Terrace and Area Seniors' Needs Project Final Report

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Greg Halseth, Laura Ryser, Carla Martin, and Neil Hanlon Prince George March 2006

Availability

Copies of all reports associated with the Terrace and Area Seniors Needs' Study are available in a number of locations. In Terrace, copies have been deposited with the City and the public library. At the University of Northern British Columbia, copies have been deposited at the Weller Library or can be accessed on the Community Development Institute website: http://www.unbc.ca/cdi/research.html

Project Reports

- Methodology Report
- Population Background and Trends
- Final Report
- Executive Summary

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Terrace and Area Seniors' Needs Project Final Report

1.0 Project Description

Since the 1980s, Canada's population has been aging. In small towns, the provision of housing, services, and facilities influence the decisions of individuals when choosing to retire in a community. In the City of Terrace, there were about 686 people over the age of 65 in 1991, but by 2001 there were about 1041 people over age 65 (Census, 2001). The increase in the number of older residents, and the increase in the number of residents who wish to remain in Terrace when they retire, have increased the level of interest in how the community, local services, and available housing options will meet the needs of a growing seniors' population. As a result, UNBC and the City of Terrace are working together to assess the needs of older residents.

The purpose of the Terrace and Area Seniors Needs Project is to examine housing and support service needs for seniors in the City of Terrace. Given that Terrace is a service hub for a wider region, interviews and focus groups included people from the surrounding rural areas and neighbouring First Nations' communities. The work was carried out by a research team from UNBC with the goal to provide local leaders with information relevant to decision-making over community planning and infrastructure investments. The project was carried out in the winter of 2006.

This report includes thematic summary comments from the community interviews and focus groups, as well as lists of responses to the questions asked in those interviews and focus groups.

Table 1.1 Timeline

December	Project application developed
2005	Terrace funding confirmed
	Project Contribution Agreement confirmed
	UNBC Research Ethics Board process completed
January 2006	Project begins
	Review with Terrace Advisory Group
	Initiate review of local population data and preparation of
	population change report
	 Organize interviews and focus groups for assessment of seniors' needs
	Begin local interviews
February 2006	 January 30 to February 18 conduct key informant interviews
	• February 1 to 16 conduct focus groups
	 Completion of analysis from interview and focus group
	data
	Complete population change report
March 2006	Review of draft project reports with Terrace Advisory
	Group
	 Final reports completed and sent to City of Terrace

2.0 Methodology

The data and information for this project was collected through 3 methods. These include:

- a review of Census population data,
- key informant interviews, and
- community focus groups.

Key informant interviews were conducted between January 30th and February 14th, 2006. The purpose was to provide background information for a future community survey instrument. Key informants were drawn from community groups, service provision agencies, local government, and people actively engaged in seniors' issues. A total of 54 interviews were conducted, with a total of 74 people participating.

A general breakdown of interview participants by community sector is shown in Table 2.1.

Table 2.1: Interview Respondents

Sector	Number of Respondents	% of Respondents
Health Care	5	6.8
Housing	5	6.8
Government	4	5.4
Social Support Services	15	20.3
Social and Recreational Activities	15	20.3
Senior - general	27	36.5
Other	3	4.1
Total	74	100.0

Source: Terrace Seniors' Needs Assessment Interviews, 2006.

Focus groups were conducted between February 1st and 16th 2006 to provide additional background information for the City and a possible future community survey. Focus groups were identified by the City's project advisory group and by many of the individuals and groups contacted through the interviews. A total of 10 focus groups were conducted, and a total of 76 people were able to participate¹. A general breakdown of the focus groups by community sector, as well as the number of participants, is shown in Table 2.2.

Table 2.2: Focus Group Participants

Sector	Number of Participants	% of Participants
Seniors Advisory Committee	12	15.8
Health Advisory Committee	10	13.2
OAP Happy Gang	12	15.8
Emergency Shelter	7	9.2
First Nations' Elders	5	6.6
Service Providers	4	5.3
Terraceview Family Council	8	10.5
Seniors group – general A	7	9.2
Seniors group – general B	6	7.9
Seniors group – general C	5	6.6
Total	76	100.0

Source: Terrace Seniors' Needs Assessment Interviews, 2006.

¹ From the 150 people who participated in the interviews and focus groups, 17 helped out by participating in both an interview and a focus group.

3.0 Background

The purpose of the Terrace and Area Seniors Project was to scope out some of the general concerns and issues which the community might identify around housing and support service needs for older residents. The goal is to provide information of use to the City now, as well as information that might assist with the development of a broader community survey to assess specific topics or needs.

The information was collected through a series of focus groups and key informant interviews. From this work, the research team has assembled a number of summary notes which capture the key themes running through each section of the research project. The summary notes are described in the following under nine headings.

Background Information
Housing
Health Care
Social and Support Services
Transportation
Physical Environment
Social Environment
Quality of Life and Cost of Living
Informal and Formal Care Networks

Following the summary notes, a more detailed description of the issues and topics raised are compiled in tables in the appendices. Appendix 1 includes table results from the key informant interviews. Appendix 2 includes table results from the focus groups.

4.0 Results

This part of the report includes summary notes which capture the key themes running through each section of questions from the focus groups and key informant interviews. As noted above, detailed tables of participant responses are found in Appendix 1 and Appendix 2. As will be noted in these results, there are a number of comments about the design and layout of the city. People may ask if these issues are 'design issues' (related to the way the city and area is physically built) or if they are 'aging issues' (as people notice these things more as they get older – especially if their mobility is affected). The answer is probably both. Most of the city design and city planning common across North American is based upon a wide separation of land uses and the creation of low density developments; with all of these joined together by automobile accessibility. As people age, they notice more such outcomes as the longer distances to shopping and recreational activities.

Background

Perhaps the key questions in the Background section of the interview/focus group process concerned participants' sense of the advantages/disadvantages to retiring in Terrace. When asked about the advantages to retiring in Terrace, the two strongest themes to come through were the value of local social networks and the quality of small town living. Together with the beautiful setting and scenery, these are powerful connections that will act to bind residents to the community. If we add in the presence of grandchildren, seniors are even more likely to stay in the community. These themes identify some key areas where the City can invest in supporting events and services that facilitate community interaction and community living.

Five items were the most noted among disadvantages of retiring in Terrace. The first of these involved the climate, especially the periods of heavy snow in the winter time and how older residents would clean their driveways, walkways, and move around the community. Distance to larger centres was also identified as a challenge, particularly the concern for access to higher order services (especially medical services). Community design was raised as an issue, including the distances between existing medical and seniors' housing facilities, and between these and the social and shopping facilities of the community. Downtown lighting, lighting on walkways (especially those leading up hills), and wheelchair accessibility were also identified as concerns. A fourth area identified included an emerging concern over safety. While the interviews and focus groups did not identify immediate safety or crime as an overriding issue, as people grew older there was evidence of more concern. Last, there was concern about the housing stock and housing market in Terrace. The housing stock was seen as in need of renovation in order to meet the needs of an aging population, and there was concern with being able to sell one's home when that time might come.

Housing questions

The focus group and interview participants were asked a number of questions around the housing situation in Terrace for older residents. Six issues captured most of the comments with respect to the current housing situation. The biggest concern in this regard was the lack of long term care units. Related to this was a concern that current housing options did not include a range of mixed care options. People spoke about their wish for seniors housing facilities that included independent living units, progressing through to long term care units, so that people did not have to move great distances each time their care needs changed. A third concern involved the length of waiting lists in order to access the current stock of long term care housing. There was considerable diversity and experience with respect to waiting lists, however. When some facilities were under construction, people were able to 'buy in' during that period and thus had no wait time. In other cases, people reported waiting up to eight years for space.

Moving to the existing housing stock, there was a lot of discussion about ways to support seniors living independently longer in their own homes. To support independent living, a range of health and property care services would be needed. The way provincially organized service providers have withdrawn from a number of these support areas was a concern, as was an emerging issue related to safety in the home. Collectively, the community will need to search for solutions to providing home care, and basic property maintenance, in order to assist seniors living healthy and safe in their own homes longer. Finally, a number of issues were raised around providing an advisory or information office for seniors looking at modifying or changing their housing options. Many people spoke about the questions they had with respect to accessing information on home renovations, financing property maintenance and upkeep, and placements into various types of care facilities. At present, people identify that families feel very much alone and uninformed when they face these sorts of questions. Consideration may be given to new or additional ways to coordinate this need for information and referral.

A number of questions were asked about the design, location, and availability of housing in Terrace to support seniors' independence. Two key issues were identified. For those living independently, access to shopping and services was key. The role of good quality sidewalks, lighting, and transit were important. For those who were in a care facility, there was considerable concern about the location of those care facilities and accessibility challenges for visitors. As spouses or family members lose the ability to drive, walking access to these facilities can be very difficult. There was strong support for the quality of facilities and care provided in the existing units in Terrace. Comments for the future included the need to increase wheelchair accessibility, increase street access and connections to services, and develop adaptable housing so that as people's care needs increase they will not need to move. In larger facilities, people spoke about the need to include more common rooms and kitchens to assist with family interaction. It was also recommended to provide closer links and access to the community's medical, shopping, social, and recreational services.

A further issue was raised with respect to affordability. There were concerns about changing formulas for calculating the costs charged to residents and how this was creating problems for the remaining spouse. When a household has a limited income, the cost of placing one partner in care often means that the remaining partner is now effectively paying for two residences. This is

a significant cost burden identified across a range of people and groups participating in this study. Such issues were felt to be especially important if the remaining spouse had been a 'stay at home wife' with limited pension support. Given that concerns were raised in both the focus groups and the interviews about the needs of low income households as they grow older, this issue of affordability is going to be an important community issue.

Another issue identified with respect to the availability of seniors housing had to do with the assessment criteria applied to determine if people qualify for assistance. In some cases, there was a lack of understanding about the assessment process, while in other cases there was concern about the limited period of time assessment workers spent evaluating client needs. It was felt that both of these challenges limited the effectiveness and the efficiency of the assessment and placement processes.

Running through the housing section was a strong desire among people participating in this study that seniors wished to age at home. When people were asked about the types of housing that the community needed for seniors, this aging at home issue was reinforced by comments about helping seniors maintain and adapt their own properties as they age. As noted above, there was strong support for the development of seniors housing facilities targeted specifically at low income households. Earlier concerns about the need to increase accessibility and decrease the demand for seniors to move, came together in suggestions for the creation of more mixed care facilities that incorporate concerns about wheelchair accessibility and cover topics like family/spouse visiting and resident safety. In providing new types of housing, there were concerns that the private sector may not recognize enough profit potential to participate in a small city like Terrace. On the other hand, there was great appreciation of the assistance which current businesses in Terrace provide in helping seniors maintain or adjust their housing as they age, including the availability of delivery services, support for installing wheelchair access ramps, and seniors' discounts on products and services.

When asked about responsibility for developing and maintaining seniors housing, it was generally felt that all levels of government had a role to play. While the federal and provincial governments were seen as contributing funding and support services, the municipality was identified as the key player in facilitating the location of new facilities. As noted already, these locational concerns need to incorporate access to recreational, social, shopping, and other services, as well as ease of access for visitors, safety for residents, and affordability which is geared to a fair evaluation of ability to pay. The desire for more centrally located senior's housing (close to services and shopping) will potentially be difficult to reconcile with the emerging topic of safety which people identified as being more important as they age.

Health care

Participants in the interviews and focus groups were also asked a range of questions about the health care needs of seniors in Terrace. While there were a range of positive and negative comments offered, perhaps the most enduring message is the need for a 'one stop shop' point of referral for families seeking information about how to navigate available health care services as they age. This mirrors the earlier concern in the housing discussion about the need to provide a

single source of information so that people can effectively and efficiently make use of available services.

There were strong positive comments offered about how the health care providers in Terrace are responding to the needs of seniors. General practitioners and emergency personnel especially were commended time and again for their responsiveness and their attention to seniors' needs. Under recognition of the changes the health care system has been going through in the last several years, there were also a number of concerns raised. These included pressures on staffing (reduced staff, staff not available in required areas), bed shortages, the need for more specialists (especially those with specialties in seniors' issues), distance and cost for travel to regional centres, and that services like Pharmacare are not covering enough of the expensive drugs being prescribed for illnesses such as Alzheimer's. There was considerable concern about the potential for the overmedication of seniors. This was especially highlighted by the lack of services to help seniors who are addicted to various types of prescription medication.

