

Age-friendly municipality

Guide to implementing the age-friendly municipality initiative

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Text

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The masculine form used in this document refers to
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Introduction

Following on from the public consultation on older people's living conditions held in 2007, the Secrétariat aux aînés (SA), which is part of the Ministère de la Santé et des Services sociaux (MSSS), has supported the development and implementation of the Age-friendly municipality (AFM) initiative in Québec in collaboration with the Research Centre on Ageing of the Health and Social Services Centre – University Institute of Geriatrics of Sherbrooke. Since 2008, the SA has provided financial assistance to municipalities and regional county municipalities (RCMs) that undertake an AFM initiative. To ensure the initiative is successful, the SA provides assistance to municipalities through Carrefour action municipale et famille (CAMF).¹ At present, the SA continues to provide support with the goal of implementing the AFM initiative in nearly 860 municipalities and RCMs in Québec by 2017.

Municipalities and RCMs are directly affected by demographic ageing. Indeed, this reality is forcing them to find new ways to design their policies, services and infrastructures and become involved in various spheres such as housing, health, recreation, social participation, urban planning and transportation.

The goal of the AFM initiative is to help municipalities and RCMs encourage older people to become actively involved in their communities and make the vision of a society for all ages a reality. It gives concrete expression to the concept of active ageing, advocated by the World Health Organization (WHO). Active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.²

Today, nearly 600 municipalities and RCMs across Québec are participating in the AFM initiative. The WHO considers Québec to be the most advanced society in the world when it comes to implementing the “age-friendly” approach and a world leader in developing innovative solutions to promote active ageing.

Ultimate objective of the AFM initiative

In an AFM, a culture of social inclusion develops, irrespective of the age or capacities of the people concerned. The policies, services and structures that shape built and social environments are designed to support older people and help them stay active as they age.³

An AFM is a municipality that:

- combats ageism;
- adapts its policies, services and structures;
- adopts a comprehensive and integrated approach;

¹ To find out more about the AFM Initiative Support Program, visit the MSSS Web site: www.aines.gouv.qc.ca/mada.

² WORLD HEALTH ORGANIZATION (WHO), *Global Age-friendly Cities: A Guide*, Geneva, World Health Organization, 2007.

³ WORLD HEALTH ORGANIZATION (WHO), *Global Age-friendly Cities: A Guide*, Geneva, World Health Organization, 2007.

- promotes the participation of older people;
- relies on collaborative partnerships and the mobilization of the whole community.

Implementation of the AFM initiative

The AFM initiative is a six-stage process:

- 1. The agreement of elected officials is obtained** and someone is appointed to be in charge of “seniors” issues, preferably the person who is already responsible for family matters or universal accessibility;
- 2. A steering committee is created**, bringing together older people who are involved in their communities, organizations that represent their interests, municipal representatives and, ideally, representatives from the health and social services centre and a local member of the seniors regional round table;
- 3. A diagnosis of the community is made**, comprising a profile of the territory concerned, an inventory of the services available to older people and a needs assessment based on their input;
- 4. A seniors municipal policy and action plan are developed** with a minimum duration of thirty-six months;
- 5. The actions are implemented**, ensuring the participation of the various partners;
- 6. The initiative and actions are assessed** on an ongoing basis.

While these stages are being completed, the **circulation of information**, both between steering committee members and with partners in the community, must be given priority. A **communication plan** must be drawn up to support the development of the initiative and the projects undertaken as well as to celebrate successes. Lastly, one of the conditions for success is to **ensure older people participate** at every stage of the initiative and that the whole community contributes.

The seniors policy and action plan developed by the municipality or RCM can also be aligned with existing family and universal accessibility policies.

Once the AFM process leading to the implementation of the seniors policy and action plan has been completed, and based on the reports submitted, the SA will award AFM status to participating municipalities and RCMs. This title, which is recognized by the WHO, acknowledges the quality of the initiative undertaken to allow older people to remain active in their communities as they age.

What is the guide for?

There is so much interest in the AFM initiative that the SA decided to produce a guide for municipalities. The guide is intended to provide municipalities and RCMs with clear, practical directions for developing and implementing an AFM project in their community.

Who is the guide for?

The guide is for anyone undertaking an AFM initiative, be they elected officials or project managers, from the municipal government sector or the community, or anyone else interested in the initiative.

How to use the guide

The guide is designed to be as practical as possible for municipalities and RCMs. It provides a method to follow for each of the six stages of the AFM initiative.

For each stage, the guide is divided into three parts:

- ❖ a description of the stage;
- ❖ a description of good practices;
- ❖ key points.

This Web site (www.madaquebec.ca) provides additional tools and concrete examples of best practices. To make the best possible use of these tools, it is advisable to consult the support person at CAMF. These tools are updated regularly.

The icons below highlight information to remember, appropriate tools for each stage of the initiative and pitfalls to avoid when carrying out an AFM project.



The toolbox means that documents about the six stages of the AFM initiative can be downloaded from the intranet section of the Web site (www.madaquebec.ca).



The light bulb stands for “good ideas” and provides references to concrete examples of success.



The yellow triangle stands for “Caution!” and means that caution must be exercised during implementation.



The picture of a book means that documents can be consulted or downloaded from the Web site (www.madaquebec.ca).



A star indicates elements that are required to be awarded the title “Age-friendly Municipality” by the MSSS and the WHO.



The CAMF logo means that a CAMF tool can be downloaded from the intranet section of the Web site (www.madaquebec.ca) to help complete the stages of the AFM initiative.

1 Context

1.1 Population ageing

The United Nations estimates that by 2050 the proportion of persons aged 60 years or over will exceed that of children under 15 years of age.⁴ According to data from the Institut de la statistique du Québec (ISQ),⁵ Québec is one of the societies where population ageing is most pronounced in the world:

- a) in 2011, persons aged 65 years or over accounted for nearly 16% of Québec's population and this figure could reach 28% by 2056. This age group would then outnumber the under-15 age group for the first time;
- b) Québec could have a little over 19,000 centenarians by 2056, compared with a little over 1,000 in 2006.

Baby boomers, born between 1946 and 1966, will soon turn 65, further accelerating the ageing phenomenon in Québec. The number of older people aged 75 to 89 will increase, jumping from nearly 232,000 in 1986 to 1.2 million by 2056, and outnumbering those aged 65 to 74, at 1.1 million. Those aged 90 or over should see their number increase eightfold in 50 years to reach 323,300 by 2056.⁶

The growth in the proportion of older people in Québec is due to two phenomena: an increase in life expectancy and a decrease in the birth rate.

INCREASE IN LIFE EXPECTANCY

From 1931 to 2006, life expectancy increased from 56.2 years to 78.3 years for men⁷ and from 57.8 years to 83.0 years for women.⁸ According to ISQ projections, by 2051, life expectancy should reach 85.5 years for men and 89.0 years for women.

DECREASE IN THE BIRTH RATE

Despite a consecutive increase in the number of births for the last six years, the fertility rate (average number of children per woman), estimated at 1.69 in 2011,⁹ remains below the replacement level set at approximately 2.1 in developed countries.

This demographic transformation means that Québec society is facing a collective challenge. Changes must be made in all sectors of activity if we are to adapt to this new reality. These changes must allow older people to participate fully in Québec's development while also allowing Québec to maintain its social, cultural and economic development.

⁴ UNITED NATIONS (UN), *World Population Ageing 2009*, New York, United Nations, 2009.

⁵ INSTITUT DE LA STATISTIQUE DU QUÉBEC (ISQ), *Perspectives démographiques du Québec et des régions – 2006-2056*, Québec, Institut de la statistique du Québec, 2009.

⁶ INSTITUT DE LA STATISTIQUE DU QUÉBEC (ISQ), *Perspectives démographiques du Québec et des régions – 2006-2056*, Québec, Institut de la statistique du Québec, 2009.

⁷ INSTITUT DE LA STATISTIQUE DU QUÉBEC (ISQ), *Perspectives démographiques du Québec et des régions – 2006-2056*, Québec, Institut de la statistique du Québec, 2009.

⁸ L. DUCHESNE, *La situation démographique au Québec, bilan 2005. Les familles au tournant du XXI^e siècle*, Québec, Institut de la statistique du Québec, 2005.

