating independently and as a result there is no comprehensive vision for age-friendly community planning. As stated by Cerde & Bernier (2013), better coordination is needed to ensure a smooth transition between all levels of care and service.

The lack of stakeholder coordination has proliferated as a result of program and service downloading from the federal government to the provincial government, and subsequently from the provincial government to the local municipalities, leaving municipalities without adequate support and financial resources necessary to deal with their additional responsibilities

(Cerde & Bernier, 2013). As stated by Cerde & Bernier (2013): “shifting the responsibility for services from the provincial government to the municipalities without providing adequate resources and support can leave municipal governments ill equipped to implement age-friendly initiatives” (p. 2). Age-friendly community initiatives receive funding from governments, foundations and other non-profit organizations; however, governments at all levels are continuously seeking ways to cut costs in order to meet tight budgets (Golant, 2014). Cerde and Bernier (2013) and Greenfield et al. (2015) noted that current age-friendly community initiatives suffer from weak political and social support, and lack long-term financial commitments in order to sustain AFC initiatives over time. Creating age-friendly communities requires a significant amount of time and resources, including funding and human capital; yet funding for AFC initiatives often only lasts for a few years (Greenfield et al., 2015). This raises concerns due to the fiscal implications of an aging population and the rising costs of AFC programs and services (Cerde & Bernier, 2013).

A one-size-fits all approach to age-friendly community planning is not effective due to the vast diversity community environments and older adult populations (Cerde & Bernier, 2013; Ontario, 2013; Moulaert & Garon, 2016). Not only do older adults have varying demographic, socio-economic and cultural backgrounds, but they also differ in terms of their abilities, needs and preferences (Cerde & Bernier, 2013). Old age extends over decades. Generally those aged 55 to 74, are more active and seek social opportunities, whereas those 75 and over are looking for accessible, adaptive, affordable housing, which ranges from assisted living to long-term care facilities (Golant, 2014). The problem is that public policy tends to address older adults as a homogeneous group and fails to address their particular needs (Cerde & Bernier, 2013). AFC

initiatives are often criticized for their top-down approach to create an ‘ideal city’, rather than a bottom-up approach to capture the diversity of the aging population (Buffel et al., 2012; Lui et al., 2009; Moulaert & Garon, 2016; Plouffe et al., 2016). Municipalities must develop and prioritize AFC strategies to accommodate the diversity, size and spatial distribution of their older adult population. Unfortunately, this is often financially impractical due to human capital and financial resource limitations (Cerdeira & Bernier, 2013; Golant, 2014). Not only do older adults have varying needs, but municipalities also have diverse demographic, social, political, environmental and economic settings that influence their ability to implement age-friendly initiatives (Buffel et al., 2012; Cerdeira & Bernier, 2013; Plouffe et al., 2016). In addition, municipalities evolve over time. As stated by Plouffe et al. (2016) “a city that is age-friendly at one time may become unfriendly at another; thus, becoming or remaining age-friendly is an ongoing process” (p. 24).

1.4: Research Questions

The challenges discussed above raise the following research questions which formed the basis of this study:

- 3) To what extent do established planning principles overlap with age-friendly community planning principles?
- 4) Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

1.5: Research Objectives

Based on the above research questions, the following research objectives were devised for this study:

- 1) Review academic literature, public policies, plans and guides to identify the key principles set out in the eight selected planning paradigms, specifically: Smart Growth, sustainable communities, New Urbanism, healthy communities, universal design, accessibility planning, transit-oriented development and age-friendly communities.
- 2) Determine to what extent age-friendly community planning principles are similar to and/or overlap with mainstream planning approaches.
- 3) Investigate planners' views about the lack of coordination between the many planning paradigm shifts and validate whether joint policies are a legitimate policy issue.

1.6: Methodology

The research questions and objectives were addressed using a multi-phased qualitative approach, specifically: a policy document analysis and in-depth interviews. The policy document analysis involved a qualitative content analysis of the City of Waterloo's Official Plan to assess whether there is in fact an overlap and/or similarities between AFC policies and mainstream planning approaches. The City of Waterloo was selected as a case study as it is a member of the World Health Organization's Global Network of Age-Friendly Cities and Communities and has committed to becoming more age-friendly (City of Waterloo, 2015). Thirteen in-depth interviews were conducted with planning professionals from across Ontario who are involved in the creation and implementation of AFC plans. The interviews were used

to: gain a better understanding of the challenges of creating and implementing age-friendly community initiatives; investigate whether planning professionals have perceived an overlap or conflicting priorities between AFC planning and other mainstream planning frameworks; and determine whether there value in working towards a comprehensive planning framework that incorporates age-friendly community planning principles and established planning principles.

1.7: Structure of the Thesis

The thesis consists of five chapters. Chapter two, Literature Review, presents an overview of the selected planning paradigms through a review of academic and grey literature, and situates the research within the context of the current literature on age-friendly community planning. The third chapter, Methodology, describes the multi-phased qualitative approach used to address this study's research questions, specifically a policy document analysis and in-depth interviews. This chapter examines in detail the methods of data sampling, collection and analysis for each of the selected methods as well as the steps taken to ensure methodological rigour. Chapter Four, Findings Chapter, presents an overview of the study's findings as they relate to the two primary research questions and presents the supplementary findings that were uncovered through the in-depth interviews with planning professionals. The supplementary findings provided key insight into the strengths and weaknesses of current age-friendly community planning initiatives across Ontario and lay the foundation for a number of the recommendations set out in the Discussion and Conclusion Chapter. The fifth Chapter, Discussion and Conclusion Chapter, presents a discussion of the dominant themes that emerged from the findings, outlines the study's contributions to the existing body of knowledge in the field of age-friendly community planning, discusses the study's research

limitations, provides direction for future research, and presents a number of policy recommendations that emerged from the findings.

Chapter 2

Literature Review Chapter

2.1: Introduction

This chapter presents an overview of the eight selected planning paradigms through a review of academic and grey literature. The literature review provides the foundation for the research question: “to what extent do established planning principles overlap with age-friendly community planning principles?”

The selected planning paradigms are presented temporally in this Chapter to illustrate how the planning profession has evolved over time. Table 1, lists the selected planning paradigms in the chronological order in which they were developed along with a list of the individuals or organizations responsible for founding these movements.

Table 1: Chronology of the Selected Planning Paradigms

Year	Planning Paradigm	Founding Individuals or Organizations
Mid 1970s	Smart Growth	State of Oregon, United States
1980	Sustainable Communities	International Union for Conservation of Nature and Natural Resources and the United Nations World Commission on Environment and Development
1980s	New Urbanism	Coalition of professionals including planners, developers, urban designers, architects and engineers
1984	Healthy Communities	Beyond Health Care Conference (Toronto) and the World Health Organization
1989	Universal Design	Ronald Mace
1990	Accessibility Planning	Americans with Disabilities Act (ADA)
1993	Transit-oriented Development	Peter Calthorpe
2007	Age-friendly Communities	World Health Organization

Section 2.2 examines the five key publications which formed the foundation for this study's research questions. This background is presented at the beginning of the literature review to present the reader with an understanding of why there is value in further examining the overlap between AFC and established planning frameworks. Section 2.3 outlines how the planning frameworks were selected for analysis. Sections 2.4 to 2.10 examine the seven selected planning paradigms that were identified as having some overlap and similarities with age-friendly community planning, which include: Smart Growth, sustainable communities, New Urbanism, healthy communities, universal design, accessibility planning and transit-oriented development. Each section outlines when the planning paradigm was initiated and who developed it, provides a brief history on the societal and urban development challenges that triggered the approach, defines the paradigm, list of key principles, discussion of the key concepts, implementation and critical reflection on how the planning paradigm parallels with AFC. Section 2.11 reviews the theoretical concepts behind the notion of age-friendly community planning, examines the current body of literature on age-friendly community planning and provides direction for this research.

2.2: Background and Rational for this Study's Research Questions

There are five key publications that critically assessed current AFC initiatives and formed the foundation for this study, specifically: Colangeli (2010), Cerda & Bernier (2013), Golant (2014), Miller et al. (2011), Moulaert, Garon & Biggs (2016). Cerda & Bernier's (2013) article, entitled "Age-Friendly Communities in Ontario: Multi-Level Governance, Coordination Challenges and Policy Implications", provided a Summary of the discussions held during the Canadian Institute for Research on Public Policy's two day symposium held in

Toronto on November 4-5, 2013. The event sought to identify the most effective strategies in promoting age-friendliness in Ontario and identify potential policy changes that could assist communities in becoming more age-friendly (Cerde & Bernier, 2013). Stephen Golant was one of the keynote speakers at the symposium and he later published the article entitled “Age-Friendly Communities: Are we Expecting Too Much?” (2014). Golant (2014) conducted a critical assessment of the AFC movement eight years after the initial AFC initiatives had been implemented to assess the feasibility of addressing all the components of AFC planning and guide future AFC research.

In 2011, the Canadian Urban Institute published a report entitled “Re-positioning Age Friendly Communities: Opportunities to Take AFC Mainstream” (Miller et al., 2011) which examined the extent to which AFC is similar and compatible with mainstream planning approaches. Miller et al. (2011) conducted a literature review of ten planning paradigms, then addressed ten questions regarding the AFC model in order to determine whether AFC is compatible or complementary to established planning frameworks and whether there is potential of integrating AFC into mainstream planning practice. The book entitled “Age-friendly Cities and Communities in International Comparison” (Moulaert, Garon and Biggs, 2016) described the origins of AFC, examined a number of theoretical and methodological perspectives which guided the development of AFC, and provided a number of case studies from around the globe through which they highlighted some of their achievements and discussed their challenges (Moulaert, Garon & Biggs, 2016). John Colangeli (2010) conducted research on age-friendly communities and proposed a ‘wise growth model’ which combines the theoretical concepts of Smart Growth and gerontology to better assist communities in preparing for the aging baby-

boom generation. In his research, he discussed the overlap between AFC and a number of established planning paradigms.

These five publications discussed a number of challenges that planners and policy-makers face when integrating age-friendly initiatives into mainstream planning, notably: 1) many AFC initiatives overlap or are similar to principles set out in other well-known planning paradigms; 2) AFC initiatives are often criticized for their over ambitious agendas that seek to address a wide range of policy areas; 3) lack of coordination among stakeholders which has caused the duplication of services, inefficient use of resources and the lack of a broader vision for AFC; and 4) a one-size-fits all approach to age-friendly community planning is not effective due to the vast diversity of older adults (Cerdeira & Bernier, 2013; Golant, 2014; Miller et al., 2011).

One of the key challenges for implementing AFC initiatives, is overlap with established planning frameworks and the resulting duplication of services. Colangeli (2010) discussed the similarities and overlap between AFC and other planning approaches, specifically: Smart Growth, New Urbanism, sustainable communities and healthy communities. Colangeli (2010) believes that these planning models, combined with gerontology theory, can assist planners in dealing more effectively with the aging baby-boom generation.

Miller et al. (2011) conducted a literature review of ten planning frameworks which share a common goal of improving the built environment, which include: Smart Growth, healthy communities, New Urbanism, universal design, child friendly cities, LEED ND, WHO safe communities, heat resilient communities, active living communities and age friendly

communities. According to Miller et al. (2011), "each new paradigm has been presented independently or at the least, as an additional set of ideas to be incorporated into common practice" (p. 6). The purpose of their literature review was to determine whether AFC is compatible or complementary to established planning frameworks. Miller et al. (2011) stated that "because many of the concepts embedded in AFC are also addressed in other planning paradigms such as Smart Growth, Healthy Communities, New Urbanism and others, AFC may be perceived as duplicating effort or possibly as diverting effort away from the pursuit of other competing priorities." (p. 5). Miller et al. (2011) expressed concerns that: "there is a risk is that the full benefits of the thinking behind AFC may not be realized if AFC is perceived as "yet another concept" to be integrated into professional practice" (Miller et al., 2011, p. 6).

Golant (2014) questioned whether AFC initiatives have an identity problem and noted that AFC is remarkably similar to and cannot easily be distinguished from: New Urbanism, Smart Growth, sustainable communities, universal design, walkable communities and complete streets. Golant (2014) identified the need to research the overlap between AFC and other initiatives geared towards older adults:

"We do not currently have any studies or even any serious commentary that examines how the initiatives subsumed under the umbrella of age-friendly communities overlap with these other planning, service, health and care efforts" (Golant, 2014, p. 7).

The overlap between AFC and established planning frameworks as identified above, lay the foundation for this study's first research question:

To what extent do established planning principles overlap with age-friendly community planning principles?

Due to the overlap between the planning frameworks, the concept of a comprehensive approach to age-friendly community planning was identified as a recurring theme (Colangeli, 2010). Cerda & Bernier (2013), Colangeli (2010), Golant (2014) and Miller et al. (2011) recommended that AFC policies be combined with other sectors and policies from other approaches with competing priorities, as joint initiatives would: avoid duplication, ensure more efficient use of resources, establish broader and more cost effective strategies, and result in funding and organizational collaborations.

Cerda & Bernier (2013) stated that “communities should join forces with programs that have some goals in common with age-friendly initiatives” (p.4). Miller et al. (2011) indicated that “the principles of AFC can be either embedded or structured to complement other paradigms such as Smart Growth, Healthy Communities (HC) and Child Friendly Planning” (p. 5). Miller et al. (2011) made several recommendations to adapt AFC to planners’ needs, one of which involved creating a version of AFC that combines complementary aspects of established planning paradigms, such as Smart Growth and New Urbanism. According to Miller et al. (2011), this could be achieved within separate volumes or a single comprehensive document.

Colangeli (2010) believed that a new form of comprehensive planning is required. He developed a comprehensive planning model entitled the ‘Wise Growth Model’ which incorporated elements from newer planning models, specifically Smart Growth, New

Urbanism, sustainable development and healthy communities, with key principles from the field of gerontology to develop more age-friendly communities. He indicated that real progress can only occur if the various sectors work together. He indicated that additional research is needed to assess his model in practice. This study built on the work done by Colangeli (2010), yet examined three additional frameworks that also share commonalities with age-friendly community planning.

Nevertheless, Golant (2014) questioned whether the initiatives could come together to use resources more efficiently and avoid duplication:

It is worth asking, however, if organizational or funding synergies would result if age-friendly-community programs joined forces with these other initiatives. Perhaps age-friendly-community advocates can realize political or fiscal economies of scale by establishing partnerships with public or private sector stakeholders who share common community goals. On the other hand, there may be downsides to such coalitions and good reasons for age-friendly-community advocates to stake out their own distinctive planning and public policy turfs (p. 7-8).

These viewpoints raised a number of questions which formed the basis for this study's second research question, specifically:

Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

2.3: Planning Framework Selection

This study sought to examine the overlap and similarities between age-friendly community planning and seven established planning frameworks, specifically: accessibility planning, Smart Growth, transit-oriented development, universal design, healthy communities, sustainable communities and New Urbanism. Five of the seven selected planning approaches were identified in the literature as sharing common principles with AFC, particularly: Smart Growth, universal design, healthy communities, sustainable communities and New Urbanism (Colangeli, 2010; Golant, 2014; Miller et al., 2011). This study went one step further and added a couple additional planning frameworks that were believed to share commonalities with AFC, specifically, transit-oriented development and accessibility planning.

Miller et al. (2011) identified a total of ten planning paradigms that share similarities with AFC, yet five were excluded from this study, specifically: child-friendly cities, leadership in energy and environmental design for neighbourhood development (LEED ND), World Health Organization safe communities, heat resilient communities and active living communities. These planning frameworks were excluded from this study for the following reasons. The first consideration is policy salience. This study focused on well-known planning paradigms that are commonly used in planning practice. Some of the planning frameworks discussed in Miller et al.'s (2011) article, such as child-friendly cities, have simply not gained the same momentum as AFC and are rarely on public policy agendas. Based on an environment scan of the policies in Ontario, it appears that few communities, if any, are undertaking child-friendly initiatives. Secondly, some of these paradigms are subsets of other planning paradigms, for instance heat resilient communities and LEED ND are components of sustainable community planning, and

active living communities are a component of healthy communities. Lastly, the scope of this research had to be narrowed down due to limited resources and time constraints. This study focused on the most relevant planning frameworks as it was simply unfeasible to look at all planning frameworks.

2.4: Smart Growth

Smart Growth started in the mid-1970s, in the State of Oregon, United States, when the first urban growth boundaries were established (Pim & Ornoy, 2005). The town-country boundary meant that cities had to grow more efficiently within their border in order to protect surrounding agricultural land (Pim & Ornoy, 2005). The concept of Smart Growth started as a response to automobile-dependent, low-density, suburban development, known as urban sprawl, which has dominated the North American landscape following World War Two (City of Calgary, 2006). Over the last few decades, municipalities have become aware of the challenges associated with urban sprawl and have sought new forms of sustainable development that will protect the environment and nurture a strong economy (City of Calgary, 2006).

What is Smart Growth? According the Smart Growth Network, “‘Smart Growth’ covers a range of developments and conservation strategies that help protect our health and natural environment and make our communities more attractive, economically stronger, and more socially diverse (n.d.) . The United States Smart Growth Network is often cited for its list of ten Smart Growth principles. The Smart Growth Network was founded in 1996 by the United States Environmental Protection Agency, non-profit and government organizations to address

environmental concerns and boost local economies (Smart Growth Network, n.d). The Smart Growth Network now partners with over 40 organizations to promote Smart Growth practices, act as a forum to share ideas, information and tools, and raise awareness of how Smart Growth practices can improve quality of life (Smart Growth Network, n.d). The Smart Growth Network's ten principles include:

- Mixed land uses
- Compact building designs
- Range of housing opportunities and choices
- Walkable neighbourhoods
- Distinctive, attractive communities with a strong sense of place
- Preserve open space, farmland, natural beauty and critical environmental areas
- Strengthen and direct development towards existing communities
- Variety of transportation alternatives
- Development decisions are predictable, fair and cost effective
- Encourage community and stakeholder collaboration in development decisions

(Smart Growth Network, n.d.)

Growth often means progress. For growth to be considered 'smart', it must preserve key features of the past and create a strong future for forthcoming generations (Smart Growth Network, n.d.). The primary goal of Smart Growth strategies is to address urban sprawl and promote sustainable development. Smart Growth strategies promote compact, walkable, mixed-use designs that provide a range of affordable and convenient housing and transportation alternatives for people of all ages, family types and incomes (Smart Growth

Network, n.d.; Sykes & Robinson, 2014). In addition, Smart Growth looks to: protect the environment by ensuring the efficient use of resources, encourage citizen engagement in the planning process, and stimulate economic growth (Niagara Region, 2015; Smart Growth Network, n.d.).

In the Canadian context, the Smart Growth Canada Network is a national organization that was established in 2003 to help implement Smart Growth initiatives and promote sustainability through research and education (Smart Growth Canada Network, 2007). Provincially, the Ontario Smart Growth Network (OSGN) was also founded in 2003 to provide member organizations a means to share information and resources to promote Smart Growth, reduce urban sprawl and create more liveable communities (Ontario Smart Growth Network, n.d.). Municipal, County and Regional Official Plans typically do not refer to ‘Smart Growth’ per se, yet they incorporate many of its principles. For instance, municipalities have established growth boundaries that limit the growth of the community and direct development towards settlement areas in order to curb expensive infrastructure expansion and preserve the natural environment and farmland. The principles of Smart Growth are also reflected in Zoning By-laws that permit higher density and mixed-use developments, rather than exclusionary land uses.

The overlap between Smart Growth and age-friendly communities is discussed in the literature. Specifically, Colangeli (2010) developed a ‘Wise Growth Model’ which combines the theoretical concepts of Smart Growth and gerontology to better assist communities in preparing for the aging baby-boom generation. The United States Environmental Protection

Agency (EPA) developed a guide for active aging entitled “Growing Smarter, Living Healthier: A Guide to Smart Growth and Active Aging” (Environmental Protection Agency, 2009). The guidebook was developed for older adults who are interested in helping their communities become more age-friendly. This guide discusses the link between age-friendly communities and Smart Growth initiatives: “Age-friendly communities use Smart Growth principles (development that improves the community, environment, economy, and public health) to become healthier places to grow old in – and better places for people of all ages” (Environmental Protection Agency, 2009, p. 2). The guide indicates that where older adults chose to live and the type of housing they select has an influence on their ability to stay active, connected and engaged in the community (Environmental Protection Agency, 2009). The array of housing alternatives is particularly important for older adults, who often chose to either stay in their current home close to family and friends, and age in place, or downsize to a smaller home within their community that is easier to maintain (Environmental Protection Agency, 2009; Sykes et al., 2014). The mixed-use, compact neighbourhood designs correspond to concepts of age-friendly communities that suggest that housing should be within walking distance of meeting places such as restaurants, parks, community centres, etc. to promote social interaction and keep older adults connected and engaged in their community (Environmental Protection Agency, 2009).

Smart Growth communities offer a variety of transportation alternatives, which is essential in age-friendly communities to promote mobility and independence among older adults.

Although most older adults wish to continue driving as long as they can, there needs to be other alternatives once they lose their ability to drive. The Environmental Protection Agency’s

guide (2009) recommends complete street designs that seek to meet the needs of all users, whether walking, biking, driving or using public transit. Complete streets use traffic calming strategies such as curb extensions and narrower lanes to reduce the traffic speed, safer intersections with curb ramps and longer crossing times, median crosswalks to shorten crossing distances and encourage crossing in the proper locations, bike lanes for cyclist, easy-to-read signage, and wider sidewalks with trees to provide more pleasant walkable neighbourhoods (Environmental Protection Agency, 2009).

2.5: Sustainable Communities

The notion of sustainable development was first presented in 1980 at the International Union for Conservation of Nature and Natural Resources (Dresner, 2008). In 1987, the United Nations World Commission on Environment and Development published the Brundtland report which introduced sustainable development as a new approach to address the competing demands for environmental sustainability, economic growth and social equity (Colangeli, 2010; Dresner, 2008). As noted in the report, sustainable development is not simply a question of environment versus growth, rather it seeks to promote intergenerational equity, both between and within generations (Dresner, 2008; Phillipson, 2011).

The Brundtland report defined sustainable development as “development that meets the needs of the present without compromising the ability of future generations to meet their needs” (Dresner, 2008, p. 1). In 1992, the United Nations adopted The Rio Declaration on Environment and Development which set out 27 principles of sustainable development (Quebec, 2004). These same principles were later restated at the World Summit on Sustainable

Development held in 2002 in Johannesburg (Quebec, 2004). Nevertheless, throughout the literature there is no standardized list of key principles of sustainable development. This study used the Province of Quebec's list of 16 key principles which were summarized from the original 27 principles and form the basis for Quebec's Sustainable Development Act; they are as follows:

- Protect health and improve quality of life
- Social equity (intra- and inter-generational equity)
- Environmental protection
- Economic efficiency
- Involvement and commitment of citizens and key stakeholders
- Access to knowledge
- Protection of cultural heritage
- Prevention of a known risk
- Precaution where there is a risk of serious or irreversible harm
- Biodiversity preservation
- Respect for ecosystem support capacity
- Responsible production and consumption
- Polluter/user pay
- Inter-governmental partnership and cooperation

(Quebec, 2004; Quebec Official Publisher, 2006).

According to Dresner (2008), sustainable development is viewed as a 'contestable concept'; most people support the notion yet cannot agree on the specific meaning of the term

‘sustainable development’. Some people strive for sustainability through environmental protection, while others focus on development through economic growth (Dresner, 2008). Environmentalists argue that ‘sustainable’ and ‘development’ are contradictory terms that are used simply to hide the continuous destruction of the natural environment; whereas economists claim that sustainable development is overly vigilant about the future, therefore forgoing economic growth over unwarranted concerns about the loss of natural resources (Dresner, 2008).

The term sustainable development can be used a number ways, referring to either economic growth, social equity and/or environmental protection (Bender, 2012; Dresner, 2008). As a result, a number of different approaches can be taken to promote sustainable development, these include: developing growth management strategies, protecting the natural environment, improving the transportation network and public infrastructure, and promoting green energy and energy efficiency (Bender, 2012). These strategies do not operate independently, rather they must be coordinated in order to ensure a more comprehensive approach to sustainable development (Bender, 2012).

Sustainable development initiatives are commonly combined with healthy community initiatives. The Ontario Professional Planners Institute (OPPI, 2007) created a combined position paper that seeks to promote healthy and sustainable communities by focusing on urban design, promoting active transportation, supporting green infrastructure. The Canada Green Building Council created the Sustainable Communities Toolkit which examines the current legislative framework, provides a wide variety of case studies and sets out guidelines for

municipalities (Canada Green Building Council, n.d.). The toolkit focuses on six components of sustainability including: natural environment, buildings, transportation, infrastructure, energy and community planning (Canada Green Building Council, n.d.). Sustainable development techniques are most commonly implemented at the community scale, providing a more holistic approach to realizing long-term sustainability (Bender, 2012). Sustainable planning practices vary considerably across municipalities based on the local, geographic, historic, economic and demographic context of the community (Bender, 2012; Tsenkova, 2009).

Golant (2014) noted the similarities between age-friendly community planning and other well-known planning initiatives including sustainable communities. Golant (2014) indicated that by promoting AFCs, the form and function of communities could be revitalized to create sustainable communities that accommodate people of all ages and abilities. As indicated by Buffel et al. (2012), age-friendly communities draws on the notion of sustainable cities in terms of managing urban growth to address the needs of current and future generations. AFCs and sustainable communities both seek to promote social equity, health and quality of life for present and future generations (Golant, 2014; Quebec, 2004). In addition both planning paradigms involves consultation with key stakeholders and the general public in order to identify key priorities that best accommodate the needs of the community (Bender, 2012).

2.6: New Urbanism

The New Urbanism movement was created in the 1980s by a coalition of professionals, including planners, developers, urban designers, architects, and engineers who were frustrated

with the current forms of the single use, car-oriented suburban neighbourhoods, which were common of post-WWII developments (CNU, 2015b; McCann, 2009). These developments were characterized by: low density, single detached dwellings with large yards, located far from shops and the downtown core (CNU, 2015b; McCann, 2009). The single use zoning caused the clustering of housing types, which lead to the segregation of classes and ethnicities (McCann, 2009). This form of development was also said to have a negative environmental impact due to the loss of agricultural land and wilderness (CNU 2015b; CNU, 2015c). The New Urbanism movement sought to mitigate these social and environmental problems by changing urban form to improve residents' quality of life (McCann, 2009). New urbanist theory was influenced by the work of Leon Krier, Andres Duany and Elizabeth Plater-Zyberk (McCann, 2009). The New Urbanist movement also draws inspiration from earlier periods of planning thought, particularly those of Jane Jacobs (Grant, 2006; McCann, 2009). Jacobs criticized urban redevelopment and car oriented suburban planning, and advocated for a vibrant, dense and mixed-use developments, similar to those of traditional neighbourhoods, with a diversity of people at all times of the day (Grant, 2006; McCann, 2009). These principles have been central to the new urbanist movement.

Although most publications do not define New Urbanism per say, they often reference the principles of New Urbanism set out by the Congress for the New Urbanism (CNU). The CNU was founded in 1993 as a professional advocacy organization that promotes New Urbanism (CNU, 2015; CNU, 2015a; McCann, 2009). This non-profit organization established the Charter of the New Urbanism which sets out their values and lists the guiding principles (CNU,

2015c). The CNU set out a very detailed and comprehensive list of principles (CNU, 2015b).

Miller et al. (2011) summarized New Urbanist principles as follows:

- Sustainability
- Mixed-use & diversity
- Mixed housing
- Connectivity & smart transportation
- Quality architecture & urban design
- Walkability
- Increased density
- Quality of life

(CNU, 2015b; Miller et al., 2011).

The New Urbanism movement is based on the “belief that our physical environment has a direct impact on our chances for happy, prosperous lives” (CNU, 2015a). New Urbanism sought to create vibrant and healthy communities modeled after traditional 19th and 20th century small towns with human-scale urban design (CNU, 2015b). New Urbanism sought to restore existing urban cores, transform suburbs into communities and preserve natural environments (CNU, 2015a). New Urbanism neighbourhoods are compact, mixed-use developments that offer a variety of amenities within walking distance (McCann, 2009). They provide a range of housing types, sizes, costs and tenure, all within close proximity to amenities (CNU, 2015c; McCann, 2009). Due to this variety in housing stock, these neighbourhoods are home to a large diversity of people, of all ages, cultural backgrounds and income levels (CNU, 2015c). Since affordable housing is distributed across the community, it

prevents the concentration of poverty in certain neighbourhoods (CNU, 2015c). The pedestrian-friendly street design encourages alternative forms of transportation such as walking, cycling and public transit. New Urbanism developments are characterized by quality architecture and urban design, with an emphasis on aesthetics to help create a strong sense of place (CNU, 2015c; McCann, 2009). New Urbanism developments draw on many of the design features of small towns: public spaces in the centre, highest densities are in the center and progressively diminish towards the outskirts, buildings are located near the street, homes have front porches to encourage interaction with those walking on the sidewalk, garages are located along a rear laneway, and the streets are tree-lined and narrow to reduce traffic speed (McCann, 2009). The interconnected grid street layout features a hierarchy of narrow streets that helps disperse traffic, reduce vehicular traffic and facilitate walking (McCann, 2009). These developments feature a sustainable urban form that minimizes the impact on the natural environment, discourages the use of greenfield sites, uses eco-friendly and energy efficient technologies, encourages local production and reduces greenhouse gas emissions by promoting walking and less driving (McCann, 2009). In addition, the New Urbanism planning approach involves a bottom-up participation process, using methods such as charrettes, to allow the public to work collaboratively with professionals to design spaces using a visioning process (McCann, 2009).

Since the 1980s, new urbanist developments have been built around the globe including the following Canadian developments: Cornell in Markham, McKenzie Towne in Calgary, East Clayton in Surrey and Oak Park in Oakville (Tsenkova, n.d.). New Urbanist designs have not become the dominant form development in Canada due to the lack of availability of large

parcels of affordable greenfield land and Canadian's resistance towards intensification. As noted by Jill Grant (2006), the success of New Urbanism depends greatly on the social, economic, historic and geographic characteristics of the community.

Although most communities have not developed 'New Urbanism' developments per se, most municipalities have incorporated New Urbanism principles into their Official Plans and Zoning By-laws, such as: high density, mixed-used, walkability, connectivity, sustainability, smart transportation. As indicated by the Congress for the New Urbanism, "New Urbanists have been responsible for creating and popularizing many now-common development patterns and strategies, including mixed-use development, transit-oriented development, traditional neighborhood design, integrating design standards into affordable housing, and designing complete and beautiful streets" (CNU, 2015a, para. 5). Municipalities have updated their zoning regulations to focus less on land uses, and more on urban form (McCann, 2009). This provides flexibility for mixed-use developments, which in turn promotes socially and economically diverse neighbourhoods, promotes walkability and increased density (McCann, 2009). New Urbanism design principles can be applied to all forms of development, such as new development, infill development and preservation, and to all scales of development from single streets to neighbourhoods or even entire communities (CNU, 2015b; CNU 2015c).

McCann (2009) and Tsenkova (n.d.) noted similarities between New Urbanism and other planning approaches such as Smart Growth, transit-oriented development, sustainable communities and age-friendly communities (McCann, 2009). Nelson (2008) believes that the aging baby-boom generation's evolving preferences for smaller homes is contributing to the

demand for New Urbanism style developments. This generation is downsizing and finding housing within walking distance of amenities (Nelson, 2008). New Urbanism style developments favour walkability which benefits older adults who no longer drive, yet seek to maintain their independence (CNU, 2015c).

2.7: Healthy Communities

The Healthy Communities movement started in 1984 in Toronto, Canada, at the Beyond Health Care conference (Miller et al., 2011; Taylor, 2010). The purpose of the conference was to address the new threats that the built environment posed to human health (Taylor, 2010). In 1986, an international agreement, known as the Ottawa Charter for Health Promotion, was signed at the first international conference on health promotion, organized by the WHO (Taylor, 2010). That same year, the WHO met in Lisbon, Portugal, to launch the Healthy Cities Project (Miller et al., 2011; Taylor, 2010). Nevertheless, according to Trevor Hancock who pioneered the international healthy cities movement, the notion of healthy communities dates back as far as the 19th century to public health movements led by local governments (Hancock, 1993).

The World Health Organization's Healthy Cities Project defined healthy cities as "one that is continually creating and improving those physical and social environments and strengthening those community resources which enable people to mutually support each other in performing all the functions of life and achieving their maximum potential" (Hancock and Duhl, 1986, p.24). The World Health Organization identified the following key factors of a healthy community as part of their healthy cities project; they include:

- A clean, safe, high quality physical environment (including housing quality)
- An ecosystem which is stable now and sustainable in the long term
- A strong, mutually supportive and non-exploitive community
- A high degree of public participation in and control over the decisions
- The meeting of basic needs (food, water, shelter, income, safety, work) for all the City's people
- Access to a wide variety of experiences and resources with the possibility of multiple contacts, interactions and communication
- A diverse, vital and innovative city economy
- Encouragement of connectedness with the past, with the cultural and biological heritage and with other groups and individuals
- An optimum level of appropriate public health and sick care services accessible to all.

(Canadian Institute of Planners, n.d.).

As stated by the Ontario Professional Planners Institute (2007), "Where we work, live, and play is vitally important to the quality of our lives" (p.3). The concept of healthy communities is based on the notion that the urban environment has a strong influence on individuals' physical and psychological health, as well as the community's ecological health (Capon & Blakely, 2007; CIP, n.d.; MMAH & OPPI, 2009). As indicated by the Canadian Institute of Planners (n.d.), "The health of a community is not just about the health of the people, but about the healthfulness of their environmental, social and economic conditions and of the community, social and political processes that lead to the shaping of those conditions" (p.5). The built environment can impact health in a number of ways by influencing: exposure to air

and water contaminants, food selection, levels of physical activity, safety and security, and social interactions, just to name a few (Capon & Blakely, 2007; CIP, n.d.; MMAH & OPPI, 2009). These items are all interconnected; as a result, changes to one factor can impact a number of other components of the urban environment (Capon & Blakely, 2007).

Sedentary lifestyles, which involve low rates of physical activity, poor diets and dependence on automobiles, are contributing to serious health problems such as: obesity, heart disease, Type 2 diabetes, respiratory ailments, high blood pressure, stroke, stress and depression (CIP, n.d.; MMAH & OPPI, 2009). Daily activities such as work and recreation have become more sedentary than previous generations, as adults' jobs have become less physical and children are spending more time watching television and playing video games, than playing outdoors (Capon & Blakely, 2007). This, along with increased consumption of processed foods, are contributing to rising levels of obesity (Capon & Blakely, 2007). In addition, dependence on automobiles has contributed to increased emissions, causing air pollution and global warming (Capon & Blakely, 2007, CIP, n.d.). The natural environment is also suffering from the depletion of natural resources, which in turn threatens human health (CIP, n.d.).