Within this context of challenges, the availability of local specialists, services through home care nursing, some types of cancer treatments, and the CT scan facility were all seen as useful health care services for seniors in Terrace. Expanding cancer treatment, hip and knee replacement, physiotherapy, and an MRI facility were identified as urgent health care needs. When combined with other concerns over a lack of beds or an ability to treat heart attack victims, people advocated for raising Mills Memorial to regional hospital status.

Social and support services

Participants in the interviews and focus groups were also asked about the availability of social and support services for seniors in Terrace. The key finding in this set of discussions concerned the valuable, if not critical, role that voluntary sector service groups play for seniors. People commented time and again that the City should explore ways by which it can offer assistance and support to these organizations as they deliver such important supportive services to seniors who are aging in the community. The development of the Terrace Volunteer Bureau a number of years ago was seen as a good direction for providing broader support amongst smaller groups.

While a wide range of organizations were identified as providing important services locally, there were some challenges identified with respect to gaps in services. For example, home support services no longer provided house cleaning. For older women, people spoke about how difficult it is for them to see every day that their house became dirtier because they were no longer able to do all of the cleaning required. Psychological well-being is just as important to successful aging at home as is physical well-being. There was also concern expressed about the lack of expertise or training for some of those who are employed in support services. For their part, service providers in the community were concerned about a lack of information about what types of services were available and how they were designed for delivery.

A more general service concern had to do with a range of accessibility issues. Stairs, lack of wheelchair access, limited hours of operation, location in the community relative to other offices or stores where seniors might wish to go, and the design of hallways or bathrooms were all cited

as concerns. In this case, valuable services had been located in the community, or in a building, that did not facilitate their use by seniors.

Service providers also identified considerable concerns around funding support for their activities. The use of volunteers and partnerships was growing, although this was placing increased strain across the community. As the number of older residents grows over the next decade, it was uncertain whether current arrangements that depend so much on volunteers and partnerships would be sustainable. Donations, especially from the local business community, continue to be very good, but community groups were finding it increasingly difficult to access longer term government support. Even public sector service providers were finding it difficult to provide their mandated services within their available resources. They were increasingly using a strategy of backfilling services through informal providers (i.e. families and community groups). This was also seen as unsustainable over the next decade.

A complicating factor through the entire discussion of services concerned the way in which older residents perceived their own needs. Many of these older residents were described as fiercely independent people who had been healthy for most of their lives. Many participants added that seniors do not want to admit that they need services. It was suggested that such an admission would imply that they are less capable of looking after themselves. When combined with some of the concerns about the processes for service assessment, and the lack of flexibility in types of services that are made available, the challenge of fitting available services with those people in the community who need them is reinforced.

The breadth of available services, and concerns about using those services, prompted a number of suggestions on how to increase local awareness. The creation of print materials, and the construction of a seniors' website, were seen as equally important. As well, there was a lot of support for making of public presentations at community group meetings, seniors' housing facilities, and seniors' recreation facilities so that older residents would learn about where to look for information when they needed it. Again, the fact that so many households would be looking for the same information across a large number of independent service providers simply reinforced the point in the interviews and focus groups about the need for a referral service to help people quickly and efficiently navigate the service environment.

Transportation

A number of questions were asked of the interview and focus group participants about transportation issues in the community. As in most of northern BC's small towns, urban design was based on automobile mobility. As people age and their ability to drive is reduced, these urban designs make it difficult to navigate the long distances under a variety of summer and winter weather conditions. For those not able to drive, there were a number of transportation challenges identified. The Handidart service was well regarded generally, but the need for advanced booking, the very limited window of time Handidart will spend waiting at an address, and the lack of evening and weekend services, were serious impediments for seniors. Similarly, taxis were seen as an efficient and handy transportation option for older residents, but the limited ability to cope with wheelchair access is a concern. In terms of public transit, the frequency of

bus service and the lack of service to some of the benches and areas in Thornhill were raised as concerns. People suggested greater flexibility for the Handidart, more bus stops for public transit, and inclusion of wheelchair access cars into the taxi fleet as important issues for the near future.

There was considerable discussion about the need to travel out of town for health care and other services. As is documented in the media, there are numerous holes in the current transportation system. If people have to drive themselves, there is the cost and expense concern, coupled with the difficulty of driving in northern BC's winter conditions. If one travels by air, there is concern over spouses/family members having to pay and the lack of assistance for medical travelers at the Vancouver airport. While some changes are underway with respect to inter-community health transportation, it was felt that either health care professionals or social workers should become a point source who can coordinate between the patients' needs and the transportation services being made available. Again, people spoke about how inefficient the system is when it demands that each patient/household coordinate all these transportation facets themselves within a system that they do not necessarily understand.

Within the community, there was considerable concern about the lack of sidewalks in parts of the community and the maintenance of existing sidewalks. In addition to street lighting, there was concern about snow and ice removal on sidewalks. This was especially a concern with respect to the sidewalks leading uphill to some of the seniors' housing facilities. For older residents of these facilities, as well as family members who are not able to drive, handrails and ice removal on the uphill sidewalks is an important safety issue.

Physical environment

Participants in the interviews and focus groups were also asked a number of questions with regard to the physical environment in Terrace. When asked about physical barriers that might limit seniors from moving or walking around the community, the sidewalk issue was again raised. Also identified was that more lighted crosswalks were needed to facilitate movement in the downtown core and more benches for seniors to rest on when they are visiting stores and services. In the community's retail and service buildings, people talked about heavy doors, the lack of wheelchair ramps, and the lack of automatic doors as barriers needing improvement. While participants were generally happy about snow clearing on the roadways, there was a great deal of concern among participants about how older residents will be able to clear their ends of their driveways after the plows pass. Given that snow in Terrace is very 'heavy', some form of assistance is needed for older residents so that they are not housebound after the City plows the streets.

Another physical barrier concern involved linking the shopping areas and malls to Keith Avenue. Suggestions ranged from improving transit to providing an underground passageway. Regardless of suggestions, the mobility concerns reinforced the standard urban design challenges of automobile oriented town layouts.

On the positive side, people were enthusiastic about new building code requirements that required renovations and new constructions to be fully wheelchair accessible and to have automatic doors triggered by push buttons. Access to shopping and services is very important, and without these renovations, many of the stores and activities in Terrace may not be readily accessible to older residents.

For those older residents who are able to drive their own car, but would like to be able to park closer to their destinations so as to avoid long walks, many participants noted the lack of separate parking spaces for seniors. While many large retail chains are starting to incorporate special parking spaces that go beyond 'handicap' spaces, this could be considered for parking within the City. For those sites already designated for people with handicap signs mounted in their vehicle, there was concern about abuse and that the City should be enforcing rules. The participants would also like to see the City extend its program around one hour parking so as to allow two hours of parking. This would provide more time and flexibility to older residents moving through the downtown and participating in some of the social and recreational events in the community.

Social environment

A wide range of community groups and clubs were seen as contributing to the social environment for seniors in Terrace. As noted earlier, many of these community groups and activities are organized on a volunteer basis (sometimes through larger organizations such as churches or service clubs).

The range of events which participants identified as important covered a spectrum of opportunities. These included: educational opportunities through the community college and the library, arts and cultural opportunities through the art gallery and community groups, sports and recreational opportunities ranging from swimming and aquafit to curling, card games, and social evenings; and a range of social events hosted throughout the year that included church teas, club dinners, seasonal and festive events, and a host of others. In this regard, the social environment for seniors in Terrace is strong and looks to be able to expand to meet the needs of an older population. Support from the City in finding ways to efficiently deliver or house some of these activities, as well as support from other levels of government through more stable funding to some of these activities will continue to help them grow and meet local needs.

Under the pressures of expansion, participants were asked about the kinds of social and recreational activities that should be provided to help seniors maintain their health and independence. Most generally, people referred to the lack of space and time for existing activities. New facilities are clearly going to be needed in a number of cases, while in others there is a need to pay attention to new schedules as programs adjust from providing services for youth and families to those for older residents. Similarly, some programs will need to expand their flexibility. For example, swimming and exercise programs have already started to adjust to the different fitness and activity levels among older participants. There was concern about the need to enhance wheelchair accessibility in public recreation facilities. As well, there was hope for a revision to the walking program at the mall so that seniors can get in there before stores

open and the hallway becomes more crowded. This would allow seniors to ay down their coats and walk more safely without being concerned about theft.

In terms of assistance with daily living, all of the services identified in the interview and focus group forums were thought to be critical. These included assistance with shopping, yard work, housecleaning, and the delivery of goods and services. For some of these, volunteers had provided assistance in the past, but changing health and safety regulations means that special licenses are increasingly needed. In stores, the trend towards warehouse style operations where goods are stacked high on shelves creates a challenge for seniors such that additional staff may be required to help with getting the product into the hands of these older shoppers. On the other hand, participants were again impressed with the number of retail outlets locally that already provide help and assistance to seniors. In some cases, this includes the delivery of services, while in other cases it includes both a shopping and delivery service. Some stores also provide motorized carts for older shoppers.

Quality of life and cost of living

Participants in the interviews and focus groups generally felt that the quality of life in Terrace for seniors is high and that part of that quality of life involves an affordable cost of living. That said, however, there was a recognition that the coming increase in the number of older residents in the community will put stress on both of these issues. Many of the quality of life issues have already been identified above including the need for more support for community and voluntary groups that provide important services, and the need to continue to make the physical landscape more accessible for older residents whether they are driving or walking.

On the cost of living side, there were concerns about the lack of long term housing options that seem to account for low income households. This was reinforced by concerns about the changing income assessment rules that may exceed an older household's ability to pay for one spouse to move into care while the other has to maintain their home. Another significant cost of living concern involved heating and gas costs. This concern was no doubt complicated by recent publicity over the proposed natural gas hikes to residential customers. In addition, having to pay for house cleaning that was now no longer part of home care support, as well as the rising cost of prescription drugs, were also important topics raised under cost of living. Attention to the needs of older residents living in poverty will be the benchmark against which the community's concern for its seniors is measured.

When asked about a range of other topics including opportunities for involvement, participation, and safety in the community, participants felt that Terrace was a good and welcoming place for seniors. That said, however, there was some concern about issues of crime as people who are growing older can feel more vulnerable. Even getting pushed down during an encounter can have serious health implications for older residents.

Informal and formal care networks

Previous research has shown the tremendous importance of both informal and formal care networks on the quality of life of seniors. These are important not only for maintaining seniors' mental and physical health, but they are also important in reducing the longer term costs of population aging. In this latter case, the longer that seniors can remain healthy and active, and living in their own homes, the less pressure they will put on expensive social and health care services. As a result, participants in the interviews and focus groups were asked about the informal and formal care networks that were available to seniors in Terrace. The general story from participants is that both informal networks and formal networks of care providers are available and are concerned and supportive of seniors.

In terms of informal networks, people cited friends, neighbours, and family members as key parts of their support base. These are the reasons that people also want to stay in the community as they create a social world for the older resident. Also important in terms of informal care networks were organized groups such as churches and service clubs. Not only did these organizations provide a venue for activities, meals, and other services, they also provided for social engagement and for a body of colleagues who watch out for one another. Maintaining this strong informal support network will be crucial to successful population aging in Terrace.

In terms of formal support networks, doctors (especially the general practitioners), services such as adult daycare, and the RCMP were often mentioned as important for older residents. In many cases, people spoke eloquently about how these formal service providers would go above and beyond the requirements of their job as they cared for the concerns of older residents. In a context of service reorganization, and where rural and small town places are under increasing pressure to provide services, it will be important for the City and community to advocate for funding and support models that meet local needs. It will also be important for the community to recognize these service providers who themselves are under considerable stress from both change in the organization and change in the community's age profile.

Concluding comments

The purpose of this report has been to highlight some of the core themes that came out of each of the interview and focus group processes. The appendices to the final report contain the detailed tables that describe the range of responses to each question. These themes, together with the nuances captured in the appendices, can form the basis both for community action now, and for the development of a broader local questionnaire in the near future.