⁹ C. GIRARD, "Les naissances au Québec en 2011: situation stable", *Coup d'œil sociodémographique*, Vol. 16, April 2012.

1.2 A challenge for all municipalities

As populations age, the world is becoming increasingly urbanized.¹⁰ Québec has not escaped this phenomenon, since four out of every five people live in an urban setting. Large urban centres will have to adapt their services, since the number of older people living in cities will continue to grow. That said, over the next twenty years, all municipalities in Québec, large cities and rural municipalities alike, will see an increase in the number of people aged 65 or over.¹¹

Adapting to population ageing will be a challenge for rural municipalities. Failure to act could cause an exodus of older people to cities. Needs will be more pressing in some situations (for example, when an older person has difficulty taking care of a house that has become too big, the loss of a spouse or a decline in health). However, this exodus can be prevented by rethinking how we live together and by developing a range of appropriate resources and services.

1.3. Older people: a heterogeneous group

At the moment, the vast majority of older people live in their own homes. Most are healthy and independent, i.e., they are able to do all the activities they want to. However, others have started to lose their motor skills and need caregivers or services to be able to stay in their homes. Some have an income that allows them to make the most of the activities available to them, while others live in poverty. Lastly, some are able to rely on their spouse or children, while others go through old age alone.

Therefore, older people form a heterogeneous group. It is important to take individual characteristics into account in order to adapt services and infrastructures to the realities and living conditions of all older people.

1.4. The importance of an adapted living environment

In fall 2007, during the public consultation on older people's living conditions, participants stressed their desire to live in their own homes, near their family and friends, for as long as possible.¹² In addition to providing services and infrastructures that meet their needs, it is also important to promote opportunities for solidarity between the generations.

Older people require built and social environments that enable them to continue to live active and meaningful lives. The WHO publications *Global Age-friendly Cities: A Guide*¹³ and *Checklist of Essential Features of Age-friendly Cities*¹⁴ propose ways municipalities can adapt to older people's needs. The Government of Canada also published a document for rural communities: *Age-Friendly Rural and Remote Communities: A Guide*.¹⁵



: Public consultation report.

Global Age-friendly Cities: A Guide.

Checklist.

Rural communities initiative.

Active ageing.

¹⁰ WORLD HEALTH ORGANIZATION (WHO), *Global Age-friendly Cities: A Guide*.

¹¹ MINISTÈRE DES AFFAIRES MUNICIPALES, DU SPORT ET DU LOISIR, *Les effets du vieillissement de la population québécoise sur la gestion des affaires et des services municipaux*, Québec, Gouvernement du Québec, 2004.

¹² MINISTÈRE DE LA FAMILLE ET DES AÎNÉS, *Rapport de la consultation publique sur les conditions de vie des aînés: Préparons l'avenir avec nos aînés*, Québec, Gouvernement du Québec, 2008.

¹³ WORLD HEALTH ORGANIZATION (WHO), *Global Age-friendly Cities: A Guide*.

¹⁴ WORLD HEALTH ORGANIZATION (WHO), *Checklist of Essential Features of Age-friendly Cities*, WHO Library, Geneva, World Health Organization, 2007.

2 Active ageing

2.1 Concept

An AFM is first and foremost a municipality that supports the values associated with **active ageing**. Active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.¹⁵

HEALTH. People live longer and better lives when they are healthy. Being healthy means greater independence and well-being and less need for health care and social services. Society must meet people's needs by developing appropriate, affordable and accessible health and social services.

PARTICIPATION. Older people's participation can be seen in all spheres of society: social, cultural, spiritual and economic. Participating means feeling included in one's community. Older people will continue to contribute to activities that are meaningful for them and for society.

SECURITY. Security (social, financial and physical) is the primary condition that allows people to live in dignity. Society must support and help people who are no longer able to protect or provide for themselves as they grow older.

Active ageing means not only promoting an active lifestyle but also promoting the creation of environments that encourage older people's social inclusion. To achieve this, the AFM initiative has identified eight areas for action.



See the examples given for the areas for action in the "Achievements" section of the Web site (www.madaquebec.ca).

¹⁵ WORLD HEALTH ORGANIZATION (WHO), *Active Ageing: A Policy Framework*.

2.2 Areas for action

2.2.1 HOUSING

Housing is an essential condition for older people's well-being. Older people's independence and quality of life depend on the adequacy of their housing and access to local services.¹⁶

Home environment and housing resources

Older people need to have a place where they feel at home. This feeling comes from interactions with other people (family, friends, neighbours, etc.) as well as from a relationship with a safe physical environment.

The AFM initiative promotes projects that improve older people's home environments and housing.

Living environment and local environment

A person's living environment has a significant influence on ageing.¹⁷ A person who is able to find services and businesses in his local area that meet his daily needs will be able to stay in his own home for longer.

The AFM initiative encourages the maintenance and development of local services.

2.2.2 TRANSPORTATION

Transportation is a basic need associated with independence, autonomy and quality of life.¹⁸ The accessibility and affordability of transportation are important issues for older people. Appropriate, safe transportation must be available in their living environment

Mobility

Most municipalities offer transportation services to their population (bus, taxibus, adapted transportation, etc.). The goal is to ensure the mobility of the population.

The AFM initiative increases older people's mobility by adapting existing services, creating new services and ensuring coordination between partners in the community.

• • •
"Why is it that when housing is built for older people, they don't build something simple we could afford to live in?"
• • •

¹⁶ WORLD HEALTH ORGANIZATION (WHO), *Active Ageing: A Policy Framework*

¹⁷ F. OSWALD and H.-W. WAHL, "Dimensions of the Meaning of Home in Later Life", in G.D. ROWLES and H. CHAUDHURY (ed.), *Home and Identity in Later Life. International Perspectives*, New York, Springer, 2005, pp. 21-45.

¹⁸ A.E. DICKERSON et al., "Transportation and Aging: A Research Agenda for Advancing Safe Mobility", *Gerontologist*, Vol. 47, No. 5, pp. 578-590.

2.2.3 RESPECT AND SOCIAL INCLUSION

Respect and social inclusion are determinants of older people's health and well-being.¹⁹ Active ageing considers inclusion to be an important aspect of older people's social, civic and economic participation and engagement.

Raising awareness to combat ageism

Ageism leads to exclusion and discrimination. It is a subtle part of older people's daily life.

The AFM initiative combats ageism by raising public awareness of older people's contribution to the community.

Intergenerational relations

The ties between the generations go beyond family relations. Intergenerational relations increase people's sense of belonging.

The AFM initiative supports activities that bring people of all ages together and promote the creation of places and opportunities for the generations to mix.

2.2.4 SOCIAL PARTICIPATION

Participation in society is a basic need, especially among older people. Participating in the family, community, cultural, economic and political life of one's community maintains connections and gives meaning to life.

Social and recreational life

Participation in social and recreational life provides opportunities to mix with other people and develop ties with the community. For older people, participation in social and recreational life starts with the provision of accessible social activities.

The AFM initiative promotes the development of social and cultural activities for older people and supports seniors associations and community organizations that specialize in recreational activities.

Employment and mentoring

Work is central to people's lives. Certainly, it provides an income, but it is also an acknowledgement of personal skills. It is essential to recognize older people's particular skills if they are to feel included in society.

The AFM initiative raises public awareness of older people's contribution and promotes the development of intergenerational mentoring initiatives.

• • •
"My skills didn't all
disappear with my last pay
check."
• • •

¹⁹ WORLD HEALTH ORGANIZATION (WHO), *Active Ageing: A Policy Framework*.

2.2.5 SOCIAL AND CIVIC ENGAGEMENT

Older people's contribution is essential to society. Being involved in social, political and economic affairs is a health determinant for older people.²⁰ They must have opportunities to contribute to society, through volunteer work, civic participation or any other form of engagement.

Volunteer work and community life

Older people's contribution to volunteer work and community life is very important.²¹ Through volunteer work, people give the gift of themselves (time, services, etc.) to contribute to family and community life. Community life also creates strong social ties and fosters a sense of belonging.

The AFM initiative develops and supports older people's involvement in volunteer work and community life.