Land use planning and urban design can promote a high quality of life and improve physical health and psychological well-being, and facilitate social interaction (CIP, n.d.; MMAH & OPPI, 2009). Healthy community initiatives help create environments that promote healthy and active aging (Colangeli, 2010), yet people of all ages benefit from these improvements. Healthy community planning initiatives seek to promote more active lifestyles by designing communities that provide: pedestrian-friendly, mixed-use, compact neighbourhoods that

promote more active forms of transportation such as walking and biking; access to recreational facilities, parks and trails; safe, accessible and attractive neighbourhoods; and connected trails, sidewalks and road networks that accommodate all modes of transportation (Heart and Stroke Foundation, n.d.; Miller et al., 2011; MMAH & OPPI, 2009). Supporting forms of active transportation not only helps reduce obesity levels by promoting physical activity, but it also reduces greenhouse gas emissions from driving, and helps improve air quality (CIP, n.d.; MMAH & OPPI, 2009).

Healthy community initiatives have been implemented at national, provincial and local levels. Healthy community initiatives are often combined with sustainable community practices as improvements to the sustainability of the urban environment also provides benefits human and environmental health (Capon & Blakely, 2007). The Canadian Institute of Planners (CIP) published “Healthy Communities Practice Guide” (n.d.) to help planners learn how to effectively plan for healthy communities through partnerships with health professionals and other key stakeholders (CIP, n.d.). The guide indicates the connection between healthy communities and age-friendly communities, stating that healthy community planning draws from a number of other initiatives to create healthy and sustainable communities. The guide noted that healthy community initiatives incorporate various planning approaches as opposed to being exclusive to other initiatives, as other approaches are needed to be a truly healthy community (CIP, n.d.). In 2013, the CIP published “Healthy Communities: Legislative Comparison Survey Report” which examines the variations in policy support for healthy community across provinces (CIP, 2013). Some provinces have taken a prescriptive approach

to healthy community planning; whereas, other provinces, such as Ontario, have more flexible policies that do not explicitly support healthy community planning (CIP, 2013).

In Ontario, the Provincial Policy Statement mandates building strong and healthy communities (Ontario, 2014). In 2007, the Ontario Profession Planners Institute published a position paper entitled “Healthy Communities Sustainable Communities” (OPPI, 2007) which explained the connection between land-use planning and public health, discussed the importance of urban design, green infrastructure and active transportation networks, and recommended strategies to promote healthier communities (OPPI, 2007). The OPPI later partnered with the Ontario Ministry of Municipal Affairs and Housing to develop “Planning by Design: A Healthy Communities Handbook” which provides a municipal checklist to help communities become more health-friendly (MMAH & OPPI, 2009). Municipalities have adopted healthy community policies in their Official Plans and established healthy community committees through which they provide advice to council to help foster healthy communities. As noted by Miller et al. (2011), municipalities play a critical role in determining the quality of life and health of their residents, as individuals’ health is strongly associated with the quality of their environment.

2.8: Universal Design

The term ‘universal design’ was first coined by the architect Ronald Mace who sought to remove the label ‘special needs’ by creating designs that are accessible, supportive, adaptive and safety oriented (Null, 2013). Universal design is an interdisciplinary approach to design that draws on concepts from architecture, engineering, planning, design, gerontology and

ergonomics, as it takes into consideration the interaction between people and their environment (Demirbilek et al., 2004; Lid, 2014). Universal design, which is sometimes referred to as life-span design, seeks to create environments that are accessible to all, regardless of their age or physical or cognitive abilities, through flexible, adaptable and interchangeable designs (Demirbilek et al., 2004; Lid, 2014; Null, 2013; UBCM, 2010). Universal design does not cater to a particular group, but rather seeks to provide equal opportunities to all, to the greatest extent possible by removing barriers to address everyone's differing needs (Lid, 2014).

Universal design is defined as: “the design of products and environments that can be used and experienced by people of all ages and abilities, to the greatest extent possible, without adaptation” (Center for Accessible Housing, 1995, referenced in Storey, 1998, p. 4). Null (2013) defines universal design as ‘good design’ or ‘design for all people’. The seven principles of universal design were established in 1997 by the North Carolina State University’s Centre for Universal Design (NC State University, 1997) and were referenced in a number of sources, they include:

- Equitable use (designed for people with diverse abilities)
- Flexibility in use (designed to accommodate a wide range of individual preferences and abilities)
- Simple and intuitive use (use of the design is easy to understand, regardless of the user’s experience, knowledge, language skills, or current concentration level)
- Perceptible information (the design communicates the necessary information effectively to the user, regardless of ambient conditions or the user’s sensory abilities)

- Tolerance for error (The design minimizes hazards and the adverse consequences of accidental or unintended actions)
- Low physical effort (The design can be used efficiently and comfortably with a minimum of fatigue)
- Size and space for approach and use (Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user's body size, posture or mobility)

(NC State University, 1997).

There are several design theories that are similar to universal design yet use different approaches to accommodate the aging population and those with disabilities, these include: accessible design, adaptable design and transgenerational design (Carr, 2013). Accessible design seeks to fulfil building code requirements by providing separate design elements, such as automatic door push buttons, that are typically permanent and stand out as being specifically for older adults or those with disabilities (Carr, 2013). Adaptable designs are concealed and can easily be adjusted to meet the needs of the individuals (Carr, 2013). Transgenerational design seeks to specifically address the physical and sensory impairments of older adults specifically; therefore stigmatizing age and overlooking other age groups (Carr, 2013). Universal design, on the other hand, looks to remove barriers without stigmatization (Carr, 2013).

There are a number of commonalities between universal design, accessibility planning and age-friendly communities. The book "Universal Design New York" (Levine, 2003), provides a

detailed comparison of accessibility planning and universal design by outlining the ways in which their requirements differ for a number of areas of planning and design. Accessibility studies look specifically at the needs of those with disabilities and provides solutions based on quantified standards, whereas, universal design looks at designing buildings for everyone, regardless of their age and abilities. Accessible designs provide separate design features for disabled users that are often added after the fact and are very noticeable, therefore segregating those with disabilities; whereas universal design is inclusive (Carr, 2013; Storey, 1998).

Universal design seeks to acknowledge that all people are viewed as equal and deserve equal opportunities (Null, 2013). Accessibility planning is used at a larger scale addressing both indoor and outdoor building requirements, whereas universal design tends to be at a smaller scale and usually addresses interior home and building designs (Miller et al., 2011).

Null (2013) discussed the importance of designers focusing on the relationship between universal design and an aging population. She noted that older people are reluctant to admit that their bodies are aging and that they require a more assistive environments (Null, 2013).

Null (2013) indicated that:

Universal design is a general approach that provides maximum appeal and benefits for all age groups, rather than to a niche market such as the frail elderly or disabled/wheelchair users. We need to take a universal design approach to ensure safe, comfortable, convenient, and accessible dwellings for people of all ages, size and abilities, not just for the elderly. Because universal design is invisible and inclusive, it will meet the needs of an aging population (and all others) (p. 19-20).

Universal design improves the quality of life of all ages by promoting usability, safety and independence, regardless of physical limitations and cognitive abilities (Demirbilek et al., 2004).

Older adults want to maintain a strong quality of life as they age, maintain their independence and remain engaged in social activities located near their homes where they have built their lives (Ontario, 2013). There is a growing number of older adults that are seeking to stay in their homes due to strong emotional ties to their community (Carr, 2013; Golant, 2014; Null, 2013). Most older adults seek to age in place and delay going to a long term care facility; however, those with disabilities are often forced to move out of their homes due to decreased ability and the need for assistance (Carr, 2013; Demirbilek et al., 2004; Golant, 2014; Null, 2013). As older adults age, some find it increasingly difficult to perform daily tasks such as cooking, opening doors or climbing stairs, due to a physical disability or chronic health problems. Consequently, there is a greater demand for remodeling homes with accessible designs and assistive devices. Universal design allows older adults to age in place through housing adaptations that remove barriers; therefore allowing them to stay in their homes longer and live independently (Demirbilek et al., 2004). These include features such as accessible door handles or lower shelving. These features are becoming more important with the aging population and the greater life expectancies.

The challenge with universal design as a planning approach is that it is usually applied at the individual unit scale, such as a dwelling or public building. Most older dwellings were not designed with accessible or universal design principles in mind, and now have to be retrofitted

to meet the needs of older adults and those with disabilities. These specialized adaptations can be costly, particularly when it involves renovating existing buildings (Carr, 2013). New buildings and public spaces, on the other hand, are subject to more rigorous accessibility standards and design guidelines. Universal design is often included as part of municipal urban design guidelines or listed as one of the criteria for site plan control. Universal design policies are also found in Official Plans under general urban design policies or accessibility policies that seek to ensure barrier-free spaces.

2.9: Accessibility Planning

Accessibility has been a part of physical planning for the past 50 years (Batty, 2009); however, it has become more extensively studied in recent years since the passing of the Americans with Disabilities Act (ADA) in 1990. The ADA prohibits discrimination and mandates equal opportunities for those with disabilities in employment, access to services, communications and transportation (United States Department of Justice: Civil Rights Division, n.d.; United States Department of Labor, n.d.). Accessible designs seek to remove barriers that limit people with disabilities and older adults with age-related impairments from participating in social activities and having access to health and social services (Ontario, 2013). Accessible designs set specific quantitative standards such as: the slope of sidewalks along a curb; the width of the curb ramp; and stair, door and hallway height and width standards, just to name a few (Levine, 2003).

Accessible design is defined as “design that meets prescribed code requirements for use by people with disabilities” (Storey, 1998, p.4). The following key principles of accessibility

planning were derived from Ontario's accessibility standards (Ontario, 2008; Ontario, 2012) and a book entitled "Universal Design New York" (Levine, 2003). This book compares and contrasts accessibility planning and universal design on a wide variety of design elements such as ramps and stairs, hallways and corridors and street crossing. The key principles of accessibility planning include:

- Minimum number of accessible parking spaces
- Accessible pathways
- Elevator requirements in all multi-storey buildings
- Stairs height and width standards
- Door and hallway height and width requirements
- Stable, firm, and slip-resistant walking surfaces
- Slope and width requirements for curb ramps along street crossings
- Accessibility requirements for emergency exits or accessible areas of rescue assistance.
- Wayfinding to identify accessible elements
- Standards for sign content (width to height ratio, braille, high contrast letters, etc.)
- Visual and audio alarms
- Accessible seating
- People with disabilities are permitted a guide dog or a support person
- Staff, volunteers and educators are trained on the accessibility policies
- Accessible formats and communication supports
- Transportation service requirements (signage, lighting, handrails, courtesy seating, etc.)

(Ontario, 2008; Ontario, 2012; Levine, 2003).

The literature on accessibility planning focuses primarily on accessibility for people with disabilities. In order to fully understand the accessible literature, it is important to make a distinction between impairment, disability and accessibility. An impairment is an abnormality of a bodily function or structure which has unavoidable impacts (Lid, 2014). Impairments can take various forms: physical, cognitive, sensory and chronic health, and each has its own set of limitations. Disabilities refer to the limitations on people with impairments to participate in activities to the same extent as others, due to physical and social barriers that hinder their full participation; disabilities can be visible or invisible, short or long term (Lid, 2014; UBCM, 2010). Someone may have an impairment, but that does not necessarily mean that they are disabled. Disabilities are socially constructed through barriers in society that do not accommodate for the diverse needs of people with impairments. Disabilities often stem from the fact that architects and designers tend to focus on the aesthetics and decorative elements of the built environment, rather than the practicality of its use (Hall & Imrie, 2001). The built environment is generally designed to satisfy minimum technical standards and reduce costs by using off-the-shelf, standardized fixtures. Buildings and public spaces are often designed for the average person (Hall & Imrie, 2001).

In Canada, policies targeting people with disabilities have been implemented at all levels of government. At the federal level, the government established funding in 2007 to enable accessibility in workplaces and communities (Canada, 2015). The federal grants support the capital costs of renovations and construction geared towards improving accessibility (Canada, 2015). The fund covers physical improvements such as automatic door openers or retrofitting washrooms (Canada, 2015). The federal government also offers long-term savings plans for

Canadians with disabilities (Government of Canada, 2014). In 2005, the Province of Ontario mandated the Accessibility for Ontarians with Disabilities Act (AODA) which sets out mandatory accessibility standards as Ontario strives to be barrier-free by 2025 (Ontario Ministry of Community and Social Services, 2012). There are five accessibility standards in place: customer service, employment, information and communications, transportation and the design of public spaces (accessibility standards for the built environment) (Ontario, 2013). Building designs must follow the technical standards set out in the Ontario Building Code (Ontario, 2013). The Ontarians with Disabilities Act (2001) and the Accessibility for Ontarians with Disabilities Act (2005), states that municipalities with a population of 10,000 people or more must have a municipal accessibility advisory committee that works with local councils to identify and remove barriers for people with disabilities (Ontario, 2013). These committees must consist primarily of members with disabilities (Ontario, 2013).

Since the passing of the AODA, many public buildings and businesses in Ontario have been retrofitted to accommodate those with disabilities by installing wheel chair accessible ramps, automatic doors, accessible washrooms and navigating aids. Accessibility planning targets primarily the physical environment through standardized design requirements yet does little to address the social environment and provision of community support and health services. Although most public buildings and spaces are now accessible, most homes are not equipped with the basic adaptations necessary for people with disabilities.

Accessibility planning is a key component of age-friendly community planning due to the large portion of older adults that are faced with age-related impairments. These impairments can

take various forms: physical, cognitive, sensory and chronic health, and each has its own set of limitations. In 2012, the government of Canada reported 3.8 million Canadians with disabilities, which represents 3.7% of the total population (Employment and Social Development Canada, 2015). Statistics on older adults indicate that 26.3% of Canadians aged 65-74 years of age and 42.5% of those aged 75 years of age and older reported a disability, demonstrating a large increase with age (Employment and Social Development Canada, 2015). These figures are anticipated to rise with the aging baby-boom generation and longer life expectancies (Ontario, 2013). The aging population will have many design implications as most spaces are designed for the average person and therefore do not meet the needs of older adults and those with disabilities. The Union of British Columbia Municipalities (UBCM) published a guide for creating combined age-friendly and disability-friendly Official Plans entitled 'Planning for the Future: Age-friendly and Disability-friendly Official Community Plans' (UBCM, 2010). According to UBCM, the most effective way to improve community accessibility for older adults and those with disabilities is to incorporate accessibility and age-friendly initiatives into official plans. Municipal Official Plans commonly state accessibility as one of the municipality's key principles or goals. In addition they stressed the importance of getting older adults and those with disabilities engaged in the planning process in order to better understand their limitations.

2.10: Transit-Oriented Development

In 1993, Peter Calthorpe, an urban planner, presented the term transit-oriented development (TOD) in his book entitled "The Next American Metropolis: Ecology, Community and the American Dream" (1993). However, the concept of transit-oriented development dates back to

the 19th century and early 20th century in transit villages that featured all the characteristics of contemporary TODs with walkable, mixed-use developments that were centered on streetcar or rail lines (TCRP. 2004). Following the Second World War, this form of development gradually disappeared and was replaced by highway networks that supported automobile dependant suburban neighbourhoods. Since then, TODs have made a reappearance as planners seek to address the rapid population growth, contain urban sprawl, promote sustainability and create more liveable and walkable neighbourhoods (Boschmann et al., 2013; CMHC, 2009; TCRP, 2004).

There is no universal definition for transit-oriented development. TODs are context specific and market dependant and therefore are defined differently in each municipality based on the population size and density (TCRP. 2004). Generally speaking, TODs are high density, pedestrian-friendly, mixed-use developments that provide access to a variety of transportation alternatives (Boschmann, et al., 2013; CMHC, 2009; Wey, 2013). Unlike some of the other planning paradigms such as Smart Growth and universal design, transit-oriented development does not have a standard list of key principles. The following key principles were derived from a number of grey literature sources:

- Moderate and high density (compact) mixed-use developments (highest densities are closest to the transit stations)
- Location along transit systems/near transit stations
- Located within a short walk from transit stops or environment that encourages walking
- Provide a variety of transportation alternatives

- Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments
- Encourage transit ridership yet does not exclude the car (reduce automobile use). Limit parking or strategically locate parking to encourage transit ridership. The environment encourages people to walk more and drive less

(Canada Mortgage and Housing Corporation & Gibson Library Collections, 2009; City of Waterloo, n.d.; Transit Cooperative Research Program, 2004).

TODs are designed to maximize access to public transit, promote walking and biking as a means of transportation and reduce automobile dependencies (Boschmann et al., 2013; CMHC, 2009; TCRP, 2004; Wey, 2013). Although TODs strive to increase transit ridership, they do not seek to exclude the automobile (TCRP, 2004). TODs provide access to a number of public transit alternatives, whether bus, subway, light rail and/or rail (CMHC, 2009). These developments encourage walking and biking as a means of transportation, through the design of pedestrian friendly environments and public spaces (Boschmann et al., 2013; CMHC, 2009; TCRP, 2004; Wey, 2013). TODs seek to enhance quality of life by providing vibrant public spaces that encourage people to interact and socialize (TCRP, 2004). The proximity to transit stops helps market these developments, many of which are priced at a premium. Buildings are generally located within 800 meters of a transit stop or a 10-minute walk, which represents the longest people are typically willing to walk (CMHC, 2009). TODs support a variety of dwelling types and price ranges, in small and large scale developments, with a range of densities (CMHC, 2009). TODs must have a minimum of 22 units per hectare in order to support light rail, yet most TODs have over 100 units per hectare, with the higher densities

located closest to the transit nodes (CMHC, 2009). The viability of public transit is contingent on high population densities; the opposite is also true as the availability of transit in turn impacts development patterns (CMHC, 2009). According to the Transit Cooperative Research Program (2004), TODs tend to appeal to the lifestyle preferences of childless couples, empty-nesters and those from Generation X, born after the baby-boom generation.

TODs require collaboration between the developer and the municipality. The municipality provides flexible zoning and reduced parking requirements, while the developer is required to integrate certain amenities into their designs, such as pedestrian walkways to transit stations (CMHC, 2009). Municipalities typically assemble and rezone land located near transit stations and designate it as a TOD zone. Municipalities have to adjust their zoning height, density, land uses and parking policies, as well as urban design guidelines to accommodate for growth along the future light rail transit corridor. Development in these areas must be within a maximum distance to the transit stop and meet specific requirements such as minimum floor area ratios.

There are some similarities between the concepts presented in age-friendly communities and transit-oriented developments. Both AFCs and TODs seek to maximize access to public transportation by providing a variety of transportation alternatives. They also touch upon proximity and access to public transit stops and stations in order to reach key destinations. The aging population brings about numerous transportation requirements: older adults require affordable, accessible, reliable, safe and convenient modes of transportation that promote active aging, mobility, independence and a strong quality of life (Boschmann et al., 2013; World Health Organization, 2007). Mobility is a key factor in determining older adults' ability

to participate in social and civic engagements, and their ability access to health care services (World Health Organization, 2007). Access to public transit is particularly important for older adults who lose their license yet wish to age in place (Boschmann et al., 2013). Age-friendly transportation initiatives offer specialized services for older adults, such as: handicap parking spots and priority seating in accessible vehicles, taxis and buses.

Neighbourhoods can be designed to promote active aging by favouring walking and discouraging driving (Boschmann et al., 2013). Walking is becoming increasingly important as older adults are now striving to be more physically active. People are three times more likely to walk when they live in mixed-use neighbourhoods as opposed to single use, automobile dependant suburbs (Wey, 2013). In Boschmann et al. (2013)'s study of older adults in Denver, Colorado, they found that older adults, living in TODs, make fewer and shorter trips by automobile than other older adults and they are more likely use alternate forms of transportation.

A number of large municipalities across Canada and the United States have developed transit-oriented development strategies to promote growth and development along transit corridors, and encourage alternate forms of transportation. Transit-oriented development is often viewed as a popular planning tool to promote Smart Growth and sustainable developments (NCHRP, 2005; TCRP, 2004). In some cases, municipalities have established TODs to simulate economic development in declining neighbourhoods and promote affordable housing (TCRP, 2004). However, TODs are generally only successful in large municipalities that have the population densities to support this costly form of development.

2.11: Age-Friendly Communities

The age-friendly community movement is fairly recent with the launch of the World Health Organization's Global Age-Friendly Cities Guide in 2007; however, the concept can be traced back over 50 years, to the development of environmental gerontology, which examined the relationship between people and their environment, and its impact on quality of life (Lewis & Groh, 2016; Ontario, 2013). In the 1950s and 1960s, environmental gerontology was focused primarily on older adults' immediate surrounding, such as their homes, where those aged 70 years of age and older spend up to 80 percent of their time (Buffel et al., 2012; Lewis & Groh, 2016). In the 1970s, the focus shifted towards examining the ways in which the physical environment as a whole influences older adults and the aging process (Lewis & Groh, 2016, Phillipson, 2011).

In 1973, Lawton and Nahemow introduced the press-competence model which states that an individual's behaviour is dependent upon the relationship between the demands imposed by the physical and social environment (press) and their physical health, mental well-being and cognitive abilities (competence) (Colangeli, 2010; Lewis & Groh, 2016; Ontario, 2013; Phillipson, 2011). The person-environment (P-E fit) concept has helped identify the mismatch between people's needs and their physical and social environments (Phillipson, 2011). Challenges arise as people age and their competence no longer meets the demands of their physical environment (Lewis & Groh, 2016). Rather than moving, older adults can adapt their homes to improve accessibility by adding a ramp to the front door or installing a chairlift. Although older adults can address the environmental presses that result from physical and

mental changes, social presses, that arise from community members' attitudes and behaviour towards older adults, are more difficult to manage (Lewis & Groh, 2016; Phillipson, 2011).

Several planning approaches are based on the P-E fit model, including age-friendly communities and universal design, that both seek to reduce environmental presses so that older adults can remain independent and age-in-place (Ontario, 2013). Age-friendly communities require a strong person-environment relationship in order to meet the demands of an aging population. Greenfield et al., (2015) explained how AFCs reflect a paradigm shift from focusing on individuals to communities as a whole. In the past, policies geared towards older adults were focused on promoting aging in place by providing supportive environments and services targeting older adults in their homes (Greenfield et al., 2015). In contrast, AFCs look at the community as a whole and seek to transform the broader physical and social environments in order to enhance older adults' ability to age-in-place (Greenfield et al., 2015). In age-friendly community planning, the concept of the P-E fit model was broadened to recognize the role of the community environment in influencing older adults' ability to remain active and engaged in the community (Colangeli, 2010; Lewis & Groh, 2016). This broader perspective is also associated with other similar concepts, such as: livable communities, lifelong communities, lifetime neighbourhoods, aging in community, retirement community, communities for all ages, elder-friendly communities and age-friendly communities (Greenfield et al., 2015; Lewis & Groh, 2016).

In the 1980's, the terms 'age-in-place' and 'aging in the community' were used in gerontology to refer to older adults who stay in their home or within their community as they age

(Colangeli, 2010; Lui et al., 2009). In order to stay in their home, older adults may require special housing adaptations to accommodate their changing needs, such as a wheelchair accessible ramp and bathroom grab bars, and/or the delivery of services such as home health care and meal-on-wheels (Colangeli, 2010). As illustrated above, several key theoretical frameworks within the field of environmental gerontology are central to the development of age-friendly communities (Colangeli, 2010; Lewis & Groh, 2016; Moulaert et al., 2016).

In the 1990s and 2000s, the WHO launched a number of policy initiatives that provided the foundation for the development of age-friendly communities (Buffel et al., 2012). A common theme was the concept of ‘active aging’ which was first developed in 1999 by the United Nations during their Year of Older People and further expanded by the WHO in 2002 (Buffel et al., 2002; Phillipson, 2011). The WHO defined active aging as: “the process of optimizing opportunities for health, participation and security over the life course in order to enhance quality of life as people age” (WHO, 2002, p.12). A number of similar terms have also been used, including: successful aging, productive aging, healthy aging, aging well (Moulaert & Garon, 2016). The concept of active aging is not simply about older adults’ ability to remain physically active and continue to work, rather it seeks to ensure that older adults can continue to participate in civic, social, cultural and economic activities (Buffel et al., 2012; Phillipson, 2011; WHO, 2002). There are a number of interconnected determinants that influence active aging, including: behavioural, personal, physical, social, economic, health and social determinants (Kalache, 2016).

In 2005, the World Health Organization (WHO) introduced the Global Age-Friendly Cities Project at the XVIII World Congress of Gerontology in Rio de Janeiro, Brazil (Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; World Health Organization, 2007). In 2007, the age-friendly community movement gained worldwide momentum when the WHO developed the ‘Global Age-Friendly Cities: A Guide’ (2007) and an associated ‘Checklist of Essential Features of Age-Friendly Cities’ (2007b) which provide guidelines for governments and organizations seeking to make their cities more age-friendly (World Health Organization, 2007). The WHO Guide has since been translated into five languages in order to facilitate the development of AFCs around the globe (WHO, 2017). The WHO guide is often referred to as the “Vancouver Protocol” in recognition of the Province of British Columbia’s support in preparing the protocol (Moulaert & Garon, 2016; WHO, 2007c). The impetus for the WHO’s AFC movement was as a result of the global trend of population aging and urbanization (World Health Organization, 2007). According to the World Health Organization (2007), “the number of people aged 60 and over as a proportion of the global population will double from 11% in 2006 to 22% by 2050. By then, there will be more older people than children (aged 0–14 years) in the population for the first time in human history” (p. 3).

What are age-friendly cities? According to the World Health Organization (2014b), they are places where people of all ages can engage in community activities and everyone is treated with respect. Age-friendly communities provide accessible, inclusive and age-friendly physical and social environments, programs and services to meet the needs of the older population with varying needs and capacities (Ontario, 2013; World Health Organization, 2007). These communities promote accessibility, mobility, independence, healthy and active

ageing. The design of the built environment, such as pedestrian friendly sidewalks and trails, can promote active aging among people of all fitness levels and functional abilities by encouraging walking and biking, and therefore promoting physical activity in daily activities (Environmental Protection Agency, 2009). Since active ageing is a lifelong process, age-friendly communities are designed to meet the needs of people of all ages (World Health Organization, 2007). Improvements made to the social and built environment can benefit all members of society, including: older adults, parents with young children, injured and disabled people (Ontario, 2013; World Health Organization, 2007).

The World Health Organization (2007b) published a checklist of essential age-friendly features designed for individuals and organizations seeking to make their cities more age-friendly. This detailed checklist was summarized into key principles from each of the eight areas of city living, and are as follows:

- Pleasant, clean and safe environments
- Pedestrian-friendly walkways and cycle paths
- Accessible and age-friendly buildings
- Accessible, affordable, reliable and frequent public transit routes
- Transit routes are well connected and reach key destinations
- Affordable and accessible priority parking spots and pick-up areas
- Range of affordable housing designed to accommodate the needs of older adults in order to promote aging in place
- Access to a range of affordable social events and activities to appeal to the diverse population of older adults

- Encourage civic participation among older adults and include them in decision-making
- Range of volunteer, employment and entrepreneurial opportunities for older adults
- Widespread distribution of information in age-friendly formats and design
- Offer a wide range of accessible health and social support services, including home care and residential care facilities

(World Health Organization, 2007b).

As illustrated in the checklist above, age-friendly community initiatives address both the physical and social environments, as well as the relationship between them (Lewis & Groh, 2016). As stated by the WHO, “older people in particular require supportive and enabling living environments to compensate for physical and social changes associated with ageing” (World Health Organization, 2007, p.4). The World Health Organization’s age-friendly community initiatives have been subdivided into the following eight domains which target both the social and physical environment, they include: outdoor spaces and public buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information and community support and health services (World Health Organization, 2007). These eight domains are often refined to meet the needs of the local community (Warth, 2016).

Age-friendly community planning continues to evolve to meet the specific needs of the cities and communities. The latest trend in AFC planning is a shift towards dementia-friendly spaces due to the large increase in people living with dementia (Biggs & Carr, 2016). According to Biggs & Carr (2016), the number of people world-wide living with dementia is anticipated to

increase from 44 million in 2013 to 135 million in 2050. Those with dementia face the loss of cognitive functions and physical decline (Biggs & Carr, 2016). Dementia-friendly spaces can take various forms. They started as closed therapeutic institutions and have expanded to self-contained gated communities with enhanced wayfinding and accessibility (Biggs & Carr, 2016). A commonly cited example is the Hogeweyk village, in the Netherlands; which cares for 150 older adults living with dementia (Biggs & Carr, 2016).

In 2010, the WHO launched the Global Network of Age-friendly Cities and Communities (GNAFCC) in 33 cities and this membership has since grown to over 300 communities worldwide (Moulaert & Garon, 2016, WHO, n.d.). These communities have become members thanks to their commitment to continuously improve the age-friendliness of their community, exchange information on their experience, promote active aging and endorse a strong quality of life for older adults (Ontario, 2013; World Health Organization, 2014). Through this membership, municipalities can exchange information and resources, partner with other municipalities, as well as obtain training and guidance from a network of specialists (World Health Organization, 2009). In addition, the WHO developed a global database of age-friendly practices which provides a number of examples of ways in which communities have sought to become age-friendly (Warth, 2016; WHO, 2014).

In Canada, most provinces have incorporated age-friendly community planning into their public policy agendas and provided funding and assistance for AFC initiatives (Golant, 2014). Although age-friendly communities are not mandated as legislation in Ontario, the province has published a guideline entitled ‘Independence, Activity and Good Health: Ontario’s Action

Plan for Seniors' (2013b) which promotes the development of age-friendly communities and sets out initiatives to ensure older adults have access to programs and services that promote a safe, healthy, independent and active life. The province of Ontario has also developed a planning guide, entitled 'Finding the Right Fit: Age Friendly Community Planning' (2013) which makes recommendations for the development of accessible and inclusive older adult communities. More recently, the Province of Ontario has included age-friendly initiatives in the Growth Plan for the Greater Golden Horseshoe (Ontario, 2017). The Growth Plan acknowledges the aging population and the need for more age-friendly environments, through the provision of a range of housing options, access to health care and age-friendly community design (Ontario, 2017).

Over seventy municipalities, Counties and Regions across Ontario have undertaken AFC initiatives (Senior Health Knowledge Network, n.d.). The Province of Ontario, through the Ontario Seniors' Secretariat, established an Age-friendly Community Planning Grant which helped support 56 age-friendly initiatives across the province (Ontario Seniors' Secretariat, 2015). These grants ranged from \$25,000 for small communities to \$50,000 for larger communities (Ontario Seniors' Secretariat, 2015). Other communities were successful in obtaining funding through the Ontario Trillium Foundation. A number of these grant recipients would not have been able to embark on their age-friendly initiatives had it not been for the province's financial support. These communities are currently at various stages in the age-friendly community planning process; some municipalities are working towards establishing an age-friendly committee and assessing the needs of their community, whereas

others have prepared an AFC plan and are in the process of implementing their short, medium and long term initiatives.

AFC initiatives vary greatly between communities based on the local economic, political, social, cultural and demographic characteristics of the community. Most communities have established AFC committees that have led the AFC planning process from the community assessment stage to plan implementation. These committees commonly consist of: members of council, municipal staff, citizens, health care providers, staff from the local public library, and representatives from community organizations such as Meals on Wheels and the United Way. One of the key characteristics of AFC planning is the active involvement of older adults throughout the planning process from participating in AFC surveys and focus groups, to evaluating draft plans and being a member on the AFC committee (Plouffe et al., 2016).

AFC initiatives are led by a variety of municipal divisions in the various communities, such as: community services, social services, recreation, planning and development, library services, special projects coordinator, accessibility coordinator or in many cases, a private consultant. Community organizations and volunteer groups are often the key players in the success of AFC initiatives. In a number of cases, the planning department is not involved in the community's AFC planning endeavors. Some communities have developed their AFC plans around the WHO's 8 domains of an age-friendly city, whereas others have tailored their AFC domains to better meet the needs of their local community. Rural communities face their own unique challenges due to the lack of age-friendly housing, transportation infrastructure, and health care services. The Federal, Provincial and Territorial Ministers Responsible for Seniors published

the “Age-Friendly Rural and Remote Communities: A Guide” (2007) to guide the development of age-friendly initiatives in rural communities. Due to the number of rural and remote communities in Canada, the ‘C’ in AFC, which represents ‘cities’ according to the World Health Organization (2007), was changed to ‘communities’ to reflect communities of all sizes (Miller et al., 2011).

The Association of Municipalities Ontario published a discussion paper entitled “Strengthening Age-friendly Communities and Seniors’ Services for 21st Century Ontario” (2016) which discusses the role of municipalities in creating age-friendly communities and providing services to older adults. The report discusses current AFC initiatives across Ontario and provides a series of recommendations that calls on the Province to provide additional support to municipalities.

A number of resources have been established to assist municipalities in become more age-friendly. The Ministry of Seniors Affairs (MSA) partnered with the Seniors Health Knowledge Network, the University of Waterloo, and the Ontario Interdisciplinary Council on Aging and Health to administer the Age-friendly Outreach Initiative in order to foster partnerships among municipalities, develop educational resources and establish a knowledge exchange network for communities across Ontario (Senior Health Knowledge Network, n.d.). The initiative is also seeking to highlight success stories and identify challenges. In addition, the Seniors Health Knowledge Network has a knowledge broker whose role is to connect municipalities with the appropriate resources and partners to become more age-friendly. Furthermore, a number of regional networks have been established, such as the Southern Ontario Age-friendly Network

(SOAFN), as a means to share knowledge and resources regarding age-friendly community initiatives (Senior Health Knowledge Network, n.d.).

2.12: Conclusion

This chapter provided a brief history of each of the selected planning paradigms, listed the key principles, discussed the key concepts, explained how the initiatives are implemented and provided a critical reflection of the planning paradigms. In addition, this chapter reviewed the theoretical concepts that form the basis of age-friendly community planning and discussed how many AFC initiatives overlap or are similar to principles set out in other well-known planning paradigms. These similarities will be further discussed within the context of the policy document analysis and the in-depth interviews in the Findings Chapter. This chapter also explained how the literature review lay the foundation for this study's two research questions.

The following chapter, the Methods Chapter, sets out the detailed methodology used for the literature review, policy document analysis and interviews and explains how these methods were used to address this study's research questions.

Chapter 3

Methodology Chapter

3.1: Introduction

This chapter outlines the methods used to address the study's research questions, which are:

- 1) To what extent do established planning principles overlap with age-friendly community planning principles?
- 2) Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

The first research question was addressed using a multi-phased qualitative approach, specifically through the literature review, policy document analysis and in-depth interviews; and the second question was addressed exclusively through interviews with professional planners. This chapter examines in detail the methods of data sampling, collection and analysis for each of the selected methods as well as the steps taken to ensure methodological rigour. Appendix 1 outlines the detailed research strategy used in this study.

