

Aging and Living Together
At Home, in One's Community, in Québec

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Message from the Premier

All industrialized countries are feeling the effects of population aging, and Québec is no exception. In fact, the pace at which Québec's population is aging is second only to that of Japan. People aged 65 and over accounted for 15.7% of Québec's population in 2011; by 2013, they will account for 25.6%.

Over the past several years, the Québec government has taken concrete steps to take this situation into account. A series of measures have been gradually implemented to more adequately address the needs of older adults and foster active aging. These measures have paved the way for a coherent and integrated vision of government action in favour of Québec seniors – the *Aging and Living Together* Policy that I announced in February 2011.

This policy, which is Québec's first policy on aging, is a product of concerted action by several government departments and agencies. It aims to create the best conditions possible for seniors to continue living in their home environment and to contribute fully to the economic, social and cultural development of Québec. Moreover, it confirms our support for all of our partners so that we can continue working together to adapt our living environments to population aging.

We hope that this ambitious policy will change people's perception of aging so that they will see it as an asset for developing an ever more inclusive society – a society for all ages.

Aging and Living Together means living in a Québec that is attuned to the needs of its seniors, a Québec that focuses on all of its citizens, young and old alike.

Jean Charest

Premier

Minister responsible for Youth Issues

Message from the Minister responsible for Seniors

Since my appointment as Minister responsible for Seniors, I have worked on setting the guidelines for this policy, which is the reflection of a new reality: people are living and remaining in good health longer than ever before. Aging is just one more stage of life and we must learn to take full advantage of it.

During the public consultation on the living conditions of Québec seniors, held in 2007, older adults expressed a keen desire to remain active and feel “at home” in their living environment, regardless of the type of setting in which they lived.

Therefore, we have focused our efforts on better addressing seniors’ needs. We have implemented various measures to provide older adults with a living environment where they can thrive and to encourage them to actively participate in society. We can be proud of the progress made thus far. With the *Aging and Living Together* Policy, we have taken a new and decisive step toward improving the living conditions of seniors.

Aging and Living Together is a caring policy that is aligned with the concerns of the elderly and aimed at improving their day-to-day lives. It recognizes their unique contribution to the development of our society. With their invaluable store of knowledge, know-how and experience, seniors have much to share with other generations.

This policy also recognizes that aging is a part of the continuum of life and that people’s lives become richer with each passing year. *Aging and Living Together* means aging and living in a Québec that welcomes everyone, be they young or not so young.

Aging is not a monolithic process. Indeed, seniors age in a multitude of ways based on the wealth of experience they have acquired over the years.

This policy is aimed at implementing a grand social project and I invite you all to participate.

Marguerite Blais

Minister responsible for Seniors

Message from the Minister for Social Services

The past few decades have been marked by a definite improvement in people's living conditions thanks to efforts by individuals and society as a whole. However, although the extension of people's life expectancy is a major success in which we can all rejoice, it poses major challenges for the health and social services system and for social and economic stakeholders as a whole.

To support seniors who wish to remain active and to live at home within in their community for as long as possible, we must mobilize partners from every network, including municipalities, community organizations and private organizations. We must also develop a common vision, coordinate our respective actions and make a concerted effort to enable older adults to continue living at home.

The actions to be taken under the *Aging and Living Together* Policy include measures to promote the health of seniors, prevent them from losing autonomy and appropriately address their desire to remain in their home environment, particularly by increasing home-support services and facilitating access to social services and healthcare.

These measures will have to be adapted because seniors are not a homogeneous group. They have diverse needs and require different types and levels of services. They also require services from a range of service providers working for many different organizations. Moreover, the portrait of aging in Québec varies depending on whether seniors live in rural, semi-urban, urban or suburban settings. The actions taken under the policy must take these different situations into account.

Seniors have contributed to the development of all regions of Québec. It is our responsibility to help them live wherever they want for as long as possible. The *Aging and Living Together* Policy is meant to achieve this.

Dominique Vien

Minister for Social Services

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Aging and Living Together

THE POLICY

**Aging
and Living
Together**

At Home,
in One's Community,
in Québec

THE POLICY

“We all have the same age...
just not at the same time!”¹

Comment by a senior
from Saguenay
(2008)

“What seniors
want is to live
happily in their own home,
in their community.”²

Comment by a senior
from Saint-Jérôme (2008)

Introduction

The government's policy *Aging and Living Together, at Home, in One's Community, in Québec*, addresses a need for people to join forces in order to deal with the accelerated aging of the population. Everyone is being asked to strengthen and build bridges – between the generations, between seniors and the people who assist and care for them, regardless of where seniors live, and between the different levels of government (local, regional and provincial). The policy and its action plan recognize that older adults have a major role to play in the future of Québec. Practices, structures and programs must be adapted to the desires, interests and abilities of the elderly if they are to fully participate in the life of Québec communities.

Seniors are among the builders of Québec. They play an active role in their family and workplace, sit on boards of directors and participate in various organizations, and they want to continue to do so. Some seniors, however, are isolated or experiencing a loss of autonomy, but they too have their place in society. Creating conditions that will enable older adults to live at home and within their community for as long as possible is the core concern of this policy and its action plan.

The *Aging and Living Together* Policy is designed to provide us, collectively, with the power to take action, as well as with appropriate means for dealing with the societal changes linked to population aging. Implementing this strategy will involve commitment and coordinated action by several government and non-government partners, together with cooperation between stakeholders at the local, regional and provincial level.

Aging and Living Together, at Home, in One's Community, in Québec means:

- adapting Québec to the rapid aging of its population while ensuring intergenerational fairness;
- enhancing the living conditions of seniors, particularly those who are most vulnerable;
- enabling seniors who wish to do so to live at home for as long as possible, without compromising their safety.

Chapter 1 **Main observations**

1.1 Accelerated aging of the population

Québec's population, like that of many other societies in the Western world, is aging because of a combination of two demographic factors. First, the birth rate has declined considerably since the 1960s, leading to a decrease in the proportion of children in society as a whole. Second, improved living conditions and advances in science and technology over the same period have enabled people to live longer and in better health, and this has increased the proportion of older adults in society. As the cohort of baby-boomers, born between 1946 and 1966,³ reaches the age of 65, the aging of Québec's population will further accelerate. Québec society will be able to meet this challenge by supporting local players and using its human, financial, organizational and information resources in an efficient, coordinated and coherent manner.

Adapting society to the aging of the population

It is very clear that Québec's population is aging at an accelerated rate.⁴ Quebecers aged 65 and over accounted for 16% of the population in 2011.⁵ By 2013, they will account for 26%.⁶ Since 2011, and for the first time in the history of Québec, the proportion of seniors in the population has surpassed that of people under the age of 15.⁷ In addition, the age group breakdown among the elderly is changing: people over 75 currently account for 7% of Québec's total population; this proportion will rise to nearly 13.8% by 2031.⁸ There is also a marked increase in the 85 and over age group: during the 20-year period between 2006 and 2026, the number of people in this group will rise from slightly over 118 000 to more than 250 000.⁹ Lastly, there is a difference between the situation of men and women: in 2010, male life expectancy was 79.6 years while that of females was 83.6 years.¹⁰

This portrait reflects the major demographic changes under way in Québec. These changes may cause structural problems, including a loss of workplace expertise and increased pressure on certain health and social services. The government has acknowledged this situation and is determined to take concrete steps to adapt society to the aging of the population.

1.2 Age-related perceptions

Seniors have their place in all spheres of social life. However, stereotypes and prejudicial attitudes like agism are a real obstacle to their participation. In some settings, age-related prejudices lead to discriminatory practices that alter the value attached to seniors' experience and know-how. This lack of social recognition in turn leads elderly people to see themselves as fragile and of no use to society and to lose self-esteem. Both of these reactions lead to their isolation and cause them to withdraw from all forms of engagement in society.¹¹

Exclusion is a dynamic process whereby a person is totally or partially shut out from one or more systems of society, that is, the social, economic, political and cultural systems that determine how the person is integrated in society.¹² The exclusion of seniors can have identity, social and economic dimensions, given that they lose their role as parents and/or workers, their network of colleagues and so forth.¹³ Older adults may also become vulnerable owing to the combined impact of several factors: for example, their children have left home, they no longer have a role in the workplace, they have health problems or their income has declined. The introduction of measures to combat the exclusion of older adults and facilitate their inclusion helps not only to reduce obstacles but also to foster the creation of environments conducive to the emergence of a truly inclusive society for all ages.

The aim of the *Aging and Living Together* Policy is to counter negative attitudes towards aging in society, particularly through a participatory and inclusive approach. Encouraging seniors to pursue life projects that interest them fosters their social inclusion, as does providing them with better support when they are in distress so that they can redefine their personal, family, social and economic life. Building social structures that welcome seniors is also part of an inclusive strategy. In fact, the *Aging and Living Together* Policy invites institutions and communities to explore new ways of making the elderly feel included. Pooling the strengths of institutions and communities will create a driving force for change that will enable society to adapt to population aging. The vision of social innovation proposed in this policy is based on a systemic approach, aimed at bringing about fundamental changes in attitudes and values, strategies and policies, organizational structures and processes, and service delivery systems.

1.3 The diversity of seniors and the areas where they live

The *Aging and Living Together* Policy recognizes that seniors form a diverse group with diverse needs that change over time. Older adults have different cultures and have followed different paths in life in terms of their personal history, family and professional situation, sexual orientation, income, level of education, lifestyle, socioeconomic circumstances, fundamental values and motivations. Furthermore, the situation of men differs from that of women, with women being more likely to outlive their husbands, reach an advanced age and experience financial insecurity.

In addition, the situation of the First Nations differs from that of the Canadian population as a whole. Due to higher fertility and premature mortality rates, the First Nations population is aging at a less accelerated rate and is therefore younger.¹⁴ At the same time, First Nations seniors have special needs that must be taken into account if they are to age well in their community in Québec.

Immigrant seniors, for their part, accounted for 17.5% of Québec's immigrant population in 2006.¹⁵ Like First Nations older adults, they have special needs and circumstances that must be better understood if we are to help them integrate more easily into Québec society.

Population aging also has a territorial dimension in that it varies depending on whether people live in urban, suburban, semi-urban or rural areas.¹⁶ Moreover, the demographic equilibrium in a given region or area is often linked to the socioeconomic vitality of its constituent communities, which in turn explains their diversity.

The Gaspésie–Îles-de-la-Madeleine and Mauricie regions have the largest proportion of elderly people in Québec, i.e. 20.4%.¹⁷ In contrast, the population of the Nord-du-Québec region "... is aging much more slowly than that of other parts of Québec. In 2031, the proportion of the population aged 65 and over will amount to only 14%, or less than the proportion observed in Québec as a whole 25 years ago."¹⁸ [*Translation*] Among regional county municipalities (RCMs), the differences are even more pronounced. In five* RCMs, the proportion of the population over the age of 65 already exceeds 20%*. This will be the case in Québec as a whole by the early 2020s. The highest proportion of people over 65 (22.9%), is found in the Les Basques RCM in the Bas-Saint-Laurent region. The highest proportion in the city of Montréal¹⁹ is found in the Anjou borough (19.7%) and the lowest in the Plateau Mont-Royal (7.8%).

Despite their diverse characteristics, experiences in life and geographical location, seniors have the same aspirations: they want to live at home and in their community for as long as possible and be considered active participants in society. The *Aging and Living Together* Policy takes these aspirations into account.

1.4 Seniors' health

1.4.1 State of health

Seniors' state of health can be explained for the most part by the conditions and type of environment in which they have lived and the habits they have acquired throughout their lifetime. Actions aimed at improving their living environment, income, housing, social participation and safety always have the power to improve their health, and this is a factor that should not be overlooked.

In addition, advances in knowledge and the ensuing applications in terms of both technology and treatment methods also explain the improvement in seniors' health. They highlight the importance of devoting efforts to primary prevention, such as vaccination, fall prevention and medication control, to secondary prevention, such as cancer screening and reducing the impact of chronic illnesses, and to tertiary prevention, such as rehabilitation.

* The Les Basques RCM (22.9%), the Les Appalaches RCM (21.1%), the Les Sources RCM (20.8%), the Mékinac RCM (20.5%) and the Shawinigan RCM (20.4%).

Source: Institut de la statistique du Québec (2009). *Perspectives démographiques des MRC du Québec 2006-2031*.

Life expectancy in good health

In the early 1980s, the life expectancy of a 65-year-old man was 14.1 years and that of a 65-year-old woman, 18.7 years.²⁰ Between 2007 and 2009, a 65-year-old man could expect to live for another 18.3 years and a 65-year-old woman, for another 20.6 years.²¹ This represents a 3.6-year increase in life expectancy at 65 within the space of 30 years.

Life expectancy in good health, also called life expectancy without disability,²² is defined as the average number of years that a person can expect to live in good health if mortality and disability rates remain unchanged.²³

In 2001, a person aged 65 could expect to live for an average of 10 years without disability.²⁴ Five years later, the average life expectancy without disability for a 65-year-old had risen to 10.9 years, or by almost one year, reaching 10.7 years for men and 11 years for women. These rates, like those for general life expectancy, indicate that women live slightly longer than men, but with one or more disabilities.

Although the state of health of people aged 65 and over has improved considerably in recent years, population aging and rapid growth in the number of older adults poses certain challenges. However, it also offers interesting possibilities for Québec society as a whole.

Chronic illnesses and lifestyles

Generally speaking, Quebecers are in good health, except when it comes to chronic illnesses.²⁵ Diseases of this type are common and affect seniors in particular:²⁶ for example, 81.6% of Quebecers over 65 who live at home have at least one chronic health problem.²⁷ Forty-seven per cent of Quebecers over 65, or more than half a million people, have high blood pressure, while 17% have diabetes.

The chronic health problems that affect seniors stem, for the most part, from the long accumulation of unhealthy life habits, such as poor diet and lack of exercise, which is why it is important to adopt a healthy lifestyle at an early age. Chronic health problems can be avoided through prevention and health promotion. According to the Canadian Community Health Survey (CCHS), 50% of people over the age of 65 eat fewer than five fruits and vegetables a day and they are less active than people in other age groups. Moreover, 10% smoke on a regular basis and roughly 5% are considered heavy drinkers.²⁸

It is advisable and highly desirable to take action with regard to people's lifestyles through age-adapted strategies for promoting health and preventing the main health problems.

Disabilities

Generally speaking, it is acknowledged²⁹ that roughly two thirds of people over 65 who live at home have health problems that are fairly similar to those of people in other adult age groups. However, the situation of seniors in the remaining third is more worrisome. Some of these older adults have disabilities which, although they may be qualified as mild, are serious enough to require domestic help for housekeeping, running errands and managing personal finances as well as home adaptations and outreach services. Other seniors in this last third have moderate to severe disabilities that require a range of measures involving professional care and services, domestic help, assistance and supervision. In 2007-2008, the situation was as follows:

- 16.6% of people aged 65 to 74 and 29% aged 75 and over said that their state of health often limited their participation in activities.³⁰
- 26.5% of people aged 65 to 74 and 50% aged 75 and over said that they were sometimes or often unable to carry out basic activities of daily living.³¹

- 9.4% of 65- to 74-year-olds said that they needed help to carry out activities of daily living and domestic activities of daily living; the proportion reached 33.1% among people aged 75 and over.³²

This discussion of disabilities among seniors highlights the need to take appropriate action to offset their disabilities and prevent them from losing autonomy.

Mental health

The vast majority of seniors say that they are satisfied or very satisfied with life in general.³³ Nonetheless, nearly 13% suffer from considerable psychological distress³⁴ and 4% say that they have been diagnosed with a mood disorder.*

There has been a marked improvement in seniors' mental health in recent years, together with a decline in the use of antianxiety, sedative and hypnotic medications. However, as revealed by a recent Conseil du médicament study, there seems to have been a fairly substantial increase in the use of antidepressants.**

* The term "mood disorder" designates depression or bipolar disorder.

Source: Gouvernement du Québec, ministère de la Santé et des Services sociaux, Institut national de santé publique and Institut de la statistique du Québec (2011). *Pour guider l'action : Portrait de santé du Québec et de ses régions: les statistiques* (p. 201). [Online]: [<http://publications.msss.gouv.qc.ca/acrobat/f/documentation/2011/11228-03W.pdf>]. (Consulted March 12, 2012).

** In 2005, antidepressants were used by 14% of prescription drug insurance beneficiaries between the ages of 65 and 74 and by 16% of those aged 75 and over. By 2009, these proportions had risen to 16% and 18% respectively, which is, all in all, a significant increase.

Source: Gouvernement du Québec, Conseil du médicament (2011). *Portrait de l'usage des antidépresseurs chez les adultes assurés par le régime public d'assurance médicaments du Québec* (53 p.).

As in every other age group, the suicide rate among the elderly has declined slightly over the past decade or so. Between 2005 and 2008, the average annual rate was 13.2 per 100 000 people aged 65 to 74 and 12.6 per 100 000 people aged 75 and over. Since 2006, an average of 136 seniors have committed suicide per year. If these rates remain unchanged, the number of suicides among seniors could rise as a result of the increase in the population over age 65.³⁵

Cognitive problems

The cognitive problems that affect seniors, particularly Alzheimer's disease, is a fundamental issue for an aging population because of the impact these problems have on the health of elderly people and the way in which they affect their loved ones. It is important to note that even though Alzheimer's disease becomes more prevalent with age, it is not part of normal aging.

It is estimated that Alzheimer's disease affects 33% of people in the 80-and-over age group, or precisely the age group that is growing the most rapidly in the population.³⁶ In 2009, it was estimated that some 100 000 people over 65 were affected by the disease. Moreover, roughly 23 000 new cases appear every year. Given the rate at which the population is expected to age, this number will probably double by 2030, to approximately 43 000.

1.4.2 Services of the health and social services network

Because of their number and needs, older adults make extensive use of the care and services of the health and social services network. The volume, frequency and intensity of their use can be explained in several ways. In addition to being affected in large numbers by chronic illnesses and disabilities, seniors undergo age-related physiological changes that can make them more vulnerable and fragile, particularly when they are advanced in years.³⁷ Even then, however, they do not form a homogeneous group in terms of the types of care and services they need. Therefore, owing to a combination of factors, health and social services must be adapted to the specific situation of elderly people.

Consultation of family physicians

Seniors are the age group that consults their family physician the most. In 2007-2008, 87% of seniors consulted a family physician compared with 70% of Quebecers aged 12 and over.³⁸ In addition, 93% of older adults have a regular doctor, compared with 74% of people aged 12 and over.³⁹

Hospitalization and rehabilitation services

Data on hospitalization reveal major variations between the different age groups. From 2006 to 2009, the annual hospitalization rate per 10 000 people was 610 for 45- to 64-year-olds, 1 496 for 65- to 74-year olds and 2 688 for people aged 75 and over.⁴⁰ Cardiovascular disease is now the leading cause of hospitalization among the elderly. In 2009-2010, people over the age of 65 accounted for 58% of total hospitalization days in short-term care in Québec,⁴¹ even though they represented just slightly over 15% of the entire population.

Older adults sometimes require rehabilitation services because of a temporary or permanent disability. These services enable them to reduce or compensate for their disabilities and thereby recover a degree of functional independence. Available resources include rehabilitation services in healthcare institutions or at home, stays in functional rehabilitation transition units (FRTUs) and specialized rehabilitation services in rehabilitation centres for people with physical disabilities.

If the use of hospitalization and rehabilitation services remains unchanged, the rates mentioned above can be expected to increase in the coming years with the aging of the population.

Home-support services

In 2009-2010, 175 866 people over the age of 65 who were experiencing a loss of autonomy received home-support services from health and social services centres (CSSSs), representing a total of 5 175 579 interventions. Compared with 2005-2006, this corresponds to an increase of 14% in the number of people who received services and 32% in the number of interventions. On average, the number of interventions per person rose by 16%.

The age of the people who received the home-support services reflects the fact that the intensity of services required by seniors increases as they advance in years:

- 65- to 74-year olds accounted for 16.3% of the people who received services and 13.7% of total interventions.
- People aged 75 and over accounted for 75.7% of the people who received services and 83.8% of total interventions.

In addition to CSSSs, which make a significant contribution in terms of home-support services, there are over 500 community organizations and about 100 domestic help social economy businesses that work with seniors at home, providing them with assistance, mutual aid, accompaniment and respite.

Generally speaking, seniors have multiple and complex needs that have to be met simultaneously by several different types of service providers offering different types of services. Therefore, it is essential to apply an interdisciplinary approach involving close cooperation among the different players and recognition of the special needs of seniors.

Because of their specific circumstances, seniors require better access to health and social services as a whole, a substantial increase in home-support services, and services that are more fully integrated and better tailored to their needs. Addressing the special health needs of older adults involves taking into account the fact that the vast majority live at home within their community and have expressed a desire to do so for as long as possible.

1.5 Caregivers

The term “caregiver” refers to any person who provides considerable support on a continuous or occasional basis in a non-professional capacity to a person with a disability. The person who provides the support may be a family member or a friend.⁴² Caregivers play a key role in enabling seniors to live at home and in their community for as long as possible. They provide invaluable emotional and psychological support to the person in their care. In addition, they sometimes offer personal care or assistance with errands, banking and medication.⁴³

- Spouses and the heads of single-parent families are the people who most commonly act as caregivers.⁴⁴ In fact, they account respectively for 23% and 21.5% of caregivers as a whole.
- Nearly 19% of Quebecers aged 15 and over assist or provide care to a senior without remuneration. Close to a quarter of these caregivers devote less than five hours a week to this task.
- 13.6% of caregivers aged 75 and over spend 20 or more hours per week on caregiving activities.⁴⁵
- More women than men act as caregivers: 21.3% versus 15.8%. In addition, women spend more hours performing this task. On the other hand, among seniors aged 75 and over, it appears that more men than women devote 20 or more hours per week to assisting or caring for someone.⁴⁶

The role of caregiver can involve several sources of stress that are related in particular to the helping relationship itself, the many tasks to be performed, social isolation, lack of respite, the need to strike a balance between this role and one's day-to-day life, and even financial problems. It is therefore essential to support caregivers in this important role so that they can preserve or improve their quality of life.

