

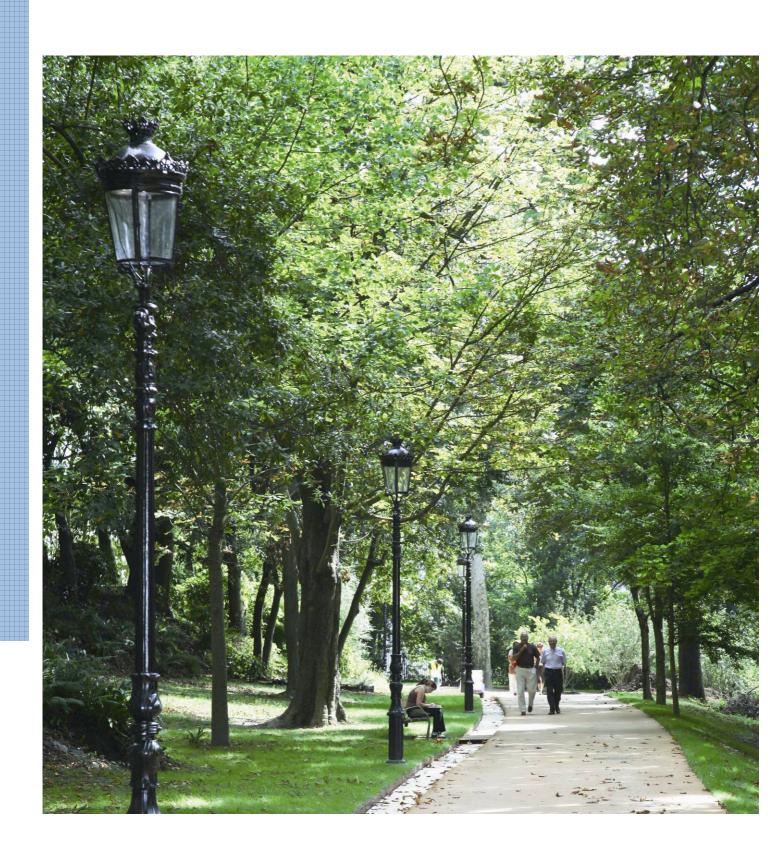
# DONOSTIA-SAN SEBASTIÁN AGE-FRIENDLY CITY-AFC











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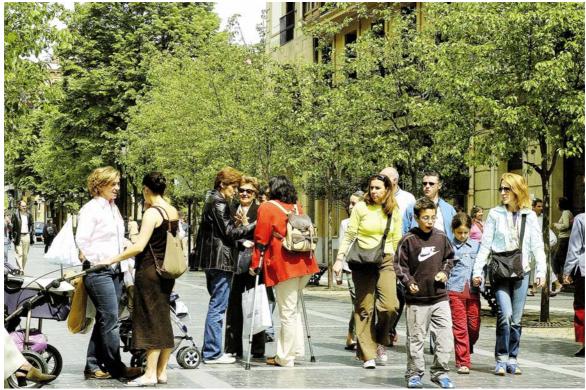
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#### I. THE AGE-FRIENDLY CITIES PROJECT

This Report summarizes the major findings of the study. A Technical Report in Spanish with more detailed information about Donostia-San Sebastián and its older population, the detailed data collected in the assessment process, is released separately.

## i. Base: **Ageing and Urban Development**

The network Age-friendly Cities-AFC is part of an international effort begun by the World Health Organization (WHO) to respond to two significant demographic trends: population aging and urbanization.

Age-friendly Donostia-San Sebastián City is part of an international effort to ensure the cities of the world not only support their residents as they age, also tremendous but tap the resources older people can offer.

Demographic projections forecast unprecedented ageing the population. In terms of the world population, the elderly (people over 65) will triple by 2050 with regard to the present, reaching something in the region of 1,500,000 people. In Spain, there already are some 7,633,807 elderly citizens (INE 2008), almost 30% of whom are 80 or more. We are, at the same time, experiencing a rapid process of drift towards cities. It is forecast that by the year 2030, 81.7% of the population of Spain will live in an urban setting. At present, 7 of every 10 elderly citizens in Spain live in cities of over 10,000 people.

Global Age-friendly Cities has originally involved 35 cities around the world in analyzing their communities neighborhoods through the lens of the WHO Active Aging Framework. This framework shifts city planning away from a "needs-based" approach toward "rights-based" approach that recognizes people should have equal opportunity and treatment as they grow older. "Active aging" is about more than just "healthy aging"; the concept entails enhancing quality of life by optimizing opportunities for health, participation, and security as people grow older.

Figure 1.-**Age-Friendly Cities** 



Argentina, La Plata Brazil, Rio de Janeiro Canada, Halifax Canada, Portage la Prairie Canada, Saanich Canada, Sherbrooke Costa Rica, San Jose Jamaica, Kingston Jamaica, Montego Bay Mexico, Cancun Mexico, Mexico City Puerto Rico, Mayaguez Puerto Rico, Ponce USA, New York USA, Portland

#### **Africa**

Kenya, Nairobi

#### South-east Asia

India, New Delhi India, Udaipur



#### Eastern Mediterranean

Jordan, Amman Lebanon, Tripoli Pakistan, Islamabad

#### **Europe**

Germany, Ruhr Ireland, Dundalk Italy, Udine Russia, Moscow Russia, Tuymazy Switzerland, Geneva Turkey, Istanbul UK, Edinburgh UK, London

#### **Western Pacific**

Australia, Melbourne Australia, Melville China, Shanghai Japan, Himeji Japan, Tokyo

Source: World Health Organization Global Age-Friendly Cities: A Guide, 2007.

#### ii. Aims of the project

The general aims of the project are:

- To generate community participation processes
- To introduce changes in the different functions and areas of responsibility of the city in order to improve the quality of life of citizens. It must be this implies noted that improvement in the quality of life of the elderly as well as of the population as a whole.
- To take full advantage of potential represented by the elderly in the life of a city.

A city that is friendly to the elderly is one that reorganises its structures and services with a view to offering the very best quality, security and comfort to all, regardless of their skills and capacities, thereby encouraging their participation in all areas of social life.

The advantages and benefits of a city that is so structured will be enjoyed by the population as a whole:

- Barrier-free streets and buildings improve the mobility and independence of the disabled, whether old or young.
- A safe environment in all districts will allow children, young people and the elderly, when they go out, to do so with a feeling of safety and comfort and actively participate in any form of social activity or leisure.
- Less pressure is on families when elderly members have community support, be it public or private, as well as the health services they need.
- The community as a whole benefits from the participation of the elderly in voluntary or remunerated work.
- The local economy benefits from the active participation of the elderly in different domains.

#### iii. Policy framework: Active Ageing

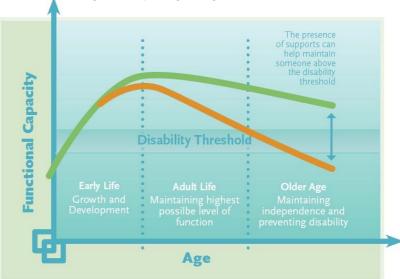
"Active ageing is the process that allows for the maximisation of health opportunities, participation and safety, for the improvement the quality of the lives of people as they age." (Active

Ageing: A Policy Framework. Geneva, WHO, 2002).

Functional capacity grows during childhood, reaching its highest development in adult life, diminishing gradually as getting older.

Figure 2.Maintaining Functional
Capacity over the Life
Course

Source: Kalache, A. & Kickbusch, I. (1997): *A global strategy for healthy ageing World Health*, Nº 4: 4–5.



Active ageing constitutes an opportunity to improve the quality of life as ageing sets in. Active ageing is, without doubt, a factor that directly contributes to individuals being able to maintain their functional capacity, with all the advantages this brings, personally, and at the level of the family, or, at an even higher level, socially.

The encouragement of active ageing is designed to delay -avoid, even-situations of disability and dependence. An age-friendly city contributes to active ageing via the maximisation of resources used in health, participation and security, in order to improve, or at least maintain, the quality of life of people as they age.

Figure 3.Determinants of Active Aging

Source: World Health Organization Global Age-Friendly Cities: A Guide, 2007.



#### iv. Participatory focus from the base:

The Age-Friendly City project is developed through the generation of a process of participation on the part of all the agents implicated:

# Figure 4.Participatory focus

- The elderly participate in an analysis of the situation, past, present and future, through their perceptions as to what they consider to be friendly to their ageing process, the problems they experience in daily life in their city, and possible solutions.
- Participation by the administration, volunteers, service providers and business people of the local community, along with the information

#### v. Areas of Research-Action

This methodology follows a researchaction line, presenting an integrated level about the friendliness of structures, environment, services and policies in the city. The research is organized into the eight domains of city life identified by the *Global Cities Project*.

Figure 5.- Age-Friendly Domains

City council Skateholders, planners

Service providers & elder caregivers, NGOs & Family Caregivers'

Aged 65+ people

furnished by the elderly, serve to provide a more complete picture of the most crucial points and barriers that a city may face in order to be considered agefriendly.

 This local assessment is brought to the table by those responsible for the research, and offered to political representatives, planners, elderly people and citizens in general; it is the point of departure for intervention in order to move towards a more agefriendly city.





#### **II. METHODOLOGY**

One of the premises of the project is that it should involve the elderly as main participants, the true protagonists as it were, at every stage of the same, in the description and expression of their situation, as well as in terms of offering suggestions for change and in the taking of decisions with regard to the improvement projects that have to be implemented in order to solve the problems identified in the city.

It is crucial, therefore, to have first-hand knowledge of the problems they perceive and the definition of the reality that they themselves fashion from their vital daily experiences.

#### i. Qualitative research: Focus **Groups**

For the first phase, where the basic objective is getting an image of the city and of how the elderly perceive the manner in which they live in it, the project envisages the formation of a series of focus groups, in which the elderly and many other diverse social agents related to them express their experiences with regard to the city.

The WHO recommends the use of a standard protocol as a guideline and base for debate among groups. That document, (entitled The Vancouver Protocol) also presents all the technical guidelines to be followed by the focus groups. The Ingema Foundation used this rough general guide as a base for of the adaptation general characteristics of the population of the Basque Country as a whole and of the city of San Sebastian in particular.

#### **Research objectives** ii.

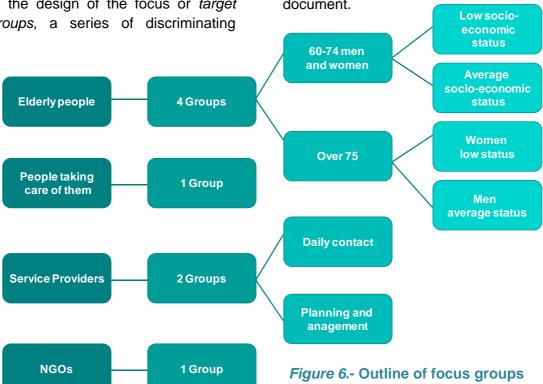
The objectives of adopting qualitative research technique of this kind are, basically:

- To become familiar with aspects of the city that are "age-friendly"
- To highlight the problems and barriers detected
- To envisage possibilities of improvement

# iii. Make-up of focus groups

In the design of the focus or target groups, a series of discriminating

factors were taken into account, in order to achieve the maximum level of inclusive heterogeneity within those groups, in order to extract significant discourses on the reality of the elderly in San Sebastian. The idea was to trace the profile of the elderly person in the context of the city. To that end, the perceptions the elderly - from different social or socio-historical contexts - have of themselves, of their state of health and their economic situation, as well as the image that the different social agents that interact with them at many might have of them, levels important. The detailed make-up of the groups is presented in the Spanish document.