The first section details the literature review strategy which provided a foundation for this research, identified gaps in the literature and listed the key principles from the eight selected planning paradigms, which were later used as codes for the policy document analysis. The second section, details the methodology used in the policy document analysis, specifically the reasons for selecting the City of Waterloo as a case study and a detailed examination of the content analysis methodology used to analyze the City of Waterloo's Official Plan. The

following section examines the methods of data collection and analysis for the semi-structured in-depth interviews with planning professionals. The in-depth interviews sought to further investigate whether planning professionals have noticed a perceived overlap or conflicting priorities between AFC initiatives and other mainstream planning approaches and validate whether joint policies are a legitimate policy issue. The last section outlines the steps that were taken to ensure methodological rigour throughout this study, through an examination of the qualitative standards of credibility, transferability, dependability and confirmability.

3.2: Literature Review Strategy

The initial stage in this research project involved a comprehensive literature review of age-friendly communities. Note that although the literature review was initially conducted on age-friendly communities, the selected planning frameworks were presented in chronological order in the literature review chapter in order to illustrate the evolution of the planning profession over time.

A variety of academic and grey literature sources were reviewed to identify the theoretical concepts underpinning the notion of age-friendly communities, critically evaluate existing AFC research, identify gaps in the AFC literature and provide direction for this research. The academic literature search was done using the inter-university database, Scholars Portal Racer, to identify key publications. Key word searches included: (age-friendly city OR age-friendly cities OR age-friendly community OR age-friendly communities). The search included publications from all years, in both English and French, and comprised various formats such as books, ejournals, online articles, printed articles and reports. The search was refined to

exclude irrelevant subjects, and certain formats such as conference proceedings and reviews. The titles and abstracts were then screened to identify the most relevant academic literature. Key topics included: development and evolution of AFC, physical and social characteristics that make a city age-friendly, AFC initiatives around the globe and critical assessments of AFC initiatives, just to name a few. In addition, the reference lists of the selected publications were reviewed in order to identify supplementary relevant sources. Most of the academic literature was from the field of planning, yet some key studies from the field of gerontology were also included. The vast majority of the literature originates from Canada; however, a few sources are from the United States, Europe, Australia and worldwide organizations such as the United Nations and the World Health Organization. Since age-friendly community planning is a relatively new movement, new literature is continuously being published on the topic. As a result, the researcher had to stay on top of the newest publications, as some key books and articles were published after the initial literature review was conducted and were later added to this study.

The second phase of the literature review involved a literature review of the seven selected planning frameworks that have some overlap and/or similarities with age-friendly community planning, these include: Smart Growth, transit-oriented development, universal design, accessibility planning, healthy communities, sustainable communities and New Urbanism. Five of the seven selected planning approaches were identified in the literature as sharing common principles with AFC, particularly: Smart Growth, universal design, healthy communities, sustainable communities and New Urbanism (Colangeli, 2010; Golant, 2014; Miller et al., 2011). Two other planning approaches were identified independently as having

similarities with AFC and were therefore added to this study, specifically transit-oriented development and accessibility planning. In addition, any literature that discussed the link between the selected planning approaches and older adults was also examined, for instance older adults' travel behaviour in transit-oriented developments, and promoting Smart Growth and active aging. As described in Section 2.3, some of the planning paradigms that were identified by Miller et al. (2011) for having similarities with AFC were excluded from this study, specifically: child-friendly cities, leadership in energy and environmental design for neighbourhood development (LEED ND), World Health Organization safe communities, heat resilient communities and active living communities. These planning frameworks were excluded due to: 1) policy salience; 2) some planning frameworks are subsets of other planning approaches; and 3) the scope of this research had to be narrowed down due to limited resources and time constraints.

Due to the wide array of planning paradigms selected for this review, as well as the sheer volume of literature on each approach, this portion of the literature review was not as comprehensive as the AFC literature review which formed the foundation of this study.

Although a similar search strategy was used, only the most relevant academic sources and limited grey literature documents were selected for the review. For instance, for the literature review on Smart Growth, many sources referenced the Smart Growth Network's ten principles of Smart Growth. Therefore, rather than referencing the other sources that quoted the Network, the Smart Growth Network itself was used as primary source of information on Smart Growth. Both academic research and grey literature sources were used from each of the selected planning paradigms, including: federal, provincial and municipal plans, policies and

reports regarding current programs and services, studies, guides, websites, books and peer reviewed journal articles. The purpose of this portion of the literature review was to: present an overview of how the planning paradigms were developed and who developed them, identify the core principles that define each planning approach and evaluate how they relate to age-friendly community planning. These key principles were later used to create the coding scheme used in the policy document analysis, which will be presented in the following section.

The literature review was used both as a means to obtain background information on the research topic and as a research method to illustrate the overlap between the planning frameworks. In order to illustrate the overlap, this study used the methodology employed by Landorf et al. (2008). Landorf et al. (2008) conducted an evaluation of urban sustainability as it relates to aging-in-place. In order to assess three urban sustainability assessment tools for evidence of aging-in-place, Landorf et al. (2008) coded each criterion as explicit (E), implicit (I), or not evident (NE), based on whether or not the assessment tool explicitly addressed the issues identified in the study. The Landorf et al. (2008) methodology was employed in the literature review analysis as well as the policy document analysis, discussed in the section 3.3.2.

Based on the findings from the literature review, a table was created, see Appendix 4, which illustrates the overlap between age-friendly community planning and the seven selected mainstream planning approaches. The essential features of an age-friendly community are listed on the left-hand side and the seven selected mainstream planning approaches are listing on the top row. The list of essential features of an age-friendly community were derived from

the World Health Organization's AFC checklist (World Health Organization, 2007b). Each planning approach was coded as explicit (E), implicit (I), or not evident (NE) in the table, based on whether or not they addressed the essential features of an age-friendly community in the literature. The items were coded as explicit if the planning approach specifically referred to the AFC principle, implicit if the planning approach reflected the intent of the principle, and not evident if the principle was not addressed in that planning approach. For instance, universal design was assigned an "I", for implicit, for the objective "age-friendly buildings", as it does not specifically refer to making buildings more user friendly for older adults, yet through its flexible, adaptable and interchangeable designs, it seeks to make environments more accessible to all, regardless of their age or physical and cognitive abilities. The results from this analysis were tallied at the bottom of the table to clearly illustrate which planning approach shares the most similarities with age-friendly community planning.

3.3: Policy Document Analysis

The policy document analysis was one of the methods used to address the study's research question: To what extent do established planning principles overlap with age-friendly community planning principles? The policy document analysis was designed to validate the findings from the literature review by determining whether there is in fact an overlap or similarities between AFC policies and mainstream planning approaches as stated by Colangeli (2010), Cerda & Bernier (2013), Golant (2014) and Miller et al. (2011). These findings were later supplemented by the discussions held during the in-depth interviews with planning professionals. The policy document analysis involved two forms of qualitative content analysis of the City of Waterloo's Official Plan, specifically: 1) analysis of the similarities and

overlap between AFC planning and established planning frameworks; and 2) analysis of the City of Waterloo's Official Plan objectives.

3.3.1: Case Study of the City of Waterloo

The policy document analysis involved a case study of the City of Waterloo, Canada. Case studies provide in-depth analysis of one case or a limited number of cases (Blatter, 2008; Putney, 2010). This versatile method that can be used with qualitative or quantitative data depending on the nature of the research questions (Putney, 2010). The City of Waterloo was selected as a case study for a number of reasons. In 2012, the City of Waterloo was designated a member of the World Health Organization Global Network of Age-friendly Cities and Communities for its commitment to improving age-friendliness (Ontario, 2013). In order to maintain this membership, the city must demonstrate continuous improvement towards becoming more age-friendly (City of Waterloo, 2015). Through this relationship, the City of Waterloo benefits from access to resources and a network of experts that provide guidance and support (City of Waterloo, 2015). The City of Waterloo has already taken many steps in order to become more age-friendly. They have established an advisory committee to the mayor that undertook a comprehensive needs assessment, hosted public forums and distributed surveys in order to determine their strengths and areas of concern that must be addressed (Ontario, 2013). Subcommittees analysed the data and developed a report outlining their recommended action plan items, associated timeline and partners (City of Waterloo, 2012; Ontario, 2013). The benefit of selecting the City of Waterloo over some of the other communities that have recently received funding, is that Waterloo is a little further ahead in the implementation process.

3.3.2: Content Analysis Methodology

Content analysis is one of many research methods used to analyze documents or oral materials and interpret their meaning (Elo & Kyngas, 2007; Elo et al., 2014; Hsieh & Shannon, 2005). This method seeks to identify themes or patterns through the process of coding and uses the resulting categories to build a model or conceptual map (Elo & Kyngas, 2007; Hsieh & Shannon, 2005). This flexible research method can be used with either quantitative or qualitative data and using either an inductive or deductive approach, which is determined based on the purpose of the study (Elo & Kyngas, 2007). An inductive approach is used when there is little former knowledge on a topic and as a result the codes are derived from the data; whereas a deductive approach seeks to test previous theories or models within a new context and uses previous knowledge to develop the codes (Elo & Kyngas, 2007).

Regardless of the approach, all qualitative content analysis follows a similar procedure. Elo & Kyngas (2007) and Elo et al. (2014) presented a three-phase approach which includes: preparation, organization and reporting; whereas Hsieh & Shannon (2005) outlined a more detailed seven step process that involves: framing the research questions, determining the sample selection, defining the categories, delineating the coding procedure, applying the coding process, assessing the trustworthiness of the process and analyzing the findings (Hsieh & Shannon, 2005).

The preparation phase begins by selecting a representative sample (Elo & Kyngas, 2007). In this study, the City of Waterloo's Official Plan was selected as the unit of analysis as it is the guiding document that states how development will occur within the city over a 25-year period.

The City's Official Plan provides a comprehensive overview of the municipality's long-term planning goals and provides a framework for the City's zoning by-laws and other local regulations (Ministry of Municipal Affairs and Housing, 2010). As stated in the Official Plan: "this Official Plan contains principles, objectives, and policies designed to direct the form, extent, nature and rate of growth and change within the municipality to the year 2031" (City of Waterloo, 2014, p.2). Official Plan policies are designed to ensure that future development meets the needs of the entire community (Ministry of Municipal Affairs and Housing, 2010).

The analysis phase varies based on the type of approach, inductive or deductive, yet there is no systematic procedure for analyzing the data (Elo & Kyngas, 2007). Hsieh & Shannon (2005) examined three forms of qualitative content analysis: conventional, directed and summative, which differ based on the type of approach whether inductive or deductive, the origins of the codes and the coding schemes (Hsieh & Shannon, 2005). Based on the nature of the research questions, this study used a directed form of qualitative content analysis that employed a deductive approach to analyze the City of Waterloo's Official Plan.

The directed approach is a flexible method for developing and extending existing theories that are either incomplete or can benefit from additional description (Hsieh & Shannon, 2005). As stated by Hsieh & Shannon (2005), the objective of this approach is to "validate or extend conceptually a theoretical framework or theory" (p.1281). Using a directed approach, existing theory and prior literature are used to guide the development of the initial coding scheme and determine the connection between the codes prior to analyzing the text (Hsieh & Shannon, 2005). The data is then reviewed and coded using the predetermined coding scheme (Elo &

Kyngas, 2007). In this study, the coding scheme was developed based on previous theories, specifically the key principles guiding each of the eight selected planning paradigms. Some of the planning paradigms have their planning principles clearly listed such as universal design and Smart Growth; whereas others required a more detailed review of the literature in order to identify the guiding principles, which was the case for accessibility planning. Each principle was assigned a code using the first letter of each word in the title of the planning paradigm plus a number to distinguish each principle. For example, the first principle listed in New Urbanism was assigned the code NU1. The full list of codes is presented in a table in Appendix 2.

The Official Plan was copied into a word document so that the codes could easily be added to the document. The plan was coded sentence by sentence unless the sentence was very long and contained multiple codes, in which case the sentence was split up into sections. The entire Official Plan was analyzed; however, certain sections and chapters did not apply such as the special provisions chapter and the glossary. The codes were added in parentheses and highlighted in red lettering for easy identification. The codes were then assessed using Landorf et al.'s (2008) methodology, described in Section 3.2, based on whether they were explicitly or implicitly stated. The codes 'E' for explicit and 'I' for implicit were added at the end of each code, for instance (NU1-E). There was the odd case where a sentence referred to all principles from a particular planning paradigm, therefore the code 'all' was added to the end of the code, for example (UD-all) which means all components of universal design were present. The coding scheme was adjusted and restarted a number of times as some of the principles had not been broken down enough, meaning that certain codes represented more than one concept.

Each time that adjustments were made to the coding scheme, the coding process had to be restarted from the beginning.

The next step involved finding the most appropriate method to present the results. This study employed one of the methods described by Hsieh & Shannon (2005) which involved using examples as descriptive evidence. Throughout the coding process, a number of sentences were highlighted that clearly illustrate the overlap between the key principles from the various planning paradigms. These excerpts are listed in Appendix 6 and discussed in detail in the Findings Chapter.

The final step in the policy document analysis involved an analysis of the City of Waterloo's Official Plan objectives to determine which planning framework addressed the most objectives. The City of Waterloo's Official Plan has a list of objectives at the beginning of each chapter which outlines the City's key priorities for each of the planning areas. These objectives were reviewed and summarized into a list of key objectives. Some topics, such as transportation, were discussed in a number of chapters; therefore, the objectives were regrouped into common categories to ensure that there were no duplicates. In order to determine the degree to which the eight planning paradigms address the City's objectives, a table was created, see Appendix 5, listing the key objectives on the left-hand side and the eight planning approaches along the top. A detailed list was created for each of the eight planning paradigms, outlining the key principles. This list was created based on the findings from the literature review. Using that list, each planning approach was coded using the Landorf et al.'s (2008) methodology of explicit (E), implicit (I), or not evident (NE), based on whether or not they addressed the

objectives stated in the City's Official Plan. The objectives were coded as explicit if the planning approach specifically referred to the objective, implicit if the planning approach reflected the intent of the objective, and not evident if the objective was not addressed by that planning approach. For instance, accessibility planning was assigned an "I", for implicit, for the objective "accommodates all people at all stages of life", as the planning approach does not specifically refer to meeting the needs of people of all ages, yet by following its design and technical requirements, the built environment becomes more accessible for all. The codes were then tallied to determine which planning approach addressed the greatest number of City's Official Plan objectives, and the findings were used to compare the planning approaches.

Qualitative content analysis has its strengths and weaknesses. Qualitative content analysis is a flexible method; however, there is no standardized approach, meaning that there is no straightforward, correct approach (Elo & Kyngas, 2007). In addition, although large volumes of data can be analyzed, the coding process is very labour-intensive and time consuming. This was particularly true for this research as the entire Official Plan was coded manually. This dilemma could be alleviated by using coding software which makes the analysis more manageable and ordered.

3.4: In-depth Interviews

The findings from the literature review and policy document analysis were used to guide the direction of the questions used in the key informant interviews. The literature review and the policy document analysis revealed an overlap between the principles set out in age-friendly community planning and mainstream planning approaches. The interviews sought to address

this study's two research questions. More specifically, the purpose of the in-depth interviews was to: expand upon these findings by further investigating whether planning professionals have noticed a perceived overlap or conflicting priorities between AFC initiatives and other mainstream planning approaches; investigate planners' views with regards to the lack of coordination between the many planning approaches; validate whether joint policies are a legitimate policy issue; gain a better understanding of the challenges in creating and implementing age-friendly community initiatives; and determine whether there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles.

Interviews explore the thoughts, views and knowledge of individuals on a particular topic (Gill et al., 2008; Lambert & Loiselle, 2008). In-depth interviews were conducted with 13 planning professionals from the municipalities, counties and planning consulting firms across Ontario. Due to ethics approval, both the names of the participants and the names of their organizations were omitted from this study for privacy reasons, as some of the selected communities only had one planner on staff who could easily be identified through an online search. These municipalities and counties ranged in size from approximately 3,000 to 235,000 residents, and represented various stages in the AFC planning process, including: establishing an age-friendly committee, starting their public consultation process, completing their age-friendly community plan and implementing the plan.

A purposive sampling method was used to select planning professionals who experts in the field of age-friendly community planning and are responsible for creating and implementing

age-friendly policies. The purposive sampling method is a sampling strategy that targets people who have the greatest knowledge of the research topic and have the best potential for advancing the researcher's understanding of a particular topic (Elo et al., 2014; Palys, 2008). There are various strategic forms of purposive sampling techniques; this study used a stakeholder sampling approach which targets the major stakeholders who are responsible for administering the program and services in question, which in this case were those responsible for designing and implementing the AFC strategies (Palys, 2008). This targeted sampling strategy helped to ensure depth and accuracy of information. Although there are a number of different departments and organizations that are leading AFC initiatives across Ontario, planning professionals were best suited to address the planning related questions associated with this research. The value added of talking to planning professionals is that they can provide insight into what changes they believe are necessary based on their experience and expertise. As a result, some people who showed a keen interest in the study, yet did not have a planning position or background, were omitted from participating in the study due to their limited knowledge of established planning frameworks.

The initial recruitment strategy consisted of contacting planners' through the established connections made by the supervisor for this research, John Lewis, who is a member of the City of Waterloo's Age-friendly Cities Mayor's Advisory Committee and one of the authors of the Ontario Seniors Secretariat's age-friendly guide. He provided the researcher with names of potential candidates and their contact information, as some of this information was not available online. Due to low response rates, a new recruitment strategy was devised that involved contacting all the municipalities, counties and regions that were listed on the Seniors

Health Knowledge Network's (n.d.) list of age-friendly communities in Ontario and emailing the primary contact to see whether they had any planners involved in their age-friendly initiatives. The Seniors Health Knowledge Network has established an age-friendly community planning outreach initiative that offers information and resources; provides access to a knowledge broker whose role is to connect municipalities with the appropriate resources and partners to become more age-friendly; and details the community profile of 67 communities across Ontario that have established age-friendly community initiatives. Of the over 70 municipalities, counties and regions that were contacted, 13 planning professionals participated, 17 had no planners involved, over 30 never responded to the email inquiry and 5 planners were interested in participating but never returned any of the follow-up emails. Of these thirteen participants, four were contacted using a snowballing recruitment strategy. As stated by Morgan (2008), "snowballing uses a small pool of initial informants to nominate other participants who meet the eligibility criteria for a study" (para. 1). This recruitment method takes advantage of participants' social networks and can provide the researcher with a number of participants that otherwise would not have been identified as part of the initial recruitment strategy (Atkinson & Flint, 2004). This snowballing recruitment strategy was conducted at the end of each interview, by asking the participant whether they knew any other planners who were directly involved in AFC initiatives and could potentially participate in the study.

The participants represented diverse backgrounds with varying levels of experience from a recent graduate to a retired director of planning, with the majority of participants working at the managerial or director level. Table 2 outlines the participant characteristics including:

gender; position; employer (lower tier/upper tier municipality or planning consultant); and size of the municipality, county or region. Due to ethics approval and privacy concerns, more detailed information could not be provided regarding the participants and their employer.

Table 2: Participant Characteristics

Name (Pseudonyms)	Gender	Position	Employer Lower Tier Municipality, Upper Tier Municipality (County or Region) or Planning Consultant	Size of the Municipality, County or Region*
Adam	Male	Planner	Lower tier	Small
Alex	Female	Manager	Lower tier	Small
Andrew	Male	Director	Lower tier	Medium
Brittany	Female	Planner	Lower tier	Small
Carly	Female	AFC Coordinator (MA in Planning)	Lower tier	Medium
Chris	Male	Planner	Upper tier	Small
Damion	Male	Manager	Lower tier	Small
Laura	Female	Planner	Lower tier	Small
Marie	Female	Manager	Lower tier	Small
Paul	Male	Retired Director	Lower tier	Medium
Peter	Male	Director	Upper tier	Small
Sebastian	Male	Partner	Planning consultant	N/A
Tyler	Male	Senior consultant and principal	Planning consultant	N/A

*Small-sized communities: under 100,000 people

Medium-sized communities: 100,000 – 499,999 people

Large-sized communities: over 500,000 people

Although the participant selection criteria required professional planners, a few participants were selected who worked in other departments yet were directly involved in AFC initiatives and had a background in planning, such as a Master’s degree in planning. Participants’ level of involvement and role in age-friendly community planning initiatives also varied as some participants played a lead role in creating their AFC plan or acted as staff representatives on the AFC committee, whereas others supervised the development and implementation of AFC initiatives.

The key informant interviews were semi-structured, allowing for flexibility in the interview process. A list of predetermined, open-ended questions was designed to help guide the dialogue; however, the semi-structure format allowed the interviewer to deviate from the original questions to ask for clarification or elaboration based on some of the ideas that emerged from the dialogue (Ayres, 2008; Diccico-Bloom & Crabtree, 2006; Gill, Stewart, Treasure & Chadwick, 2008). The carefully worded, open-ended questions helped ensure that the informants were not limited in their answers (Ayres, 2008). A number of probes were established ahead of time to elicit additional information should the informant struggle to answer a question or to pursue the dialogue further (Ayres, 2008).

The full list of questions can be found in the interview guide in Appendix 3. The interviews started by briefing the informants about the research and the purpose of the interview; however, the detail was kept to a minimum in order to avoid swaying their answers. The first set of questions sought to get a better understanding of the interviewee's background and their level of involvement in age-friendly community planning initiatives. The second set of questions took a critical look at current age-friendly initiatives, their strengths and shortcomings. The purpose of these questions was to get a better understanding of the challenges with developing and implementing age-friendly policies. The third set of questions were designed to determine whether planning professionals acknowledge the overlap between the various planning paradigms and see the need to create more coordinated policies. These questions sought to address whether joint policies are a legitimate policy issue. The subsequent questions sought to determine whether a comprehensive planning approach would

be effective in meeting the needs of all members of the community and whether it would help improve coordination and avoid duplication of services. The interview concluded with a debriefing which gave the informants an opportunity to share any additional information or ask any questions about the study. In addition, the informants were asked whether they were aware of other planners who are involved in age-friendly community planning initiatives and could be able to participate in the study.

A total of 13 interviews were conducted at which point theoretical saturation was achieved. Morse (2004) defines theoretical saturation as “the phase of qualitative data analysis in which the researcher has continued sampling and analyzing data until no new data appear and all concepts in the theory are well developed” (para. 1). At this point in the interviews, the researcher was satisfied that the variety of viewpoints had been captured as it became evident that the participants were providing overlapping information. The interviews were conducted by phone between August and October 2016 and they varied in duration between thirty minutes and one hour and fifteen minutes based on the availability of the participants.

The interviews were recorded with the permission of the interviewees in order to facilitate the analysis and notes were taken during the interviews. The audio recordings were manually transcribed verbatim into text format for analysis. The transcripts were read in order to identify and categorize common themes. These key themes include among others: AFC lens, complete communities, lack of planning involvement, and unique challenges of rural and remote communities, just to name a few. The interview texts were then coded using these key

themes. A number of quotations were presented in the Findings Chapter to provide contextualized evidence of the common themes that were identified in the interviews.

In order to verify the accuracy of the analysis, the participants were asked to participate in member checking, of which five out of thirteen participants agreed to take part. Member checking, also known as respondent validation or member validation, is a form of validation by which the researcher provides a summary of their findings to the participant to verify the accuracy of their analysis (Bryman, 2004). In this study, participants were provided a copy of their interview transcript in which the key points had been highlighted and they were asked to comment on the accuracy of the summary and identify whether anything had been misinterpreted. Member checking is a common method used to enhance the credibility of the findings (Bryman, 2004; Sandelowski, 2008).

3.5: Methodological Rigour

A number of steps were taken throughout this research to ensure methodological rigour, they include: describing the purpose of the study, providing a rationale for the methodological approach, describing the participant recruitment process, as well as the methods of data collection and analysis, and using verbatim quotes to illustrate the findings (Baxter & Eyles, 1997). As stated by Elo et al. (2014), the research process must be clearly detailed so that the reader can easily follow the entire process. In order to assess this study's methodological rigour, the researcher followed the general criteria for evaluating rigour in qualitative research as set out by Lincoln and Guba (1985) and later adapted by Baxter & Eyles (1997), which consist of the following four standards: credibility, transferability, dependability and

confirmability. These criteria are comparable to the quantitative standards of reliability, validity and generalizability (Baxter & Eyles, 1997). The following sections detail the measures taken in order to ensure methodological rigour for all four standards.

3.5.1: Credibility

Credibility is defined as the “authentic representation of experience” (Baxter & Eyles, 1997, p. 512). Credibility seeks to determine whether the researcher’s descriptions fit the respondents’ views and whether their interpretations are credible (Tobin & Begley, 2004). Credibility is comparable to the quantitative equivalent, internal validity (Tobin & Begley, 2004). Various strategies can be used to enhance credibility, including: purposeful sampling, member checking, triangulation and reflexivity, all of which were used in this study (Baxter & Eyles, 1997; Tobin & Begley, 2004). Purposive sampling seeks to select participants who are well informed on the research topic, therefore increasing the accuracy of the findings (Elo et al., 2014; Palys, 2008). The methods chapter provides considerable detail on the sampling strategy employed in this study and information participants’ characteristics. This study employed a purposive sampling strategy to target planning professionals from communities of all sizes across Ontario who were directly involved in age-friendly community planning. This broad representation of planning professionals from across Ontario ensured a wide diversity of experiences.

Member checking, or respondent validation, occurs when the researcher returns their interpretations to the participants for commentary with the purpose of ensuring accurate representation (Baxter & Eyles, 1997; Mays & Pope, 1995). The participants’ feedback is then

incorporated into the findings (Mays & Pope, 1995). According to Baxter & Eyles (1997), “member checking is arguably one of the most important strategies for enhancing credibility since it involves checking the adequacy of analytic categories/constructs/hypotheses with members of the group(s) from which the data were obtained” (p. 515). All the participants in this study were asked to participate in member checking, although most declined due to their busy schedules. The five participants who agreed to participate provided feedback which resulted in minor revisions to their transcripts.

Triangulation is another common technique used to strengthen credibility (Baxter & Eyles, 1997). Various forms of triangulation were discussed in the literature, namely the use of multiple: data sources, methods, researchers and theories (Baxter & Eyles, 1997; Mays & Pope, 1995; Pyett, 2003; Tobin & Begley, 2004). This research used both data source and method triangulation to support the study’s credibility. Data source triangulation is the most common form of triangulation, which involves the use of more than one account to illustrate a concept (Baxter & Eyles, 1997). This is often achieved by using quotations from more than one respondent to support a point. This study used data source triangulation throughout the Findings Chapter by using direct quotations from multiple participants who provided similar observations in order to demonstrate that these views were shared by many participants. Method triangulation involves the use of mixed methods, involving various combination of qualitative methods or qualitative and quantitative methods, to complement each other (Tobin & Begley, 2004). The convergence of concepts derived from two or more methods strengthens the credibility of the research (Baxter & Eyles, 1997; Tobin & Begley, 2004). This study employed a multi-phased qualitative methods approach, which involved a policy document

analysis and in-depth interviews to enable triangulation and increase the credibility of the findings.

One of the strategies used to establish credibility in qualitative research is reflexivity (Baxter & Eyles, 1996; Thomas & Magilvy, 2011). Reflexivity requires the researcher to do a self-critical assessment to determine how their background and personal predispositions can influence participants' responses and the interpretation of the findings (Thomas & Magilvy, 2011). Researchers' interpretations may vary based on their individual lived experiences. I recognize that my childhood experiences, watching my mom struggle to walk due to a serious car accident and watching my grandparents struggle with daily tasks as they aged, fostered my interest in designing accessible and age-friendly spaces that meet the needs of people of all ages. Reflexivity can also be achieved by providing a detailed account of each stage of the research process, as evidence in this chapter (Dowling, 2008; Hammersley, 2004).

Furthermore, reflexivity is important in accessing the power relations in the interviewer-interviewee relationship. In this study, I was mindful of how the research relationship could influence participants' desire and comfort in sharing information. The researcher allowed the participants to discuss any additional information that they felt was pertinent to the interview topic. Since the interviews were conducted over the phone and the interviewees all held a position of authority, the participants were less likely to feel pressure or intimidation. In addition, since all the interviews were done by phone, issues such as demographic background were not an issue.

3.5.2: Transferability

Transferability refers to the generalizability of the findings within other contexts, which is comparable to the more familiar concept of external validity (Baxter & Eyles, 1997; Tobin & Begley, 2004). Transferability can be achieved through purposeful sampling and detailed descriptions (Baxter & Eyles, 1997). In order to ensure transferability of the findings, a purposeful sampling technique was used to target planning professionals from communities of all sizes across Ontario. These planning professionals were male and female, of all ages and experience levels, from recent graduate to retired director, all with varying forms of involvement in AFC initiatives. The wide diversity of community contexts, in addition to the planning professionals' varying roles and responsibilities, provided a diversity of viewpoints, which increased the transferability of the findings. Detailed descriptions were provided of the participants and research process, including methods of data collection and analysis.

3.5.3: Dependability

Dependability refers to “the degree to which it is possible to deal with instability/idiosyncrasy and design-induced change” (Baxter & Eyles, 1997, p. 516). It draws a number of similarities with reliability, although reliability tends to focus on predictability and consistency, meaning that when a research is repeated it should yield similar results; whereas dependability focuses on the consistency between the interview transcripts, for example (Baxter & Eyles, 1997; Tobin & Begley, 2004). Dependability requires detailed documentation of the research process, which was delineated earlier in this chapter (Tobin & Begley, 2004). Dependability and credibility go hand in hand; dependability focuses on the researcher and the extent to

which their interpretation of the data is consistent; whereas credibility seeks the accurate depiction of the experiences (Baxter & Eyles, 1997).

One of the ways in which this study sought to ensure dependability was through low-inference descriptors, such as audio recordings, and mechanically recorded data (Baxter & Eyles, 1997). Quotations from the City of Waterloo's Official Plan were used to illustrate the findings from the policy document analysis. These findings were displayed in tables, which, according to Elo et al. (2014), can be more effective than words to illustrate the hierarchy of concepts and report the findings. As for the interviews, they were all audio recorded, with the permission of the participant, and transcribed verbatim by the researcher. Numerous verbatim quotations, both short and long, were used throughout the Findings Chapter to illustrate the participants' standpoints. The quotations were selected based on their relevance to the topic discussed, as opposed to who said it. As expressed by Baxter & Eyles (1997), the verbatim quotations are important for revealing the participants' views in their own words, rather than those of the researcher.

In addition, a standard interview guide was used to enhance the rigour of this study by discussing the same set of open-ended questions with each participant, while maintaining the flexibility for participants to share their experiences. This allowed for easy identification of the emerging themes (Baxter & Eyles, 1997). The participants were given the interview guide ahead of time, in order to prepare for the interview.

3.5.4: Confirmability

Confirmability is defined as the: “extent to which biases, motivations, interests or perspectives of the inquirer influence interpretations” (Baxter & Eyles, 1997, p. 512). Confirmability seeks to confirm that the data and associated interpretations are explicitly derived from the data and are not a result of the researcher’s biases, personal interests or motivations (Baxter & Eyles, 1997; Lincoln & Guba, 1985; Tobin & Begley, 2004). Confirmability is based on the notion of objectivity and the accountability of the researcher’s interpretation (Baxter & Eyles, 1997).

Rose (1982) and Lincoln & Guba (1985) presented the following list of eight questions that can be used as a checklist to evaluate qualitative research:

- 1) What was the natural history of the research?
- 2) What data were collected and by what methods?
- 3) How was the sampling done?
- 4) How was the data analysis done?
- 5) What results are presented?
- 6) How credible and dependable are the data-construct links?
- 7) How credible is the theory/hypothesis?
- 8) How transferable are the findings? (Baxter & Eyles, 1997, p. 518).

These questions were all address in various sections throughout this thesis. In addition to providing a detailed description of the research process to confirm the findings, this study also outlined the key limitations, which are presented in the Conclusion Chapter (Elo et al, 2014).

3.6: Conclusion

This chapter described the multi-phased qualitative approach used to address this study's research questions, specifically a policy document analysis and in-depth interviews. This chapter examined the methods of data sampling, collection and analysis for each of the selected methods as well as the steps taken to ensure methodological rigour.

The following chapter, Findings Chapter, provides a detailed analysis of this study's findings and identifies the emerging themes as they relate to the two primary research questions. In addition, the following chapter presents a number of supplementary findings that were uncovered through the in-depth interviews with planning professionals.

Chapter 4

Findings Chapter

4.1: Introduction

This chapter presents the findings from the study's two research questions:

- 1) To what extent do established planning principles overlap with age-friendly community planning principles?
- 2) Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

Due to ethics approval and privacy concerns, the names of the participants and their affiliations were omitted from this study. Pseudonyms were used to protect the participants' anonymity and confidentiality.

4.2: Summary of Findings

The following list provides a summary of the dominant themes unveiled in this analysis and further discussed in this chapter.

- There is an overlap between AFC and established planning frameworks.
- In addition to the seven planning frameworks previously identified in this study, 'complete communities' also shares a number of similarities with AFC planning.
- The overlap between the planning paradigms is viewed as policy alignment or policy linkage, as the policy frameworks reinforce and support each other rather than presenting conflicting priorities.

- Many referred to AFC as a ‘lens’, ‘filter’ or ‘hat’ that is applied to other planning approaches rather than its own distinct planning paradigm.
- Although each planning framework is often viewed independently, their fundamental principles are all the same, that we should be planning in a holistic way for everyone.
- Most planners expressed concerns over the feasibility and challenges associated with creating a comprehensive planning approach, while others emphasized that planning should be comprehensive by nature and include everyone.
- Age-friendly community planning initiatives vary considerably from community to community due to varying geography, demographics, social, economic, and political conditions.
- Planners are often not involved in AFC initiatives despite AFC’s large planning component.
- Current AFC initiatives have been successful in raising awareness of aging issues, gaining political acceptance at all levels of government, benefiting from a bottom-up consultation process and having access to a range of AFC resources.
- Challenges to be addressed:
 - Lack of government funding and resources particularly for the implementation of AFC plans.
 - Maintaining momentum to implement actions once the plan has been created.
 - Limited awareness of current programs and services.
 - Lack of coordination between the lower tier and upper tier municipalities.
 - Difficulties implementing AFC plans as they are not mandated in provincial policy.

- Rural and remote communities face a number of additional challenges.

4.3: Research question 1: To what extent do established planning principles overlap with age-friendly community planning principles?

