

2007 Report on Seniors in Greater Sudbury

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OF SUDBURY DE SUDBURY



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Introduction

Canada's population is aging. According to Statistics Canada, it is expected that over the next twenty years, the number of seniors (people aged 65 and over) in Canada will nearly double, jumping from 4.3 million (13.1% of the population) to an estimated 8.0 million (21.2% of the population).¹

An aging population has broad-ranging implications for social policy and social programs. Because financial supports for many retired individuals are funded by taxpayers, a downward shift in the proportion of taxpayers to retirees may affect the stability of these income programs. As well, older citizens have needs that differ from those of a younger demographic, and these must be considered in a city with an aging population.

Data Sources

Data presented arise primarily from two sources: Statistics Canada and a local needs assessment conducted in the summer of 2007. The needs assessment—conducted jointly with Friendly to Seniors Sudbury and funded through a Horizons Canada grant—consisted of a community scan, a survey of older Sudburians, and a number of community focus groups. For more on data sources, please refer to Appendix A.

A Picture of Seniors in Greater Sudbury

Current and Projected Population of Seniors

Current Population

Currently in the Greater Sudbury Census Metropolitan Area (CMA), there are about 23,515 senior citizens. From 2001 to 2006, the population of seniors in Greater Sudbury rose from almost 14% to just under 15%, such that about 1 in 7 Sudburians is aged 65 or older.

The ratio of male to female seniors in Greater Sudbury is identical to that of Ontario and Canada—about 10 men to every 13 women. Greater Sudbury, however, has a higher total proportion of seniors to population—14.9% of Sudburians are seniors; while only 13.6% and 13.7% of Ontarians and Canadians, respectively, are seniors. That is roughly 2006 more seniors than you would expect to see if Sudbury reflected the Ontario average.

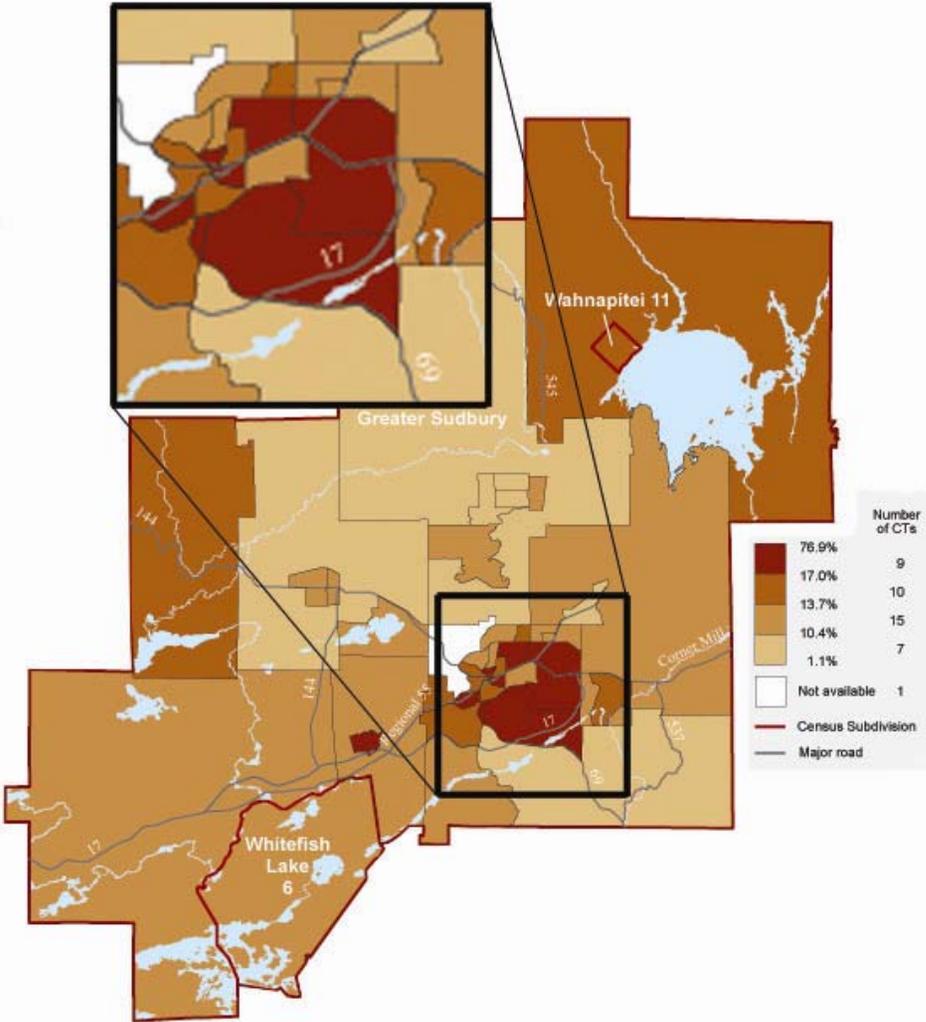
Projected Population

The Ontario Ministry of Finance recently released its 2006 version of population projections for Ontario Census Divisions.² By 2031, seniors in Sudbury are expected to account for 25.6% of the entire population of Sudbury (projected figures: 40,727 seniors, 158,880 total Sudburians). That's a more than 10% increase from current figures (14.9%).

In terms of the geographic distribution of seniors in Greater Sudbury, the highest proportions of seniors to other age groups are found in the former City of Sudbury, and in Lively. In these neighbourhoods, seniors represent between 17.0% and 76.9% of the population. The percentage of seniors to general population is 14.9%. This means that in these neighbourhoods the percentage of seniors is higher than the percentage for the CMA as a whole. For a visual depiction, see Figure 2.

Given the higher proportion of seniors in Greater Sudbury and the expected increase in proportion of seniors to younger population, it's important to recognize that life for seniors is qualitatively different than life for younger citizens. Seniors have different needs and contribute different assets to society than do younger individuals. If the demographic trend in Greater Sudbury continues as expected, we'll see a much higher ratio of seniors to younger population, and that will have significant implications for our community.

Figure 1. Percentage of Population aged 65 years and over in Greater Sudbury, by 2006 Census



Tract

Source: 2006 Census of Canada.
 Produced by the Geography Division, Statistics Canada, 2007.

Cultural Diversity

Aboriginals

In the 2001 Census in Greater Sudbury, 360 seniors identified themselves as Aboriginal.³ There are two first nation reserves within the Greater Sudbury city limits: the Whitefish Lake 6 and Wahnapiatae 11 First Nation Reserves. It is very important that the senior Aboriginal community within Greater Sudbury feels it has culturally-specific services available to them.

Greater Sudbury's Aboriginal Services Agencies

Greater Sudbury has a number of services and agencies geared specifically to the Aboriginal community. There are two centres that provide health and social services. There is a housing corporation specifically serving the Aboriginal community. There is an aboriginal trust company, a legal services office for first nations, a family violence service agency for first nations, there are counsellors who specialise in delivering services geared to first nations communities. There are also library services, a forestry program, and a child and family resources program that are all administered by a local reserve. There are no senior-specific organizations that offer services to Aboriginals, however aboriginal organizations tend to place a high degree of importance on service to elders. In this regard, service needs are well met by these local organizations.