Overall, changes to the family change structure will determine the context in which caregivers and older adults live. As the first baby-boomers turn 75 around 2021, families will have a higher proportion of seniors with no spouse, that is, seniors who are divorced, separated or widowed, and with no surviving children.⁴⁷ It is a known fact that the conditions that can cause a loss of autonomy begin to appear around the age of 75. It is also known that spouses and children provide most of the assistance their loved ones require. This information is important because it means that over the next decade seniors living on their own may require more care and assistance than other elderly people from public authorities, service structures and communities.⁴⁸ And this situation will prevail worldwide.⁴⁹ Social networks should be created around seniors who live alone before they begin to lose their autonomy. At the same time, innovative changes will have to be made in the way that public authorities provide assistance to these older adults.

There should be a better mix of male and female caregivers so as to ensure a balance between the involvement of men and women in this demanding and invaluable role. The recognition that caregivers contribute significantly to enabling seniors to live at home and in their community for as long as possible underscores the importance of supporting organizations that assist seniors as well as introducing measures aimed at balancing work and family responsibilities.

1.6 Participation of seniors in society

1.6.1 Participation in the community

In Québec, senior volunteers aged 65 and over do an average of 207 hours of volunteer work per year, or the highest average number of hours by all age groups combined.⁵⁰

Seniors' social participation may take place within an informal framework, involving family, friends and neighbours, or a formal framework, involving structured associations and seniors' recreational associations. Moreover, it may be community-oriented (home support, intergenerational activities, Maisons des grands-parents) or focused on civic engagement (regional seniors' consultation committees). The social participation of older adults enriches society and gives meaning to their lives.⁵¹ The sectors they get involved in should be better understood and better adapted to the changing interests, skills, abilities and characteristics of the successive cohorts of seniors.

Numerous studies have revealed the positive impact of seniors' social participation on their well-being and health.⁵² Some have shown that participation improves both objective^{53, 54} and subjective health,^{55, 56} reduces morbidity⁵⁷ and mortality probabilities,^{58, 59} and increases the feeling of well-being⁶⁰ while alleviating the symptoms of depression.⁶¹

Seniors' social participation is contingent on several "pull" factors. In fact, older adults are more inclined to participate if they have an opportunity to champion social causes or promote community needs, receive a respectful and sincere welcome from organizations and have access to sufficient resources.

Seniors' preferences in terms of the roles they wish to play in volunteering differ from those of other age groups. Older adults want to move away from administrative tasks and act in an advisory capacity instead, so that they can interact with other people.⁶²

Today, however, it is becoming increasingly difficult to recruit new volunteers. There is a gap between how organizations manage volunteers and what motivates people to continue to work as volunteers. Therefore, organizations may have to make major changes in their management methods in the coming years if they are to attract new volunteers.⁶³

1.6.2 Prolonging one's professional life

Currently, some seniors are leaving their professional activities in order to retire, while others are continuing to work. Still others are returning to the labour market by choice or necessity after they retire. Between 1976 and 2011, the employment rate among people aged 55 to 64 rose from 45.7% to 53%, while among 65- to 69-year-olds it rose from 13% to 15.8%.⁶⁴ This upward trend will continue in the coming years.⁶⁵

In Québec, 50% of men aged 50 to 75 who retire as planned end up wanting to go back to work part-time after they retire.⁶⁶ Seniors are willing to change the way in which they participate in the labour market⁶⁷ provided there are enough advantages to their doing so.⁶⁸ Although they seek a "positive balance" between the advantages and disadvantages of working longer, they are not thinking solely in terms of money. Being able to work flexible or reduced hours is a solution that appeals to many older adults as a means of prolonging their professional lives.⁶⁹

Certain sectors already face labour shortages. For this reason, it is important to keep experienced workers on the job. It is also important, in view of the potential loss of expertise, to ensure that knowledge is transmitted from older to younger workers since this will help to preserve organizational memory and business know-how.

As a society, we are definitely at a turning point in our socioeconomic history in several respects. The baby-boomer cohort has brought about a number of changes, particularly more flexible working conditions, through measures such as longer paid maternity leave, access to childcare services, and flexible hours. This easing of working conditions has encouraged more women to enter the labour market. By creating a more positive environment for experienced workers, we will give them greater opportunity to engage in professional development, mentoring and job sharing, enjoy more flexible hours and benefit from conditions that will motivate organizations to take senior workers into consideration in future planning. The strategy for active participation by experienced workers will bolster the government's efforts to increase the participation of experienced workers in the labour market and enable them to actively contribute to Québec's prosperity.

1.7 The financial situation of seniors in Québec

From 1950 to 1980, the participation of women in the labour market differed from that of men. Men were present in larger numbers and usually held continuous full-time jobs, while women often had part-time jobs. As well, the career paths of women were marked by periods of absence, such as for the purpose of having children or helping loved ones. This situation is having repercussions today, particularly on the retirement income of female seniors.

The average before-tax income of people over 65 increased from \$16 224 in 1991⁷⁰ to \$26 987 in 2008.⁷¹ However, as noted by the National Council of Welfare,⁷² the income of many male and female seniors living alone is near the low-income cutoff, making them vulnerable to the uncertainties in life.

A person's financial situation on retirement is determined by factors such as the amount of time the person was in the labour market and whether or not he or she contributed to public retirement and income protection plans. Retirement income is derived from three sources, namely, private, public and personal sources. According to the Institut de la statistique du Québec, half of seniors' income in 2008 consisted of transfers, while the other half came from private income.⁷³ The proportion of transfer income was higher for women, i.e. 57.1%. In addition, more women receive the Guaranteed Income Supplement⁷⁴ since they earn less than men and are therefore in a more precarious financial situation.⁷⁵ In 2008, the average before-tax income of women aged 65 and over was \$22 522, or nearly \$10 000 less than that of men, i.e. \$32 667. Even though the male-female income gap has narrowed slightly, it is still significant when it comes to average disposable income. Indeed, the average disposable income of women

aged 65 and over is \$20 495, while that of men the same age⁷⁶ is \$28 775. It is important to note that over half of people who live alone, earn more than \$20 000 a year and work, for the most part, their entire lives will not be able to maintain the same standard of living they had while they were working when they retire.⁷⁷

Seniors' income is protected by a number of mechanisms, including specific measures related to income security policies, such as the Old Age Security pension, the surviving spouse's pension, the Guaranteed Income Supplement and the Québec Pension Plan, as well as several fiscal measures. However, despite the contribution of public policies, it must be admitted that prospective studies are raising concerns about the ability of households to maintain a decent standard of living if people continue to retire before the age of 62. In fact, should they continue to do so, 46% of Québec households will not be able to maintain an income replacement rate of 60%.⁷⁸ Workers in Québec are retiring earlier than those in the countries of the Organization for Economic Co-operation and Development, where the average effective retirement age is 63.9 for men and 62.5 for women. In 2009, the average retirement age in Québec was 60 for men and 60.5 for women.⁷⁹

Many workers do not save enough money for their retirement.⁸⁰ According to the results of a 2011 survey of Québec workers aged 25 to 44 by the Régie des rentes du Québec, saving for retirement is not a firmly entrenched habit.⁸¹ For the government, it is important that the reflection process currently taking place with respect to Québec's retirement pension system continue because this will help identify ways to help Quebecers save enough money for their retirement and protect our retirement plans.⁸²

1.8 Seniors' housing and living environments

The vast majority of seniors, i.e. 96.3%, live at home: 87.6%⁸³ in a conventional house or private dwelling and 8.7% in a private residence with services. As of age 55, most of the people who live alone are women, and this trend becomes more marked with age. In 2006, 82% of people aged 85 and over who lived alone were women.⁸⁴

It should also be noted that seniors devote a large share of their income to housing.⁸⁵ Seniors who live in rental housing are in the least enviable position, with 45.5% devoting more than 30% of their income to housing. The proportion of households in this situation increases with age to:

- 48% for households aged 75 to 84;
- 58.5% for households aged 85 and over;
- 64% for households aged 85 and over, whose main income earner is a female senior.⁸⁶

These figures show how important it is to continue implementing housing access and adaptation programs. It should be noted that older adults represent roughly 55% of the clientele of Société d'habitation du Québec programs.

Seniors' first choice is to continue living at home in their community. However, once they start to experience a loss of functional autonomy, they begin to wonder whether they should stay in their home or move. For this reason, it would seem appropriate to have a number of options available to assist seniors in staying at home in their community for as long as possible while at the same time meeting their needs. Adapting their home, moving to another dwelling in the same building or living elsewhere in their community are conceivable options.

Particular attention should be focused on designing and building accessible housing, or housing that can accommodate everyone, including people with disabilities. This type of housing includes houses with different levels of accessibility: houses that are minimally accessible, houses that can easily be made accessible at a later date, and houses that are completely accessible with power door openers, large bathrooms and so on. The terms “visitable”, “adaptable”, “accessible” and “universal” are used to describe the different types of accessible housing.⁸⁷

Several affordable housing designs are already available in Québec. Fostering the development of a range of community and intergenerational housing designs can help to encourage interaction between the generations and more adequately address seniors' aspirations.

In view of the current demographic context, steps will have to be taken in the coming years to meet the challenge of providing seniors with healthy, safe and affordable living environments in their community.

1.9 Seniors' safety

Safety is a state in which the dangers that can cause physical, psychological or material harm are controlled in order to preserve the health and well-being of citizens. It has two dimensions, one of which is objective and the other subjective (sense of security).⁸⁸ Although older women are more prone to feelings of insecurity than older men are, the latter are not immune to them.⁸⁹ Social interactions have a profound impact on the management of insecurity in people's homes and public spaces alike, which is why community support is so important.⁹⁰ Since caregivers play such a key role in seniors' lives, they contribute significantly to their well-being and sense of security.

1.9.1 Safe public spaces

Environmental safety is important for making it easier for seniors to remain in their community, which, in most cases, is a municipality. Municipalities play an essential role in adapting outdoor spaces, infrastructure, transportation and housing to the population's needs. They are often best equipped to coordinate crime prevention, which is based on police control, environmental design and social development.⁹¹

Seniors state in greater numbers than younger people do they have a strong sense of belonging to their neighbourhood (79% versus 74%). In addition, seniors are more likely than younger people to think that their neighbours help each other (86% versus 83%).⁹² Contrary to popular belief, 90% of older adults feel totally or fairly safe when they walk in their neighbourhood alone at night.⁹³ Seniors say that they experience the same forms of violence as younger people do, apart from sexual assault. In reality, however, they are victims of violent crime far less often than younger people.^{94, 95} In terms of violent crime, while the elderly are just as likely as younger people (25%) to be attacked in the street, they are much less likely than younger people to be attacked in commercial or institutional establishments (25% versus 40%).⁹⁶

Urban plans with well-lit spaces, safe sidewalks and crosswalks, readily accessible public places, benches for resting and no signs of incivility like graffiti help to make the population as a whole feel safe.

1.9.2 Safe trust relationships

Two Canada-wide studies conducted in 1980 and 1990 showed that 7% of seniors living at home were subjected to some form of mistreatment by family members, particularly material or financial abuse.^{97, 98}

The concept of trust relationship is central to the definition of abuse, which involves acts of violence or neglect causing harm or distress. Québec has already adopted the Governmental Action Plan to Counter Elder Abuse 2010-2015⁹⁹ in order to address the social problem of seniors' mistreatment. The plan includes five structuring actions: the creation of a university research chair on elder abuse, a public awareness campaign, the launching of an elder abuse help line, the creation of a team of regional coordinators specializing in elder abuse as well as a team specializing in combating such abuse, and the fulfilment of approximately 30 commitments made by 13 government departments and agencies.

It is important not only to continue the commitments contained in this governmental action plan but to increase the involvement of resources that work with seniors by supporting local initiatives to combat elder abuse.

1.10 Information and communication

It is crucial for older adults to have access to information, as it helps to foster their independence and social and community engagement, improve their health and renew their interests. They need information that is useful in their day-to-day lives on subjects such as goods, services and safety;¹⁰⁰ health (such information is increasingly accessible on the Internet); and social networking, citizenship and democratic life. In complex societies where information is plentiful, it can be a challenge to determine what is relevant. It is even thought that people who lack crucial information on their particular situation may display a degree of

social exclusion.¹⁰¹ In Québec, seniors information centres are one of the tools available to help the most vulnerable elderly people find and understand government information.

Quebecers' lives and work are being shaped by computerization, which has now permeated all spheres of activity. Some seniors have a good grasp of information and communications technologies (ICTs), while others, particularly people who did not have to use computers in their jobs, have not mastered them to the same extent. According to the Centre francophone d'informatisation des organisations (CEFRIO), 40.7% of people aged 55 and over use email and, in 2008, 24.4% of people aged 55 to 64 chatted online. Moreover, according to current projections, these figures will continue to rise. However, nearly one third of people aged 65 and over have never used the Internet. It is therefore essential that this age group learn to master this tool.¹⁰²

The fact that young people are more at ease than seniors are with ITCs can serve as a starting point for building bridges between the generations. Initiatives to familiarize the elderly with the various computer tools used by their children and grandchildren can strengthen intergenerational ties, especially when one generation helps the other to learn the necessary skills. Promoting access to information as well as the use of ICTs by seniors is no doubt another challenge that must be met if older adults are to participate in social life, improve their health and enjoy safe living environments.

1.11 Transportation and seniors' mobility

Because of the aging of the population, it is essential to consider the question of seniors' mobility and how it can change over time. The independence and safety of elderly people is often contingent on their mobility, which is why it is important to reflect on the means that must be put in place to address this issue.¹⁰³ Women in the 75 and over age group are affected to a much greater extent than men of the same age by transportation problems, especially when they advance in age, become less healthy or less financially secure and are not very satisfied with their financial situation.¹⁰⁴

Cars are the preferred means of transportation among seniors, particularly those who live in the regions.¹⁰⁵ Between 1980 and 2006, the proportion of people aged 75 and over with a driver's licence rose from 28.6% to 67.6% among men and from 1.9% to 25.6% among women.¹⁰⁶ The accident rate per driver is lower among older adults than in other age groups; however, the

accident rate per kilometre driven is the same for seniors and young people alike.¹⁰⁷ The solutions that enable elderly people to retain their ability to drive for as long as possible are both personal and structural. Offering seniors driving courses to update their skills and making changes to road infrastructure by, for example, installing good lighting on roads¹⁰⁸ are some of the avenues that might be explored.¹⁰⁸

When driving a car is no longer an option, seniors have to choose other means of transportation. Some have already been using public transit (bus, subway, train, taxibus) as their main means of transportation for many years, while others have used it only occasionally. Several municipalities and regions of Québec promote the use of paratransit as the preferred means of transportation for people with disabilities and for seniors with reduced mobility. In 2009, people aged 65 and over accounted for 53% of paratransit users in Québec, or 45 543 users out of a total of 85 755.¹⁰⁹ This percentage should continue to rise as the population ages. Thanks to the dedication of organizations and volunteers who assist seniors in their community, older adults can rely on alternative means of transportation and the services of caregivers.¹¹⁰

Transportation service offerings must be safe, accessible and adapted throughout Québec so that seniors can use a range of services and participate in society. Solutions must be tailored to the specific situation in each community and region.

Chapter 2 **The underpinnings of the policy**

2.1 The theoretical bases of the policy and its action plan

In 2002, the World Health Organization (WHO)* adopted the policy framework *Active Aging* in response to population aging and growing urbanization in developed and developing countries.¹¹¹ This document defines the concept of active aging, which is a positive vision of aging. WHO's work has mobilized efforts worldwide and helped to introduce the active aging concept in all spheres of activity. In addition to health and social services, sectors such as employment, housing and even transportation are being asked to work together in order to improve living conditions for seniors.

The *Aging and Living Together* Policy and its action plan are based on the vision of active aging advocated by WHO, but adapted to the situation in Québec. Active aging is the process of optimizing opportunities for **health, participation** and **safety** in order to enhance quality of life as people age.¹¹² This process is part of people's life path — a path to which the policy and action plan are designed to contribute by fostering a society for all ages.

* WHO is the directing and coordinating authority for health within the United Nations system.

Source: Organization mondiale de la Santé. [Online]: [<http://www.who.int/about/fr/>]. (Consulted February 12, 2012).

Promoting active aging in Québec aims to eliminate discrimination on the basis of age, gender, income or culture of origin. Active aging lays the foundations of intergenerational solidarity and fairness with a view to improving the living conditions, well-being and health of seniors in general and the most vulnerable in particular.

The policy's three main directions are based on the cross-cutting, interdependent issues of **participation**, **health** and **safety**. This approach was adopted in order to define strategic choices about areas of intervention. These choices have in turn made it possible to define the concrete actions included in the action plan.

The three directions are:

1. *Aging and Living Together means participating in one's community*

Seniors participate as a matter of course in society and in all spheres of life, i.e. family, social, cultural, economic and spiritual spheres. In so doing, they continue to contribute to activities that have meaning for them and for society. To participate is to see oneself as being part of one's community.

2. Aging and Living Together means leading a healthy life in one's community

People live better and longer when illness and loss of functional autonomy are limited or appear only later in life. A person who is in good health has more independence and a greater sense of well-being, and thus requires less healthcare and social services. However, society must meet the needs of seniors by developing appropriate, accessible and quality health and social services.

3. Aging and Living Together means creating healthy, safe and welcoming environments within one's community

Environments, i.e. living environments, neighbourhoods, municipalities and regions, must be adapted to the aging population. Therefore, actions must be developed, particularly with regard to elder abuse, service access, caregiver support, housing supply and seniors' mobility. In this way, communities will create environments where safety and people's sense of security is strengthened.

With the policy and the action plan, the government is reaffirming its intention to strengthen and adapt its actions and apply innovative approaches. It is also confirming its support for local stakeholders concerned with seniors' participation, health and safety. This support will enable these stakeholders to join forces to make the adaptations needed to address population aging. It will ensure that the needs of people, the regions and rural and urban communities are met while taking their specific characteristics into account.

2.2 The vision

Aging and Living Together, at Home, in One's Community, in Québec is the government's first policy on aging. It flows from and supplements several measures put in place by the government in recent years in regard to taxation, home support, elder abuse, solidarity and social inclusion (see Appendix 1).

The *Aging and Living Together* Policy and its action plan have added value in that they deal with every sphere of seniors' lives and take the full range of individual and community situations into consideration. In addition, the policy calls upon stakeholders to work together in an intersectoral initiative for ensuring the well-being of the elderly.

The government cannot shoulder the impact of the rapid aging of the population on its own. A balance must be found in the sharing of responsibilities between individuals and family members, the communities where older adults live and the government.

Aging and Living Together focuses attention on seniors in a context where the population is aging at an accelerated rate. It is an innovative and integrated government vision that will:

- entail interacting actions in various sectors;
- mobilize provincial, regional and local stakeholders;
- take the specific situation of each community into account so that it can find solutions tailored its needs.

The goal behind these actions is to maintain fairness across the generations by ensuring that the future of today's young people, who are the seniors of tomorrow, is not compromised.

***Aging and Living Together* is the government's first policy on aging**

Chapter 3 **The approach**

The *Aging and Living Together* Policy and its action plan reflect a bold vision of aging in Québec. They enlist the participation of 18 government departments and agencies that are providing inventive solutions for all matters within their jurisdiction and thus opening up channels of communication between the three levels of government (local, regional and provincial).

This policy calls upon seniors themselves to contribute constructively to making the necessary changes to structures, programs and services, that is, the changes required to provide them with tangible support as they move through life. As for the action plan, it is being carried out in communities – the places where seniors live; in institutions, public agencies and community organizations – the places where seniors receive services; and in businesses – the places where seniors work. It is important to provide older adults who want to participate in society, remain active and fulfil their aspirations in all spheres of their personal, family and social life with the opportunity to do so.

Government departments and agencies, municipalities, community organizations, seniors associations and the population in general must pool their knowledge and know-how so that they can work together in a coordinated fashion and implement solutions tailored to local needs.

The approach applied to guide work under the *Aging and Living Together* Policy and its action plan has two components.

FIRST COMPONENT Intersectoral participation

The policy concerns a range of issues that interact in seniors' lives, such as housing, transportation, health, volunteering and employment, to name but a few. Participation and intersectoral partnerships will make it possible to take a series of priority actions in order to effectively address population aging. Steps should also be taken to better coordinate and strengthen these actions in order to create synergy and thus ensure that the efforts already made will guarantee the actions' sustainability. The policy supports the creation of forums for concerted, aligned action among the various stakeholders that take into account the mission, jurisdiction and accountability of each one.

SECOND COMPONENT Community development

Developing communities is a form of cooperative action where the participation of every player – organizations, public services and older adults – is aligned with collective issues for the purpose of improving seniors' quality of life.¹¹³ This second component of the policy builds on the vitality of communities in order to design collective and innovative solutions geared to local priorities and the needs of elderly people.

To foster community development, support will be provided to initiatives designed by and for local players so that communities can take actions suited to their demographic situation. In other words, actions will be tailor-made in order to reflect the regional diversity that makes Québec so rich.

Aging and Living Together calls for cooperation among all activity sectors, levels of government and generations. Population aging and its social and economic impacts affect Quebecers as a whole. This policy is meant to be a constructive tool that will help us rise to this challenge...together.

**Aging
and Living
Together**

**The 2012-2017
Action Plan**

Aging and and Living Together

At Home,
in One's Community,
in Québec

2012-2017 Action Plan

“I write, I think, I read,
I sing, I do everything...
Since I'm so busy doing
all of these things,
I forget to grow old,
I just don't think about it.”

Comment by a 96-year-old senior
from Québec City (2012)

Chapter 1 **A policy and an action plan**

The policy *Aging and Living Together, at Home, in One's Community, in Québec* is accompanied by a government action plan for the next five years. This plan builds on actions taken by the government in recent years to help Québec society adapt to population aging.