4.3.1: Literature Review

The literature review chapter presented the planning frameworks temporally to illustrate the evolution of the planning field. As illustrated in the literature review, each planning paradigm has been introduced independently into the planning field with no linkages between the frameworks and little attention as to whether these concepts overlap.

The literature review was used as a research method to illustrate the overlap and similarities between age-friendly community planning and the seven selected mainstream planning approaches. Using the lists of key principles established through the literature review, a table was created to illustrate the commonalities between the planning frameworks, see Appendix 4. The planning approaches were assigned an 'E' for explicit, 'I' for implicit or 'NE' for not evident, based on whether or not the planning approach touched upon the key features of an age-friendly community as set out in the World Health Organization's AFC checklist (World Health Organization, 2007b). The analysis reveals that age-friendly community planning shares similarities with all seven selected planning approaches, whether implicitly or explicitly, as summarized in Table 3.

Table 3: Summary of the Overlap and Similarities between AFC and Mainstream Planning Approaches as evidenced through the Literature Review Analysis

	Smart Growth	Transit-oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Total E	3	2	0	24	2	11	4
Total I	3	1	7	9	5	4	2
Total E and I	6	3	7	33	7	15	6
Total NE	77	80	76	50	76	68	77

Accessibility planning shares the most similarities with AFC planning, with 33 common areas of explicit and implicit overlap out of 83. To illustrate this overlap, the following AFC key principles are common with accessibility planning, namely: pavements are well maintained, non-slip, wide enough for wheelchairs, and have dropped curbs; age-friendly buildings (well-signed and accessible) and interior spaces allow for movement in all rooms and hallways, just to name a few areas of overlap. Second was sustainable communities with 15 common elements with AFC, including the use of a participatory decision making process and the promotion of intergenerational equity. The following four planning frameworks are close with universal design (7), healthy communities (7), Smart Growth (6) and New Urbanism (6). Lastly, transit-oriented development has only 3 common traits.

4.3.2: Policy Document Analysis

The policy document analysis sought to validate the findings from the literature review by demonstrating whether there is in fact an overlap or similarities between age-friendly community planning and mainstream planning approaches, as discussed by Colangeli (2010), Cerda & Bernier (2013), Golant (2014) and Miller et al. (2011). The policy document analysis

provided an alternative approach to assess the overlap between the selected planning frameworks using current planning policies, specifically the City of Waterloo's Official Plan, to demonstrate the commonalities. This was achieved by coding the City of Waterloo's Official Plan using the Landorf et al. (2008) methodology of explicit, implicit and not evident. To illustrate the findings, quotations were pulled from the Official Plan that illustrate how one policy can incorporate principles from multiple planning paradigms, see Appendix 6.

Despite the fact that the City of Waterloo joined the World Health Organization's Global Network of Age-friendly Cities and Communities in 2012 (Ontario, 2013) and their Official Plan is dated October 2014 (City of Waterloo, 2014), the Official Plan does not specifically refer to an 'age-friendly community' per se; however, it does touch upon all the key principles of an age-friendly community either explicitly or implicitly. In fact, the City of Waterloo's Official Plan only specifically mentions four of the eight selected planning approaches, precisely: transit-oriented development, universal design, healthy and sustainable communities. Nevertheless, the Official Plan addresses most of the key principles from all seven selected planning approaches, with the exception of 3 key principles from universal design and one from accessibility planning.

The policy document analysis revealed an overlap between AFC planning and established planning paradigms; however, certain AFC dimensions share more similarities with the selected planning frameworks than others, specifically: outdoor spaces and buildings, transportation and housing, as evidenced below. The primary difference between AFC planning and the selected planning frameworks is that AFC specifically targets the older adult

population, whereas the other selected planning approaches are more general and do not address certain segments of the population. The findings from the policy document analysis are summarized in table presented in Appendix 6. The table presents quotes from the City of Waterloo's Official Plan that illustrate the overlap between each area of AFC planning and key principles from established planning frameworks.

The following paragraphs provide quotations from the City of Waterloo's Official Plan to demonstrate how current planning policies share common principles among multiple planning paradigms.

AFC's Outdoor Spaces and Buildings shares commonalities with all seven planning paradigms. For instance, AFC planning talks about providing pleasant, clean and safe environments, which is a key component in healthy communities. AFC planning seeks to provide pedestrian friendly walkways and cycle paths, which is also a key component of transit-oriented development, Smart Growth, New Urbanism and accessibility planning. To illustrate this commonality, the City of Waterloo Official Plan (2014) states: "Providing well maintained and safe physical infrastructure, including an integrated and comprehensive cycling and pedestrian system" (p. 37). This policy addresses AFC's goal of providing pedestrian friendly walkways and cycle paths, New Urbanism's key principle of walkability, Smart Growth's aspiration to develop walkable neighbourhoods and TOD's objective to foster walkability (see Appendix 6). AFC planning promotes accessible and age-friendly buildings which is associated with accessibility planning and universal design.

AFC's Transportation dimension shares a number of similarities with transit-oriented development, Smart Growth, New Urbanism and accessibility planning. AFC planning seeks to provide accessible, affordable, reliable and frequent public transit routes; which is common to transit-oriented development, New Urbanism and Smart Growth. AFC's requirement for accessible priority parking spots and pick-up areas shares similarities with accessibility planning. AFC planning supports transit routes that are well connected and reach key destinations which is also a key component of transit-oriented development, Smart Growth and New Urbanism. For instance, the City of Waterloo Official Plan (2014) states: "Provides for a high level of connectivity, facilitating the safe and efficient movement of people and goods between destinations within and around the community, particularly by sustainable transportation modes" (p.16). This policy is consistent with AFC's objective that transit routes are well connected and reach key destinations, New Urbanism's key principles of connectivity and sustainability, Smart Growth's goal of providing a variety of transportation alternatives and TOD's goal to provide a variety of transportation alternatives.

AFC's housing component overlaps with New Urbanism and Smart Growth, which both seek to provide a range of affordable housing alternatives. For example, the City of Waterloo Official Plan (2014) states: "The City will plan for the provision of an appropriate range and mix of housing types, sizes, costs and tenure within neighbourhoods" (p. 37). This quote addresses AFC's desire to provide a range of affordable housing design to accommodate the needs of older adults in order to promote ageing in place; Smart Growth's goal to provide a range of housing alternatives and New Urbanism's key principle of mixed housing (see Appendix 6).

The remaining five AFC dimensions tend to be more specific to age-friendly community planning and share limited similarities with established planning paradigms. Nevertheless, social participation can be linked to healthy communities in terms of providing access to a wide variety of experiences and resources. In terms of Civic Participation and Employment, both sustainable and healthy communities promote public participation and inclusion in the decision-making process. To illustrate the overlap, the City of Waterloo Official Plan (2014) states: “Encourage all people to provide input and support their participation in decision-making processes in which individuals are treated fairly and without bias in an open, orderly and impartial manner” (p. 328). This policy is consistent with AFC’s desire to encourage civic participation among older adults and include them in the decision making, Smart Growth’s key principles of promoting community involvement in development decisions and using a participatory process when making decisions, as well as healthy communities’ objective to promote a high degree of public participation in and control over the decisions. As for Community and Health Services, healthy communities is the only planning approach that speaks to providing public health and sick care services accessible to all.

4.3.3: City of Waterloo Official Plan Objective Analysis

The City of Waterloo’s long-range planning goals are summarized in the key objectives presented at the beginning of each chapter in the Official Plan. These objectives outline the City’s key priorities for each of the planning areas and provide a foundation for the long range direction of development within the City. The objective analysis illustrates which planning approaches address each of the objectives listed in the City’s Official Plan. The analysis was

used to illustrate the overlap between the selected planning frameworks and determine which of the selected planning paradigms is the most comprehensive by addressing the greatest number and variety of key objectives. The findings are presented in a table in Appendix 5.

This analysis helped to illustrate the areas of overlap between age-friendly community planning and the selected planning frameworks. For instance, under transportation, supporting public transit is common to AFC, Smart Growth, transit-oriented development, sustainable communities and New Urbanism (see Table 4).

Table 4: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis)

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Transportation								
Support public transit	E	E	E	NE	NE	NE	E	E

Access to a range of housing types, sizes, costs and tenure is listed as a key principle under AFC, Smart Growth, sustainable communities and New Urbanism (see Table 5).

Table 5: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis)

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Housing								
Range and mix of housing types, sizes, costs and tenure	E	E	NE	NE	NE	NE	E	E

The provision of a safe, comfortable, lively and accessible environment is common to AFC, Smart Growth, healthy communities, sustainable communities and New Urbanism (see Table 6).

Table 6: Excerpt from Appendix 5 (City of Waterloo Official Plan Objective Analysis)

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Built Form								
Provide a range of safe, comfortable, lively and accessible environments	E	E	NE	I	I	E	E	E

These are just a few examples to illustrate how key principles are common to multiple planning approaches.

As illustrated in Appendix 5, most of the City of Waterloo’s long term objectives are addressed by at least one or more of the selected planning frameworks. Specifically, AFC planning addressed 22 of the 69 objectives set out in the Official Plan, either explicitly or implicitly.

The findings are summarized in Table 7.

Table 7: Summary of the Findings from the City of Waterloo Official Plan Objective Analysis

	Age-friendly Communities	Smart Growth	Transit-oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Total E	17	37	9	1	1	14	30	29
Total I	5	2	7	4	5	3	4	4
Total E and I	22	39	16	5	6	17	34	33
Total NE	47	30	53	64	63	52	35	36

AFC covers a wide variety of topics including aspects of the built and social environments, such as: transportation; housing; public participation; built form; economy; arts, culture, recreation and leisure opportunities; as well as communication and information. This variety of topics helps to illustrate the comprehensive nature of AFC planning. The only key area that AFC did not touch upon was environmental sustainability, as AFC prioritizes the health and well-being of older adults specifically, not that of the environment. In comparison, the other planning frameworks that address the most objectives were Smart Growth (39), sustainable communities (34) and New Urbanism (33). The other planning approaches, specifically transit-oriented development (16), accessibility planning (6) and universal design (5) tend to address a more narrow scope of initiatives.

4.3.4: Interviews

In order to further investigate the first research question, the planning professionals were asked whether they perceive an overlap or conflicting priorities between AFC and mainstream planning approaches, and whether they see a need to create more coordinated policies.

Throughout the interviews, a number of planning approaches were mentioned for their overlap with age-friendly community planning, specifically: accessibility planning, universal design, complete communities, sustainable communities, healthy communities, Smart Growth and occasionally transit-oriented development. Table 8 indicates the number of planners that discussed the overlap between the selected planning frameworks and AFC.

Table 8: Number of planners that discussed the overlap between the selected planning frameworks and AFC

Planning Approach	Number of planners that discussed the overlap between the selected planning framework and AFC planning
Smart Growth	4
Transit-oriented Development	2
Universal Design	6
Accessibility Planning/AODA	10
Healthy Communities	6
Sustainable Communities	1
New Urbanism	0
Complete Communities	4

As indicated in the table, accessibility planning was the most commonly stated planning approach sharing similarities with AFC planning. This result is consistent with the findings from the literature review which identified 33 of areas of overlap. The primary reason for this link is that most people associate aging with disabilities, as most older adults are faced with some form of age-related impairment that limits their ability to do daily activities.

The similarities with the Accessibility for Ontarians with Disabilities Act (AODA) was commonly discussed in the interviews, as illustrated below:

“One of the areas of overlap that we encounter a lot especially when we are talking about issues of either customer service, or the built environment is duplication with the requirements of AODA legislation. We have partnerships in place on our local planning committee, the city’s accessibility coordinator sits on that to make sure that we are sharing knowledge across what is happening from an accessibility standpoint and what we are trying to achieve through the age-friendly plan. I think that in some cases, the age-friendly plan would go a little bit beyond the AODA requirements. The AODA sets the minimum standard and then in some cases when we are talking to our partners about what are some of the additional things that we could be looking at but municipalities are challenged in some cases just to meet the AODA requirements, so coming in and adding to them is not always welcome” (Carly).

The second most commonly stated planning approaches sharing similarities with AFC are universal design and healthy communities. As indicated by Alex, universal design and accessibility planning often go hand in hand. Universal design is often used to accommodate the aging population and those with disabilities through its accessible and adaptable designs. Healthy communities was mentioned several times particularly in terms of the provision of health care services and overall healthy community environments (Alex, Sebastian). Smart Growth was mentioned by four planners, specifically in terms of increasing densities and permitting garden suites or apartment units within dwellings (Alex, Chris). Sustainable communities was only mentioned by Sebastian in terms of providing an environment that

promotes intergenerational equity. Despite Colangeli (2010), Golant (2014), Miller et al. (2011) discussing the link between AFC planning and New Urbanism, none of the planners mentioned the association between the two.

Complete communities was mentioned by four planning professionals (Adam, Andrew, Carly and Chris), which is surprising considering the concept of ‘complete streets’ was only mentioned by Golant (2014) with no further commentary to explain in what ways and to what extent they overlap. Complete communities are mandated in under the provincial Growth Plan for the Greater Golden Horseshoe and as a result, municipalities across the greater golden horseshoe have adopted policies in their official plans and zoning by-laws to support the notion of complete communities (Ontario, 2013). The Growth Plan (Ontario, 2013) defines complete communities as: “Complete communities meet people’s needs for daily living throughout an entire lifetime by providing convenient access to an appropriate mix of jobs, local services, a full range of housing, and community infrastructure including affordable housing, schools, recreation and open space for their residents. Convenient access to public transportation and options for safe, non-motorized travel is also provided” (p. 48). As noted in the definition, complete communities are characterized by compact, mixed-use nodes that offer a wide variety of housing options, employment opportunities, shops and services to meet the needs of people of all ages, within a short walking or biking distance (City of Mississauga, 2015). As discussed with Andrew, complete communities share a number of similarities with other planning approaches such as Smart Growth, transit-oriented development and age-friendly communities:

...so complete communities is one of those concepts, and that is a concept that was, well at least the term was coined in an official way by the Province of Ontario in the Places to Grow literature, but it is something that all municipalities are to plan for.

...there is a huge overlap with Smart Growth and transit supportive development, active transportation, and anything that creates more choice, more access and more integration rather than segregation, tends to align with, they all align with each other, but age-friendly communities in terms of providing more mobility choices, more housing choices in different parts of the city and integrating all demographics in all areas of the city, tends to align with age-friendly communities (Andrew).

Planning professionals view the overlap between the planning paradigms as policy alignment or policy linkage, as the policy frameworks reinforce and support each other rather than presenting conflicting priorities (Andrew, Tyler, Laura and Sebastian). For instance, Carly stated: "I do think that there is benefit in having mutual reinforcement of some of these ideas, so as long as we are all speaking the same or similar language and that they are not talking at cross purposes" (Carly).

I see overlap, if you are defining overlap as alignment, I don't really see it as conflict. So the only time is that sometimes, the alignment is understated or it is not identified and I think that it should and any planning initiative, and there are so many of them under different brands and monitors, that promote complete communities and provide a broad range of housing and transportation choices, go a long way to making communities more age-friendly (Andrew).

I would say more of overlap than anything, certainly not much conflict in priorities, I mean certainly from the healthy communities and the accessibility perspective, a lot of the issues are so similar. We have got a lot of overlap and it re-enforces everything that we do to become more accessible and thereby making us more age-friendly. ... I don't think that it conflicts it more, I think that it just supports each other for sure (Laura).

Despite age-friendly community planning being viewed as a standalone initiative for funding purposes (Marie), a number of planners viewed AFC as a subset of mainstream planning approaches (Sebastian). Many planning professionals referred to an AFC 'lens', 'filter' or 'hat' that is applied to other planning approaches rather than its own distinct planning paradigm (Adam, Brittany, Carly, Tyler, Marie, Paul and Peter).

AFC planning I see as mostly kind of a lens to bring to a lot of those planning considerations and then there are aspects of Smart Growth, aspects of universal design, healthy communities that would come into view through that lens (Carly).

Adam recommended looking at the community and all planning decisions through an age-friendly lens.

...I mentioned the term age-friendly lens earlier and I think that it is important for municipalities to think on that scale and sort of look at all the decision-making of the municipality and ensure that there is some thought that goes into those decisions in regard to being friendly for the elderly and the young people (Adam).

Likewise, Cerda & Bernier (2013) also employed the term ‘age-friendly lens’, referring to the fact that “municipalities ... are increasingly expected to employ an age-friendly lens in policy design, urban planning and service delivery” (Cerda & Bernier, 2013, p. 2).

The planners were asked whether the overlap described above has caused a lack of policy coordination between the planning approaches and has in turn led to duplication of services. Their responses varied significantly from community to community (Andrew and Carly). Some communities have acknowledged their duplication of programs and service, and are seeking ways to improve communication and coordination among the various stakeholders, and integrate and align where possible (Andrew, Carly, Tyler, and Marie). On the other hand, Laura indicated that her community was successful in avoiding duplication by using the various planning approaches to support each other, particularly in terms of the rationale for funding. Adam attributed his ability to avoid duplication to the small size of his community. However, Carly indicated that duplication of programs and services is not a function of the size of an organization but rather a result of the internal processes and training that are in place. Good business planning and strong communication can help eliminate duplication and help avoid competing policies (Andrew).

As long as you make sure that you are not competing or wasting resources, duplicating, you don't want to duplicate, you want to maximize the things that are in common, so that you don't repeat them and it is important to do it for this reason and that you don't want to undo that by what you are doing. I just think that more often than not, it's not competing policies so much as it is maybe redoing the same thing sometimes happens

at the municipal level and I think that you can save some work by importing something that has already been done into your program (Andrew).

...there could be a lot of well-intended things but how you actually execute it will make a big difference on how useful the initiative is and how much it actually gets done and benefits the community and that starts with good business planning and good project planning that involves the different areas of the organization to ensure that you have alignment, no duplication and that you have like an initiative that is built on community engagement that is specific to the topic but that also has doable actions and builds on those things that are already done (Andrew).

Marie and Paul explained that since resources are so limited, they are always seeking ways to save money and improve efficiencies; and therefore, there is little duplication of services. She believes that it would be challenging to further improve efficiencies as there is not much more communities can do with their limited resources (Marie).

Most municipalities have various committees, whether working committees or advisory committees to council, that deal with AFC related initiatives, such as: accessibility committee; arts, culture and heritage committee, community services committee, housing committee and recreation committee (Andrew, Brittany, Carly and Chris). Two municipalities have two age-friendly committees that are operating independently yet are using the same volunteer base and working on similar initiatives; for example: broader steering committee and the implementation committee run by the library; and in the second community, the age-friendly

committee and the 55 plus committee (Adam and Paul). In both instances, the planners are seeking to consolidate these committees to improve efficiencies (Adam and Paul). As indicated by Paul, the number and type of committees depends greatly on the size of the municipality and the political will of the current council (Paul). Although many municipalities have multiple committees that are working towards the same goals, they have defined mandates and what they are hoping to achieve is slightly different (Andrew).

Some communities have established implementation steering committees that are distinct from the committee that created the plan, whose purpose is to coordinate and see through the implementation of the plan (Adam and Tyler). Examples include: the library, seniors' advisory committee or a not-for profit organization (Tyler and Marie). As indicated by Laura, despite having distinct priorities, the committees should work together to support each other.

In order to avoid duplication and the waste of resources, some municipalities have put measures in place to promote open communication among the committees by having a member of the committee sit on multiple committees in order to share and coordinate information, or making a presentation to the other committees to keep them informed of their current initiatives and seek input (Carly, Marie and Paul).

4.4: Research Question Two: Is there value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles?

The second research question was addressed through the in-depth interviews. Planners were asked their thoughts on creating a unified planning approach that addresses all planning paradigms. The concept of a comprehensive planning framework that incorporates AFC planning principles and established planning principles stems from the literature and the notion that joint policies could help reduce duplication and improve efficiencies. Specifically, Golant (2014) recommended that they come together to use resources more efficiently and avoid duplication. Cerda & Bernier (2013) shared similar views, stating that “communities should join forces with programs that have some goals in common with age-friendly initiatives” (p.4). In his research, Colangeli (2010) presented a comprehensive planning model entitled the ‘Wise Growth Model’ which incorporated elements of newer planning models, specifically Smart Growth, New Urbanism sustainable development and healthy communities, with key principles from the field of gerontology to develop more age-friendly communities. Lastly, Miller et al. (2011) made several recommendations to adapt AFC to planners’ needs, including creating a version of AFC that combines complementary aspects of established planning paradigms, such as Smart Growth and New Urbanism.

Most planners expressed concerns over the feasibility and challenges associated with creating such an initiative, stating that it would not receive political or financial support (Carly & Chris); while others emphasized that planning should be comprehensive by nature and include

everyone. Several planners questioned whether a unified planning framework is possible given the size of the undertaking and expressed concerns that it would be unmanageable to develop and update one overarching document (Alex, Andrew, Brittany, Tyler and Marie). Alex stated: “I think that it would be too overwhelming to tackle as a whole... I would keep them separate. I think that trying to put them all into one document would be a nightmare”. Similarly, Andrew noted that “I don’t think it’s possible or feasible to have one overarching planning initiative to cover everything, I think that it would take too long to build” (Andrew).

I am not sure whether that would be a beautiful thing or a monster, it really does feel a little big. ... I think that there is merit to overlap, I do not think therefore that everything can be in the same basket because not everything is in the same basket. ...they certainly overlap between them but they are not all the same and I think that it would be just unwieldy, I think that it would be so overwhelming, it’s bigger than my brain, that is for sure. And then you end up braking it down regardless..., in order to manage the pieces (Marie).

As expressed by Marie, several planners indicated that they would end up breaking down the document into manageable sections. She does not believe that we will reach the point when all planning frameworks are grouped into one planning approach.

Some questioned whether an overarching planning approach is possible due to the number of jurisdictions and stakeholders that would be involved in the decision-making process (Alex and Andrew).

... where you start talking about different levels of jurisdiction and different bodies that may or may not be involved in the decision-making and you could, you know

something that does not require someone's involvement will automatically bring them in because they are part of another piece... I just think that you would end up having grid lock in trying to get an approval buy in on a document, because it would involve just too many stakeholders and too many levels and too many approval authorities as well (Andrew).

Andrew, Alex and Marie expressed concerns with regards to the public consultation process for the creation of a unified planning approach. Planners cannot consult with all the groups at once, they would end up breaking it down into smaller groups regardless based on the variety of consultation techniques required to effectively target each group. They noted that it is more challenging to engage the community on something that is broad than something specific, as stakeholders are typically only concerned with certain aspects of a plan (Alex and Andrew).

The thing with stakeholders is that they are typically only looking for one aspect of that plan. And to give them a document that is 400 pages, they are going to look at you and say no, no, just give me the sections that pertain to me. No, the whole document pertains to you (Alex).

Adam noted that it would be challenging to create a comprehensive planning approach at the provincial level as every municipality has its own local needs. If the province was to undertake this policy approach, they would struggle to create a policy program that is broad enough that it applied everywhere but detailed enough that it is not simply motherhood statements (Adam).

It is really challenging to develop an overall comprehensive planning approach for age-friendliness that respects the local level issues but also provides enough of a broad

umbrella that it captures the essence of planning at that level for age-friendliness (Adam).

Let's say the province was to undertake this policy approach, just like some of the other legislation, I think that they would be really challenged with creating a policy program that was broad enough that it applied to everywhere but detailed enough that it wasn't just motherhood statements (Adam).

Chris and Adam explained how it is challenging to paint all municipalities with one brush, as policies that are successful in a large municipality, may not work in a rural community due to varying infrastructure and services. Planners from small rural municipalities expressed concerns that it would be overwhelming for a small community to tackle a comprehensive approach, especially since they do not have the resources or funding necessary to implement the AODA requirements (Alex, Brittany).

Alex and Andrew expressed concerns that should all the initiatives be tied to a single plan, it could all come crashing down as a result of an Ontario Municipal Board (OMB) decision.

Laura recommended that the planning frameworks be kept separate, yet keep the other approaches in mind when developing a plan.

there are some differences between them in what they are looking for so I think that it is helpful to have them dealt with individually, but there are certainly so many things that overlap that you are right, they are going to end up overlapping anyways, but I don't

think that we are wasting energy or creating different goals or working against each other (Laura).

When asked whether a comprehensive planning framework would be effective in meeting the needs of the entire community, Carly highlighted the challenges of meeting the needs of all member of the community, as people have different and sometimes conflicting needs. On the other hand, Sebastian, Laura and Paul discussed how good planning should be comprehensive by nature, meaning that the focus should not be on any particular group or planning paradigm; rather, planning should be done comprehensively to include everyone.

...plans at a neighbourhood and community level, regional level should be comprehensive so that they are not leaving out any group and they are considering all of the various components of the community whether age, income, location, physical, social, environmental, economic, there you go, include it all and then you've got a sustainable plan (Sebastian).

Sebastian stated that if planners are making special efforts to make initiatives age-friendly, then they have not been doing the planning process correctly. He believes that by definition, all planning approaches should be age-friendly.

...universal design, healthy communities, sustainable communities, I mean the definition to those are that they're age-friendly by definition, it's not sustainable if we have excluded or we haven't planned for people that have needs when they are at a certain point (Sebastian).

Sebastian further elaborates to saying that planners should not be focusing any more on age-friendly community planning than any other planning approach, as it becomes overwhelming to municipal councils that are seeking to balance them all. By planning comprehensively, using a transparent process, plans achieve goals that include everyone (Sebastian).

Similarly, Paul believes that good planning is comprehensive by nature. Planning should look at all the planning frameworks as a whole, and determine based on the circumstances which items from each planning approach is best suited to meet current needs and equally those of future generations. When people break planning down into smaller components, they have trouble seeing the bigger picture (Paul).

... when you start to look at age-friendly as an independent piece in the planning framework just as you might with Smart Growth and way back early in my career was all about the environment, I think you start to lose track of what planning actually is and my definition of planning and the one that we kind of used at [university name] was planning is pretty broad, it includes all these other areas that you have mentioned but you have to look at them as a whole, so again that whole comprehensive planning idea and that age-friendly planning needs to be part of all the other pieces of the puzzle out there. So that when you've got an issue before you, you look at it through all those filters ... that is what the planners job is, you have to look at all those things and say ok, what is the right solution for this circumstance that we are dealing with that will help the people now and also help those in the future. ...if you are really as a planner working in the public interest, are you doing all those other things, are you doing all those pieces and you put them into the pot and say for this issue that is before us, this is

the right planning decision and may pick on this piece and that piece and a little bit of that but maybe doesn't touch that other one at all. ...If you get the big picture figured out, you do it right then doing the details makes a lot more sense. Whereas sometimes people do detailed planning, which may look good for that detail but when you try to drive it up into the bigger picture you usually have a bunch of pieces that don't fit together (Paul).

Colangeli (2010) discussed how there is an "underlying planning ethos which assumes that all populations (can/should/must) be treated in a uniform manner" (Colangeli, 2010, p.3). Adam and Sebastian shared similar views stating that although each planning framework is often viewed independently, their fundamental principles are all the same, that we should be planning in a holistic way for everyone (Sebastian).

...the planning terminology changes and age-friendly is you know a relatively recent concept but it, you can trace it back to some of the other planning categories or whatever you want to call them whether it be universal design, healthy communities, sustainable communities, they all generally mean the same thing that we should be planning in a comprehensive/holistic way for everyone (Sebastian).

...there is definitely a lot of overlap between some of the planning paradigms right now particularly when you look at walkability and complete communities and I do see a lot of overlap because I think that the fundamentals are that we want to build communities that are for everybody and so making sure that our communities are age-friendly for the

folks that are getting up in their years, a lot of those same principles apply to the younger kids too, people of all ages and abilities (Adam).

Likewise, Peter viewed age-friendly community planning as inclusive to all age groups.

In my view, age-friendly community planning is not just seniors but all ages and if we want to be truly inclusive from a land use planning perspective, if you plan for seniors and you plan for our youth, young in particular, children and so on, is that in fact we plan for the whole community (Peter).

4.5: Supplementary Findings

In addition to the two primary research questions, a number of additional questions were asked during the interviews to get a better understanding of current AFC initiatives, their strengths and areas in need of improvement.

4.5.1: Diversity of Age-friendly Community Planning Initiatives across Ontario

One item that became very apparent during the interviews was the vast diversity of AFC initiatives across Ontario. Despite having some guiding documents from the World Health Organization and the Province of Ontario, age-friendly community plans are locally driven and align with the priorities and context of the local community. Age-friendly community planning initiatives differ considerably from community to community due to varying geography, demographics, social, economic and political conditions. The following paragraphs highlight the key variations among the AFC initiatives across Ontario.

Firstly, the planning professionals interviewed represented communities of all sizes from across Ontario, that were at different stages in the AFC planning process from establishing an AFC committee to implementing their AFC plan. Tyler, a planning consultant who worked on numerous AFC plans, explained how municipalities scoped their AFC initiatives differently, some viewed AFC as a municipal plan and focused on hard services, while others viewed AFC as a community plan and emphasized the soft services. Some communities followed the 8 dimensions of an AFC as set out by the WHO (Peter), while others tailored their categories based on their community's needs assessment (Adam, Carly and Laura).

Yeah, we didn't focus too heavily on the WHO although we were cognitive of them and we certainly ended up with categories that easily fit into the WHOs' 8 domains. So we were conscious of them when we were doing it but we really wanted to focus on having a really local plan that really identified the needs of our residents so we did a lot of public consultation which worked out really well and not surprising that I suppose, a lot of our categories, our key priority areas, reflect the WHO dimensions as well (Laura).

Furthermore, older adults do not represent a homogenous group; therefore, a one-size-fits-all approach to AFC planning is not possible (Cerde & Bernier, 2013). Since older adults experience the process of aging very differently, communities broke down the WHO's eight domains of an age-friendly community into priorities for three groups of older adults based on their physical abilities and service needs, rather than age (Adam, Alex, Tyler, Laura and Peter). Various terminology was used to describe the three groups, such as: go-go, slow-go, no-go, although Tyler cautioned using these terms, as older adults in the latter categories may find them offensive. The go-go category comprises older adults who remain physically active and

engaged in recreational and volunteering opportunities, and typically live on their own; the slow-go group characterizes those who require some level of daily support for activities of daily living and may soon move into a nursing home; and the no-go category includes older adults who require care 24 hour care (Adam and Laura). Tyler explained how the slow-go, some-go and no-go methodology originates from the University of North Carolina's master aging plans:

...slow-go, some-go and no-go that comes out of the University of North Carolina when they did a number of master aging plans and they established that methodology, the fact that you have three specific needs groups and all of our plans made use of that and it is an important way to go because each group has different characteristics. For example, I actually avoid the some-go, go-go and slow-go because in some ways some of the people may find it offensive if they are in one of the latter categories (Tyler).

By breaking the older adult cohort into these categories, municipalities were able to address a wide range of issues and include them all in their plans (Laura). Nevertheless, some communities identified challenges with including the no-go in their public consultation process, despite reaching out to service providers and local agencies to do the outreach (Adam, Brittany and Peter). Additionally, the surveys were said to be very long and challenging for those with lower literacy levels (Brittany). One of the bilingual communities in Northern Ontario noted the unique challenge of engaging those that do not speak English, specifically within the French community (Brittany). This is likely also a challenge for large metropolitan regions with very diverse populations.

4.5.2: Limited Involvement of Planning Departments in AFC Initiatives

Across Ontario, various departments have taken the lead on the AFC initiatives, such as: corporate services, community services, planning, social services, the public library or non-profit community organizations. Surprisingly, despite age-friendly community planning having such as large planning component, planners are often not involved in age-friendly community initiatives or play a minor role in the creation and implementation of the AFC plan. During the participant recruitment process 17 communities responded that they did not have any planners involved in their AFC initiatives. This number would likely be a lot higher, if we take into account the over 30 municipalities that did not respond to the invitation to participate. Paul questioned the lack of planning involvement and felt that it marks a big gap in AFC planning:

I think that it is a natural connection that planners are involved in this type of thing but what we are finding out is that, certainly nobody else in our city was doing that and the more we found out was that there really aren't many cities doing this and those that did, hardly had any planning involvement at all, which I just found shocking, it seems to be such a natural connection. ... but I kind of get part of it, there are always resource issues and we've got lots of things to do (Paul).

When asked whether planners should be involved in AFC initiatives, Paul noted the importance of having planners involved and how their specialized knowledge can help shape age-friendly community planning.

So I sit back and look at the skills that most planners that I have met in my career have, I think that they can do an offal lot of things and so when I look at something like an age-friendly committee, one I think that it is the socially and morally right thing to be

doing, so from the way that my parents raised me, helping people in that part of their life if the right thing to do, I can say the same thing about helping people that haven't had the good fortunes that maybe you and I have had, like some of the underprivileged people, those are the people that can really benefit from the knowledge that you and I have by using the education that we've got so therefore isn't it our obligation first as citizens and second as planner to go out there and try to help some of these groups out where they actually need help. So that's my long answer to say absolutely, I think planner have a role in this and they have an offal lot to contribute to this and do it with an open mind and an open heart, they can really make a big difference (Paul).

Planners are trained to work collaboratively with key stakeholders in order to design communities that look out for the best interest of the public, including older adults. Planners play a key role in building age-friendly communities, and unfortunately many communities do not take advantage of their skilled knowledge.

4.5.3: Are AFC Planning Initiatives Over-ambitious?

In his article, Goland (2014) discussed how AFC agendas are often criticised for their 'over ambitious' agendas and suggests that AFC initiatives must be prioritized in order to succeed under tight funding and resource constraints while ensuring that they do not overlap with other related programs and services.

Age-friendly-community-based programs must also respond to critics who argue that their agendas are over-ambitious and cannot adequately address all of the challenges faced by older people seeking to live active, productive and independent lives in their communities. That is, it is unrealistic for them to purport to offer aging-in-place

solutions that run the gamut from improving the walking environments of older people to ensuring that they have access to affordable rental housing and good-quality home-based support services (Golant, 2014, p. 15).

In order to validate this statement, planners were asked whether they found AFC initiatives over ambitious. Most planners described the AFC agenda as ambitious, yet felt that it was necessary in order to become truly age-friendly (Adam, Alex, Carly and Marie).

Yes, it is definitely cumbersome but in the same sense, in the same breath, you need it. If you don't tackle all of them, you are never going to get where you need to go so, I would rather it be overambitious than under ambitious (Alex).

they are pretty ambitious but I think that that is also a benefit because they are intended to be long term road maps and frameworks in which to advance the goals of becoming more age friendly ... so I think that they are probably ambitious by design so that you can look at the community and all decisions from an age-friendly lens, which I think is helpful for advancing the liveability in the community (Adam).

Brittany emphasized that AFC initiatives are particularly ambitious for small communities that do not have the financial capital or human resources necessary to tackle the AODA requirements, let alone age-friendly community planning.

