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NEWS RELEASE

Age-friendly-community strategies should target healthy middle-class seniors

Montreal – Aging successfully depends not only on the behaviours of individual seniors, but also on the quality of the places where they live and receive care. A [new IRPP paper](#) says investing in community-based solutions can produce considerable benefits – but given limited funding and competing demands for resources, the age-friendly-communities movement must prioritize over-ambitious agendas and offer solutions that do not overlap with other programs.

In an age-friendly community, services, settings and structures are designed to enable people to age actively. Gerontologist and geographer Stephen M. Golant takes a critical look at the age-friendly-communities movement and argues that its proponents have provided little evidence programs are being targeted to where they are most needed. He suggests that to help a larger number of people age in place happily, leaders need to tackle some tough issues and reconsider what they are trying to achieve.

Golant argues that age-friendly-community initiatives should narrow their mission statements and avoid “trying to do too much.” He proposes two unconventional strategies for debate.

First, he says, “instead of trying to help the most frail older people remain independent in their homes as long as possible, age-friendly initiatives should primarily target relatively healthy and physically able older people and help them remain active, productive and involved in their communities.”

Second, says Golant, “these initiatives should primarily serve the large and growing segment of middle-class seniors who are neither poor nor rich. This often overlooked but very large group of people often find themselves outside the current safety net of long-term care and housing programs offered by governments, but unable to afford private-sector solutions to their problems.”

The author concludes we need more evidence-based research to determine whether these programs are effective and benefiting the desired subgroups of older people. “We need resident-level data that reports on how these initiatives have improved the physical or psychological well-being of older people, and we need community-based data that identifies the ways governments have achieved social, health or fiscal benefits,” he says.

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[Age-Friendly Communities: Are We Expecting Too Much?](#), by Stephen M. Golant, can be downloaded from the Institute’s website at irpp.org.

For more details or to schedule an interview, please contact Shirley Cardenas at 514-594-6877 or scardenas@irpp.org

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