As a report for the City of Terrace, there are a number of general issues which fall outside of their jurisdiction. While some topics may simply become advocacy points for the City to raise with other levels of government, others are clearly available for local action. By way of

illustration, we have included some possible areas for local action:

- **Planning needs** The renovation of current facilities, and the addition of new facilities, must be done in ways that meet a range of site accessibility requirements for older residents. There is also a need to recognize the value of clustering social, shopping, recreational, medical, and other services so as to provide for increased convenience as an older population becomes less mobile.
- **Physical environment needs** There is a need to implement maintenance and safety improvements around crosswalks and sidewalks (including handrails where needed), and to find ways to address the opening of driveways after snowplowing such as is available in some other northern BC communities.
- Information coordination needs There is an opportunity to advocate or assist in the development of an information coordination and referral mechanism with respect to health and housing issues. While some aspects may be more challenging given the bureaucratic structure of topics like health care delivery, local citizens will need more information in order to assist with the difficult decisions they face as they and their family age. Earlier activities such as those provided by the Terrace Volunteer Bureau are highly regarded and there is an opportunity for extension.
- **Social needs** The voluntary and service group sectors provide a host of critical services for older residents. Many of these services fill gaps that might otherwise be provided in larger centres by the public or private sector. Other communities across northern BC have found ways to assist these voluntary and service groups in carrying out their tasks in ways that put little financial burden on the City. Given their role, and the stresses of an increasing number of older residents, support for these groups will pay considerably in terms of local quality of life.
- Recreational and cultural needs There will be an increasing need to address scheduling and physical access issues for an older population. These adjustments are part of a general pattern of transformation underway in most communities across northern BC. Terrace has been proactive with programs such as aquafit and this sort of thinking can be extended across a range of recreational and cultural activities.
- **Transportation needs** Revisions to the Handidart and transit services need to be seriously looked at, as does topics like connecting the main shopping area with Keith Avenue, and the internal circulation pattern for pedestrians in the downtown core.

The Rural and Small Town Studies Team at UNBC was very pleased to undertake this project for the City of Terrace. All of the individuals, groups, and organizations who participated were enthusiastic and open - and we thank them for helping out.

Appendix 1

Data from Key Informant Interviews

SECTION A:

Background Information

Table A1 How long have you lived in Terrace?

In years	% of interviewees	
0- 10	8.0	
11- 20	12.9	
21- 30	11.3	
31-40	24.2	
41- 50	21.0	
51-60	11.3	
60 +	11.3	
$n^2 = 62$		

Source: Terrace and Area Seniors Needs Study

Table A2 How long ago did you retire?

	% of interviewees
Not applicable	33.9
0- 5 years	14.5
6- 10 years	11.3
11- 15 years	22.6
16- 20 years	8.1
21- 25 years	4.8
26 +	4.8

Source: Terrace and Area Seniors Needs Study

 2 In all of the data tables that follow, the letter "n" is used to describe the number of responses to the question (and the base number from which the percentages were calculated). In most cases, the "n" will equal the number of people who answered the question. However, in those cases where people could give more than one responses, the "n" equals the total number of responses given for that question.

^{*} Please note, n is a higher value as some people retired from multiple jobs at different times

Table A3 What is/was your main employment in town?

	% of interviewees
Health	17.5
Social Science	17.5
Business and Administration	12.5
Sales and Service	12.5
Trades, Transport & Equipment Operators	10.0
Primary Industry	8.7
Management	7.5
Art, Culture and Recreation	5.0
Processing, Manufacturing & Utilities	5.0
Protection Services (incl fire/police)	2.5
Homemaker	1.3
n=80	

Table A4 What are the advantages of retiring in Terrace?

	% of interviewees
Social Networks	28.7
Small Town Living	18.3
Climate	8.2
Environment	5.9
Cost of Living (Housing)	6.8
Cost of Living (General)	4.6
Cost of Living (Food)	1.8
Safety and Security	1.4
Recreation (outdoor)	3.7
Recreation (Indoor)	2.3
Recreation (affordability)	1.4
Recreation (Arts)	0.9
Range of Services	2.3
Availability of Service (general)	1.8
Quality of Service (Retail)	1.8
Availability of Services (Housing)	0.9
Availability of Service (health)	0.9
Quality of Services (Health)	0.9
Quality of Service (Housing)	0.5
Transportation Services	1.4
Physical Mobility	0.5
Good Business Community	2.7
Seniors Facilities	0.9
Central Location	0.9
n= 219	

Table A5 What are the disadvantages of retiring in Terrace?

	% of interviewees
None	4.7
Distance to Large Centers	14.0
Cost of Transportation (Out of Town)	8.5
Cost of Transportation (Airfare)	6.2
Lack of Transportation (Local)	5.4
Lack of Transportation (Out of Town)	2.3
Cost of Transportation (bus and train)	2.3
Climate	8.5
Environmental Assets	0.8
Lack of Services (Health)	7.8
Distance to Health Services	6.2
Wait Times for Diagnosis	0.8
Inconsistent Services (Health)	0.8
Lack of Housing	5.4
Real Estate market	1.6
Isolation	4.7
Lack of Social Networks	3.9
Increased Pressure on informal care network	
Lack of Services (Recreation)	4.7
Lack of Services (Retail)	1.6
Lack of Services (General)	1.6
Lack of Service (Support Services)	1.6
Barriers to Mobility	2.3
Winter Road Maintenance	0.8
Cost of Living (General)	1.6
Political Representation	1.6
n= 129	

SECTION B: Housing

Table A6 Does the current housing situation in Terrace meets the needs of seniors?

		% of interviewee
Vegativ	ę	
	Lack housing	26.9
	Lack of options	6.9
	Wait List (Twin River)	5.6
	Wait List (general)	3.8
	Wait List Terraceview	3.1
	Wait List McConnell	1.3
	People sent out of town for care	3.1
	Lack of beds (Terraceview)	3.1
	Lack of beds (Hospital)	0.6
	Struggle to keep Terraceview beds open	0.6
	Spouses separated for care	0.6
	Government housing policies	0.6
	Age regulations	0.6
	Regulatory barriers to qualify for housing	0.6
	Lack of family involvement in assessment	0.6
	Financial barriers	5.6
		5.0
	Lack affordable/subsidized housing Requirements do not recognize spousal support	0.6
	Difficult to sell home	1.3
	Still in own home	0.6
	Hard to know when to apply for housing	0.6
	Stigma of entering Terraceview	0.6
		0.6
	Unhappy with Terraceview	0.0
	Poor design features	10.0
	Need housing close to services	2.5
	Poor maintenance	1.3
	Poor management	0.6
	Poor coordination of service providers	0.6
	Poor location	0.6
	Lack culturally appropriate housing	0.6
	Lack social activities	0.6
Positive		
USHIVE	Housing has vacancies	1.3
	Pleased with Twin Rivers	1.3
	Good infrastructure	1.3
	Have assisted living complex	0.6
	Pleased with Terraceview service	0.6
Other		
Juler	History	2.5
	Concern over ageing population	0.6
n= 160		

Table A7 If you require seniors' housing, are you on a waiting list?

)
)
,

Table A8 If you require seniors' housing, how long have you been waiting?

50.0 25.0
25.0
25.0

Source: Terrace and Area Seniors Needs Study

Table A9 If you are already in seniors' housing, did you have to go on a waiting list first?

36.4
36.4
27.3

Source: Terrace and Area Seniors Needs Study

Table A10 If you are already in seniors' housing, how long was the placement period?

	% of interviewees
None	33.3
Not applicable	22.2
Not long	22.2
Four months	11.1
8 years	11.1
8 years	11.1
n= 9	

Table A11 If you are already in seniors' housing, what level of care is provided?

% of interviewees
77.8
22.2

Table A12 Do you think the design, location and availability of housing in Terrace is supportive of seniors independence? - Design

		% of interviewee
Positive		
	Well designed (general)	10.6
	Have elevators/ lifts (Willows, McConnell, Twin River)	4.4
	McConnell is spacious	1.9
	Have social activities (Tuck, Terraceview)	1.3
	Outdoor maintenance provided	1.3
	McConnell gives sense of independence	0.6
	Tuck has laundry facilities	0.6
	Tuck has common room/ lounge	0.6
	Transition House has magnified key hole on door	0.6
	Muks Kum Ol has people of all ages in same complex	0.6
	Security	0.6
	Can garden	0.6
	Varying sizes of units available	0.6
Negativ		
	Stairs (Twin River/ McConnell)	19.4
	Too small (All)	15.0
	Buildings are old (Tuck/Willows)	4.4
	Need maintenance (Tuck/ Willows)	3.8
	Small bathrooms	2.5
	Doorways are to small	1.9
	Lack privacy (Tuck/ Willows)	1.3
	Mould problem	1.3
	Asbestos in pipes	1.3
	Doors are heavy	1.3
	Lack elevators	1.3
	Terraceview - doors open the wrong way	0.6
	Twin River lacks parking	0.6
	Twin River is not aesthetically pleasing	0.6
	Twin River has no bench at the bus stop	0.6
	Lifts are expensive to install	0.6
Genera	Recommendations	
	Need to be wheelchair friendly	4.4
	Need safety feature in bathrooms (Grab bars, scald guards)	1.9
	Need room for visitors	1.9
	Need facilities with common room/ kitchen	1.3
	Need places that are a variety of sizes	1.3
	Need place with Happy Gang atmosphere	0.6
	Need entry from outside	0.6
Don't K		1.3

Table A13 Do you think the design, location and availability of housing in Terrace is supportive of seniors independence? - Location

	% of interviewee
Twin Rivers is good	19.8
Location is good (General)	17.6
Need housing downtown	13.2
Hill to Terraceview/McConnell a challenge	6.6
Willows is Good	4.4
McConnell/ Terraceview is good	3.3
Happy that McConnell and Terraceview are side by si	de 3.3
Tuck provides a good location	3.3
Terraceview/McConnell too far	3.3
Lack of desirable locations to expand to	3.3
Tuck too far too walk	2.2
Lots by library (good)	2.2
Good community design	1.1
Tuck had drainage problem	1.1
Muks Kum Ol in old jail (Bad)	1.1
Poor locations (General)	1.1
Expand Twin River location	1.1
Expand Tuck location	1.1
The Inn downtown (good)	1.1
Lots by Eby and Sparks (good)	1.1
Carpenters Hall (good)	1.1
Need seniors housing in Thornhill	1.1
Lots by Kenney and Park too far	1.1
Old Coop poor new location	1.1
Don't Know	3.3
n= 91	

Table A14 Do you think the design, location and availability of housing in Terrace is supportive of seniors independence? - Availability / Affordability

Č	% of interview
Waiting List	
Wait list at Twin River	14.4
Wait list at Terraceview	10.4
Wait list (McConnell)	5.6
Wait list (general)	4.8
Wait list (Tuck)	0.8
Limited Availability	
Lack housing (general)	8.0
Places are full	3.2
Lack places like Twin Rivers	2.4
There is no First Nations housing	1.6
Lack single family dwellings	0.8
Lack assisted living	0.8
Some non-seniors are in McConnell	0.8
Lack rental units	0.8
Concern over growing seniors population	1.6
There are lots of options	2.4
First Nations have a lot of housing	0.8
Recommendations	
Need supportive housing	2.4
Local residents should have priority for housing	ng 1.6
Need a place for Veterans	0.8
Affordable Housing Options	
Twin River is affordable	6.4
Tuck is affordable	4.8
Willows – Rent is based on income/is subsidized	zed 2.4
Housing is affordable (general)	2.4
McConnell is affordable	1.6
Tuck - Rent is based on income/subsidized	1.6
Terrace View is affordable based on income	0.8
Have subsidized housing	0.8
Limited Affordable Housing Options	
Twin Rivers is expensive	3.2
McConnell is expensive	2.4
Terraceview is expensive	1.6
Rent is expensive	0.8
Need more affordable housing	0.8
Need more subsidized housing	3.2
Need more low income housing	0.8
Can not get market price when selling house	0.8
Don't know n= 125	1.6

Table A15 What types of housing do you think Terrace needs to have for seniors? - General

	% of interviewees
Affordable seniors housing	26.5
More subsidized housing (general)	11.8
Gardens/ patio/ balconies	8.8
Single story housing	5.9
Multi level with elevator	5.9
Subsidies for low income seniors	5.9
Subsidies for singles and women	2.9
More of everything	2.9
More rental housing	2.9
More middle income housing	2.9
Lack emergency housing	2.9
Mixed seniors housing	2.9
Complexes with multi levels of care	2.9
Gated/ secure housing	2.9
Strata style	2.9
Full unit on one level	2.9
Need coordination of stake holders	2.9
Locate seniors housing near everyone else	2.9
n= 34	

Table A16 What types of housing do you think Terrace needs to have for seniors to maintain their independence?

	% of interviewees
More places like Twin River	11.3
More needed - general	8.8
Need senior apartments	2.5
Row housing	2.5
Strata style	2.5
Gated/ secure housing	1.3
Close to services	5.0
Downtown location	3.8
Something in Thornhill	1.3
Housing for Veterans	1.3
Place for couples	1.3
Place for singles	1.3
Need small places	3.8
Bigger places	2.5
Not bachelor suites	1.3
Multi level with elevator	8.8
Single story	6.3
Room for visitors/ entertaining	3.8
Family friendly	2.5
Full unit on one level	2.5
Have central hallways	1.3
Big windows	1.3
Air conditioning	1.3
No mould	1.3
Need wide bathrooms	1.3
Grab bars in bathroom	1.3
Scald guard on faucet	1.3
Help with chores	3.8
Place with optional dining service	1.3
More home support workers	1.3
Nurse to check in	1.3
Wheelchair accessible	6.3
Lifts in homes	2.5
More input from seniors	1.3
n= 80	

Table A17 What types of housing do you think Terrace needs to have for seniors in terms of assisted living?