Peter described it as a 'spaghetti issue' as one item leads to another; meaning that planners cannot address one item and think that they have tackled the issue. Rather it involves a multi-

pronged approach that requires coordination and team work among the various disciplines (Peter).

On the other hand, Chris, Sebastian, Brittany, Marie and Laura feel that AFC initiatives are not overambitious. Marie believes that all the elements of AFC planning are necessary in order to continuously improve conditions for the older adult population.

I don't think that they are overambitious ... I truly believe that some of those things keep moving, the bar keeps raising, ... I don't think that we will ever say that we have accomplished it all. And I think that that is my understanding of the way the WHO is looking at this, it's not like we get so far and that we have achieved it, you are designated as age-friendly because you are continually attempting to make that end. So I don't see them as being overly ambitious (Marie).

Although AFC plans can become overwhelming when the initiatives are not scoped appropriately, a number of planners indicated that they kept their endeavours manageable by narrowing down the 8 dimensions of an AFC as set out by the WHO into 4 to 6 key areas that are most pertinent to the needs of their community (Brittany, Carly and Laura). Alternatively, other communities elected to keep the original 8 dimensions but broke them down into manageable pieces and zeroed in to 1 or 2 key areas at a time (Paul). As explained by Tyler and Adam, AFC plans should be viewed as long term plans with short, medium and long range goals.

...people need to look at these plans as long term plans, they cannot say well we need to accomplish everything in the first year type of a thing but rather it's a journey rather

than a destination, I think if organizations look at it that way than they don't kind of freak out at the plan..., if you look at that plan and the implementation planning template it looks totally different, because things have changed, new things have carried on but the point is that they still have that plan or that template to anchor their planning as they move towards being a more age-friendly community (Tyler).

I think that is because the goals in our plan are very broad ranging from short, and medium and long term goals and so some of them could take a lot of time and effort in the community to bring to fruition, like bringing a walk-in-clinic in or establishing affordable housing and long term care facility which is lacking down here too so, I think that it is ambitious but it is necessary to focus the community efforts towards achieving those goals, which might bring them to fruition sooner than later. ...I think that for me they felt really ambitious but I guess that is a good thing in terms of making things happen in the community to focus all the stakeholder effort into achieving those goals rather than just sort of letting different groups approach it from their angle and it probably will avoid duplication in the long run (Adam).

4.6: Strengths and Weaknesses of Current AFC Initiatives

Planners were asked to discuss the strengths and weaknesses of their age-friendly community initiatives. This provided planners the opportunity to talk about their success stories and raise awareness of some of the challenges that communities across Ontario are facing in terms of developing and implementing AFC plans.

4.6.1: Strengths of Current AFC Planning Initiatives

4.6.1.1: Raise Awareness about Aging Issues

Planners indicated that there has been a lot of enthusiasm for AFC planning. It has brought the community together and helped raise awareness about aging issues within the community (Alex, Brittany, Chris and Peter).

I think that it brought the community together and raised awareness about aging issues in the community and helped to highlight where the community had some strengths and where there were weaknesses. So from a planning point of view it was a consultive approach meaning that the community had an opportunity to provide input right so that's a huge plus. We haven't as a community looked at how seniors felt in the community so it gave us that opportunity to see the community through the lens of an aging person. So from our experience, the whole project was very positive and at the end there were many strengths which includes a document with an action plan. So it brought people together (Brittany).

4.6.1.2: Political Acceptance of AFC Planning at all Levels of Government

Cerda and Bernier (2013) discussed the importance of gaining and maintaining long term political support from all levels of government for AFC projects. Although short-term initiatives can be easily addressed, long-term goals require political support (Cerda & Bernier, 2013). This support can take many forms, from establishing a steering committee, consisting of members of council, to providing financial assistance and resources.

Based on feedback from the planning professionals, AFC appears to be generally well received and supported by local councils across Ontario. Several planners discussed the support that they have received from their local council, including the financial support necessary to develop the plan (Alex and Laura). As indicated by Paul, “if you can get political support on something then it has got a chance of you know going a longer distance”. Although, the concept of AFCs has received political acceptance at all levels of government (Paul), many planners raised concerns over the lack of funding, which is further discussed in Section 5.4.2.1.

4.6.1.3: Benefits of a Bottom-up Consultation Process

In the literature, Cerda & Bernier (2013) discussed the need to empower older adults in the decision-making process in order to gain a better understanding of their specific needs and limitations. Several planners discussed the benefits of the bottom-up approach as it provides stakeholders and members of the community, including older adults, the opportunity to get involved throughout the planning process (Peter).

In some situations, the impetus for the plan came from community organizations that have a keen interest in helping the community become more age-friendly and are the driving force behind the AFC initiatives (Carly and Marie).

...we have this community group, ... who is incredibly committed ... they are actually the driving force for age-friendly planning and so that's a huge strength, so I think that if they didn't exist, if that group didn't exist, the city would not be pushing itself as much as it does because they are really the drivers and so I think that that is one of our strengths. (Marie).

...impetus for the plan definitely came out of the community, you know it was a community body that [city name] Council on Aging that first elected that this should be a priority here in [city name] and it is really driven by them in terms of energy and focus, they are the group that orchestrated applying for the Ontario Trillium Foundation grant that funds my position (Carly).

As indicated by Buffel et al. (2012), the involvement of older adults in the AFC planning process represents “a radical shift from producing urban environments *for* people to developing neighbourhoods *with* and *by* older people” (p. 609). Adam and Carly shared similar views stating that thanks to the bottom-up approach, AFC plans are the community’s plan, rather than municipally driven (Adam and Carly).

...they are very much community based and not so much municipally driven. The town was the driving force behind it but we definitely wanted to make sure that it wasn’t a plan that was municipally driven because of the huge, broad variety of stakeholders that are involved in the actual implementation of the plan. It’s not the municipality’s plan, it’s the community’s plan. So that was a big strength that came out of our experience and in order to do that we needed to have full participation from all the different sectors so we tried to do that as best we could and that was a real strength (Adam).

Although, the inclusion of older adults in the AFC planning process is viewed as one of the strength of current AFC initiatives, there remain challenges in engaging the ‘hard to reach’,

specifically those who are less mobile, socially isolated or require 24-hour care (Adam, Brittany and Peter). Some communities sought to address this issue by using the assistance of service providers to reach out to this segment of the population (Peter).

4.6.1.4: Benefits of Current AFC Resources

A number of participants discussed the benefits of the Age-friendly Networks that have been set up across Ontario by the Seniors Health Knowledge Network (Brittany and Marie). These groups get together periodically to discuss their success stories and challenges, and share information and resources. Several planners mentioned the support that they had received from the knowledge broker whose role is to connect communities to the appropriate resources (Brittany; Carly; Seniors Health Knowledge Network, n.d.)

4.6.2: Weaknesses of Current AFC Planning Initiatives

4.6.2.1: Lack of Funding and Resources

The lack of financial resources for age-friendly community initiatives is highly documented in the literature and was discussed in the interviews as the leading challenge for developing age-friendly communities (Adam; Alex; Andrew; Brittany; Carly; Cerda & Bernier, 2013; Golant, 2014; Marie; Paul; Peter; Sebastian). The fiscal constraints stem in part from the neoliberal dominance in urban planning in the 1990's which had significant policy implications for local governments (Allmendinger, 2013). Specifically, the decentralization and downloading of services from the federal government to the provincial government, and in turn from the provincial government to local municipalities, forced communities to reorganize their services as they struggled to balance their overstretched budgets (Allmendinger, 2013; Cerda &

Bernier, 2013). This downloading of services, without adequate funding, has left local municipalities struggling to implement their AFC plans (Cerde & Bernier, 2013).

Additionally, the AFC grants do not provide long-term solutions to implement AFC initiatives (Cerde & Bernier, 2013). Golant (2014) expressed concerns over the future of age-friendly community programs when their funding terminates and questioned whether they will end up becoming temporary solutions.

Most of the communities interviewed obtained a grant through the Ontario Seniors' Secretariat or the Ontario Trillium Foundation (Andrew, Tyler; Ontario Seniors' Secretariat, 2015; Laura). Thanks to the funding, most municipalities were able to retain a consultant to assist in the creation of the AFC plan (Marie, Peter). In addition, some communities were successful in piecing together funding from other organizations or, in some instances, the municipality was able to fill the gap (Adam, Laura and Marie). In some cases, the AFC endeavours would not have been possible without the hard work of dedicated volunteers (Marie and Paul). Those who did not receive any funding had to prepare the plans in house which limited the scope of their AFC initiatives (Alex).

A number of municipalities indicated that they would not have undertaken any AFC initiatives had they not received the funding (Adam and Peter). Adam stated: "...we got a grant from the Trillium Foundation and that was helpful. We probably wouldn't have embarked on it at that point without that grant" (Adam). Similarly Peter noted: "And again without the funding from the province to move forward with this age-friendly community planning, we ourselves would not have necessarily gone forward with that" (Peter).

...so had the grant not come about, we would probably not have allocated budget monies towards a project like this, so the grant really was a catalyst for the town to do this work. Not that it didn't need to be done but it was not necessarily on our radar as a priority (Adam).

...the County overall received the funding from the province which frankly if we didn't receive the funding we wouldn't have been doing this study frankly but with our... having those dollars available to us, the better part of \$35,000 was available to move forward with this specific project which I think has been very beneficial (Peter).

Others indicated that they would have still carried out their AFC initiatives without the funding; however, they would have had to limit the scope of their endeavours (Andrew, Carly and Marie). Particularly, a few planners indicated that it would have impacted the extent of their public consultation process (Carly). When asked whether her community would have undertaken the AFC work without the funding, Carly highlighted how the grant funds her position and responded:

...in theory yes they would have, the program would have looked different for sure, it would not be as comprehensive as what we are doing... would not have been possible without the funding for sure so I think that there would have been a desire to still do the work but the program would have looked very different (Carly).

The major shortcoming for funding lies in the lack of funding available to fully implement AFC initiatives (Alex; Andrew; Carly; Cerda & Bernier, 2013; Laura; Marie; Paul; Peter). In

most cases, the original funding received was sufficient for creating the plan, now communities are struggling to find the resources to implement these initiatives.

...the biggest challenges is going to be competing for resources to get the implementation pieces done. Writing where you are and where you want to be is maybe the easier part of it, the things that actually require actual dollars for either new programming or for infrastructural changes, that sort of thing, is systemic changes, those are things that, that is the challenge, that will have to compete for resources with all the other areas that are seeking funding to do things (Andrew).

...need to tie funding that is coming for planning with funding for implementation. There is a lot of money that is going into funding planning initiatives right now through the most recent round of the Ontario Seniors Secretariat funding was mostly geared towards planning and there is lots of funding out there as well that can be used to implement specific programs ... but it is up to the people in charge of the programs to make the link as opposed to making sure that when you are funding a program to develop a plan there is also built in budget for implementing some actions (Carly).

Marie and Paul noted that even a strong AFC committee is going to struggle due to a lack of resources and funding.

Yeah, dollars and resources are always going to be the biggest challenge for just about everything that you want to try to bring in. It is one thing to have political will power, it's another thing to have people saying it's a good thing, it's another thing to build it into policy, but if you actually don't have the money which in most cases is also the

staffing, to physically do the work and make it happen and if you are just dependent on the good heart of volunteers to do it, we tried that with our age-friendly committee parts worked well and other parts failed terribly because the volunteers either got in over their head or they didn't have the time or it was just something that really needed to be done by full-time professional staff who have expertise in certain areas (Paul).

One of the planning consultants interviewed highlighted the need to scope the initiatives according to the finding received.

Yeah the funding on the plans ranged from around \$20,000 to around \$50,000 wasn't it, and we did projects on the top and bottom end and funding was not an issue and as I said, every one of our projects we brought in under budget. The issue was simply making sure that we scoped the project accordingly and so in the projects that had a higher level of funding... we simply scaled our methodology accordingly. ... people keep saying oh we can't do it because of funding but you look at what you've got and you make it work (Tyler).

4.6.2.2: Challenge Maintaining Momentum throughout the Implementation Process

Another major challenge for planners is maintaining momentum to implement actions once the plan has been created, especially if those actions are not supplemented with some kind of government funding (Adam, Alex and Brittany). As indicated by Alex, creating the plan is the easy part, the challenge remains maintaining interest throughout the implementation process.

My biggest concern is always whether or not there is still going to be that interest. So there is always interest at the start to have people come in and form an actual plan and

get things going but when it comes to the implementation side of things, people start to waiver and lose interest, that type of thing so making sure that you still have the committee, making it a priority to see these things implemented (Alex).

AFC plans are developed as a living document with short, medium and long term goals that change and evolve as the community advances towards becoming more age-friendly. The short and medium term goals are often quick and easy to implement; yet, it is more challenging to maintain momentum throughout the implementation of the long-term goals that require more time and resources to implement.

...sustaining momentum for the project is a challenge and like sustainability of the plan so the way that our plan is positioned is that it is a living document, there are short, medium and long term goals and it is intended to shift over time what the priorities might be, that is one of the focuses that the implementation committee will have, is to identify priorities and determine what we focus on first because it is incredibly board, there is a huge amount of work that will go into implementing a plan. The way that it is positioned is such that it is a road map basically, where we would like to go. So ensuring that there is continued momentum, that over the years, I think will be a challenge (Adam).

One of the planning consultants recommended developing an implementation plan that identified mid-level strategies and potential organizations to carry them out, which helps prevent the municipality from getting bogged down due to budget constraints. (Tyler).

4.6.2.3: Lack of Awareness of Current Programs and Services

Andrew, Peter, Tyler and Laura identified a lack of awareness of services already being provided in the community (Laura). Andrew highlighted the importance of examining current initiatives to establish natural alliances and rebrand programs and services that are already in place, rather than duplicating or starting from scratch. Communities may already be working on initiatives that can help a community become more age-friendly yet they are simply labelled under a different umbrella (Andrew). Part of age-friendly community planning involves educating the public and raising awareness of programs and services that are already being offered within the community and promoting them (Peter). Andrew recommended doing an inventory of current programs and services and, build on existing initiatives, rather than starting from scratch and risking redoing something that has already been done.

...if you can actually do a good inventory of what you are already doing and build on the things that you are already doing or identify natural alliances around your organization, those things tend to be more successful than those that don't. Those that think that think they just invented or just discovered one issue, tend to one what a harder time getting resources but also don't take advantage of things that are already in place that they just need to build on, and try to start from scratch (Andrew).

...you know what are some of the things that we are doing and bringing it to people's attention, when you are communicating on age-friendly community, what does it look like, what are you doing, reminding them what we are already doing, so that they don't say start doing this, start doing that and someone starts working on something that is already done, so that, I may be clogging a dead horse here but that is really really

important when you are rolling something out, new or partially new, but there may be a lot of things that you are already doing that are kind of already supported but it's just rebranded or under some other umbrella (Andrew).

4.6.2.4: Which Level of Government should be responsible for AFC Planning?

The interviewees presented conflicting views with regards to which level of government should be responsible for developing AFC plans, whether county wide/regional plans or local level plans. Some planners support a county wide plan (Tyler and Marie); whereas others feel that it is best left to the local municipalities due to the unique characteristics of each community (Adam and Paul).

If you had a city of 20,000 you are just not going to have those choices so I think that your comment is a good one that you might want to build that into your research is: how do you create a solution to various problems out there when the problem changes from city to city to city because of the geography of the city, the size of the city, the socio-economics of the city, all those are such variables that you are trying to sometimes with these provincial and federal statements try and almost put these blanket coverings over them all, when I really think that it needs to be locally driven (Paul).

Many arguments have been made to support locally driven initiatives due to the large diversity in the aging population. As stated by Cerda & Bernier (2013): "Municipalities need to consider all dimensions of diversity in the aging population, as they will need varied strategies depending on demographics, location, region and socio-economic differences" (p. 3). Cerda & Bernier (2013) even recommended a neighbourhood-based approach in medium and large sized cities in order to recognize the local diversity.

It became apparent during the interviews that some lower tier municipalities work well with their upper tier counterpart, while others lack communication and collaboration which has caused the duplication of services (Tyler). For instance, Tyler illustrated how in one County, the local municipalities each developed their own AFC plan independently of the County, which had also created its own plan, yet none of the plans were linked.

We were planning in very small geographical silos... the only way to get any kind of critical mass in AFC services is to look at the 3 [communities] ... different consultants were awarded the contracts and they all did slightly different approaches without linking (Tyler).

In addition, there is the challenge of geographic coordination, as residents can easily cross over boundaries to benefit from programs and services in other communities (Tyler, Marie and Peter).

So, a lot of people that live in the county, go into [the city] for services ...the community response absolutely needs to be together in my mind and that is the way that it has been handled. The municipality, you know municipal direction as to where you got to put energy, that has got to be separate (Marie).

Andrew discussed the importance of separating initiatives in a plan under a multi-layered government system into items which you have a lot of control over, those that you have less control over and those that you have virtually no control over. Local governments may have mandate over certain areas of jurisdiction, yet other items such as housing may be regulated at the regional level and funded by the provincial and federal levels (Andrew).

4.6.2.5: Lack of Coordination between the Upper Tier and Lower Tier Municipalities

Three planners identified a lack of coordination between the lower tier and upper tier municipalities (Adam, Tyler and Paul). Their views varied considerably, which emphasizes how some communities work better together than others. Paul and Adam discussed the need for local level AFC plans as each community has their own distinct needs, whereas Tyler advocated for a broader geographical approach. Tyler recommended that communities pool together their funding to create a regional or county wide plan.

...it would have been interesting to have some people pool the funding ... and done a region wide plan that would have, I believe, worked a whole lot better. And similar with some other plans in the province where you have municipalities that were oftly close that perhaps should have been not looking at a municipal plan but looking at more of a county plan. I know that there is a lot of politics around that. ... it is just a question of scoping the methodology to the funding available (Tyler).

However, Marie indicated that municipalities that work together actually receive less funding than those that work separately.

4.6.2.6: Challenges Implementing AFC Initiatives that are not mandated in Provincial Policy

Several interviewees noted the challenge of implementing AFC plans as they are not mandated in provincial policy (Adam, Carly and Chris). Since AFC endeavors are optional, they are often not considered or put on hold in favor of other initiatives (Adam and Chris). Therefore, planners are struggling to implement AFC initiatives without the backing of a higher authority, making it challenging to bring about significant change (Carly).

...no real power basis for the recommendations so I am not in a position of any authority in terms of the people that I work with and yet the recommendations of the age-friendly community plan in some cases will be trying to suggest how some people's work will get done... making sure that we have the buy in up front before we put forward the recommendation. So, it is that build in the buy in earlier in the process as opposed to if we were in a position with a provincially mandated plan we could just go ahead and say that these are the things that you have to do now go and do them (Carly).

...enforcement and the accessibility of having things that point to legislative requirements to implement those planning initiatives is difficult ... you can have a guideline but if there is no legislative requirement to do it, I don't think that people are as promptly ready to do it, like if it is not in the planning act or in another form of act it is kind of difficult... unless there is something legislatively put into place to back up these thoughts, it would be tough for us to have anything to stand on if council says, well we would rather go this way and go with new development rather than thoughtful development for the aging population (Chris).

4.6.2.7: Additional Challenges for Rural and Remote Communities

As evidenced in the literature and interviews, small and remote communities face a number of additional challenges in their quest to become age-friendly (Adam, Alex, Brittany; Cerda & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; Laura, Peter). As indicated by Cerda & Bernier (2013), the growth rate of those 65 and over

varies considerably from region to region. Although urban areas are growing at a faster rate than rural communities, the population is aging quicker in rural and remote communities (Cerde & Bernier, 2013). According to the Federal, Provincial and Territorial Ministers Responsible for Seniors (2007), approximately 23% of older adults live in small communities. These high numbers have a number of policy implications for rural communities. These communities often lack public transportation and rely on volunteer drivers, who are aging themselves (Cerde & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007). Older adults' mobility has a large impact on their ability to remain independent and actively engaged within the community (Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007). These communities have limited housing stock available for the aging population and lack home care services to assist older adults who wish to age-in-place (Cerde & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007). Older adults in these communities lack access to health care services and are often required to drive long distances to health-care facilities, which becomes particularly challenging when older adults lose their ability to drive (Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007).

Many of these small communities struggle to simply meet the AODA requirements, let alone plan for an aging population and therefore require additional funding.

...those [AODA requirements] are extremely cumbersome for a small municipality and they just keep getting more strict, not that I say that that is a bad thing but it is a great thing that they are taking these things into consideration but if you want to have small

municipalities abide by those rules than there has to be a certain amount of allotted money to help us out with it, because we can't get there with our tax base (Alex).

Those who did receive funding indicated that it was not sufficient to hire a consultant due to the high travel cost for flying out a consultant to their rural and remote community.

... the funding grant was capped at \$25,000, so you can imagine when you are in a small remote community, especially in Northern Ontario, that that funding is not sufficient particularly if you have to hire a consultant. So, we had to hire a consultant who was more familiar with this type of initiative and pay travel fees in our budget could easily be eaten 30% by travelling costs, ... So, the funding really limited the scope of the initiative (Brittany).

4.7: Conclusion

This chapter presented the findings from the literature review, policy document analysis and in-depth interviews. This study revealed that there is an overlap between age-friendly community planning and established planning frameworks, particularly in the areas of outdoor spaces and buildings, transportation and housing. Planners viewed this overlap as policy alignment as these policies support and reinforce each other. The concept of a comprehensive planning framework that incorporates age-friendly community planning principles and established planning principles was generally approached with caution. Most planners expressed concerns over the feasibility and challenges associated with creating such an initiative, while others emphasized that planning should be comprehensive by nature and include everyone.

A number of supplementary findings were uncovered through the in-depth interviews with planning professionals. These findings provided key insight into the strength and weaknesses of current age-friendly community planning initiatives across Ontario and formed the basis for many of the recommendations put forward in the Discussion and Conclusion Chapter.

The following chapter, Discussion and Conclusion Chapter, provides an analysis of the key themes that emerged from the study's findings. In addition, the following chapter discusses the study's contributions and research limitations, provides recommendations for planning practice, proposes areas of future research and presents the overall thesis conclusions.

Chapter 5

Discussion and Conclusion Chapter

5.1: Introduction

This chapter provides a detailed analysis of the dominant themes that emerged from the findings presented in the previous chapter and discusses their implications for planning practice. Based on these discussions, the researcher proposes a number of recommendations for future research and planning practice. In addition, this chapter explores the study's contributions and research limitations, and presents the overall thesis conclusions.

5.2: Discussion of the Key Findings

5.2.1: Overlap Between Age-friendly Community Planning and Established Planning Frameworks

As evidenced through the literature review, policy document analysis and interviews, there is an overlap between age-friendly community planning and the seven selected planning frameworks, specifically: Smart Growth, transit-oriented development, universal design, accessibility planning, healthy communities, sustainable communities and New Urbanism. Certain frameworks, such as accessibility planning share more commonalities, which is as expected considering that one of the key features of AFC is to promote accessibility. Certain dimensions of AFC planning, specifically those that address the built environment, share more commonalities with established planning frameworks than those that deal with the social environment; these include: outdoor spaces and buildings, transportation and housing. This is

not surprising considering that one of the key characteristics of AFC that makes it unique from other planning frameworks is the inclusion of the social environment. Age-friendly communities acknowledge that the social environment is equally as important as the built environment in promoting older adult health and wellbeing.

In addition to the seven planning frameworks previously identified in this study, complete communities was identified as an additional planning framework that shares a number of similarities with age-friendly community planning. Complete communities was not originally included in this study; however, the concept of ‘complete streets’ had been identified by Golant (2014) for its similarities with AFC. Nevertheless, he did not provide any additional commentary to explain in what ways and to what extent they overlap:

“We often find that some of the most visible initiatives are remarkably similar to — indeed, are not easily distinguished from — other well-known community-based initiatives. These include Congress for New Urbanism, Smart Growth or sustainable communities, universal design, walkable communities and complete streets.” (p. 7).

The concept of ‘complete communities’ merits additional attention as it was mentioned by four planning professionals for its commonalities with AFC.

As discussed in the Findings Chapter, complete communities have garnered attention from planners across Ontario since it was mandated in the Growth Plan for the Greater Golden Horseshoe (Ontario, 2013). Communities have since adopted policies in their Official Plans and Zoning By-laws to promote compact, mixed-use developments that provide a wide range of housing options, employment opportunities, shops and services, access to public transit and

promote walkability. These characteristics are shared with age-friendly community planning, as they become particularly important to older adults who lose their ability to drive, yet wish to maintain their independence and age-in-place.

The Province of Ontario has recently updated their Growth Plan for the Greater Golden Horseshoe (Ontario, 2017), which took effect on July 1, 2017. It is important to note that the definition of complete communities has changed since the last office consolidation was published in June 2013. Complete communities are now defined as:

“Places such as mixed-use neighbourhoods or other areas within cities, towns, and settlement areas that offer and support opportunities for people of all ages and abilities to conveniently access most of the necessities for daily living, including an appropriate mix of jobs, local stores, and services, a full range of housing, transportation options and public service facilities. Complete communities are age-friendly and may take different shapes and forms appropriate to their contexts” (Ontario, 2017, p. 69).

The last sentence is particularly important, as the definition has been modified to indicate that complete communities are in fact age-friendly. The whole concept of promoting complete communities that are age-friendly, comes back to the notion that age-friendly communities are often viewed as a lens, hat or filter that is applied to other planning approaches. In other words, if communities are seeking to make their communities complete, as mandated in provincial legislation, they are in fact promoting age-friendly developments.

One of the recommendations put forward in this thesis is that additional research is needed to further investigate the similarities and overlap between age-friendly community planning and

complete communities. More specifically, are age-friendly community planning principles best utilized as a lens that is applied to complete community endeavours?

The overlap between the planning frameworks raises a number of questions. Specifically, what are the implications of the overlap between AFC and established planning frameworks for planners and policy makers who are seeking to incorporate AFC planning into public policy? Has the overlap resulted in duplication of services or the diversion of effort away from the pursuit of competing priorities as they are all seeking funds from the same source?

In the literature, Miller et al. (2011) suggested that the overlap “may be perceived as duplicating effort or possibly as diverting effort away from the pursuit of other competing priorities.” (p. 5). Similarly, Cerda & Bernier (2013) concluded that “better coordination among initiatives is needed so as to avoid duplication and make the best use of resources.” (p. 13). When asked whether the overlap between the planning frameworks has led to duplication, the planners’ responses varied significantly from community to community. Some municipalities have been successful in avoiding duplication by promoting strong communication and coordination; whereas, others have acknowledged that they have duplicate programs and services, and are seeking ways to integrate and align where possible. One planner indicated that her community was successful in avoiding duplication by using the various planning frameworks to support each other, particularly in terms of rational for funding. Another planner highlighted how the duplication of programs and services is not a function of the size of an organization but rather a result of the internal processes and training; therefore, through good business planning and strong communication, communities can

alleviate duplication and avoid competing policies. On the other hand, a few planners indicated that since their resources are so limited, there is little duplication as they have to strategically allocate their money and they are continuously seeking ways to cut costs and improve efficiencies.

A number of strategies can be employed in order to avoid the duplication of programs and services. First of all, communities must take an inventory of all their current programs and services and evaluate whether any of their current initiatives coincide with their proposed AFC initiatives and whether they can be revamped to better accommodate the aging population. Communities may already be working on initiatives that can help a community become more age-friendly yet they are simply labelled under a different umbrella. In this case, communities simply have to raise awareness and/or rebrand their existing programs and services, rather than starting from scratch.

One of the recommendations put forward in this study is the need for better communication and coordination among the upper and lower tier municipalities specifically for those that have established an AFC plan at both levels, in order to ensure that they are not duplicating their efforts. It became apparent during the interviews, that in some counties/regions, the upper tier and lower tier municipalities have both developed AFC plans yet, due to lack of communication and coordination, these plans overlap and in some cases conflict. Through better coordination, these plans could eliminate duplication and seek efficiencies by harmonizing the plans.

The planning professionals do not believe that the selected planning frameworks present conflicting priorities, rather they view the similarities as policy alignment or policy linkage, as the frameworks reinforce and support each. Alternatively, several planning professionals suggested that AFC is viewed as a subset of other planning frameworks rather than its own distinct planning paradigm. Many planning professionals referred to an AFC ‘lens’, ‘filter’ or ‘hat’ that is applied to other planning approaches rather than its own distinct planning paradigm. As such, planners would look at the community and all their planning decisions through an age-friendly lens. As discussed earlier, the Growth Plan for the Greater Golden Horseshoe (Ontario, 2017), confirms this view by indicating that age-friendly design is one of the characteristics of a complete community.

5.2.2: Is there Merit in Working towards a Comprehensive Planning Framework?

Due to the overlap between the planning frameworks, Cerda & Bernier (2013), Colangeli (2010), Golant (2014) and Miller et al. (2011) recommended that AFC initiatives be combined with other programs with common goals or policies from other approaches with competing priorities, as joint initiatives would: avoid duplication, ensure more efficient use of resources, establish broader and more cost effective strategies, and result in funding and organizational collaborations. As a result, this study sought to determine whether there is value in working towards a unified planning framework that incorporates age-friendly community planning principles and established planning principles.

In the initial stages of this research, the original plan had been to develop a comprehensive planning approach that combined principles from AFC and the seven selected planning

frameworks with overlapping initiatives and competing priorities, and ask the planning professionals to assess the draft framework during the interviews. The proposed comprehensive planning framework would have been similar to the wise growth model proposed by Colangeli (2010) which incorporated elements from newer planning models, specifically Smart Growth, New Urbanism, sustainable development and healthy communities, with key principles from the field of gerontology to develop more age-friendly communities. The researcher drafted a draft comprehensive planning model, along with a series of radar charts to illustrate the degree to which each of the selected planning approaches addressed each component of the proposed planning framework; however, this task was incredibly difficult due to the sheer volume of principles that had to be integrated into one all-encompassing framework. Additionally, there were problems with quantifying the findings in order to illustrate the findings in the radar charts. Due to these challenges, the focus then shifted to determining whether planners found merit in working towards a unified planning approach that incorporates AFC planning principles and established planning principles.

It became apparent during the interviews, that concept of a comprehensive planning approach may not be the most suitable way to address the overlap between age-friendly community planning and established planning frameworks. Most planning professionals expressed similar concerns that it would be too difficult to establish a comprehensive approach for a number of reasons, particularly: the sheer size of the framework, the diversity of community contexts, the challenges associated with public participation and the difficulties coordinating the various stakeholders and jurisdictions.

Several planners indicated that a comprehensive planning approach would not account for the diversity of the community contexts. As discussed in the Findings Chapter, AFC initiatives vary considerably from community to community based on the social, economic and political conditions, demographics, size and location of the municipality. Policies that are successful in a large municipality may not be effective in rural and remote communities due to their unique challenges. As a result, it would be challenging to develop a comprehensive planning approach at the provincial level that is broad enough to account for the diversity of local needs, yet detailed enough that it is not simply a series of motherhood statements.

A number of planning professionals expressed concerns that the task of developing a comprehensive planning approach would be too overwhelming due to the sheer size of the document, making it unmanageable to develop and update, and that they would end up breaking it down into manageable sections. Although a number of planning professionals referred to a comprehensive planning paradigm as a 'document', it is important to note that a planning paradigm is not a document, rather, it is an abstract notion of how to plan or design a community. Nevertheless, a planning paradigm consist of a number of key principles which form the basis for policy recommendations, which in turn are contained within a document. Given the exhaustive nature of all the planning principles which form the basis for the selected planning paradigms, the planning professionals expressed concerns that if they were all brought together, the resulting policy would be enormous. That being said, the researcher believes that the point of doing a synthesis and grouping all the planning paradigms into a single comprehensive planning framework is to eliminate the redundancies; thus, making the resulting policies more concise. As a result, the researcher believes that the resulting

comprehensive planning framework would likely not be as large as the planning professionals suggest.

Others, pointed to the challenges of with regards to the public consultation process for the creation of a unified planning approach, due to the sheer number of jurisdictions (local, county/regional, provincial levels) and stakeholders involved in the decision-making process. The planners indicated that they would end up breaking down the consultation sessions into smaller groups based on the range of public consultation techniques required to effectively target each group and the variety of interests, as stakeholders are typically only interested in specific aspects of a plan.

Despite not supporting the concept of a comprehensive planning approach, several planning professionals noted the importance of being mindful of the other frameworks to ensure that all the plans are pulling in the same direction and not talking at cross purposes. Some planners suggested that increased communication and coordination is more important than joint policies; and good business planning is required to avoid duplication or competing priorities and improve efficiencies. As discussed in Cerda & Bernier's article (2013), communities should seek collaborations with local community organizations and government agencies, as similar programs may already be in place that share common goals with age-friendly community planning.

On the other hand, there were some planners that believed that planning should be comprehensive by nature, meaning that regardless of the planning approach, planning should

seek to meet the needs of all members of the community. This means that by definition, all planning frameworks should be age-friendly. This point merits the distinction between developing a comprehensive planning framework which incorporates principles from multiple planning paradigms, and planning comprehensively, meaning that all planning decisions, regardless of the approach, should be seek to address everyone's needs.

One planner indicated that if communities are making special efforts to make initiatives age-friendly, than they have not been doing the planning process correctly. Rather, he suggests that planners should not be focusing on one planning approach over another as it can become overwhelming for municipal councils that are seeking to balance everyone's needs. Paul expressed concerns that planners lose sight of the big picture when they break down strategies into smaller components. He suggested that planners look at the planning frameworks as a whole and determine based on the circumstances which items from each planning approach is best suited to meet current needs and equally those of future generations.

5.2.3: Planning should be comprehensive by nature and include everyone

A dominant theme that came up a number of times throughout the literature review and interviews, is that planning should be comprehensive by nature and seek to improve the lives of those of all ages. For instance Cerda & Bernier stated: "an important element in a successful initiative is having a strategy that accommodates not just seniors but the whole community. A comprehensive seniors' strategy will benefit people of all ages and will gain the support of the community" (p. 4). Kalache (2016) indicated that: "an age-friendly city or community or any other age-friendly project is, by nature, friendly to all ages" (p. 77), and the

Federal, Provincial and Territorial Ministers Responsible for Seniors, (2007) stated: "...many of the features that benefit older adults can also benefit other groups in the community. A community that works for seniors works for everyone" (p. 10).

The World Health Organization's AFC guide and associated checklist are geared specifically towards older adults, yet, the benefits of age-friendly initiatives extend well beyond the older adult demographic:

...it should be normal in an age-friendly city for the natural and built environment to anticipate users with different capacities instead of designing for the mythical "average" (i.e. young) person. An age-friendly city emphasizes enablement rather than disablement; it is friendly for all ages and not just "elder-friendly" (WHO, 2007, p.72).