Languages Spoken

Not knowing either of the two official languages in Canada can present a major barrier to community integration and sense of belonging. As well, according to the 2001 Census, Sudbury is a city that functions largely in English (98.6% of Sudburians speak English), and many Sudburians do not speak French (58.4% of Sudburians speak English and don't speak French).⁴ This presents a real barrier to those who are French-speaking only.

According to the 2001 Census, 420 Greater Sudbury seniors speak only French.⁵ Of the 275 Greater Sudbury seniors who speak neither French nor English, 145 identify their mother tongue as Italian, 30 as Slavic (Ukrainian, followed by Serbian), 10 as Lithuanian, 55 as Finnish, 10 as Greek, and 35 as Chinese. It is important to remember that this is a shrinking demographic. In Greater Sudbury, the future language trends will see our bilingual capacity increased, and therefore services will be available in both official languages.

Greater Sudbury's Language-specific Services

Greater Sudbury has a number of Francophone services available to its residents. There are three health centres across the city that specifically serve a Francophone population. These health centres offer additional social services and serve as a meeting place for people of all ages. The health centres have a seniors' advisory committee to address senior-specific issues. The francophone community also has a number of social clubs available locally in which they can participate.

The Ukrainian community has a retirement home, credit union, dining hall, campground, two local churches, and a Seniors' Centre available to its senior population. The Finnish community has a retirement home with long-term care beds and a local church. There are also language-specific clubs associated with both of these communities, as well as with the Italian community. The Italian community also has a vice consulate within city limits. The Chinese community has a local church. The Greek community has a two local churches (one is a Ukrainian Greek Orthodox church, and is therefore counted twice here).

Marital Status

According to the 2006 Census, 55.7% of seniors in Greater Sudbury are legally married, 2.2% live in common-law relationships, and the rest live unpartnered and either widowed (31.6%), divorced (4.5%), separated (2.0%) or single (3.8%).⁶

Education

According to the 2001 Census, 67.9% of seniors in Greater Sudbury have less than high school education.⁷ Eleven point three percent (11.3%) of senior Sudburians graduated high school and stopped there, 8.8% went on to complete a trades certificate or diploma, 6.1% completed a college certificate or diploma, and 5.9% completed a university certificate or degree.

Employment Status and Income

Employment Status

According to the 2001 Census, 92.7% of seniors did not work in 2000, while 3.2% still worked mostly full-time and 4.1% still worked mostly part-time.⁸

Personal Income

In 2000 in the Greater Sudbury CMA, the mean personal income for senior males was \$30,225, while for senior females it was a mere \$18,712—less than two thirds what men earned.⁹ This disparity is to be expected given the societal tendency of women born earlier in the 20th century to have raised a family in lieu of advancing a career while a male partner worked outside the home; as well as the tendency for women to be paid lower wages than men—work pension income for women would be lower than that for men.

Seniors' Income Programs

Seniors have three major income programs that they could be accessing. The minimum guaranteed income for seniors in Ontario is \$14631.96 per year,¹⁰ and none of that income would be taxed if you earned that amount. This income is comprised of Old Age Security (OAS), Guaranteed Income Supplement (GIS), and the Guaranteed Annual Income System (GAINS). GIS and GAINS are programs to supplement the income of low-income seniors, while OAS recipients receive their full entitlement (based on length of Canadian residency, maximum \$502.31¹¹ monthly) up to a net income up to \$63,511. At that level prorating of the amount begins (OAS benefits are not paid to persons making an individual net income of \$103,191 or more).¹²

Seniors who have paid into the Canada Pension Plan (CPP) qualify to receive funds through that program, amounting to about 25% of an individual's earnings on which their contributions were based.¹³ The average monthly retirement pension in 2004 was \$457.99, and if you retire early and begin receiving CPP benefits, your rate will be lower than if you retire at 65.¹⁴ If you retire later your payment rate will be higher than if you retired at 65.

According to Richard Shillington, more than 200,000 low-income seniors in Canada are missing out on GIS benefits, and 60,000 eligible Canadians are missing out on CPP benefits.¹⁵ In order to receive GIS benefits, seniors must apply for the benefits, which they can do by calling Service

Canada at 800-277-9914. Submitting an income tax return every year is an immediate reapplication to the program.

Seniors' Living Arrangements

Household Seniors

Household Living Arrangements

In terms of living arrangements, the 2006 Census reports that 64.7% of the 26,610 senior Sudburians in private households lived with spouses, common-law partners or as parents; 0.2% lived with one parent, 3.2% lived in households of relatives with families, 0.2% lived in households with non-relatives with families, 0.6% lived with other relatives, 1.5% lived with non-relatives only, and 29.5% lived alone.¹⁶

Household Maintainer

According to the 2006 Census, in Greater Sudbury 8150 households were maintained by seniors aged 65-74, and an additional 6825 were maintained by seniors aged 75 and over.¹⁷ This means that 4655 seniors aged 65-74 lived in households where there was another household maintainer or in other living arrangements (such as seniors' residences), and 2885 seniors 75+ lived in a similar situation. This puts about one third of Sudbury's senior population living in arrangements where they are NOT the primary maintainer of their household, and may be living in long-term care or residential institutions.

Housing Type and Housing Ownership

Seventy-nine point four percent (79.4%) of respondents of the survey of older Sudburians lived in a single detached house, 2.4% lived in a duplex, 1.2% lived in row housing, 0.4% lived in a mobile home park, 15.9% lived in an apartment, and 0.8% lived in a condominium (valid n = 252).

In terms of ownership, 79.8% of the 252 survey respondents live in owned dwellings, while the rest live in rental units.

Census Family Status and Low-Income

There is a much higher incidence of low-income among seniors living in non-family households compared to seniors living in census family households.

In the report, "Key Social Trends, Policy Issues and Strategies for Change in the City of Greater Sudbury 2005,"¹⁸ it was noted that although the percentage of seniors living in poverty in the City of Greater Sudbury (CGS) has been lower than that of Ontario or Canada, there is great disparity between those who are unattached (living alone or with non-relatives in private households) and those living in family households. According to data from the 2001 Census (2000 income data), 36% of seniors who are unattached (living alone or with non-relatives in private households) lived below the Low-income Cut-off (LICO).¹⁹ By contrast, only 2.6% of seniors living in family households (with families or relatives) lived below the LICO.²⁰ These data do not take into account the seniors

living in alternative living arrangements, such as long-term care facilities.

There is a gender difference apparent in unattached seniors in private households. Unattached senior women were twice as likely (41.3%) as unattached senior men (20.0%) to live below the LICO, much less than for men or women living in family households (2.7% and 2.4%, respectively)²¹ Lone men and lone women are worse off financially because they are forced to absorb 100% of shelter costs.

In the survey of older Sudburians, it was found that at least 16.3% of respondents have trouble paying bills at least once a year or more frequently, and 7.5% have trouble paying bills at least once every six months or more frequently.

Living Arrangements and Housing

The survey of older Sudburians found that those living with others were significantly more likely to own their dwelling. Only 56.8% of those living alone own their dwelling, while 91.6% of those living with others live in an owned dwelling.