	% of interviewees
More is needed	29.0
Need supportive housing	23.8
More like McConnell	16.7
Need another large complex	4.8
Need more with specialized care	4.8
Need elevators	4.8
Better design	2.1
Need more privacy in complexes	2.1
Wheelchair accessible	2.1
Need subsidized assisted living	2.1
Rent should be based on income	2.1
Could be private or non-profit	2.1
Don't know	2.1
n= 42	

Table A18 What types of housing do you think Terrace needs to have for seniors in terms of long-term care facilities?

	% of interviewees
More is needed	71.0
Should expand Terraceview	15.8
Need more staff at Terraceview	2.6
Terraceview has excellent care	2.6
Satisfied with current situation	2.6
Need long term care on Reserve	2.6
Don't know	2.6
20	
n= 38	

Table A19 Who should be responsible for developing and maintaining seniors' housing?

	% of interviewees
	26.1
Provincial	26.4
Federal	24.3
Municipal	18.1
Private	16.0
Voluntary sector	6.3
Public/ Private Partnership	4.9
First Nations Band	1.4
Local Residents	0.7
Other	0.7
Not Sure	1.4
n= 144	

Table A20 Who should pay for seniors' housing?

	% of interviewees
D 1	27.0
Provincial	27.9
Federal	25.7
Residents	15.7
Municipal	10.7
Private	10.0
Residents Based on Income	4.3
Public/ Private Partnership	3.6
Voluntary Sector	0.7
Not Sure	1.4
n= 140	

Table A21 Other Comments?

	% of interviewees
History (Tuck, Terraceview, Willows)	26.9
Need government department for seniors	15.4
Communities should have equal access to local housing	3.8
Psychological barriers to accepting help	3.8
Calgary example of private long term care	3.8
Kamloops example of semi-independent housing	3.8
Potential Roles for Local Government	30.8
Rezone properties	3.8
Consolidate lots	3.8
Provide land for \$1.00	3.8
Reduce development fees for affordable housing	3.8
Allow residential developments in commercial areas	3.8
Provide property tax relief	3.8
Contribute in-kind donations of professionals (ie Planner)	3.8
Need More Government Support	15.4
Municipal, Provincial and Federal all need to support seniors housing	7.7
Need more government support	7.7
n= 26	

SECTION C:

Health Care

Table A22 Do you think the health care system responds to seniors' needs?

	% of interviewees
Yes	13.2
Reasonable/ Mostly	15.8
Not Sure/ Depends	13.2
Poor/ Badly/ Not Well	47.4
Terrible/ Very Poor/ Not at all	10.5
n= 38	

Table A23 Local Health Care Issues

Human Resources	19.3
Lack of Health Care Workers	5.2
Lack Specialists	5.2
Lack of Support from Health Care Workers	5.2
High Workload of Health Staff	4.6
Good Support from Health Care Workers	3.9
Lack of Home Support	2.0
Lack of Professional Support	0.7
Ageing Health Care Staff	0.7
Low Morale of Health Care Workers	0.7
Use and Access of Services	16.9
Long Wait List for Procedures (Local)	6.5
Lack of Services (General)	4.6
Good Emergency Services	3.3
Lack of Pharmacare Coverage	2.6
Communication Barriers to Help	2.6
Abuse of Services	2.6
Lack of Preventative Programs	1.3
Poor Quality of Food	1.3
Poor Continuity of Care	1.3
Psychological Barriers to Using Services	1.3
Misunderstanding of Services Available	1.3
Released from Hospital too Quickly	0.7
Distance to Large Centres	0.7
Discontinuation of Services	0.7
Good Prevention Programs	0.7
Long Diagnostic Period	0.7
Short Wait List for Procedures (Out of Town) Short Wait List for Procedures (in town)	0.7 0.7
Facilities and Equipment	14.6
Lack Beds (Hospital)	5.9
Lack Beds (Tosphar) Lack Beds (Long Term Care)	3.3
Long Wait List for Facilities	2.0
Lack of Equipment	1.3
Lack of Operating Space/ Time	0.7
Poor Design of Facilities	0.7
High Cost of Facilities	0.7
Have New Equipment	0.7
Good Facility at Terrace View	0.7
Finances	14.4
Lack of Health Care Funding	6.5
Inefficient System	2.6
High Cost of Health Services	2.0
Expense of Health Related Travel	2.0
Lack of Government Support	1.3
Good Support from Department of Indian Affairs	1.3
Management/ Policies/ Regulations	6.2
'Red Tape'	2.0
Poorly Managed Bureaucracy	1.3
No Recognition of Mills as a Regional Hospital	0.7
Lack of First Nation Participation in Census	0.7
Centralization of NHA in Prince George	0.7
Lack Private Sector Support	0.7
n= 153	

Table A24 What do you think are the most useful health care services now provided to seniors in Terrace?

		% of interviewee
Assisted l	Living	21.4
20020000	Home care/Home support	10.7
	Adult day care/Sunshine Club	3.3
	Terraceview	2.5
	Long-term care	2.5
	Assisted living/McConnell	1.6
	Long-term care assessments	0.8
Specialist	9	14.0
Speciansi	Specialists (General)	5.8
		3.3
	Specialist (Opthamologist)	3.3
	Specialist (Heart)	
	Specialist (Internist)	0.8
	Specialist (Neurologist)	0.8
Equipme	nt	13.8
-	Equipment (CT Scan)	5.7
	Equipment (Dialysis)	3.3
	Equipment (emergency)	1.6
	Equipment (General)	0.8
	Equipment (Bowel Scope)	0.8
	Equipment (X-Ray)	0.8
	Equipment (Nuclear medicine)	0.8
Commun	ity Health Support Services	10.6
Commun	Handidart	4.1
	Meals on Wheels	2.5
	Herbal medicine	0.8
	Volunteer Bureau	0.8
	Hospice Society	0.8
	Palliative Care	0.8
	Pharmacare	0.8
_		
Emergen	cy Services	5.8
	Emergency services	2.5
	Alert line	2.5
	Hospital	0.8
Health Ca	are Services	5.6
	Cancer services	1.6
	Diabetes services	1.6
	Renal care	0.8
	Mental health	0.8
	Physiotherapy	0.8
Hoolth C	are Professionals	0.8
пеани С	Nurses	0.8
0.4		
Other		2.4
	Affordability of services	1.6
	Pension	0.8
Don't kno	ow	6.6

Table A25 What do you think are the critical health care service needs for seniors in Terrace?

9	6 of interviewee
Need Health Care Staff	30.5
Lack Staff	7.3
Lack Specialists (General)	4.0
Lack of Training of Nurses	3.3
Specialists (Orthopaedic)	2.6
Specialists (Retention of)	2.6
Need more nurses	2.6
Geriatric Services/ Counselling	2.0
Specialists (Oncologist)	1.3
Better use of nurses	1.3
Lack of Professional Care	0.7
Need more doctors	0.7
Lack Specialists (ie: Occup Therapist	
Need More physiotherapists	0.7
Need more anestheticists	0.7
Need Health Care Facilities	14.1
Need more Long Term Care beds	4.0
Day Care Location	2.6
Lack beds at hospital	2.0
Poor Design of Facilities	1.3
Need new ICU	0.7
Need more Assisted Living	0.7
Lack Space in Emergency	0.7
Lack of Housing	0.7
Lack Wards	0.7
Need More Time for Operating	0.7
Additional Services - care	13.2
Diagnosis Services	2.6
Need Cancer Clinic	2.0
Palliative Care	1.3
Need 911 Service	1.3
Lack of Services	1.3
Pharmacare (include more drugs)	1.3
Lack Awareness of Mental Health	1.3
Respite Care	0.7
Diagnosis (Mental Illness)	0.7
Limited Range of Services	0.7
General Health Care Management	12.6
Poor management of health care final	
Lack of funding	2.0
	2.0
Affordability Lack of Resources	
	1.3
Lack of communication between agen	
Strain on System of Regional Deman	
Surgery wait list	0.7
Con't	

Con't

Poor Management of Resources	0.7
Too Frequent Regulation Changes	0.7
Needed Equipment	10.0
Equipment (New CT)	2.6
Equipment (need MRI)	2.6
Equipment (general)	2.0
Equipment (High Cost)	0.7
Equipment (ECG)	0.7
Equipment (at home)	0.7
Some equipment not used	0.7
Need Better Access to Services	6.6
Reduce health transportation costs	3.3
Transportation	2.0
Distance to Services	1.3
Special Needs of Aging	5.4
Stigma of Aging	4.0
Pills are over prescribed	0.7
Need more awareness of seniors needs	0.7
Additional Services - support	4.1
Home Support	1.3
Lack of Home Visits	0.7
Need more home care	0.7
Nutritional Programs	0.7
Lack Prevention Programs	0.7
None/Don't know	3.3
n= 151	

Table A26 Does anyone in your household require special health services?

	% of interviewees
Yes	42.6
n= 54	

Table A27 *If yes, the types of services that are needed

	% of interviewee
Care Services	24.9
Physiotherapy	4.1
Heart Monitoring	2.7
Home Care	2.7
Shots (for Cancer)	1.4
Anesthetics	1.4
CT Scan	1.4
Endoscope	1.4
In Long Term Care	1.4
Chiropractor	1.4
Vancouver- Radiation	1.4
Vancouver- Bone Scan	1.4
Medivac to Vancouver	1.4
Kitimat- Bone Scan	1.4
Wheelchair	1.4
Surgeries	19.2
Knee Surgery	4.1
Knee Replacement	2.7
Cataracts/ Cataract Surger	
Heart Procedure	2.7
Surgery (Internist)	1.4
Hip Replacement	1.4
Hip Surgery	1.4
Surgery (Unspecified)	1.4
Shoulder Surgery	1.4
Medication	8.4
Medication	1.4
Medication (Pain Killers)	1.4
Medication (Diabetes)	1.4
Medication (Osteoarthritis	*
Medication (Arthritis)	1.4
Puffer	1.4
Other	5.5
Not applicable	42.5
n= 73	

Table A28 *How long did take for this health condition to be diagnosed?

	% of respondents
Immediately	16.7
Not long	10.0
One week	13.3
Two weeks	6.7
One Month	6.7
Six Weeks	3.3
Three Months	6.7
Five Months	3.3
Six Months	13.3
One Year	3.3
Two Years	6.7
Still Doing Tests	10.0
n= 30	

Table A29 Other seniors' health care issues you would like to raise?

Implications of Ageing Population Communication Problems Depression and Loneliness Public Misconceptions: Daycare Treatment of Seniors

Have Visiting Specialists Transportation to Health Services Need for Central Building For Senior Care Expense of Transportation for Health

Federal Government Should Provide More Funding Lack of Affordability of Equipment For the home Veterans Affairs Assist with Prescriptions Should Subsidize Care in Private Clinics

Need More Separation of Patients in Long Term Care Need More Beds

Poor Location of Pharmacies in the Back of Stores Lack of Affordability of Prescriptions Concerns from Taking Multiple Medications

SECTION D: Social / Support Services

Table A30 Key organisations that provide social / support services for seniors in Terrace

	% of respondents
Happy Gang	12.6
Home and Community Care	11.2
Meals on Wheels	8.4
Terrace Volunteer Bureau	8.4
Adult daycare (Sunshine Centre)	7.9
Churches	4.2
Alzheimer support group	3.7
Handidart	3.3
Salvation Army	2.8
Food bank	2.3
Hospice Society	2.3
Alert Line	1.9
Cancer support group	1.9
Diabetes support group	1.9
Legion	1.9
Legion Long-term care	1.9
Veterans Affairs	1.9
Elks	1.4
LIKS	1.4
Delivery services	0.9
Elders group	0.9
Emergency shelter	0.9
Hospital Foundation	0.9
Kinsmen	0.9
Mental health	0.9
Seniors Advisory Committee	0.9
Terrace and District Christian	
Council for Resource Developm	nent 0.9
A & A support group	0.5
Friends	0.5
Good food box	0.5
Government services – general	0.5
Health Advisory Committee	0.5
House cleaning	0.5
Kermode Friendship Centre	0.5
Kiwanis	0.5
Ladies Auxiliary – hospital	0.5
Legal services	0.5
Lions	0.5
Member of Parliament	0.5
Muks Kum Ol Housing	0.5
Multiple Sclerosis support group	
Northwest Community College	0.5

Con't

Quadraplegic Association Palliative care Pastor care – hospital Pentacostal Church Public health nurse Red Cross Cupboard Relay for Life Retired BCGEU members Royal Purple Service clubs – general	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5
Soup kitchen	0.5
Don't know	0.5
n=214	

Table A31 What are the strengths of current seniors' services?