### iv. Guidelines for focus groups

The guidelines followed for the organisation of meetings was based on the 8 areas of intervention-action previously mentioned. Focus grouping is, basically, a qualitative technique that research

together a group of individuals for discussion of a specific, structured question. The specific questions dealt with in the groups are presented in the document in Spanish.



#### **CONTEXT OF DEPARTURE**

#### i. Demography

population of Donostia-San The Sebastian is 184,248 (as of January 1<sup>st</sup>, 2008). This includes some 37,041 people 65 years or more, which 20.1% represents of the total of population the city. Eustat forecasts point to the likelihood of the percentage of the elderly in the province of Gipuzkoa increasing some 20.3% by 2018, which would mean that over 36% of the population would be elderly people. The level of dependence will increase from the present figure of 49.1% to 60.1%, which would mean that the weight of the population over 65 would be more significant than that represented by the sector of the population under 16, which implies a change in population structure, economically and socially.

The increase in the very elderly, people over 80, in some cases of people as much as 100 years old, is also worth mentioning. Between 2008 and 2020, it is estimated that there will be a 19.1% increase in the sector of the population over 65, in the province of Gipuzkoa . The rate of growth of the sector of the population 80 and over will increase, however, by 37.1%. The attainment of very old

age by successive generations, on the back of the initial effects of a lesser rate of mortality, coupled with improved mortality at those ages, will result in an increase in their relative weight, even among the elderly.

The population pyramid for Donostia for the year 2007 gives an idea of the demographic future of the city. By the year 2020, the sector of the population referred to as the cohorts of the "baby boom" will occupy the zone termed mature-adult - those still on the labour market, but on the verge of retirement. By the year 2040, the majority of that generation would have gone past the retirement phase, and, given their size, the population pyramid will then take on a completely different appearance - the very opposite, becoming decidedly topheavy. The changes forecast in terms of age structure will have important repercussions on the ageing process of this generation, not only in the public domain, but also in terms of pension and health systems, and will also affect practically all the social institutions, including families and enterprises. 2007 is the year in which the unstoppable increase in the Spanish population for forty years began. From that point onwards, it will be continuous and unprecedented.

AGE Population Pyramid. Donostia / San Sebastián, 2007 105 - 109 100 - 104 95 - 99 90-94 85 - 89 80-84 75 - 79 70 - 74 65-69 60 - 64 55 - 59 50 - 54 45 - 49 40 - 44 35 - 39 30 - 34 25 - 29 20 - 24 **Female** 15 - 19 Male 10 - 14 5-9 0 - 4 6.000 4.000 2.000 8.000 0 2.000 4.000 6.000 8.000

Figure 7.- Structure of the population of Donostia / San Sebastian, 2007

Data Source: INE, Municipal Registry. Own elaboration (Plan Estratégico de Donostia-San Sebastián)

Table 1.- Structure of the Population of Donostia / San Sebastian in terms of sizeable age groups, and distribution by Districts, 2007.

Neighbourhoods	Age 0-14	Age 15-64	Age 65 +	Total	Average Age
Aiete	2.201	9.259	1.471	12.931	38,7
Altza	2.297	14.055	3.253	19.605	42,2
Amara Berri	2.866	17.533	5.910	26.309	45,2
Añorga	280	1.653	328	2.261	41,6
Antiguo	2.236	10.125	2.910	15.271	42,9
Ategorrieta - ulia	564	2.692	792	4.048	43,2
Centro	2.256	14.801	6.399	23.456	47,9
Egia	1.810	9.768	3.680	15.258	45,3
Gros	1.866	13.010	5.125	20.001	47,5
Ibaeta	1.652	6.261	1.048	8.961	38,4
Igeldo	141	744	161	1.046	41,9
Intxaurrondo	2.564	11.586	2.274	16.424	40,0
Landarbaso	3	12	4	19	46,9
Loiola	581	3.225	870	4.676	42,6
Martutene	397	2.013	443	2.853	40,8
Miracruz - Bidebieta	1.041	6.169	2.029	9.239	44,3
Miramon - Zorroaga	332	1.036	296	1.664	40,8
Zubieta	49	193	48	290	40,6
Total	23.136	124.135	37.041	184.312	43,7

Data Source: INE, Municipal Registry. Own elaboration (Plan Estratégico de Donostia-San Sebastián)

But the ageing of the population is not the same in all the areas and districts of San Sebastian: the districts with the oldest populations are: the Centre, where 27.3% of people are over 65, and 9.6, infant (between 0-14 years of age), Gros, where 25.6% of the population is over 65, and 9.3% infant, and Egia, where the figures are 24.1% and 11.9% respectively. The districts where the tendency is

The age established as the threshold of entry to elderliness is 65, the age at which one leaves the labour market. However, this group must not considered а homogenous population. In addition to the quantitative differences that are perceptible among the different groups considered part of the elderly sector qualitative of society, differences also have to be taken into account - life history, level of education, state of health, who they live with, economic situation, as well as other characteristics that serve to

the opposite are: Ibaieta, with an infant population of 18.4%, and an elderly population of 11.7%, Aiete, 17.0% and 11.4% respectively, and Intxaurrondo, 15.6% and 1.38% respectively. The district with the largest relative child population figures is Miramon-Zorroaga, with 20.0%. Where the elderly live is a crucial question for social policy and the planning of services.

define heterogeneous groups of persons, situations and necessities.

#### ii. Purchasing power

One of the features that determine the socio-economic profile of a population is purchasing power. The average level of total pensions in San Sebastian is 906,82 euros a month (2007). The average retirement pension however, is, 1,017,24 euros, and the average widow(er)'s pension is 649,31 euros. These are figures that are superior to national averages.

Table 2.- Distribution of pensions in Donostia /San Sebastian, 2007.

	Pensions Nº	%	Monthly amount	Average Pension
Retirement Pensions	27.202	63,2	27.670.893,77	1.017,24
Disability Benefits	3.268	7,6	3.545.545,51	1.084,93
Widow's Pensions	11.199	26	7.271.593,39	649,31
Orphan's Pension	1.103	2,6	435.253,66	394,61
Family Benefits	292	0,7	128.184,68	438,99
Total	43.064	100	39.051.471,01	906,82

Source: State Secretary of Social Security

(\*) Data related to all population of Donostia-San Sebastián

The level of average pensions also differs significantly by grouping, in terms of age and sex. Another important yardstick for the

measurement of purchasing power is the type of housing. 86.4% of the elderly people in the city live in houses which are their own, and 10.1% in rented accommodation. A house that is one's property is always an economic asset, which, apart from serving to satisfy accommodation needs, also inevitably becomes a form of saving and investment.

According to Population Census and Housing data for the year 2001, the majority of the elderly population, some 92.3%, claim to live in a place of abode that is in good condition, some 5.6% say they do so in a place that is deficient, and some 1.5% claim to do so in a place that is in a very bad or ruinous state. Therefore, 7.1% of the elderly population lives in substandard housing conditions.

#### iii. Who they live with

According to official 2007 census figures, 21.6% of the elderly population of Donostia live on their own, 32.6% live with other people less than 65, and 45.8% live with people older than themselves.

The manner in which such people live as elderly adults is important in terms of tackling the potential of close support networks. There are clear gender differences here. While almost three of every ten old women live alone, in the case of men it is only one in ten.

Table 3.- Who the elderly (65 and over) live with, Donostia-San Sebastian, 2007

	Total	%	Male %	Female %
Living Alone	8.016	21,6	10,0	28,8
Living with people under 65	16.962	32,6	50,8	42,7
Living with people 65 or +	12.065	45,8	39,2	28,5

Data Source: INE, *Municipal Registry*. Own elaboration (Plan Estratégico de Donostia-San Sebastián).

#### iv. Level of education

The level of education attained by the elderly of Donostia-San Sebastián is higher than the national average. In the city, the level of illiteracy of the elderly is only 0.9%, and only 8.1% have no education. Almost six in ten have been to primary school, while some 11.9% have a secondary education or have done higher

studies. The level of education achieved by elderly women is lower than that achieved by men. Only 2.4% of elderly women have higher studies, as opposed to 9.2% of men. Among the younger segment of the elderly (65-69) the differences between the sexes lessens, at least in those groups with lesser levels of education. But the differences within the segments with higher studies are still quite significant.

**Table 4.-** Level of education of older people, by age and sex. Donostia-San Sebastian, 2008.

Age	lliterate	No Qualifications	Primary School	Technical School	GC Secondary Education	University Medium	Bachelor Degree	Total
65-69	0,4	4,6	55,7	8,1	19,6	7,2	4,3	9.917
70-74	1,2	7,6	61,7	6,2	14,7	6,0	2,7	8.092
75-79	1,2	9,2	65,2	5,4	11,6	5,5	1,9	8.536
80-84	1,1	11,2	64,9	5,3	10,4	5,5	1,5	6.719
85 y más	1	8,0	61,7	6,3	14,3	6,1	2,7	6.703
Total 65 + Population	0,9	8,1	58,1	7,8	12,9	6,3	5,9	39.967
% of Total Population	60,9	75,2	30,3	15,1	16,7	19,9	11	185.364

Age- Males	lliterate	No Qualifications	Primary School	Technical School	GC Secondary Education	University Medium	Bachelor Degree	Total
65-69	0,4	3,6	43,6	12,8	16,6	8,9	14,1	4.460
70-74	0,5	5,7	49,7	11,9	13,0	7,2	11,9	3.458
75-79	0,8	7,4	53,7	10,5	10,8	6,5	10,3	3.420
80-84	0,6	8,7	55,3	9,4	10,2	6,3	9,5	2.300
85 y más	0,5	10,1	57,3	8,8	9,8	4,8	8,6	1.760
Total 65 + Male Population	0,6	10,0	56,7	8,6	10,2	4,8	9,2	15.398
% of Total Male Pop.	41,3	66,2	22,4	16,3	13,6	22,7	15,6	86.990

Age- Females	lliterate	No Qualifications	Primary School	Technical School	GC Secondary Education	University Medium	Bachelor Degree	Total
65-69	0,4	4,6	55,7	8,1	19,6	7,2	4,3	5.457
70-74	1,2	7,6	61,7	6,2	14,7	6,0	2,7	4.634
75-79	1,2	9,2	65,2	5,4	11,6	5,5	1,9	51.189
80-84	1,1	11,2	64,9	5,3	10,4	5,5	1,5	4.419
85 y más	1,6	13,9	67,1	3,1	8,0	5,0	1,3	4.943
Total 65 + Female Population	1,1	9,2	62,8	5,7	13,0	5,9	2,4	24.569
% of Total Female Pop.	71,4	80,1	36,9	13,8	19,3	18,1	5,8	98.374

Source : Diputacion Foral de Gipuzkoa (web), Education Level (From Local Census), Own Elaboration.