Democratic life

Engagement in democratic life helps develop strong, vibrant communities.²² Older people's desire to participate in the municipality's democratic life is often underestimated.

The AFM initiative creates opportunities for political and civic engagement for older people.

2.2.6 OUTDOOR SPACES AND BUILDINGS

Built environments play an important role in older people's health, participation and security. Accessible, adapted outdoor spaces and public buildings support older people's contribution and social participation.

Urban planning

Well-maintained spaces, rest areas, safe public places and streets suitable for pedestrians are all essential if citizens are to benefit from their living environment.

The AFM initiative provides safe, well-maintained, adapted environments for older people.

Universal accessibility

The goal of universal accessibility is to increase the social inclusion of all citizens, irrespective of their age, physical and mental condition or economic situation. Improving access to stores and public buildings allows older people to meet their daily needs.

The AFM initiative develops and improves infrastructures and services so that they are more accessible to everyone.

• • •
"As far as neighbourhoods and buildings go, people will only be able to grow old in the community they spent most of their lives in if neighbourhoods and housing meet their needs and capacities." • • •

²⁰ WORLD HEALTH ORGANIZATION (WHO), *Active Ageing: A Policy Framework*.

²¹ STATISTICS CANADA, *Caring and Involved Canadians: Highlights from the 2007 Canada Survey of Giving, Volunteering and Participating*, Ottawa, Statistics Canada, 2009.

²² S.D. PHILLIPS and M. ORSINI, *Mapping the Links: Citizen Involvement in Policy Processes*, Ottawa, Canadian Policy Research Networks, 2002.

2.2.7 COMMUNITY SUPPORT AND HEALTH SERVICES

Community support and health services are indispensable to older people's health and independence²³ Providing appropriate care for older people requires collaboration between the various stakeholders in the community such as social services, health, housing, the municipal sector and community organizations.

Home services

Home services include professional care and home maintenance. The range of services offered and their accessibility are determinants in helping older people stay in their homes for as long as possible.

The AFM initiative fosters collaboration and the coordination of home services between partners in the community.

Community services

Community organizations offer a wide range of services to the population. They not only provide services, but also a place for older people to socialize and participate.

The AFM initiative establishes and supports community organizations.

• • •
"For the moment, I live in my own home and I want to stay there for as long as possible; in summer, I mow my lawn and prune my trees myself, but in winter, the snow is something else."
• • •

2.2.8 COMMUNICATION AND INFORMATION

Communication is a fundamental operation between people. It is linked to inclusion and social participation. Older people's health and well-being are tied in with the distribution and accessibility of information.

The AFM initiative recognizes older people's special needs with respect to the distribution of information and ensures community partners are informed of these needs.

²³ WORLD HEALTH ORGANIZATION (WHO), *Active Ageing: A Policy Framework*.

3 Senior-friendly municipality

3.1 Objectives

3.1.1 COMBAT AGEISM

Ageism is a form of discrimination based on chronological age or presumed age. It is vital to combat ageism, for it is an obstacle to active ageing. One of the myths of ageing is that it's too late to adopt an active lifestyle in the later years; it's better to take it easy and make way for the young. On the contrary, older people benefit from maintaining or adopting healthy lifestyle habits and doing stimulating activities, be they paid, volunteer or recreational. Older people who are involved in the community or find ways to become involved continue to be useful or feel useful, develop their skills, avoid isolation and improve their self-esteem.



01 –
Characteristics of older people.

3.1.2 ADAPT MUNICIPAL POLICIES, SERVICES AND STRUCTURES

In an AFM, the policies, services and structures that shape the environment are designed to support older people and help them stay active as they age. In particular, they can improve older people's mobility and promote their participation in activities and municipal life. The harmonization of services and structures also allows municipalities to better serve older people. To achieve this, we must first define what is meant by "older person" in each community.



What is an older person? Age can be a determining factor: some consider older people to be anyone over the age of 65, while others include people over 50 in this category. Therefore, it is important, in the AFM initiative, to clearly define what is meant by "older person".

3.1.3 ADOPT A COMPREHENSIVE AND INTEGRATED APPROACH

A municipality that is concerned about older people's needs must take action on a number of interrelated fronts. It is therefore important to adapt public policies and programs so that they are more supportive of active ageing and pave the way for more collaborative local and regional action in favour of older people. A number of sectors of municipal activity are concerned by active ageing. Representatives of all these sectors (transportation, urban planning, community life, etc.) must work together, and with older people, to find viable solutions. An integrated vision will allow the municipality to take care of present and future generations of older people. For example, a rural municipality that manages to keep its families on its territory and attract others will, in the medium and long term, ensure a continued vitality that will enable it to maintain certain services that will be used by both young people and older adults.

3.1.4 PROMOTE THE PARTICIPATION OF OLDER PEOPLE

The WHO supports the idea that, from the outset, older people's needs must be identified and they must be allowed to voice their opinions. Focus groups or community forums are interesting methods because they provide access to the views of the primary stakeholders affected by a complex reality, which is not always possible with other methods such as questionnaires. Discussions also allow the views of people who are more isolated and who do not usually participate in public hearings to be heard. The AFM initiative is based on older people's experience of what works or does not work for them and the improvements needed to create a more supportive environment. Furthermore, an AFM encourages older people's community involvement and civic participation at every stage of a project. Hence the project is not only carried out *for* older people, but also *by* older people.

3.1.5 RELY ON COLLABORATIVE PARTNERSHIPS AND THE MOBILIZATION OF THE WHOLE COMMUNITY

As the term "senior-friendly municipality" implies, the municipality is central to the collaborative approach and must act as a catalyst for forces in the community. It must involve the whole community in creating a more supportive living environment for its older people. This means mobilizing key stakeholders from various sectors as well as older citizens themselves. If the goal of the proposed initiative is to adapt policies, services and structures to older people's needs, it must also improve democratic life. This means it is important to work with community stakeholders. This is what is referred to as "mobilization of the community." It can be defined as a global process whereby the influential forces in a community come together to achieve a common objective or carry out a common project.²⁴ Mobilization of the community must be based on a set of principles, namely:²⁵



Through its "Neighbours Together" initiative, the Quebec Network of Healthy Cities and Towns encourages neighbours to help each other out more so as to make the neighbourhood a natural support network that provides support to certain groups, including older people.

²⁴ W.A. NINACS, *Empowerment et intervention: Développement de la capacité d'agir et de la solidarité*, Québec, Les Presses de l'Université Laval, 2008.

- ❖ a common vision of needs and the strategies to be employed to achieve the desired change;
- ❖ mechanisms of community participation that allow the target organizations and the entire population to be consulted and involved in any project or initiative;
- ❖ the conclusion of intersectoral partnership agreements in order to share challenges and resources.

Therefore, the municipality is not working alone: it can rely on the support of local stakeholders from the health sector, community organizations, volunteer groups and private organizations. In many cases, mobilization of the community involves bringing people together who do not usually work with one another. They must be allowed time to get used to one another. The alliances forged will help ensure the actions undertaken endure.

3.2 AFM initiative

The AFM initiative relies on the vitality of communities and their mobilization. It is a bottom-up participatory and local leadership approach where collaboration between members is crucial (**steering committee**). The initiative is based on older people's experience of what works or does not work for them and the improvements needed to create a more supportive environment (**diagnosis**). Based on its findings, the steering committee develops orientations, objectives and actions to carry out in the community (**policy and action plan**). The goal of the AFM initiative is to undertake concrete, accessible and practicable actions (**implementation**). Lastly, a review is conducted of the AFM process and its outcomes (**self-assessment**).



The AFM initiative relies on the community's capacity to include older people. In this initiative, older people are the ultimate experts on their own lives!



02- Participatory approach.

²⁵ C. FAUBERT, *Fostering Community Mobilization, Capacity, and Ownership of a Community-University Initiative: An Intermediary Change Agent's Perspective*, doctoral thesis (assessment process), Ottawa, University of Ottawa, 2008.

3.2.1 MUNICIPAL COUNCIL AND MUNICIPALITY

The municipality is responsible for getting the AFM initiative underway. In doing so, it confirms its leadership and will continue to demonstrate its political will throughout the initiative. More specifically, the municipal council will endorse the various stages of the initiative, including start-up, the adoption of the seniors policy and action plan, implementation and follow-up.