	# of respondents
New Services	
More groups – general	3
Adult day care program	2
McConnell Estates	1
Extension of Services	
Sunshine now operates 5 full days per week instead of ½ days	1
Changes in Regulations	
Roster list of volunteers required for security	1
Changes in Services	
Government cutbacks	2
Reduced services by home support	2
Less cooperation amongst churches	1
Reduced financial support	1
Change in Participation	
More participation in programs	1
Changing Demands for Services	
Services can't keep pace with increasing seniors population	1

Table A32 What are the weaknesses of seniors' services in Terrace?

% of	respondent
Limited Service Provision	27.0
Lack of support services - general	6.3
Limited service provision - home support	5.4
Limited service provision - Meals on Wheels	3.6
Delays in getting services	1.8
Lack of support for families caring for seniors	1.8
Lack of support groups	1.8
Lack of services for immigrant seniors	0.9
Lack of support for dependent living	0.9
Lack of support services - on reserves	0.9
Lack of visiting programs	0.9
Limited hours of operation - adult daycare	0.9
No overnight services for home support	0.9
No soup kitchen specifically for seniors	0.9
Human Resources	18.9
Lack of home support staff	5.4
Lack of volunteers	3.6
Lack of expertise - home support staff	1.8
Lack of supervision of home support staff	1.8
Differences in opinions	0.9
Inadequate training for volunteers	0.9
Lack of family involvement	0.9
Lack of specialists	0.9
Lack of staff - adult daycare	0.9
Lack of time - home support has 15 min./patient	0.9
Support network is getting smaller	0.9
Changes in Service Provision	14.4
Reduced services from home support**	9.9
Cancellation of arts and crafts at Terraceview	0.9
Cancellation of residential chaplain at Terraceview	0.9
Cutbacks to support services on reserves	0.9
Elimination of candy stripers*	0.9
Stricter criteria to obtain services	0.9
Space and Design	9.0
Limited wheelchair access to adult day care	4.5
Poor location of adult daycare	2.7
Lack of space - adult day care	0.9
Small bathrooms - adult daycare	0.9
Communication and Information	5.4
Limited promotion about the services provided	2.7
Lack of coordination amongst service providers	1.8
Limited awareness about referral process	0.9

Con't

Assessm	ents	4.5
	Delays in getting housing assessments done	1.8
	Assessment tools are not accurate	0.9
	Lack of caregiver involve. in housing assessment	0.9
	Multiple assessments required	0.9
Financia	al Barriers	3.6
	High costs for home care	1.8
	High costs for Meals on Wheels	0.9
	Too much money spent on bureaucrats	0.9
Policies		1.8
	Policies don't consider age of care giver	0.9
	Too much focus on sending seniors home	0.9
Quality	of Services Provided	5.4
	Home care workers are too aggressive	1.8
	Lack of staff support to help seniors reach meals	0.9
	"Not my job" mentality from union workers	0.9
	Poor quality of meals - Meals on Wheels	0.9
	Rotation of home care workers reduces familiarity	0.9
Use of S	ervices	3.6
	Abuse of services by people who don't need them	0.9
	Aging stigma - Happy Gang is for old people	0.9
	Seniors don't want to ask for help	0.9
	Some seniors refuse services after referral	0.9
Transpo	ortation	1.8
•	Limited transportation to access support services	1.8

Table A33 Seniors' services recommendations

House cleaning services	5
More volunteers - Assisted living	3
Shopping assistance	3
Visiting programs	2
More Meals on Wheels programs	2
Assistance with cooking	1
Better coordination amongst family members for care	1
Create a new space for adult daycare	1
Develop an elder's group	1
Evaluation of home support workers	1
More information about services provided	1
More recreation / social activities for dependent living	1
More supervision of home support staff	1
More support for seniors living with Alzheimer's	1
More volunteers - Home maintenance	1
Multiple visits for housing assessments	1
Need a Parkinson's support group	1
Obtain a geriatric specialist	1
Operate adult daycare 7 days per week	1
Organize group soup meals at Tuck	1
Provide cheaper rates for social support services	1
Seniors' advocate needed	1
Soup kitchen for seniors	1
Volunteer driving program	1

^{*} Candy stripers used to provide visiting support - a service that staff can't provide due to time constraints.

^{**}Home support no longer provides house cleaning, including dishes, cooking, or washing floors. They don't clean ovens. They no longer lift people. The focus is now on personal care (bathing).

Table A34 Do you think people are aware of seniors' programs and services?

% of respon	
Yes	31.5
No	59.3
Don't know n= 54	9.3

Table A35 Why don't people know about seniors' programs and services?

	% of respondents
Lack of information	29.5
People don't seek information / support	15.9
Lack of awareness - general	11.4
Seniors don't know / fear asking the right questions	9.1
Awareness comes with need	4.5
Benefits of services are not promoted	2.3
Confusion over payment requirements for services	2.3
Depends if you're involved (i.e. Happy Gang)	2.3
Information is not updated	2.3
Lack of awareness - Alert Line	2.3
Lack of awareness - Mental Health	2.3
Lack of service provider communication with clients	2.3
Lack of family assistance to pursue information	2.3
Lack of interest to put seniors' needs as a priority	2.3
Lack of time to do promotion	2.3
Memory - seniors forget	2.3
Misunderstanding of services provided	2.3
Seniors don't use computers	2.3
n= 44	

Source: Terrace and Area Seniors Needs Study

Table A36 Where should services be promoted?

	% of respondents
Word of mouth	18.5
Doctors	11.1
Happy Gang brochures and bulletins	11.1
Newspaper	11.1
Band newsletter	7.4
Channel 10	7.4
Radio	7.4
Churches	3.7
Home care workers promote services	3.7
Pamphlets	3.7
Public health nurse	3.7
Television	3.7
Terraceview staff promote services	3.7
Volunteer Bureau's booth in the mall	3.7
n= 27	

Table A37 How should seniors' program/service information be provided?

		% of respondents
Printed	Materials	28.0
	Newspaper articles	13.6
	Brochures	5.3
	Flyers	3.8
	Free ads in the newspaper for non-profits	1.5
	Posters	1.5
	Seniors' newsletter	1.5
	Provide printed materials to support services	0.8
Techno	logy	25.0
	Radio	9.1
	Television - general	8.3
	E-mail	2.3
	Websites	2.3
	Free ads for non-profits on channel 10	1.5
	Emergency line by pushing a button	0.8
	Television interviews	0.8
Formal	Forms of Communication	24.2
	Information at the doctor's office	3.0
	Information booklets with services, hours, prices	3.0
	Public presentations	3.0
	Booth displays at the mall	1.5
	Letters by City Council	1.5
	Promotion of seniors programs by City of Terrace	1.5
	Promote programs where seniors meet	1.5
	Public functions	1.5
	Counselling assistance to access services	0.8
	Educational programs	0.8
	Home care workers could distribute info	0.8
	Information program for seniors	0.8
	Interview seniors to gather information about need	ds 0.8
	Letters written by civil service	0.8
	Mailouts	0.8
	Public meetings	0.8
	Welcome wagon package for new seniors	0.8
	Workshops	0.8
Inform	al Forms of Communication	14.4
	Word of mouth	6.8
	Telephone calls	2.3
	Bulletin boards	1.5
	Businesses	0.8
	Family	0.8
	Friends	0.8
	Information boards at kiosks	0.8
	Service clubs	0.8
Other		3.8
	Programs not promoted because they are full	2.3
	Product advertising (milk cartons, products)	0.8
	Tell seniors where information is available	0.8
None		2.3
Don't k	now	2.3
n = 132	III V II	4.5
11- 132		

Table A38 What new / additional seniors' services do you think Terrace needs?

		% of respondents
Social S	Support	35.9
	More home support	6.4
	More social support programs - general	3.8
	House cleaning services	3.8
	Develop adult daycare centres for low need seniors	2.6
	Expand time home support workers spend w/seniors	2.6
	New facility for adult daycare	2.6
	Cooking support for seniors	1.3
	Dietary programs	1.3
	Don't move adult daycare	1.3
	Expand hours of operation for home support	1.3
	Expand public health nurse services	1.3
	Health prevention programs	1.3
	More respite care services	1.3
	Need a geriatric specialist	1.3
	New facility for food bank	1.3
	Soup kitchen for the elderly	1.3
	Support for families with both people working	1.3
Recreat	ion and Leisure	21.8
	Visiting programs	7.7
	Recreation programs for seniors - general	5.1
	Church groups could call seniors	1.3
	Fitness classes for people of different stages in life	1.3
	Improve wheelchair accessibility - Shames Mtn	1.3
	Indoor recreation programs	1.3
	Maintain services at the Happy Gang	1.3
	Recreation centre for elders on reserves	1.3
	Social programs for seniors - general	1.3
Retail		7.7
Ketan	Shopping programs	5.1
	Shopping programs More benches at the mall	1.3
	More retail in Thornhill	1.3
	More retain in Thornium	1.3
Suppor	t Groups	5.1
	More support groups - general	2.6
	For families living with Alzheimers	1.3
	Meeting space needed for support groups	1.3
Informa	ation (Library, health resources)	3.8
	Develop an information centre	1.3
	More information - general	1.3
	Travelling lending library to seniors' facilities	1.3
Other		7.7
Omer	Advocate for caniors peeded	7.7
	Advocate for seniors needed	2.6
	Volunteer programs to give seniors rides	2.6
	Advocate for immigrant seniors needed	1.3
	Discuss safety with seniors (Firemen / RCMP)	1.3
Nothing	3	12.8
Don't k		5.1
n = 78		

**** SERVICE PROVIDERS ANSWERED THE FOLLOWING IN THIS SECTION

Table A39 What are the roles and responsibility of your service organisation with respect to seniors in your community?

#	of responses*
Adult daycare	3
Happy Gang	3
Home support	3
Legion	3
Alert Line	2
Meals on Wheels	2
Regional District	2
Seniors Games	2 2 2 2
Twin Rivers Cooperative	2
Volunteer Bureau	2
Alzheimer's Society	1
Churches	1
City council	1
Cultural coordinator	1
Curling Club	1
Elks	1
First Nations	1
Food bank	1
Friends of the Cemetary	1
Handidart	1
Hospice Society	1
Hospital Foundation	1
Housing - general	1
Ksan House	1
Long-term care	1
Mental Health	1
Mentoring	1
Northwest Housing Consulting	1
Osteofitness	1
Respite care	1
Royal Purple	1
Seniors' Advisory Committee	1
Terrace & District Christian Council for Res.	Dev. 1
Terraceview Family Council	1

^{*}some people interviewed were able to provide information about multiple programs, so this is reflected in the table above.

Table A40 How are the services provided by your organisation delivered?

	% of respondents
Funding - government	12.8
Donations	11.5
Partnerships	11.5
Revenue from services provided	11.5
Volunteers	11.5
Referrals	9.0
Fundraising	3.8
Bingo funding	2.6
Free access to space	2.6
Informal transportation networks	2.6
Membership fees	2.6
Retail discounts	2.6
Applications	1.3
Contingency fund	1.3
Contract workers	1.3
Equipment	1.3
Home visits	1.3
Interviews	1.3
Logistical support	1.3
Networks	1.3
Ownership of building	1.3
Property donation	1.3
Tax relief	1.3
Not applicable at this time	1.3
n= 78	

Table A41 How does your organization promote / advertise programs / services provided for seniors?

		% of respondents
Inform	al Method of Communication	31.2
	Word of mouth	16.9
	Telephone calls	6.5
	Track record	2.6
	Bulletin boards	1.3
	By example	1.3
	Personal contact	1.3
	Preaching	1.3
Printed	Materials	29.9
	Newspaper advertisements	7.8
	Brochures	6.5
	Newsletter	3.9
	Newspaper articles	3.9
	Booklets	2.6
	Mail out program	1.3
	Pamphlets	1.3
	Posters	1.3
	Signs	1.3
Formal	Methods of Communication	23.4
	Referrals and assessments	9.1
	Public presentations	3.9
	Awareness week / month	2.6
	Booths at the mall	2.6
	Fundraising events	1.3
	Letters	1.3
	Public functions / events	1.3
	Workshops	1.3
Techno	logy	7.8
	Radio	2.6
	Channel 10 announcements	1.3
	E-mail	1.3
	Television advertisements	1.3
	Television interviews	1.3
Other		7.8
	No promotion	7.8
n= 77		

Table A42 What are some of the challenges your organization faces in delivering services to seniors?