The policy and its 2012-2017 Action Plan are conducive to innovation and development and focus action on seniors. They show that an aging population presents not only challenges but also interesting opportunities for Québec society. Interesting opportunities because seniors contribute fully to the development of Québec society through their wealth of experience and know-how. Challenges because a growing number of seniors require measures adapted to their needs in all spheres that affect their day-to-day lives.

This action plan enlists the participation of numerous stakeholders, volunteers, service providers and elected officials from every generation and from a range of public and private sectors, including health, housing, municipal affairs, transportation and culture. They will all have to work together in a spirit of partnership with a view to ensuring seniors' well-being.

The actions in this five-year plan are designed in particular to encourage and help seniors and communities take part in finding solutions suited to their specific situation. They also aim to ensure intergenerational fairness so as not to compromise the future of our children, who are the seniors of tomorrow.

Several solutions for dealing with population aging are discussed in this document. Others, however, remain to be defined. Research will be conducted in areas that require further reflection before concrete steps are taken. These studies will open new avenues that will be described in future action plans.

Chapter 2 **A collaborative process**

Involving government departments and agencies

An interdepartmental committee was created to draw up the present policy and its action plan. Sixteen government departments and agencies (see Appendix 2) worked with the ministère de la Famille et des Aînés and the ministère de la Santé et des Services sociaux, providing input and helping to prepare the policy and the action plan. This joint effort made it possible to study and document the situation of seniors, as well as their needs and expectations in the context of Québec. It also provided an opportunity to highlight several government actions already taken for seniors and to determine what new actions need to be developed. Continued cooperation between the different departments, centred on concrete actions, will bring added value to future work.

And input from local stakeholders

In fall 2011, the ministère de la Famille et des Aînés met individually with representatives of provincial non-governmental organizations, sometimes in the company of representatives of the other departments and agencies that helped to prepare the policy and its action plan. Nearly 40 organizations (see Appendix 3) shared their thoughts and proposed possible solutions during these meetings.

These discussions were continued during a forum (*Assises*) held by the ministère de la Famille et des Aînés on November 18, 2011 in the presence of the Minister responsible for Seniors. This event, which brought together the organizations met with previously, generated a common understanding of the issues raised thus far and brought out new points of view. Over 60 representatives (see Appendix 4) took part. Like the individual meetings, it enabled participants to further reflect on questions raised in preparing the policy and its 2012-2017 Action Plan. In fact, dialogue will be ongoing between the non-governmental organizations and the government throughout the plan's implementation.

A group of researchers (see Appendix 5) was also consulted while the policy was being formulated. Their expertise helped to enrich and validate the work involved in preparing this document. Population aging and its repercussions will intensify in the coming years. Further study is needed to gain a better grasp of this situation and deal adequately with it. The research community will contribute to these efforts.

Chapter 3 **A plan for taking action**

This first action plan concerns most aspects of seniors' day-to-day lives. It has three directions, defined on the basis of the policy's general observations:

Direction 1 *Aging and Living Together*
means participating in one's community

Direction 2 *Aging and Living Together*
means leading a healthy life in one's community

Direction 3 *Aging and Living Together*
means creating healthy, safe and welcoming environments within one's community

These three directions interact, in that the actions related to one may affect those related to the other two. For example, ensuring that seniors have access to means of transportation makes it easier for them to participate in all aspects of society, which in turn has a positive impact on their health and well-being. The government has defined strategic choices for each direction, and these choices constitute its priorities for the next five years.

Actions have also been defined for each strategic choice. They will be taken by various departments and agencies, generally in collaboration with local stakeholders. In several cases, the actions are a continuation of initiatives already under way that have proven to be efficient and effective, while in other cases, they are the outcome of improvements made to previous actions, particularly through additional funding or a broadening of their scope. In still other cases, the actions are completely new.

The action plan contains a total of 74 actions implemented by government departments and agencies that share the will to act for the welfare of elderly Quebecers.

Chapter 4 **Guiding principles for taking action**

The Québec government is basing the actions to be taken in the coming years on the following guiding principles:

1. Take the diversity of seniors into account

Seniors' diversity must be taken into account and respected. Actions must be tailored to their disabilities, financial means, region, community, housing, gender, vulnerability, culture of origin and sexual orientation.

2. Promote the empowerment of seniors and communities

This principle aims to ensure respect for individuals' freedom of choice, dignity and life paths. To achieve this goal, older adults must participate in decisions that concern them. It is also important to recognize and value the role played by communities in helping to implement practical solutions suited to their situation.

3. Ensure intergenerational fairness

The actions taken under the action plan are designed to ensure intergenerational fairness. This principle underscores the importance of making sure that the future of the next generations is not compromised. In addition, intergenerational dialogue must be encouraged as it will enrich Québec's development.

4. Strengthen, adapt and innovate

Several actions already being implemented should be strengthened so as to achieve their objectives. As well, certain practices must be adapted and innovative solutions found in order to better reflect the situation of older adults and their presence in communities. Research and the evidence-based data it generates will help to make choices for offering services that are better tailored to seniors' needs.

Chapter 5 **Levers for taking action**

Investments to support actions

The government's 2012-2017 Action Plan of the *Aging and Living Together* Policy focuses on funding actions that benefit seniors directly and address their main concern, which is to age well at home, within their community.

The *Aging and Living Together* action plan represents cumulative additional investments of nearly \$2.7 billion over five years. By 2016-2017, support for seniors will have increased by 26% compared to its current level.

New programs

Age-Friendly Québec Program

This new program, which is mentioned several times in the action plan, will support local, regional and provincial projects for adapting living environments to the needs of seniors so that they can continue to live at home within their community. Cumulative additional investments under the *Age-Friendly Québec* Program will total \$20 million over five years.

In particular, this program will foster partnership among all stakeholders at the local level and round out initiatives already under way on the ground. Projects will be selected in conjunction with key players familiar with their community's specific needs, such as regional seniors' consultation committees, regional conferences of elected officers and health and social services agencies.

The *Age-Friendly Québec* Program has three components:

1. The **Financial support for projects** component will enable seniors to age well at home and in their community. Funding will go to projects for transmitting knowledge from one generation to the other, combatting elder abuse and ensuring seniors access to cultural activities.
2. The component **Support for preparing Age-Friendly Communities (AFC) action plans** will make it possible to continue implementing the AFC approach in nearly 860 Québec municipalities. The goal of this approach is to adapt municipal policies, as well as services and structures, to an aging population. Making sure that seniors take part in every stage of an AFC initiative and that the community as a whole contributes is key to the success of the AFC approach.

3. The **Support for community action** component will make it possible to implement local or regional projects that derive in particular from AFC action plans shouldered by the community (collective bodies and community organizations) and involving the participation of older adults.

Program to Develop Outreach Initiatives for Vulnerable Seniors

This new program, which represents cumulative additional investments of nearly \$18 million, will make it possible, among other things, to hire outreach workers in organizations recognized by the community. This approach, which is well-documented and based on that applied by street workers who work with young people in difficulty, is already used by roughly 30 organizations in Québec. For consistency's sake, this outreach program will be developed in collaboration with the ministère de la Santé et des Services sociaux, which already provides support to community organizations.

The outreach workers will be recruited by community organizations. They will be present in settings frequented by seniors, such as low-rental housing, cafés, private residences and libraries. They will carry out initiatives to prevent vulnerable seniors from “dropping out” of society. By building relationships of trust with the elderly, the outreach workers will be able, among other things, to assist them in dealing with the appropriate resources, encourage them to participate in social life and mobilize their network of neighbours, family and friends. All of these initiatives will help elderly people to remain independent and continue living at home, within their community.

Work-Retirement Balance Program

This new program will lead to the creation of conditions fostering a balance in the workplace (businesses, organizations) between work responsibilities and retirement. Nearly 100 projects will be funded under the program through cumulative additional investments of \$4.3 million. This support will target the development of measures such as job sharing, work-retirement transition, and expertise recognition and transfer. The program will encourage workers to continue participating in the labour market or, if they have already retired, to return to work. It is in keeping with the strategy for active participation by experienced workers.

Strategy for active participation by experienced workers

This strategy flows from the report of the Commission nationale sur la participation au marché du travail des travailleuses et travailleurs expérimentés de 55 ans et plus.

The strategy will:

- support businesses that employ experienced workers, particularly by reducing the costs associated with the jobs these workers hold;
- enable optimum use of human resources by fostering the adaptation of work organization;
- facilitate business startups by workers aged 50 and over.

Home support: the preferred approach

Once again, the government is demonstrating its commitment to developing services for seniors and making home support the cornerstone of the *Aging and Living Together* Policy.

The government will:

- invest a cumulative additional amount of \$1.16 billion over five years for a range of services that will enable seniors to grow old at home. This sum will consist mainly of:
 - cumulative additional investments of \$758 million in home support so that more seniors and their loved ones can receive such services. These investments will also ensure that more hours of home support are available to the people who need them. The services include nursing care, as well as assistance with personal hygiene and nutrition;
 - cumulative additional investments of \$70 million to bolster support for community organizations that work with seniors and their loved ones;
 - cumulative additional investments of \$71.6 million to enhance the Financial Assistance Program for Domestic Help Services and to assist social economy businesses with their business practices.
- focus special attention on health promotion and disability prevention so that older adults can remain healthy and continue to live independently for as long as possible. To that end, the government will make:
 - cumulative additional investments of \$49 million to enable current and future elderly populations to benefit from measures targeting the development of healthy lifestyles, fall prevention, reduction of inappropriate use of medication and improvements in depression screening mechanisms.

New residential and accommodation initiatives

Numerous new residential and accommodation initiatives will be implemented using approaches that are better adapted to the varied needs of seniors:

- Cumulative additional investments of \$924 million will be used to fund projects that will, in particular, allow seniors to continue living in a setting that takes their gradually changing needs into account as much as possible. In addition, the Société d'habitation du Québec and the ministère de la Santé et des Services sociaux will explore innovative approaches based on the needs of elderly people who are experiencing a loss of autonomy and have low or modest incomes.

Tax incentives

Budget 2012-2013 announced an increase in tax assistance to help seniors to continue living at home, and to support caregivers. This assistance represents cumulative additional investments of \$172 million for the 2012-2017 period. In concrete terms:

- 222 000 seniors aged 70 and over will benefit from an increase in the assistance granted by the refundable tax credit for home-support services for seniors;
- over 20 000 seniors aged 70 and over will be able to take advantage of a new tax credit for the purchase of equipment to help them continue living independently at home;
- 13 000 seniors aged 70 and over will be able to take advantage of financial support designed to facilitate their functional rehabilitation and their return home;
- more than 15 000 spouses acting as caregivers will be able to enjoy additional respite.

Chapter 6 **Concerted action and follow-up**

Cumulative additional investments 2102-2017:

\$0.5 million

Key changes are needed to meet the challenges posed by the aging of the population. In particular, it is essential to develop a shared vision, pool expertise, take coherent and concerted action and review current practices. As well, each partner must be accountable when it comes to exercising its responsibilities. The diverse realities of communities must also be taken into account in order to identify and develop appropriate solutions. Various authorities will be called upon to implement this participatory, intersectoral approach at the local, regional and provincial level.

At the local level

In 2003, the National Assembly entrusted all health and social services agencies with the responsibility of implementing a service organization model based on local health and social services networks in their respective regions. A health and social services centre is the pivotal component of each network. Each centre is responsible for offering services to improve the health and well-being of the population within its territory, in partnership with the municipal, housing and transportation sectors. Older adults experiencing a loss of autonomy are one of the priority clientele.

In addition, municipalities are being encouraged to continue applying the Age-Friendly Communities (AFC) approach. The steering committees set up under this approach will continue to play a determining role. Made up of seniors, elected municipal representatives, and partners from health and social services centres and community organizations, among others, these committees are responsible for developing solutions and following up on measures to adapt their community to an aging population.

All of these local-level partners and players, including the local health and social services networks and the AFC steering committees, must work together and even align their efforts so as to ensure that actions with the common goal of securing seniors' well-being are consistent and complementary.

At the regional level

The regional conferences of elected officers, health and social services agencies and regional seniors' consultation committees are the bodies that set and discuss regional priorities for seniors. These priorities may translate, in particular, into projects funded under the new *Age-Friendly Québec* Program. These bodies will also contribute by informing the interdepartmental committee about new opportunities, issues or challenges encountered in implementing the *Aging and Living Together* action plan. It will be important to have mechanisms for liaising with bodies at the local level.

At the provincial level

An interdepartmental committee has been set up at the provincial level. In addition, a forum will be held once a year in collaboration with provincial stakeholders from all concerned sectors. The first such forum (*Assises*) was held in November 2011.

The interdepartmental committee is made up of the government departments and agencies involved in implementing the action plan. It monitors the implementation process and designs solutions to any obstacles that may crop up along the way. The committee also helps to ensure that actions are consistent and complementary. It will continue to reflect on cooperative mechanisms while aligning its activities with those of other existing structures.

The interdepartmental committee will also do follow-up so as to ensure that the actions carried out and the sums invested reflect current needs, particularly in home support.

The annual forum will aim to foster discussion among the different sectors. It will provide stakeholders, government departments and agencies, non-governmental organizations and researchers with an opportunity to get together and continue to identify the best solutions or approaches to be applied on the ground. It will also provide them with a chance to keep abreast of the policy and action plan's implementation and to study and discuss specific topics.

Direction 1

Aging and Living Together

means participating in one's community

Cumulative additional investments 2012-2017:

\$22.7 million

Seniors help shape our social fabric and must therefore have the opportunity to take their rightful place within Québec society. Their civic and social participation, be it on a volunteer basis or in exchange for remuneration, contributes to the vitality of communities and must be supported and encouraged. Seniors have the power to act, and communities should give them the chance to be active and make an important contribution.

By continuing to lead an active life, in accordance with their needs, preferences and abilities, seniors will embark on a new chapter in their life story. The elderly play a major role in society, and many of them want to share their knowledge, know-how and personal skills with their family and in their community and professional lives. Aging is not a monolithic process. Indeed, seniors age in a multitude of ways based on the wealth of experience they have acquired over the years. For older adults, work no longer has the preponderant and pivotal place it once had. However, taking phased or full retirement is not synonymous with being excluded from society. Seniors want to remain active.

Communication and access to information can help to prevent older adults from “dropping out” of society and keep the risk of exclusion at bay. Ensuring they better understand and are able to use information and communications technologies can make their day-to-day lives easier, bolster their community participation and reduce their isolation.

Quebecers are known for their strong solidarity. This value in turn creates strong ties between the members of each generation, as well as between those of different generations. It thus helps to build an inclusive society for all ages.

Older adults are inspirational role models. Moreover, they are the custodians of a rich heritage that is essential to all spheres of life in Québec society.

STRATEGIC CHOICES

To encourage seniors to participate in society, the Québec government intends to:

1.1 Recognize and support seniors' involvement in their community

1.2 Support the participation of experienced workers in the workplace

1.3 Promote the understanding, use and contribution of information and communications technologies

1.1 Recognize and support seniors' involvement in their community

Cumulative additional investments 2012-2017:

\$12.5 million

Recognizing seniors' engagement in their community is an excellent way to encourage it and combat the prejudices that can overshadow their contribution to society.

The ministère de l'Emploi et de la Solidarité sociale and the Secrétariat à l'action communautaire autonome et aux initiatives sociales (SACAIS) already promote seniors' involvement in volunteering through the *Hommage bénévolat-Québec* awards, certificates of recognition for volunteer engagement, and support for the volunteer community. SACAIS will continue to promote volunteering by focusing special attention on seniors' participation.

Ensuring that seniors are well-represented in Québec society is key to their well-being and the development of our society. Like other groups, older adults must be heard if their needs are to be adequately addressed, given that their expectations and needs sometimes differ from those of other generations. To be attuned to seniors' concerns, we must give the elderly access to regionally adapted forums where they can express their views. The regional seniors' consultation committees, found in all regions of Québec, play a key role in this regard. The presence of seniors on the steering committees set up under the Age-Friendly Communities (AFC) approach is one of the keys to the latter's success. Indeed, the main responsibility of these committees is to define actions that will encourage communities to adapt to population aging. As at March 31, 2012, 327 municipalities, representing 5.2 million people, were applying the AFC approach. More than 650 seniors have participated in the work of the steering committees. The fact that this work has often been carried out while municipal family policies were being formulated has fostered the development of actions that benefit all generations. The different generations should be given a chance to get to know each other better and take joint action to improve their quality of life.

Culture is an area that is often conducive to intergenerational exchange, and cultural activities can provide an excellent opportunity for sharing different sets of knowledge and even common interests. Our culture is rooted in the Québécois identity and it should be accessible to all citizens regardless of the settings in which they live. Therefore, cultural offerings must be developed by and for seniors. Culture contributes to well-being and wellness, can foster intergenerational relations and, quite simply, adds colour to people's lives.

The following concrete actions are being taken to recognize and support seniors' involvement in their community:

- Continue the *Hommage Aînés* awards
- Continue funding the Age-Friendly Communities approach and encourage more municipalities to adhere to it
- Strengthen the regional seniors' consultation committees and the Conférence des tables régionales de concertation des aînés
- Support projects that foster the transmission and use of seniors' knowledge and know-how
- Hold regional meetings to promote intergenerational dialogue
- Strengthen the Maisons des grands-parents, turn them into a network and create new ones
- Support cultural projects by and/or for seniors

Inspiring projects

- *Nos aînés qui brillent* is a project created by *Les pinceaux d'or*, which organizes painting workshops for seniors who live at home. These workshops foster seniors' self-expression and creativity and help, in particular, to break their isolation.

Examples of AFC projects in the cultural sector:

- Drummondville has implemented a mobile library project called *Biblio Mobile*, which makes municipal library books available to seniors living in four different residences.
- Granby organizes an exhibition of work by senior artists and craftspeople during the *Journées de la culture*.
- The *Centre d'aide et d'action bénévole de Charlesbourg* has set up a mutual aid network among older adults that enables them to exchange non-professional services for free. For example, if a senior gives an English class to another senior, he or she may receive help with meals or housekeeping in return.

Intergenerational project:

- The *Lire et faire lire* project aims to instill a love of reading in children. In this project, senior volunteers visit schools and read to one or more small groups of children.

Photo: City of Sherbrooke

Continue the *Hommage Aînés* awards

The *Hommage Aînés* awards ceremony, which used to be organized by the Conseil des aînés as part of the International Day of Older Persons, is now organized by the ministère de la Famille et des Aînés. It highlights the engagement of a person who has contributed to seniors' well-being, quality of life and community participation, regardless of his or her age. The winner for the year is selected from a group of finalists submitted by the regional seniors' consultation committees.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Regional seniors' consultation committees**
- **Conférence des tables régionales de concertation des aînés**

INDICATORS:

- **Number of candidates**
- **Award granted every year**

Continue funding the Age-Friendly Communities approach and encourage more municipalities to adhere to it

COMPONENT OF THE
Age-Friendly Québec Program

In order to implement the Age-Friendly Communities approach in Québec municipalities and regional county municipalities (RCMs), a municipal seniors policy must be drawn up together with an action plan. The aim of these tools is to create environments that are suited to older adults. The success of the AFC approach derives from the joint engagement of the municipal sector, seniors, the health and social services network and local organizations. Continued funding will help to implement the approach in close to 860 municipalities by 2017.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Municipalities**
- **Regional county municipalities**
- **Carrefour action municipale et famille**
- **Health and social services centres**
- **Communities of the Aboriginal nations recognized by the Québec National Assembly**
- **Research Centre on Aging, Université de Sherbrooke**

INDICATORS:

- **Number of municipalities applying the AFC approach**
- **Number of seniors action plans adopted**
- **Number of municipalities or RCMs recognized as Age-Friendly Municipalities or RCMs**
- **Total population covered by seniors action plans**

Strengthen the regional seniors' consultation committees and the Conférence des tables régionales de concertation des aînés

This action will enable the regional seniors' consultation committees to carry out the following mandates properly:

- represent the diversity of seniors in the committees' respective regions;
- contribute to regional-level decisions regarding seniors;
- relay information within the committees' regions;
- provide the ministère de la Famille et des Aînés with information and advice on the seniors in the committees' regions.

The Conférence des Tables régionales de concertation des aînés coordinates the network of 18 regional seniors' consultation committees. It has a mandate to consult and support the committees and is Québec's benchmark organization for seniors issues. It will help to strengthen the committees by providing them with advice and training.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Regional seniors' consultation committees**
- **Conférence des Tables régionales de concertation des aînés**
- **Regional and local organizations**

INDICATORS:

- **Number of training sessions given by the Conférence des Tables régionales de concertation des aînés**
- **Information and advice filed with the Minister responsible for Seniors on the problems and principal regional issues that concern seniors in each committee's region**
- **Identification of a regional finalist for the *Hommage Aînés* award every year**

Support projects that foster the transmission and use of seniors' knowledge and know-how

COMPONENT OF THE
Age-Friendly Québec Program

Testing and implementing projects of this type leads to the exchange of knowledge and know-how among seniors and the younger generations. This action aims to provide financial support for initiatives that build on and recognize seniors' contribution to society.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Local organizations**

INDICATORS:

- **Number of projects funded**
- **Investments made**

Hold regional meetings to promote intergenerational dialogue

These meetings will be held between organizations that represent older adults and organizations that represent young people. Topics of interest to both groups will be discussed during the meetings in order to foster intergenerational dialogue and solutions.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Organizations that represent seniors**
- **Organizations that represent young people**

INDICATORS:

- **Number of organizations that represent seniors or young people invited to and present at the meetings**
- **Number of seniors and young people present**

Strengthen the Maisons des grands-parents, turn them into a network and create new ones

This action aims to develop the Maisons des grands-parents network, whose primary goal is to foster ties between the generations. These organizations help to get older adults out of their isolation and to build on the role of seniors and young people in society through local activities and projects. The Maisons des grands-parents offer several activities on a daily or weekly basis, including homework assistance, intergenerational singing, collective kitchens, second-hand clothing sales, library-based activities, family assistance, and transmission of know-how (knitting, sewing, weaving, etc.). Six Maisons des grands-parents have been created to date and some have been offering services for 20 years now. Twelve new Maisons des grands-parents will be set up by 2017.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Maisons des grands-parents**

INDICATORS:

- **Number of Maisons des grands-parents funded**
- **Number of seniors and young people who participate in these organizations' activities**

Support cultural projects by and/or for seniors

COMPONENT OF THE *Age-Friendly Québec* Program

Cultural projects encourage seniors to contribute to Québec culture (performing arts, visual arts, arts and crafts, film, literature, music, heritage) and underscore the value of their contribution to this sector. The goal of this action is to provide financial support for cultural creation and experimentation by and/or for seniors. It also aims to make it easier for seniors to access cultural outreach activities.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de la Culture, des Communications et de la Condition féminine**
- **Provincial organizations**

INDICATORS:

- **Number of projects funded**
- **Investments made**

1.2 Support the participation of experienced workers in the workplace

Cumulative additional investments 2012-2017:

\$4.8 million

While some people leave the labour market permanently when they reach retirement age, others remain in it by choice or necessity. And, in some cases, people who have already retired return to work either because they want to or have to. Human resource management and work organization in businesses definitely affect the participation of experienced workers in the labour market. The needs and expectations of such workers are changing and the workplace must adapt accordingly. Enabling experienced workers to balance their work responsibilities with retirement, to access training and to develop their tutoring and mentoring role are approaches that should be explored.