#### v. Disability and dependence

According to the 2008 *Unit Census on the Assessment, Orientation and Qualification of Disability*, in Donostia there were 9,149 disabled people, 3,865 of whom were over 65. The rate of disability in the elderly is 10.4%

(9.2% in women, and 12.4% in men). In the disabled population age structure, the direct relation between the percentage of people with some disability and age is such that the older the person, the greater the percentage of people with some disability.

Table 5.- Distribution of the population with disability, by age and gender, Donostia-San Sebastian, 2008.

Distribution of the Population with disability by age and gender. Donostia-San Sebastian 2008									
		<b>Absolute Figures</b>							
Age	Total	Female	Male						
65 and over	3.865	2.118	1.747						
Total Disabled	9.149	4.292	4.857						
		Percentages							
	Total	Female	Male						
65 and over	10,4	9,2	12,4						
Total Disabled	5	4,4	5,6						

Source: Diputacion Foral de Gipuzkoa, Unit Census on the Assessment, Orientation and Qualification of Disability, 2008.

According to data from the last INE survey on *Disability, Personal Autonomy and Dependence (*2008*)*, in the Basque Country there are over 150,000 disabled people. 61.6% of them are 65 or more (104,300). A quarter of the elderly population with some disability are between 65 and 74, and more than half of them are over 80. In the over 80 sector of the elderly, 72,4% are old women.

Among the total elderly population with some disability, 19.5% do not need any kind of help (technical or

personal assistance) and 38.2% need both. In the over 80 sector, the figure for people who do not need help goes down to 8.9% and the figure for those who need both personal and technical help is 51.3%. Disabled people between 65 and 79 use, in similar proportions, technical help (20.1%), personal help (22.5%) or both (22.3%). With the increase in age, there is a greater percentage of elderly people who need the help of another person while the figure for those who use exclusively technical help falls to 3.3%.

*Table 6.-* Persons with some disability, resident in homes in the Basque Country, 2008.

People with some kind of disability by age and gender										
		Total Population								
Age	Both genders	Male	Female							
Total Population	169,4	68,2	101,2							
From 65 to 79	52,8	21,2	31,6							
From 65 to 74	27	12,6	14,5							
From 75 to 79	25,8	8,7	17,1							
Over 80	51,5	14, 1	37,3							
65 and over	104,3	35,4	68,9							

Data in thousands of households

Source: INE, Survey on Disability, Personal Autonomy and Dependence, 2008.

According to data from this survey, there are over 200 thousand people in the Basque Country hindered by some disability for the carrying out of their basic daily activities (1). Of this total, some 69% (155,200) are over

65, and 39.2% are over 80. 20.9% of these physically disabled people are in a situation of moderate disability, 25% in one of severe disability, and 38.5% in a situation of total disability.

Table 7. People with financial aid for their disability depending on age

People with Assistance for their disability depending on age										
Type of Assistance	Total Population	From 65 to 79	80 and over							
Total	169,4	52,8	51,5							
Without Assistance	46,4	15,7	4,6							
Personal assistance only	40,8	11,9	12,4							
Technical assistance only	22,6	10,6	3,3							
Both types of assistance	46,8	11,8	26,4							
Without records	12,9	2,8	4,8							

Data in thousands of households

Source: INE, Survey on Disability, Personal Autonomy and Dependence, 2008

Table 8.- Elderly people (65 and over), hindered by some disability for the carrying out of their basic daily activity, resident in homes in the Basque Country.

	Total Population Population from 65 to 79			Population Over 80			Population Over 65				
Total	Without Assistance	With Assistance	Total	Without Assistance	With Assistance	Total	Without Assistance	With Assistance	Total	Without Assistance	With Assistance
224,9	125,6	99,3	67,1	38,4	28,7	88,1	45,3	42,8	155,2	83,7	71,5
21,2		21,2	7,7		7,7	5,8		5,8	13,5	0	13,5
51,2	23	28,2	17,2	9,7	7,5	15,3	2,9	12,4	32,5	12,6	19,9
58,4	34,8	23,6	18,2	11,2	7	20,6	9,9	10,7	38,8	21,1	17,7
78,4	60,1	18,7	21	16	5	38,8	28,7	10,1	59,8	44,7	15,1
15,4	7,8	7,6	3	1,5	1,5	7,4	3,7	3,7	10,4	5,2	5,2

Data in thousands of households

Source: INE, Survey on Disability, Personal Autonomy and Dependence, 2008

Of the more than 150,000 elderly people with some disability for carrying out their daily activity, more than half (53.9%) do not have any help (technical or personal). Among

the over 80 sector of the elderly, 51.4% are in this situation, while the figure for those between 65 and 79 in such a situation is 57.2%.



#### vi. Social resources of the city

The City Council of Donostia-San Sebastian has been working for some time now on a model of "city for citizens", with special emphasis being placed on the most innovative social aspects.

In this context, special attention is elderly to the for the establishment of policies in diverse domains (accessibility, housing. culture and active leisure, social services...).

In the same sense, The Donostia-San Sebastian 2010 Strategic approved in 2004, reflects importance of persons, and, within the same, of the elderly, as one of the assets of the city, and strategies are directed at "making Donostia-San Sebastian a socially open city, a city of solidarity, that stands out for its

Within the framework of Social the City Council of Services,

institutional commitment, and as a civil society that respects life and human rights, for peaceful co-habitation and for the integration of all citizens", with special regard for the "enhancement of inter-generational integration through social policies that offer opportunities to youth and for solidarity with the elderly, by making them part of the active life of the society", and "guaranteeing a network of assistance services for all elderly people". Among its flagship projects, the "Programme of Assistance to the Elderly and the Enhancement of Intergenerational Relations (Non-Segregated Spaces, Shared Activities, etc) stands out.

The City Council of Donostia-San Sebastian has, therefore, been actively promoting a series of actions aimed at bringing improvements to the different areas of functions and responsibility of the city, focusing on adapting the needs of the elderly in all areas.

Donostia-San Sebastian is opening the door towards a public system of attention to older people, autonomous well as dependent, offering information and orientation to all persons and to those taking care of them. Further to this function, it has also been taking the necessary administrative steps for the request for services offered by the Provincial Government in the aid programmes for dependent people (accommodation, day centres. economic aid support for to dependence...). Such endeavours are part of the work in the area of Social Services, given that the City Council focuses its efforts, in keeping with the laws of our Autonomous Region, on helping autonomous people as well as on the promotion of activities aimed at enhancing autonomy and a healthy life for its elderly citizens, and, by extension, for its population as a whole.

This means promoting the maintenance of the elderly in their environment wherever possible. Activities such as Home Assistance,

Social Accompaniment (for elderly people who do not have a sufficiently strong social network and / or suffer physical limitations that make their daily life difficult), and the programme for cohabitation between elderly people and students (to promote solidarity through cohabitation and intergenerational relations), stand out. And, with regard to dwelling facilities for elderly people, it is worth highlighting the offer of housing for rent or apartments for people over 65, in areas of community use.

1,718 people were attended to by the Home Help Service in 2008. That represents 4.64% of the elderly population. Almost eight of every ten users of this service are women, 62% are over 80, and almost 6 out of every 10 are in a situation of physical dependence. Time intensity, defined as the number of hours of monthly attention per user, is 21.27 hours per month, per user (which is above the national average of 16.94 hours per month, per user).

Table 9.- Home Help Service, 2008

Population age >65			37.041
Users and applicants		Cost and Financing	
Total applicants	616	Public Price(euros/hour)(working/non working day)	17,53 / 20,45
Total attended users	1.718	Monthly price/user (euros/month)	375,69
Disabled Users	1.016	Copayment met by user (Percentage)	11,80%
Coverage Ratio((Users/Population.>65)*100)	4,64	Content and Quality	
		Provided hours (year)	438.464,97
Users age >80	1.059	Hour Intensity(average hours/month/user)	21,27
Female users	1.361	Economic aid for homecare as sistance	
Female users age>80	886	Total attended users	1.718
User average age	80,7	Disabled users	1.016
		Annual Expenditure/user (euros/year)	4.508
		Subsidized hours (year)	386.726,10

Source: City Council of Donostia-San Sebastián. General Directorate of Social Welfare.

Another Home Help Service is Tele-Assistance. Tele-Assistance, as an assistance service complementary to home assistance, can become a key element for the promotion of personal autonomy and support for maintenance in the normal

environment of people who are fragile. In this case, some 1,950 persons were attended to in 2008, which represents a range of coverage of 5.26%. This is above the national average for the same year, which was 4.72%.

Table 10.- Tele- Assistance as a Public Service, 2008

Tele- Assistance Users and Applicants	
Total users	406
Total attended users	1.950
Coverage Ratio (Users/Population.>65)*100)	5,26

Source: City Council of Donostia-San Sebastian. General Directorate of Social Welfare

Home Help Services include economic aid for care in the day-today environment, for which some 1,397 requests have been made, economic aid for personal assistance, for which some 286 requests have been made, and aid linked to the service for people who are physically dependent (113 requests).

Table 11.- Other Home Help Services, 2008

Economic aid for home care assistance					
Total applicants	1.397				
Disabled users	100%				
Economic aid for personal assistance					
Total applicants	286				
Economic aid for dependency services					
Total applicants	113				
Total attended users	100%				

Source: City Council of Donostia-San Sebastian. General Directorate of Social Welfare

Day Centres constitute a fundamental resource for the maintenance of elderly people who are physically dependent, in their day to day environment. They are provided with therapeutic attention, without any interruption to their daily life,

friendships, family, neighbourhood and day-to-day environment. In Donostia-San Sebastian there are some 23 such centres, that cater for some 281 requests from persons for such services.

Table 12.- Day Centres, 2008

Centers and Applicants			
Total Centers	23		
Public			
Private	23		
Total Applicants	281		
Annual Expenditure in activities and maintenance (euros/year)	544.884,69		

Source: City Council of Donostia-San Sebastián. General Directorate of Social Welfare.

Table 13.- Residential Services

Total places in Residential Care Services	247
Places in Residential Care Centers	86
Disease in Alternative Hereine	404
Places in Alternative Housing	161
Places in Supervised Flats	158
Places in Public Foster Care	3

Source: City Council of Donostia-San Sebastián. General Directorate of Social Welfare.

Special Housing facilities (supervised flats) have been granted to some 234 users who are being taken care of, which represents 0.63% coverage. All

these users are autonomous people and all those places of residence (120) are public entities.

Table 14.- Special Housing Facilities (supervised flats), Users and Requests

Users and Applicants		Cost and Financing (euros/year)		
Total applicants Total attended users	97 234	Public price per place (euros/year) Copayment (met by user) (Percentage)	11.858,4 42,15%	
Disabled Users	0	Content and Quality		
Coverage Ratio				
((Users/Population.>65)*100)	0,63	Total Flats	120	
		Public	120	
		Private	0	
		Total places	158	

Source: City Council of Donostia-San Sebastián. General Directorate of Social Welfare.

Another alternative system of accommodation that the city has are Residential centres for people who still have physical autonomy. In 2008, San Sebastian had 64 such residences, with 86 available places.