What are the roles of the municipal council and the municipality?

a. Council resolutions

First and foremost, a municipality's intention to undertake an AFM initiative is given concrete expression through an affirmation of the municipal council. By adopting a resolution at an open meeting of the council, it officially confirms the municipality's interest in improving older people's living conditions and including them in the social life of the community. The council also mandates an elected official to be responsible for the AFM initiative. Lastly, at each of the stages outlined, the municipal council will reaffirm its support by adopting related resolutions.

b. Mandate the steering committee

At a council meeting, elected officials adopt a resolution to mandate a steering committee, and its members, to carry out the AFM initiative. The elected officials specify the committee's roles, which include following-up the seniors policy and the implementation of the action plan.

c. Mandate an administrative official to be responsible for the AFM initiative

The municipal council mandates the executive committee to designate an administrative official to be responsible for the AFM initiative.

Key points

The **municipal council plays an important role in the AFM initiative.**

It must:

- 1) adopt a resolution to affirm the **municipality's participation** in the AFM initiative;
- 2) adopt a resolution to mandate a **steering committee**;
- 3) adopt a resolution to mandate an **administrative official to be responsible** for the AFM initiative and a **person to be responsible for "seniors" issues.**



A copy of the municipal council's resolution confirms the application to undertake an AFM initiative.



The municipality will have 24 months from the date the memorandum of understanding is signed to develop a seniors policy and action plan.



The person in charge of the AFM initiative can be the person who is responsible for other municipal policies.



The elected official in charge of "seniors" issues is designated by the municipality.

3.2.2 COMMUNICATION

Communication is essential to the smooth functioning of the AFM initiative. Internally, it allows **information to be shared and circulated** between steering committee members and community partners. Externally, it allows connections to be made between the AFM initiative, the community and older people. Indeed, it is vital to **circulate information about the seniors policy and action plan** as widely as possible in the municipality's population. **The people concerned must be kept regularly informed about the progress of the municipality's AFM initiative.**

What roles does communication play?

a) Circulates information

Information sharing between steering committee members and community partners is key to the smooth functioning of the AFM initiative. It:

- ❖ keeps steering committee members and community partners informed;
- ❖ helps garner support from the community to develop actions;
- ❖ allows everyone to learn from the actions;
- ❖ promotes emerging best practices;
- ❖ helps coordinate complementary efforts between steering committee members and community partners;
- ❖ makes the AFM initiative accessible to everyone;
- ❖ supports the conclusion of partnership agreements.



Use the SA's AFM logo: it will allow the AFM initiative to be recognized quickly by partners and the community.

b) Provides information about the policy and action plan

It is important to present the seniors policy and action plan to community partners and older people. Firstly, by being informed, community partners will be able to make the orientations and actions of the policy and action plan their own. Secondly, older people who are informed about the AFM initiative will be aware of the municipality's efforts to include them in community life and improve their living conditions.

c) Provides information about the progress of the initiative

The goal of the AFM initiative is to implement actions to improve older people's quality of life. The people concerned, both community partners and older people and citizens of the municipality, must be regularly informed about the progress of the initiative, including its successes and challenges.

Various methods can be used to keep people informed about the progress of the AFM initiative and, in particular, of the seniors policy and action plan:

- ❖ publish information in municipality newsletters;
- ❖ publish information in local newspapers;
- ❖ post information on Web sites;
- ❖ organize conference lunches with community partners;
- ❖ use a network of email messages; etc.

Key points

Communication is key to the smooth functioning of the AFM initiative. It allows:

- 1) information to be circulated** between steering committee members and community partners;
- 2) the population to be informed about the seniors policy and action plan;**
- 3) the people concerned to be regularly informed about the progress** of the AFM initiative.

3.2.3 STEERING COMMITTEE

What is the steering committee?

a. Creation and composition

The steering committee is a group of stakeholders of all ages, including older people, from various sectors (political, public, private or community) who work together to achieve a common goal:²⁶ to help older people lead safe, healthy lives and participate fully in society. The steering committee is a place of consultation, collaboration and decision making among its members whose goal is to achieve common objectives based on a diagnosis and an agreed-upon action plan.



03 - Steering committee self-diagnosis tool.

The steering committee is made up of stakeholders from the community. A diverse range of stakeholders is vital to the success of the AFM initiative, for it fosters networking in the community. The challenge is to bring key stakeholders who are concerned about older people together without, however, increasing the number of members, which could reduce the committee's efficiency.

The main members of the steering committee are presented below.

Municipal councillor

The municipal council is often represented on the steering committee by the elected official in charge of the AFM initiative. He ensures the political representation of the initiative and legitimizes the steering committee.



At least two members of the steering committee must be older people.

Municipal services

Wherever municipal services are provided, the steering committee must integrate the various service divisions into the AFM initiative at different times. However, since they cannot all sit on the steering committee, they will instead be involved at different stages of the process. For example, the divisions listed below could sit on the steering committee during one of the stages:

²⁶ F.D. BUTTERFOSS, *Coalitions and Partnerships in Community Health*, San Francisco, John Wiley & Sons, 2007.

- ❖ Public works;
 - ❖ Recreation and community life;
 - ❖ Municipal housing office;
 - ❖ Police and firefighting services;
- Public transport.

Community organizations, associations and paramunicipal organizations

Community organizations, associations and paramunicipal organizations provide a link between the steering committee and the community, in particular with respect to older people's needs and services. For example, the organizations and associations listed below could sit on the steering committee during one of the stages:

- ❖ Université du 3^e âge [Seniors university]
- ❖ Association des retraitées et retraités de l'éducation [Retired teachers association]
- ❖ Association québécoise de défense des droits des personnes retraitées [Québec association for the protection of retirees' rights]
- ❖ Seniors clubs
- ❖ Quebec Network of Healthy Cities and Towns
- ❖ Cercles des fermières [Women's clubs]
- ❖ Réseau FADOQ [Québec federation of seniors network]
- ❖ Member of the local or regional seniors roundtable, if any
- ❖ Carrefours d'action bénévole [Volunteer centres]
- ❖ Local, community or economic development corporations
- ❖ Service cooperatives
- ❖ Regional conferences of elected officials

Public agencies

Public agencies are important stakeholders on the steering committee and when it comes to implementing actions. For example, the public agencies listed below could sit on the steering committee during one of the stages:



A local or regional seniors round table is a crucial member if older people are to be given a voice on the steering committee.



Through its consultation, planning and coordination mission, the regional conference of elected officials is often a source of support for the steering committee.

- ❖ Regional recreation and sports units
- ❖ Regional anti-abuse coordinator
- ❖ Health and social services centres
- ❖ Health and social services agencies



The community organizer of the health and social services centre is an essential member of the steering committee.



The regional anti-abuse coordinator is a valuable human resource for the steering committee.

Private organizations

Private organizations can be valuable partners for the continuity and sustainability of the AFM initiative. For example, the private organizations listed below could sit on the steering committee during one of the stages:

- ❖ Association provinciale des constructeurs d'habitations du Québec [Provincial homebuilders association of Québec]
- ❖ APPUI régional – caregivers support organization
- ❖ Private foundations
- ❖ Chamber of commerce
- ❖ Banks and credit unions



The municipality's chamber of commerce could be a key stakeholder from the business community for the steering committee.

Senior citizens

Given the importance of civic participation and the fact that the AFM initiative is implemented by and for older people, senior citizens, who represent concerns about older people's situation, must be included on the steering committee.

Project manager

Although not a member of the steering committee, the **project manager** is essential, for he is responsible for its operation. The project manager organizes and coordinates the steering committee's activities. He is often a member of the municipal government.

b. Mandate and roles

At the steering committee's first meetings, members must agree on their mandate and the roles they will play throughout the AFM initiative. To encourage members to assume their mandate, it is important to allow them to define a mandate that is suited to their reality and that will capitalize on the strengths of each member.



04 – Mandate and roles of the steering committee.

c. Conditions for success

Recognize the value of intersectoral collaboration

Today's world is increasingly complex. Working alone makes it difficult to meet older people's needs effectively.²⁷ Instead, it is preferable to encourage intersectoral collaboration. This implies that steering committee members take concerted action, pursue common objectives and share their knowledge and resources. Collaboration is a determining factor for the success of the AFM initiative, for it prevents the duplication of actions and coordinates efforts in terms of time and resources.