Supporting the participation of experienced workers in the labour market poses a challenge for the workplace and our society as a whole. Meeting this challenge will not only help to maintain a workforce that is essential to our collective wealth but will also make it possible to better cope with issues related to the fact that some workers have not saved enough money for their retirement. This reality justifies the need for new retirement savings plans.

Measures were announced in this regard in the 2011-2012 Budget Speech, delivered by the Minister of Finance on March 17, 2011. These measures include the tax credit for experienced workers, implemented gradually as of January 1, 2012. In addition, the monthly increase in pensions applied for after age 65 will rise from 0.5% to 0.7% as of January 1, 2013 to encourage experienced workers to remain in the labour market. Similarly, the monthly reduction in Québec Pension Plan benefits applied for prior to age 65 will gradually increase from 0.5% to 0.6% over three years as of January 1, 2014. This adjustment will be proportional to the amount of pension, in order to protect low-income workers.

The Québec government has also pledged to introduce the new voluntary retirement savings plans (VRSPs). As a follow-up to this announcement, the government will table, in spring 2012, legislative provisions to implement VRSPs as of January 1, 2013. These new plans will offset the insufficient savings of certain workers and thus ensure these workers are in a better financial situation when they retire.

In the 2012-2013 Budget Speech, the government announced the unveiling of the strategy for active participation by experienced workers, which introduces a series of actions over and above those already in place.

Therefore, the actions implemented under the present action plan will be addition to those announced previously.

The following concrete actions are being taken to support the participation of experienced workers in the workplace:

- Implement a new strategy for active participation by experienced workers
- Create a program to support employers that want to implement work-retirement balance measures
- Prepare and promote a good practice guide for employers that want to keep experienced workers on the job or help them to return to work
- Create a work-retirement balance award to recognize the contribution of employers that are setting an example in helping experienced workers strike a balance between their work responsibilities and retirement

Inspiring project

- *Employeur dépassez vos limites* is a project that aims to help people aged 50 and over enter or re-enter the labour market. The goal is to combat age-based stereotyping and discrimination in the workplace.

Implement a new strategy for active participation by experienced workers

This government strategy addresses the demographic issues facing Québec. It follows on the heels of actions already taken by the government and the recommendations of the report¹¹⁴ prepared recently by the Commission nationale pour la participation au marché du travail des travailleuses et travailleurs expérimentés de 55 ans et plus.

RESPONSIBLE BODIES:

- **Ministère de l'Emploi et de la Solidarité sociale**
- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Departments and agencies targeted by the strategy for active participation by experienced workers: Emploi-Québec, Commission des partenaires du marché du travail, ministère des Finances, ministère du Développement économique, de l'Innovation et de l'Exportation, Régie des rentes du Québec, Commission de la santé et de la sécurité du travail, Secrétariat du Conseil du trésor**

INDICATOR:

- **Implementation of the strategy for active participation by experienced workers**

Create a program to support employers that want to implement work-retirement balance measures

A new work-retirement balance program will be created. This new program will supplement an already existing program that provides employers with financial support for work-family balance measures, and will encourage them to introduce other measures for adapting the labour market to the needs of experienced workers aged 55 and over. The program will also encourage the adaptation of working hours, the transmission of know-how and personal skills, job sharing, the transition from work to retirement or, on the contrary, the return to work after retirement. Close to 100 projects developed by associations or businesses will be made possible under this program.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de l'Emploi et de la Solidarité sociale (Emploi-Québec)**
- **Workplaces**

INDICATORS:

- **Number of projects funded**
- **Investments made**

Prepare and promote a good practice guide for employers that want to keep experienced workers on the job or help them to return to work

This awareness and reference tool will familiarize employers with good practices for keeping experienced workers aged 55 and over on the job or helping them to return to work, and will thus foster the implementation of such practices.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de l'Emploi et de la Solidarité sociale**
- **Bureau de normalisation du Québec**
- **Workplaces**

INDICATORS:

- **Preparation of the good practice guide**
- **Number of promotion activities held with employers' groups**

Create a work-retirement balance award to recognize the contribution of employers that are setting an example in helping experienced workers strike a balance between their work responsibilities and retirement

This award will be granted every year to underscore the efforts of employers that have distinguished themselves by introducing measures to make it easier for experienced workers aged 55 and over to achieve a balance between their work responsibilities and retirement. It will supplement the already existing *Reconnaissance Conciliation travail-famille* award.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de l'Emploi et de la Solidarité sociale**
- **Workplaces**

INDICATOR:

- **Number of employers recognized for their stellar contribution to helping experienced workers balance their work responsibilities with retirement**

1.3 Promote the understanding, use and contribution of information and communications technologies

Cumulative additional investments 2102-2017:

\$5.4 million

Thanks to the Internet, people now have access to a much greater range of information than ever before. The most recent cohorts of seniors are more or less at ease with the many communication and information tools that currently exist. Moreover, due to the rapid evolution of technology, older adults are bound to witness the emergence of many new tools which they will have to master. However, seniors do not have equal access to information and communications technologies (ICTs) and nor are they equally equipped to understand and use them. In view of these challenges, solutions tailored to the needs of current and future elderly populations should be found. Training is essential for people who did not have the opportunity, particularly in their workplace, to learn how to use ITCs. Many seniors have always had a thirst for learning and are still eager to master new skills. In fact, people can learn to use ITCs at any age. Moreover, these tools often provide an excellent opportunity for developing and maintaining intergenerational ties.

ITCs can not only make the day-to-day lives of seniors easier, but can also help them to participate in the life of their community.

Photo: City of Drummondville

The following concrete actions are being taken to promote the comprehension, use and contribution of ITCs:

- Take advantage of the potential of digital technology to help seniors remain active in their living environment
- Help seniors use new technologies

Inspiring project

- The *Projet d'initiation et de soutien en informatique aux aînés d'Abitibi-Témiscamingue* enables seniors to acquire basic computer skills that they can then use and perfect on their own. Courses are given throughout the Réseau FADOQ.

Take advantage of the potential of digital technology to help seniors remain active in their living environment

The *Vieillir chez soi avec le numérique* initiative, implemented by the Centre francophone d'informatisation des organisations (CEFRIO) with the support of several partners, will conduct innovative pilot projects in a range of fields. These projects will make it possible to:

- rethink the supply of services to older adults by using information and communications technologies (ITCs) in several areas: culture, training, government services, civic participation, etc.;
- invent, in collaboration with seniors, new ways of contributing to the community with the help of ITCs; and, more generally,
- help seniors master ITCs.

Four pilot projects will be carried out:

1. Université numérique

This project will use digital technology to increase third age university training opportunities for seniors. Various approaches will be tested, including virtual synchronous classes, group@group, etc.

2. Support numérique pour l'utilisation des nouvelles technologies

This project is described on page 87.

3. Collaboration citoyenne des aînés grâce aux TIC

This initiative will enable networked seniors to actively contribute to their community on topics of strategic importance in people's lives, such as environmental monitoring and intergenerational knowledge transfer.

4. Brancher à la culture

This new cultural offering will ensure seniors have easy, user-friendly and low-cost access to culture, regardless of their situation and place of residence.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **CEFRIO**
- **Ministère de la Culture, des Communications et de la Condition féminine**
- **Financial, testing and dissemination partners**

INDICATORS:

- **Pilot projects conducted**
- **Assessments of pilot projects**
- **Projects implemented in Québec, depending on the pilot projects' results**

Help seniors use new technologies

This assistance service will be introduced and offered gradually by service organizations like seniors information centres. Through their volunteer networks, these organizations will make it easier for older adults to use new technologies.

As mentioned earlier, CEFRIO will carry out a pilot project called *Support numérique pour l'utilisation des nouvelles technologies*. This project will familiarize seniors with information and communications technologies using a specially adapted training program, as well as a simplified interface for accessing several Web functions at the click of a mouse.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Fédération des centres d'action bénévole du Québec**
- **Regional seniors' consultation committees**
- **Quebec Association of Senior Centres**
- **Service organizations like seniors information centres**

INDICATORS:

- **Number of seniors provided with assistance**
- **Number of volunteers provided with training**

Direction 2

Aging and Living Together

means leading a healthy life in one's community

Cumulative additional investments 2012-2017:

\$1.16 billion

The aging of Québec's population is having effects that challenge our ability, as a society, to change some of our current practices regarding seniors and to respect their desire to continue living at home and within their community. Older adults require a wide variety of services ranging from prevention to curative care and from home support to alternatives to institutional accommodation and, ultimately, long-term accommodation and care. To ensure that organizations providing such services can interoperate as effectively as possible requires close collaboration among all public, community and private stakeholders involved in action for seniors within the framework of structured approaches and in places that have meaning for seniors.

First of all, there is a need for better balance between the various types of action taken for the elderly. Given the rate at which the population is aging, we must increase the number of services for older adults, diversify the ways in which we address their needs and adapt our actions accordingly. The current context requires judicious choices if we are to arrive at an effective distribution of efforts among the various modes of intervention and the resources to be invested in them. The challenge is to find the right mix of preventive, curative, rehabilitation, home-support and accommodation services.

Second, it is essential to integrate services and ensure that all stakeholders work together. Owing to the number of resources that have to be deployed and made available across Québec, there must be an appropriate sharing of responsibilities among the different players in the health and social services network and all the other sectors involved in action for the elderly. A range of partners must be encouraged to view the community as one of the best places for basing actions designed to meet the varied needs of seniors, better coordinating these actions and ensure servicing continuity. In addition, home support must be the core component of service organization.

STRATEGIC CHOICES

To enable seniors to age in good health in their community, the Québec government plans to:

- 2.1 Promote the health of seniors, prevent them from losing autonomy and improve their quality of life
- 2.2 Increase service supply and access and improve stakeholder collaboration so as to better support seniors and their loved ones at home and in the community
- 2.3 Adapt practices, services and intervention strategies to the needs of seniors

2.1 Promote the health of seniors, prevent them losing autonomy and improve their quality of life

Cumulative additional investments 2012-2017:

\$49 million

The behaviours and habits that constitute a person's health capital and promote his or her development are shaped throughout the person's lifetime. It is never too late to change behaviours or habits that are detrimental to one's health or well-being. Information and education should be used to maximize people's quality of life as they age.

Promoting the health of seniors involves creating environments that foster their health and providing them with the information and tools they need to exercise more control over their lives. It also involves bolstering action at the community level and introducing health services that better reflect individuals' needs as a whole.

Taking a preventive approach fosters action before problems arise, as well as rapid intervention when they arise, so as to ward off their negative repercussions and improve quality of life. The actions taken with this type of approach are varied and involve players from a range of disciplines.

A preventive approach is not intended solely for healthy independent seniors, but for seniors who are already experiencing a loss of autonomy, given that it can help to preserve and develop their remaining abilities.

The following concrete actions are being taken to promote the health of seniors, prevent them from losing autonomy and improve their quality of life:

- Promote healthy lifestyles among current and future elderly populations
- Define and implement a healthy eating policy in Québec

- Develop two new routines for the *Viactive* network
- Take steps to support healthy eating, reduce inappropriate use of medication and prevent falls
- Implement depression screening measures for older adults
- Conduct a range of activities to encourage pneumococcal and influenza vaccination among seniors
- Promote the vaccination of seniors, particularly against diphtheria, tetanus and whooping cough

Inspiring projects

- A *clinical prevention system* has been set up by the Direction de santé publique de Montréal, in partnership with 12 health and social services centres (CSSSs) and a number of physician representatives, to facilitate the use of preventive clinical practices based on healthy lifestyles. This system is making it possible to build ties among the various primary care clinical settings, namely, family medicine groups, integrated network clinics, community drugstores, CSSS prevention resources, and community resources.
- The *Rendez-vous de la santé* fair, organized by the Jonquière CSSS in collaboration with local partners, introduced the population to the care and services provided to act on the main determinants of health, including physical activity, healthy eating and smoking cessation. Visitors had access to 11 table clinics dealing with topics such as chronic illnesses and problems associated with age-related loss of autonomy. They were also able to take part in a number of conferences and activities.
- The program *Les médicaments: Oui... Non... Mais ! En santé après 50 ans* is designed to promote healthy living after the age of 50. Under the program, which is already in place in several regions, front-line clinical practitioners apply a range of approaches to reduce the use of antianxiety, sedative and hypnotic medications. The goal is to improve participants' knowledge about suitable behaviours for dealing with certain health problems associated with aging.

Promote healthy lifestyles among current and future elderly populations

This action is designed to increase the proportion of adults with healthy lifestyles by renewing the 2006-2012 government action plan to promote healthy lifestyles and prevent weight-related problems, entitled *Investir pour l'avenir*.

This government action plan will be renewed for the 2013-2017 period, cover all age groups and deal not only with weight-related problems but also the prevention of the most prevalent chronic illnesses. Provincial, regional and local stakeholders, particularly health and social services agencies and health and social services centres (CSSSs), will be asked to take part in implementing the plan. These bodies, which will improve the support teams that currently exist, will be required to:

- round out the Age-Friendly Communities initiative by helping community and municipal workplaces create environments that foster healthy lifestyles (healthy eating, physical activity);
- improve the supply of smoking cessation services;
- support preventive clinical practices in the health and social services network for people who are at risk for developing chronic illnesses.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Seven other departments involved in implementing the action plan: Famille et Aînés; Éducation, Loisir et Sport; Affaires municipales, Régions et Occupation du territoire; Transports; Agriculture, Pêcheries et Alimentation; Culture, Communications et Condition féminine; Emploi et Solidarité sociale**
- **Institut national de santé publique du Québec**
- **Health and social services agencies**
- **Health and social services centres**

INDICATORS:

- **Proportion of adults who follow Canada's Food Guide recommendations**
- **Proportion of adults who smoke**
- **Proportion of adults who are active during their spare time**

Define and implement a healthy eating policy in Québec

The goal of defining and implementing a policy of this type is to support healthy eating, particularly among older adults.

The policy will support living environments as a whole by generally improving the food that is provided to seniors. This will involve offering products with a low sugar, fat and salt content and boosting the consumption of food with high nutritional value in order to reduce the incidence and consequences of several chronic illnesses among current and future populations of seniors.

The policy will set objectives regarding dietary intakes, food consumption and food composition and underpin all of the policies implemented in the various living environments of current and future populations of older adults.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Departments involved in implementing the policy: Affaires municipales, Régions et Occupation du territoire; Agriculture, Pêcheries et Alimentation; Développement durable, Environnement et Parcs; Développement économique, Innovation et Exportation; Culture, Communications et Condition féminine; Emploi et Solidarité sociale**
- **Institut national de santé publique du Québec**
- **Biofood sector (production, processing, distribution, marketing)**
- **Non-governmental organizations**
- **Research community**

INDICATORS:

- **Proportion of adults who follow Canada's Food Guide recommendations**
- **Prevalence of obesity and overweight**
- **Mortality and hospitalization rates for cardiovascular disease**

- **Adjusted diabetes prevalence rate**
- **Incidence and mortality rates for certain cancers**

Develop two new routines for the *Viactive* network

With these two new physical activity routines, the *Viactive* network, which is an offshoot of the government's Kino-Québec program, will be able to continue its primary mission of helping seniors to maintain or improve their social and functional autonomy and well-being for as long as possible. The *Viactive* network also creates opportunities for older adults to connect with one another. It comprises 2 700 senior volunteers who lead exercise sessions for over 1 400 groups across Québec, with close to 31 000 participants aged 55 and over.

RESPONSIBLE BODY:

- **Ministère de l'Éducation, du Loisir et du Sport**

PARTNERS:

- **Ministère de la Famille et des Aînés**
- **Ministère de la Santé et des Services sociaux**
- **Health and social services agencies**
- **Other regional organizations, such as FADOQ**

INDICATORS:

- **Number of *Viactive* multiplier agents or councillors**
- **Number of *Viactive* group leaders**
- **Number of *Viactive* groups**
- **Number of partners sensitized or mobilized**

Take steps to support healthy eating, reduce inappropriate use of medication and prevent falls

The goal of this action is to enable older adults to remain independent, particularly with the help of front-line and community services. Such services consist of:

- clinical activities by front-line workers in the health and social services network to identify seniors at risk of malnutrition, using medication inappropriately or falling; offer nutritional, psychosocial and medical counselling; and provide appropriate treatment of problems related to physical health, swallowing, dentition, eyesight, high blood pressure, mental health, anxiety or depression;
- community support to facilitate access to healthy food (nutrition policy, Meals on Wheels, transportation to community cafeterias, assistance with grocery shopping, collective kitchens), reduce inappropriate use of medication (through initiatives such as *Les médicaments: Oui... Non... Mais ! En santé après 50 ans*), diminish isolation, encourage physical activity (associations, municipalities, *Viactive*, P.I.E.D. program), and facilitate safe transportation.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Ministère de l'Agriculture, des Pêcheries et de l'Alimentation**
- **Ministère de l'Emploi et de la Solidarité sociale**
- **Ministère de la Famille et des Aînés**
- **Health and social services agencies**
- **Health and social services centres and hospitals**
- **Medical clinics**
- **Société d'habitation du Québec**
- **Municipalities**

INDICATORS:

- **Proportion of seniors who meet their nutritional requirements**
- **Proportion seniors who use antianxiety, sedative or hypnotic medications**
- **Mortality and hospitalization rates for falls and injuries at home**

Implement depression screening measures for older adults

This action will enable front-line health and social services workers, particularly in health and social services centres and physician's offices, to detect symptoms of depression using appropriate clinical examination tools. Better identifying seniors at risk of depression helps to reduce health problems, improve quality of life and foster better use of health services.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Institut national de santé publique du Québec**
- **Health and social services agencies**
- **Health and social services centres**
- **Private and public physicians' offices**
- **Family medicine groups**

INDICATORS:

- **Prevalence of depression among older adults**

Conduct a range of activities to encourage pneumococcal and influenza vaccination among seniors

The goal of this action is to encourage vaccination through various means, such as TV, radio, print media and web campaigns, information documents (on vaccines, for example), letters to raise awareness among the appropriate professional orders, reminder letters to older adults (concerning pneumococcal vaccination in the case of people aged 65 and over and influenza vaccination in the case of people aged 60 and over), updates of the flu information Website, *Info-grippe*, and the Website of the ministère de la Santé et des Services sociaux, and participation in certain events.

Vaccination helps to immunize seniors against preventable illnesses that are particularly burdensome for those who contract them.

Improving vaccination coverage for the elderly would keep hospitalization rates for influenza and pneumonia at their current levels despite the fact that the number of people aged 65 and over is growing. Antimicrobial resistance is a concern in the treatment of influenza and especially pneumococcal infections. The goal is thus to reduce antimicrobial resistance to pneumococcal infections.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Institut national de santé publique du Québec**
- **Health and social services agencies**
- **Health and social services centres**
- **Medical clinics**

INDICATORS:

- **Number of hospitalizations due to influenza and pneumococcal infections among seniors**
- **Vaccination coverage against influenza and pneumococcal infections among seniors (aged 65 and over in the case of pneumococcal infections and aged 60 and over in the case of influenza)**
- **Vaccination coverage in institutions that offer long-term care**

Promote the vaccination of seniors, particularly against diphtheria, tetanus and whooping cough

This action aims to promote the vaccination of older adults against diphtheria, tetanus and whooping cough, illnesses that are very burdensome but preventable. Indeed, effective, safe vaccines are readily available. Promoting vaccination against these illnesses is thus a good way to substantially increase the number of people who get vaccinated.

Improving vaccination coverage of the elderly would keep the incidence of these three illnesses at levels considered acceptable, cut down on the transmission of whooping cough and diphtheria and reduce hospitalization rates and treatments related to these three vaccine-preventable illnesses.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Institut national de santé publique du Québec**
- **Health and social services agencies**
- **Health and social services centres**
- **Medical clinics**

INDICATORS:

- **Annual number of diphtheria cases**
- **Annual number of tetanus cases**
- **Annual number of whooping cough cases**

2.2 Increase service supply and access and improve stakeholder collaboration so as to better support seniors and their loved ones at home and in the community

Cumulative additional investments 2102-2017:

\$1.11 billion

For seniors to grow old at home and in their community, both they and their loved ones must be able to count on accessible, quality health and social services organized according to their needs. Steps must be taken to increase services for the elderly and their loved ones, better coordinate the efforts of each player so as to foster greater continuity among the services they provide, and continue strengthening and developing home-support services.

Regardless of where older adults receive services, be it in a health and social services network institution, a physician's office or their living environment, the overriding goal must be to ensure they remain independent or, if they are already experiencing a loss of autonomy, continue to receive the support they need to live at home and in their community for as long as possible. To achieve this goal, services must be highly integrated so as to ensure continuity and appropriate assistance for people with complex, special needs.

Home-support services must be strengthened and developed. In fact, the government is making major investments so that more people will have access to these services. These investments will also increase the intensity of services in order to respond more adequately to the needs of seniors experiencing a loss of autonomy and ensure that home support plays a greater role in the organization of services.