In keeping with our philosophy of a very human city, where citizens, especially the elderly, can move around easily, our city has a Sustainable Urban Mobility 2008-2014, and an Accessibility Plan (approved in 2005), which is in the process of implementation. Among the lines of action carried out, we must note access to all areas of the city via public transport, minibuses to high districts, low platform buses, many lines of action in the area of vertical transport (installation of lifts, ramps or electric staircases) elimination of architectural barriers. broad sidewalks, with anti-sliding mechanisms, in good condition and free of obstructions, dips, exclusively pedestrian streets. and establishment of 30 areas\*\*. installation of traffic lights in the busiest streets of all districts in order to avoid pedestrians being run over, etc.

As well, the City Council of Donostia-San Sebastian is an active instigator of AENEAS, the European Project for Sustainable Mobility for people over 50, where training and physical mobility activities are promoted.

Donostia-San Sebastian is therefore actively behind the active participation of older people through different sporting and cultural activities...at cultural centres, sports centres, etc. through its support to associations of older and retired people, and through its "55 and Over Programme". The aim of this programme is to promote the of older participation people community activity, to offer channels for the organisation of these activities and receive, inform and orient people about the alternatives that exist in the city as far as leisure and free time are concerned.

In this sense, there also is room in the city for initiatives from other entities, such as the Escuela de la Experiencia, promoted by the Fundación Matía, the University for the Elderly, the Promotion of activities and cultural forums or lines of action linked to health care and encouraging the elderly to do voluntary work.

With regard to associations, in San Sebastian there are some 172 associations linked to the social Area. Of those associations, 18% are devoted to older people (31 entities). These associations are crucial to functioning of the social network of the city. The focus groups analysed highlighted the importance and utility of these organisations in the daily life of older people.





# IV. DONOSTIA-SAN SEBASTIAN - AN AGE-FRIENDLY CITY: **ANALYSIS OF FOCUS GROUPS**

This section is a synthesis of all the information garnered from the focus groups organised in the city of San Sebastian. The information is structured in keeping with the eight areas of research-action already outlined. The first point highlights the aspects of the city that can be generalised and that go beyond the specific areas.

#### **GENERAL ASPECTS**

Life in Donostia-San Sebastian for older people is positively assessed. The city has many aspects that make cohabitation pleasant. San Sebastian is in many ways a singular city, which makes life easier for older people, though there always are aspects that can be improved. In the description of what the city is like for older people the assessment is a generally positive one.

#### i. **Positive aspects**

Here are some of the most positive aspects of the city as described by many:

• Its size: Donostia is considered a small city, which is considered a very positive factor in terms of making for an age-friendly city. Its dimension is such that availability of services for all citizens is close and easy.

Aesthetically pleasing: the city, thanks to its natural characteristics, is a beautiful place. It also is a very well taken care of city. Most people speak of its aesthetically pleasing features, which always appear as an important value for a friendly city. Most talk about the beauty of the city, its "natural" beauty, "artificial" beauty, in reference, most of all, to the city centre, the

- most touristy and visible part of the city (the Old Quarter, the Centre, Gros, Miraconcha, the Old Part).
- topography lts geographic location: It is a city and where the sea mountain are not far away. Enjoying a walk along the beach, with the games that can be played there, path trekking and enjoying nature in the mountains also appear as a very positive aspect of the city. For older people, a sector of the population that has more free time on its hands, most often, these natural spaces, where leisure can be enjoyed free of charge, are very important, and all this helps to make San
- Sebastian a city with the intrinsic facilities to make it part of the World Network of Friendly Cities.
- Its evolution and progress: another positive aspect highlighted is the fact that it is a city that has evolved a great deal in recent years. In all the focus groups, mention is made of the progress of the city, especially in terms of infrastructure. The efforts of the administration are being appreciated by the inhabitants of the city.

The focus groups also point to certain negative aspects. Donostia is, general, an age-friendly city, but many aspects can still be improved.

#### ii. **Negative aspects**

Among the general negative aspects of the city, the following stand out:

Its inequalities: San Sebastian city in which comfortably depends heavily on the personal situation of its citizens and the district where they live. It ceases to be a friendly place for people who are not in good health, who live alone, who are physically dependent, or whose purchasing power is low. But it also is not that friendly for people who live in high districts or districts far removed from the city centre.

The view of the city may be radically different even from people who live in the same district or building.

This is extremely important when it comes to analysing Donostia as a friendly city that still needs to make progress in the elimination inequalities, beyond its paradise-like features, which are held in such high regard by visitors.

 Price: San Sebastian is expensive city. The level of average pensions is higher than the national average, but even so prices in the city are high. There is too great a disparity between the size of pensions and the cost of any kind of services. To live in Donostia as an elderly person with an old-age or widow(er)'s pension is not easy. Many older people say that they suffer economic exclusion since they cannot enjoy many resources the city offers.



#### 1. OPEN AIR SPACES AND BUILDINGS

For a friendly city, it is very important to have comfortable open air spaces for the enjoyment of leisure and for interaction with others. Accessible places, which are safe, well lit and properly maintained are essential elements for the community life of the city.

#### i. Parks as places for meeting and leisure

The focus groups are generally satisfied with the number of parks available for the enjoyment of free time in the city. Parks are widely used by older people throughout the day, and are a true engine of daily activities, a fundamental scenario of their life. They meet each other there

and spend much of their leisure time there. These green spaces are widely used to share moments with their grandchildren, as well as by those older people who help to take care of those children. The shared experience in these places is highly positive.

#### Parks for the elderly

An innovation in some parks, which has been very positively assessed, is the idea of parks for the elderly, places for games and exercises, specially earmarked in specific zones. It is an initiative that is much appreciated given its aim of promoting health, as part of social relations and there is a request that this be extended to all the green areas of the city.





#### Public toilets

The only negative aspect made mention of in the groups with regard to the green areas is the non-availability of Public toilets. The elderly affirm the need for toilets in parks..

#### ii. Aspects linked to traffic

#### Narrowing of streets

One of the questions touched upon in the meetings was the traffic problem that stems from the narrowing of streets. People who are physically dependent face the difficulty that stems from the fact that ambulances cannot access where they live. Given that it is a resource they use with frequency, it is a source of real concern for them. Such situations of anguish can cause even greater anxiety in people who are already in a situation of relative fragility. Add to this the problem of limited parking areas, since there are no areas to park to allow the disabled or people with functional diversity to get into and out of such vehicles. This is a source of really great concern especially for those who take care of physically dependent people.

#### Reserved parking areas

Reserved parking areas for the disabled or physically incapacitated was another question frequently evoked in the meetings with the focus groups. People who use such parking areas say that there are few spaces available to them. Furthermore, it appears that those areas are often not respected or badly used.

#### Traffic lights

Elderly people denounce that the time allotted to pedestrians for crossing is often too short, with the result often being that an elderly person might still be crossing the street when the light changes to green, provoking further anxiety, and often resulting in that elderly person falling.

#### Bicycle lanes or "bidegorris"

All the groups view this measure positively, but also point to inconveniences. The special bicycle lane has often been criticised as a source of physical danger. In many areas, the bicycle lane occupies the sidewalk. So pedestrians and cyclists share the same space, which results in very obvious inconveniences for both.

#### iii. The importance of **Public toilets**

The availability of clean toilets, strategically located, accessible and clearly indicated, is a feature of a friendly city. The Public toilets that exist in Donostia are well taken care of and clean, but available during very short, very limited, hours.

#### The streets of the city iv.

## • The state of the sidewalks and dips

The sidewalks of Donostia are very well taken care of, and virtually bereft of obstacles (save for the bicycle lanes which are often absorbed within the sidewalk, thereby leading to situations of danger in many areas, as we have already mentioned). Sidewalks are being made broader and broader, leaving sufficient space for pedestrians, even though that can often cause problems for the free flow of traffic in the city. Dips for crossing the driving area of the street have also been positively assessed. Almost all the areas of the city have dips, which makes it possible for the use of wheelchairs at street crossings, even though there still are some street crossings that present some difficulties.

When such public spaces do not exist, people are forced to use the rest rooms of a bar or restaurant. But in order to use the rest rooms in such an establishment they are obliged to have a drink or something to eat, or put up with the unpleasant looks of the managers of such places, and it is often forbidden to use those facilities in such places.

#### Pedestrian crossings

painting used to mark out pedestrian crossings often is slippery, so that when it rains this can lead to people falling. It is something that must also be borne in mind for cyclists, because it is often said that pedestrian crossings are dangerous for cyclists, and it often leads to dangerous practices, such as crossing in areas not set aside for it, with the evident risk this entails.

#### Road works

An important factor that often makes access to streets difficult. Many of the focus groups repeatedly say that San Sebastian is a city where there are constant road works, which makes it difficult to get to or go through certain places. We must bear in mind how important habit is for so many elderly people.

#### Trees and gutters

Other problems mentioned in the focus groups were the trimming of trees and the cleaning of gutters. Some expressed their concern for

both questions: trees that cover the sidewalk and which are not often trimmed, and gutters that need to be cleaned because they overflow when it rains heavily.



#### The beaches ٧.

It is frequent to walk along La Playa de la Concha and come upon a group of elderly people enjoying a walk along that area. Many play frontón, have taichi classes, do exercises, have a swim or simply take a leisurely walk. The beaches of San Sebastian are places for the enjoyment of leisure, and, most of all, to do exercise and so maintain a good level of health. Some of the people in the focus groups spoke of their daily

experience in these places. In the morning, outside of the summer months, the beaches are taken over by elderly people as one of the best places for leisure enjoyment.

Many elderly people of Donostia have never visited the beach in their lives. It is usually the case of those who live in districts far removed from the centre people who are physically dependent, who often live in the seclusion of their homes.

#### vi. The Cemetery

The present model of funeral parlours has been severely criticised. As far as San Sebastian itself is concerned, the problems derive from the organisation of the municipal cemetery, linked to the lack of space and "impersonal" nature of the system.

### vii. Safety of citizens

A feeling of safety in the environment in which one lives has a direct and immediate bearing on people's willingness to move around in the community. This, in turn, has bearing on independence, physical health and integration, and subjective well-being. The reality described by the elderly people who took part in the groups is that the city of San Sebastian is not a city where citizens can be said to be unsafe. Most people feel safe in the streets of the city and feel that there are few places of conflict or danger.

We do find though, that in the mental outlook of many people, many places are perceived as "places to be avoided", such as the underground passage around Egía. Going out at night also often generates much fear among older people, especially older women, not because of any real possibility something of happening, but because such places isolated. are without many inhabitants, and deserted streets.

In most cases, when they talk of danger in the streets, the focus make groups reference to immigration, and often fall back upon stereotypes about immigration. The

foreign population of San Sebastian is 5.82% (2008), just about half of the national figure (10%), though increase in the foreign population of The Basque Country has been very sharp in recent years. It is also worth pointing out that 55.1% of foreign women work as domestic servants, taking care of people, or as cleaners.

#### viii. Living in the centre

Over a third of elderly people in Donostia live in districts in the centre of the city (Centre and Gros). This is a crucial factor for the study we have carried out. The characteristics of this area, in every sense, from a purely topographic standpoint, to the strictly functional sense of municipal services, favour cohabitation among elderly citizens as well as their participation in the community. A factor most positively assessed here is the fact that many streets have been made pedestrian. Walking along the streets without the concern of vehicular traffic is a feature of a friendly city, though it also involves the problems of access already mentioned (the case of ambulances and delivery). The centre is the part of the city that is best taken care of; it is the "post card" so often alluded to by the elderly in our focus groups. It is a very pleasant and clean area that boasts green spaces and places of rest.