The AFM initiative is a way to promote the interests of a specific group (older people) while improving the lives of all citizens.



Population ageing poses significant social challenges that prompt community stakeholders to work together.

Community networking

As a rule, steering committee members are well known in their respective communities. Ideally, they hold a management position or responsibilities within organizations or on committees. Members must make the information shared during steering committee meetings their own and inform their respective organizations about the development of the AFM initiative.

Networking puts steering committee members in touch with other stakeholders in the community and creates a network of contacts and collaborative partnerships that are essential to the implementation of the AFM initiative.²⁸ It is important to also think of partners in the community who are not on the steering committee and to develop an "AFM network" so that information can be passed on to the community.

²⁷ O. HANKIVSKY and R. CORMIER, Intersectionality and Public Policy: Some Lessons from Existing Models", *Political Research Quarterly*, Vol. 64, No. 1, pp. 217-229.

²⁸ K.G. PROVAN et al., "The Use of Network Analysis to Strengthen Community Partnerships", *Public Administration Review*, Vol. 65, No. 5, pp. 603-613.

Leadership behind the AFM initiative

As its name suggests, the AFM initiative relies on the municipality's leadership. The municipality must initiate a process of mobilizing the main stakeholders in the community. The elected official in charge of the AFM initiative is the official connection between steering committee members and the municipal council whose political will underlies the process.

The chances of the AFM initiative succeeding are much greater when the municipality, through its administrative staff, provides logistical, material and financial support.²⁹

For their part, steering committee members, who play a leading role, represent a special link between the objectives of the AFM initiative and the community. They prevent, in their respective organizations, decision-making relays from becoming too numerous, help save time and maintain a feeling of efficiency.

Diversity of members' expertise

Steering committee members must be interested in older people's issues and have expertise in the field. Their contribution to the committee stems from their relevant knowledge of the issues and the community, their intersectoral collaboration skills as well as their ability to mobilize financial, material and human resources. The steering committee also benefits from the diversity of its members knowledge, which enriches the AFM initiative, but above all from their representation, which reflects the diversity of the community.

Members' motivation and commitment

The steering committee's success depends not only on the number of members, but more so on their motivation and commitment. Members become involved in the AFM initiative for a number of reasons:



Leadership is strengthened when:

- 1) stakeholders' ideas and participation are valued;
- 2) the steering committee's decision-making process is democratic and leaves room for discussion;
- 3) networking and information sharing are encouraged.³⁰



Steering committee members' attendance at meetings is essential, for their absence will have repercussions on the pace of the AFM initiative.

²⁹ F.D. BUTTERFOSS, *Coalitions and Partnerships in Community Health*, San Francisco, John Wiley & Sons, 2007.

³⁰ K. KUMPHER et al., "Leadership and Team Effectiveness in Community Coalitions for the Prevention of Alcohol and Other Drug Abuse", *Health Education Research*, Vol. 8, No. 3, pp. 359-374.

- ❖ interest and curiosity about the AFM initiative which focuses on older people in the community;
- ❖ feeling of contributing to the steering committee (recognition of expertise);
- ❖ conclusion of partnership agreements (short, medium or long term) between community stakeholders;
- ❖ interest in integrating the AFM initiative into their organization's activities;
- ❖ implementation of concrete changes;
- ❖ sustainability of the AFM initiative.



05 – Civic participation.

Overall, members must be involved in the various stages of the project.

Common goal

What brings the steering committee members together is a common goal. It must be defined rapidly and clearly. The goal is in fact a statement that guides the steering committee's actions and answers the question: "Where do you want to be in a few years if you undertake an AFM initiative today?" For example, the goal might be formulated as follows:

"Improve older people's living conditions and include them in the social life of the municipality by encouraging and promoting active ageing."

A goal creates a sense of belonging and, consequently, a feeling of trust among members, however different they may be.

Stability of the steering committee

Over time, it may be difficult for the steering committee to remain stable when staff changes in organizations are frequent and when people may take time off, or even leave, the committee. Even if the key information is passed on to new steering committee members, it is sometimes difficult to ensure continuity in passing on the values that underlie the AFM initiative. A few solutions for ensuring the committee's continuity with new members are listed below:

- produce a short guide tailored to the reality of the community for new steering committee members;
- ensure new members receive all the important documents in a timely manner: seniors policy, action plan, minutes, etc.;
- designate someone to welcome and support new members;
- hold meetings to provide information and bring new members "up to speed".

Key points

The steering committee is made up of stakeholders from the community and older people who work together and collaborate to achieve a common goal.

The success of the steering committee depends on a number of factors:

- recognition of the value of **intersectoral collaboration**;
- community **networking**;
- the **leadership** behind the AFM initiative;
- the diversity of members' **expertise**;
- members' **motivation and commitment**;
- a common **goal** ;
- the **stability of the steering committee**.

3.2.4 DIAGNOSIS

What is the diagnosis?

The AFM initiative encourages steering committee members, community organizations and older people to participate in assessing the municipality's situation.³² The data collected at this stage shed light on the reality of older people in the territory. The diagnosis is used to make a connection between population ageing and the political, economic, cultural and social contexts that characterize the municipality.³³ In concrete terms, it identifies the strengths and weaknesses of services and infrastructures so that older people can remain active as they age.

Diagnosis is an important stage for the success of the AFM initiative. Indeed, the quality of the seniors policy and action plan depends on the quality of the diagnosis.



After doing a profile of their community, some municipalities realized that their community was ageing.

How to do a good diagnosis

The diagnosis has four components. They are described below.

a) Statistical profile of the community

Why? The data collected is used to create a profile of the situation (geographic, social and economic) to better understand the problems and challenges facing the community.

Who is responsible for this component?

The steering committee, the person in charge of "seniors" issues and the project manager are responsible for the statistical profile of the community.

How? To create a good statistical profile, a number of sources can be consulted. Statistics Canada's census data are a must. The Institut de la statistique du Québec, the health network (local community services centre, health and social services centre) as well as a number of local services (transport, firefighting service, police service, recreation, housing, etc.) should not be overlooked. However, it is important to exercise judgement when choosing the statistics that will provide a better understanding of the community's reality. Remember also that a good profile is not just a list of data, but includes an interpretation of the data.



06 – Community profile.



07 – Statistical profile.



A good diagnosis means that steering committee members learn about the reality of the community and tackle the important issues.

The following list provides examples of the type of data that can be included in the community statistics:

- the rate of ageing and ageing trends in the municipality;
- the location, dimensions and topography of neighbourhoods, sectors, boroughs, etc., in the municipality;
- the number of residents in neighbourhoods and the municipality and the population density;
- the social, ethnic and economic characteristics of neighbourhoods and the municipality; and
- the type of housing (apartment, low-cost housing, house, private residence) and occupancy (single, couple, group).

32. W.A. NINACS, *Empowerment et intervention: Développement de la capacité d'agir et de la solidarité*.

33. P. BROWN, M. LYSON and T. JENKINS, "From Diagnosis to Social Diagnosis," *Social Science & Medicine*, Vol. 73, 2011, pp. 939-943.

b) Community services and resources

Why? It is essential to create a shared knowledge base with respect to community services and resources as well as the programs, infrastructures and policies that contribute to older people's well-being. This stage is an opportunity for steering committee members to build on what already exists while avoiding any duplication of current and future actions.

Who is responsible for this component?

The person in charge of "seniors" issues and the municipality, with the support of a number of other partners who are familiar with the services available to older people (municipal housing office, transport service, health and social services centre, regional anti-abuse coordinator, etc.), are responsible for creating a shared knowledge base with respect to community services and resources.



08 – Services checklist.



09 – 1-2-3 approach.

How? To create a profile of community services and resources, a cross-cutting approach must be taken that encompasses both sectors where the municipality is required to take action and those which are not under its responsibility. These include health services, businesses and banks, as well as any other local services that help improve older people's quality of life.