Obviously, the main expectation of seniors who are experiencing a loss of autonomy and their loved ones is to have access to home-support services that address their needs. The care and assistance provided by loved ones helps to keep older adults living at home and in their community. It is essential not only to recognize this support but also to strengthen existing services and introduce new ones for the loved ones who provide it.

The following concrete actions are being taken to increase service supply and access and improve stakeholder collaboration so as to better support seniors at home and in the community:

Improved access to a range of services

- Facilitate 24/7 telephone access to consultation services by psychosocial professionals in health and social services centres
- Improve access to reception, assessment, counselling and referral services in health and social services centres
- Improve access to front-line medical services for seniors
- Increase the number of nurse practitioners specialized in primary care
- Improve chronic pain management among seniors
- Implement assessment and treatment measures for people with age-related cognitive impairments
- Improve access to specialized rehabilitation services for older adults
- Provide people who have a cerebrovascular accident with timely treatment

More home-support services for seniors and their caregivers

- Increase the number of people receiving home-support services and intensify these services in order to better address the needs of seniors and their loved ones
- Enhance the Financial Assistance Program for Domestic Help Services
- Assist domestic help social economy businesses with their business practices
- Improve support for social housing community support
- Bolster support for community organizations that work with seniors and their loved ones

Locally integrated services

- Integrate, coordinate and ensure continuity of services for seniors and their loved ones

Inspiring projects

- Three new ambulatory care clinics (cardiorespiratory clinic, chronic kidney disease clinic and nutrition risk-factor clinic) set up by the Centre de santé et de services sociaux (CSSS) Drummond, are facilitating the *integrated management of chronic disease*, an approach designed in particular for the elderly. These clinics, which work in an interdisciplinary manner, promote prevention, accessibility of care, and the continuity and quality of specialized services with a view to limiting the progression of chronic illnesses and the use of more cumbersome and costly curative care. A significant reduction in hospitalization and emergency department visits has been observed among people who complete the rehabilitation program.
- The *Rester chez soi par choix* project, of the Rocher-Percé CSSS, is designed to enable seniors to live at home for as long as possible thanks to more accessible home-support services. These services have been reorganized and alternative working arrangements introduced in order to meet the needs of seniors and their loved ones without any wait times. For example, CSSS staff make house calls in the evening and follow-up telephone calls in the early evening, thereby cutting down on the use of emergency services.
- The *REVA* project, launched by the Lac-des-Deux-Montagnes CSSS, aims to prevent older adults from experiencing a loss of autonomy. It involves two groups of key players in the community, namely, “spotters”, whose role is to identify seniors likely to experience a loss of autonomy, and “monitors”, who commit to visiting, for at least one hour a week, seniors that have been referred to them by the spotters.
- *Case management* is well-established at the Health and Social Services Centre–University Institute of Geriatrics of Sherbrooke (CSSS-IUGS). Staff members who do case management are responsible not only for assessing seniors’ needs and for planning services but also for coordinating services. They work primarily with a vulnerable clientele that requires services from several organizations. It is always the same caseworker who does follow-up with a particular senior and his or her loved ones, even when the senior is in hospital. That way, the senior does not have to keep repeating his or her case history, services are better tailored to his or her needs, and the caseworker deals with all the appropriate organizations in order to obtain the necessary services.

Improved access to a range of services

Facilitate 24/7 telephone access to consultation services by psychosocial professionals in health and social services centres

This action aims to foster ready and rapid 24/7 telephone access to consultation services by psychosocial professionals in health and social services centres. By 2015, the response time will be four minutes or less for 90% of the calls received.

This service enables seniors, their families and loved ones to access the appropriate resources when they need information, intervention, counselling or referral. Response to calls and any ensuing interventions are usually on a case-by-case basis. In some cases, interventions take place in crisis situations where seniors are faced with psychosocial issues such as isolation, adaptation problems, family problems, bereavement, violence and suicide.

If necessary, this service also helps professionals intervene with seniors, their families and loved ones by providing them with advice, guidance, and resource and referral information. It is also used to conduct case discussions in certain situations.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**

INDICATORS:

- **Percentage of people over the age of 65 who consult a psychosocial professional using the 24/7 telephone service**
- **Percentage of calls to the psychosocial telephone consultation service answered within four minutes or less**

Improve access to reception, assessment, counselling and referral services in health and social services centres

This action is aimed at improving access to professionals providing reception, assessment, counselling and referral services in health and social services centres (CSSSs), in order to adequately address the needs of seniors, their families and loved ones.

These professionals are the main channel through which psychosocial assistance requests are addressed to CSSSs. The services they offer are designed to provide seniors, their families and loved ones with a personalized reception and to help them connect and deal with the appropriate resources based on their needs. Services are available on a walk-in or appointment basis 70 hours a week.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**

INDICATORS:

- **Number of users over the age of 65 who receive general social services in CSSSs**
- **Average number of general social service interventions per user over the age of 65 in CSSSs**

Improve access to front-line medical services for seniors

The goal of this action¹¹⁵ is to create new family medicine groups (FMGs) and increase the number of older adults registered with a family physician.

FMGs provide registrants with:

- medical services on a walk-in, appointment or home-visit basis during office hours on weekdays, weekends and statutory holidays;
- specially adapted services outside regular office hours, in collaboration with Info-Santé, when people require these services because of their precarious state of health (nurse on call 24/7).

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services centres**
- **Fédération des médecins omnipraticiens**

INDICATORS:

- **Number of accredited family medicine groups in Québec**
- **Percentage of people over age 65 registered with a family physician**

Increase the number of nurse practitioners specialized in primary care

The aim of this action¹¹⁶ is to improve seniors' access to health services by fostering health promotion and disease prevention strategies.

As part of their duties, nurse practitioners may:

- manage common health problems and provide follow-up for patients with chronic illnesses – ailments that particularly affect seniors;
- prescribe medication;
- perform diagnostic tests and administer treatments;
- do certain invasive procedures.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**

INDICATOR:

- **Number of primary-care nurse practitioners in local community service centres (CLSCs) and family medicine groups**

Improve chronic pain management among seniors

This action aims to introduce services tailored to the special needs of older adults in order to adequately meet these needs. In particular, it will increase the identification of chronic-pain-related problems among seniors who have trouble communicating and provide them with appropriate treatments to improve their quality of life.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Centre d'expertise en gestion de la douleur chronique**
- **Health and social services centres**

INDICATORS:

- **Number of multidisciplinary teams involved in primary care chronic pain management**
- **Number of seniors referred to a regional centre or a centre of expertise and provided with chronic pain management services by that centre**
- **Amount of time it takes to receive services**

Implement assessment and treatment measures for people with age-related cognitive impairments

The goal of this action is to implement the measures in the action plan of the ministère de la Santé et des Services sociaux for people with age-related cognitive problems and their loved ones by increasing access to health and social services, particularly through:

- the creation of cognition clinics with specialists who perform assessments of seniors with complex problems and make recommendations on appropriate treatments to general practitioners;
- the introduction of services for managing the behavioural and psychological symptoms of dementia.

This action involves the development of practice guidelines, standardized evidence-based tools and a training and coaching program to support settings-based skills transfer.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Integrated university health networks (RUIS)**
- **Family medicine groups and network clinics**
- **Private physicians' offices**

INDICATORS:

- **Number of cognition clinics**
- **Percentage of services put in place to manage the behavioural and psychological symptoms of dementia**

Improve access to specialized rehabilitation services for older adults

This action is aimed at improving access to specialized rehabilitation services for older adults in order to reduce or offset their disabilities.

Seniors currently account for roughly 30% of the total clientele of rehabilitation centres for people with physical disabilities. This percentage will increase in the coming years due to the aging of the population, given that a large proportion of elderly people have significant and persistent physical (hearing, visual, motor, language) disabilities.

Improving access to specialized rehabilitation services for seniors will help to reduce or offset their disabilities and could have a direct impact on decreasing the need for home services.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Rehabilitation centres**
- **Health and social services centres**
- **Community organizations**

INDICATOR:

- **Number of seniors who receive services**

Provide people who have a cerebrovascular accident with timely treatment

This action aims to ensure that people who have a cerebrovascular accident (CVA) – the vast majority of whom are seniors over the age of 65 – receive safe, timely treatment tailored to their condition. It is designed to reduce treatment wait times during both the acute and rehabilitation phases so as to reduce morbidity and mortality rates. It is also designed to reduce the occurrence of a second CVA through appropriate secondary prevention measures.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Centres of expertise in CVAs and specialized rehabilitation facilities**
- **Health and social services centres**

INDICATORS:

- **Reduction of treatment wait times**
- **Number of regions with an appropriate supply of acute care services**
- **Number of regions with an appropriate supply of rehabilitation services**

More home-support services for seniors and their caregivers

Increase the number of people receiving home-support services and intensify these services in order to better address the needs of seniors and their loved ones

The goal of this action is to make the entire range of home-support services available to nearly 50 000 seniors and increase the intensity of services when a person's state of health so requires, by providing more hours of services.

On its own, the increase in the number of seniors in the population will mean that services will have to be delivered to more people. Moreover, as the autonomy of older adults declines, they will need a higher intensity of services to continue living at home and in their community.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Community organizations and domestic help social economy businesses**

INDICATORS:

- **Number of seniors experiencing a loss of autonomy who receive home-support services through the different service delivery modes**
- **Number of hours of home-support services provided per older adult**

Enhance the Financial Assistance Program for Domestic Help Services

The goal of enhancing this program is to maintain and improve seniors' access to domestic help services provided by domestic help social economy businesses (DHSEBs).

The program's objectives are to structure the supply of domestic help services and provide financial support to seniors who request them. Seniors are the principle users of the program, accounting for 69% of the total clientele. The services consist of domestic help, light and heavy housework, laundry, assistance with grocery shopping and other errands and preparation of non-diet meals.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Régie de l'assurance maladie du Québec**
- **Health and social services agencies**
- **Domestic help social economy businesses**

INDICATOR:

- **Additional funding granted**

Assist domestic help social economy businesses with their business practices

The goal of this measure is to assist domestic help social economy businesses (DHSEBs) with their business practices. Through this incentive measure, DHSEBs will have access to training in organizational diagnosis, strategic planning, strategic marketing and costing.

RESPONSIBLE BODY:

- **Ministère du Développement économique, de l'Innovation et l'Exportation**

PARTNERS:

- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**
- **Ministère de la Santé et des Services sociaux**

INDICATORS:

- **Participation rate of DHSEBs, by component, region or territory and year**
- **Number of participants (board of director members, managerial personnel, administrative staff) per DHSEB, by gender, region or territory and year**

Improve support for social housing community support

Community support for social housing derives from actions at the interface between the health and social services and social housing networks and is based on close collaboration between the two networks. Such support includes reception and referral, tenant conflict management, assistance in dealing with public services, crisis intervention, support for tenants' and other committees, and community organization.

Seniors benefit the most from this type of support.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Société d'habitation du Québec**
- **Municipal housing bureaus**
- **Non-profit housing organizations and housing co-ops**

INDICATOR:

- **Percentage of additional dwelling units occupied by seniors receiving community support for social housing**

Bolster support for community organizations that work with seniors and their loved ones

This action aims to bolster the funding of community organizations that work with older adults in order to maintain and increase access to the services these organizations provide.

Over 500 community organizations offer services to seniors, including Meals on Wheels, respite, accompaniment and mutual aid. They are equipped to respond rapidly to the varied needs of seniors and their loved ones. They also contribute to home support.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Community organizations in the “home support”, “seniors” and “volunteer action centre” categories**

INDICATORS:

- **Number of community organizations in the “home support”, “seniors” and “volunteer action centre” categories whose budget is strengthened**
- **Additional funding granted per community organization offering services to seniors**

Locally integrated services

Integrate, coordinate and ensure continuity of services for seniors and their loved ones

The goal of this action¹¹⁷ is to iron out problems and limit service interruptions for seniors and their loved ones. Older adults need medical, health and social services on a regular basis. Since such services are usually offered simultaneously by several different service providers or organizations, it is important to improve the coordination of these services.

To better coordinate actions as a whole and ensure service continuity, the various components of the integrated services network for seniors must be deployed. The goal is to have 70% of the network in place throughout Québec by 2015.

The network's components are as follows: formal coordination mechanisms, an entry point for services, a single assessment system, case management for the most vulnerable clientele, a computerized clinical communications tool for rapid information exchange, and mechanisms for referring people to family physicians and specialized gerontology and geriatrics services.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Public, community and private partners of local services networks (LSNs)**

INDICATOR:

- **Degree of implementation of integrated services networks for seniors**

2.3 Adapt practices, services and intervention strategies to the needs of seniors

Changes must be made at all levels if practices, services and intervention strategies are to be adapted to the special needs of seniors and their loved ones.

To make the necessary changes, organizations must become integrated, care about the accessibility and quality of their services, and gear them to the realities of seniors. They must also use evidence-based organizational models and quality practices.

All professionals and managers in the health and social services network must take part in making the changes required. Moreover, they must adapt their practices in order to cope with the substantial increase in the demand for services. Adaptation is key to working with older adults.

This process of adaptation must take place in all settings where seniors are found, be it institutions in the health and social services network, physician's offices, seniors' own homes or alternative living environments such as intermediate resources. It is a process that acknowledges the fact that seniors are in a vulnerable situation, be it real or perceived, that requires a global approach by professionals from a range of disciplines.

The following concrete actions are being taken to adapt practices, services and intervention strategies to the needs of seniors:

- Adapt health and social services to the needs of seniors
- Promote the adaptation of practices to the needs of seniors among professional orders and educational institutions
- Ensure that a sufficient supply of skilled labour is available

Inspiring projects

- The *Centre hospitalier de l'Université de Montréal* gives priority to an approach based on improving care for the fragile elderly clientele of its emergency department and acute care units. To that end, a team has developed the “AINÉES” tool, whose letters stand for French words referring to six aspects of health: autonomy and mobility; integrity of the skin; nutrition and hydration; elimination; cognitive state and behaviour; and sleep. These aspects must be monitored as their deterioration is indicative or predictive of complications and functional decline among hospitalized seniors. The nursing team encourages seniors and their loved ones to participate in using this tool.

- The *Centre de santé et de services sociaux de Montmagny-L'Islet* advocates a personalized approach for hospitalized seniors that uses simple effective measures to mitigate the adverse effects of hospitalization. For example, hospitalized seniors are encouraged to reduce the amount of time they spend in bed during the day, to sit as soon as they can in a chair and to continue their activities of daily living. In addition, medical staff no longer take seniors' vital signs at night so as to not disturb their sleep and enable them to recuperate more quickly.

- The *Centre de santé et de services sociaux du Nord de Lanaudière* has launched a major campaign to raise awareness about the effects of prolonged bed rest on seniors. Several measures have also been implemented to improve practices and care for this clientele with a view to maintaining their autonomy: for example, ensuring that bedridden people have their glasses and hearing aids, are well hydrated and spend a fair amount of time in a semi-seated position. In addition, an orderly is responsible for seeing that seniors lying on stretchers in the emergency room do not remain completely immobile.

Adapt health and social services to the needs of seniors

The goal of this action is to review and adapt practices applied in dealing with seniors and their loved ones by all health and social services workers, physicians and managers.

An approach for adapting services to the elderly is already being applied in hospital settings. Known as the “approach adapted to the elderly in a hospital setting”, it involves the use of a person-centred care model in order to prevent seniors’ health from deteriorating while they are in hospital. By 2015, 60% of hospitals will have implemented this new approach.

It is important to start developing the approach so that it can be used to assist older adults living at home and experiencing a loss of autonomy, as well as their loved ones. It is also important to enlist the participation of all service providers, including community organizations and domestic help social economy businesses (DHSEBs). Revising our current practices will ensure they are better tailored to the needs of an aging clientele and their loved ones and prevent seniors from being subjected to inappropriate or prolonged stays in emergency wards or hospital-based short-stay units and from moving into institutional accommodation before they have to.

This action involves the development of practice guidelines, standardized evidence-based tools and a training and coaching program to support settings-based skills transfer.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **University-level geriatrics institutes**
- **Centre d’excellence sur le vieillissement de Québec**
- **Health and social services centres**
- **Professional orders**
- **Educational community**
- **Health and social services agencies**
- **DHSEBs and community organizations**

INDICATORS:

- **Percentage of steps completed in adapting home-support services**
- **Percentage of hospitals that implement most of the components of the approach adapted to the elderly in a hospital setting**

Promote the adaptation of practices to the needs of seniors among professional orders and educational institutions

The goal of this action is to establish exchange mechanisms with professional orders with a view to fostering:

- the promotion of new practices;
- the inclusion of concepts relating to the adaptation of practices to seniors' needs in competency profiles;
- a more specific role for the Collège des médecins.

This action is also aimed at establishing exchange mechanisms with educational settings so that concepts relating to the adaptation of practices to seniors' needs are included in basic training.

Lastly, this action will make available to professional orders and educational settings training and coaching material developed by the ministère de la Santé et des Services sociaux, in collaboration with university-level geriatric institutes and the Centre d'excellence sur le vieillissement de Québec.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Ministère de l'Éducation, du Loisir et du Sport**
- **Professional orders**

INDICATORS:

- **Percentage of professional orders that include concepts relating to the adaptation of practices to seniors' needs in competency profiles**
- **Percentage of educational settings that include concepts relating to the adaptation of practices to seniors' needs in their training programs**

Ensure that a sufficient supply of skilled labour is available

The goal of this action is to monitor changes in the labour needs of the health and social services network and prepare forward-looking staffing plans in a context where the number of older adults requiring services is growing rapidly.

Labour shortages pose a major challenge for the health and social services network and may have an adverse effect on service delivery.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services institutions**
- **College and university educational settings**

INDICATORS:

- **Availability of the labour needed to provide services**
- **Gap between available and required labour, and necessary action plans**
- **Maintenance and increase of service accessibility**

Direction 3

Aging and Living Together

means creating healthy, safe and welcoming environments within one's community

Cumulative additional investments 2012-2017:

\$1.31 billion

Healthy, safe and welcoming living environments are without question a prerequisite to staying in one's community. A sense of physical or psychological security is also a crucial factor. Seniors age more serenely in a safe environment, and the combined actions of governments and all players within each community contribute to their well-being. Private enterprises, non-profit organizations, communities, caregivers and individuals themselves play a decisive role in improving the day-to-day lives of seniors. Making their lives better is thus a shared responsibility that drives myriad outreach initiatives that help transform living environments.

The actions proposed here will support communities in strengthening existing local services and innovating with dynamic projects that have seniors as their core concern. Veritable laboratories for ideas and projects, community organizations are key players in this regard and their existence and actions are invaluable. Indeed, many local community organizations work with seniors and their caregivers on a daily basis.

Specific action must continue to be taken to combat elder abuse. Even though there has been an awareness of the problem for years, too many seniors continue to be the target of abuse, which is why it is important to maintain existing actions and take new steps to counter elder abuse.

Municipalities play a pivotal role in ensuring safe living environments for seniors. For seniors to be able to grow old at home, within their community, it is vital that their special, and growing, housing and transportation needs be taken into account.

Furthermore, special attention must be given to vulnerable seniors, and assistance and accompaniment services encouraged.

STRATEGIC CHOICES

To offer seniors healthy, safe and welcoming environments, the Québec government intends to:

- 3.1 Counter elder abuse
- 3.2 Assist vulnerable seniors to facilitate their access to services
- 3.3 Help and support caregivers
- 3.4 Support communities in adapting to an aging population
- 3.5 Develop adaptable, barrier-free, affordable and safe housing for current and future elderly populations
- 3.6 Ensure mobility for seniors

3.1 Counter elder abuse

Cumulative additional investments 2012-2017:

\$10.2 million

The Governmental Action Plan to Counter Elder Abuse 2010-2015, which was launched in 2010, constitutes a defining point in Québec's fight against the abuse of its seniors. It addresses the needs expressed during the 2007 public consultation on the living conditions of Québec seniors¹¹⁸ and is in keeping with a range of community initiatives. A survey of Quebecers' perceptions* of elder abuse was also conducted, in February and March 2010.

Highlights of the survey:

- Respondents were asked to describe the first picture or image that comes to mind when they think about elder abuse. The forms of abuse that most came to mind were psychological, emotional or verbal abuse (26%), physical abuse (25%), neglect (24%) and financial abuse (15%).
- 96% of Quebecers think it is important to be informed about elder abuse. However, 50% consider themselves to be well-informed about this problem, with the percentage increasing to 65% among respondents aged 65 and over.

* Survey of 1 183 Quebecers aged 18 and over. A total of 360 seniors (65 years of age and older) were interviewed for the purpose of comparing their responses against those of people under 65 years of age.

Source: Gouvernement du Québec, Ministère de la Famille et des Aînés Website [http://maltraitanceaines.gouv.qc.ca/liens_et_references_sur_la_maltraitance_des_aines]. (Consulted February 12, 2012).

The government's action plan to counter elder abuse addresses the primary concerns of independent seniors, seniors experiencing a loss of autonomy and seniors resources in the current context of service organization. It promotes concerted action among the various stakeholders so that all efforts are aimed at the single objective of combating elder abuse and enabling victims to reclaim the respect and dignity to which they are entitled.

More than a year after the action plan was launched, nearly 40 measures have been implemented, including the following:

- Québec's first annual elder abuse awareness campaign was held in October 2010, under the theme "Help, Love, Act".
- The Québec-wide Elder Abuse Help Line was launched on October 1, 2010. As at April 4, 2012, 7 332 calls had been received after 78 weeks of operation, for an average of 94 calls a week.
- The world's first University Research Chair on Elder Abuse was created in December 2010.
- Eighteen regional coordinators specializing in elder abuse have been hired in Québec's health and social services agencies, including one dedicated to First Nations elders and another to cultural communities.
- The Commission des droits de la personne et des droits de la jeunesse has established a specialized team that works on the ground to counter exploitation of the elderly.
- A brochure published by the Autorité des marchés financiers, entitled *Trust must be earned!*, was released in October 2011 to help protect seniors against financial abuse.
- Two partners' forums were held, in 2011 and 2012, each one bringing together nearly 120 participants.