Age-friendly communities seek to establish more functional and inclusive, built and social environments that improve the quality of life of all members of society. Changes made to accommodate the needs of older adults can also benefit people of all ages and abilities, including older adults, parents with young children, injured and disabled people (Adam; Cerda & Bernier, 2013; Colangeli, 2010; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; Golant, 2014; Kalache, 2016; Ontario, 2013; Paul; Peter; World Health Organization, 2007). For instance, pedestrian friendly sidewalks, walkways and trails sought to improve age-friendliness, may be achieved by ensuring that there are: dropped curbs to road level, no cracks in the sidewalks and plenty of outdoor seating. These changes can promote physical activity among people of all ages, fitness levels and functional abilities who all share common needs, including: parents with strollers, kids riding bikes, as well as older adults with walkers or wheelchairs.

A number of scholars and planning professionals quoted the geriatrician, Bernard Isaacs, who stated: “Design for the young, and you exclude the old; design for the old and you include everyone” (Miller, Harris & Ferguson, 2007, p.20). Adam mentioned that there is a non-profit group based out of Toronto called Eight Eighty Cities that’s mission is to improve the quality of life of people living in cities. Their vision statement reads: “We believe that if everything we do in our public spaces is great for an 8 year old and an 80 year old, then it will be great for all people”(8 80 Cities, n.d.). The principle behind their name is that if you can plan for a city that is comfortable and safe for an eight year old as well as an eighty year old than you have planned a place where everybody is safe and comfortable (Adam).

The concept of planning for all ages and abilities is consistent with the underlying concepts of universal design, which seeks to design spaces that are flexible, adaptable and interchangeable in order to meet everyone’s needs (Lid, 2014). It also resembles the life-course approach in gerontology, which is a longitudinal approach to policy design that is predicated on the notion that communities should be designed for the entire life course, rather than focusing on specific age groups (Colangeli, 2010; Cerda & Bernier, 2013). As stated by Cerda & Bernier (2013):

“...using a longitudinal, life-course approach to policy design, as opposed to orienting it around chronological age, would improve the quality of decisions. A longitudinal, life-course model takes a long-term view of an individual’s characteristics and his or her trajectory. It accounts for not only chronological age but also how relationships, life transitions and social changes impact life.” (p. 3).

In order to obtain more funding and resources, the researcher believes that planners and policy makers should market age-friendly initiatives as friendly for all ages. Communities may be able to obtain more funding if governments and funding agencies recognize that the benefits will extend well beyond the older adult cohort and benefit people of all ages.

5.2.4: Lack of Planning Involvement in Age-friendly Endeavours

One of the surprising findings from this study, is the lack of involvement of planning departments in AFC initiatives which became apparent during participant recruitment stage in this research. This study employed a purposive sampling strategy to target planning professionals who are directly involved in AFC initiatives. The reason for selecting planning professionals as opposed to other members of AFC committees, is due to their specialized knowledge of established planning frameworks and their ability to speak to the apparent overlap with AFC. Unfortunately, participant recruitment was incredibly challenging due to the limited number of planners involved in AFC initiatives. Despite the fact that there are over seventy communities across Ontario that have established age-friendly community initiatives and were invited to participate in this study, only thirteen planning professionals took part. Seventeen communities responded that they did not have any planners involved in their AFC initiatives and this number is likely a lot higher if we take into account the over 30 municipalities that did not respond to the invitation to participate in this study.

This lack of planning involvement has significant implications for AFC endeavours and raises a number of questions, particularly, how can communities be working on AFC initiatives

without the participation of planning professionals when most of the initiatives are planning related?

Across Ontario, various departments have taken the lead to develop and implement AFC plans, including: corporate services, community services, planning, social services, public library and non-profit community organizations. Of the thirteen planning professionals interviewed, their roles and responsibilities varied considerably from developing the AFC plan, to member on the AFC committee. In several cases, communities did not have the resources required to develop an AFC plan and had to hire a planning consultant to prepare the plan. Then, what happens during the implementation stage, when a steering committee has been established to implement the initiatives and planners are not involved to follow through and reassess the community's needs? Are the public library and volunteers from non-profit organization adequately trained for this task? As stated by Paul: "AFC is something that should be done by a professional who has expertise in the area, and not leave it up to volunteers who may be in over their head".

Planning departments' limited role in AFC planning can be attributed to a number of factors, particularly, limited human resources and funding. Some communities are simply not able or not willing to pay for planners to be involved in their AFC endeavours. As a result, one planner volunteered his time on the AFC committee due to his keen interest in improving his community's age-friendliness (Paul). Similarly, several of the planners interviewed, were quite passionate about AFC planning and put a lot of work into keeping the initiatives alive. Nevertheless, through discussions with planners it became evident that they are all very busy, and as a result, AFC often falls to the back burner as it is not mandated in provincial

legislation. This raises a couple policy recommendations which will be further discussed later in this chapter, namely: 1) legislating AFC into provincial legislation so that it comes to the forefront of planners' duties and responsibilities; and 2) ensuring greater involvement of planning professionals in AFC initiatives.

There are a number of reasons why planners should be involved in AFC endeavours. Firstly, age-friendly community planning has a large planning component from planning transportation networks to designing outdoor spaces, and therefore it seems like a natural connection to have planners involved. Secondly, planners have specialized knowledge, through their education and training, to help shape age-friendly community planning. Additionally, planners are skilled to work collaboratively with key stakeholders in order to design communities that look out for the best interest of all members of the community, including older adults. Furthermore, planners play a role in shaping how politicians think. Planners understand the context within which politicians work and they can frame an issue in such a way to ensure that it obtains the political attention that it merits.

Planners play an important role in building age-friendly communities, and unfortunately many communities do not take advantage of their skilled knowledge. As indicated by Paul, the lack of planning involvement marks a big gap in AFC planning. Consequently, this study advocates for greater involvement of planning professionals in age-friendly community planning initiatives.

5.2.5: Supplementary Findings

During the interviews, the planning professionals provided key insight into the strengths and weaknesses of current AFC endeavours. These insights formed the basis for many of the recommendations put forward in this chapter. The researcher recommends building on the strengths of current AFC initiatives and addressing the challenges through policy interventions or alternative approaches.

Over seventy communities across Ontario have developed and implemented age-friendly community plans (Senior Health Knowledge Network, n.d.). These communities have been successful in raising awareness of aging issues and helped overcome ageist attitudes. Thanks to a bottom-up participatory approach, communities have been successful in empowering older adults through all stages of the AFC planning process. This allows planners and policy makers to gain a better understanding of their specific needs and limitations. Through discussions with the planners, a number of challenges were brought forward that hinder the development of age-friendly communities. The following two sections focus specifically on two major challenges, namely the need for additional funding to implement AFC strategies and a look at the additional challenges faced by rural and remote communities. The other challenges that were discussed in the Findings Chapter were integrated in these two sections. These challenges form the basis for the recommendations presented later in this chapter.

5.2.5.1: Additional funding is required for implementation

One challenge that came up a number of times throughout the interviews is the lack of funding for age-friendly community planning. Although a number of communities were successful in

obtaining funding through the Ontario Seniors' Secretariat or the Ontario Trillium Foundation to prepare their AFC plan, many communities are now struggling to find the financial resources and human capital necessary to implement their AFC initiatives, particularly, the long term, large scale endeavours. Several communities were successful in implementing the low costs initiatives, but now find that their AFC plans are losing momentum as they struggle to find the resources to continue in their pursuit of age-friendliness, so now what?

First of all, it is important that communities establish goals that are realistic for the community, meaning that communities have to scope their AFC endeavours according to their available funding and resources. Secondly, Tyler recommended that communities develop a detailed implementation plan that outlines the goals, breaks them down into strategies and identifies the potential organizations that could carry them out; thus, dissipating the problem of funding. By partnering with community organizations, the municipality will not get bogged down with budget issues as they will not be required to come up with all the funding necessary to implement the plan. Rather, a number of community organizations will work together to oversee and fund the implementation; therefore, sharing the implementation costs among organizations. Tyler also recommended appointing a committee responsible for overseeing the implementation of the plan and ensuring that the project does not lose momentum. For the reasons discussed above, the researcher recommends appointing planner(s) on this committee to ensure that the committee adequately addresses the planning components.

Additionally, a number of the initiatives may already be in place, merely disguised under a different umbrella. As a result, communities may simply have to identify the overlapping

strategies and align their age-friendly endeavours with similar initiatives. For instance, a community may already be working on an affordable housing project and simply look at incorporating older adults into their plans.

In order for planners and policy makers to receive the funding and support necessary to advocate their AFC programs and services, the researcher recommends that the Provincial government legislates age-friendly communities into provincial legislation. By mandating AFC into provincial policy, communities will be required to undertake AFC initiatives; therefore, making it easier to justify the need for funding. AFC is currently mandated indirectly in the Growth Plan for the Greater Golden Horseshoe, under the umbrella of complete communities; yet, it would receive more support if it was categorized under its own distinct policy (Ontario, 2017).

At a time when funding is limited and municipalities have an increasing number of responsibilities, municipalities need to market where they want to direct their funding. One of the ways in which planners and policy-makers can advocate for additional funding from the provincial and federal governments is by emphasizing that AFC initiatives not only help older adults, but they are beneficial to all members of the community. Although the World Health Organization's age-friendly community framework is designed specifically for older adults, age-friendly initiatives benefit people of all ages.

5.2.5.2: Rural and Remote Communities

Many of the challenges associated with developing age-friendly communities are magnified in rural and remote areas due to the geography, distance and isolation from urban centers, as well as the widely dispersed populations. Due to the global trend of population aging and urbanization, AFC frameworks, such as the WHO's AFC guide and associated checklist, tend to focus specifically on urbanized communities. As a result, many of the initiatives listed in the WHO AFC checklist do not apply to rural and remote communities. Nevertheless, the population is aging faster in rural communities due to the relative increase in the number of older adults, resulting from the aging baby-boom generation and the out-migration of youth (Cerde & Bernier, 2013). According to the Federal, Provincial and Territorial Ministers Responsible for Seniors (2007), approximately 23% of older adults live in small communities throughout Canada; these high numbers have a number of policy implications for age-friendly community planning.

As discussed in the Findings Chapter, rural and remote communities face a number of additional challenges in their quest to become age-friendly (Adam, Alex, Brittany; Cerde & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; Laura, Peter). Most rural and remote communities do not have public transportation, making it particularly challenging for those that lose their licence and have to rely on family members or volunteer drivers; which in turn, makes them more prone to social isolation (Cerde & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007). This problem is further amplified due to the lack of health care services; older adults are often required to travel long distances to receive medical care in urban centers, which can be very

costly if they have to rely on taxis (Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007; Novek & Menec, 2014; Steels, 2015). Furthermore, rural and remote communities often lack housing stock geared towards older adults, forcing them to leave their friends and family in order to live in retirement/nursing homes outside their community (Novek & Menec, 2014). Alternatively, those who wish to age-in-place, have limited access to home care services such as meals-on-wheels or nursing care services (Cerda & Bernier, 2013; Federal, Provincial and Territorial Ministers Responsible for Seniors, 2007). In addition, most rural and remote communities lack physical infrastructure such as sidewalks and accessible pathways, making it difficult to promote active aging, particularly during the winter months.

Due to all these additional challenges, it is evident that rural and remote communities require additional funding and resources in order to achieve their goal of becoming more age-friendly. Rural and remote communities typically have smaller budgets, yet higher costs (Hamilton et al., 2013). As a result, some communities cannot even meet the AODA requirements, let alone address AFC initiatives and therefore require additional funding (Alex). Nevertheless, when funding is limited, the researcher recommends that rural and remote communities seek alternative solutions and be creative in their approaches. The following paragraphs present a number of alternative strategies to mitigate these challenges that stem from the discussions held at the International Invited Symposium on Age-Friendly Rural and Remote Communities and Places, held in Winnipeg, Manitoba in 2012 (Hamilton et al., 2013) and the recommendations set out in the Federal, Provincial and Territorial Ministers Responsible for Seniors' Age-friendly Rural and Remote Communities Guide (2007).

In order to promote age-friendliness, rural and remote communities must capitalize on their strengths, namely their strong social ties and sense of community (Hamilton, Menec & Bell, 2013). Small communities tend to have a strong sense of place and residents are generally more open to lending a helping hand to those in need. These communities should promote volunteer opportunities, yet be mindful of volunteer fatigue, which occurs when a select group of volunteers, who are aging themselves, find themselves helping out at all available opportunities. Communities can learn from their older adults, particularly in terms of their depth of knowledge of the community, as many older adults have lived in the community their entire lives. Older adults are a valuable resource within the community and it is important that communities engage their older adults throughout the AFC planning process.

The planning professionals interviewed from small communities discussed their challenges in acquiring the specialized human resources capable of directing AFC initiatives. Those who received funding indicated that it was not sufficient to hire a consultant due to the high travel cost for flying out a consultant to their community (Brittany). Since most rural and remote communities only have one or two planners on staff, at most, they are often too busy to take on age-friendly community planning themselves. Tyler recommended that communities establish an AFC committee responsible for the implementation of the plan, which may include: planners, community organizations, older adults and local businesses. This diversity will allow communities to capitalize on the knowledge and expertise of each member. In addition, communities can share responsibilities among the multiple levels of government, mainly between the lower and upper tier municipalities (Hamilton et al., 2013). Rural and remote

communities should also build and expand on existing partnerships with local organizations and businesses that may already be offering programs and services geared towards older adults.

The researcher recommends that rural and remote communities take advantage of the resources that are available through the Seniors Health Knowledge Network and participate in the outreach initiatives. A number of planners mentioned the benefits of the Age-friendly Networks that have been set up across Ontario by the Seniors Health Knowledge Network. These groups provide opportunities to share resources and learn about strategies used in other communities. One of the recommendations put forward in this research is that these resources are further expanded to provide planners with additional resources and assist communities in exchanging information. Communities may also consider pooling their resources together with neighbouring communities to create joint initiatives and share resources (Hamilton et al., 2013). In addition, communities should also take an inventory of their existing programs and services. They may have already implemented similar strategies, simply branded under another approach. They should evaluate the existing initiatives and determine what modifications are necessary to better suit the aging population.

Lastly, it is crucial that planners and policy makers scope their initiatives according to the resources and funding available and ensure that their proposed endeavours are doable. For instance, building a health care facility may not be a realistic goal; however, providing transportation to a neighbouring community's facility may be more cost effective. In fact, one of the communities was denied funding because they failed to narrow the scope of their AFC initiatives and made the plans too ambitious and unrealistic (Alex). In the end, the key to

finding an appropriate approach is realising that each community is different, a strategy that may work in one community, may not work in another.

5.3: Contributions

The findings from the study are relevant to planners, policy makers and researchers in the field of age-friendly community planning. Specifically, the findings from this study contribute towards the growing literature on age-friendly communities within the field of urban planning, through the analysis of AFC planning as it relates to other well-known planning initiatives. This study supplements the research conducted by Cerda & Bernier (2013), Colangeli (2010), Golant (2014) and Miller et al. (2011), by incorporating two additional planning frameworks that had not been previously identified in the literature for their overlap and similarities with AFC, specifically transit-oriented development and accessibility planning, and evaluating the possibility of establishing joint policies. This research is timely considering the recent surge in interest in age-friendly community planning as municipalities seek to prepare for the aging baby-boom demographic.

In addition, the findings from this study will assist planning professionals and policy makers in improving current age-friendly community planning initiatives by promoting some of the strengths and raising awareness of some of the current challenges faced by communities across Ontario. Many of these findings lay the foundation for the policy recommendations, presented in Section 5.5. Due to the vast diversity of communities interviewed throughout Ontario, this study provides generalizability, meaning that the findings can be applied to communities across Canada and even globally.

5.4: Study Limitations

There are a few limitations to keep in mind when examining this study. The greatest constraint stems from the difficulty in recruiting participants for this study. A purposive sampling technique was used to reach planning professionals who are directly involved in age-friendly community planning and knowledgeable on the research topic. This requirement significantly reduced the number of qualified participants. The initial recruitment strategy only resulted in one interview; and in spite of developing an alternative recruitment strategy, a total of 13 participants took part in the study. The low participation rates can be attributed to a number of factors. Firstly, the limited involvement of planning staff in AFC planning initiatives became evident while seeking to recruit participants. A number of municipalities responded to the invitation to participate by stating that they did not have any planning staff involved in their AFC endeavours. Which raises the question, why are there not more planners involved in AFC planning considering AFC's large planning component? Secondly, the time of year during which the interviews were conducted, from August to October, which represents a very busy time of year for most planning professionals, and unfortunately limited participation in a few instances. Additional participants would have helped provide support for the emerging themes; however, despite the lower participation rates than desired, theoretical saturation was still achieved as it became evident that the participants were providing overlapping information.

Despite the challenges in recruiting participants, this study was successful in interviewing participants with very diverse backgrounds, including: males and females; planners at the local and regional level from municipalities of all sizes across Ontario, as well as planning consultants. Some participants did not have a planning title per se, yet their planning education

provided them with the background necessary to speak to the research questions. The participants' roles in the AFC planning process varied considerably from creator of the AFC plan to member on the AFC committee, or supervisor of AFC initiatives. Although, this provided the opportunity to view AFC planning from various standpoints, it limited in some instances the quality of the responses, as some planning professionals simply did not have the level of involvement necessary to adequately speak to all areas of AFC planning. Nevertheless, the diversity of backgrounds provided a representative sample of planning professionals and made it possible to draw conclusions on AFC planning across Ontario. This variety of backgrounds helped established generalizability, making the findings transferable to various contexts.

The second research limitation stems from the interview questions themselves. Although considerable thought was put into each interview question, the wording was questioned in a couple interviews. Adam questioned the use of the term 'over-ambitious' stating that it implies a negative connotation and presents potential bias in the question. Specifically, the interview question read: "are age-friendly community agendas over-ambitious?", to which Adam responded:

I think that maybe what I am reacting to is the potential bias in the question because from my standpoint overly ambitious sounds like there is a negative connotation to it so some people will say well if you are overambitious you are never going to achieve that goal but I think there is a lot of value in identifying those ambitions whether they happen in one year or twenty years I think that it is still valuable to have them there so that efforts can be focused on them (Adam).

The use of the term ‘over-ambitious’ in the interview question originates from the literature. Specifically, Golant (2014) stated “Given limited funding and competing demands for resources, proponents of this movement must prioritize over-ambitious agendas and offer verifiable solutions that do not overlap with other housing, service and care programs (Golant, 2014, p. 1). This is one of the key statements that provided the foundation for the research questions and for this reason the same wording was used in the interview questions.

Additionally, Tyler suggested that the heading ‘policy overlap’ in the interview guide is biasing as it implies that there is in fact an overlap. Alternatively, he recommended the title ‘policy linkage’, suggesting that planners should be seeking linkages between the planning frameworks. Furthermore, Tyler questioned the use of the term ‘joint policies’ in the question: “are joint policies a legitimate policy issue?” He clarified the distinction between a comprehensive planning approach and a joint planning approach which means selecting one planning paradigm and making it fit everything else. He explained that AFC plans are comprehensive in that they deal with multiple kinds of issues, multiple AFC dimensions and they engage multiple levels of government. Following the discussions with Tyler and Adam regarding the interview guide wording, the immediate thought was to alter the questions to address their concerns. However, in order to ensure consistency throughout the interviews, the questions remained the same throughout all the interviews in order to avoid influencing the responses.

5.5: Recommendations for planning practice

5.5.1: Additional Funding is Required Particularly for Implementation of AFC Initiatives

As discussed in Sections 4.6.2.1 and 5.2.5.1, the most commonly stated challenge for developing and implementing AFC plans relates to the lack of financial resources. Many communities across Ontario received funding through the Ontario Seniors' Secretariat's Community Planning Grant, which ranged between \$25,000 and \$50,000 for the creation of their AFC plan; whereas, others were successful in obtaining funding through the Ontario Trillium Foundation. Despite this funding, a number of communities indicated that they had to limit the scope of their AFC plan according to the funding provided. For many communities, the challenge now lies in finding the financial resources required to implement the initiatives, particularly the long term projects that require significant resources.

It is recommended that the Provincial and Federal governments allocate additional funding to assist municipalities in implementing their long-term AFC initiatives that typically come at a higher cost. AFC funding could be supported on the basis that improvements to the social and built environment that assist older adults, benefit all members of society.

5.5.2: Additional Resources for Rural and Remote Communities

As evidenced through the literature review and in-depth interviews, small and remote communities face number of additional challenges due to limited funding and resources. Sections 4.6.2.7 and 5.2.5.2 itemized a number of the challenges, including: the lack public transportation and the need to rely on volunteer drivers, limited housing stock geared towards

the aging population and the lack of access to health care and home care services. Although some of the small communities interviewed were successful in obtaining funding, the funding was not sufficient to hire a consultant due to the high travel costs and most still struggle to simply meet the AODA requirements, let alone plan for an aging population. Small and remote communities require additional resources and financial assistance to meet the AODA requirements and implement programs and services to make their communities more age-friendly. Small changes can go a long way in improving older adults' independence and allowing them to age-in-place within their rural and remote community.

5.5.3: Expand on Existing Resources

A number of planning professionals discussed the benefits of the resources that have been established by the Ministry of Seniors Affairs through the Seniors Health Knowledge Network (SHKN) (Brittany, Carly and Marie). The SHKN offers a number of outreach initiatives to assist communities in adopting AFC principles. They provide resources online and have established networks across Ontario, such as the Southern Ontario Age-friendly Network, that get together periodically to discuss their initiatives and provide communities with a resource sharing platform. They also have a knowledge broker, who helps communities connect with the appropriate resources. Since these outreach initiatives have been so successful, it is recommended that they are further expanded to provide planners and policy makers with additional resources and assist communities in sharing information.

5.5.4: Mandating AFC into Provincial Policy

A number of guidelines have been prepared to assist the creation of AFCs, such as the World Health Organization's 'Global Age-Friendly Cities: A Guide' (2007) and the Province of Ontario's 'Finding the Right Fit: Age-friendly Community Planning'. These documents serve as guidelines; therefore, planners and policy makers are not legally required to carry them through. The concept of age-friendly communities figures indirectly in the Growth Plan for the Greater Golden Horseshoe (Ontario, 2017) as one of the characteristics of a complete community, yet it is not mandated under its own standalone policy which would draw more attention and make it easier to justify the need for funding.

As discussed in Section 4.6.2.6, several planners indicated that they struggle to obtain support to implement their initiatives due to the lack of provincial policy mandating AFC initiatives (Adam, Carly and Chris). Therefore, this study recommends that the Provincial government incorporates age-friendly community initiatives into planning legislation in order to provide planners and policy makers with the support necessary to advocate for their AFC programs and services. In turn, AFC planning policies would be required to be integrated into county/regional and local Official Plans. This would ensure that AFC initiatives would get addressed and that planning departments get involved.

Nevertheless, the province cannot apply a one-size-fits-all approach to AFC planning due to the wide regional variations. The geography, demographics, social, economic and political conditions of a community greatly impact the scope and type of AFC initiatives. As explained

by Adam, the recommended provincial policies would have to be broad enough to be applied across Ontario, yet detailed enough that they are not simply a series of motherhood statements.

5.5.5: Better Communication and Coordination between Lower Tier and Upper Tier

Municipalities

During the interviews it became apparent that there needs to be better coordination between the lower tier and upper tier municipalities with regards to AFC planning. As indicated in Section 4.6.2.5, there were instances where the lower tier and upper tier municipalities had each developed their own AFC plans; yet, there had been no communication to ensure that their initiatives aligned. Neighbouring communities also need to align their initiatives as residents often cross municipal borders to access services in nearby communities.

5.5.6: Seek Greater Planning Involvement in AFC Initiatives

One of the surprising findings from this study stems from the lack of involvement of planning staff in AFC initiatives considering AFC's large planning component, see Sections 4.5.2 and 5.2.4. This gap became apparent during the participant recruitment stage when many communities responded that they did not have any planners involved in their AFC endeavours. Planners' specialized knowledge can help shape AFC planning initiatives by working collaboratively with key stakeholders in order to build communities that look out for the best interest of the public, including older adults. It is recommended that all communities involve planning professionals in their AFC initiatives in any capacity from having planning staff on the AFC committee to being directly involved in the development and implementation of the AFC plan.

5.6: Recommended Areas of Future Research

This study uncovered a couple of opportunities for future research. Specifically, additional research is needed to further examine the similarities and overlap between age-friendly communities and complete communities. The concept of complete communities was mentioned by Golant (2014) who listed ‘complete streets’ as one of the well-known initiatives sharing similarities with AFC; however, no other commentary was provided to explain in what ways and to what extent they overlap. Nevertheless, it merits additional research as it was mentioned a number of times throughout the interviews. Additionally, since complete communities are defined as age-friendly in the Growth Plan for the Greater Golden Horseshoe (Ontario, 2017), it is recommended that researchers further examine the use of age-friendly community planning principles as a lens that is applied to complete community endeavours, rather than its own distinct, yet overlapping planning framework. If communities are seeking to make their communities complete, are they in fact promoting age-friendly developments?

Additional research is needed to determine which level of government is best suited to develop and implement AFC plans. The planning professionals presented conflicting views with regards to whether lower tier or upper tier municipalities should be responsible for age-friendly community planning. Due to the variety of opinions, future research should examine which level of government is best suited to undertake AFC endeavours or alternatively, whether both levels of government should be responsible for specific components of AFC planning based on their roles and responsibilities.

5.7: Overall Thesis Conclusion

This study sought to determine to what extent age-friendly community planning overlaps or is similar to established planning frameworks and evaluate whether there is merit in developing joint policies. As evidence in this research, there is an overlap and similarities between age-friendly community planning and established planning frameworks, specifically: Smart Growth, transit-oriented development, universal design, accessibility planning, healthy communities, sustainable communities, New Urbanism and complete communities. Despite concerns that these planning frameworks present conflicting priorities and result in duplication, planners viewed this overlap as policy alignment as these policies support and reinforce each other. Nevertheless, it is recommended that communities take an inventory of all their current programs and services and evaluate whether any of their current initiatives coincide with their proposed AFC initiatives and whether they can be revamped to better accommodate the aging population. Communities may already have age-friendly initiatives in place, yet they are simply labelled under a different approach, in which case they would simply have to raise awareness and/or rebrand their existing programs and services to target older adults, rather than starting from scratch. The concerns of duplication and competing policies raises the need for good business planning and strong communication. Specifically, this study recommends better communication and coordination between the upper and lower tier municipalities, specifically when both levels of government have established AFC plans, in order to ensure that their policies align and that they are not duplicating their efforts.

An alternative way of approaching age-friendly community planning was proposed in the interviews. Several planning professionals suggested that AFC is viewed as a subset of other

planning frameworks rather than its own distinct planning paradigm. Many planning professionals referred to an AFC ‘lens’, ‘filter’ or ‘hat’ that is applied to other planning approaches rather than its own distinct planning paradigm. As such, planners would look at all their planning decisions, regardless of the planning framework, through an age-friendly lens. As discussed above, this is the approach that was taken by the Province of Ontario in their updated Growth Plan for the Greater Golden Horseshoe (Ontario, 2017), which views complete communities as age-friendly.

Due to the overlap between the planning frameworks, this study sought to determine whether AFC initiatives should be combined with other programs that share common goals or policies from other approaches with competing priorities, as joint initiatives would help avoid duplication and ensure more efficient use of resources. However, the planning professionals suggested that a comprehensive planning approach is not the most suitable way to address the overlap and the concept should be approached with caution. A number of concerns were raised during the interviews with regards to the feasibility and challenges associated with developing a comprehensive planning model, specifically due to: the sheer size of the document, the diversity of community contexts, the challenges associated with public participation and the difficulties coordinating the various stakeholders and jurisdictions. As discussed in Section 5.2.2, the researcher believes that the purpose of doing a synthesis and grouping all the planning paradigms into a single comprehensive planning framework is to eliminate duplication. Therefore, the resulting comprehensive planning framework would likely not be as onerous as the planning professionals suggest. Nevertheless, this is one of the concerns that the planning professionals raised and the researcher is mindful of their viewpoints.

Although some planners expressed concerns over the feasibility of developing a comprehensive planning framework, others indicated that planning, regardless of the approach, should be comprehensive by nature and include everyone. In other words, ultimately all planning frameworks should be age-friendly in nature.

A couple of surprising findings were uncovered during this research, specifically, the overlap between age-friendly community planning and complete communities, as well as the limited involvement of planning staff in age-friendly community initiatives. Complete communities was identified as an additional planning framework that shares a number of similarities with age-friendly community planning. This study recommends further examination of the similarities and overlap between these two planning frameworks in order to determine in what ways and to what extent they overlap, and whether age-friendly community planning principles are best utilized as a lens that is applied to complete community endeavours.

The second unexpected finding stems from the lack of planning involvement in AFC endeavours which has significant implications for the development and implementation of AFC endeavours. As identified in this study, planners are often excluded from age-friendly community initiatives or play a minor role in the creation and implementation of the AFC plan due to limited funding or human resources constraints. This is surprising considering that age-friendly community planning has such a large planning component, from planning transportation networks to designing outdoor spaces. Planning professionals play a key role in shaping communities and unfortunately many communities do not take advantage of their

specialized knowledge. This void marks a significant gap in AFC planning. Planners are educated and trained to work collaboratively with key stakeholders in order to design communities that look out for the best interest of all members of the community, including older adults. The researcher believes that the development and implementation of AFC plans should be done by or with the assistance of planning professionals, rather than leaving it up to a group of volunteers who are not adequately trained to properly address these issues.

A number of supplementary findings were uncovered through the interviews with planning professionals which provided key insight into the strength and weaknesses of current age-friendly community planning initiatives across Ontario and formed the basis for many of this study's recommendations. The researcher recommends building on the strengths of current AFC initiatives and addressing the areas in need of improvement. Through the development and implementation of AFC plans, communities have been successful in raising awareness of aging issues and helped overcome ageist attitudes. Additionally, communities have been successful in getting their older adults involved throughout the planning process. By empowering older adults in all stages of the AFC planning process, communities have been able to gain a better understanding of their specific needs and limitations.

A number of challenges were identified in the interviews that hinder the development of age-friendly communities and therefore formed the basis for a number of this study's recommendations. One of the key challenges that hinders the development of age-friendly communities is the lack of funding available to implement age-friendly initiatives. A number of communities were successful in obtaining funding through the Ontario Seniors' Secretariat

or the Ontario Trillium Foundation to prepare their AFC plan, yet are now losing momentum as they struggle to find the financial resources and human capital necessary to implement their plans, particularly, the long term, large scale endeavours. The lack of funding highlights the need for communities to establish goals that are realistic and scoped according to the funding and resources available. Additionally, communities should seek partnerships with community organizations so that the municipality does not get bogged down with budget issues as they will not be required to come up with all the funding necessary to implement the plan. Rather, community organizations should work together to oversee and fund the implementation of the AFC plan; therefore, sharing the implementation costs among organizations. Furthermore, it is recommended that communities take an inventory of their current programs and services as they may already have AFC initiatives in place, simply disguised under a different umbrella. As a result, communities should identify the overlapping strategies and align their age-friendly endeavours with similar initiatives. In order for planners and policy makers to receive the funding and support necessary to advocate their AFC programs and services, it is recommended that the Provincial government legislates age-friendly initiatives into provincial legislation. By mandating AFC into provincial policy, communities would be required to undertake AFC initiatives; therefore, making it easier to justify the need for funding and ensuring the involvement of planning staff.

AFC initiatives vary considerably from community to community based on the social, economic and political conditions, demographics, size and location of the municipality. Policies that are successful in a large municipality, may not be effective in rural and remote communities due to their unique challenges. Many of the challenges associated with

developing age-friendly communities are magnified in rural and remote areas due to the geography, distance and isolation from urban centers, as well as the widely dispersed populations. Due to the global trend of population aging and urbanization, AFC frameworks, such as the WHO's AFC guide and associated checklist, tend to focus specifically on urbanized communities. Therefore, many of the initiatives listed in the WHO AFC checklist do not apply to rural and remote communities. As a result, rural and remote communities require additional funding and resources in their quest to become age-friendly. Nevertheless, rural and remote communities should be creative in their approaches and seek alternative solutions, such as: capitalizing on the strong social ties and sense of community, taking advantage of the resources available through the Seniors Health Knowledge Network, and pooling their resources together with neighbouring communities to create joint initiatives and share resources. Regardless of the size of the community, it is crucial that planners and policy makers scope their initiatives according to the resources and funding available and ensure that their proposed endeavours are feasible.

Lastly, in order to receive additional funding and resources, it is recommended that planners and policy makers market their AFC initiatives to governments and funding agencies as friendly for all ages. The benefits of age-friendly community initiatives extend well beyond the older adult cohort and benefit people of all ages and abilities. As stated by Bernard Isaacs: "Design for the young, and you exclude the old; design for the old and you include everyone" (Miller, Harris & Ferguson, 2006).

References

- Accessibility Ontario. (n.d.) About the AODA. Retrieved from: <http://accessontario.com/aoda/>
- Allmendinger, P. (2013). *Planning Theory* (2nd ed.). Basingstoke: Palgrave Macmillan.
- Association of Municipalities Ontario. (2016). *Strengthening Age-Friendly Communities and Seniors' Services for 21st Century Ontario: A New Conversation about the Municipal Role*. Retrieved from: <https://www.amo.on.ca/AMO-PDFs/Reports/2016/StrengtheningAgeFriendlyCommunitiesSeniorsServices.aspx>
- Atkinson, R. & Flint, J. (2004). Snowball Sampling. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412950589.n931>
- Ayres, L. (2008). Semi-structured Interview. In *The Sage Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909.n420>
- Batty, M. (2009). Accessibility: In Search of a Unified Theory. *Environment and Planning B: Planning and Design*, 36 (2), 191-194. doi: 10.1068/b3602ed
- Baxter, J. and Eyles, J. (1997); Evaluating Qualitative Research in Social Geography: Establishing "Rigour" in Interview Analysis, *Transactions of the Institute of British Geographers*, 22(4): 505-25. doi: 10.1111/j.0020-2754.1997.00505.x
- BC Healthy Communities. (2016). *Healthy Communities Movement*. Retrieved from: <http://bchealthycommunities.ca/healthycommunities>
- Bell, S. & Menec, V. (2013). Important topics and challenges to address in age-friendly rural and remote communities and places. Winnipeg, MB: Centre on Aging. Retrieved from: http://umanitoba.ca/centres/aging/media/CoA_Bell.Menec_Important_topics_and_challenges_to_address_final.pdf
- Bell, S. & Menec, V. (2013). Sustaining age-friendly rural and remote communities and places: Creating partnerships and building a community of practice. Winnipeg, MB: Centre on Aging. Retrieved from: http://umanitoba.ca/centres/aging/media/CoA_Bell.Menec-Sustaining_AF_RR_communities_final.pdf
- Bender, G. (2012). *The Canada Green Building Council Sustainable Communities Toolkit: A Best Practices Guide to Applying Sustainable Principles in Your Municipality*. Plan Canada, Spring 2012, 14-18.