Some levels of action that can be used to guide the process of taking an inventory of services and resources are as follows:

- **government** (health and social services, transport, accommodation, etc.);
- **municipal** (housing, public health, safety, recreation and culture, public works, information, etc.);
- **community and voluntary** (law, recreation and culture, maintenance and assistance, active living, training, etc.); and
- **private** (housing, accommodation, business, financial services, etc.).

c) Identify older people's needs

Why? Since older people are at the heart of the AFM initiative, it is important to clearly understand their needs and possible solutions.

Who is responsible for this component?

The municipality, with the support of the steering committee, and the project manager are responsible for identifying older people's needs.

How? A number of consultation methods can be used to determine older people's needs. However, it is preferable to use methods that promote participant interaction. Consultations will be successful if the following two methods are used:



A community profile and an inventory of services must be completed in order to identify needs.



The inclusion of older people in society starts with the decisions made in the AFM initiative. We have to set the example!



While questionnaires are very effective for collecting exact data, they are not suitable when it comes to older people identifying older people's needs.



10 – Focus group.



11 – Conditions for a successful consultation.



The various sectors of municipal activity associated with active ageing should be the starting point for identifying older people's needs.

Focus group:

A focus group is made up of eight to twelve people who come together to discuss specific subjects under the direction of a moderator.³⁴ Focus group participants are selected because they share common concerns. Particular care should be taken to choose a range of people who are representative of the profile of the community concerned;

Community forum: Information is collected from a wide range of people at an open meeting. Older people in the community, as well as partners dedicated to their well-being, are invited to give their input at the forum.^{35 36} It is a rapid and effective way to learn about the community's needs.

Whatever method is used to assess needs, it is essential to ensure that the most vulnerable people participate, or are well represented, during the consultations, regardless of their economic status and ethnocultural group. To recruit participants, community organizations who work with older people can be approached. Cultural centres, social centres, volunteer centres and recreation centres where older people meet can also be asked to cooperate.

d) Summary of the diagnosis

Why? The summary of the information collected highlights older people's real needs, strengths to build on and weaknesses to eliminate.

Who is responsible for this component?

The steering committee members are responsible for the summary of the diagnosis.

How? Using the summary tool, the steering committee members take note of the results for the first three components (statistics, community resources and services as well as older people's needs). Based on these results and their reading of the community, they will reach a consensus on the municipality's main strengths and weaknesses.

12 – Summary of the diagnosis.

Key points

The diagnosis indicates strengths and weaknesses in services and infrastructures so that older people can remain active as they age.

A diagnosis has four components. They involve:

- 1 creating a general profile of the target community (e.g., geography, demography);
- 2 making an inventory of services and programs available to older people;
- 3 identifying older people's needs; and
- 4 preparing a summary of the diagnosis.

Remember: the success of the next stages depends on the quality of the diagnosis.

34. R.A. KRUEGER and M.A. CASEY, *Focus Groups: A Practical Guide for Applied Research*, Thousand Oaks, Sage, 2009.

35. R. MAYER et al., *Méthodes de recherche en intervention sociale*, Boucherville, Gaétan Morin, 2000.

36. K.A. CARTER and L.J. BEAULIEU, *Conducting a Community Needs Assessment: Primary Data Collection Techniques*, Gainesville, University of Florida Cooperative Extension Service CD-92, 1992.

3.2.5 SENIORS POLICY AND ACTION PLAN




The development of the seniors policy and action plan has three components.³⁷ They are listed below.

a) Seniors policy

What is a seniors policy?

A seniors policy highlights the general findings of the diagnosis (strengths and weaknesses) and defines the values, principles and orientations that will guide the municipality in its interventions with older people. It generally includes the following elements:

- **values** and **principles**: they guide and underpin the municipality's decisions and actions, as well as the AFM initiative in general;
- **findings**: the findings are based on the social diagnosis (statistics, services and needs) and describe the municipality's strengths and weaknesses, as well as opportunities and challenges with respect to population ageing;
- **orientations**: as the term suggests, orientations serve to "orient" the development and implementation of the action plan. The direction of future actions must be aligned with the eight areas for action of active ageing: housing, transportation, respect and social inclusion, social participation, social and civic engagement, outdoor spaces and buildings, community support and health services, communication and information.

 A seniors policy.
 A copy of the resolution of adoption of the seniors policy by the municipal council or the RCM council.
 The term "action" refers to short-, medium- or long-term activities and projects defined by the steering committee.

How to develop a good policy


Why? The seniors policy enables the municipality to acknowledge their real needs, develop a vision and identify challenges shared by all steering committee members, which will lead to the development of the action plan.

Who is responsible for this component? The steering committee members are responsible for developing the seniors policy.

37. F.D. BUTTERFOSS, *Coalitions and Partnerships in Community Health*.

How? The steering committee members take the data collected during the diagnosis and reach a consensus on the main findings and orientations with respect to population ageing in the community.

Remember: The action plan will be based on the seniors policy. The policy therefore guides the desired actions to meet the needs voiced by older people.

 Aligning the seniors policy with other municipal policies (MFP, social development, universal accessibility, etc.) is practicable and desirable.
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b) Prioritization of findings

Why? Municipalities must make do with limited resources and nonetheless respond to the numerous observations and needs voiced by older people. It is therefore essential to reach a consensus on the main findings that will be given priority.

Who is responsible for this component?

The steering committee members are responsible for prioritizing findings.

How? To complete this stage, steering committee members must first agree on a certain number of criteria (e.g., availability of resources, urgency, the municipality's context). The prioritization checklist can be used for this exercise. Each of the findings indicated at the diagnosis stage is then assessed against these criteria. By doing this consensual exercise, the priority issues can be identified.³⁸



13 – Prioritization checklist

c) **Action plan**

What is an action plan?

An action plan is a tool that describes the objectives and concrete actions to be taken, in the short, medium or long term, to ensure the seniors policy is implemented.

How to develop a good action plan

Why? The action plan provides a concrete response to the observations made. It forces the steering committee to determine specific and realistic actions.³⁹

Who is responsible for this component?

The steering committee members are responsible for developing the action plan. It might be helpful to consult organizations that are not represented on the steering committee.



An action plan must extend over a period of at least 36 months.

A copy of the resolution of adoption of the action plan by the municipal council or the RCM council.



The objective can be short, medium or long term.

How? Firstly, steering committee members and the partners that will be involved in implementing the action plan must formulate objectives that meet the following four criteria:

- **specific:** clearly specifies the expected outcome;
- **observable:** identifies data the steering committee must observe;
- **realistic:** respects the availability of the resources of the municipality and the partners that will be involved in implementing the actions;
- **coherent:** responds to a real issue identified by the community.

Secondly, for each objective, concrete actions must be defined in accordance with certain basic rules:

- use clear, precise wording to describe the action;
- designate a person to be in charge and identify the partners that will be involved in implementing the action;
- identify available resources (human, financial, material and information);
- establish a timeline (the actions must be implemented over a period of at least 36 months);
- define the expected outcomes (indicators of success) to ensure the success of the action plan is monitored.

38. C. GAGNON, L'élaboration du plan d'action Agenda 21e siècle local, 2007, [Online] [www.a21l.qc.ca/9579_fr.html]

39. COMMUNITY TOOL BOX, Developing Strategic and Action Plans, 2005, [Online] [ctb.ku.edu/en/dothework/tools_tk_content_page_199.asp]

The objectives and actions must extend over a period of at least 36 months.



Several types of action plans exist. The AFM initiative uses, among others, a model based on the logic framework⁴⁰ as well as a results-based management approach.⁴¹



The action plan must use a logic model.



14 – Development of the action plan.



15 – Create an action plan.



See the 1001 measures on the CAMF Web site.

Expected outcomes and indicators of success

Special emphasis must be placed on thinking about and determining the expected outcomes of the actions to be implemented. It should be noted that expected outcomes refer here to indicators of success. The latter are observable data that are indicative of the presence or absence of an action. Objectives in the action plan that are often abstract or vague must be made as concrete as possible. The indicators chosen will determine the outcomes against which the success of the AFM initiative will be judged and will be part of the self-assessment. Indicators may be either quantitative or qualitative.



16 – Logic models.

17 – Indicators.