The efforts to counter elder abuse must continue, which is why it is important to go on supporting concrete action and enable further action to be taken. To that end, existing legislative mechanisms that protect seniors against abuse will be examined and, where necessary, recommendations for strengthening them will be made.

The following concrete actions are being taken to counter elder abuse:

- Continue implementing the Governmental Action Plan to Counter Elder Abuse 2010-2015 and ensure its objectives are sustainable
- Support projects that are in line with the Governmental Action Plan to Counter Elder Abuse 2010-2015

Inspiring projects

- The *SOS Abuse Kit* was jointly developed by the Association québécoise de défense des droits des personnes retraitées et préretraitées and the Réseau québécois pour contrer les abus envers les aînés. In addition to containing nearly 80 prevention, screening, intervention and training tools, it also presents groundbreaking initiatives taken across Québec and includes a directory of training programs. The toolkit is designed to assist professionals in their efforts to fight elder abuse.
- The *Senior Aware* program was born of a cooperative effort of the Réseau FADOQ, the Sûreté du Québec and the Centre de santé et de services sociaux Cavendish. Its purpose is to inform seniors, social workers and the general public about the different forms of abuse and fraud to which seniors may be subjected as well as remedy and prevent cases of abuse. It achieves this goal through information sessions led by senior volunteers and police officers who share their experience with participants.
- In 2011, the Fondation Émergence drafted a charter for proper treatment of homosexual seniors (the *Charte de bientraitance des personnes âgées homosexuelles*) to inform and raise awareness among people who work with the elderly about the realities of gay, lesbian and transsexual seniors. This charter flows from the research, information and awareness project *Pour que vieillir soit gai : dans le respect et la dignité* and comes with an information kit.
- The *Centre de bénévolat Manicouagan* educates the elderly and professionals about abuse, neglect and violence through a play called *Du soleil en automne*. By depicting the various types of abuse and abusers, the play helps create a genuine understanding of these problems. It informs seniors about their rights and equips them to defend themselves and take action. A team composed of a Sûreté du Québec officer and a community health and social services worker was formed in 2010 to explain legal aspects as well as how the healthcare community can help victims.

Continue implementing the Governmental Action Plan to Counter Elder Abuse 2010-2015 and ensure its objectives are sustainable

Implementation of the action plan to counter elder abuse will run until 2017. The results will be assessed by 2015 with a view to adjusting existing measures where necessary.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Autorité des marchés financiers**
- **Commission des droits de la personne et des droits de la jeunesse**
- **Curateur public du Québec**
- **Ministère de l'Éducation, du Loisir et du Sport**
- **Ministère de l'Immigration et des Communautés culturelles**
- **Ministère de la Justice du Québec**
- **Ministère de la Santé et des Services sociaux (health and social services agencies)**
- **Ministère de la Sécurité publique**
- **Office des personnes handicapées du Québec**
- **Ministère de la Culture, des Communications et de la Condition féminine**
- **Société d'habitation du Québec**
- **Secrétariat aux affaires autochtones**
- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**

INDICATORS:

- **Evaluation of structuring measures**
- **Completion rate for the measures under the government action plan**

Support projects that are in line with the Governmental Action Plan to Counter Elder Abuse 2010-2015

COMPONENT OF THE

Age-Friendly Québec Program

Projects of this type help to fight elder abuse and round out government measures taken in this regard. The goal of this action is to strengthen initiatives in this area as a whole.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNER:

- **Local organizations**

INDICATORS:

- **Number of projects funded**
- **Investments made**

3.2 Assist vulnerable seniors to facilitate their access to services

Cumulative additional investments 2012-2017:

\$24.6 million

Service needs and the ability to access services vary from one person to the next. Insufficient information and complicated processes can prevent some individuals from obtaining services they may need. Knowing about and understanding the tax benefits, government programs and modes of transportation available to seniors are just a few examples of services and information that must be more easily accessible to this age group. Older adults throughout Québec, especially the most vulnerable among them, require individual assistance to make their day-to-day lives easier.

This need was addressed in 2008 by establishing seniors information centres in the wake of successful pilot projects. As at March 31, 2012, there were 26 such centres in Québec, and more will be set up with a view to creating genuine proximity service delivery for seniors. These services are provided in partnership with local organizations and delivered by experienced volunteers, often seniors, who generously share their time and knowledge.

Outreach initiatives, which are different but complementary to the above services, help vulnerable seniors feel safer. For example, by building a relationship of trust with older people, outreach workers are able to support individuals who express a need or are facing a difficult situation. Above all, these initiatives empower seniors, get them out of their isolation and reduce or delay physical or mental health problems; hence the importance of giving seniors access to these resources.

The following concrete actions are being taken to assist vulnerable seniors to facilitate their access to services:

- Continue setting up seniors information centres in all regions of Québec
- Support the creation of outreach initiatives

Inspiring projects

- *Seniors information centres* help seniors with such tasks as making a change of address, preplanning their funeral, going to the notary to draw up a will, or getting an adjustment in the amount of the Guaranteed Income Supplement following a change in circumstances.
- Thanks to needs-oriented action strategies, *outreach workers* enable seniors to reconnect with their network and gain or regain the ability to take steps to improve their quality of life. For example, an outreach worker can help an elderly man who takes care of his spouse, who has Alzheimer's disease, and hasn't been able to file the couple's income tax returns. The outreach worker is thus able to build a relationship of trust with the man, refer him to the appropriate resources, such as family economics cooperative associations or the health and social services network, and then follow up with the man.

Continue setting up seniors information centres in all regions of Québec

Seniors information centres deliver services through existing community organizations with a view to making it easier for vulnerable elderly people from the regions to find out what government programs and services are available to them. The information is provided by senior volunteers directly to people's homes, at the community organization's office or over the phone. Special attention will be given to Québec's Aboriginal seniors and immigrant seniors in order to gather information specific to these population groups. Thirty seniors information centres are in the process of being established and more will be set up to increase the number in Québec.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Fédération des Centres d'action bénévole du Québec**
- **Regional seniors' consultation committees**
- **Association québécoise des centres communautaires pour aînés**
- **Organizations that have seniors information centres**

INDICATORS:

- **Number of seniors reached by the service**
- **Number of volunteers who deliver the service**
- **Number of educational activities offered to seniors**

Support the creation of outreach initiatives

A new program will be designed to support the creation of outreach initiatives in all regions of Québec, particularly in the form of Seniors Outreach Worker positions. Seniors outreach workers are specially trained individuals who provide one-on-one assistance, especially to more-vulnerable seniors facing multiple problems (housing, health, bereavement, etc.). Moreover, particular attention will be given to Québec's Aboriginal seniors and immigrant seniors.

The creation of Seniors Outreach Worker positions within local organizations will make it possible to help a greater number of older adults. The outreach workers' intervention will help connect or reconnect seniors to community resources.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Association québécoise des centres communautaires pour aînés**
- **Local organizations**

INDICATORS:

- **Number of Seniors Outreach Worker positions created**
- **Number of seniors reached**

3.3 Help and support caregivers

Caregivers play an important role in the lives of elderly people. They form a heterogeneous group in terms of composition (the majority of caregivers are women and often family members) and the type of help they provide to the elderly. In addition to providing personal care, running errands, doing banking or giving medication, caregivers offer moral and emotional support, all of which are determinants of a senior's well-being.

Caregivers need better recognition, support and assistance, as they sometimes face numerous difficulties balancing their personal and professional lives with their caregiving responsibilities. These difficulties include isolation, lack of recognition, not enough support, burnout and stress, precarious financial situation, difficulty balancing parental, family and professional responsibilities and psychological distress.

Possible solutions that could be offered to caregivers include improving work-family balance in the workplace. Most of the time, the concept of work-family balance evokes parent-child relationships, but it can also concern people involved in caring for elderly loved ones (spouses, parents, grandparents, uncles, aunts, etc.).

Inspiring projects

- The *Coop de solidarité, de répit et d'entraide pour les proches aidants des Pays-d'en-Haut* offers specialized training for volunteers who wish to help caregivers. A team of volunteers will be formed to address caregivers' information and support needs.
- The *Regroupement des aidantes et aidants naturels de Montréal* publishes an inventory of best practices for supporting employed caregivers in the Montréal area, as well as a promotional, awareness and information tool.
- The *Centre de soutien entr'Aidants* has put together awareness, support and training programs for caregivers to elderly loved ones. It also offers a range of services, including monthly get-togethers, conferences, a newsletter, a hotline, family counselling, various workshops, transportation services and support groups. These services help enhance the quality of life of caregivers, in addition to enabling them to get out of their isolation and connect with other people facing similar experiences.
- The Centre de santé et de services sociaux Domaine-du-Roy and its partners have established a *respite-accompagnement service* to help prevent isolation and burnout among caregivers to people with Alzheimer's disease and associated disorders. The service enables Alzheimer's patients to live at home for as long as possible, surrounded by family. This initiative flows from a concerted decision to pool resources in order to offer a quality service delivered at lower cost by reliable, qualified staff.
- Through a project called *Transformer le regard et améliorer les conditions de vie des aînés et de leurs proches*, Carpe Diem - Centre de ressources Alzheimer offers conferences and training designed to educate caregivers across Québec about Alzheimer's disease, propose new ways to accompany Alzheimer's sufferers and help change caregiving practices.
- *Baluchon Alzheimer* offers in-home respite services so that caregivers to Alzheimer's sufferers can enjoy a holiday with peace of mind.

The following concrete actions are being taken to help and support caregivers:

- Nurture regional caregiver support groups (*Appui régionaux*) with a view to rallying organizations that help caregivers
- Support employers that want to implement work-family balance measures, in particular for employees who are caregivers to older adults
- Promote the Work-Family Balance standard (BNQ 9700-820/2010) in workplaces in order to get them to accommodate employees who are caregivers to older adults
- Publicly recognize the contribution of employers that are setting an example in supporting work-family balance by underlining, in particular, their efforts to accommodate employees who are caregivers to older adults

Nurture regional caregiver support groups (*Appui régionaux*) with a view to rallying organizations that help caregivers

L'Appui is a provincial organization born of a partnership between the government and Sojecci II ltée. It administers a caregiver support fund that will total \$200 million by 2019. The government will contribute \$150 million to the fund and Sojecci II ltée, \$50 million.

The provincial organization funds and contributes to the development of regional caregiver support groups. In addition to rallying regional stakeholders around caregiving issues and finding solutions, the regional groups will financially support various projects aimed at supporting caregivers to seniors, in particular Alzheimer's sufferers and seniors with cognitive impairments or any kind of physical or mental deterioration related to aging.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **L'Appui**
- **Ministère de la Culture, des Communications et de la Condition féminine**
- **Ministère de l'Emploi et de la Solidarité sociale**
- **Ministère de la Santé et des Services sociaux**
- **Sojecci II ltée, the Lucie and André Chagnon family's private holding company**
- **Local organizations**

INDICATORS:

- **Number of projects supported**
- **Number of caregivers helped**
- **Ability to adapt to regional needs**
- **Differentiation between the experiences faced by female and male caregivers**

Support employers that want to implement work-family balance measures, in particular for employees who are caregivers to older adults

Financial support is granted to employers for work-family balance purposes in order to enhance the quality of life of workers, particularly working caregivers of elderly loved ones (spouses, parents, grandparents, uncles, aunts).

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Workplaces**

INDICATOR:

- **Number of funded projects that help working caregivers to older adults**

Promote the Work-Family Balance standard (BNQ 9700-820/2010) in workplaces in order to get them to accommodate employees who are caregivers to older adults

This action is aimed at offering information and training activities to employers in order to promote the Work-Family Balance standard (BNQ 9700-820/2010), which sets forth the best practice requirements for balancing workplace and family responsibilities to enable workers to assume their role as parents or caregivers. In promoting the standard, particular attention will be given to the fact that work-family balance addresses the needs of both working parents and working caregivers to elderly loved ones.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Bureau de normalisation du Québec**
- **Workplaces**

INDICATOR:

- **Number of information, awareness and training activities held**

Publicly recognize the contribution of employers that are setting an example in supporting work-family balance by underlining, in particular, their efforts to accommodate employees who are caregivers to older adults

This action consists in granting an award recognizing the contribution of employers who improve the quality of life of their workers, in particular employees who take care of elderly loved ones. Regional *Reconnaissance Conciliation travail-famille* awards already honour employers who take concrete steps to make it easier for their employees to balance their workplace and family responsibilities.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Regroupement des jeunes chambres de commerce du Québec (RJCCQ)**
- **Workplaces**

INDICATOR:

- **Number of organizations honoured for their stellar contribution to work-family balance, in particular among working caregivers to older adults**

3.4 Support communities in adapting to an aging population

Cumulative additional investments 2012-2017:

\$12.8 million

The power of communities to take action is an asset for Québec. Communities have the capacity to adequately meet the needs of seniors in an innovative manner, but to do so successfully, they need to be supported. The government thus intends to lend a hand by supporting local and regional projects, particularly projects that fall within the action plans of Age-Friendly Municipalities, and thus give priority to the areas of activity targeted by the Age-Friendly Communities (AFC) approach.

Québec is recognized as a world leader in the application of the AFC approach, which is increasingly widespread and can be tailored to specific needs, such as those of big cities. In fact, in late 2010, at the request of big cities, the ministère de la Famille et des Aînés, in collaboration with the Carrefour action municipale et famille and the Research Centre on Aging at the Université de Sherbrooke, established an exchange network for Québec's major cities. In addition, Québec is working in partnership with the World Health Organization (WHO) to lead the Francophone Network of Age-Friendly Cities.

Implementation of the AFC approach has extended departmental support to municipalities, enabling such initiatives as the establishment, in 2010, of the Québec-Municipalities Infrastructure Program by the ministère des Affaires municipales, des Régions et de l'Occupation du territoire. To continue developing the AFC approach and get everyone involved, new collaborative ventures are being initiated, such as the one with the ministère de l'Éducation, du Loisir et du Sport and the one with the Office des personnes handicapées du Québec.

The following concrete actions are being taken to support communities in adapting to an aging population:

- Support concrete local and regional projects, in particular those arising from Age-Friendly Communities action plans
- Support the Réseau des grandes villes Municipalité amie des aînés and join the WHO Francophone Network of Age-Friendly Cities
- Continue the Québec-Municipalities Infrastructure Program – Age-Friendly Communities
- Support the development of joint municipal initiatives to make public spaces, communication channels and transportation more accessible to seniors
- Give municipalities access to a needs-analysis tool so that they can create environments enabling seniors to adopt and maintain a physically active lifestyle

Inspiring projects

- The *city of Repentigny* has carried out numerous AFC projects, including:
 - free transportation throughout the territory for all seniors aged 65 and over;
 - water bill rebate for seniors;
 - adult playground at the Île-Label park, with courses led by a qualified trainer;
 - construction of 5.3 km of new sidewalks;
 - “teatime at the library”, a special time for seniors that helps build bridges between generations;
 - training and support sessions for seniors on online registration for activities at the municipal pool;
 - a dedicated community police officer to address seniors’ issues.
- 165 *Meals on Wheels* organizations deliver meals or food to people experiencing a loss of autonomy or who find it difficult to eat well. The daily services provided by hundreds of volunteers are part of the collective efforts to reduce poverty and mitigate its impact on individuals. The National Assembly passed a joint motion commending the work carried out by all Meals on Wheels organizations in Québec thanks to the solidarity and commitment of its many volunteers.
- For over 20 years, *Indépendance 65+* has provided disabled, chronically ill or convalescing seniors in the municipalities of Témiscaming and Kipawa with transportation and escort services for medical appointments, errands or social activities. It also offers domestic help services, including preparation of meals and housekeeping, which takes some of the load off caregivers.

Support concrete local and regional projects, in particular those arising from Age-Friendly Communities action plans

COMPONENT OF THE PROGRAM

Age-Friendly Québec Program

The primary objective of granting financial support to projects shouldered by the community (individuals, community groups and organizations) is to align seniors' needs, the means taken to meet them and complementary actions.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Municipalities**
- **Regional county municipalities**
- **Regional conferences of elected officers**
- **Communities of the Aboriginal nations recognized by the Québec National Assembly**
- **Health and social services centres**
- **Community organizations**

INDICATORS:

- **Number of projects funded**
- **Number of municipalities with one or more funded projects**

Support the Réseau des grandes villes Municipalité amie des aînés and join the WHO Francophone Network of Age-Friendly Cities

The goal of this action is to ensure the development of an advisory service to address the needs of big cities engaged in the Age-Friendly Communities (AFC) approach, by:

- establishing the Réseau des grandes villes Municipalité amie des aînés with the aim of providing training and sharing expertise;
- offering the above network strategic advice through the Research Centre on Aging (RCA) at the Université de Sherbrooke and the Carrefour action municipale et famille (CAMF);
- forming a tripartite committee composed of representatives of the CAMF, the Secrétariat aux aînés and the RCA to ensure better coordination and consensus building in developing and implementing the AFC approach in big cities.

The second goal is to work in partnership with the World Health Organization (WHO) to lead the Francophone Network of Age-Friendly Cities.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Big cities engaged in the Age-Friendly Communities approach**
- **Carrefour action municipale et famille**
- **Research Centre on Aging, Université de Sherbrooke**
- **WHO Francophone Network of Age-Friendly Cities**
- **World Health Organization**

INDICATORS:

- **Number and rate of big cities with an AFC action plan**
- **Number of meetings of the Réseau des grandes villes Municipalité amie des aînés**
- **Number of Québec member municipalities of the Francophone Network of Age-Friendly Cities**

Continue the Québec-Municipalities Infrastructure Program – Age-Friendly Communities

The Québec-Municipalities Infrastructure Program – Age-Friendly Communities grants financial assistance to municipalities engaged in the ministère de la Famille et des Aînés' AFC approach. Assistance is granted for minor construction, renovation or expansion of infrastructure used by seniors. The goal of the program is to improve the quality of life of older adults and thereby promote active aging within the community.

RESPONSIBLE BODIES:

- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**
- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Municipalities**
- **Regional county municipalities**

INDICATORS:

- **Number of projects funded**
- **Number of municipalities that receive funding**

Support the development of joint municipal initiatives to make public spaces, communication channels and transportation more accessible to seniors

This action aims to foster the growth of initiatives to facilitate safe access to municipal infrastructure. Together, these initiatives will enable disabled seniors to live in their home environment longer and increase their social participation. Supporting these initiatives is in line with the Age-Friendly Communities approach.

RESPONSIBLE BODY:

- **Office des personnes handicapées du Québec (OPHQ)**

PARTNERS:

- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**
- **Ministère de la Famille et des Aînés**
- **Ministère des Transports du Québec**
- **Carrefour action municipale et famille**
- **Comité des municipalités accessibles**

INDICATORS:

- **Bridging mechanisms, such as OPHQ participation and collaboration in the Comité des municipalités accessibles**
- **Reference documents and tools produced**

Give municipalities access to a needs-analysis tool so that they can create environments enabling seniors to adopt and maintain a physically active lifestyle

Municipalities will be offered this self-assessment tool to obtain a portrait of services provided to foster a physically active lifestyle. The objective is to raise awareness among municipalities about the various environmental factors that promote regular physical activity. The tool will help improve services and infrastructure (better hours for seniors, sidewalk maintenance, multi-use trails and paths, walking groups, accommodation of all levels of ability). Municipalities' use of this tool will make it possible to better target Age-Friendly Communities projects.

RESPONSIBLE BODY:

- **Ministère de l'Éducation, du Loisir et du Sport**

PARTNERS:

- **Ministère de la Famille et des Aînés**
- **Ministère de la Santé et des Services sociaux**
- **Health and social services agencies**
- **Carrefour action municipale et famille**

INDICATORS:

- **Number of municipalities sensitized or informed**
- **Number of partners sensitized or mobilized**
- **Number of additional tools designed at the regional or local level to ensure promotion, implementation or follow-up among municipalities**

3.5 Develop adaptable, barrier-free, affordable and safe housing for current and future elderly populations

Cumulative additional investments 2012-2017:

\$1.27 billion

Seniors want to stay in their homes, within their community, for as long as possible. However, when their home gets too big, too costly to keep up, and is neither suitably adapted nor adaptable to their needs, it becomes harder to grant this wish. Therefore, like other governments around the world, Québec is putting measures in place to facilitate access to affordable housing and support adaptable, safe housing according to seniors' changing needs. By updating building regulations, the Québec government is taking steps that consider both the need to adapt the housing supply to the changing needs of older adults and the need for sustainable development. Indeed, building adaptable housing today will substantially reduce the future social, economic and environmental repercussions of housing that is not suitably adapted. Such repercussions include having to make major home adaptations or possibly even move.

New types of housing have been developed in recent years to diversify the housing supply and facilitate residential mobility. These new housing types accommodate the gradually changing needs of seniors, especially those experiencing a loss of autonomy. In fact, the primary challenge of housing innovation consists in facilitating transitions on seniors' residential path so that they can stay independent longer and delay moving into an institutional setting.

A person's residential path reflects his or her life path. Finances, career, family, independence and aspirations influence the type of place a person lives in. Given Québec's rapidly aging population, an adequate combination of safe housing and home support services is crucial.