- Biggs, S. & Carr, A. (2016). Age Friendliness, Childhood, and Dementia: Toward Generationally Intelligent Environments. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues* (259-276). Switzerland: Springer International Publishing.
- Blatter, J. (2008). Case Study. In *The Sage Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412963909.n39>
- Boschmann, E. & Brady, S. (2013). Travel Behaviors, Sustainable Mobility, and Transit-oriented Developments: a Travel Counts Analysis of Older Adults in the Denver Colorado Metropolitan Area. *Journal of Transport Geography*, 33, 1-11. doi: 10.1016/j.jtrangeo.2013.09.001
- Brinkmann, S. (2008). Interviewing. In *The Sage Encyclopedia of Qualitative Research Methods*. DOI: <http://dx.doi.org/10.4135/9781412963909.n239>
- Bryman, A. (2004). Member Validation and Check. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412950589.n548>
- Buffle, T., Phillipson, C. & Scharf, T. (2012). Ageing in Urban Environments: Developing 'Age-Friendly' Cities. *Critical Social Policy*, 32 (4), 597-617. doi: 10.1177/0261018311430457
- Calthorpe, P. (1993). *The Next American Metropolis: Ecology, Community and the American Dream*. New York: Princeton Architectural Press.
- Canada. (2015). Funding: Enabling Accessibility. Retrieved from: <http://www.esdc.gc.ca/eng/disability/eaf/index.shtml>
- Canada Green Building Council. (n.d.). Sustainable Communities Toolkit. Retrieved from: <http://www.cagbc.org/CAGBC/Programs/SmartGrowth/SustainableCommunit.asp?hkey=df54f06-10b8-4f81-b268-40a416df04df>
- Canada Mortgage and Housing Corporation & Gibson Library Collections. (2009). *Transit-Oriented Development (TOD): Canadian Case Studies*. Ottawa, Ontario: CMHC.
- Canadian Institute of Planners (CIP) (n.d.). Healthy Communities Practice Guide. Retrieved from: https://cip-icu.ca/Files/Healthy-Communities/CIP-Healthy-Communities-Practice-Guide_FINAL_lowre.aspx
- Canadian Institute of Planners (CIP) (2013). Healthy Communities: Legislative Comparison Survey Report. Retrieved from: https://www.cip-icu.ca/Files/Healthy-Communities/CIP-Legislative-Comparison-Survey-Report_20131217.aspx

- Capon, A. & Blakely, E. J. (2007). Checklist for Healthy and Sustainable Communities. NSW Public Health Bulletin, 18 (3-4), 51-54.
- Carmines, E. & Woods, J. (2011). Validity. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org/10.4135/9781412950589>
- Carr, K., Weir, P., Azar, D. & Azar, N. (2013). Universal Design: A Step Toward Successful Aging. *Journal of Aging Research*, 2013, 1-8. doi: 10.1155/2013/324624
- Center for Accessible Housing. (1995). *Accessible environments: Toward universal design*. Raleigh: North Carolina State University.
- Cerda, M. & Bernier, N. (2013). Age-friendly Communities in Ontario: Multi-level Governance, Coordination Challenges and Policy Implications. Institute for Research on Public Policy. Retrieved from: https://www.oanhss.org/oanhssdocs/Issue_Positions/External_Resources/November_2014_Age_Friendly_Communities_in_Ontario.pdf
- Chen, P. & Krauss, A. (2011). Reliability. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org/10.4135/9781412950589>
- City of Calgary. (2006). Overcoming Barriers to Sustainable Urban Development: Toward Smart Growth in Calgary. Retrieved from: <http://sustainablecalgary.org/wp-content/uploads/2012/03/SmartGrowth.pdf>
- City of Mississauga (2015). Complete Communities. Retrieved from: <http://www6.mississauga.ca/onlinemaps/planbldg/MOP/Chapter7-CompleteCommunities.pdf>
- City of Toronto. (n.d.). The Toronto Senior Strategy: Strategy Highlights. Retrieved from: <http://www1.toronto.ca/City%20Of%20Toronto/Social%20Development,%20Finance%20&%20Administration/Shared%20Content/Seniors/PDFs/seniors-strategy-highlights.pdf>
- City of Waterloo (n.d.). *Appendix A: Transit-Oriented Development Best Practices Review*. Retrieved from: http://www.waterloo.ca/en/contentresources/resources/government/Rapid_transit_phase_1_appendixA.pdf
- City of Waterloo. (n.d.). Appendix B: Transit-Oriented Development in Waterloo. Retrieved from: http://www.waterloo.ca/en/contentresources/resources/government/Rapid_transit_phase_1_appendixB.pdf

- City of Waterloo. (n.d.) Inclusion Services. Retrieved from:
http://www.waterloo.ca/en/contentresources/resources/living/Inclusion_Services_brochure_-_accessible.pdf
- City of Waterloo. (2012). Mayor's Advisory Committee of Age-Friendly Waterloo: Report to the Mayor. Retrieved from:
http://www.waterloo.ca/en/contentresources/resources/government/draft_mayors_report_layout_June0313.pdf
- City of Waterloo. (2014). Official Plan. Retrieved from:
http://www.waterloo.ca/en/contentresources/resources/government/OP_Consolidated_Version.pdf
- City of Waterloo. (2015). Age-friendly City. Retrieved from:
<http://www.waterloo.ca/en/living/agefriendlycity.asp>
- City of Waterloo. (2015b). Accessibility and Inclusion. Retrieved from:
<http://www.waterloo.ca/en/living/accessibilityandinclusion.asp>
- City of Waterloo. (2015c). Safe and Healthy Community Advisory Committee. Retrieved from: <http://www.waterloo.ca/en/government/safeandhealthycommunity.asp>
- City of Waterloo (n.d.). *Appendix A: Transit-Oriented Development Best Practices Review*. Retrieved from:
http://www.waterloo.ca/en/contentresources/resources/government/Rapid_transit_phase_1_appendixA.pdf
- CMHC. (2009). Transit-Oriented Development (TOD): Canadian Case Studies. Gibson Library Connections Inc. Ottawa, Ontario.
- CMHC. (2010). Research Highlight: Comparing Canadian New Urbanist and Conventional Suburban Neighbourhoods. Retrieved from: <https://www.cmhc-schl.gc.ca/odpub/pdf/66954.pdf>
- Colangeli, J. (2010). Planning for Age-friendly Cities: Towards a New Model (Doctoral dissertation). University of Waterloo, School of Planning. Waterloo, Ontario: University of Waterloo.
- Congress for the New Urbanism (CNU). (2015). The Organization. Retrieved from:
<https://www.cnu.org/who-we-are/organization>
- Congress for the New Urbanism (CNU). (2015a). The Movement. Retrieved from:
<https://www.cnu.org/who-we-are/movement>

- Congress for the New Urbanism (CNU). (2015b). What is New Urbanism?. Retrieved from: <https://www.cnu.org/resources/what-new-urbanism>
- Congress for the New Urbanism (CNU). (2015c). The Charter of the New Urbanism. Retrieved from: <https://www.cnu.org/who-we-are/charter-new-urbanism>
- Congress for the New Urbanism (CNU). (2015d). Canons of Sustainable Architecture and Urbanism. Retrieved from: <https://www.cnu.org/charter-new-urbanism/canons-sustainable-architecture-and-urbanism>
- Demirbilek, O. & Demirkan, H. (2004). Universal Product Design Involving Elderly Users: A Participatory Design Model. *Applied Ergonomics*, 35, 361-370. doi: 10.1016/j.apergo.2004.03.003
- DiCicco-Bloom, B. & Crabtree, B. (2006). Making Sense of Qualitative Research: The Qualitative Research Interview. *Medical Education*, 40, 314-321. doi: 10.1111/j.1365-2929.2006.02418.x
- Donmoyer, R. (2012). Generalizability. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909>
- Dowling, M. (2008). Reflexivity. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412963909.n377>
- Dresner, S. (2008). *The Principles of Sustainability*. London; Sterling, VA: Earthscan.
- Elo, S., Kaariainen, M., Kanste, O., Polkki, T., Utriainen, K. & Kyngas, H. (2014). Qualitative Content Analysis : A Focus on Trustworthiness. *SAGE Open*, 4(1), 1-10. doi : 10.1177/2158244014522633
- Elo, S. & Kyngas, H. (2007). The Qualitative Content Analysis Process. *Journal of Advanced Nursing*, 62(1), 107-115. doi: 10.1111/j.1365-2648.2007.04569.x
- Employment and Social Development Canada. (2015). Canadians in Context – People with Disabilities. Retrieved from: <http://www4.rhdcc.gc.ca/indicator.jsp?&indicatorid=40>
- Environmental Protection Agency. (2009). Growing Smarter, Living Healthier: A Guide to Smart Growth and Active Aging. Retrieved from: <http://www.epa.gov/aging/docs/growing-smarter-living-healthier.pdf>
- Federal, Provincial and Territorial Ministers Responsible for Seniors. (2007). Age-Friendly Rural and Remote Communities: A Guide. Retrieved from: http://www.phac-aspc.gc.ca/seniors-aines/alt-formats/pdf/publications/public/healthy-sante/age_friendly_rural/AFRRC_en.pdf

- Gill, P., Stewart, K., Treasure, E. & Chadwick, B. (2008). Methods of Data Collection in Qualitative Research: Interviews and Focus Groups. *British Dental Journal*, 204 (6), 291-295. doi: 10.1038/bdj.2008.192
- Government of Canada. (2014). People with Disabilities. Retrieved from: <http://www.servicecanada.gc.ca/eng/audiences/disabilities/>
- Golant, S. (2014). Age-friendly Communities: Are we Expecting Too Much? *IRPP Insight*, 5, 1-19.
- Grant, J. (2003). Exploring the Influence of New Urbanism in Community Planning Practice. *Journal of Architecture and Planning Research*, 20 (3), 234-253.
- Grant, J. (2006). *Planning the Good Community: New Urbanism in Theory and Practice*. London; New York: Routledge.
- Grant, J. (2008). New Urbanism Developments in Canada: A Survey. *Journal of Urbanism*, 1(2), 109-127. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.1080/17549170802221435>
- Greenfield, E., Oberlink, M., Scharlach, A., Neal, M., Stafford, P. (2015). Age-friendly Community Initiatives: Conceptual Issues and Key Questions. *The Gerontologist*, 55 (2), 191-198. doi: 10.1093/geront/gnv005
- Hamilton, J., Menec, V. & Bell, S. (2013). Age-friendly Rural and Remote Communities and Places: Summary Report. Retrieved from: http://umanitoba.ca/centres/aging/media/CoA_Hamilton_IIS_AF_summary_report_final.pdf
- Hammersley, M. (2004). Reflexivity. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412950589.n829>
- Hancock, T., 1993, The Evolution, Impact and Significance of the Healthy Cities/Healthy Communities Movement. *Journal of Public Health Policy*, 14 (1), 5-18. doi: 10.2307/3342823
- Hancock, T. & Duhl, L. (1986). *Healthy Cities: Promoting Health in the Urban Context*. Copenhagen: WHO Europe. Retrieved from: http://www.euro.who.int/data/assets/pdf_file/0013/101650/E87743.pdf
- Hancock, Trevor. (n.d.). Healthy Cities and Communities: Past, Present and Future. Retrieved from: <https://www.scahec.net/courses/PH%20Modules/Mod4Hancock.pdf>
- Heart and Stroke Foundation. (n.d.). Shaping Active, Healthy Communities. Retrieved from: http://www.heartandstroke.com/atf/cf/%7B99452D8B-E7F1-4BD6-A57D-B136CE6C95BF%7D/BETK_HSF_Built_Environments_ENG.pdf

- Hsieh, H. & Shannon, S. (2005). Three Approaches to Qualitative Content Analysis. *Qualitative Health Research*, 15 (9), 1277-1288. doi: 10.1177/1049732305276687
- Imrie, Rob. & Hall, P. (2001). *Inclusive Design: Designing and Developing Accessible Environments*. London: Taylor and Francis.
- International Federation on Ageing. (2015). *International Federation on Ageing: Global Connections*. Retrieved from: <http://www.ifa-fiv.org/>
- Institute for Sustainable Communities. (2016). *Definition of Sustainable Community*. Retrieved from: <http://www.iscvt.org/impact/definition-sustainable-community/>
- Isaacs, B., Miller, G., Harris, G., & Ferguson, I. (2007). Bracing for the demographic tsunami: How will seniors fare in an aging society? *Plan Canada*, 47(4), 20–21.
- Kalache, A. (2016). Active Ageing and Age-friendly Cities – A Personal Account. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues (65-77)*. Switzerland: Springer International Publishing.
- Lambert, S. & Loisel, C. (2008). Combining Individual Interviews and Focus Groups to Enhance Data Richness. *Journal of Advanced Nursing*, 62 (2), 228-237. doi: 10.1111/j.1365-2648.2007.04559.x
- Landorf, C. et al. (2008). The urban environment and sustainable ageing: critical issues and assessment indicators. *Local Environment*, 13(6), 497-514. doi: 10.1080/13549830802259896
- Lawton, M. P. (1982). Competence, environmental press, and the adaptation of older people. In M. P. Lawton, P. Windley, & T. Byerts (Eds.), *Aging and the environment* (pp. 33–59). New York, NY: Springer.
- Legislative Assembly of Ontario. (2015). Bill 73, Smart Growth for Our Communities Act, 2015. Retrieved from: http://www.ontla.on.ca/web/bills/bills_detail.do?locale=en&Intranet&BillID=3176
- Levine, D. (2003). *Universal Design New York*. Retrieved from: <http://www.nyc.gov/html/ddc/downloads/pdf/udny/udny2.pdf>
- Leung, L. (2015). Validity, Reliability and Generalizability in Qualitative Research. *Journal of Family Medicine and Primary Care*, 4 (3), 324-327. doi: 10.4103/2249-4863.161306
- Lewis, J., Groh, A. (2016). It's About the People...: Seniors' Perspectives on Age-friendly Communities. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues (81-98)*. Switzerland: Springer International Publishing.

- Lid, I. M. (2014). Universal Design and Disability: an Interdisciplinary Perspective. *Disability and Rehabilitation*, 36(16), 1344-1349. doi: 10.3109/09638288.2014.931472
- Lui, C., Everingham, J., Warburton, J., Cuthill, M. & Bartlett, H. (2009). What Makes a Community Age-Friendly: A Review of International Literature. *Australian Journal on Ageing*, 28 (3), 116-121. doi: 10.1111/j.1741-6612.2009.00355.x
- Mays, N. & Pope, C. (1995). Rigour and Qualitative Research. *British medical Journal*, 311 (6997), 109-112.
- McCann, E. J. (2009). New Urbanism. In *International Encyclopedia of Human Geography*. (Vol 7, 438-443). doi: [10.1016/B978-008044910-4.01067-1](https://doi.org/10.1016/B978-008044910-4.01067-1)
- Menec, V., Means, R., Keating, N., Parkhurst, G. & Eales, J. (2011). Conceptualizing Age-friendly Communities. *Canadian Journal on Aging*, 30(03), 479-493. doi: 10.1017/S0714980811000237
- Miller, G., Annesley, A., Canadian Urban Institute & Canadian Electronic Library (2011). *Re-positioning Age-friendly Communities: Opportunities to Take AFC Mainstream*. Toronto, Ontario: Canadian Urban Institute.
- Miller, G., Harris, G., Ferguson, I. (2006). Mobility Under Attack – Are Older Canadian Ready to Live Without Their Cars?. *Ontario Planning Journal*, 21, no. 4 (2006).
- Miller, P. (2012). Reliability. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909>
- Miller, P. (2012). Validity. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909>
- Ministry of Finance. (2011). Ontario population projections update: 2010–2036, Ontario and its 49 census divisions. Toronto: Queen’s Printer for Ontario.
- Ministry of Municipal Affairs and Housing (MMAH) & Ontario Professional Planners Institute (OPPI) (2009). Planning by Design: a Healthy Communities Handbook. Retrieved from: <http://www.mah.gov.on.ca/AssetFactory.aspx?did=7171>
- Ministry of Municipal Affairs and Housing (2010). Citizens’ Guide: Official Plan. Retrieved from: <http://www.mah.gov.on.ca/AssetFactory.aspx?did=11149>
- Mitchell, L., Burton, E., Raman, S., Blackman, T., Jenks, M., & Williams, K. (2003). Making the Outside World Dementia-Friendly: Design Issues and Considerations. *Environment and Planning B: Planning and Design*, 30(4), 605–632. doi: 10.1068/b29100

- Mitchell, L. & Burton, E. (2006). Neighbourhoods for Life: Designing Dementia- Friendly Outdoor Environments. *Quality in Ageing and Older Adults*, 7(1), 26–33.
- Morgan, D. (2008). Snowball Sampling. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412963909.n425>
- Morse, J. (2004). Theoretical Saturation. In *The SAGE Encyclopedia of Social Science Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412950589.n1011>
- Moulaert, T., Boudiny, K. & Paris, M. (2016). Active and Healthy Ageing: Blended Models and Common Challenges in Supporting Age-Friendly Cities and Communities. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues (277-304)*. Switzerland: Springer International Publishing.
- Moulaert, T. & Garon, S. (2016). Introduction: Toward a Better Understanding of AFCC. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues (1-17)*. Switzerland: Springer International Publishing.
- National Cooperative Highway Research Program (NCHRP). (2005). *Transit-oriented Development: Developing a Strategy to Measure Success*. Washington, DC: Transportation Research Board.
- NC State University, Center for Universal Design, College of Design. (1997). *The Principles of Universal Design*. Retrieved from: https://www.ncsu.edu/ncsu/design/cud/pubs_p/docs/poster.pdf
- Nelson, A. (2008). Catching the Next Wave: Older Adults and the ‘New Urbanism’. *Journal of the American Society on Aging*, 33(4), 37-42.
- Niagara Region. (2015). *Smart Growth*. Retrieved from: <http://www.niagararegion.ca/living/smartgrowth/>
- Novek, S. & Menec, V. (2014). Older Adults’ Perceptions of Age-Friendly Communities in Canada: a Photovoice Study. *Ageing & Society*, 34, 1052-1072. doi: 10.1017/S0144686X1200150X
- Null, R. (2013). *Universal Design: Principles and Models*. London: CRC Press.
- Ontario. (2008). *Accessibility Standard for Customer Service: Employer Handbook*. Retrieved from: http://lephenix.on.ca/ON_Accessible/wp-content/uploads/2014/05/EN_AO_EmployerHandbook.pdf

- Ontario. (2012). *A Guide to the Integrated Accessibility Standards Regulation*. Retrieved from: <https://www.tiaontario.ca/uploads/IASR%20Policy%20Guidelines.pdf>
- Ontario. (2013). *Finding the Right Fit: Age Friendly Community Planning*. Retrieved from: http://www.seniors.gov.on.ca/en/resources/AFCP_Eng.pdf.
- Ontario. (2013b). *Independence, Activity and Good Health: Ontario's Action Plan for Seniors*. Retrieved from: <http://www.oacao.org/images/ontarioseniorsactionplan-en.pdf>.
- Ontario. (2014). *Provincial Policy Statement*. Retrieved from: <http://www.mah.gov.on.ca/AssetFactory.aspx?did=10463>
- Ontario. (2016). *Ontarians with Disabilities Act, 2001*. Retrieved from: <https://www.ontario.ca/laws/statute/01o32>
- Ontario. (2016a). *Accessibility for Ontarians with Disabilities Act, 2005*. Retrieved from: <https://www.ontario.ca/laws/statute/05a11>
- Ontario. (2016b). *Age-friendly Community Planning Grant*. Retrieved from: <http://www.grants.gov.on.ca/GrantsPortal/en/OntarioGrants/GrantOpportunities/PRDR013015>
- Ontario. (2017). *Growth Plan for the Greater Golden Horseshoe*. Retrieved from: <http://placestogrow.ca/images/pdfs/ggh2017/en/growth%20plan%20%282017%29.pdf>
- Ontario. (2013). *Growth Plan for the Greater Golden Horseshoe, 2006*. Retrieved from: <https://www.placestogrow.ca/content/ggh/2013-06-10-Growth-Plan-for-the-GGH-EN.pdf>
- Ontario Ministry of Community and Social Services (2012). *Publications: About the Accessibility for Ontarians with Disabilities Act, 2005 (AODA)*. Retrieved from: <http://www.mcsc.gov.on.ca/en/mcsc/publications/accessibility/aoda2005.aspx>
- Ontario Ministry of Infrastructure (2013). *Growth Plan for the Greater Golden Horseshoe, 2006: Office Consolidation, June 2013*. Retrieved from: <https://www.placestogrow.ca/content/ggh/2013-06-10-Growth-Plan-for-the-GGH-EN.pdf>
- Ontario Ministry of Municipal Affairs and Housing. (2015). *Bill 73 – Proposed Smart Growth for Our Communities Act*. Retrieved from: <http://www.mah.gov.on.ca/Page11014.aspx>
- Ontario Professional Planners Institute (OPPI). (2007). *Healthy Communities Sustainable Communities: The 21st Century Planning Challenge*. Retrieved from: <http://ontarioplanners.ca/PDF/Healthy-Communities/2007/Healthy-Sustainable-Communities-2007.aspx>

- Ontario Professional Planners Institute. (2009). Healthy Communities and Planning for Age-Friendly Communities: A Call to Action. Retrieved from:
<http://ontarioplanners.ca/PDF/Healthy-Communities/2009/Call-to-Action-Age-Friendly-Communities-June-18-20.aspx>
- Ontario Seniors' Secretariat (2015). Age-friendly Community Planning Grant. Retrieved from:
<http://www.seniors.gov.on.ca/en/srsorgs/afcpag.php>
- Ontario Seniors' Secretariat (n.d.). Age-friendly Community Planning Grant – 2014-2015 Program Guidelines. Retrieved from:
http://www.grants.gov.on.ca/prodconsum/groups/grants_web_contents/documents/grants_web_contents/prdr013013.pdf
- Ontario Smart Growth Network. (n.d.). Welcome. Retrieved from:
<http://smartgrowthontario.ca/>
- Palys, T. (2008). Purposive Sampling. In *The Sage Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909.n349>
- Persaud, N. (2010). Interviewing. In *Encyclopedia of Research Design*. doi: <http://dx.doi.org/10.4135/9781412961288.n197>
- Petrocelli, J. (2012). Validity of Research Conclusions. In *Encyclopedia of Research Design*. doi: <http://dx.doi.org/10.4135/9781412961288>
- Phillipson, C. (2011). Developing age-friendly communities: New approaches to growing old in urban environments. In R. Settersten & J. Angel (Eds.), *Handbook of sociology of aging* (pp. 279–293). New York, NY: Springer.
- Pim, L. & Ornoy, J. (2005). *A Smart Future for Ontario: How to Create Greenways and Curb Urban Sprawl in Your Community*. Toronto, Ontario: Ontario Nature – Federation of Ontario Naturalists.
- Pinto, R.M., Medici, S.D., Sant, C.V., Bianchi, A., Zlotnicki, A. & Napoli, C. (2000). Ergonomics, Gerontechnology, and Design for the Home-environment. *Applied Ergonomics*, 31(3), 317-322. doi: 10.1016/S0003-6870(99)00058-7
- Plouffe, L., Garon, S., Brownoff, J., Eve, D., Foucault, M. & Lawrence, R. (2013). Advancing Age-Friendly Communities in Canada. *Canadian Review of Social Policy*, 68/69, 24-38.
- Plouffe, L. & Kalache, A. (2010). Towards Global Age-Friendly Cities: Determining Urban Features that Promote Active Aging. *Journal of Urban Health*, 87 (5), 733-739. doi: 10.1007/s11524-010-9466-0

- Plouffe, L., Kalache, A. & Voelcker, I. (2016). A Critical Review of the WHO Age-friendly Cities Methodology and Its Implications. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues* (19-36). Switzerland: Springer International Publishing.
- Power, A. (2004). Sustainable Communities and Sustainable Development: A Review of the Sustainable Communities Plan. Retrieved from: <http://sticerd.lse.ac.uk/dps/case/CR/CASereport23.pdf>
- Prior, L. (2008). Document Analysis. In *The Sage Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909.n120>
- Public Health Agency of Canada. (2012). Age-friendly Communities in Canada: Community Implementation Guide Toolbox. Retrieved from: <https://www.canada.ca/content/dam/canada/health-canada/migration/healthy-canadians/publications/healthy-living-vie-saine/age-friendly-communities-toolbox-2012-collectivites-amies-aines-boite-outils/alt/pub-eng.pdf>
- Putney, L. (2010). Case Study. In *Encyclopedia of Research Design*. doi: <http://dx.doi.org/10.4135/9781412961288.n39>
- Pyett, P. (2003). Validation of Qualitative Research in the “Real World”. *Qualitative Health Research*, 13 (8), 1170-1179. doi: 10.1177/1049732303255686
- Quebec. (2004). *Quebec Sustainable Development Plan: Consultation Document*. Retrieved from: <http://www.mddelcc.gouv.qc.ca/developpement/2004-2007/plan-consultation-en.pdf>
- Quebec Official Publisher. (2006). *National Assembly, Bill 118: Sustainable Development Act*. Retrieved from: <http://www2.publicationsduquebec.gouv.qc.ca/dynamicSearch/telecharge.php?type=5&file=2006C3A.PDF>
- Rothbauer, P. (2008). Triangulation. In *The Sage Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org/10.4135/9781412963909.n468>
- Sakka, N. & Pérez, J. (2006). Elaborating Metrics for the Accessibility of Buildings. *Computers, Environment and Urban Systems*, 30 (5), 661-685. Doi: 10.1016/j.compenvurbsys.2005.06.002

- Sandelowski, M. (2008). Theoretical Saturation. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412963909.n456>
- Sandelowski, M. (2008). Member Check. In *The SAGE Encyclopedia of Qualitative Research Methods*. doi: <http://dx.doi.org.proxy.lib.uwaterloo.ca/10.4135/9781412963909.n257>
- Sasseville, N., Simard, P., Mucha, J. (2012). A Survey of Canadian Healthy Communities Initiatives. Retrieved from: http://www.ohcc-ccso.ca/en/webfm_send/548
- Scharlach, A. (2016). Age-Friendly Cities: For Whom? By Whom? For What Purpose?. In Moulart, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues* (305-329). Switzerland: Springer International Publishing.
- Senior Health Knowledge Network. (n.d.). Age-friendly Community Planning Outreach Initiative. Retrieved from: <http://shrtn.on.ca/age-friendly-communities>
- Seniors Health Knowledge Network (n.d.). AFC Knowledge Exchange. Retrieved from: <http://shrtn.on.ca/afc-knowledge-exchange>
- Smart Growth Canada Network. (2007). *Welcome to the Smart Growth Canada Network Website*. Retrieved from: http://www.smartgrowth.ca/home_e.html
- Smart Growth Online. (n.d.). Why Smart Growth? Retrieved from: <http://www.smartgrowth.org/why.php>
- Smart Growth Network. (2006). This is Smart Growth. Retrieved from: <https://www.epa.gov/sites/production/files/2014-04/documents/this-is-smart-growth.pdf>
- Smart Growth Network. (n.d.). What is Smart Growth? Retrieved from: <http://www.smartgrowth.org/what-is-smart-growth/>
- Smart Growth Network. (n.d.). Why Smart Growth? Retrieved from: <http://www.smartgrowth.org/why.php>
- Smart Growth Network. (n.d.). *Smart Growth Principles*. Retrieved from: <http://smartgrowth.org/smart-growth-principles/>
- Statistics Canada. (2013). 2001 Census – Community Highlights for Waterloo, Ontario (City). Retrieved from: <http://www12.statcan.ca/english/profil01/CP01/Details/Page.cfm?Lang=E&Geo1=CSD&Code1=3530016&Geo2=PR&Code2=35&Data=Count&SearchText=waterloo&SearchType=Begins&SearchPR=35&B1=All&Custom=>

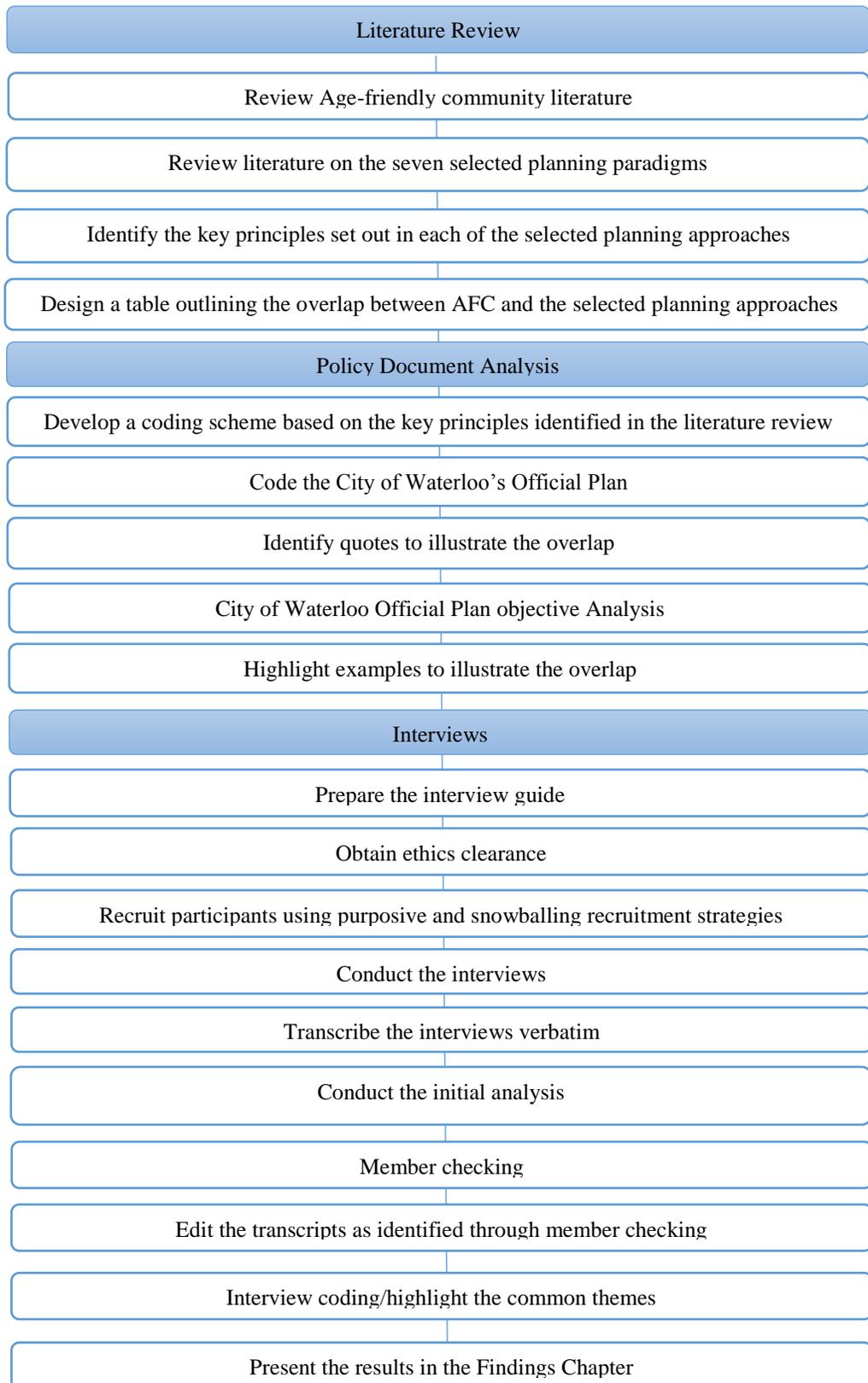
- Statistics Canada. (2015). 2011 Census Profile – Waterloo, CY, Ontario (Census Subdivision). Retrieved from: <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CSD&Code1=3530016&Geo2=CD&Code2=3530&Data=Count&SearchText=Waterloo&SearchType=Begins&SearchPR=35&B1=All&Custom=&TABID=1>
- Statistics Canada. (2016). Population by Sex and Age Group. Retrieved from <http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/demo10a-eng.htm>
- Storey, M. F. (1998). Maximizing Usability: The Principles of Universal Design. *Assistive Technology*, 10 (1), 4-12.
- Sykes, K. & Robinson, K. (2014). Making the Right Moves: Promoting Smart Growth and Active Aging in Communities. *Journal of Aging & Social Policy*, 26, 166-180. doi: 10.1080/08959420.2014.854648
- Taylor, M. (2010). The Healthy Cities Movement: Working Paper for the Lancet Commission on Healthy Cities. Retrieved from: https://www.ucl.ac.uk/healthy-cities/outputs/Working_Paper
- TCRP. (2004). Transit-Oriented Development in the United States: Experiences, Challenges, and Prospects. Transportation Research Board of the National Academies. Washington, D.C.
- The Centre for Urban Growth and Renewal (2012). Strong Neighbourhoods and Complete Communities: a New Approach to Zoning for Apartment Neighbourhoods. Retrieved from: http://cugr.ca/pdf/Apartment_Zoning.pdf
- Thomas, E. & Magilvy, J. (2011). Qualitative Rigor or Research Validity in Qualitative Research. *Journal for Specialists in Pediatric Nursing*, 16 (2), 151-155. doi: 10.1111/j.1744-6155.2011.00283.x
- Tobin, G. & Begley, C. (2004). Methodological Rigour within a Qualitative Framework. *Journal of Advanced Nursing*, 48 (4), 388-396. doi: 10.1111/j.1365-2648.2004.03207.x
- Tsenkova, S. (2009). Planning Sustainable Communities: Diversity of Approaches and Implementation Challenges. Retrieved from: https://www.ucalgary.ca/cities/files/cities/SUSTAINABLE_COMMUNITIES.pdf
- Tsenkova, S. & Syal, B. (n.d.). Planning Sustainable Communities: Implementing Calgary's Vision. Retrieved from: https://www.ucalgary.ca/cities/files/cities/TSENKOVA_SYAL-5.pdf
- Statistics Canada (2014, April 17). Focus on Geography Series, 2011 Census. Retrieved from: <http://www12.statcan.gc.ca/census-recensement/2011/as-sa/fogs-spg/Facts-csd-eng.cfm?LANG=Eng&GK=CSD&GC=3530016>

- UBCM. (2010). Planning for the Future: Age-Friendly and Disability-Friendly Official Community Plans. Retrieved from: <http://www.ubcm.ca/assets/Resolutions~and~Policy/Policy/Healthy~Communities/Planning%20for%20the%20Future.pdf>
- United Nations. (2002). Political Declaration and Madrid International Plan of Action on Ageing. New York: United Nations. Retrieved from: http://www.un.org/en/events/pastevents/pdfs/Madrid_plan.pdf
- United Nations. (2015). Declaration on the Rights of Disabled Persons. Retrieved from: <http://www.ohchr.org/EN/ProfessionalInterest/Pages/RightsOfDisabledPersons.aspx>
- United States Department of Justice: Civil Rights Division. (n.d.). The Americans with Disabilities Act of 1990 and Revised ADA Regulations Implementing Title II and Title III. Retrieved from: https://www.ada.gov/2010_regs.htm
- United States Department of Labor. (n.d.). Americans with Disabilities Act. Retrieved from: <https://www.dol.gov/general/topic/disability/ada>
- Vine, D., Buys, L. & Aird, R. (2012). The Use of Amenities in High Density Neighbourhoods by Older Urban Australian Residents. *Landscape and Urban Planning*, 107, 159-171. doi: 10.1016/j.landurbplan.2012.05.013
- Walker, A. (2016). Population Ageing from a Global and Theoretical Perspective: European Lessons on Active Ageing. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues* (47-64). Switzerland: Springer International Publishing.
- Warth, L. (2016). The WHO Global Network of Age-friendly Cities and Communities: Origins, Developments and Challenges. In Moulaert, T. & Garon, S. (Eds.), *Age-friendly Cities and Communities in International Comparison: Political Lessons, Scientific Avenues, and Democratic Issues* (37-46). Switzerland: Springer International Publishing.
- Waterloo Region. (2011). Strategic Focus 2011-2014. Waterloo Region Profile: Statistics, Trends & Forecasts. Retrieved from: <http://www.regionofwaterloo.ca/en/regionalGovernment/resources/waterlooregionprofile.pdf>
- Wey, W-M. & Chiu, Y-H. (2013). Assessing the Walkability of Pedestrian Environment Under the Transit-oriented Development. *Habitat International*, 38, 106-118. doi: 10.1016/j.habitatint.2012.05.004
- World health organization. (2002). Active aging: A policy framework. Geneva: World Health Organization.