Excerpt from an action plan that uses a logic model

Orientations	Objectives	Actions	Services responsible and partners	Resources (human, financial, material and information)	Timeline	Expected outcomes
Information and communication	1. Improve the municipality's access to information	a) Make communication tools available to older people	<p>Service responsible: Communications service</p> <p>Partners: Municipal services, volunteer centre, TCA, health and social services centre</p>	Integrated in communications service activities	May 2014	<p>Creation of a brochure and Web page listing the communication tools available to older people</p> <p>Print run of 1,000 copies of the brochure</p>
		b) Create communication tools	<p>Service responsible: Communications service</p> <p>Partners: Municipal services, volunteer centres, TCA, health and social services centre</p>	\$5,000	May 2014	<p>Creation of two new communication tools for older people</p> <p>Validation of communication tools with older people</p>
		c) Reassess certain communication tools to	<p>Service responsible: Communications service</p>	Integrated in communications service activities	May 2014	Publication of all communication tools, paper and

		make them suitable for older people	Partners: Municipal services, volunteer centre, TCA, health and social services centre			electronic versions Legibility of tools (font size, colours, etc.)
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Completing this stage is no easy task. It requires time and effort on the part of all steering committee members. They can be deservedly proud of the work accomplished and the results of their efforts during this stage should be widely publicized.⁴²

Key points

This stage focuses on developing the seniors policy and action plan. A policy contains findings regarding population ageing and provides direction for future actions, whereas an action plan is a tool designed by steering committee members to identify objectives and then establish concrete, practicable actions whose outcomes will be measured using indicators.

In short, this stage of the AFM initiative involves:

- 1 developing the **seniors policy** ;
- 2 **prioritizing** the findings and orientations indicated in the policy, as well as defining **objectives** to achieve the desired changes; and
- 3 developing a **concrete and practicable action plan** in order to achieve the objectives.

3.2.6 IMPLEMENTATION

What is implementation?

Once the diagnosis of the community and the action plan have been completed, the next stages involve planning and organizing the resources needed to carry out the actions, ensure they are implemented and provide follow-up.

Implementation brings about the expected outcomes of the action plan and achieves the objectives set by the steering committee. A follow-up committee that includes members of the steering committee ensures the continuity of the implementation of the action plan.

How to ensure implementation is successful

Implementation is a three-stage process.⁴³ The stages are presented below.

a) *Planning and organization*

Why? Since the actions are many and varied, a plan is needed to identify how they will be carried out. Possible constraints in the community, for example, in terms of the cost and availability of resources, can also be anticipated during this stage.

Who is responsible for this component? Depending on the actions, the follow-up committee members concerned, their respective organizations, as well as ad hoc community partners are responsible for planning and organizing implementation.

How? The person responsible for implementing the action can use an “action sheet” to plan and organize the necessary resources (human, financial, material, information),⁴⁴ while bearing in mind the constraints and limitations of the community.

40. W.K. KELLOGG FOUNDATION, *Logic Model Development Guide*, Battle Creek, 2004.

41. CANADIAN INTERNATIONAL DEVELOPMENT AGENCY (CIDA), *Results-based Management at CIDA: An Introductory Guide to the Concepts and Principles*, Ottawa, Canadian International Development Agency, 1999.

42. C. GAGNON, *L'élaboration du action plan Agenda 21e siècle local*, 2007, [Online] [www.a21.qc.ca/9579_fr.html] (date consulted ?).

43. F.D. BUTTERFOSS, *Coalitions and Partnerships in Community Health*.

44. EUROPEAN COMMISSION (EC), *Project Cycle Management Guidelines*, Brussels, European Commission, 2004.

45. EUROPEAN COMMISSION (EC), *Project Cycle Management Guidelines*, Brussels, European Commission, 2004.



Despite all the effort that goes into planning and organizing the actions, it is highly unlikely that implementation will go as planned.⁴⁵



18 – Action sheet.



Ideally, a pilot project would have to be done (short, small scale, with data collection) to have a better idea of the potential of the action to be implemented.

b) Implementation

Why? The goal of every AFM initiative is to implement actions in order to improve older people's built and social environments. The implementation of the actions is the culmination of all the work done.



Visit the "Achievements" section on the Web site to see the actions implemented.

For the stakeholders involved in the initiative, seeing actions actually being implemented helps nurture the feeling of belonging to the AFM initiative.⁴⁶

Who is responsible for this stage? Depending on the actions the follow-up committee members concerned, their respective organizations, as well as the project manager and ad hoc community partners are responsible for implementing the actions.

How? The "action sheet" used for planning should also be used to chart the progress of the action. The person responsible for implementation will use it to note the obstacles encountered and the solutions adopted to overcome them. He can also record the conditions for success that allowed the action to be carried out. Using action sheets, the steering committee monitors and adapts the implementation of actions to successfully carry out the action plan.

In general, the success of the implementation of the actions depends on a number of factors;⁴⁷ the most important factors are:

- the political will of the community and the community's interest in carrying out and supporting the actions ;
- intersectoral collaboration between stakeholders;
- the relations established between the various levels: field/stakeholders, managers, political level;
- the participation of appropriate stakeholders (i.e., experts);
- training and other support conditions for carrying out the actions ;
- the cost-benefit balance of the actions.

It should be noted that successful implementation of the action plan largely depends on the fruitful collaboration between the steering committee and community partners.⁴⁸

c) Follow-up and support

Why? Implementing actions is not enough: they must also be followed up and supported throughout, and even beyond, the implementation process and their continuation ensured.

Who is responsible for this stage? Depending on the actions, the follow-up committee members concerned, their respective organizations, as well as the project manager and community partners are responsible for following up and supporting actions.

How? Follow-up committee members meet at the start of implementation and then at least twice a year to produce a status report.

The status report is usually provided for in the action plan (in the form of a timeline and expected outcomes). Based on the action plan, the follow-up committee must determine whether or not the actions have achieved their objectives. Whatever the outcome, there are lessons to be learned by assessing what worked well and what could have been better



The objective of the AFM initiative is not to replace existing services in the community.

Key points

The implementation process involves implementing the actions defined in the action plan.

Implementation is a three-stage process:

- 1 plan and organize** the implementation of the actions;
- 2 implement** the actions;
- 3 follow-up and support** the implementation of the actions.

3.2.7 SELF-ASSESSMENT

6. Self-assessment

What is a self-assessment?

A self-assessment involves critically reviewing how the AFM initiative was conducted and the outcomes of the actions. First, using specific and explicit criteria, data is collected on the previous stages:⁴⁹ diagnosis, development and implementation of the seniors policy and action plan, and steering committee follow-up. The self-assessment then calls for reflection on the part of follow-up committee members and community partners in order to clarify their position with respect to the continuation of the AFM initiative.

The self-assessment:⁵⁰

- sheds insight into how the AFM initiative was conducted;
- indicates whether or not the objectives of the action plan have been achieved;
- allows improvements to be made to the implementation of actions;
- increases recognition of the AFM initiative in the community as well as among community stakeholders and decision makers.

How to do a good self-assessment

There are two parts to the self-assessment. First, a factual analysis is conducted regarding how the AFM initiative was conducted and the outcomes of the actions. Follow-up committee members and community partners must then complete a reflection exercise regarding the AFM initiative.

a) Fact-based self-assessment

Why? There is usually a delay between the time the diagnosis is made, the action plan is formulated and its implementation: a factual analysis of how the stages unfolded will provide information about this interval by identifying the actual flow of events. It reveals the strengths and weaknesses of the way in which the AFM initiative was conducted. Furthermore, the extent to which the objectives defined in the action plan were or were not achieved must be determined.

Who is responsible for this stage?

The follow-up committee members and their respective organizations, as well as community partners, are responsible for the fact-based self-assessment.

How? Using a series of specific questions, also available on the Web site (www.madaquebec.ca), the self-assessment first focuses on the stages of the AFM initiative described below.



A consultant may have expertise in conducting assessments, but his knowledge of the community, its needs and the AFM initiative is generally limited.



19 – Fact-based analysis.