Another characteristic that makes the centre one of the most friendly areas of the city is the existence of small shops and businesses. Elderly people often do their daily shopping and groceries in small shops near their homes. In the centre, and older districts of the city, small shops and businesses continue to

be crucial. For older people, there is comfort in the proximity of resources, but very often what is most valued is that relationship proximity, of confidence, complicity, between shopkeeper and customer, something that has been forged over years.

Though the centre has been positively assessed by all the focus groups, the latter also pointed to areas they think can be improved, such as the limited access, at present, not only to pedestrian areas, but also to the central areas of the city from other parts of the same, especially via private vehicles. The problems of parking and heavy traffic are also important in terms of access to the centre. The city council has, for been some time, promoting displacement to the centre in public transport, so as not to bring the city to a standstill.

Another negative aspect is the slippery cobble stone surfaces of the pedestrian areas. When it rains, which it does frequently in Donostia, area pedestrian the becomes dangerous, because of the slippery cobble stone surface.

In the centre of the city there are many old buildings that do not have lifts, and where it is impossible to install them in the interior of such buildings, and where all there is the even more dangerous possibility of attempting to install them on the outer façade of an old building in the centre.

Even though, in the centre, there are some shared open air spaces, they are not sufficient for all. These spaces are pleasant, clean, and have areas for rest. Most of all, benches are needed, where one can stop and rest.

#### ix. Living in the high districts

Living in the high districts of the city is more and more friendly. Much has been invested in the level of accessibility to these districts. The high districts of the city are characterised by high, steep slopes, which requires a significant physical effort and elderly people are more limited in their capacity to make such efforts. The huge improvements in accessibility to these districts have been, mainly, in the installation of mechanical staircases. lifts minibuses. Everyone is full of praise for these initiatives on the part of the city. Moving around in the high districts is now an easier task.

But the reality is that in the high districts of the city older people continue to have problems of mobility (slopes). These problems often mean having to change place of abode.



Lifts and mechanical staircases have contributed greatly to mobility, but they still are limited. Some older people call for more benches or places for rest in the shade, along these interminable slopes.

Many of the elderly people who live in these high districts do not often go to the centre of the city, or to the beach. It is necessary to facilitate their interconnection with the life of the centre of the city.

There are, therefore, many differences and inequalities between the more central districts and the more peripheral districts, access to which is more difficult. In this respect Donostia is a city of contrasts.

#### x. Public buildings and small businesses

As it does with the progress made in infrastructures in the districts, general population also appreciates overall progress in the accessibility to public buildings. The vast majority of public buildings are now accessible for all people, regardless of physical condition, though mention is also made of a crucial factor in terms of inherent facilities: the absence of benches or chairs on which to sit (groups mention the case of museums). There are special lifts and toilets in these buildings.

The problem lies in certain commercial buildings (shops, bars, restaurants). Old buildings or places, many of them located in the city centre, usually present certain problems: many shops have a little step-up at the entrance, and there even are many restaurants where access is via small stairs with several flights.



#### 2. TRANSPORT

Transport constitutes a key element for active ageing. This is linked to several areas of the discussion, mainly social participation and access to public services. In this section, we present information on the public and private vehicles used by older people to move around in the city.

#### i. The omnipresent bus

The mode of public transport most used by older people to move around the city is the bus. San Sebastian has a dense network of urban bus-lines that links most of the city's districts. There are many bus-lines and they go virtually every place acceptable frequency, though users always claim that improvements can still be made. Most of the elderly population are satisfied with this type of transport.

Though the general assessment is positive, there also is the idea that there is lesser availability and frequency in the more far removed districts. There also are certain inconveniences when it comes to getting passes for a more economic use of this service, since it often requires opening an account in one of the banks suggested by the City Council, which often is a burden for many people, not to mention an object of criticism and resentment.

Lack of information to citizens with to the public transport possibilities is an important problem.

A positive aspect, well known to some participants, is the Single Ticket, or Txartel Bakarra, which really is an attempt to simplify all the possible passes in one. The possibility of travelling with the same ticket on buslines within the city, on lines that serve the outskirts of the city, on trains, as well as outer city trains. It is a measure that is still in the process of being elaborated and adopted, but it has been favourably welcomed by users.

Transport accessibility: the fleet of municipal buses of the city of San Sebastian includes vehicles of different varieties and characteristics. Buses that have been renovated recently have their own access systems, which are better suited to the needs of the different types of users. The focus groups positively assess all measures aimed at facilitating entry and exit to and from a vehicle (hydraulic systems, ramps). However, these measures, which exist in many buses, are only used when the user is someone on a wheelchair.

The reference to "upward access" is This problem is very significant. worsened when the bus stops far from the stop. Here, the distance between the bus door and the sidewalk constitutes a physical danger, distance fraught with uncertainty, fear, insecurity. Having the bus pull up on the edge of the sidewalk, alongside the bus stop, is very often made difficult by the fact that cars might be parked adjacent to the bus stop.

Another important aspect of managing this type of public transport has to do with the speed at which the vehicle is moving, when it brakes, and the period of time envisaged for passengers to get in and out. Getting onto and off the bus is already a problem in itself, and the distance that has to be covered in order to do so is as well. Such vehicles must be gently driven in order to avoid situations of insecurity.

Furthermore, the focus groups also speak of the limitations, for the elderly, with regard to getting to the intercity bus station.

# ii. The taxi as an alternative resource

The taxi is mainly used by people with some kind of limitation or problem, or by elderly people with some level of wealth. The taxi is, for most, an expensive resource and is only used on specific, concrete occasions.

# iii. The ambulance for displacements for health reasons

There is an ambulance service that is used by many people when the motive for displacement is hospitalisation or a visit to the doctor. This service is positively assessed by all the groups, especially by those charged with the care of physically dependent people.

#### iv. The private car

When there are limitations, or no health related motive for displacement, family vehicles are crucial. This generates, in many cases, specific needs for people charged with taking care of others, or support people, time such as (compatibility with working hours) or the availability of preferential parking spaces (to get the people they are accompanying into and out of the vehicle).



# v. Public parking lots in the city

One of the main problems of moving around the city by car is parking. In the centre, and districts close to it, there are regulated parking spots (pay and display parking areas), for which users have to pay depending on how long they are going to be parked. Disabled people can benefit from a special card, at a different price, but there is no kind of aid or subsidy for older people.

In San Sebastian there are four non-regulated municipal parking lots connected to collective public transport (free public parking); they act as dissuasive parking lots. There also are underground parking lots in the city. Some of these parking lots are those that are located in the centre of the city. The main problem found with these places is that many of them are not adapted for the disabled. There are underground parking lots that do not have a lift.

#### 3. HOUSING

The state of housing is fundamental for the preservation of the autonomy, security and well-being of the elderly. One of the aims of public institutions is to make the motto "Age well at home" a reality, a motto that was spread by the OECD during the 90s. According to data, 90% of the elderly Spanish population wish to continue living in their usual homes, even when they might need assistance (Survey on Living Conditions of **Elderly** People, IMSERSO-CIS, 2006).

#### i. The problem of accessibility

To speak of housing is to go beyond the strict concept of one's place of a abode. It also implies referring to the immediate environment (one's neighbourhood) and to the wider circle constituted by the city.

The greatest difficulty with regard to housing is accessibility and many households in San Sebastian have problems of access. The biggest obstacles are to be found in old, unadapted buildings. 26.5% of elderly Donostiarra citizens live in a building constructed sixty or more years ago (Census, 2001). The public administration is trying to solve the problem of adaptation via different initiatives.

#### **Buildings**

The non-availability of a lift is the major barrier these buildings have, in terms of residents exiting to the street. According to 2001 Census data, a third of the elderly population live in buildings of more than one floor, which do not have a lift. The City Council and The Provincial Government grant economic aid to neighbourhood communities that decide to install a lift in their building (20% of the total budget, without VAT) but a series of requirements have to be met. When one or more people over 70 live in such a building, the conditions demanded by the city council are relaxed and made easier to meet.

There also are problems of access in buildings that have a lift, such as flights of stairs that have to be surmounted. The City Council offers economic assistance for the placement of ramps and platforms in buildings that have such drawbacks. However, solving the problems of accessibility (lifts, ramps) involves additional difficulties in terms of the cost of such installations, such as agreement and consensus among residents, architectural features of the buildings, etc.

There is a Red Cross service whose aim is to help people in wheelchairs to make their way up to and down from their homes in buildings that do not have a lift.

### Homes

In addition to the problems of access to homes, there also are problems of adaptation inside such buildings. In the present design of such buildings, in terms of the architecture of the interior. the difficulties that arise in the course of the vital stages of a person's life are not taken into account. With old age, one's physical capacity inevitably becomes more and more limited and the possibilities of moving about in a nonadapted home become more and more restricted.

The adaptation needs of a building are, many cases. complex in consequently, costly in every sense. Although there also is assistance for the adaptation of buildings, they are quite limited and not everyone is aware of them.

# ii. Repairs and maintenance

Buildings in which elderly people live are often old and require constant upkeep. The simplest repairs to a home can become a major hurdle, many elderly people can't resolve these situations by themselves, and seek aid in families, neighbours and friends - the help network to solve all those problems public administrations can't.

# iii. Change of housing

When the problems of accessibility to housing and the environment become unsustainable, some elderly people take the decision to change their place of abode.

Change of place of abode brings with it certain problems of loss of roots, inadaptation, the severing of links with the network of neighbours and familiar shopkeepers, etc, and generates a

greater feeling of insecurity, all of which can affect one's state of mind, people's involvement with the environment, one's very health, not to mention the economic problems derived there from.

# iv. Accommodation alternatives

The focus groups also spoke of some of the possibilities of housing they contemplated in the event they might need assistance. The first option, the favourite, always is to carry on living in one's own home with the help and adaptations that might be necessary. Maintaining one's autonomy independence in as much as that is possible, and being close to the support network (sons and daughters, and neighbours).

A Home always appears as the last option, and when it does it is exclusively for cases of obvious necessity, when a person can't help himself or when his level of cognitive awareness is clearly affected.

The groups also positively assess the construction of buildings that are specially adapted, which the City Council placed at the disposal of people who need to change their place of abode.





# **NETWORKS AND SOCIAL SUPPORT**

Social relations important are throughout the course of the life of all individuals and even more so in old age.

# The family

The family usually is the main social network for elderly people. The tasks of taking care of family are especially important for our country. The value of family solidarity and of the concept of reciprocity is a fundamental element of the structure of our society, in which the family continues to be the unit of reference for the elderly, for receiving help as well as an object of solidarity.

# Informal support given

Among older people, the act of family solidarity most often performed is taking care of grandchildren. According to data from the Survey of Living Conditions of Older People (IMSERSO-CIS, 2006), among those elderly people that have grandchildren, three out of four (72.5%) say they have helped their children in the daily care of their own children, either at present or before.

Apart from taking care of grandchildren, as an activity in the life of grandparents, the repercussion on the family economy is also clear. That need for support, economic with its consequent advantages, often stems from the rigidity of kinder garden time schedules, usually incompatible with the hours of work of their parents.