- World Health Organization. (2007). *Global Age-friendly Cities: a Guide*. Geneva: World Health Organization.
- World Health Organization. (2007b). *Checklist of Essential Features of Age-Friendly Cities*. Retrieved from: http://www.who.int/ageing/publications/Age_friendly_cities_checklist.pdf
- World Health Organization. (2007c). *WHO Age-friendly Cities Project Methodology: Vancouver Protocol*. Retrieved from: http://www.who.int/ageing/publications/Microsoft%20Word%20-%20AFC_Vancouver_protocol.pdf
- World Health Organization. (2009). *WHO Global Network of Age-Friendly Cities*. Retrieved from: <http://www.who.int/ageing/Brochure-EnglishAFC9.pdf>
- World Health Organization. (2014). *Welcome to Age-friendly World*. Retrieved from: <http://agefriendlyworld.org/en/>
- World Health Organization. (2014c). *A Global Network*. Retrieved from: <http://agefriendlyworld.org/en/who-network/>
- 8 80 Cities. (n.d.). *About Us*. Retrieved from: <http://www.880cities.org/index.php/about/who-we-are>

Appendices

Appendix 1: Research Strategy



Appendix 2: Content Analysis Coding Scheme

Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Pleasant, clean and safe environments (AFC 1)	Preserve green space, environmentally sensitive areas and farmland (SG 1)	Moderate and high density (compact) mix-use developments (higher densities closest to the transit stations) (TOD 1)	Equitable use (designed for people with diverse abilities) (UD 1)	Minimum number of accessible parking spaces (AP 1)	A clean, safe, high quality physical environment (including housing quality). (HC 1)	Promote quality of life (SC 1)	Walkability (NU 1)
Pedestrian friendly walkways and cycle paths. (AFC 2)	Practice broad-scale planning that integrates land-use and transportation planning at the regional scale (SG 2)	Located along transit systems/near transit stations (TOD 2)	Flexibility in use (designed to accommodate a wide range of individual preferences and abilities) (UD 2)	Accessible pathways (AP 2)	An ecosystem which is stable now and sustainable in the long term. (HC 2)	Enhance local economic vitality (SC 2)	Connectivity (NU 2)
Accessible and age-friendly buildings (AFC 3)	Renew existing infrastructure. Direct urban development towards existing communities, and ensure that all such development is compact. (SG 3)	Located within a short walk from transit stops or environments that encourage walking (TOD 3)	Simple and intuitive use (use of the design is easy to understand, regardless of the user's experience, knowledge, language skills, or current concentration level) (UD 3)	Elevator requirements in all multi-storey buildings (AP 3)	A strong, mutually-supportive and non-exploitative community. (HC 3)	Promote social and intergenerational equity (SC 3)	Mixed-use and diversity (NU 3)
Accessible, affordable, reliable and frequent public transit routes. (AFC 4)	Promote compact mixed land uses (SG 4)	Provide a variety of transportation alternatives (TOD 4)	Perceptible information (the design communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities) (UD 4)	Stairs height and width standards. (AP 4)	A high degree of public participation in and control over the decisions. (HC 4)	Maintain and enhance the quality of the environment (SC 4)	Mixed housing (NU 4)
Transit routes are well connected and reach key destinations. (AFC 5)	Provide a variety of transportation alternatives (major focus on public transit) (SG5)	Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments (TOD 5)	Tolerance for error (The design minimizes hazards and the adverse consequences of accidental or unintended actions) (UD 5)	Door and hallway height and width requirements (AP 5)	The meeting of basic needs (food, water, shelter, income, safety, work) for all the City's people. (HC 5)	Incorporate disaster resilience and mitigation into its decisions and actions (SC 5)	Quality architecture and urban design (NU 5)

Appendix 2 (Continued): Content Analysis Coding Scheme

Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Affordable and accessible priority parking spots and pick-up areas (AFC 6)	Innovative and compact building designs. Promote green infrastructure. (SG 6)	Encourage transit ridership yet does not exclude the car (reduce automobile use). Limit parking or strategically locate parking to encourage transit ridership. The environment encourages people to walk more and drive less. (TOD 6)	Low physical effort (The design can be used efficiently and comfortably with a minimum of fatigue) (UD 6)	Stable, firm, and slip-resistant walking surfaces (AP 6)	Access to a wide variety of experiences and resources with the possibility of multiple contacts, interaction and communication (HC 6)	Use a participatory process when making decisions (SC 6)	Traditional neighbourhood structure (NU 6)
Range of affordable housing designed to accommodate the needs of older adults in order to promote ageing in place (AFC 7)	Provide a range of affordable, quality housing alternatives (SG 7)		Size and space for approach and use (Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user's body size, posture or mobility) (UD 7)	Slope and width requirements for curb ramps along street crossings (AP 7)	A diverse, vital and innovative city economy. (HC 7)		Increased density (NU 7)
Access to a range of affordable social events and activities to appeal to the diverse population of older adults (AFC 8)	Walkable neighbourhoods (SG 8)			Accessibility requirements for emergency exits or accessible areas of rescue assistance. (AP 8)	Encouragement of connectedness with the past, with the cultural and biological heritage and with other groups and individuals. (HC 8)		Smart (Green) Transportation (NU 8)
Encourage civic participation among older adults and include them in decision-making (AFC 9)	Promote community involvement in development decisions (SG 9)			Wayfinding to identify accessible elements (AP 9)	An optimum level of appropriate public health and sick care services accessible to all. (HC 9)		Sustainability (NU 9)

Appendix 2 (Continued): Content Analysis Coding Scheme

Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Range of volunteer, employment and entrepreneurial opportunities for older adults (AFC 10)				Standards for sign content (width to height ratio, braille, high contrast letters, etc.) (Refer to the Urban Design Manual) (AP 10)			Quality of life (NU 10)
Widespread distribution of information in age-friendly formats and design (AFC 11)				Visual and audio alarms (AP 11)			
Offer a wide range of accessible health and social support services, including home care and residential care facilities (AFC 12)				Accessible seating (AP 12)			

Appendix 3: Interview Guide

Interview Date and Time:

Background Information:

Name:

Employer:

Job title and role:

Level of involvement and role in age-friendly community planning initiatives:

Current Age-friendly Community Planning Initiatives:

- 1) Based on your experience, what are the strengths and shortcomings of current age-friendly community planning initiatives?
- 2) What are some of the challenges that you encounter when implementing age-friendly initiatives?
- 3) Are age-friendly community agendas over-ambitious? Can they adequately respond to the needs of the community or do they suffer from a lack of resources and funding?
- 4) What changes would you recommend to improve current age-friendly community planning initiatives to better accommodate the diverse needs of the older adult population?

Policy Overlap:

- 5) Have you noticed an overlap or conflicting priorities between AFC initiatives and other mainstream planning paradigms such as Smart Growth, universal design and healthy communities?
- 6) Is there a lack of policy coordination between planning paradigms that has led to a duplication of services or the diversion of effort away from the pursuit of competing priorities as they are all seeking funds from the same source?
- 7) Do you have various committees that are working towards the same goals yet have distinct priorities? Would they benefit from working together?
- 8) What are your thoughts on creating a unified planning approach that addresses all planning paradigms?
- 9) Are joint policies a legitimate policy issue?

Comprehensive Planning Approach:

- 10) Would a comprehensive planning framework be effective in meeting the needs of all members of the community?
- 11) Do you believe that a comprehensive planning approach would help improve communication, coordination and the exchange of information among stakeholders, avoid duplication of services and improve efficiencies?

Concluding Questions and Comments:

- 12) Do you know any other planners who are involved in AFC planning?
- 13) Any final questions or comments?

Appendix 4: Overlap and Similarities between AFC and Mainstream Planning Approaches

Age-Friendly Communities Key Principles	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Outdoor spaces and buildings							
Public areas are pleasant and clean	NE	I	NE	NE	E	I	NE
Sufficient green spaces that are well-maintained and safe	I	NE	NE	NE	I	NE	NE
Somewhere to rest/outdoor seating	NE	NE	NE	E	NE	NE	NE
Pavements are well-maintained, non-slip, wide enough for wheelchairs, and have dropped curbs	NE	NE	I	E	NE	NE	NE
Safe pedestrian crossings	E	NE	NE	E	NE	NE	I
Walkways and cycle paths are separate	NE	NE	NE	NE	NE	NE	NE
A secure environment (good street lighting, police patrols and community education)	NE	NE	NE	NE	NE	NE	E
Services are accessible	NE	NE	I	E	NE	NE	NE
Special customer service arrangements are provided	NE	NE	NE	E	NE	NE	NE
Age-friendly buildings (well-signed and accessible)	NE	NE	I	E	NE	NE	E
Adequate and clean public toilets	NE	NE	NE	NE	NE	NE	NE
Transportation							
Public transit is affordable	NE	NE	NE	NE	NE	E	NE
Public transit is reliable and frequent	NE	NE	NE	NE	NE	E	NE
All city areas and services are accessible by public transportation, with good connections and well-marked routes and vehicles.	E	E	NE	NE	NE	E	E
Vehicles are clean, accessible and have priority seating	NE	NE	I	E	NE	NE	NE
Specialized services for disabled people	NE	NE	NE	E	NE	NE	NE
Passenger courtesy (stop next to the curb and wait for passengers to be seated)	NE	NE	NE	E	NE	NE	NE
Transport stops and stations are conveniently located, accessible, safe, clean, well-lit, well-marked, etc.	NE	E	NE	E	NE	E	NE
Complete and accessible information about routes, schedules	NE	NE	NE	E	NE	NE	NE
Voluntary transport service is available where transit is too limited	NE	NE	NE	NE	NE	NE	NE
Taxis are accessible and affordable	NE	NE	NE	NE	NE	NE	NE
Roads are well-maintained	NE	NE	NE	NE	NE	NE	NE
Traffic flow is well-regulated	NE	NE	NE	NE	NE	NE	NE
Roadways are free of obstructions	NE	NE	NE	NE	NE	NE	NE
Traffic signs and intersections are visible and well-placed	NE	NE	NE	NE	NE	NE	NE
Driver education and refresher courses	NE	NE	NE	NE	NE	NE	NE
Parking areas are safe and conveniently located	NE	NE	NE	NE	NE	NE	I
Priority parking and drop-off spots for people with special needs	NE	NE	NE	E	NE	NE	NE

Appendix 4 (Continued): Overlap and Similarities between AFC and Mainstream Planning Approaches

Age-Friendly Communities Key Principles	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Housing							
Sufficient and affordable housing is safe and close to services	E	NE	NE	NE	I	E	E
Sufficient and affordable home maintenance and support services	NE	NE	NE	NE	NE	NE	NE
Housing is safe and comfortable	NE	NE	I	NE	NE	E	NE
Interior spaces allow for movement in all rooms and hallways	NE	NE	I	E	NE	NE	NE
Home modifications are available and affordable	NE	NE	NE	I	NE	NE	NE
Rental housing is clean, well-maintained and safe	NE	NE	NE	NE	NE	E	NE
Sufficient and affordable housing for disabled older people	NE	NE	NE	NE	NE	I	NE
Social Participation							
Venues for events and activities are conveniently located, accessible, well-lit	NE	NE	NE	E	NE	NE	NE
Events are held at times convenient for older people	NE	NE	NE	NE	NE	NE	NE
Activities can be attended alone or with a companion	NE	NE	NE	NE	NE	NE	NE
Activities and attractions are affordable with no additional participation costs	NE	NE	NE	NE	NE	NE	NE
Provide information about activities and events	NE	NE	NE	NE	NE	NE	NE
Wide variety of activities are offered to appeal to the diverse population of older people	NE	NE	NE	NE	I	NE	NE
Gatherings are held in various locations such as recreation centres, schools, libraries, etc.	NE	NE	NE	NE	NE	NE	NE
Outreach to include people at risk of social isolation	NE	NE	NE	NE	NE	NE	NE
Respect and social inclusion							
Older people are regularly consulted on how to serve them better	NE	NE	NE	NE	NE	NE	NE
Services and products to suit varying needs and preferences	NE	NE	NE	E	NE	NE	NE
Service staff are courteous and helpful	NE	NE	NE	E	NE	NE	NE
Older people are visible in the media and depicted positively and without stereotyping	NE	NE	NE	NE	NE	NE	NE
Community-wide settings, activities and events attract all generations	NE	NE	NE	NE	NE	NE	NE
Older people are included in 'family' activities	NE	NE	NE	NE	NE	NE	NE
Schools teach about ageing and older people, and involve them in school activities	NE	NE	NE	NE	NE	NE	NE
Older people are recognized for their contributions	NE	NE	NE	NE	NE	NE	NE
Older people who are less well-off have good access to services	NE	NE	NE	NE	NE	NE	NE

Appendix 4 (Continued): Overlap and Similarities between AFC and Mainstream Planning Approaches

Age-Friendly Communities Key Principles	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Civic Participation and Employment							
Range of volunteer options	NE	NE	NE	NE	NE	NE	NE
The qualities of older employees are well-promoted	NE	NE	NE	NE	NE	NE	NE
Range of employment opportunities	NE	NE	NE	NE	NE	E	NE
Discrimination on the basis of age is forbidden	NE	NE	NE	NE	NE	NE	NE
Workplaces are adapted to meet the needs of disabled people	NE	NE	I	E	NE	NE	NE
Self-employment options are promoted and supported	NE	NE	NE	NE	NE	E	NE
Training is provided for older workers	NE	NE	NE	I	I	I	NE
Decision-making bodies facilitate membership of older people	I	NE	NE	NE	I	I	NE
Communication and information							
Communication system reaches residents of all ages	I	NE	NE	I	NE	NE	NE
Regular and widespread distribution of information	NE	NE	NE	NE	NE	NE	NE
Regular information and broadcasts of interest to older people are offered	NE	NE	NE	NE	NE	NE	NE
Oral communication accessible to older people	NE	NE	NE	I	NE	NE	NE
People at risk of social isolation get one-to-one information	NE	NE	NE	NE	NE	NE	NE
Public and commercial services provide person-to-person service	NE	NE	NE	E	NE	NE	NE
Printed information is legible	NE	NE	NE	I	NE	NE	NE
All communication uses simple language	NE	NE	NE	I	NE	NE	NE
Telephone answering services provide information slowly and clearly	NE	NE	NE	NE	NE	NE	NE
Electronic equipment has large buttons and big lettering	NE	NE	NE	I	NE	NE	NE
Wide public access to computers and the Internet at no or minimal charge	NE	NE	NE	E	NE	NE	NE
Community and Health Services							
Adequate range of health and community support services	NE	NE	NE	E	E	E	NE
Home care services include health and personal care and housekeeping	NE	NE	NE	NE	NE	NE	NE
Health and social services are conveniently located and accessible	NE	NE	NE	E	NE	NE	NE
Residential care facilities and designated older people housing are located close to services and the rest of the community	NE	NE	NE	NE	NE	NE	NE
Health and community service facilities are safely constructed and fully accessible	NE	NE	NE	E	NE	NE	NE
Clear and accessible information is provided about health and social services for older people	NE	NE	NE	I	NE	NE	NE
Delivery of services is coordinated and administratively simple	NE	NE	NE	I	NE	NE	NE
All staff are respectful, helpful and trained to serve older people	NE	NE	NE	E	NE	NE	NE
Economic barriers impeding access to health and community support services are minimized	NE	NE	NE	NE	NE	E	NE
Voluntary services are encouraged	NE	NE	NE	NE	NE	NE	NE
Sufficient and accessible burial sites	NE	NE	NE	NE	NE	NE	NE
Community emergency planning takes into consideration the vulnerability and capabilities of older people.	NE	NE	NE	E	NE	NE	NE

Appendix 4 (Continued): Overlap and Similarities between AFC and Mainstream Planning Approaches

Age-Friendly Communities Key Principles	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Total E	3	2	0	24	2	11	4
Total I	3	1	7	9	5	4	2
Total E and I	6	3	7	33	7	15	6
Total NE	77	80	76	50	76	68	77

Appendix 5: City of Waterloo Official Plan Objective Analysis

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Transportation								
Reduced reliance on the automobile in favour of alternative modes of travel	I	I	E	NE	NE	I	I	E
Support public transit	E	E	E	NE	NE	NE	E	E
Promote walking and biking	I	E	E	NE	NE	E	E	E
Connectivity between the various modes of transportation	E	E	E	NE	NE	NE	NE	E
Safe, convenient, efficient and accessible modes of transportation	E	E	I	NE	NE	NE	E	NE
Accommodates users of varying degrees of mobility	E	NE	NE	E	E	NE	E	NE
Parking for both motorized vehicles and bicycles	NE	NE	NE	NE	NE	NE	NE	NE
Minimize surface parking and encourage the use of parking structures and/or underground parking	NE	E	NE	NE	NE	NE	NE	NE
Incorporate traffic calming design elements	I	NE	NE	NE	NE	NE	NE	NE
Comprehensive and connected trail system	NE	NE	NE	NE	NE	NE	NE	E
Housing								
Range and mix of housing types, sizes, costs and tenure	E	E	NE	NE	NE	NE	E	E
Environmental Sustainability								
Sustainable design practices	NE	I	I	NE	NE	E	E	E
Encourage pollution reduction	NE	NE	I	NE	NE	NE	E	NE
Address the impacts of extreme weather events induced by climate change	NE	NE	NE	NE	NE	NE	NE	NE
Protect mineral aggregate resources	NE	NE	NE	NE	NE	NE	NE	NE
Minimize the impacts of aggregate extraction on the natural environment and quality of life	NE	NE	NE	NE	NE	NE	NE	NE
Waste reduction, re-use and recycling	NE	NE	NE	NE	NE	NE	E	NE
Support the redevelopment of brownfields	NE	E	NE	NE	NE	NE	E	E
Prevent and minimize natural hazards	NE	NE	NE	NE	NE	NE	NE	NE
Green technology	NE	E	I	NE	NE	NE	E	E
Retain significant elements of the City's natural, built and cultural heritage	NE	E	NE	NE	NE	E	E	E

Appendix 5 (Continued): City of Waterloo Official Plan Objective Analysis

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Environmental Sustainability (continued)	AFC	SG	TOD	UD	AP	HC	SC	NU
Protect the natural environment	NE	E	NE	NE	NE	E	E	E
More efficient use of resources	NE	E	NE	NE	NE	E	E	I
Energy conservation	NE	NE	NE	NE	NE	NE	NE	E
Encourage the use of alternative, renewable energy systems	NE	NE	NE	NE	NE	NE	NE	NE
Public Participation								
Encourage community involvement in the decision-making process	E	E	NE	NE	NE	E	E	NE
Provide clear and relevant information and notification to the community	E	E	NE	NE	NE	NE	E	NE
Communication and education of issues to all people	E	E	NE	NE	NE	NE	E	NE
Collaboration between all stakeholders	NE	E	NE	NE	NE	NE	E	NE
Built Form								
City form that reduces the urban heat island	NE	NE	NE	NE	NE	NE	NE	NE
Mixed-use development	NE	E	E	NE	NE	NE	E	E
Complete community	NE	E	NE	NE	NE	NE	NE	NE
Higher density/ compact urban form/intensification	NE	E	E	NE	NE	NE	E	E
High quality architecture and urban design	NE	E	E	I	I	NE	NE	E
Efficient use of land	NE	E	I	NE	NE	NE	I	E
Unique neighbourhoods	NE	E	NE	NE	NE	NE	NE	I
Provide a range of safe, comfortable, lively and accessible environments	E	E	NE	I	I	E	E	E
Attractive, human-scale development	NE	E	I	NE	NE	NE	E	E
Pedestrian friendly	E	E	E	NE	I	E	E	E
Compatible development	NE	E	NE	NE	NE	NE	NE	I
People live closer to where they work, learn, shop and play	NE	E	E	NE	NE	NE	I	E
Liveable and healthy urban form	NE	E	I	NE	NE	I	E	I
Interesting streetscapes, building design and architecture, amenity spaces and landmarks	NE	E	NE	NE	NE	NE	NE	E

Appendix 5 (Continued): City of Waterloo Official Plan Objective Analysis

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Built Form (Continued)								
Encourage infrastructure that is well designed, aesthetically pleasing and does not negatively impact sightlines and views.	NE	E	NE	NE	NE	NE	NE	E
Ensure the provision of necessary infrastructure to accommodate anticipated growth	NE	NE	NE	NE	NE	NE	NE	NE
Provision and maintenance of municipal services and utilities	NE	E	NE	NE	NE	NE	NE	NE
Economy								
Foster local economic development	NE	NE	NE	NE	NE	NE	E	NE
Facilitate economic vitality	NE	NE	NE	NE	NE	E	E	NE
Well-balanced and diverse economy	NE	NE	NE	NE	NE	E	E	NE
Promote tourism opportunities	NE	NE	NE	NE	NE	NE	NE	NE
Economy that serves the employment needs of existing and future residents	E	NE	NE	NE	NE	NE	E	NE
Support entrepreneurship, creativity, connectivity and sharing of ideas	E	NE	NE	NE	NE	NE	E	NE
Collaboration with post-secondary institutions to accommodate future enrollment growth	NE	NE	NE	NE	NE	I	I	NE
Attract and retain a skilled and knowledgeable workforce	NE	NE	NE	NE	NE	NE	NE	NE
Support lifelong learning	E	NE	NE	NE	NE	E	E	NE
Arts, Culture, Heritage, Recreation and Leisure Opportunities								
Diversity of arts, culture, heritage, recreation and leisure opportunities	E	NE	NE	NE	NE	NE	NE	NE
Arts, culture, heritage, recreation and leisure opportunities that are safe, physically and economically accessible and accepting of all people with different backgrounds and cultures	E	NE	NE	NE	NE	NE	NE	NE
Respect historical patterns and boundaries	NE	E	NE	NE	NE	NE	NE	E
Conservation of cultural heritage resources	NE	E	NE	NE	NE	E	E	E
Protect and preserve the City's existing natural, built and cultural heritage	NE	E	NE	NE	NE	E	E	E
Community Support and Health Services								
Facilitate the achievement of emergency response targets	NE	NE	NE	NE	NE	NE	NE	NE

Appendix 5 (Continued): City of Waterloo Official Plan Objective Analysis

Objectives	Age-Friendly Communities	Smart Growth	Transit-Oriented Development	Universal Design	Accessibility Planning	Healthy Communities	Sustainable Communities	New Urbanism
Communication and Information								
Invest in technology and communication infrastructure	NE	NE	NE	NE	NE	NE	NE	NE
Facilitate interaction and social connections	E	E	NE	NE	NE	E	NE	E
Encourage interaction, innovation and creativity	NE	NE	NE	NE	NE	NE	E	NE
Foster knowledge, innovation and ideas	NE	NE	NE	NE	NE	NE	E	NE
Other								
Contribute to high quality of life	I	E	NE	I	I	NE	E	E
Accommodate all people at all stages of life	E	NE	NE	I	I	NE	NE	NE
Sense of community and belonging	NE	E	NE	NE	NE	NE	E	E
Great place to live, work, learn, shop and play	I	E	NE	NE	NE	NE	NE	E
Totals	AFC	SG	TOD	UD	AP	HC	SC	NU
Total E	17	37	9	1	1	14	30	29
Total I	5	2	7	4	5	3	4	4
Total E and I	22	39	16	5	6	17	34	33
Total NE	47	30	53	64	63	52	35	36

Appendix 6: Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan (2014)	Coding
Pleasant, clean and safe environments (AFC 1)	<p>“Plan for neighbourhoods that: Provide a safe and healthy environment that promotes healthy lifestyles” (p. 17) (AFC1-E, HC1-E, NU1-I, SG8-I, AFC2-I, TOD5-I)</p> <p>“Applying appropriate standards to development to support the safety, health and well-being of residents of all ages” (p. 37) (AFC1-E, HC1-E, HC5-I, SC1-I).</p>	<p>HC 1 = A clean, safe, high quality physical environment (including housing quality)</p> <p>NU 1 = Walkability</p> <p>SG 8 = Walkable neighbourhoods</p> <p>AFC 2 = Pedestrian friendly walkways and cycle paths</p> <p>TOD 5 = Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments</p> <p>HC 5 = The meeting of basic needs (food, water, shelter, income, safety, work) for all the City’s people.</p> <p>SC 1 = Promote quality of life</p>
Pedestrian friendly walkways and cycle paths. (AFC 2)	<p>“Providing well maintained and safe physical <i>infrastructure</i>, including an integrated and comprehensive cycling and <i>pedestrian</i> system” (p. 37) (NU1-I, AFC2-E, SG8-E, TOD5-E)</p>	<p>NU 1 = Walkability</p> <p>SG 8 = Walkable neighbourhoods</p> <p>TOD 5 = Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments</p>
Accessible and age-friendly buildings (AFC 3)	<p>“<i>Barrier-free</i> access will be encouraged to building entrances from the public street, particularly along transit routes” (p. 44) (AFC3-E, AP10-I, AP9-I, AP5-I, AP4-I, AP2-I, UD-I).</p> <p>“All sites shall provide convenient, direct and safe <i>pedestrian, barrier-free</i> access and cyclist access to building entrances, amenity spaces, the public realm and other important destinations” (p. 41) (AFC3-I, AP2-I, UD-I, TOD5-I, SG8-I, NU1-I).</p>	<p>AP 10 = Standards for sign content (width to height ratio, braille, high contrast letters, etc.)</p> <p>AP 9 = Wayfinding to identify accessible elements</p> <p>AP 5 = Door and hallway height and width requirements</p> <p>AP 4 = Stairs height and width standards</p> <p>AP 2 = Accessible pathways</p> <p>UD = Universal design</p> <p>TOD 5 = Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments</p> <p>SG 8 = Walkable neighbourhoods</p> <p>NU 1 = Walkability</p>

Appendix 6 (Continued): Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan	Coding
<p>Accessible, affordable, reliable and frequent public transit routes. (AFC 4)</p>	<p>“Provides for the safe and convenient movement of goods and people with varying degrees of mobility within and to/from Waterloo” (p. 91) (AFC4-I, AFC5-I, SG5-I, TOD4-I)</p> <p>“Facilitate movement within and between neighbourhoods that is safe, convenient and accessible to all by walking, biking, public transit and other motorized vehicles” (p. 17) (NU1-E, SG8-E, AFC2-E, TOD5-E, NU2-I, AFC4-E, AFC5-I, SG5-E, TOD4-E, TOD6-I, TOD2-I, TOD3-I)</p>	<p>AFC 5 = Transit routes are well connected and reach key destinations</p> <p>SG 5 = Provide a variety of transportation alternatives (major focus on public transit)</p> <p>TOD 4 = Provide a variety of transportation alternatives</p> <p>NU 1 = Walkability</p> <p>SG 8 = Walkable neighbourhoods</p> <p>AFC 2 = Pedestrian friendly walkways and cycle paths</p> <p>TOD 5 = Foster walkability (high quality cycling and walking environments)/pedestrian-friendly environments</p> <p>NU 2 = Connectivity</p> <p>TOD 6 = Encourage transit ridership yet does not exclude the car (reduce automobile use). Limit parking or strategically locate parking to encourage transit ridership. The environment encourages people to walk more and drive less</p> <p>TOD 2 = Located along transit systems/near transit stations</p> <p>TOD 3 = Located within a short walk from transit stops or environments that encourage walking</p>

Appendix 6 (Continued): Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan	Coding
<p>Transit routes are well connected and reach key destinations. (AFC 5)</p>	<p>“Provides for a high level of connectivity, facilitating the safe and efficient movement of people and goods between destinations within and around the community, particularly by sustainable transportation modes” (p. 16) (NU2-E, AFC5-E, AFC4-E, SG5-I, TOD4-I, NU9-I)</p> <p>“Planning for a comprehensive, multi-modal, well-connected transportation system that offers safe and convenient alternatives to automobile travel” (p. 91) (NU2-E, AFC5-E, TOD4-E, TOD6-E, AFC4-E)</p>	<p>NU 2 = Connectivity AFC 4 = Accessible, affordable, reliable and frequent public transit routes SG 5 = Provide a variety of transportation alternatives (major focus on public transit) TOD 4 = Provide a variety of transportation alternatives NU 9 = Sustainability TOD 6 = Encourage transit ridership yet does not exclude the car (reduce automobile use). Limit parking or strategically locate parking to encourage transit ridership. The environment encourages people to walk more and drive less</p>
<p>Affordable and accessible priority parking spots and pick-up areas (AFC 6)</p>	<p>“To plan for bicycle and vehicular parking areas that are attractive and well designed and reflect consideration of safe, secure and convenient access to all segments of the community” (p. 93) (AP1-E, AFC6-E, HC1-I, AFC1-I)</p>	<p>AP1 = Minimum number of accessible parking spaces HC 1 = A clean, safe, high quality physical environment (including housing quality). AFC 1 = Pleasant, clean and safe environments</p>

Appendix 6 (Continued): Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan	Coding
<p>Range of affordable housing designed to accommodate the needs of older adults in order to promote ageing in place (AFC 7)</p>	<p>“The City will plan for the provision of an appropriate range and mix of housing types, sizes, costs and tenure within neighbourhoods” (p. 37) (AFC7-E, SG7-E, NU4-E)</p> <p>“Encouraging accessible and <i>visitable</i> housing in order to facilitate ease of living and aging in place” (p. 38) (UD-I, AP-I, AFC7-E).</p> <p>“This Plan supports the efforts of senior levels of government, private sector, and not-for-profit agencies to provide housing geared to the needs of economically, socially, mentally and physically disadvantaged persons” (p. 177) (Udall-I, APall-I, NU4-I, SG7-I, AFC7-E).</p>	<p>SG 7 = Provide a range of affordable, quality housing alternatives</p> <p>NU4 = Mixed housing</p> <p>UD = Universal design</p> <p>AP = Accessibility planning</p>
<p>Access to a range of affordable social events and activities to appeal to the diverse population of older adults (AFC 8)</p>	<p>“Plan for a diversity of arts, culture, heritage, recreation and leisure opportunities that are safe as well as physically and economically accessible and accepting of all people with different backgrounds and cultures” (p. 52) (AFC8-E, HC6-I, HC8-I, AP-I)</p> <p>“The City will take a leadership role in planning for the provision of arts, culture, heritage, recreation and leisure services, focusing on expanding the accessibility, availability, affordability and mix of services available to residents” (p. 54) (AFC8-E, HC6 – I, HC8 - I)</p>	<p>HC 6 = Access to a wide variety of experiences and resources with the possibility of multiple contacts, interaction and communication</p> <p>HC 8 = Encouragement of connectedness with the past, with the cultural and biological heritage and with other groups and individuals</p> <p>AP = Accessibility planning</p>

Appendix 6 (Continued): Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan	Coding
Encourage civic participation among older adults and include them in decision-making (AFC 9)	“Encourage all people to provide input and support their participation in decision-making processes in which individuals are treated fairly and without bias in an open, orderly and impartial manner” (p. 328) (AFC9-E, SG9-E, HC4-E, SC6-E)	SG 9 = Promote community involvement in development decisions HC4 = A high degree of public participation in and control over the decisions SC6 = Use a participatory process when making decisions
Range of volunteer, employment and entrepreneurial opportunities for older adults (AFC 10)	“Planning policy at the overall community level focuses on providing for a full range of housing choices, as well as commercial, <u>employment</u> , recreational, cultural, and educational opportunities which all serve to meet residents’ needs throughout their lifetime” (p. 15) (SC3-I, AFC8-I, AFC10-I, HC5-I).	SC 3 = Promote social and intergenerational equity AFC 8 = Access to a range of affordable social events and activities to appeal to the diverse population of older adults HC 5 = The meeting of basic needs (food, water, shelter, income, safety, work) for all the City’s people
Widespread distribution of information in age-friendly formats and design (AFC 11)	“Provide clear and relevant information and notification to the community in a timely and appropriate manner” (p. 328) (AFC11-I) “Foster communication and education of issues to all people and groups” (p. 328) (AFC11-I)	This AFC dimension is not directly related to other planning frameworks.

Appendix 6 (Continued): Examples Illustrating the Overlap between the Planning Frameworks in the City of Waterloo’s Official Plan

Age-Friendly Communities	Examples of Overlap from the City of Waterloo’s Official Plan	Coding
Offer a wide range of accessible health and social support services, including home care and residential care facilities (AFC 12)	“All members of the community have access to the goods and services they require in their daily lives” (p. 10) (HC5-I, HC1-I, HC6-I, HC9-E, AFC12-E).	<p>HC 5 = The meeting of basic needs (food, water, shelter, income, safety, work) for all the City’s people</p> <p>HC 6 = Access to a wide variety of experiences and resources with the possibility of multiple contacts, interaction and communication</p> <p>HC 9 = An optimum level of appropriate public health and sick care services accessible to all</p>