46. F.D. BUTTERFOSS, Coalitions and Partnerships in Community Health.

47. F.D. BUTTERFOSS, Coalitions and Partnerships in Community Health.

48. H. CHEN, Practical Program Evaluation: Assessing and Improving Planning, Implementation, and Effectiveness, Newbury Park, Sage, 2005

STEERING COMMITTEE	YES	NO
From the outset, was the steering committee made up of municipal elected officials and administrators, representatives of public services and civil society associated with older people?		
Are community organizations and associations dedicated to older people represented on the steering committee?		
Is there a person who was mandated by the municipal council to be in charge of "seniors" issues on the steering committee?		
Is there is a designated project manager on the steering committee who is responsible for organizing and coordinating the activities of the AFM initiative (e.g., diagnosis, development and implementation of the seniors policy and action plan)?		
Are steering committee members able to work together while respecting their respective missions and capacities for action?		
Were all the members mandated by their organization, association or institution to participate on the steering committee?		
Does the steering committee keep community partners regularly informed about the progress of the AFM initiative?		
Does the steering committee promote the development of types of collaboration with community partners who work with older people?		
DIAGNOSIS	YES	NO
Were older people in the municipality consulted about their real needs?		
Was this consultation conducted using a participatory approach (e.g., focus group or community forum), where older people were met with and listened to?		

Was a comprehensive profile of services, programs and policies accessible to older people in the municipality created?		
Was a statistical profile of the municipality's demographic and social situation created?		
SENIORS POLICY	YES	NO
Did the steering committee use a collaborative approach when determining the priority orientations of the AFM initiative?		
Did the steering committee members work together to determine the objectives of the AFM initiative?		
Does the seniors policy reflect a shared vision among steering committee members?		
Is the seniors policy coherent with the findings of the diagnosis?		
Did the municipal council adopt the seniors policy by resolution?		
Were community partners and older people in the municipality informed about the seniors policy?		
ACTION PLAN	YES	NO
Was the action plan the result of collaboration between steering committee members?		
Did the steering committee make the connection between older people's needs and the proposed actions?		
Do the actions allow for intervention with respect to both the built and the social environments?		
Does the action plan focus mainly on the eight areas for action associated with active ageing?		
Do some of the actions concern different generations? In other words, do they target intergenerational activities?		
Did the municipal council adopt the action plan by resolution?		
Were community partners and older people in the municipality informed about the action plan?		

IMPLEMENTATION	YES	NO
Is the action plan well under way?		
Were a number of actions carried out in partnership by the municipality and community organizations?		
Did the follow-up committee implement actions that allow new ways of doing things to be introduced in the municipality?		
Does implementing actions using an intersectoral approach reduce the use of “silo” practices?		
Do older people respond positively to the AFM initiative actions and do they participate in large numbers?		
Does the commitment of follow-up committee members and community partners to the action plan include financial, human, material or information resources?		

Collaboration is a relatively unstructured and informal relationship between two organizations that contribute to each other’s mission but do not pursue shared goals.⁵¹

A factual analysis is a prerequisite to receiving AGM recognition from the SA and the WHO.

Concerted action is a shared process to establish a structured and lasting relationship that may lead to the conclusion of partnership agreements between steering committee members.⁵²

Coherence refers to the harmonization of the different stages: diagnosis, action plan, implementation and expected outcomes.⁵³

Partnership is a structured and formal relationship of exchange between the municipality and the community organizations involved in the AFM initiative.⁵⁴

51. D. BOURQUE, *Concertation et partenariat, Entre levier et piège du développement des communautés*, Québec, Presses de l’Université du Québec, 2008.

52. D. BOURQUE, *Concertation et partenariat, Entre levier et piège du développement des communautés*, Québec, Presses de l’Université du Québec, 2008.

53. EUROPEAN UNION, *3Cs Defined/Home – Three-Cs.net: Evaluating Coordination, Complementarity and Coherence for Development*, [Online] [www.three-cs.net/3cs-defined.html] (April 23, 2012).

54. D. BOURQUE, *Concertation et partenariat, Entre levier et piège du développement des communautés*, Québec, Presses de l’Université du Québec, 2008.

Part of the action plan, the fact-based self-assessment also evaluates the expected outcomes (or indicators) that are meant to have one or more desired effects. The outcomes achieved tool can be used to analyse the planned actions and expected outcomes following the implementation of the action plan.



20 – Outcomes of the action plan.

Example of outcomes achieved

Actions	Expected outcomes	Outcomes achieved	Reasons for the disparity between the expected outcomes and the outcomes achieved	Comments
Design new communication tools	Two new communication tools for older people	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Financial resources Material resources Human resources Information resources Contextual resources Other resources	Slight delay in the delivery of communication tools: fall 2013 Tools designed: 1) Brochure on the improvement of municipal services for older people 2) Leaflets about the municipal services available to older people
	Validation of communication tools with older people	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Financial resources Material resources Human resources Information resources Contextual resources Other resources	Inadequate coordination between community partners and the municipality

The goal here is not to systematically assess the entire action plan, but to initiate a serious discussion between follow-up committee members on the implementation of the plan. The self-assessment sheds insight into:

- the implementation of the planned actions;
- the success of the actions ;
- the role of resources in implementing the actions ;
- the strengths and weaknesses of the AFM initiative;
- steering committee members' view of the implementation of the actions.



Expected outcomes, or indicators, formulated beforehand based on the objectives, will be used to assess the success or failure of an action.

b) Reflection-based self-assessment

Why? An AFM initiative is not an end in itself: it is important to meet with community stakeholders, irrespective of whether or not they are concerned by the AFM initiative, and to reflect on the municipality's future in regards to ageing. In fact, the reflection-based self-assessment is also an opportunity for steering committee members, community partners and older people to discuss the AFM initiative's successes and failures.

Who is responsible for this stage? The follow-up committee members and their respective organizations, as well as community partners and older people in the municipality, are responsible for the reflection-based self-assessment.

How? As was the case for the consultations conducted during the diagnosis stage, it is preferable to use participatory approaches in order to include as many stakeholders as possible from the municipality who are directly or indirectly affected by the AFM initiative.



A day of reflection can be organized to include all the community partners and older people in the municipality.

Since the AFM initiative has five general objectives, the shared reflection should include relevant questions on each of the objectives. For example:

Combat ageism

- Is the municipality addressing discrimination towards older people?
- Is the municipality spreading a positive image of ageing and older people?
- Is the municipality advocating healthy lifestyle habits and stimulating activities for older people, be they paid, volunteer or recreational?
- Do older people in the municipality participate in society, do they feel useful and are they developing their skills?

Adapt its policies, services and structures

- Are the municipality's policies, services and structures designed to support older people?
- Is the municipality more adapted to older people's needs?
- Has older people's mobility improved?
- Are policies, programs and services harmonized between the municipality and community partners?
- Are older people better served by the municipality?

Adopt a comprehensive and integrated approach

- Does the municipality promote the coordination of local and regional actions in favour of older people?
- Do stakeholders from all sectors (transportation, urban planning, community life, etc.) work together, and with older people, to find solutions?
- Has the municipality developed a vision for intergenerational integration? In other words, is it concerned about current and future generations?

Promote the participation of older people

- Have older people's needs been identified?
- Are older people given an opportunity to voice their opinions about issues that concern them?
- Have older people who are marginalized or isolated or who live in poverty been consulted about their needs?
- Does the municipality encourage older people to become involved in the community and participate in civic affairs?
- Is the AFM initiative being implemented *for* and *by* older people?

Rely on collaborative partnerships and the mobilization of the whole community

- Did the municipality play an important role in the AFM initiative?
- Did the municipality allow increased collaboration between organizations and associations?
- Did the municipality mobilize key stakeholders in the community and various sectors (local health stakeholders, community organizations, associations, private organizations, etc.)?
- Did the AFM initiative result in the development of innovative actions for the well-being of older people?

At the end of the self-assessment, the municipality and the follow-up committee will have a clear idea of what lies ahead in regards to improving older people's living conditions and inclusion. Ultimately, the self-assessment allows the AFM initiative to be relaunched.

Key points

The self-assessment provides a general understanding of the implementation of the AFM initiative in the municipality as well as its short- and long-term effects.

There are two parts to this stage:

- the fact-based self-assessment, which is based on a **factual analysis** of the AFM initiative and the outcomes of the actions;
- the reflection-based self-assessment, which involves a **shared reflection** not only between follow-up committee members, but also with community partners and older people themselves.

Notes