The following concrete actions are being taken to develop adaptable, barrier-free, affordable and safe housing for current and future elderly populations:

- Propose amendments to the *Building Code* to make new housing units easily adaptable
- Sensitize municipalities to the current and future needs of seniors so that they can amend their bylaws or take any other means to ensure that new housing is more adaptable
- Modify the certification process for private seniors' residences
- Propose more suitable safety requirements to improve fire safety in private seniors' residences
- Propose limits on the maximum water temperature in order to reduce the risk of burns in older adults
- Continue the work of the steering committee co-chaired by the Office des personnes handicapées du Québec and the Régie du bâtiment du Québec tasked with improving barrier-free design standards for public buildings and spaces
- Continue making social and community housing available under the AccèsLogis Québec program, particularly for low- and modest-income senior households
- Continue granting financial assistance under the Shelter Allowance Program to help low-income senior households pay their housing expenses
- Continue providing financial assistance under the Residential Adaptation Assistance Program to seniors who need to adapt their homes
- Continue granting financial assistance under the Home Adaptation for Seniors' Independence Program for people aged 65 and over, on low incomes, who need to make minor adaptations to their house or apartment
- Continue granting financial assistance under the RénoVillage Program and the Emergency Repair Program for low- and modest-income owner-occupiers, particularly the rural elderly

- Explore and support innovative housing models tailored to the needs of low- or modest-income seniors experiencing a loss of autonomy
- Continue implementing new residential and accommodation initiatives
- Foster familiarization with programs and the alignment of practices of the health and social services and Société d'habitation du Québec networks

Inspiring projects

- *Habitations Vivre Chez Soi* is a residential complex in Québec City with 92 units, 50 of which are reserved for seniors experiencing a loss of autonomy, 27 for families or people living alone, and 15 for people with disabilities or mental health problems. It is an intergenerational housing model that promotes mutual aid, community living and a social and cultural mix. The project was implemented thanks to the contribution of numerous partners from the private and public sectors.
- Under the Age-Friendly Communities approach, *Granby* built social housing units for people aged 75 and over with a slight loss of autonomy, while *Sherbrooke* adopted a municipal bylaw to facilitate the addition of a unit to single-family dwellings.
- *Habitat 1460*, a project initiated by Centre La Traversée, won the international award in the “Vivre ensemble aujourd’hui et demain”^{*} contest. The building is an intergenerational living environment consisting of 72 apartments and 49 rooms for seniors experiencing a loss of autonomy and 86 units for small households and families. It allows all generations to cohabit and share their knowledge.
- *Habitats, milieux de vie et participation sociale des aînés : constats et perspectives* is a 2011-2012 research project on housing and living environments conducted by Université Laval. The goal is to adapt services and infrastructure to improve the living conditions of seniors in the Capitale-National administrative region.

^{*} The first Francophone contest to honour initiatives and projects that promote the integration of seniors in the inner city and intergenerational exchange.

Source: Salon des maires et des collectivités locales, November 22, 2011, Paris.

Propose amendments to the *Building Code* to make new housing units easily adaptable

This action aims to make 100% of the units in new residential buildings adaptable through barrier-free accessibility (ground-floor units in buildings without elevators and all units in buildings with elevators). This action targets new residential buildings with over three storeys and new residential buildings with over eight units.

RESPONSIBLE BODY:

- **Régie du bâtiment du Québec**

PARTNER:

- **Office des personnes handicapées du Québec**

INDICATOR:

- **Amendments to the *Building Code* to improve the quality of life and safety of seniors**

Sensitize municipalities to the current and future needs of seniors so that they can amend their bylaws or take any other means to ensure that new housing is more adaptable

This action will complement the drafting of Québec's new *Building Code*. A *Muni-Express* newsletter will be published and a communication plan, developed.

RESPONSIBLE BODY:

- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**

PARTNERS:

- **Régie du bâtiment du Québec**
- **Office des personnes handicapées du Québec**
- **Municipalities**

INDICATORS:

- **Number of municipalities reached by awareness-raising action**
- **Number of municipalities that amend their bylaws to ensure that new residential dwellings with three storeys or less and eight units or less are more adaptable to seniors' current and future needs**

Modify the certification process for private seniors' residences

The following actions aim to tighten the certification process in order to enhance the safety and quality of life of people living in private seniors' residences:

- Passage, on November 29, 2011, and assent, on November 30, 2011, of Bill 16, *An Act to amend various legislative provisions concerning health and social services in order, in particular, to tighten up the certification process for private seniors' residences*. Most of the provisions will enter into force no later than November 30, 2012.
- Review and entry into force, no later than November 30, 2012, of the regulation respecting the conditions for obtaining a certificate of compliance and the operating standards for a private seniors' residence.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies (issuing of certificates)**
- **Health and social services centres (identification of home-support issues or clientele groups)**

INDICATOR:

- **Compliance with requirements and maintenance of certification conditions by operators of private seniors' residences**

Propose more suitable safety requirements to improve fire safety in private seniors' residences

The goal of this action is to improve fire safety requirements in private seniors' residences subject to the certification system for private seniors' residences of the ministère de la Santé et des Services sociaux.

RESPONSIBLE BODY:

- **Régie du bâtiment du Québec**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Ministère de la Sécurité publique**

INDICATOR:

- **Proposed requirements to improve fire safety in private seniors' residences**

Propose limits on the maximum water temperature in order to reduce the risk of burns in older adults

The goal of this action is to propose amendments to the plumbing provisions of the *Building Code* and the *Safety Code* to stipulate regulatory requirements regarding the maximum water temperature in care facilities and private seniors' residences subject to certification by the ministère de la Santé et des Services sociaux.

RESPONSIBLE BODY:

- **Régie du bâtiment du Québec**

PARTNER:

- **Ministère de la Santé et des Services sociaux**

INDICATOR:

- **Proposed *Building Code* and *Safety Code* requirements to reduce the risk of burns in older adults**

Continue the work of the steering committee co-chaired by the Office des personnes handicapées du Québec and the Régie du bâtiment du Québec tasked with improving barrier-free design standards for public buildings and spaces

The goal of this action is to continue the steering committee's work in reviewing applications relating to building accessibility and safety and finding the best solutions. The committee can either recommend changes to *Building Code* standards or take any other action to foster safe access to public facilities and residential buildings by disabled seniors. The latter will thus be able to stay in their home environment longer, with access to local services.

RESPONSIBLE BODIES:

- **Office des personnes handicapées du Québec**
- **Régie du bâtiment du Québec**

PARTNERS:

- **Public, private and community organizations**

INDICATORS:

- **Amendments made to Québec's *Building Code* to enhance building accessibility and safety for seniors with a significant and persistent disability**
- **Number of activities carried out to inform and support partners and other actions taken in response to applications brought to the steering committee's attention**

Continue making social and community housing available under the AccèsLogis Québec program, particularly to low- and modest-income senior households

This program allows housing bureaus, housing co-ops and non-profit organizations to create and offer quality, affordable rental housing to low- and modest-income households. One of the program's three components is dedicated to seniors with a slight loss of autonomy. A portion of the units built are reserved for low-income households that receive a rent supplement for five years or more. Over \$300 million has already been earmarked for this program for fiscal years 2012-2013 to 2015-2016. These investments, announced in previous budgets, will enable the construction of nearly 4 500 social and community housing units for seniors.

RESPONSIBLE BODY:

- **Société d'habitation du Québec**

PARTNERS:

- **Technical resource groups**
- **Municipalities and regional county municipalities**
- **Non-profit housing organizations**
- **Housing co-ops**
- **Municipal housing bureaus**

INDICATOR:

- **Number of new housing units reserved for seniors**

Continue granting financial assistance under the Shelter Allowance Program to help low-income senior households pay their housing expenses

The Shelter Allowance Program provides supplementary financial assistance for low-income households, tenants, rooming house occupants and homeowners that spend too much of their income on housing. The program is jointly administered by the Société d'habitation du Québec and Revenu Québec.

RESPONSIBLE BODY:

- **Société d'habitation du Québec**

PARTNER:

- **Revenu Québec**

INDICATOR:

- **Number of senior households assisted under the program**

Continue providing financial assistance under the Residential Adaptation Assistance Program to seniors who need to adapt their home

The Residential Adaptation Assistance Program represents annual investments of roughly \$20 million to enable people with significant and persistent disabilities that limit their everyday activities to adapt their home. The program offers financial assistance to carry out admissible work to remedy or reduce architectural barriers. These adaptations can help people, especially seniors, remain in their homes longer.

RESPONSIBLE BODY:

- **Société d'habitation du Québec**

PARTNERS:

- **Ministère de la Santé et des Services sociaux**
- **Municipalities**
- **Regional county municipalities**

INDICATOR:

- **Number of home adaptations carried out for seniors**

Continue granting financial assistance under the Home Adaptation for Seniors' Independence Program for people aged 65 and over, on low incomes, who need to make minor adaptations to their house or apartment

The Home Adaptation for Seniors' Independence Program represents annual investments of around \$3 million. The program provides financial assistance for people aged 65 and over, on low incomes, who need to make minor adaptations to their house or apartment in order to continue living there safely and independently.

RESPONSIBLE BODY:

- **Société d'habitation du Québec**

PARTNERS:

- **Health and social services agencies**
- **Municipalities**
- **Regional county municipalities**

INDICATOR:

- **Number of households composed of people aged 65 and over assisted under the program**

Continue granting financial assistance under the RénoVillage Program and the Emergency Repair Program for low- and modest-income owner-occupiers, particularly the rural elderly

These two programs provide financial assistance to correct major defects in rural houses. They ensure adequate housing conditions, particularly for elderly people, and enable the latter to stay in their homes.

RESPONSIBLE BODY:

- **Société d’habitation du Québec**

PARTNERS:

- **Municipalities**
- **Regional county municipalities**

INDICATOR:

- **Number of senior households assisted under these programs**

Explore and support innovative housing models tailored to the needs of low- or modest-income seniors experiencing a loss of autonomy

New housing models have been developed in recent years, often with the involvement of non-profit organizations, social economy businesses and private partners and collaboration from health and social services centres. These models, which can ensure smooth transitions on the residential path of older adults, will be studied with a view to guiding, developing and supporting future housing projects. Special attention will also be given to needs in rural and devitalized areas.

RESPONSIBLE BODIES:

- **Ministère de la Santé et des Services sociaux**
- **Société d'habitation du Québec**

PARTNERS:

- **Non-profit housing organizations**
- **Housing co-ops**
- **Municipal housing bureaus**
- **Technical resource groups**
- **Health and social services agencies**

INDICATORS:

- **Number of innovative housing projects supported**
- **Funding granted**

Continue implementing new residential and accommodation initiatives

This action is aimed at offering older adults a wider choice of residential resources, accommodation services and functional rehabilitation facilities:

- solutions combining intensive, continuous home support and safe, barrier-free housing;
- spaces in intermediate resources or new residential initiatives;
- spaces in functional rehabilitation transition units (FRTUs);
- spaces in institutional accommodation.

The following number of spaces should be created by 2017:

- 4 800 spaces in intermediate resources or new residential initiatives;
- 800 spaces in FRTUs;
- 850 spaces in institutional accommodation.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Health and social services agencies**
- **Health and social services centres**
- **Private enterprises**
- **Intermediate resources**
- **Family-type resources**
- **Non-profit organizations**
- **Seniors' residences**

INDICATORS:

- **Number of spaces in residential resources (intermediate resources and new residential initiatives)**
- **Number of spaces in FRTUs**
- **Number of spaces in CHSLDs**

Foster familiarization with programs and the alignment of practices of the health and social services and Société d'habitation du Québec networks

The goal of this action is to ensure strategic and intersectoral leadership at the provincial level. A special committee will be formed to ensure coherence of action and continuity in the implementation of the different measures. This committee will examine the following matters in particular: home adaptation, adjustable residential housing models, community support for social housing, certificates of compliance to operate seniors' residences.

RESPONSIBLE BODIES:

- **Ministère de la Santé et des Services sociaux**
- **Société d'habitation du Québec**

PARTNERS:

- **To be determined based on projects**

INDICATORS:

- **To be determined based on projects**

3.6 Ensure mobility for seniors

Offering alternative, safe and adapted transportation solutions for seniors is a challenge, and the ability to meet it varies according to the territory. Personal mobility is not only a source of economic and social development and a key to independence and freedom, but it is also essential for social participation, engagement and self-fulfilment. As the aging process quickens, staying mobile and improving mobility is a fundamental issue for older adults. As people age, certain abilities begin to diminish, making it harder to get around. The consequences are of particular concern in rural and semi-rural communities, because of the long distances that sometimes have to be travelled to obtain services. Seniors facing mobility limitations are thus at a far greater risk of suffering from isolation, experiencing difficulty getting services or care and, ultimately, having to move out of their homes. In fact, local U.S. governments recently named transportation as the second biggest challenge their communities face with regard to older adults, after financial issues.¹¹⁹

Population aging provides an opportunity to rethink land use planning in terms of the needs of older adults and to reflect on their mobility. The ministère des Transports du Québec is in the process of developing a government strategy on sustainable road safety that takes into consideration the safety of older pedestrians, cyclists and drivers.

It is imperative that we identify adequate and affordable solutions that let the elderly decide where they want to live. Given today's major environmental challenges, reflecting on this issue and building sustainable communities will benefit society as a whole.

The following concrete actions are being taken to ensure mobility for seniors:

- Introduce services, under the government assistance program to improve public transit services, that directly address the needs of seniors
- Establish a code of ethics including measures to sensitize taxi drivers to seniors' special needs
- Consider the special needs of seniors, including those experiencing a loss of autonomy, during the formulation and review of transportation plans required under the government assistance program for regional public transit
- Increase seniors' access to the various modes of public transportation under public transit operating authorities' development plans
- Produce and disseminate a practical guide to barrier-free travel for municipalities and transit authorities.

Inspiring projects

- *Navette Or* is a Société de transport de Montréal transit service specifically designed for the needs of seniors. The service increases seniors' mobility by facilitating travel for them so that they can participate in community life. Every *Navette Or* serves the neighbourhood's principal points of interest, using a 20-seat minibus. Ten *Navette Or* have been deployed since 2008. Fares for this service are the same as for the bus and the subway.

Examples of transportation projects carried out under the Age-Friendly Communities initiative:

- *Drummondville*: project to raise the city's traffic committee's awareness about the needs of older adults travelling on public roadways;
- *Témiscamingue regional county municipality*: escorts for transportation purposes in 20 of the RCM's 21 towns;
- *Sherbrooke*: establishment of two *Communau-Bus* lines for seniors;
- *Rimouski*: study on public transportation and the special needs of seniors;
- *Rivière-du-Loup*: driving awareness activity aimed at older adults.

Introduce services, under the government assistance program to improve public transit services, that directly address the needs of seniors

This program makes funding available to public transit operating authorities to cover a portion of the cost of initiatives to improve mobility in seniors, such as “community routes”. Concretely, these routes generally serve seniors’ residences and take riders to regularly frequented destinations such as shopping centres, grocery stores, drugstores, public libraries, community centres and medical clinics.

RESPONSIBLE BODY:

- **Ministère des Transports du Québec**

PARTNERS:

- **Ministère du Développement durable, de l’Environnement et des Parcs**
- **Public bodies providing public transport**

INDICATORS:

- **Number and increase in the number of initiatives taken under this program**

Establish a code of ethics including measures to sensitize taxi drivers to seniors’ special needs

Section 34.1 of the *Act respecting transportation services by taxi* stipulates that holders of a taxi transportation service intermediary’s permit must, not later than 180 days after the date the permit is issued, submit for the approval of the Commission des transports du Québec a bylaw on the conduct and ethics required of the taxi owners and drivers to whom they provide services.

Such a bylaw must contain special provisions to address the special needs of older adults who use taxi services.

RESPONSIBLE BODY:

- **Ministère des Transports du Québec**

PARTNERS:

- **Taxi transportation service intermediaries**
- **Provincial consultation and development committee on the taxi industry**
- **Taxi Industry Advisory Panel**
- **Commission des transports du Québec (CTQ)**

INDICATOR:

- **CTQ-approved code of ethics containing special provisions for older adults**

Consider the special needs of seniors, including those experiencing a loss of autonomy, during the formulation and review of transportation plans required under the government assistance program for regional public transit

Under this program, eligible bodies are encouraged to consider the special mobility needs of seniors when formulating and reviewing transportation plans. The goal is to foster access to and use of public transportation while enabling elderly people to remain in their community.

RESPONSIBLE BODY:

- **Ministère des Transports du Québec**

PARTNERS:

- **Ministère du Développement durable, de l'Environnement et des Parcs**
- **Regional county municipalities**
- **Regional conferences of elected officers**
- **Eligible bodies**

INDICATOR:

- **Increase in the number of rides on public transportation**

Increase seniors' access to the various modes of public transportation under public transit operating authorities' development plans

Public transit operating authorities are required to formulate a development plan to make their regular transportation services gradually accessible to the disabled. The improvements made must not only take the needs of people with all types of disability (motor, visual, hearing, cognitive impairments, etc.) into account, but must also consider all components of the transportation service: customer service, information and communication, vehicles (bus, subway, commuter train, etc.), infrastructure and safety. Improvements will thus greatly benefit passengers with reduced mobility, including older riders.

RESPONSIBLE BODY:

- **Ministère des Transports du Québec**

PARTNERS:

- **Ministère du Développement durable, de l'Environnement et des Parcs**
- **Office des personnes handicapées du Québec**
- **Conseil du trésor**
- **Public transit authorities**
- **Municipal, intermunicipal or regional bodies providing public transport established pursuant to the *Act respecting intermunicipal boards of transport in the area of Montréal*, the *Cities and Towns Act* or the *Municipal Code of Québec***
- **Agence métropolitaine de transport**

INDICATOR:

- **Number and increase in the number of wheelchair-accessible taxis and intercity buses, low-floor buses, subway and train stations accessible to travellers with reduced mobility, particularly wheelchair-bound travellers.**

Produce and disseminate a practical guide to barrier-free travel for municipalities and transit authorities

A practical guide to barrier-free travel will help municipalities and transit authorities in designing accessible, safe outdoor spaces. More-accessible outdoor spaces will result in safer, more user-friendly environments for the general public, including older adults, as well as make it easier to locate information and signs in urban and rural areas.

RESPONSIBLE BODY:

- **Office des personnes handicapées du Québec**

PARTNER:

- **Ministère des Affaires municipales, des Régions et de l'Occupation du territoire**

INDICATORS:

- **Guide produced**
- **Public release and dissemination of the guide**

Chapter 7 **Research and knowledge development**

Cumulative additional investments 2012-2017:

\$2.4 million

Population aging is bound to intensify, hence the importance of furthering and updating knowledge in the disciplines affected by this situation. Given that current approaches will have to be changed, it is imperative to begin by identifying those that have proven to be effective. These approaches should then be implemented so that as many people as possible may benefit from them, while enabling communities to gear them to their specific needs.

Several research centres, university institutes and research groups in Québec are already involved in studying aging, and they can provide prospective analyses offering different scenarios for the organization and delivery of services to seniors in the coming years. The information generated by such research must be translated into action as well as service organization models so as to effect changes in practices and institutional structures at the local, regional and provincial level.

Future action plans will be able to take advantage of this research and the findings of thematic working committees.

The following actions will contribute to designing new government initiatives for Québec's aging population:

- Continue the work of the Comité national d'éthique sur le vieillissement et les changements démographiques
- Develop knowledge on the Age-Friendly Communities approach in order to gauge its impact and continue developing the AFC model
- Conduct a survey of seniors' health and social needs
- Launch a new joint research initiative on the aging of Québec's population under the Québec Research Fund–Society and Culture
- Encourage and support research, innovation and the dissemination and transfer of knowledge on active aging

Continue the work of the Comité national d'éthique sur le vieillissement et les changements démographiques

The mission of the Comité national d'éthique sur le vieillissement et les changements démographiques is to:

- reflect on ethics issues relating to demographic and cultural change, especially those concerning individual and collective aging;
- document its opinions on ethics issues relating to aging and to demographic and cultural change;
- make observations on these issues and thus contribute to social debate on the ethical questions raised by individual and collective aging.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **University researchers**

INDICATORS :

- **Number of opinions published**
- **Number of committee meetings**

Develop knowledge on the Age-Friendly Communities approach in order to gauge its impact and continue developing the AFC model

This action will involve assessing the results of applying the AFC approach in municipalities, regional county municipalities and Aboriginal nations communities to determine if improvements are required to make it more effective. Québec wants to remain a leader in the application of the AFC approach.

RESPONSIBLE BODY:

- **Ministère de la Famille et des Aînés**

PARTNERS:

- **Research Centre on Aging, Université de Sherbrooke**
- **Carrefour action municipale et famille**
- **Municipalities**
- **Regional county municipalities**
- **Regional conferences of elected officers**
- **Communities of the Aboriginal nations recognized by the Québec National Assembly**

INDICATOR:

- **Preparation of reports on work conducted as part of this action**

Conduct a survey of seniors' health and social needs

The goal of this action is to develop and update knowledge on the characteristics and health and social needs of older adults and their impact on the organization of services.

More specifically, this action will involve documenting how the Québec system deals with certain vulnerable populations, particularly the elderly, that are more likely to use health or social services. The survey will target especially people with chronic illnesses and people aged 65 and over, regardless of whether or not they have certain limitations or chronic illnesses. The results will support government efforts regarding the social integration of people with disabilities.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS:

- **Institut de la statistique du Québec**

INDICATOR:

- **Publication of the survey's results**

Launch a new joint research initiative on the aging of Québec's population under the Québec Research Fund–Society and Culture

The *Aging and Living Together* Policy and its 2012-2017 Action Plan cover a wide range of concerns and raise special issues that directly affect seniors. This joint initiative will focus on priority research topics that will be documented in collaboration with the partners concerned.

RESPONSIBLE BODY:

- **Québec Research Fund–Society and Culture**

PARTNERS:

- **To be determined based on the research partnerships developed**

INDICATORS:

- **Research topics**

Encourage and support research, innovation and the dissemination and transfer of knowledge on active aging

This action aims to support the development of research and the dissemination of its results on little documented topics relating to seniors, in particular medication use, dependency, the situation of immigrant seniors, First Nations and cultural communities issues, mastery of new home-support technologies, and active aging.

Developing knowledge on these topics will make it possible to better tailor professional practices and service organization to the realities of older adults.

RESPONSIBLE BODY:

- **Ministère de la Santé et des Services sociaux**

PARTNERS (DEPENDING ON THE PROJECT):

- **Research funding agencies**
- **Institut national de santé publique du Québec**
- **Institut national d'excellence en santé et services sociaux**
- **Ministère de la Famille et des Aînés**
- **Ministère du Développement économique, de l'Innovation et de l'Exportation**
- **Ministère de l'Immigration et des Communautés culturelles**

INDICATOR:

- **Support for research and knowledge transfer on various topics aimed at supporting the organization and adaptation of services for seniors**

Chapter 8 Evaluation

Cumulative additional investments 2012-2017:

\$0.7 million

Creation of an interdepartmental evaluation committee

An evaluation committee will be formed from the interdepartmental committee that drafted the 2012-2017 Action Plan of the *Aging and Living Together* Policy. It will comprise evaluation experts from each of the departments and agencies that helped to formulate the action plan.