But the help elderly people offer their families isn't restricted only to the care of grandchildren. There also is an important network of informal support from the elderly to their families.

# Informal support received

This support is, normally, reciprocal. The elderly help their sons and daughters, and vice versa. In the case of social helpers who take care of physically dependent or fragile people, the weight of such help also is considerable.

In our society, the care of the elderly is something that falls mainly upon the families and. fundamentally, nogu women. The scarcity of social resources specially adapted to certain personal needs and the staunch refusal of some of them, such as special homes, lead to such a situation.

# **Neighbours**

Another important support network for the elderly, especially for those who live alone, is the help of neighbours. times, neighbours can considered a kind of extension of the family, and the level of dealing with them often is in keeping with normal family dynamics.

# iii. Shopkeepers and small businesses

Another important support network in the life of the elderly is that offered by shopkeepers. The owners

attendants of the small businesses to which they go on a daily basis constitute an important element within the social relations environment.

The social value of these spaces leads the Administration to contemplate the possibility of using the advantages of the social network built up around traditional commerce to halt the very serious incidence of isolation, the shortage of resources, etc...As well, the option of using small businesses as a of information about the place possibilities the city offers elderly people, is also being considered.





### 5. WORK AND PARTICIPATION

Social participation is closely linked to good health and well-being at every stage of life. The concept of participation is a central point of focus of the Active Ageing paradigm.

Encouraging the social participation of older people in all areas of the community and favouring maintenance of health means advancement in the social and economic progress of society. "The are а new force development" (Kalache, A., El País, 26 January, 2004).

#### i. Employment and retirement

Work is, without doubt, the main source of identity in contemporary society. It is worth noting that the process of the loss of identity associated with the closure or ending of an activity is much more deeply felt in men, for whom such a severance is greater. The woman, as boss of the never retires. unless house. circumstances force her to. These differences correspond, in greater measure, to the older generations, though it is highly conceivable that in the future there is going to be far more similarity in the life stories of men and women as far as the labour market is concerned.

Some elderly people, when retired, feel "free" to carry out activities they had been forced to put off while they worked, or, simply, to enjoy a well deserved rest. For others, retirement is perceived negatively, as a process

which strips one of a major element of identity.

The desire to continue to be linked to some kind of "productive" activity is very strong, and must be encouraged (properly channelled even) in the interest of achieving the objective of active ageing. The elderly, when retired, possess an important potential for the development of activities, as can be seen in their participation in certain voluntary work endeavours, or the significant number of associations in San Sebastian within that sector of the population.

# ii. Voluntary work endeavours

In Spain, voluntary work endeavours are considered another social service, not as an activity related to leisure or culture. In fact, in this country there is a need for aid to voluntary endeavours. The lack of social makes resources it absolutely necessary for NGOs to lead support endeavours for the most unprotected.

In voluntary work endeavours carried out. certain clear differences are evident between what is done by men and what is done by women. Women usually go in for work more linked to social assistance, while men go in for more recreational voluntary endeavours.

### iii. Free time

How free time is used is very much conditioned by social and generational factors. The level of education received, social differentiation between the

activities for men and for women, the state of health derived from their the habits. or same social stereotypes, are factors that have a very heavy bearing on how the present generations of elderly people spend their free time.

# Activities

One of the daily activities that most frequently appears in the talks we have had with the focus groups of elderly people in Donostiarra is walking.

There are clear gender differences between elderly men and women. The activities carried out by both are generally marked by their life stories. The majority of elderly people live this vital stage of their lives, when they have more free time on their hands. with the desire to enjoy their leisure time, to have a good time, meet people and do interesting things. Dancing is one of the most pleasant and most frequently carried out activities.

# **Obstacles**

Health is the major barrier towards enjoying leisure activities. A major aspect, also reflected in our focus is the low level groups, participation of physically dependent people in leisure activities.

We pointed earlier to the markedly character economic of leisure. Almost any leisure activity represents an economic cost for the person doing it, a cost which can prove excessive for people with low incomes, though we must also mention the free activities offered specially by the city to the elderly. On top of the economic problem are problems of family responsibilities, fundamentally linked to the care of grandchildren.

The idea behind the development of intergenerational programmes is to put an end to the separation and prejudices held by young and old, and get them to share spaces and activities so they get to know each other better and can communicate with each other in conditions of equality.

# Associations: homes and clubs

Among the positive aspects of "homes", we must point to the development of social relations, cooperation networks of different types, where the elderly can indulge in anything from the most pleasurable activities (playing cards) to the satisfaction of primary necessities (the Home as a restaurant for people with scarce economic resources). They are, also, places where information can be given on certain leisure activities outside the association and how they are promoted.

As for the negative aspects, problem of accessibility of some places was often mentioned. Limits to the amount of places available were also criticised, as well as, especially, the types of activities carried out.







### 6. RESPECT AND SOCIAL INCLUSION

Breaking with stereotypes and preconceptions is a fundamental step in the search for the integration of the elderly in the social life of the city.

# i. Respect and a proper level of dealing and interaction

Elderly people feel respected. recognised and, generally, included, but, on the other hand, many feel a lack of consideration from the community, in services and in the family. Factors such as education, gender, state of health and economic status play an important role in perception, as does the level of participation of the elderly in the social, economic and civic life of the city.

# Respect from other generations

When we talk of respect we refer generally to children and young people, and different positions are found on the question.

Difficulties are also mentioned with regard to the maintenance of relations with young people, within and outside of the family. Young people and adolescents usually are a problematic sector of the population, in terms of relations with groups of other sectors - adults and the elderly.

The bus is a setting where there is much discussion about respect. It is a place where all the premises with regard to respect and intergenerational relations are played out. In the bus, there are seats reserved for the elderly. It is not something that is always observed. They are not always respected and, very often, other passengers do not leave such seats free for occupation by the elderly.

As has already been mentioned, the relationship between small businesspeople and the elderly is very important. It is a relation that is usually cordial, in which a bond of respect and affection has been forged.

# • Respect from the Public Administration

The treatment offered from the public services of the city, for health or social services, is perceived as unsatisfactory.

The focus groups speak of a type of treatment that is deemed inadequate or "ill- treatment", which is frequent and recurrent in the social and health system: it consists in treating the elderly as children, which often manifests itself in ignoring that elderly person, where the person accompanying the elderly citizen is established as the valid interlocutor, that elderly person being branded as incapacitated, which is very often not the case.

# ii. Social exclusion

Even though the target groups often spoke of the opportunities available to the elderly of San Sebastian in terms of social and community participation, they also pointed to moments when they have felt rejection and exclusion. In this section we include some of the areas where the San Sebastian elderly feel excluded. The elderly of San Sebastian clearly note however that

San Sebastian is a city that takes them into account.

# Exclusion at work

As they get older, most people cease to be considered fit for work.

"Older workers" are replaced by younger ones, who are "cheaper", more "flexible", though inexperienced.

# • Exclusion in family life

The most generalised pattern is the lack of consideration of the opinion of the elderly in family affairs, and, quite often, even the impossibility of expressing their opinions, especially when that elderly person is fragile or physically dependent.

# Economic exclusion

Donostia is a city of high prices ("expensive city" "elitist city"), which leads to many elderly people not being able to enjoy many of the opportunities offered by the city.

In some cases, people with the lowest pensions find it difficult to meet the most basic needs.

# Barrier with the language

Most elderly people that participated in the focus groups can only speak Spanish (they grew up in an era when Euskera was prohibited) and today, Euskera is, along with Spanish, the official language of the Basque Country, and the language that is taught at schools or ikastolas to boys and girls.

The language obstacle for elderly people is mainly found in their own homes, since the greatest distances lie between children and the elderly, grandparents and grandchildren. There also are specific households where Euskera is the prevalent language in street signs and squares.



### 7. COMMUNICATION AND INFORMATION

Lack of information, or inaccurate information, can lead to social exclusion. The fact that the elderly of San Sebastian are aware of the possibilities offered them by the city is absolutely essential for development of the use of resources and participation in every domain of activity.

information However, aimed at potential users doesn't always reach them effectively, the focus groups claim. There are many opportunities that are unknown to inhabitants of the city, and, therefore, many of the efforts carried out are wasted, and consequently, many possibilities of participation for the elderly are also wasted.

## i. Transmission of information

From the Administration, the information that is meant for citizens is not well passed on, often not even to the public servants charged with task transmitting the of such information.

The most appropriate means for getting to the elderly, according to the groups analysed, is mouth to mouth, personal interaction, direct, telephone, radio, television, or by traditional mail.

# ii. The digital gap

The use of new information and communication technologies on the part of the more elderly continues to be minimal. There is an important digital gap, or difference in the access to and use of these technologies amongst the more elderly sectors, which only underlines the low efficiency of these means, as well as their excluding nature, with regard to the elderly.

# iii. Adapted information

Communication aimed at the elderly must be adapted to the very diverse situations (health, level of education, economic condition, etc) of a population sector as heterogeneous as the elderly. Hearing and visual difficulties should not be an insurmountable obstacle for getting information of interest to these citizens.

The problem in communication often stems from an information excess.

# iv. Listening to the citizen

Another aspect linked to communication hetween the Administration and the citizen is the lodging possibility of complaints. According to focus group participants. communication with the Administration for the lodging of specific complaints is difficult.



### 8. SOCIAL AND HEALTH SERVICES

The health and social services system of a territory shape the formal structure of essential support for the maintenance of the health independence of people. The development, knowledge. accessibility and use of these resources contribute to the proper functioning of a friendly city.

#### **General perceptions** i.

The overall impression of the focus groups is that Donostia is a city with a good services system, and. in comparison with the rest of the country, it is one of the cities in the forefront in terms of coverage and quality of resources.

There are, however, areas that can be improved, such as coordination among social and health services, which is always clearly evident when one has to repeat, over and over, the formal steps necessary to request assistance. Other negative aspects, especially in the Social Services System, is lack of, poor, or inaccurate information (they call for better orientation) and the high price of many of the social services available (economic aid is focused on people with very limited resources) and the rigidity of office hours of the relevant centres.

# ii. Home Help Service

The Home Help Service for fragile or physically dependent persons promotes the notion of remaining in the normal place of abode, a preference shared by all the people who make up the groups and by the majority of the Spanish population.

In Donostia, many people use and value home assistance, but not many, indeed very few, in the groups actually use the public service offered by the City Council. The Home Help Service is marked by high prices, very rigid working hours and constantly changing personnel.

# iii. Day centres

Day Centres are another resource that favours permanence of physically dependent people in their familiar environment. The groups positively assess the existence of this type of which centre. are frequently recommended by the relatives of elderly persons.

Among the advantages, the support and "fresh air" they offer the person taking care of the elderly, that person his/her remaining in familiar environment, very personalised dealing and treatment, and the proper attention received there.

A major disadvantage is that they are centres for people with a high level of physical dependence, which excludes elderly people who are fragile or less physically dependent, but who also need help.

# iv. Special housing facilities (supervised flats)

Special housing facilities are offered to the elderly and the fragile, where different areas, spaces and services are shared. This type of housing is also positively assessed by group participants.

However, they also say that in the city of San Sebastian there are few housing facilities of this type. Another negative aspect mentioned is the high price of such housing.