	% of respondents
Human Resource Challenges	28.8
Lack of volunteers	9.0
Lack of members	3.6
Limited participation by members	3.6
Workload	2.7
Staff burnout	1.8
Difficulty recruiting staff	0.9
Lack of expertise - administration	0.9
Lack of staff	0.9
Lack of support by members	0.9
Lack of support by other organizations	0.9
Lack of time - general	0.9
Lack of time to train volunteers	0.9
Time commitment to develop services	0.9
Volunteer burnout	0.9
Financial Barriers	25.2
Lack of funding	17.1
Escalating prices during construction	0.9
Funding requirements - committees	0.9
Funding requirements - partnerships	0.9
Funding requirements - sponsor publicity	0.9
High insurance costs during construction	0.9
Lack of government support	0.9
Limited access to trust funds	0.9
Poor economy	0.9
Volunteers must pay for parking	0.9
Political Barriers	10.8
Lack of control over setting policies	2.7
Changes in political directions	1.8
Confidentiality issues	0.9
Disagreement amongst board members	0.9
Disagreements amongst members	0.9
Government policies for allocating housing	0.9
Lack of control over budget	0.9
Lack of control over developing plans	0.9
Territoriality for organizations	0.9
Space and Design	9.9
Lack of meeting space	2.7
Lack of parking	2.7
Limited wheelchair accessibility	1.8
Sidewalk maintenance	0.9
Small bathrooms	0.9
Small space	0.9

Con't

Service	Delivery	5.4
	Waiting lists for services	1.8
	Government cutbacks	0.9
	Lack of proactive programs	0.9
	Range of clients	0.9
	Services overlap	0.9
Psycho	logical Barriers	3.6
	Difficulty maintaining interest of volunteers	0.9
	Gap between planning and expectations	0.9
	Lack of trust for other service providers	0.9
	Misunderstanding of service location	0.9
D l -	4 D	2.6
Keguia	tory Barriers	3.6
	Building to government standards	0.9
	Liquor laws for events	0.9
	Too many regulations for private housing	0.9
	Visitors must be signed in by members	0.9
Isolatio	on	2.7
	Distance to other centres	0.9
	Distance to town	0.9
	Distance to regional representatives	0.9
.		4.0
Partne	rships and Networking	1.8
	Difficulty developing partnerships	1.8
Commi	unication Problems	0.9
	lack of coordination amongst services	0.9
Crime		0.9
	Vandalism	0.9
Organi	zational Structure	0.9
0.8	Following rules during meetings	0.9
	Tonowing rules during incedings	0.5
Other		5.4
	Lack of transportation to services	3.6
	Language barriers	0.9
	Sparse distribution of population	0.9
n= 111		
11-11-1		

Table A43 What are the challenges your organization sees to providing services to seniors?

	% of respondent
Psychological Barriers	28.9
Stigma against aging	7.9
Stubborn - not willing to change	5.3
Lack of interest	2.6
Loneliness	2.6
Personal attachment to seniors	2.6
Stigma against food bank	2.6
Stigma against Health Unit	2.6
Stigma against mental illnesses	2.6
Communication Problems	23.7
Lack of awareness about services	7.9
Lack of understanding about services	7.9
Difficulty communicating with isolated seniors	2.6
Lack of communication about medication	2.6
Lack of information about traditional medicine	2.6
Human Resource Challenges	15.8
Lack of time to reach seniors	5.3
Lack of coordination amongst service providers	2.6
Lack of male workers	2.6
Lack of volunteers	2.6
Rotation of home support workers	2.6
Limited Accessibility	13.0
Lack of facilities	2.6
Lack of transportation options	2.6
Lack of wheelchair accessibility	2.6
Small space	2.6
People don't know how to access mental health services	2.6
Regulatory Barriers	7.9
Decision create more demands for services	2.6
Doctor's notes stipulating seniors can live on their own	2.6
Stricter criteria to obtain services	2.6
Design of Service Programs	5.3
Services are too focused	2.6
Services still in transition	2.6
Lack of Professional Support	5.3
Some physicians cancel support	2.6
Some physicians don't refer patients	2.6

SECTION E: Transportation

Table A44 Do the current transportation options in Terrace meets the needs of seniors?

	% of respondents
Yes	43.2
No	56.8

Table A45 Comments on transportation options

	% of respondents
Options	41.4
Have Handidart service	19.6
Have local transit system	9.2
People have personal vehicles	3.3
Taxis are available	2.6
Have bus for Terraceview residents	2.0
Volunteer Bureau has drivers	2.0
Friends provide transportation	1.3
Tim Horton's bus in summer	0.7
NHA is starting service	0.7
Limited Service	30.2
Limited Availability/ Handidart busy	11.8
No bus/handidart service evenings/weekends / holidays	7.2
Limited service on bus/handidart routes	7.2
Bus has infrequent service	3.3
Only one Handidart	0.7
Satisfied with Current Services	10.5
Handidart works well	3.9
Convenient bus stops	3.3
There are good transportations services	2.0
Happy with bus system	1.3
Options are Expensive	3.4
Taxis are expensive	1.3
Emergency services are expensive	0.7
Handidart is expensive	0.7
Fares are increasing	0.7
Con't	

Handi	cap Accessible Options	2.6
	Have buses with handicap access	2.6
Lack I	Handicap Accessibility	1.4
	Buses lack handicap access	0.7
	Taxis will not take wheelchairs	0.7
Lack o	of Sensitivity	1.4
	Insensitivity Amongst Public	0.7
	Driver's need sensitivity training	0.7
Optior	ns are Affordable	1.3
•	Handidart is affordable	1.3
Other		6.8
	Large distance to cover	2.0
	First Nations Initiatives	1.3
	Lack transportation to recreation	0.7
	Lack connections to Kitimat	0.7
	Few people use transit	0.7
	Lack information transit routes	0.7
	Psychological barriers to using services	0.7
Don't	know	2.0
n = 153	3	

Table A46 Types of transportation that should be provided for senior citizens?

	% of respondents
Satisfied with current situation	11.2
None	7.5
Expand handidart (general)	12.1
Increase handidart operating hours	3.7
Handidart is inconvenient: must call ahead	3.7
Add handidart service: weekends/holidays	1.9
Add another handidart	1.9
Expand who is eligible to use Handidart	0.9
Expand handidart service area	0.9
Handidart lacks promotion	0.9
Expand transit service area/ routes	6.5
Expand frequency of bus service	3.7
Increase bus operating hours	2.8
Increase transit wheelchair accessibility	2.8
Add bus service: weekends/holidays	1.9
Add bus stop by Tuck	0.9
Expand Terraceview bus to include Tuck	0.9
Need more bus shelters	0.9
Advertise transit routes more	0.9
Transit needs more funding	0.9
Need service to day care	5.6
Need service to recreation	4.7
Provide low cost taxi fares	2.8
Need senior friendly vehicles	2.8
Have taxis that are wheelchair accessible	1.9
Need transportation to Kitimat	1.9
Have equivalent services to similar communities	0.9
Have volunteer drivers	1.9
Reduce transportation costs for Seniors	1.9
Have vans that are wheelchair accessible	1.9
Central seniors' housing would solve transportation problems	s 1.9
Need transportation to health care	0.9
Don't know	1.9
n= 107	

Table A47 Where seniors need to travel out of town for health or other services, what types of transportation should be provided?

	% of respondents
Satisfied with current situation	3.3
None	0.8
Assistance with travel costs	19.5
High cost of travel	17.9
Need Affordable Accommodations	4.1
Assistance with return travel costs	3.3
Reasonable rate for spouse	1.6
Tax break insufficient	0.8
Expand Services	0.8
Northern Health Authority will be starting service to Kitimat	7.3
Need bus service to Kitimat	5.7
Need organized trips to nearby communities	3.3
Flight service	3.3
Assistance at the airports	2.4
Donation of Airmiles	0.8
Unstable Airline business	0.8
Difficult booking airline tickets	0.8
Ferry inconvenient	3.3
Bus	1.6
Door to door service	2.4
Need travel options	0.8
Transportation as recommended by a physician	0.8
Lack of information from physician	0.8
Travel arrangements should be made for you	0.8
Accompaniment	5.7
Winter road maintenance	2.4
Far distance to travel to large center	0.8
Need prompt service	0.8
First Nations reimbursed for travel, accommodation, meals	2.4
n= 123	

Table A48 In your opinion, are the sidewalks well maintained in Terrace?

	% of interviewees	
Excellent	0	
Good	24.5	
Fair	39.6	
Poor	17.0	
Very Poor	18.9	
n= 53		

Table A49 Specific Sidewalk Concerns

	% of respondents
Icy/ Poor winter maintenance	26.3
Lack general maintenance	15.8
Too much gravel	6.3
Overpass icy in winter	1.1
Slow maintenance	1.1
Lack of sidewalks	20.0
Lack of sidewalks out of downtown	3.2
Residential areas lack sidewalks	1.1
Sidewalks only on one side of roads	1.1
Have improved curbs	5.3
Not all curbs are sloped	1.1
Sidewalks downtown are good	4.2
Sidewalks are well maintained	1.1
Lack crosswalks	2.1
Crosswalks poorly located	1.1
Snow is ploughed into driveways	2.1
Don't use them/ don't know	5.3
No concerns	2.1
n= 95	

SECTION F

Physical Environment

Table A50 Are there any physical barriers that prohibit seniors from moving/ walking around town? If so where?

	% of interviewees	
Sidewalks	23.6	
Sidewalks (General)	7.0	
Sidewalks icy	5.9	
Lack sidewalks out of downtown	4.3	
Maintenance	2.1	
Icy sidewalks, Overpass, Post Office	1.6	
Sidewalk clearing is reasonable	1.1	
Lack of sidewalks	1.1	
Lack of lighting	0.5	
Stairs/Ramps	17.6	
Too many stairs at:		
Adult Day Care, Twin Rivers, Happy	y Gang,	
City Hall, restaurants, Shames Mour	ntain,	
old buildings, arena, hotels	6.4	
Stairs/ Ramps (General)	4.8	
Limited wheelchair access	4.3	
Library/ Art Gallery access	1.1	
Ramps are too narrow	0.5	
Lack ramps downtown	0.5	
Snowclearing	16.0	
Snowclearing (General)	11.2	
Sidewalk	2.7	
Roads	0.5	
Snow ploughed into driveways	1.6	
Weather	11.2	
Improved Areas	10.2	
Sidewalk Curbs	4.8	
Ramps	4.3	
Button/ Automatic Doors	1.1	
Distance	8.0	
Distance (General)	5.9	
Up Hill to McConnell and Terraceview	2.1	
Doorways/Access	8.0	
Doorways/Access (General)	4.3	
Doors are too heavy	2.1	
Lack automatic doors	1.6	
Road maintenance	1.1	
Lack of Benches	0.5	
Awning/ Canopies	0.5	
Don't know n= 187	2.7	

Table A51 What are some of the things that need to be done to allow seniors to move about Terrace and go to various stores and buildings?

	% of interviewees
Snow and ice cleaning	26.8
Snow and ice clearing Parking lots	11.2
Sidewalks	14.7
Roads	0.9
Wheelchair ramps	16.4
Doors	13.7
Doors Button doors	3.4
Automatic doors	6.9
Doors to heavy	3.4
Doors to heavy	э.т
Sidewalks / paths	12.1
Sidewalks/ paths general	9.5
Enforce care of sidewalks by businesses	2.6
Elevators	7.7
Elevators (General)	6.0
Elevators (Day Care, Library)	1.7
Distance	3.5
Housing not central	1.7
Stores on south side	0.9
Access to the Bench	0.9
Benches/ Bus Stops	3.4
More benches (bus stops, general)	1.7
Bus shelters	1.7
Store Assistance	3.4
Road Maintenance	0.9
Other	0.9
City Hall ring button for wheelchair access	
Not Applicable/ Nothing	8.6
n= 116	

Table A52 Who should be responsible for paying for these changes?

	% of interviewees
Municipal government	33.0
Private sector	21.6
Federal government	12.5
Provincial government	11.4
Owner of building	9.1
Non-profit sector	4.5
Don't know	4.5
Not applicable	3.4
n= 88	

Table A53 Are there enough handicap / seniors' parking spaces in town?