As well, those living with others are significantly more likely to report living in a house (single detached, duplex or row housing) than were those living alone. Ninety-four point six percent (94.6%) of those living with others live in a house, while only 59.3% of those living alone live in a house.

Gender and Housing

According to the survey of older Sudburians, men are significantly more likely to live in owned dwellings. Of the 75 men who responded, 90.7% lived in owned dwellings. By contrast, only 75.1% of the 177 women we spoke with lived in owned dwellings.

As well, men were significantly more likely to live in a house (single detached, duplex or row housing) than were women. Ninety-four point seven percent (94.7%) of men lived in a house, versus 78.0% of women.

Income Spent on Major Payments

According to the 2001 Census, of the households in Greater Sudbury maintained by seniors, those that were maintained by seniors 75+ with outstanding mortgage balances were most likely to have maintainers spending 50% or more of their household income on major payments (table 1).^{22,23}

Table 1. Percentage of Household Income Spent on Rent or Major Payments, for Seniors 65-74 and 75+

Age and ownership status of primary household maintainer		% of Household Income Spent on Rent or Major Payments	
		< 50%	≥50%
65-74 (8100)	Rented/Leased Dwellings (2120, 26.2%)	1765 (83.3%)	355 (16.7%)
	Owned Dwellings WITH Mortgage (955, 11.8%)	785 (82.2%)	170 (17.8%)
	Owned Dwellings Without Mortgage (5025, 62.0%)	4950 (98.5%)	75 (1.5%)
75+ (6015)	Rented/Leased Dwellings (2255, 37.5%)	1820 (80.7%)	435 (19.3%)
	Owned Dwellings WITH Mortgage (385, 6.4%)	215 (55.8%)	170 (44.2%)
	Owned Dwellings Without Mortgage (3375, 56.1%)	3350 (99.3%)	25 (0.7%)

Overall, in 2001 1130 seniors in Sudbury with either rent or outstanding mortgage balances are spending 50% or more of their household income on rent. If these numbers hold true just five years later, we can expect around 1235 senior Sudburians to be in the same financial position.

Property Tax²⁴

In Greater Sudbury, the property tax rate averages about 1.98% of property value. Property taxes are calculated based on service provision in the area, with higher taxes being paid in areas with more services, like the former City of Sudbury. The tax rate for a home valued at \$120,000 in April of 2007 would thus be just under \$2400 annually. If property values have been reassessed in the last six months and the inflation of property values matches the resale market values, a resident of the former City of Sudbury could expect to pay just under \$2900 annually.

Greater Sudbury offers a \$150 property tax rebate to seniors who live in an owned dwelling (with or without an outstanding mortgage) and are in receipt of GIS. A single senior can expect to receive at least some money through the GIS program if they have an income of \$15,215 or less. Coupled seniors whose household income is \$20,063 can expect to receive at least some money from the program, and seniors with higher household incomes and partners who don't receive GIS can still receive money to higher thresholds. About 950 senior Sudburians are currently enrolled in the program.

Long-term Care and Retirement Facilities

In mid-September 2007, a retirement home and nursing home scan was conducted by telephone. In terms of long-term care housing and retirement housing, Greater Sudbury has at least 823 retirement beds (some may be single or double accommodations), 1215 long-term care beds, 16 veteran beds, 4 short-stay and 80 transitional beds

available to members of the seniors' community.²⁵ This represents housing for 7.9% of the senior population. Although the province has funded an additional 256 long-term care beds for seniors between 2002 and 2006²⁶ there remains a bed shortage

In speaking with managers of long-term care facilities and retirement homes, it became apparent that in Greater Sudbury we are not meeting the retirement housing and long-term care needs of the elderly.

Sudbury is in a crisis situation with respect to long-term care for seniors. Wait lists are very long—in some cases longer than the actual bed list.²⁷ Few rooms in retirement homes were vacant and people on wait lists for retirement homes totalled approximately 116, while there were at least 963 people on long-term care wait lists.²⁸

Of the respondents to the survey of older Sudburians, 20.9% indicated that they'd soon be seeking different housing. At least half of those will be looking for assisted living units, long-term care beds, palliative care beds, or intermediate living units. More than half of these stated that they can afford to pay no more than \$899 a month for their care. Unless they can access subsidized long-term care beds (and many may not need that level of care) they have nowhere to go.

It has been stated that, "The costs of retirement residences are high,"²⁹ and, in fact, they do appear high in comparison to rent rates for independent living accommodations. In terms of the care that's provided by retirement residences, although it may not be as intensive

in the area of health and personal care as that of a nursing home, it still commands a certain amount of funding to accomplish. Retirement homes in Greater Sudbury universally offer 3 meals a day plus 2 snacks, optional weekly assistance with bathing, daily activities, weekly housekeeping, and laundering as part of the market cost of residency. Additionally, some homes offer 24 hour nursing care and medication dispensing by registered practical nurses and/or registered nurses.

Because of the cost of delivering services in retirement homes, the cost of 'rent'—if considered outside of the services provided—can seem inflated. Moreover, many seniors are in lower-income situations and simply cannot afford to pay what retirement homes must charge in order to remain financially viable.

What many people do not realize is that, while long-term care facilities are subsidized, retirement homes are not. "[There are] no subsidies at all for [retirement homes] regardless of the care you provide."³⁰ "Because [retirement homes] are not subsidized [and long-term care facilities are] . . . there are people living in nursing homes but [they] really should be living in retirement homes."³¹ The reason for this is that, although there are some criteria for admission to long-term care facilities, they can be met by seniors who are experiencing difficulties but who could still be well-served by a retirement home if they could only afford to pay the cost.

Accommodations in a long-term care facility can still be affected by a resident's income level. Despite the subsidies

to long-term care facilities, the beds can be expensive to those on a low fixed income. Accommodation in a retirement home generally costs anywhere from about \$1543 a month for a basic room (shared with at least one other person) to \$2091 a month for a private room. There are subsidies available in order to gear the rent to income for long-term care residents but these are only available for basic accommodations. "If you want a semi-private or private room, you must be able to pay for the whole thing yourself."³²

Women are, by far, the most vulnerable population when it comes to wait lists for nursing home care. They can't afford retirement home costs, and so they register for long-term care facilities because they need access to some level of care. Further, "For women, it is more difficult to access private rooms because they do not have the finances to pay for private rooms."³³

Independent Living

Rental Units

In terms of other housing for seniors, currently Greater Sudbury is lacking in the variety of rental units available, and housing prices are very high. The rental vacancy rate in Greater Sudbury was 0.9% in April of 2007, representing the lowest vacancy rate of all centres with a population of over 50,000 in Ontario.³⁴

This low vacancy rate is resulting in large increases in rental prices. From October 2006 to April 2007, rents went up anywhere from 3.9% to 6.3%.³⁵ To put this in perspective, the 2006 rent increase guideline was 2.1%, and the 2007 rent increase guideline was 2.6%.³⁶ The most drastic increase occurred for 3+ bedroom units, followed by bachelor units, 1 bedroom units, and finally 2 bedroom units.