# v. Homes

The general overall opinion with regard to this type of collective housing was negative. To go and live in a home is always viewed as a final option, when no other possibilities exist.

Though a resource that is normally scoffed at, when it is necessary to use this service difficulties also arise. Securing a place in a public Home is difficult, waiting lists interminable, and gaining admission is a complex endeavour.

Most of the Homes in Donostia, like most of the Homes in the entire country, are located far from city centres and districts where there is more vibrant community life.

Furthermore, there are many Homes. inequalities between Personnel is an element that has a great bearing on the quality of a Home. The quality of attention degenerates if the ratio of personnel per resident is low, or if staff aren't qualified, trained, motivated, or offered proper incentives. Another aspect that was heavily criticised, which is also linked to attention, is the lack of activities and programmes for residents.

# vi. Intermediate resources: An urgent need

One of the greatest shortcomings of San Sebastian, as perceived by group participants, is the scarce availability of intermediate resources. There is a void of social services designed for health (intermediate space between Homes, Day Centres and Residences) leisure and free time (spaces and activities for people who have taken early retirement and new generations of elderly people who refuse Homes).

On the one hand, group participants point to the non-existence of places for people who, though fragile, can still move around with autonomy, where the main aim is the maintenance of autonomy and guarding against dependence. Centres, or spaces within homes and traditional clubs, personalised programmes of attention and common spaces for activities and for the encouragement of social relations.

They also consider that there should be more spaces designed for leisure and free time where people of all ages can share activities.





# V. GENERAL OUTLINE BY AREAS

AREA	SUB-AREA	POSITIVE ASPECTS	NEGATIVE ASPECTS	PROPOSALS
GENERAL		- Small size city - Nice aesthetics - Geographic situation - Progress in infrastructures.	<ul><li>Inequalities: social, economic and between neighbourhoods</li><li>High prices.</li></ul>	
CES AND	PARKS	- Positively valued - Widely used	- Need for public toilets in all parks.	<ul> <li>Integrate parks for the elderly in all the parks of the city.</li> <li>Place parks for the elderly next to the parks for children.</li> <li>Integrate certain devices of the parks for the elderly in different spaces, outside the spots specifically designed.</li> </ul>
AIR SPACES BUILDINGS	TRAFFIC	Narrowing of roads:     * More space for pedestrians     * Nicer and more pleasant streets.	- Narrowing of roads: * Problems for parking vehicles.	
OPEN		- Reserved parking places. * Well valued initiative.	- Reserved parking places:  * There are few of them.  * They are not properly used.	- Reserved parking places: * Increase surveillance.
	TRAFFIC LIGHTS		- Limited time for pedestrians at certain specific junctions	<ul><li>Increase crossing time for pedestrians.</li><li>Install visual chronometers.</li></ul>

BICYCLE LANE	- Environment-friendly Initiative It encourages physical exercise and health care - Solves the problem of traffic jams	<ul> <li>Non sufficient layout.</li> <li>Unsafe when they share the space of the pavement.</li> <li>Little awareness of pedestrians and cyclists about the proper use of the lane.</li> </ul>	<ul> <li>Promote their layout to reach neighbourhoods on the periphery.</li> <li>Limit circulation speed.</li> <li>Improve signposting and visibility at difficult road sections.</li> <li>Raise awareness of pedestrians and cyclists about their proper use.</li> <li>Fine cyclists who ride on the pavement when they could be using the bicycle lane.</li> </ul>
PUBLIC TOILETS	- Clean and well taken care of.	- Little availability - Accessibility problems	<ul> <li>Increase their number.</li> <li>Expand opening hours.</li> <li>Facilitate the use of toilets in public buildings.</li> <li>Make bars, cafés, restaurants, etc., offer this service freely, without having to pay for a drink/meal first.</li> </ul>
	- Pavements and dips  * Properly taken care after and without obstructions.  * There are dips in almost all city areas	<ul> <li>Pavements and dips</li> <li>* Traffic problems as a result of widening pavements.</li> <li>* Bicycle lane shares space with pavements in certain portions.</li> <li>* Some dips are needed.</li> </ul>	- Pavements and dips * Create dips wherever necessary. * Improve the visibility of dips.
STREETS	- Crosswalks:	- Crosswalks: * Paint is slippery.	- Crosswalks:  * Use of accessible materials.
	- Works:	Works:     * Accessibility problems.     * Generate insecurity and isolation.	- Works:  * Limit the number of works through proper planning.
	- Trees and drains:	- Trees and drains:	Trees and drains:     * Improve planning for pruning of trees and cleaning of drains.
BEACHES	- Widely used.	<ul> <li>Certain groups of elderly people (those who live in outlying neighbourhoods or are dependent) do not reach the beaches.</li> <li>Poor cleanliness in winter time.</li> </ul>	- Promote and facilitate access for these groups.  - Keep beaches clean and well taken care after all year long.

CEMETERY		- Dissatisfaction with the new cemetery model.	
LACK OF SAFETY ON THE STREETS	- There are few problems.	<ul> <li>Passageway in the neighbourhood of Egia, is a specific conflict point.</li> <li>Negative stereotypes related to immigrants as lack of safety generators.</li> </ul>	<ul> <li>Increase police control in the Egia passageway.</li> <li>Promote social intervention and programs aimed at reducing immigration-related stereotypes.</li> </ul>
LIVING IN THE CITY CENTRE  - Pedestrian area promotes walking and shopping Clean, properly looked after and pleasant space Abundant proximity and reliable commerce.		<ul> <li>Parking problems and dense traffic.</li> <li>Problems for loading and unloading of merchandise.</li> <li>Access problems for emergency vehicles.</li> <li>Slippery paving stones in pedestrian area.</li> <li>Aesthetics outweigh accessibility (external lifts)</li> <li>Few open air spaces or public meeting places.</li> </ul>	<ul> <li>Adding dissuasive parking lots with public transport to frequent destinations.</li> <li>Modify delivery timetables in conflict streets.</li> <li>Increase the amount of public spaces and rest areas.</li> </ul>
LIVING IN HIGH NEIGHBOURHOODS	- Progress in accessibility by means of lifts, mechanic escalators and micro-buses.	Slopes generate mobility problems, changes of address and confinement.     Poor cleanliness.	<ul> <li>Provide benches and resting areas in streets with slopes.</li> <li>Use new elements with pleasant aesthetics.</li> <li>Promote communication and contact with the city centre.</li> </ul>
PUBLIC BUILDINGS AND COMMERCES	<ul> <li>Most public buildings are accessible.</li> <li>Regulations make accessibility to new premises compulsory.</li> </ul>	- Few benches or resting areas in public buildings and commercial premises Many old premises are inaccessible.	Provide benches in commercial premises and public buildings.     Encourage the adaptation of old premises.

TRANSPORTS	BUS	<ul> <li>General satisfaction about the urban bus network.</li> <li>Routes and frequency considered acceptable.</li> <li>Ticket prices (with card) are affordable.</li> <li>Positively valued: Single-Ticket</li> <li>New fleet of accessible buses.</li> </ul>	<ul> <li>Lower frequency and vailability in peripheral neighbourhoods.</li> <li>Problems to purchase cards in banks.</li> <li>Disinformation concerning cards for tourists and visitors.</li> <li>Complaints from the pre-retired, who do not have cards for the retired.</li> <li>Accessibility devices only used for wheelchair users.</li> <li>The general practise is that buses stop far away from the bus shelter.</li> <li>Complaints about the inaccessibility to the intercity bus station.</li> </ul>	<ul> <li>To have other cards or season tickets that could be bought at newsstands, tobacconists or bus stops.</li> <li>Use the accessibility devices for anybody having problems to get on / off the bus.</li> <li>Stop as close as possible to the bus shelter.</li> <li>Eliminate parking areas that prevent buses from parking correctly.</li> <li>Offer awareness programs for bus drivers to understand the difficulties for the elderly or for people with functional diversity who travel by bus.</li> <li>Increase time at stop so that the bus always comes to a halt when users leave their seats (or the places where they remain stable) and new passengers occupy their seats.</li> <li>Information given at bus shelters about the routes has to be clear, with the right size (readable) and in both languages.</li> </ul>
-	TAXI	<ul> <li>Resource used for people with limitations and with high purchasing power.</li> </ul>	<ul><li>Little availability of adapted taxis.</li><li>Disinformation about the "Bono taxi" season-ticket program.</li></ul>	<ul><li>Facilitate access for people with limited economic resources.</li><li>Promote the spread of more adapted taxis.</li></ul>
	AMBULANCE	- Resource positively valued by all the groups.		<ul> <li>Use this resource for free time and leisure purposes for dependent people.</li> </ul>
	CAR	- Family car makes up for the problems or deficiencies of public transport.	- Problems in the case of embers of the family who work.	<ul> <li>Create a public figure who would fulfil the task of driving/going with elderly people/with limitations to the doctor or to do paperwork</li> <li>Promote flexible working hours in companies for workers having relatives under their charge.</li> <li>Create parking places at specific places to help elderly people get into/out of cars</li> </ul>

		PUBLIC PARKING LOTS	- Dissuasive parking lots are well perceived.	- Certain underground parking lots are not accessible.	<ul> <li>Promote the existence of dissuasive parking lots next to the city centre.</li> <li>Create subsidies for O.T.A. (pay and display parking areas) for the elderly and for people with low income.</li> <li>Reduce public transport prices for those visiting the city centre who park their cars in O.T.A. area.</li> </ul>
	HOUSING	for the installation of and platforms.  * "Key-operated" lifts communities where agreement for the in text agreement for the installation.  * It is compulsory for owners to accept the installation of lifts in buildings.  * Service provided to Cross to help whee living in buildings were agreement for the installation.	*There are economic subsidies for the installation of lifts ramps and platforms.  * "Key-operated" lifts for communities where there is no agreement for the installation.  * Exterior lifts for those buildings where there is not enough space inside for their installation.  * It is compulsory for shop owners to accept the installation of lifts in their	- Buildings:  * Non existence of lifts in old buildings.  * In some buildings there are steps before you can reach the lift.  * Opposition by the neighbours' communities and by shop owners to the installation of lifts.	- Buildings:  * Adaptation of buildings (lifts, ramps, platforms)  * Assume and generalize the project of the Red Cross of assistance provided to wheelchair users to leave and enter their homes.
			- At home:  * There are subsidies to adapt	- At home:  * Public subsidies to adapt homes are limited and little known.  * Little use of resources aimed at adapting homes, as a result of ignorance about their existence and high cost.  *Problems to adapt rented dwellings.	- At home:  * To promote a new interior design that takes into account the different life stages.  * Duly inform about assistance possibilities to adapt homes.
		REPAIRS AND MAINTENANCE	- Families and community networks take care of this need.	- There are no services provided by the administration to care for this necessity.	- Create a figure, integrated within social services, to handle daily little repairs (change light bulbs, fix taps, etc.) or subsidize private companies for the management of this service.