		% of interviewees
YES		
	Yes (General)	35.6
	Yes (Wal Mart, Canadian Tire)	6.7
	Yes (Mall, grocery stores)	6.7
	City program for senior parking, extended parking	6.7
	Yes (Pool, city hall)	2.9
NO		
	Improper use of spots	10.6
	No (General)	4.8
	No (Downtown/Street)	4.8
	No (Happy Gang)	4.8
	Poor design of spots	2.9
	Too many parking spots	2.9
	No (Farmer's Market, Library)	1.9
	Limited parking time	1.0
Not Su	re	2.9
n= 104		

SECTION G: Social Environment

Table A54 Community groups or clubs that are available for seniors

		% of respondents
Happy Ga	ng	27.7
Seniors G		5.8
Churches		7.3
Bible Can	np for 50+	0.5
Service C		33.5
	Legion	11.5
	Elks	4.7
	Lions	3.7
	Kinsmen	3.1
	Rotary	2.6
	Service Clubs General	1.6
	Royal Purple	1.6
	Service Clubs Lack New Members	1.6
	Masons	1.0
	Knights of Columbus	0.5
	Kinettes	0.5
	Eastern Star	0.5
	Cadets	0.5
Church T	eas	4.7
	Pentecostal Tea	2.6
	Church Tea General	1.0
	Evangelical Tea	0.5
	Anglican Church Tea	0.5
Care/ Ho	using Based Groups	4.7
	Sunshine Club/ Daycare	3.7
	Stepping Stones Clubhouse	0.5
	Terraceview recreation	0.5
First Nat	ions Groups	3.7
	First Nations Elders Group	1.6
	First Nations Dancing	0.5
	First Nations Groups (General)	0.5
	Kermode Friendship Centre	1.0
Sports		3.1
	Curling Club	0.5
	Bowling League	0.5
	Square Dancing	1.0
	Scottish Dancing	0.5
	Tai Chi	0.5
Civic Eng	gagement	2.1
	Seniors Advisory Council	1.0
	Historical Society	0.5
	Heritage Society	0.5
Voluntee	r Organizations	2.1
	Salvation Army	0.5
	Volunteer Bureau	0.5
	Community Gardens	0.5
	Heart and Stroke Foundation	0.5
Arts and	Education	1.6
	Arts Council	0.5
	Theatre (Cast and Crew)	0.5
	Library	0.5
Clubs		1.6
	Clubs General	0.5
	Bridge Club	0.5
	Knitting Club	0.5
Restaura	nts	1.0
	Tim Horton's	0.5
	Copperside	0.5
Lack Gro	oups	0.5
n= 191		

Table A55 What types of recreation or leisure programs are available for seniors?

		% of respondents
Swimm	ing/ Aquasize	11.4
Sports	(Indoor)	9.5
Sports	Curling	4.9
	_	1.3
	Ice Arena/ Skating	
	Shuffle Board	1.0
	Weight Room	1.0
	Exercise Programs	1.0
	Tae Kwan Doe	0.3
Games	'Cards	9.1
	Cards	3.3
	Bridge	1.3
	Games (ie Scrabble)	1.3
	Snooker/ Pool	1.3
	Cribbage	1.0
	Darts	0.3
	Slot Machine	0.3
	WHIST	0.3
	W III S I	0.3
Arts/ E	ducation	8.8
	Little Theatre	2.3
	Library	1.6
	Arts Programs	1.6
	Singing/ Music	1.6
	College	1.6
Bowlin	σ	8.5
DOWNI	Bowling	5.5
		2.3
	Carpet Bowling	
	Lawn Bowling	0.7
Annual	Social Events	7.8
	Annual Breakfasts/ Dinners	4.2
	Kinsmen Valentines Event	1.0
	Motel Christmas Dinner	1.0
	Fundraisers	0.7
	River Boat Days	0.7
	Elks King and Queen	0.3
Month	y Events	7.8
.,10111111	Church Teas	3.6
	Legion Dinners	2.9
	Monthly Dinners (General)	1.3
Care/H	ousing Based Recreation	6.2
	Terraceview Programs	2.9
	Sunshine Centre/ Day Care	2.0
	Housing Based (General)	1.3
	Con't	

Bingo	5.5
Walking	5.5
Mall Walking Group	2.9
Millenium Path	1.6
Walking	0.7
Track at High School	0.3
220000 00 222800 00 2000 00	
Sports (Outdoor)	5.2
Seniors Games	1.6
Skiing/ Snowboarding	1.0
Tennis Courts	0.7
Golf	0.7
Track and Field	0.7
Horse Shoes	0.7
Happy Gang	4.2
Dance/ Fitness Classes	3.3
Tai Chi	1.3
Square Dancing	0.7
Pilates	0.3
Line Dancing	0.3
Yoga	0.3
Belly Dancing	0.3
Outdoor Informal Recreation	2.9
Heritage Park	0.7
Gardening	0.7
Hot Springs	0.7
Boating	0.3
Outdoors (General)	0.3
Fishing	0.3
Crafts/ Baking	1.3
Quilting	0.7
Crafts (General)	0.3
Baking	0.3
Other	2.6
Day Trips	0.7
Health Club/ Spa	0.7
Gold Club	0.3
Volunteer Bureau	0.3
Beautification Commi	
Internet	0.3
Don't know	0.3
n= 307	

Table A56 Social/ recreational activities/programs needed to help seniors maintain their health and independence?

	% of respondents
House Cleaning	10.4
Yard Work	10.0
Visiting	8.3
Visiting (General)	4.8
Visiting (with Youth)	2.6
Visiting (to people's home)	0.4
Visiting (in Hospitals)	0.4
Shopping	8.3
Delivery of goods and services	7.9
Recreation and leisure programs	6.1
Recreation and Leisure (General)	3.9
Exercise Program	0.9
Expand Parks and Recreation Programs	0.4
Therapeutic/ Remedial Recreation Programs	0.4
Games	0.4
Social events	6.1
Social Events	4.8
Dancing/Dances	0.9
Affordable Social Events	0.4
Volunteer groups	6.1
Volunteer Bureau	3.5
Volunteer Groups	1.7
Volunteer Drivers to Medical Appointments	0.4
More Volunteers for Handyman Service	0.4
Upgrade / Add Facilities	6.1
Need Better Happy Gang Facility	1.3
Improved Wheelchair Access	1.3
Facilities (all weather recreation)	0.9
Facilities (Indoor - Walking)	0.9
Facilities (Rubberized Track)	0.9
Increased Access to Facilities for Activities (ie school gyms)	
Facilities (Second Sheet of Ice)	0.4
Host Senior Games	0.4
Another Lift at the Pool	0.4
Community Clubs	3.9
Arts/ Education	3.5
Education/ Prevention/ Safety	1.7
Arts/ Culture	1.3
College	0.4
Con't	

Library	3.0	
Transportation to Recreation	3.1	
Food Programs	1.7	
Food Program/ Food Preparation	1.3	
Meals on Wheels	0.4	
Expansion of Existing Programs	2.2	
Expand Home Care	0.9	
Expand Day Care	0.9	
Expand Happy Gang	0.4	
Affordability	0.9	
More Affordable Programs	0.4	
Affordable Coffee Shop	0.4	
People Uninterested in Activities	8.7	
Satisfied with Current Situation	5.2	
Nothing/ Not Sure	5.2	
n= 229		

Table A57 Other social or recreational issues related to seniors?

	% of respondents
Limited Access to the Mall for Early Morning Walking	3.6
Lack Awareness of Programs	3.6
Transportation to Recreation is Difficult	3.6
More volunteers are needed	1.8
Lack Certified Gym Trainers	1.8
Poor Parking near Happy Gang	1.8
Need Fitness Programs for Different Levels of Ability	1.8
Satisfied with Opportunities to be Involved	1.8
Need Increased Accessibility	1.8
Nothing/ No	78.6
n= 56	

SECTION H

Quality of Life and Cost of Living

Table A58 What factors do you think contribute to the quality of life of seniors in Terrace?

	% of respondent
Recreation	16.3
Fishing	3.4
Gardening	2.0
Golfing	1.4
Recreation opportunities - general	1.4
Skiing	1.4
Berry picking	0.7
Bingo	0.7
Entertainment - general	0.7
Hiking	0.7
Hot springs	0.7
Hunting	0.7
Parks	0.7
Proximity to Kitimat marina	0.7
Recreation centre	0.7
Snowboarding	0.7
Environmental Assets	14.3
Air quality **	8.8
Outdoors	2.7
Scenery	1.4
Water quality	1.4
Small Town Living	13.6
Friendly people	3.4
Walking distance to services	3.4
Familiarity with the area	2.7
Small town	2.0
Little traffic	0.7
Mobility	0.7
Quietness	0.7
Carla N. Amaraka	12.2
Social Networks	12.2
Family	4.1
Friends	3.4
Caring community	1.4
Familiarity with local people	1.4
Churches	0.7
Neighbours	0.7
Support networks (phone calls)	0.7
Availability of Services	8.2
Availability of services - general	2.0
A & W	0.7
Assistance in stores	0.7
Delivery services	0.7
Dollar store	0.7
Good organic produce	0.7
Range of restaurants	0.7
Range of shopping services	0.7
Shopping - big box competition	0.7
Tim Horton's	0.7
Con't	

Cost of	Living	7.5
	Cost of living - general	4.1
	Cost of living - housing	1.4
	Cost of living - can't afford to move	0.7
	Cost of living - groceries	0.7
	Cost of living - municipal taxes	0.7
Social A	attuition	6.1
Social A	Happy Gang	2.0
	Church teas	1.4
		1.4
	Community groups - general	
	Dinners	0.7
	Theatre	0.7
Climate		4.1
	Climate - more moderate climate	2.0
	Climate - short winters	1.4
	Climate - general	0.7
Safety		4.1
	Safe community	2.7
	Low crime rate	1.4
Health (^T are	3.4
TICUITIT V	Good doctors	1.4
	Availability of health care services	0.7
	Good dental services	0.7
	Health care support staff	0.7
Housing		2.7
	Adequate housing	0.7
	Affordable rent	0.7
	Terraceview Lodge	0.7
	Twin Rivers Estates	0.7
Agricult	iire	1.4
rigi reun	Community garden	0.7
	Farmer's market	0.7
Support	Services	1.4
	Home support	0.7
	Volunteer Bureau	0.7
Other		1.4
0 11101	Independence	0.7
	Personal effort	0.7
	Torsonar circit	0.7
Transpo	ortation	0.7
_	Handidart	0.7
NI - 41- *		2.0
Nothing Don't ki		2.0
Don't Ki	IUW	0.7
n= 147		
11/		

Source: Terrace and Area Seniors Needs Study

** Air quality has improved with mills not using the burner. There are no exhaust fumes from vehicles like down south.

Table A59 What factors do you think detract from the quality of life of seniors in Terrace?