Greater Sudbury does have social housing options for people with lower incomes. According to the City of Greater Sudbury Housing Services, the current wait list for social housing is 1860, and of this number only 200 are willing and able to pay market rent and 300 are currently living in rent-geared-to-income housing.³⁷ The average wait time for a 1 bedroom apartment in the city is approximately 14 months.³⁸

Seniors' Rental Communities

Currently, there are 890 independent living units in Greater Sudbury that are designated for seniors only, and the wait lists on these units average three years.³⁹

New Construction

From January to July 2006 there were 238 new housing starts of single detached or semi-detached houses and 7 new housing starts in the area of row or apartment housing.⁴⁰ It's unknown whether these 7 units are intended for ownership or rental, however the number is so small as to hardly impact the housing crisis that Sudbury is currently experiencing.

New and Resale Housing Market

In July, the average cost of a new single- or semi-detached house in Greater Sudbury was \$316,990.⁴¹ This market is not affordable for most seniors, despite the high resale value of homes given the currently booming housing market. Even if seniors were to sell their homes and attempt to downsize, the average price of a home in Greater Sudbury's resale market was \$150,434 in 2006 and was \$182,476 in the first quarter of 2007, although at that time the Canada Mortgage and Housing Corporation forecast that this price increase would ease as the year progressed.⁴² It is not known at this time whether this has been the case.

Sudbury's labour market has been on a steady upswing, but because of the recent high in the price of nickel there has been significant recent local job growth in the resource extraction industry. The trickle-down effect of new jobs in the mining sector affects many local business and services.⁴³ As well, many of these jobs are going to the over 45 age cohort, who are making vertical moves in their careers.⁴⁴

All of this growth is occurring perhaps too suddenly for Sudbury's housing market to keep up, and certainly the sharp rise in housing costs have made housing even more inaccessible to those without significant financial means.

Social Networks

Existence of Social Networks

In our survey of older Sudburians, most respondents (84.5%) stated that they had family in Greater Sudbury; and of these, 84.5% want to stay in Sudbury because of their family connections. Ninety-three point three percent (93.3%) of respondents have close friends in Greater Sudbury; and of these 84.7% want to stay in Sudbury because of their friendships.

In terms of support networks, 88.9% of respondents felt they had family or friends in the area that could be thought of as a support network. Fortunately, neither lone person status nor gender made a difference in respondents feeling they have a social support network.

The Role of Seniors' Clubs

Seniors' clubs can provide much-needed socialization opportunities for seniors who might otherwise be isolated because of lack of social ties (family, old friends) in the community.

General Seniors' Clubs

Greater Sudbury has 36 seniors' clubs spread across the city. Many of them are specific to communities within the city.

These clubs are general membership clubs and generally operate in English. There is an umbrella organization that links members of these groups together in order to coordinate and promote activities across groups.

Language- and Culturally-specific Seniors' Clubs

There are 18 Francophone seniors clubs in Greater Sudbury, spread across most of the north end of the city. As well, Sudbury has a Finnish, a Ukrainian, and an Italian seniors club.

Use of Seniors' Clubs

In focus groups, it was indicated that there are women who might be widowed who do not participate in social activities out of habit, depression, or fear. There was mention made that perhaps some people need a push to get out of the house.

Awareness of the programs offered by the seniors clubs and seniors centre could be improved. In focus groups, participants compared the ParkSide Seniors Centre to the North Bay Golden Age Club. The perception was that at the North Bay Golden Age Club there are far more activities. Also, the North Bay seniors pay no membership fee for the club—memberships are entirely subsidized. While the ParkSide centre does offer discounted fees for seniors with low income, participants were not aware of this until one woman shared her story of a friend receiving a discounted membership. Finances may truly be a barrier to participation.

Reliance on Social Networks for Help

Survey respondents were asked to state whether they have needed help from another person or organization to perform a variety of activities. One hundred eleven respondents (111, 44.0%) said that in the past twelve months they had needed help with at least one of the following activities (table 2).

Table 2. Respondents Needing Help with Daily Activities in the last 12 months

	Number	Percent
House Maintenance, Outside Work	86	34.1%
House Cleaning	40	15.9%
Shopping for Groceries or Other Necessities	31	12.3%
Meal Preparation and Clean-up	20	7.9%
Laundry and Sewing	18	7.1%
Managing Medications	6	2.4%
Banking or Paying Bills	6	2.4%
Visits to the Doctor	1	0.4%
Legal Advice When a Spouse Dies	1	0.4%

¹ Valid n = 252.

² Percentage will not sum to 100: response categories are not mutually exclusive.

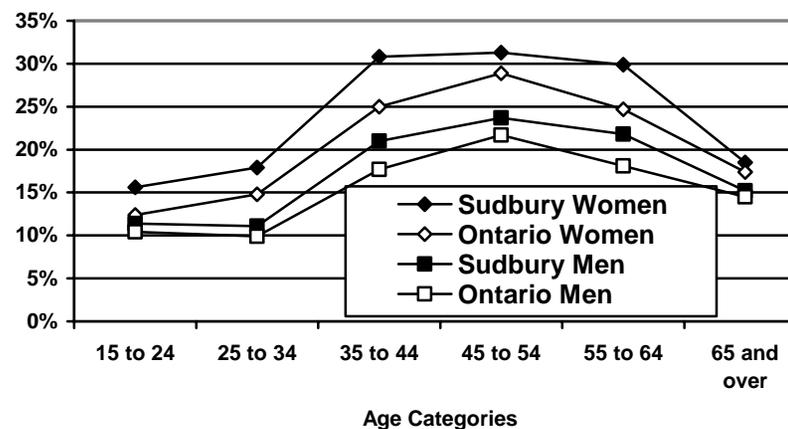
Fifty-six (56, 50.5%) of those who had help were helped by family. Hired help and private organizations/businesses helped 19.8%; friends helped an additional 15.3%; and neighbours, government-subsidized programs, and non-profit organizations helped 8.1% of these seniors. Six people (6, 5.4%) didn't know who they got help from, and 1 person (0.9%) had help from no one.

Of the 110 who were helped by someone, only 20% lived with the person who helped them. Seventy-seven point three percent (77.3%) of the rest received help from someone who was not cohabitant. The last 2.7% could not remember from whom they had received help.

Provision of Unpaid Care to Seniors

Greater Sudbury appears to be doing better overall than Ontario with respect to the proportion of persons providing volunteer hours of care to seniors. Men and women in Greater Sudbury are more likely than their counterparts in Ontario to provide unpaid care to seniors (figure 5).⁴⁵

Figure 2. Percent of Sudburians Who Spent at Least Some Time Providing Unpaid Care to Seniors, 2001 Statistics¹



¹ Statistics Canada. Hours Spent Providing Unpaid Care or Assistance to Seniors, Age Groups and Sex for Population 15 Years and Over, for Canada, Provinces, Territories, Census Metropolitan Areas and Census Agglomerations, 2001 Census – 20% Sample Data. 2001, Ottawa: Statistics Canada, February 11, 2003. Cat. No. 97F0013XCB2001003.