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	MOVING OUT	- Moving into a more accessible environment improves quality of living.	<ul> <li>Change of place of residence very often implies the loss of social networks</li> <li>Current difficulties for buying and selling apartments/houses</li> </ul>	Offer advice for real-state buying and selling operations.
	HOUSING ALTERNATIVES	- The usual home environment is the type of housing usually preferred.	- Bad perception of old people's homes.	<ul> <li>Encourage the development of new alternative forms: for instance little residences where a group of people are taken care of, and where they pay for services proportionally.</li> <li>Finance some type of solution that prevents admission to big people's homes.</li> </ul>
AND NETWORKS	FAMILY	- Family is the main social network Important structure of mutual support.	- Family responsibilities take time from other type of activities Overload.	- Informal support provided:  * Improve possibilities to make work and family care compatible.  * Make nursery school time tables more flexible.  - Informal support received:  * Improve possibilities to make work and family care compatible.  * Take care of the needs of families having dependent people under their care.
	NEIGHBOURS	Neighbours' network considered as an extension of family network     Constant support.	- Progressive loss of neighbours' network in modern society.	<ul> <li>Modify the design of housing estates and community spaces to promote more interaction between neighbours.</li> <li>Foster the development of heterogeneous neighbourhoods to prevent segregation.</li> </ul>
SOCIAL SUPPORT	SHOPKEEPERS	<ul> <li>Little shop as a meeting point for relationships.</li> <li>Faithfulness and trust relationship between old people and shopkeepers</li> <li>Operates as Health control network for old people.</li> </ul>	- Progressive loss of small shops.	<ul> <li>Promote the presence of small shops next to housing centres.</li> <li>Take advantage of the potential they have: information point, control and detection agents for risk situations.</li> <li>Improve the accessibility of these small shops and adapt their interior installations to the characteristics of old people.</li> </ul>

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	EMPLOYMENT AND RETIREMENT	Most elderly people wish to keep on engaged in some sort of productive activity	- Compulsory retirements.	<ul> <li>Make retirement conditions more flexible.</li> <li>Promote the presence in the labour market of those older people who want to, promoting initiatives such as flexible working hours or limited working hours</li> </ul>
	VOLUNTEERS	-Elderly volunteers are generally satisfied Reciprocity relationship between volunteer institutions and Social Services NGOs detect and inform the public system about potential users.	<ul> <li>Elderly volunteers tend to get involved in activities accompanying other old people.</li> <li>Family responsibilities have an impact on participation in volunteer activities.</li> <li>There are gender differences in the volunteer activities practised: women tend to be involved in providing social assistance.</li> </ul>	<ul> <li>Promote other types of volunteer work, of a more leisurely nature, beyondassistance volunteer activities.</li> <li>Coordinate efficiently the volunteer activities network with the public Social Services network.</li> <li>Make use of these organisations to give information about public resources available.</li> </ul>
FREE T		- Activities:  * Many elderly people enjoy their leisure and free time in a satisfactory manner.	- Activities:  * There are gender differences in the accomplishment of daily activities.  Women remain closer to the household environment.	- Activities:  * Facilitate the practice of activities for the elderly according to their interests.  * Facilitate those activities they already practise in their free time: walking (installation of benches, trees to be in the shade), dancing (facilities, facilitate transport).
	FREE TIME	- Obstacles:  * The municipality offers a variety of free leisure and cultural activities, but they are not well known.	- Obstacles:  * Main obstacles to the enjoyment of free time are: poor health or dependency, non-existence of intermediate places (for all ages), high price of modern leisure activities and generalised misinformation.	- Obstacles:  * Promote leisure and active aging activities for people in a situation of dependence or fragility.  * Create intermediate leisure facilities where space can be shared with people of all ages.  * Promote free of charge leisure activities.  * Inform about activities organised through the proper means.

		- Associations: Homes or Clubs  * Spaces where social relationships, cooperation networks, social participation and culture & leisure activities are promoted.	- Associations: Homes or Clubs  * Many old people tend to have a bad opinion about them.  * Accessibility problems in certain cases.  * Low male participation.  * Limited number of activities organised.	<ul> <li>Associations: Homes or Clubs</li> <li>* Change their image to make it more attractive.</li> <li>* Promote wider offer of activities.</li> <li>* Give greater life to these centres: Provide information, promote volunteer activities or specific leisure time outdoor activities.</li> </ul>
CLUSION	RESPECT AND	- Respect from other generations:  * The family as main focus of contacts with children and young people.  * Relationships with young children are usually positive	<ul> <li>Respect from other generations:</li> <li>Lack of contact with people of other generations outside the family environment.</li> <li>Feeling of lack of respect among young people (with discrepancies).</li> <li>Perception about a negative evolution in the image of the elderly.</li> <li>Invisibility of the old age in modern societies.</li> </ul>	<ul> <li>Respect from other generations:</li> <li>Work to dismantle negative stereotypes about the elderly.</li> <li>Promotion of intergenerational activities, oriented towards the exchange and mutual recognition of different age groups.</li> <li>Normalise and make more visible the ageing process in society</li> </ul>
RESPECT AND SOCIAL INCLUSION	TREATMENT	- Respect from the Public Administration:	<ul> <li>Respect from the Public</li> <li>Administration: <ul> <li>Negative perception about the treatment received by the Public</li> <li>Administration, mainly by the health system and by social services.</li> <li>Perception of mistreatment in healthcare centres and residential homes (infantilization, abuse, dehumanization).</li> </ul> </li> </ul>	Respect from the Public Administration - Not infantilize older adults Humanisation of treatment given by health care and social services professionals Demand te right treatment.
RES	SOCIAL EXCLUSION	- Exclusion from employment:	<ul> <li>Negative stereotypes associated to old age.</li> <li>Exclusion from employment:     * Perception of old people as non-useful to fulfil paid jobs.</li> <li>* There are economic advantages for companies for retiring their oldest workers.</li> </ul>	<ul> <li>Promote a positive image about old people, useful for the whole society.</li> <li>Exclusion from employment:</li> <li>* Promote the permanence of older workers, if they wish to do so, in their posts.</li> </ul>

			- Exclusion from family-life:	- Exclusion from family-life:  * Little consideration of older members' opinion in family matters.	- Exclusion from family-life:  * Strengthen the role of the elderly in  'decision-making, in all different realms:  Family, neighbourhood, the Community.
			- Economic exclusion:	- Economic exclusion: * City with high prices.	Economic exclusion:     * Reduce economic inequalities and facilitate access of all the elderly to social life, without any discrimination or segregation of any type.
			- Language barriers:	- Language barriers:  * Generalised problems with  Basque language (Euskera) among older population, or with Spanish (depending the case)	- Language barriers:  * Information available always in both languages.
NO.	Z O	TRANSMISSION OF INFORMATION		<ul> <li>Generalized disinformation among old population about the resources offered by the city</li> <li>There are problems in the generation of the message and in the choice of the right channel or means.</li> </ul>	<ul> <li>Overcome the problems identified at all the stages of the process: speaker, channel, message, recipient.</li> <li>Use the channels most widely used and accessible for old people (mouthto-ear, telephone, radio)</li> </ul>
	COMMUNICATION	DIGITAL GAP	- New technologies have evident advantages to improve the quality of living of people.	- Few new technologies' users among the older population.	<ul> <li>Promote training and subsidies to purchase computers and access the Internet.</li> <li>Create spaces inside public institutions where the elderly, with the support of qualified personnel, can use computers to carry out daily activities (buy tickets, transport ticket reservations, send a form, etc.)</li> <li>Favour access to new technologies, being conscious of the fact that many of the very old may not be interested and, therefore, create and strengthen alternative channels.</li> </ul>

	ADAPTED INFORMATION	- Feeling among old people of being neglected by the administration.	<ul> <li>Adapt information transmission mechanisms to the situation and characteristics of the elderly</li> <li>Foster direct and personalized communication.</li> <li>Avoid information overloading.</li> <li>Use the city council departments specific to older people to provide any relevant information.</li> <li>Home Help Service employees should bring along information about the opportunities the city offers</li> <li>Use the telephone (possible Tele-assistance Programme) to contact old people regularly and transmit information according to their interests.</li> <li>Leave information brochures in homes, clubs, social centres, and volunteers' headquarters.</li> <li>Send brochures using ordinary mail.</li> </ul>
	LISTENING TO CITIZENS	- Bad communication between citizens and the Administration.	<ul> <li>Make it possible for citizens to file complaints, offer suggestions and propose initiatives to public institutions.</li> <li>Use resources available (city council windows, home help service providers, telephone, etc) to communicate with the elderly and to make them express their opinions to the Administration.</li> </ul>

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GENERAL PERCEPTION	- The city has a good services system (in terms of coverage and quality)	<ul> <li>Lack of coordination between social and health care services.</li> <li>Complex bureaucratic process to ask for assistance and resources.</li> <li>Disinformation about resources available.</li> <li>High cost of certain services.</li> <li>Assistance: availability of resources only for people with very limited resources, leaving out a big portion of the population.</li> <li>Rigid opening hours of offices and their workers (non compatible with family carers who work) .</li> </ul>	<ul> <li>Coordinate social and health care services.</li> <li>Create a Single Window.</li> <li>Provide information, assistance and guidance services.</li> <li>More flexible opening hours.</li> <li>More geriatricians in health centres and hospitals: care providers specialized in older people.</li> <li>Provision of psychological support in health care centres.</li> <li>Promotion of accompaniment services as a program offered by the public services.</li> <li>Simplify medication and encourage the figure of the pharmacist as a professional to provide advice.</li> <li>Detect cases through social support Networks.</li> </ul>
HOME HELP SERVICES	- Services essential to help older people stay in their usual home environment.	- Little use of public home help services High cost of public home help services, rigid provision hours and continuous rotation of help providers.	<ul> <li>- Home Help Services should be adapted to personal needs of users.</li> <li>- Reduce their cost.</li> <li>- Make it possible to choose flexible hours.</li> <li>- Reduce mobility of personnel.</li> </ul>
DAY CARE CENTRES	<ul><li>Positively valued, in general.</li><li>Family carers can have a rest.</li><li>Personalised and good quality care.</li></ul>	<ul> <li>Centres for people having a high level of dependence. Many other fragile or less dependent potential users are left outside.</li> </ul>	- Creation of intermediate centres, previous to day care centres.
SUPERVISED FLATS	- Positively valued, in general.	- Few supervised flats in the city High price.	<ul> <li>Increase their number and make them available in all the neighbourhoods of the city at an affordable price.</li> </ul>

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RESIDENTIAL HOMES.	<ul> <li>Negatively valued, in general.</li> <li>Considered as places where the identity of individuals disappears</li> <li>Difficult to benefit from public admission.</li> <li>Many of the homes are far from the city centre.</li> <li>Inequalities in quality and care provided.</li> <li>Mistreatment.</li> <li>Few activities organised.</li> </ul>	<ul> <li>Expand their number and spread them in all the neighbourhoods of the city.</li> <li>Improve their image.</li> <li>Improve the quality of the care provided: more personnel, better qualified, better trained, more motivated, provided with incentives.</li> <li>Inclusion of green areas.</li> <li>Residential homes integrated in neighbourhoods.</li> <li>Reduction of waiting lists.</li> <li>More possibilities of public admission.</li> <li>Promote the planning of programmes and activities.</li> </ul>
INTERMEDIATE RESOURCES	- Urgent need for intermediate resources.	<ul> <li>Create places for fragile people, still non-dependent, the aim of which should be to preserve their autonomy and prevent their dependency.</li> <li>Promote spaces focused on leisure and free time where people of all ages can share activities.</li> </ul>