These experts will gather information on the plan's implementation and help prepare a progress report as well as a final report. The departments and agencies have already contributed to the evaluation process by proposing indicators for the actions under their responsibility. These indicators have been presented for each of the actions described in this document. Special attention will be paid to gender-based analysis in processing the information derived from each indicator. An evaluation framework will be designed for all of the measures presented in this document once it has been launched.

As mentioned earlier, certain actions will be researched or evaluated in greater depth over the five-year life of the action plan. The evaluation process will be continuous and conducted in tandem with the research. Its results will provide the basis for formulating the next action plan.

Conclusion

As the *Aging and Living Together* Policy and its action plan were being prepared, it became obvious that a policy aimed at laying the groundwork for meeting the challenge of accelerated population aging in Québec had been long-awaited.

The consultations with non-governmental organizations also revealed that these organizations wanted to work in partnership with the government to make Québec an inclusive society that is good to its seniors and where the future of coming generations is not compromised. These partners told us that the vast majority of seniors have the same aspiration regardless of their varied needs: they want to live at home for as long as possible. Moreover, they want to be active players within their community regardless of their abilities. The policy *Aging and Living Together, at Home, in One's Community, in Québec* recognizes the contribution that older adults make to society. The Québec government wants to support the most vulnerable among them. It wants to create conditions that will not only enable the elderly to maintain and even gain greater control over their lives but will also take into account their diversity and the specific characteristics of the communities where they live. The policy and the action plan will help to build an inclusive society where seniors feel welcome, irrespective of their life path—a society that belies the cliché that old age is synonymous with being “dependent” and a “burden”.

In the context of an aging society, we cannot remain silent about discriminatory and exclusionary behaviour toward seniors. Negative attitudes about aging and old age are an obstacle to seniors' participation. Moreover, they deprive our society of an invaluable asset. The *Aging and Living Together* Policy strengthens the government's will to combat agism, which affects the young and old alike, and develop a society for all ages, where intergenerational relations are harmonious and enriching.

The *Aging and Living Together* Policy concerns numerous players and activity sectors involved in the day-to-day lives of older adults. Social solidarity and the development of partnerships between decision makers and stakeholders at the provincial, regional and local level will be key to its success. In this context, the government's role is to encourage and support initiatives where seniors feel respected, engaged, and recognized by society as a whole.¹²⁰

The policy and its action plan view aging not as prolonged old age, but as part of the continuum of life. It is a time when steps should be taken to promote the participation, health and safety of seniors within their community in order to improve their quality of life in a context of solidarity and intergenerational fairness.

Summary table

of the directions, strategic choices and actions of the 2012-2017 Action Plan of the policy *Aging and Living Together at Home, in One's Community, in Québec*

Direction 1

Aging and Living Together

means participating in one's community

STRATEGIC CHOICE 1.1

Recognize and support seniors' involvement in their community

ACTIONS

1.1.1 Continue the *Hommage Aînés* awards

1.1.2 Continue funding the Age-Friendly Communities approach and encourage more municipalities to adhere to it

1.1.3 Strengthen the regional seniors' consultation committees and the Conférence des tables régionales de concertation des aînés

1.1.4 Support projects that foster the transmission and use of seniors' knowledge and know-how

1.1.5 Hold regional meetings to promote intergenerational dialogue

1.1.6 Strengthen the Maisons des grands-parents, turn them into a network and create new ones

1.1.7 Support cultural projects by and/or for seniors

STRATEGIC CHOICE 1.2

Support the participation of experienced workers in the workplace

ACTIONS

- 1.2.1 Implement a new strategy for active participation by experienced workers
- 1.2.2 Create a program to support employers that want to implement work-retirement balance measures
- 1.2.3 Prepare and promote a good practice guide for employers that want to keep experienced workers on the job or help them to return to work
- 1.2.4 Create a work-retirement balance award to recognize the contribution of employers that are setting an example in helping experienced workers strike a balance between their work responsibilities and retirement

STRATEGIC CHOICE 1.3

Promote the understanding, use and contribution of information and communications technologies

ACTIONS

- 1.3.1 Take advantage of the potential of digital technology to help seniors remain active in their living environment
- 1.3.2 Help seniors use new technologies

Direction 2

Aging and Living Together

means leading a healthy life in one's community

STRATEGIC CHOICE 2.1

Promote the health of seniors, prevent them losing autonomy and improve their quality of life

ACTIONS

- 2.1.1 Promote healthy lifestyles among current and future elderly populations
- 2.1.2 Define and implement a healthy eating policy in Québec
- 2.1.3 Develop two new routines for the *Viactive* network
- 2.1.4 Take steps to support healthy eating, reduce inappropriate use of medication and prevent falls
- 2.1.5 Implement depression screening measures for older adults
- 2.1.6 Conduct a range of activities to encourage pneumococcal and influenza vaccination among seniors
- 2.1.7 Promote the vaccination of seniors, particularly against diphtheria, tetanus and whooping cough

STRATEGIC CHOICE 2.2

Increase service supply and access and improve stakeholder collaboration so as to better support seniors and their loved ones at home and in the community

ACTIONS

- 2.2.1 Facilitate 24/7 telephone access to consultation services by psychosocial professionals in health and social services centres
- 2.2.2 Improve access to reception, assessment, counselling and referral services in health and social services centres
- 2.2.3 Improve access to front-line medical services for seniors

- 2.2.4 Increase the number of nurse practitioners specialized in primary care
- 2.2.5 Improve chronic pain management among seniors
- 2.2.6 Implement assessment and treatment measures for people with age-related cognitive impairments
- 2.2.7 Improve access to specialized rehabilitation services for older adults
- 2.2.8 Provide people who have a cerebrovascular accident with timely treatment
- 2.2.9 Increase the number of people receiving home-support services and intensify these services in order to better address the needs of seniors and their loved ones
- 2.2.10 Enhance the Financial Assistance Program for Domestic Help Services
- 2.2.11 Assist domestic help economy businesses with their business practices
- 2.2.12 Improve support for social housing community support
- 2.2.13 Bolster support for community organizations that work with seniors and their loved ones
- 2.2.14 Integrate, coordinate and ensure continuity of services for seniors and their loved ones

STRATEGIC CHOICE 2.3

Adapt practices, services and intervention strategies to the needs of seniors

ACTIONS

- 2.3.1 Adapt health and social services to the needs of seniors
- 2.3.2 Promote the adaptation of practices to the needs of seniors among professional orders and educational institutions
- 2.3.3 Ensure that a sufficient supply of skilled labour is available

Direction 3

Aging and Living Together

means creating healthy, safe and welcoming environments within one's community

STRATEGIC CHOICE 3.1

Counter elder abuse

ACTIONS

3.1.1 Continue implementing the Governmental Action Plan to Counter Elder Abuse 2010-2015 and ensure its objectives are sustainable

3.1.2 Support projects that are in line with the Governmental Action Plan to Counter Elder Abuse 2010-2015

STRATEGIC CHOICE 3.2

Assist vulnerable seniors to facilitate their access to services

ACTIONS

3.2.1 Continue setting up seniors information centres in all regions of Québec

3.2.2 Support the creation of outreach initiatives

STRATEGIC CHOICE 3.3

Help and support caregivers

ACTIONS

3.3.1 Nurture regional caregiver support groups (*Appui régionaux*) with a view to rallying organizations that help caregivers

3.3.2 Support employers that want to implement work-family balance measures, in particular for employees who are caregivers to older adults

3.3.3 Promote the Work-Family Balance standard (BNQ 9700-820/2010) in workplaces in order to get them to accommodate employees who are caregivers to older adults

3.3.4 Publicly recognize the contribution of employers that are setting an example in supporting work-family balance by underlining, in particular, their efforts to accommodate employees who are caregivers to older adults

STRATEGIC CHOICE 3.4

Support communities in adapting to an aging population

ACTIONS

- 3.4.1 Support concrete local and regional projects, in particular those arising from Age-Friendly Communities action plans
- 3.4.2 Support the Réseau des grandes villes Municipalité amie des aînés and join the WHO Francophone Network of Age-Friendly Cities
- 3.4.3 Continue the Québec-Municipalities Infrastructure Program – Age-Friendly Communities
- 3.4.4 Support the development of joint municipal initiatives to make public spaces, communication channels and transportation more accessible to seniors
- 3.4.5 Give municipalities access to a needs-analysis tool so that they can create environments enabling seniors to adopt and maintain a physically active lifestyle

STRATEGIC CHOICE 3.5

Develop adaptable, barrier-free, affordable and safe housing for current and future elderly populations

ACTIONS

- 3.5.1 Propose amendments to the *Building Code* to make new housing units easily adaptable
- 3.5.2 Sensitize municipalities to the current and future needs of seniors so that they can amend their bylaws or take any other means to ensure that new housing is more adaptable
- 3.5.3 Modify the certification process for private seniors' residences
- 3.5.4 Propose more suitable safety requirements to improve fire safety in private seniors' residences

- 3.5.5 Propose limits on the maximum water temperature in order to reduce the risk of burns in older adults
- 3.5.6 Continue the work of the steering committee co-chaired by the Office des personnes handicapées du Québec and the Régie du bâtiment du Québec tasked with improving barrier-free design standards for public buildings and spaces
- 3.5.7 Continue making social and community housing available under the AccèsLogis Québec program, particularly for low- and modest-income senior households
- 3.5.8 Continue granting financial assistance under the Shelter Allowance Program to help low-income senior households pay their housing expenses
- 3.5.9 Continue providing financial assistance under the Residential Adaptation Assistance Program to seniors who need to adapt their homes
- 3.5.10 Continue granting financial assistance under the Home Adaptation for Seniors' Independence Program for people aged 65 and over, on low incomes, who need to make minor adaptations to their house or apartment
- 3.5.11 Continue granting financial assistance under the RénoVillage Program and the Emergency Repair Program for low- and modest-income owner-occupiers, particularly the rural elderly
- 3.5.12 Explore and support innovative housing models tailored to the needs of low- or modest-income seniors experiencing a loss of autonomy
- 3.5.13 Continue implementing new residential and accommodation initiatives
- 3.5.14 Foster familiarization with programs and the alignment of practices of the health and social services and Société d'habitation du Québec networks

STRATEGIC CHOICE 3.6

Ensure mobility for seniors

ACTIONS

3.6.1 Introduce services, under the government assistance program to improve public transit services, that directly address the needs of seniors

3.6.2 Establish a code of ethics including measures to sensitize taxi drivers to seniors' special needs

3.6.3 Consider the special needs of seniors, including those experiencing a loss of autonomy, during the formulation and review of transportation plans required under the government assistance program for regional public transit

3.6.4 Increase seniors' access to the various modes of public transportation under public transit operating authorities' development plans

3.6.5 Produce and disseminate a practical guide to barrier-free travel for municipalities and transit authorities

Research and knowledge development

R.1 Continue the work of the Comité national d'éthique sur le vieillissement et les changements démographiques

R.2 Develop knowledge on the Age-Friendly Communities approach in order to gauge its impact and continue developing the AFC model

R.3 Conduct a survey of seniors' health and social needs

R.4 Launch a new joint research initiative on the aging of Québec's population under the Québec Research Fund–Society and Culture

R.5 Encourage and support research, innovation and the dissemination and transfer of knowledge on active aging

Appendices

APPENDIX 1 A few government action plans already under way

APPENDIX 2 Government departments and agencies involved in preparing the *Aging and Living Together* Policy and its 2012-2017 Action Plan

APPENDIX 3 Non-governmental organizations met with in preparing the *Aging and Living Together* Policy

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APPENDIX 5 Researchers involved in preparing the *Aging and Living Together* Policy

Appendix 1

A few government action plans already under way

Several interdepartmental policies and action plans underscore the government's will to take coherent and complementary actions, particularly with regard to seniors:

- **Governmental Action Plan to Counter Elder Abuse 2010-2015**¹²¹

This action plan, which is under the responsibility of the ministère de la Famille et des Aînés, applies to all seniors, be they autonomous, in good health, vulnerable, or experiencing a loss of autonomy. Thirteen government departments and agencies took part in preparing it. A total of \$20 million in new investments over five years has been earmarked for implementing the plan. It contains over 40 measures, the following of which have structuring effect:

- Québec's first annual elder abuse awareness campaign was held in October 2010, under the theme "Help, Love, Act".
- The Québec-wide Elder Abuse Help Line was launched on October 1, 2010. As at April 4, 2012, 7 332 calls had been received after 78 weeks of operation, for an average of 94 calls a week.
- The world's first University Research Chair on Elder Abuse was created in December 2010.
- Eighteen regional coordinators specializing in elder abuse have been hired in Québec's health and social services agencies, including one dedicated to First Nations elders and another to cultural communities.

- The Commission des droits de la personne et des droits de la jeunesse established a specialized team that works on the ground to counter exploitation of the elderly.
- A brochure produced by the Autorité des marchés financiers, entitled *Trust must be earned!*, was released in October 2011 to help protect seniors against financial abuse.
- Two partners' forums were held, in 2011 and 2012, with each one being attended by nearly 120 people.

Government Action Plan for Solidarity and Social Inclusion 2010-2015¹²²

This second government anti-poverty action plan, which falls under the responsibility of the ministère de l'Emploi et de la Solidarité sociale, has a budget of \$7 billion over five years, including \$1.3 billion in new investments. Several of its solidarity and social inclusion measures focus specifically on the elderly; for example:

- better inform seniors about available programs, particularly those that provide financial support;
- increase the active participation of seniors;
- support initiatives aimed at respect for seniors;
- improve the slate of services for caregivers.

• Government action plan for gender equality 2011-2015¹²³

This second government action plan for gender equality, which comes under the responsibility of the ministère de la Culture, des Communications et de la Condition féminine, involves over 30 departments and agencies and more than 100 actions, grouped under seven main directions. The action plan applies in particular to caregivers to seniors and provides support for projects aimed at gender diversity, accompaniment and respite.

• **Government Action Plan Against Homophobia 2011-2016**¹²⁴

This action plan, which is under the responsibility of the ministère de la Justice, flows from the first Québec Policy Against Homophobia, made public in December 2009. The policy's goal is to improve the situation of members of sexual minorities so that they can achieve social equality. The five-year action plan is organized around four main priorities and comprises 60 actions, including:

- take sexual minority seniors into consideration when conducting surveys and research on families and seniors;

- encourage research on homophobia, including its causes and its impacts on the health, well-being, family, academic progress and general living conditions of sexual minorities, especially among certain specific groups such as young people, lesbians, transsexuals, seniors, Aboriginal people, immigrants and members of cultural communities.

• **Integrated services plan for seniors**¹²⁵

This plan was announced in March 2011 by Québec Premier Jean Charest, accompanied by the Minister of Health and Social Services, Dr. Yves Bolduc, the Minister for Social Services, Dominique Vien, and the Minister responsible for Seniors, Marguerite Blais. The goal of the plan, which is under the responsibility of the ministère de la Santé et des Services sociaux, is to ensure that seniors receive efficient services tailored to their condition, particularly in the areas of home support, functional rehabilitation and care for Alzheimer's sufferers as well as in intermediate resources and accommodation centres. The plan represents investments of \$105 million in 2011-2012, \$173 million in 2012-2013 and \$200 million per year as of 2013-2014.

- **Strategy to ensure the occupancy and vitality of territories 2011-2016**¹²⁶

This strategy, which comes under the responsibility of the ministère des Affaires municipales, des Régions et de l'Occupation du territoire, is accompanied by a document entitled *Un gouvernement en action pour mieux habiter et vivre nos territoires 2011-2013*. This document presents the actions to be taken by government departments and agencies between 2011 and 2013 to support the occupancy and vitality of territories. Several actions promoting adaptation to an aging population are presented in the document, including the preparation of the *Aging and Living Together* Policy and its action plan.

- **Government action plan to encourage the participation of all in Québec's development 2008-2013**¹²⁷

This plan, which is the first government action in this area, accompanies the policy *Diversity: An Added Value*. It underscores the government's will to improve respect for the rights of people who live in Québec and boost the participation of all citizens in Québec's economic, social and cultural life. The plan involves all Québec government departments and agencies and calls upon employers, public institutions, associations and Québec society as a whole to build an inclusive Québec. One of the means of action included in the plan consists in facilitating the creation of forums for exchange and collaboration for organizations that welcome seniors from the cultural communities.

Appendix 2

Government departments and agencies involved in preparing the *Aging and Living Together* Policy and its 2012-2017 Action Plan

Interdepartmental committee

Co-chairs

- Ministère de la Famille et des Aînés
- Ministère de la Santé et des Services sociaux

Committee members

- Ministère des Affaires municipales, des Régions et de l'Occupation du territoire
- Ministère des Transports du Québec
- Ministère de l'Emploi et de la Solidarité sociale
- Société d'habitation du Québec

Other departments and agencies

- Ministère de la Culture, des Communications et de la Condition féminine
- Ministère du Développement économique, de l'Innovation et de l'Exportation
- Ministère de l'Éducation, du Loisir et du Sport
- Ministère des Finances
- Ministère de l'Immigration et des Communautés culturelles
- Ministère du Travail
- Office des personnes handicapées du Québec
- Régie du bâtiment du Québec
- Secrétariat à la condition féminine
- Secrétariat du Conseil du trésor
- Secrétariat à l'action communautaire autonome et aux initiatives sociales
- Secrétariat aux affaires autochtones

Appendix 3

Non-governmental organizations met with in preparing the *Aging and Living Together* Policy

- Age Friendly Hospital Initiative, Montreal General Hospital Foundation
- Alliance des associations de retraités
- Association de professionnelles et professionnels retraités du Québec
- Association des établissements de réadaptation en déficience physique du Québec
- Association des groupes de ressources techniques du Québec
- Association des ressources intermédiaires d'hébergement du Québec
- Association des retraitées et retraités de l'éducation et des autres services publics du Québec
- Association québécoise de défense des droits des personnes retraitées et préretraitées
- Association québécoise des directrices et directeurs d'établissement d'enseignement retraités
- Association québécoise des retraité(e)s des secteurs public et parapublic
- Association québécoise d'établissements de santé et de services sociaux
- Carrefour action municipale et famille
- Centre francophone d'informatisation des organisations
- Conférence des Tables régionales de concertation des aînés du Québec
- Fédération des centres d'action bénévole du Québec
- Fédération des coopératives de services à domicile et de santé
- Fédération des locataires d'habitations à loyer modique du Québec
- Fédération québécoise des municipalités

- First Nations of Quebec and Labrador Health and Social Services Commission
- Fondation Berthiaume-Du Tremblay – Présâges
- Kéroul
- L'Appui pour les proches aidants
- National Association of Federal Retirees
- Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec
- Ordre professionnel des diététistes du Québec
- Quebec Association of Senior Centres
- Regroupement des aidants naturels du Québec
- Regroupement des offices d'habitation du Québec
- Regroupement des popotes roulantes et autres services alimentaires bénévoles
- Regroupement interprofessionnel des intervenants retraités des services de santé
- Regroupement québécois des résidences pour aînés
- Réseau des grandes villes Municipalité amie des aînés
- Réseau FADOQ
- Réseau d'information des aînés du Québec
- Réseau québécois des organismes sans but lucratif d'habitation
- Réseau québécois des villes et villages en santé
- Union des municipalités du Québec

Appendix 4

Non-governmental organizations represented at the forum (*Assises*) held in Montréal on November 18, 2011

- Age Friendly Hospital Initiative, Montreal General Hospital Foundation
- Alliance des communautés culturelles pour l'égalité dans la santé et les services sociaux
- Association de professionnelles et professionnels retraités du Québec
- Association des établissements de réadaptation en déficience physique du Québec
- Association des groupes de ressources techniques du Québec
- Association des ressources intermédiaires d'hébergement du Québec
- Association des retraitées et retraités de l'éducation et des autres services publics du Québec
- Association québécoise de défense des droits des personnes retraitées et préretraitées
- Association québécoise de gérontologie
- Association québécoise des retraité(e)s des secteurs public et parapublic
- Association québécoise d'établissements de santé et de services sociaux
- Carrefour action municipale et famille
- Centre francophone d'informatisation des organisations
- Coalition pour le maintien dans la communauté
- Conférence des Tables régionales de concertation des aînés du Québec
- Conseil pour la protection des malades
- Fédération des centres d'action bénévole du Québec
- Fédération des coopératives de services à domicile et de santé

- Fédération des locataires d'habitations à loyer modique du Québec
- First Nations of Quebec and Labrador Health and Social Services Commission
- Fondation Berthiaume-Du Tremblay – Présâges
- Institut sur le vieillissement et la participation sociale des aînés
- Institut universitaire de gériatrie de Montréal
- Kéroul
- National Association of Federal Retirees
- Observatoire Vieillissement et Société
- Ordre professionnel des diététistes du Québec
- Quebec Association of Senior Centres
- Regroupement des aidants naturels du Québec
- Regroupement des offices d'habitation du Québec
- Regroupement des popotes roulantes et autres services alimentaires bénévoles
- Regroupement provincial des comités des usagers
- Regroupement québécois des résidences pour aînés
- Research Centre on Aging, Université de Sherbrooke
- Réseau d'information des aînés du Québec
- Réseau FADOQ
- Réseau québécois des organismes sans but lucratif d'habitation
- Réseau québécois des villes et villages en santé
- Union des municipalités du Québec

Appendix 5

Researchers involved in preparing the *Aging and Living Together* Policy

- Research Centre on Aging, Université de Sherbrooke

- Francine Ducharme, Ph. D., researcher, Institut universitaire de gériatrie de Montréal – Holder of the Desjardins Chair in Nursing Care for Seniors and Their Families, Faculté des sciences infirmières, Université de Montréal

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