Regardless of this perceived 'lead' in the proportion of persons providing unpaid (volunteer) care to seniors, there is room for improvement. These figures show a disparity

between younger adults and middle-aged persons and between males and females: middle-aged persons and females are more likely to provide unpaid care to seniors than are youth and young adults or males. It may be that this kind of unpaid care to seniors could be better distributed among age groups and genders, or provided by organized care services in order to reduce the burden on middle-aged women.

Health Status

Health Indicators

Self-rated Health

Local self-rated health is improving, but still lags behind the province. In 2005, 63.5% of seniors living in the Sudbury & District Health Unit (SDHU) catchment area (which includes the City of Greater Sudbury, and the Sudbury and Manitoulin Districts), rated their health as good, very good or excellent.⁴⁶ This is a slight improvement from the 61.3% who rated their health this way in 2001 ⁴⁷, but is significantly lower than the percentage of Ontario seniors who rated their health this way in 2005 (74.6%).

Body Mass Index

Almost two-thirds (64.2%) of seniors in the SDHU catchment area are overweight or obese. compared to the provincial rate of 53.3%.⁴⁸ This statistic must be interpreted with caution, as sample sizes are small.

Our seniors are carrying more extra weight than is the norm. Even without the comparison to Ontario, the 64.2%

figure is alarming. A high body mass index is associated with a higher incidence of circulatory disease and some cancers, and this is indicative that lifestyle changes should be encouraged and supported in this region.

Mortality, Life Expectancy and Disease

Average Life Expectancy

Given the SDHU seniors' lower percentage of good or better self-rated health compared to that of Ontario seniors, it is not surprising that the average life expectancy in the SDHU catchment area is significantly lower than the average life expectancy in Ontario or Canada; meaning that if you live in Sudbury, you can expect to live a shorter life than you'd expect overall as a Canadian or Ontarian. In every category, local life expectancy is significantly below the provincial and national figures: seniors in this health unit area can expect to live about 1 year less than the Ontarian and Canadian averages (which are nearly the same). While the difference of one year might not seem like much, it's important to remember that we're not referring to an extra year in a mortgage—we are talking about an extra year of someone's (in fact, many people's) life.

Age-standardized Mortality Rates

In terms of statistical significance and meaningful information for policy, what is perhaps more alarming are our mortality rates per 100,000 people in Sudbury in comparison to those of Ontario. In nearly every area, Sudbury's mortality rates from selected causes of death are

significantly higher than Ontario's.⁴⁹ The general age-standardized mortality rate per 100,000 persons is 597.8 in Ontario, versus 727.8 in Sudbury.

Being a male in Sudbury is even more precarious for your survival. In general, men's mortality rates are significantly higher than women's.

Cancer Incidence

Age-standardized cancer incidence rates by selected sites of cancer are significantly higher overall in Sudbury (than in Ontario) for all invasive primary cancer sites in general for both men and women.⁵⁰ Also, they are significantly higher in Sudbury specifically for the following sites: colorectal and rectosigmoid junction cancers (for men), and bronchus and lung cancers (for both men and women). Interestingly, neither prostate cancer rates nor breast cancer rates were significantly higher in Sudbury than they were in Ontario.

Arthritis and Rheumatism

Nearly half (48.6%) of seniors in the SDHU catchment area suffer from arthritis or rheumatism.⁵¹ Because arthritis and rheumatism can be debilitating, care should be taken to address issues around mobility and accessibility to essential services and businesses.

Asthma

In the SDHU catchment area, 9.6% of seniors suffer from asthma.⁵² While this figure may at first seem low, it represents 2500 seniors.

Diabetes

Nearly one quarter (23.3%) of seniors in the SDHU catchment area suffer from diabetes compared to a provincial rate of 14.7%.⁵³

Diabetes is, of course, a serious disease, particularly in the elderly. According to the Canadian Diabetes Association, "high blood glucose levels [caused by diabetes] can cause complications such as blindness, heart disease, kidney problems, nerve damage and erectile dysfunction."⁵⁴ It often leads to mobility-affecting amputations.

Recommendations to manage diabetes include not smoking, regularly checking blood glucose levels, keeping cholesterol and blood fat levels low, maintaining a healthy weight, keeping blood pressure at a healthy level, and being physically active; among other common-sense health advice.⁵⁵

High Blood Pressure

More than half (55.7%) of seniors living in the SDHU catchment area suffer from high blood pressure, compared with 45.0% of Ontario seniors.⁵⁶ SDHU's figure is significantly higher than that of Ontario. Because high blood pressure can predispose an individual to numerous health problems, this is an important issue to address.

Health Behaviours

The following information concerns health behaviours that can greatly influence people's overall health and well-being. Promoting healthier behaviours in these areas could

really help to improve the longevity and quality of life of all people, not only seniors.

In the SDHU catchment area, 13.9% of seniors are smokers, while 9.0% of Ontario seniors are smokers.⁵⁷ Smoking is known to cause cancer and to be a factor in a number of other deadly diseases.

Of the senior non-smokers in the SDHU catchment area, 92.4% are not being exposed to second-hand smoke at home.⁵⁸ A slightly higher percentage (94.5%) of senior Ontarians is not being exposed to second-hand smoke at home.⁵⁹ The area is slightly lagging in this respect. Second-hand smoke is a known cause of cancer and other diseases.

Eighteen point four percent (18.4%) of seniors in the SDHU catchment area who consume alcohol will do so to excess (more than 5 drinks on any one occasion), and about half of these seniors (8.7%) who drink to excess will do so 12 or more times a year.⁶⁰

In terms of stress, local seniors may be more likely than Ontario seniors to suffer from quite a lot of life stress. In the SDHU catchment area, 12.4% of seniors report suffering from quite a lot of life stress, compared to 10.8% of Ontario seniors.⁶¹

Nearly half (49.6%) of all SDHU catchment area seniors are physically inactive.⁶² Besides this inactivity, only 41.4% of SDHU catchment area seniors consume 5 or more servings of fruits and vegetables a day.⁶³ Canada's Food Guide recommends that people aged 51+, regardless of sex, consume at least 7 servings of fruits and vegetables a day.⁶⁴

In 2005, most (74.8%) SDHU catchment area seniors had been immunized against the flu within the previous year.⁶⁵ In this respect, local seniors are doing better than Ontario seniors, of whom only 71.8% had been immunized against the flu.⁶⁶ Getting the flu shot is a safe means to prevent against infection.⁶⁷

Mobility and Physical Limitations

Injuries in the Last 12 Months

According to Statistics Canada, in 2005 10.5% of seniors in the SDHU catchment area had received injuries causing limitation of normal activities.⁶⁸ This is compared with 8.7% of Ontarians.⁶⁹ While these numbers do not differ significantly (the sample population for SDHU is small and the figure 10.5% must be interpreted with caution), it still would appear that senior Sudburians are more likely to injure themselves than Ontarians, on the whole.

Ramifications of Injuries to Seniors

According to the Sudbury & District Health Unit, which is mandated to provide programming to prevent seniors from falling, 1 in 3 people aged 60 or over will experience a potentially injurious fall in a year. By age 80, everyone can expect to have one fall once a year.⁷⁰ These falls can cause a fracture to the neck of the femur or to the acetabulum—the socket that the hip fits into—and are referred to as hip fractures.

A hip fracture, aside from being incredibly painful and debilitating for the patient, is also costly to repair. If a patient can be helped by a hip replacement it will cost

about \$40,000 to our health care system.⁷¹ While hip fractures do not always result in hip replacement surgery, convalescence for any hip fracture can take months of bed rest; and therefore an injury have high costs for seniors.

The health unit delivers information sessions and booklets around injury prevention to seniors in the catchment area. This programming includes tips on preventing injury in every area of a home, as well as general injury-prevention tips. They also encourage walking as safe, healthy exercise for senior citizens. Seniors who walk regularly are less likely to have falls and therefore less likely to suffer from broken hip or other potentially debilitating injury.⁷²

Mobility Status

Respondents to the survey of older Sudburians were asked about various barriers. One of these areas was physical mobility issues. When asked about their physical limitations, most respondents (88.9% of all 252) responded that they can walk unassisted, while 9.5% responded that they use a cane or walker for support when walking, and 1.6% responded that they use a wheelchair.

Despite the high percentage of respondents who stated that they can walk unassisted, 61 persons (24.3% of 251) said that their level of physical mobility sometimes limited their ability to do daily tasks (table 3).

Table 3. Activity Limitations^{1,2} of Respondents

	Number	Percent
Household Cleaning (vacuuming, dusting, washing dishes, etc.)	31	12.4%
Shopping for Groceries	21	8.4%
Shopping for Other Needs (clothing, household items, etc.)	19	7.6%
Attending Social Events Outside my Home	18	7.2%
Preparing Meals	14	5.6%
Personal Care (bathing, clothing yourself, using the washroom, etc.)	8	3.2%
Physical Activities (dancing, curling, bowling, running, cycling)	5	2.0%
Walking	4	1.6%
Yard Maintenance (e.g., mowing the lawn)	4	1.6%
House maintenance / repairs	2	0.8%

¹ Valid n = 251.

² Percentage will not sum to 100: response categories are not mutually exclusive.

According to Statistics Canada, fifty-six percent (56%) of those seniors residing in the SDHU catchment area experience participation and activity limitation because of physical or mental abilities.⁷³ In the next-highest age group, people aged 45 to 64, only 35.2% experience similar participation and activity limitations. The recognition that seniors are far more limited by physical or mental ability than younger cohorts is particularly significant in planning programs and services for seniors.

Neither men nor women seem to be more or less affected than the other group in terms of physical limitation or mobility.

Ramifications of Decreased Mobility

According to the Seniors' Liaison Officer of the Greater Sudbury Police Service, and the local representative of the Ontario Network for the Prevention of Elder Abuse, seniors may be living in poor conditions because of lack of upkeep of their residence.^{74,75} This lack of upkeep may happen for a variety of reasons, including cognitive limitations and physical limitations. For example, an apartment or house may become increasingly dirty or cluttered if a senior has diminished capacity to clean the residence.

A recommendation that was suggested by the representative from the Ontario Network for the Prevention of Elder Abuse was that an agency or service be created that is akin to the Children's Aid Society, but for seniors. This agency or service would provide assessments to seniors and connect seniors who required help in their homes with services that could provide that help to them, whether it be cleaning, home care, maintenance, or other services to assist seniors at home.

Barriers to Mobility within the Community

One hundred thirty-nine respondents (55.2%) identified barriers to their mobility (not originating from their physical limitations) within their community / local stores (table 4).

Table 4. Barriers to Mobility^{1,2} of Survey Respondents within the Community

	Number	Percent
Icy sidewalks	62	24.6%
Snow not cleared on sidewalks	55	21.8%
Bumpy sidewalks	37	14.7%
No sidewalks	28	11.1%
Stairs	27	10.7%
Loose gravel on walkways	26	10.3%
Weather	18	7.1%
Poor health	9	3.6%
Distance / Convenience / Lack of transportation / No Parking	9	3.6%
Trains / Bears / No Lights on Road / Sidewalk Danger / Traffic Danger	7	2.8%
Fear of Crime	6	2.4%
Roads	4	1.6%
Concern over doors / entrances	3	1.2%
Hills	2	0.8%

¹ Valid n = 251.

² Percentage will not sum to 100: response categories are not mutually exclusive.

The biggest concern in Sudbury for older adults and seniors trying to get around appears to be the condition and upkeep of local walkways. The importance of upkeep was echoed in community focus groups. According to focus group participants, a lack of sidewalk maintenance and snow clearing can present major difficulties to seniors with limited physical mobility.

In terms of mobility issues, focus group participants said that businesses must be prepared to install door openers or to have more accessible entries. Even medical services providers have had to be reminded that disabled citizens and the frail cannot open heavy front doors without some form of assistance. Perhaps these customizations to businesses and service facilities are seen as too costly, but to patrons they can make the difference in terms of a choice to continue using the same services or to seek service elsewhere where facilities are more accessible. Friendly to Seniors Sudbury provides free accessibility assessments to businesses.

Medical Services in Greater Sudbury

Greater Sudbury has done much to address the medical system constraints in the city.

For a long while, Sudbury has been without a sufficient physician to population ratio. According to the Institute for Clinical Evaluative Sciences, in the Algoma-Cochrane-Manitoulin-Sudbury District Health Council area in 2001/02, there were about 79 general practitioners/family physicians (GP/FPs) per 100,000 population.⁷⁶ By contrast, urban centres in Ontario averaged 102 GP/FPs per 100,000 population.⁷⁷ That proportion in Greater Sudbury was a decrease from the 1996/97 figure, which had seen 83 GP/FPs per 100,000 population. This downward trend has likely halted and may even be on an upswing in part thanks to the construction and opening of the new Northern Ontario School of Medicine. The City of Greater Sudbury provides supportive funding to this medical school, ensuring a greater likelihood of doctors practising in the north (and in Greater Sudbury) once their programs have been completed.⁷⁸

Safety and Elder Abuse

The Greater Sudbury Police Service has a Seniors Liaison Officer, dedicated specifically to addressing the needs of seniors.

Crimes against seniors are often financial, psychological and physical.⁷⁹ These crimes can take the form of fraud perpetrated by telemarketers or home contractors, abuse of powers of attorney, theft, manipulation, and physical violence.⁸⁰ Families can abuse seniors when manipulating them with ultimatums or even perpetrating fraud or theft themselves. A grandmother or grandfather whose grandson has stolen \$50 may not report the theft because of family loyalty.⁸¹

Seniors who are not capable of acting on their own behalf are at far greater risk of victimization. There is no watchdog for people who are enacting power of attorney, nor is there any legal requirement to have a lawyer involved in a power of attorney agreement.⁸² The result is that seniors may have incompetent or manipulative persons responsible for their well-being. As well, if they at any time decide they want someone else to act on their behalf, unless they revoke the other person's power of attorney with a written statement, they may have two or more people claiming power of attorney and making decisions on their behalf.

There is an Elder Abuse Prevention Committee in Sudbury, as well as membership from the Ontario Network for the Prevention of Elder Abuse. Funding is scant or non-existent, however, and as such these agencies do not have the capacity to consistently provide information services to the public.

Transportation

Most respondents to the survey of older Sudburians (77.8%) indicated that they usually drove themselves around town, followed by 9.5% who are driven by friends or family, 5.2% who use Sudbury Transit, 2.8% who walk, and the remaining 4.7% who took a taxi, used the Seniors' Transportation Program, took Handi-transit, used a wheelchair, or walked and drove in combination. Because the sample did not include seniors who stay in retirement facilities with possibly more complex issues to deal with, drivers are likely to be over-represented.

Respondents were asked if certain barriers make it difficult for them to travel throughout the city. The most pressing issues identified by respondents were the condition of roads and sidewalks and their upkeep (care, Table 5).

Table 5. Barriers to Transportation² of Survey Respondents within the Community

	Number	Percent
Condition of Roads and Sidewalks	128	50.8%
Care of Roads and Sidewalks	121	49.0%
Physical Pain or Disability	89	35.3%
Affordability	48	19.2%
Deteriorating Vision	34	13.6%

¹ Valid n = 252.

² Percentage will not sum to 100: response categories are not mutually exclusive.

Many of the focus group participants used public transportation rather than driving, mostly because driving is cost-prohibitive, and transportation was certainly an important issue for them. The problems specifically cited echoed what survey respondents cited: road maintenance and overall condition of roads and walkways were said to be lacking. In particular, respondents said that the clearing of snow from sidewalks and walkways was currently insufficient, and snowploughs often created more problems for pedestrians by ploughing snow onto already-cleared sidewalks. The seniors who have mobility issues will sometimes be forced to walk on the street because it is the only clear path, and the potential for injury by vehicles is much higher on a motor vehicle roadway than it is on the sidewalk. Downtown sidewalks were cited to be particularly poorly cleared in the winter, and since many seniors' services are offered in the downtown core it puts the seniors using these services at constant risk of a fall.

It was mentioned in focus groups that although the bus service is very good, it could be improved by regularly announcing upcoming stops and by enforcing the notion that one person should take up one seat only on the bus (rather than spread out and take up extra seats with their luggage, preventing others from sitting down).

Vision loss is a major issue for older persons, and vision loss did come up in focus groups. As well, concern was expressed regarding Ontario's licensing policy for older seniors. In Ontario, drivers aged 80 and over must complete a vision and knowledge test as well as take part in an education session every two years⁸³ (the general population must only renew their license every five years, with no driving test⁸⁴). Unfortunately, seniors must also pay the licensing fee every two years. It makes driving even more cost prohibitive.⁸⁵

Greater Sudbury's Services to Seniors

In 2006, the ParkSide Older Adult Centre, together with the Greater Sudbury Police Service, The Mayor's Council and Roundtable on Seniors' Issues, and the Trillium Foundation, produced the Older Adult Directory.⁸⁶ This directory has a very comprehensive listing of services available to seniors living in Greater Sudbury, and is available online or as a print document. Most of the information in the following section is drawn from that directory, and from the Fall/Winter 2007 City of Greater Sudbury Leisure Guide.

Cultural Spending

The city of Greater Sudbury invests in a variety of recreational facilities and programs. There are 4 museums, 13 library branches, 6 public parks and 2 conservation areas, 14 arenas and 9 community centres.

Arts and Culture

There are a great many arts and culture groups across Greater Sudbury. These span from visual arts through music and theatre. Many of these groups are participatory in nature, where members play music, perform in theatre productions, or create visual arts.

The city also has a number of model railroad clubs, a model aircraft club, a bridge club, quilting and stitchery clubs, a stamp club, a scrabble club, a horseshoe club, among other socially-oriented clubs.

Neighbourhood Associations and Seniors' Groups

Greater Sudbury boasts 59 neighbourhood associations across the city. Seniors clubs (which were previously mentioned in 'Social Networks') numbering 36, with further service augmentation provided by agencies such as the Centre de santé communautaire de Sudbury, residential seniors' clubs, Friendly to Seniors, the Northern Echoes Choir, and le Carrefour Francophone.⁸⁷

Other Services

Medical Assistive Devices

There are three providers of personal alarm systems for seniors in Greater Sudbury. Additionally, there are two oxygen equipment providers, and seven providers of assistive devices (such as wheelchairs, prostheses, etc.) or information about assistive device funding programs.

Help Lines

There are many service providers that operate help lines for addictions, victims of violence, people in crisis, smokers, and cancer sufferers.

In addition to these lines, seniors may call the Greater Sudbury Police Service's Seniors Liaison Officer, who is dedicated to addressing crimes involving older adults. In emergencies, seniors may dial 911.

Awareness of Services

According to the Seniors Liaison Officer at Greater Sudbury Police Services, the call volume she experiences is largely comprised of issues that are not police matters.⁸⁸ This statement was echoed by the representative from the Ontario Network for the Prevention of Elder Abuse, who further commented that there is no funding for either the Ontario Network or the Sudbury Elder Abuse Committee to provide information services to clients.⁸⁹

Seniors' Information Line

The ParkSide Older Adult Centre has just launched a Seniors' Information Line in Greater Sudbury. This line, which can be reached by dialling 673-3636, will provide seniors with immediate information about services available specifically to them.

This line is funded with moneys from FedNor, the Greater Sudbury Police Service, the City of Greater Sudbury, and the ParkSide Older Adult Centre. The rationale for the line was that seniors had no coverage in terms of information lines in this area, even though we have information lines for children's and family services.

The line operates Monday to Friday from 8:30 a.m. to 4:30 p.m. It is managed by one full-time staff member, and is currently only a one year pilot project, although a bid has been put in to council for sustainability funds.

211 North

The new 211 North telephone information line—a project funded with moneys from Fednor—will be launched in the Sudbury area in late 2008 or January 2009, at the latest. This line will provide callers with information about community, government, health and social services,⁹⁰ and will feature information specialists in particular areas, such as seniors' services.

The information line will function through a call centre operated in Thunder Bay; however a database of local services will be collected, maintained, and provided to the call centre by a team located in Greater Sudbury.

The line will operate 24 hours a day, 7 days a week.

ParkSide Older Adult Centre

The ParkSide Older Adult Centre is located in downtown Sudbury, and offers a variety of programs for seniors for an annual membership fee of \$35. Its mission statement is to “function as a not-for-profit corporation, registered with the Province of Ontario, providing opportunities for Older Adults to explore their potential and to maintain an active, independent life style.”

The activities provided by the ParkSide Centre range from technology courses (computer use, internet use) to cooking and other pastimes such as photography, rug hooking, crafting, wood carving to more involved pursuits such as autobiography, genealogy, and physical activities such as square dancing, clogging, curling and yoga.

Current Planning and Programs

Funded United Way / Centraide Initiatives

United Way / Centraide of Sudbury and District currently funds programs directed at seniors. The Seniors' Transportation Program, which is delivered by the Canadian Red Cross Society, Sudbury Branch is a volunteer driver program that is designed to transport frail elderly persons with no other means of transportation to their medical, personal and business appointments, as well as shopping.⁹¹ The Adult Day Centre Program, which is delivered by the Victorian Order of Nurses, provides daytime programming for older adults with special needs that can serve as respite for regular family and caregivers. United Way / Centraide also funds a Community Outreach Program delivered by the Canadian Hearing Society that serves hard of hearing seniors, among other clients.

Many of the other 52 programs that the United Way / Centraide funds are not directly geared to seniors but do provide important services to seniors.

City Planning: Mayor and Council's Roundtable on Seniors' Issues

Greater Sudbury recognises the need for planning around the expected increase in the senior demographic, and plans to attract even more seniors to the community.⁹²

In 2004, the city released a report titled "Action Planning for Sudbury's Golden Opportunity: Findings and Recommendations." This report was the culmination of a two-year project to develop a local economic development plan with a focus on seniors.⁹³

The plan's goals are:

- to improve the coordination and planning of services to and for seniors,
- to attract and retain health professionals,
- to develop a centre of excellence in health care,
- to develop senior-specific housing programs and policies,
- to provide a greater range of housing options for seniors,
- to enhance public education and understanding around retirement readiness,
- to improve understanding of labour force gaps,
- to inform the public of the attributes of living and working in Sudbury, and
- to [generally] enhance the quality of life for seniors in Greater Sudbury.

In many of these areas (discussed previously in the report), the city is making good progress.

Recommendations

Given our aging population, it is imperative that Greater Sudbury be better able to meet the needs of its seniors.

Service Location and Accessibility

Most seniors reside in the former City of Sudbury and Lively, and it follows that services are located in these communities.

1. Services must be accessible to those with a lower level of physical mobility; therefore there must be affordable public or volunteer transportation available to take seniors from outlying areas to these centralized service areas.

Recognising Seniors' Limitations

Arthritis, injuries, breathing difficulties—all lead to a decrease in mobility and physical ability. Along with deteriorating vision and hearing, chronic illness, injuries and physical degeneration take their toll on a senior.

Currently, the United Way/Centraide provides funding for a volunteer-staffed transportation service for frail seniors with no alternate transportation. Greater Sudbury Transit also provides good service to most areas of the city.

2. We will need to adapt our services and strategies so that we can still allow seniors to access the services they require and participate in important social and civic activities.
3. Funding should be continued for the services that currently deliver transportation services, and

promotion and/or expansion of those services should be considered.

4. Feasibility of designing and implementing a program that provides home assessments and service connection for seniors living independently should be examined.

Recognizing Major Life Changes and Challenges

Nearly two thirds (31.6%) Greater Sudbury seniors are widowed and unpartnered. As well, women are more likely to survive men, which means the proportion of older widows in Greater Sudbury is likely to increase perhaps more than the general proportion of seniors to other Sudburians. It's colloquial truth that active seniors experience a higher quality of life than do sedentary and isolated seniors (this is true of people in general).

We have a social responsibility to provide our elders, especially our lone seniors, with as vibrant a life in their golden years as is possible. It is important also to recognise the financial constraints placed on seniors, particularly widowed seniors. Since volunteer care of seniors in Greater Sudbury is occurring at a higher rate than in Ontario, supporting that care and expanding volunteer services could be one way that we help keep seniors involved and socially active.

5. It is imperative that some kind of service be provided to get seniors—particularly senior women—out and active in the community.
6. Whatever our services are to keep seniors active, healthy and socially involved, we must ensure that

they are not cost-prohibitive to seniors with a fixed or low income.

Services Awareness

Seniors are currently unable to access a central information repository about community and social services, as well as income programs. 211 North is an innovative program that will hopefully eliminate the need in this area. It is important, however, that information gaps that seniors in Greater Sudbury have been experiencing are addressed by the Seniors' Information Line, and later by 211 North.

7. Ensuring that 211 North and the Seniors' Information Line are providing information about what entitlements seniors have and how to obtain those entitlements, should be a priority.
8. The use of 211 North and the Seniors' Information Line should be monitored to ensure there is no duplication of services, given that United Way / Centraide will eventually take over funding of 211 North.

Housing

Sudbury is in a housing crisis, and finding affordable housing is taxing on the healthiest of persons. Seniors are at a great disadvantage particularly if they have any transportation or mobility issues in terms of searching for housing. Moreover, their income level can be severely limiting on the type of housing that they are able to find and secure.

9. Funding for programs around housing support workers specifically for seniors would be very timely. Advocating for housing subsidies for seniors and advertising the guaranteed income supplement to seniors would be two more areas that could bring about positive outcomes.

Encouraging a Healthy Lifestyle

Sudbury seniors are putting their health at risk. We already have higher mortality rates and lower life expectancies than the Ontario populace. More ill/unwell seniors will lead to a greater strain on our already strained health care system, not to mention greatly lower the quality of life that seniors experience.

10. It's very important that we encourage seniors to engage in healthier behaviours, especially in light of our lower proportion of GP/FPs to population.

Appendix A: Data Sources

Data presented arise primarily from two sources: Statistics Canada and a local needs assessment conducted in the summer of 2007.

Statistics Canada

First, statistical data gathered by Statistics Canada and publicly available at www.statcan.ca are presented to provide an overall picture of seniors in Greater Sudbury. To that end, for the purpose of this report, Greater Sudbury's Census Metropolitan Area (CMA) data are used rather than the data for the City of Greater Sudbury.

The Greater Sudbury CMA includes the City of Greater Sudbury, Wahnapipei 11 First Nations Reserve and Whitefish Lake 6 First Nations Reserve. While Wahnapipei 11 and Whitefish Lake 6 account for fifteen or fewer seniors in Greater Sudbury, the data tables available from Statistics Canada are presented by CMA rather than by city and reflect those living on these two local reserves as well as those who live in the city of Greater Sudbury.

2007 Greater Sudbury Needs Assessment

The second source of data is a needs assessment conducted jointly by Friendly to Seniors Sudbury and the Social Planning Council of Sudbury. This needs assessment consisted of a telephone questionnaire of older adults and seniors, a community scan of service providers, and focus groups with seniors. Survey of Older Sudburians. In July, a telephone survey of Sudburians aged 55 and older was conducted. A total of 253 people participated in the survey. This interview was conducted using computer-assisted telephone interviewing technology, and is limited by the fact that respondents must have had a private residential telephone line in order to participate. Thus, those residing in nursing homes or other situations could not be included. The survey gives a good picture of what life is like for older middle-aged and senior-aged persons living independently in Greater Sudbury.

Community Scan

In September of 2007, local service agencies were asked for their opinion concerning the needs and status of seniors in Greater Sudbury. These agencies included, but were not restricted to: the Sudbury & District Health Unit (SDHU), retirement homes, long-term care facilities, seniors' independent living facilities, the Independence Centre and Network (ICAN), and the Community Care Access Centre (CCAC).

Focus Groups

In September of 2007, four focus groups were held with local seniors in order to find out how they felt about living in Greater Sudbury. Two of these focus groups were conducted with seniors living in retirement homes. One was conducted with English-speaking householder seniors, and a fourth was conducted with Francophone householder seniors.

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