	% of respondents
Climate	17.5
Icy sidewalks	1.0
Low periods of sunshine	3.1
Rain	3.1
Snow	1.0
Weather	7.2
Winters	2.1
Transportation	14.4
High costs for transportation - out of town	5.2
Lack of transportation options	1.0
Limited accessibility - local transportation	3.1
Limited service provision for Handidart**	3.1
Transportation - general	2.1
Isolation	11.3
Distance to chronic disease specialists	1.0
Distance to heart specialists	1.0
Distance to larger centres	6.3
Distance to Northern Health	1.0
Distance to specialized health care	1.0
Isolation - general	1.0
Cost of Living	9.3
Cost of living - housing	2.1
Cost of living - groceries	1.0
Cost of living - natural gas	2.1
Cost of living - petroleum	2.1
Cost of living - taxes	1.0
Limited income for seniors	1.0
Crime	8.2
Alcohol	1.0
Break and enters	2.1
Drugs	2.1
Jay walkers	1.0
Thieves	2.1
Health Care	8.2
Health care - general	1.0
Lack of health care services - general	1.0
Lack of health care specialists	1.0
Lack of hospital staff	1.0
Lack of hospital staff Lack of psychological services for seniors	1.0
Limited accessibility to health care services	
Must go to Prince George to set up dialysis	1.0
Poor nutrition	1.0
1 ooi natition	1.0

Con't

Housing Families not involved in housing assessment Lack of beds - Terraceview	5.2 1.0 1.0
Lack of seniors' housing Support Services Lack of home care / support services	3.1 5.2 4.1
Lack of social services for seniors Social Networks	1.0 4.1
Lack of friendliness towards ethnic groups Lack of social networks No welcome wagon for new seniors in town	1.0 2.1 1.0
Communication Lack of awareness about services Language barriers	2.1 1.0 1.0
Services Lack of services - general	2.1 2.1
Retail Services Distance to some stores	1.0 1.0
Social Activities Lack of dances for seniors	1.0 1.0
City Design and Maintenance Community design is spread out	1.0 1.0
Social Problems Family break ups	1.0 1.0
Nothing Don't know n= 97	6.2 2.1

Are there opportunities to feel a sense of belonging? Table A60

	% of respondents
Yes	56.6
No	28.3
Depends	13.2
Don't know	1.9

Source: Terrace and Area Seniors Needs Study

** Seniors must be able to get on and off the Handidart bus themselves.

Table A61 Comments about creating a safe environment for seniors

	# of response
Safety Concerns	
Purse snatching	4
Fear to walk at night	4
Break and enters	3
Drugs and alcohol	2
Stairs**	2
Thieves	$\frac{2}{2}$
Businesses not accessible	1
Car stolen	1
Crime rate increasing	1
Dog concerns	1
Icy sidewalks	1
Lack of meeting places for seniors	1
Pan handlers	1
Proximity to poor areas	1
Road conditions	1
Vandalism	1
Vocal harassment	1
n= 28	1
11= 20	
Safe Qualities	
Adult daycare	1
Availability of Alert Line	1
Caring community	1
Depends on contact with relatives	1
Happy Gang	3
Low crime rate	1
Safe contact with neighbours	1
Streets are well lit	1
Proximity to the park	1
n= 11	
Recommendations	
Happy Gang needs a better facility	1
Need an elder's centre like the Hap	
Need another adult daycare centre	1
Need more beds at Terraceview	1
Need more seniors' housing	1
Program to pair seniors and adults	-
n= 6	inceded 1
n- v	

Source: Terrace and Area Seniors Needs Study
**Steep stairs at the Happy Gang and churches can't afford to put in lifts.

Table A62 Are there opportunities to be involved / participate in the community?

79.6
14.8
3.7
1.9

Source: Terrace and Area Seniors Needs Study

Table A63 Comments on seniors opportunities to be involved / participate

		# of respondents
Opport	cunities to Participate	
• •	Depends on personality	6
	Happy Gang activities and events	2
	Beautification Society	1
	Business organizations	1
	Cards	1
	Church groups	1
	Elks	1
	Groups use senior expertise	1
	Post-retirement employment	1
	River Boat Days	1
	Royal Purple	1
	Seniors' Advisory Committee	1
	Seniors involved in fundraising for CT scan	1
	Social clubs - general	1
	Supportive community	1
	Terrace Little Theatre	1
	Volunteer groups	1
n=23		
Problei	ns with Participation	
	Lack of opportunities for seniors	4
	Lack of interest	2
	Health inhibits ability to participate	1
	Less outgoing seniors are isolated	1
	Limited transportation impacts participation	1
	Loneliness	1
	Opportunities are not visible	1
	Perceptions there are age restrictions at Happy Gang	1
n= 12		
Recom	mendations	
	Develop a seniors' visiting program with schools	1
	Senior wisdom needs better recognition	1

Table A64 Cost of living issues for older residents in Terrace?

	% of respondent
Energy	28.8
Gas prices	9.9
Natural gas	8.1
Heating costs - general	7.2
Electricity	2.7
Parts and maintenance costs	0.9
Prescriptions	21.6
High prescription costs	12.6
Prescriptions not covered by Pharmac	
Must pay certain \$ before Pharmacar	
High costs for alternative medicine	0.9
High costs for lens prescriptions	0.9
High dispensing fees	0.9
Groceries	13.5
Groceries - general	10.8
Farmer's market is expensive	0.9
Fruits and vegetables	0.9
Higher costs to avoid allergies**	0.9
Assisted Living	9.9
High costs for home care	3.6
Assisted living – general	2.7
High costs for Meals on Wheels	1.8
High costs for medical equipment (ie	
Unreasonable formula to calculate \$ 1	
Home Maintenance	7.2
High costs for building supplies and l	abour 2.7
Home maintenance - general	2.7
High costs for housekeeping	1.8
Recreation	6.3
Recreation costs – general	3.6
Curling	0.9
Golfing	0.9
Swimming pool rates	0.9
Income	5.4
Limited income	2.7
Pensions don't keep with inflation	2.7
Financial Services	4.5
High NSF charges at banks	0.9
GST	0.9
Municipal taxes	0.9
PST	0.9
	0.9

Con't

Health Care	1.8
High health care costs - general	0.9
Hidden costs for health care via patient changes	0.9
High Cost of Living - General	0.9

Source: Terrace and Area Seniors Needs Study

Table A65 Other comments about cost of living

	_
	# of respondents
Affordablity	
Big box retail - encourages competition	7
Seniors' discount - retail stores	4
Affordable lunch at the Happy Gang	1
Kathleen's, Elegance Fashions	1
Pennington's	1
Mark's Work Wear World	1
Salvation Army	1
Seniors' rates - restaurants	1
Seniors' rates - movie theatre	1
Veterans assistance for health care	1
Recommendations for Cost of Living	
Eliminate taxes for seniors	1
Expand coverage of Pharmacare	1
Gas subsidies	1
Northern Living Allowance	1
Senior rates for prescriptions	1
Subsidies for alternative medicine	1

^{*} Once a spouse moves into Terraceview / McConnell, their daily fees must be paid. It comes out of the household budget. But the policy does not take into account that there is another spouse (housewife) living off the same budget at home.

^{**}Food is especially expensive if you have allergies. You can only claim the difference in cost between the "normal" food and the specialty food item. Seniors must calculate this cost and send receipts to the government during tax time. This is very time consuming.

^{***}Pharmacare plan does not cover all medications, including aricept. Aricept is \$5.00 per pill to treat dimentia / Alzheimer's.

Table A66 Does the cost of living in Terrace affect seniors' quality of life?

44.4
40.7
5.6
9.3

Source: Terrace and Area Seniors Needs Study

Table A67 Comments on the ways cost of living affects seniors

	# of respondents
Limited income	12
Heating costs	7
Prescription costs	7
Gas prices	6
Transportation costs	3
Groceries	3
Home support costs	2
Building supplies	1
Health care equipment (walkers, etc.	2.) 1
Housekeeping costs	1
Housing costs	1
Lack of support	1
Meals on Wheels costs	1
Recreation costs	1
Spending habits not changed	1
n= 48	

SECTION I: Informal and Formal Care Networks

Table A68 Do you have family or friends in Terrace who could be a support network?

	% of respondents
Not applicable	17.9
Have Support Outside of Community Have Support Within Community	7.1 75.0
n= 84	

Source: Terrace and Area Seniors Needs Study

Table A69 What organizations are available to support seniors who do not have family or friends in Terrace?

	% of respondents
Formal Services	30.0
Home Care Nursing	6.1
Meals on Wheels	4.9
Adult Day Care	3.7
Home Support	2.5
Mental Health	2.5
Physician	2.5
Fire Department/ RCMP	1.8
Health Unit	1.8
Hospice	1.2
Social Services	0.6
Long Term Care	0.6
Home Care Worker	0.6
Mental Health (7 Sisters)	0.6
Home Occupational Therapy	0.6
Community Groups	14.7
Community Groups (General)	3.7
Volunteer Bureau	3.1
Volunteer Sector	3.1
Kermode Friendship Centre	1.8
Food Bank	1.2
Visiting Programs	1.2
Hospital Foundation	0.6

Con't

Service Clubs	9.7
Service Club (Legion)	3.7
Service Club (Elks)	1.8
Service Clubs (General)	1.2
Service Club (Kinsmen)	1.2
Service Club (Lions)	1.2
Service Club (Knights of Columbus)	0.6
Churches	9.2
Churches	9.2
Seniors Groups	6.1
Happy Gang	5.5
Other Seniors	0.6
First Nations	4.2
First Nations Health Office	1.2
Aboriginal Informal Networks	1.2
First Nations Home makers	1.2
First Nations Band Office	0.6
Informal Supports	2.4
Neighbour	1.8
Colleagues	0.6
Support Groups	1.8
Support Group (Alzheimer's)	1.2
Support Groups (General)	0.6
Other Comments	7.3
Cleaning Services	2.5
Need Seniors Advocate	1.2
Wouldn't Use Services/ People won't accept help	1.2
Landscapers	0.6
Garage Owner	0.6
Thrift Stores	0.6
Lack Awareness of Services	0.6
Don't know	9.2
n= 163	

Appendix 2

Data from Focus Groups

SECTION A:

Migration and Mobility

Table B1 What are the advantages to retiring in Terrace?

Social Networks (17)

Families (6) Friends (5)

Close kinships (1)

Everyone knows you (1)

Extended family (1)

General social networks for support (1)

Neighbours (1)

Wouldn't know people in the south (1)

Small Town Living (17)

Close knit community (2)

Familiarity with the area (2)

Friendly (2)

Smaller community (2)

Small town living (2)

Being a long-time resident (1)

Can walk anywhere in half an hour (1)

Easy access to services (1)

Only limited travel is required (1)

Seniors parking – 2 hour pass for a 1 hour zone (1)

Supportive community (1)

Traffic is better (1)

Environmental Assets (17)

Beautiful scenery (5)

Fresh air (5)

Climate – not too hot or cold (2)

Clean water (1)

Good growing season (1)

Little pollution (1)

Outdoors (1)

Sunny (1)

Recreational Assets and Social Opportunities (14)

Fishing (2)

Happy Gang (2)

Bingo (1)

Flat ground for people to walk (1)

Hotsprings (1)

Kermode Friendship Centre (1)

Library (1)

Lots of opportunities to volunteer (1)

Parks and trails (1)

Range of recreational facilities (1)

Recreation program and activities (1)

Swimming pool (1)

Social Support Services (9)

Anti Poverty (1)

Churches (1)

Emergency shelter (1)

Food banks (1)

Food box program (1)

Housekeeper comes twice per week (1)

Ksan House (1)

Meals on Wheels (1)

Soup kitchens (1)

Cost of Living (7)

Affordability compared to other areas (2)

Finances are in place (1)

Groceries are reasonable (1)

Inexpensive housing (1)

Seniors could not afford to move (1)

Seniors discounts at stores (i.e. Shopper's) (1)

Health Care Services (5)

Range of health care specialists (2)

Good medical centre (1)

Good services for residents with mental illnesses (1)

Good quality of health care services (1)

Never a problem getting services (1)

Arts and Culture (2)

Crafts (1)

Lots of cultural and musical programs (1)

Safety (2)

Crime free (1)

Safer than Vancouver or Victoria (1)

Shopping Services (2)

Delivery services for seniors (grocery and drug

stores) (1)

Shopping services are accessible (1)

Transportation Services (2)

Local transportation services are good (1)

Supportive Handidart system (1)

Distance to Other Centres (1)

Distance to other centres (1)

Government Services (1)

Quick access to government services - no line ups (1)

Table B2 What at the disadvantages to retiring in Terrace?

Limited Availability of Services (11)

Difficulty attracting specialists (2)

Difficulty getting home support (1)

Orthopedic surgeon (Kitimat) can only do one knee

and one hip replacement per week (1)

Lack of health services (1)

Lack of hospital beds (1)

Long waiting lists for health care services (1)

Long waiting lists for surgery (1)

Must travel to Vancouver for medical services (1)

Not as bad to go to Kitimat or Prince Rupert (1)

Sometimes have a problem getting tested (1)

Lack of Housing (10)

Lack of housing (2)

Lack of long-term care (2)

Long waiting lists (2)

Lack of aboriginal housing (1)

Lack of intermediate / supportive care (1)

Lack of low-income housing (1)

Long waiting lists for extended care (1)

Distance to Larger Centres (7)

Distance to larger centres (3)

Distance to medical centres (2)

Distance to other centres (1)

Distance to Vancouver (1)

Limited Transportation Services (6)

Frequency of transportation services (1)

Handidart does not operate evenings / weekends (1)

Limited transportation services inside of town (1)

Limited transportation services out-of-town (1)

No transportation between Kitsumkalum/Terrace (1)

Taxis do not take people with wheelchairs (1)

Physical Barriers (6)

Limited handicap accessibility (stores on Lazelle and Kalum) (1)

Limited handicap / seniors parking (1)

Limited wheelchair accessibility (1)

Poor lighting at night for streets and parks (1)

Poor maintenance of sidewalks (1)

Poor parking at the Happy Gang (1)

High Transportation Costs (5)

High transportation costs (2)

High airfare costs (1)

High costs for medical travel (1)

Out-of-town holiday travel (1)

Safety Concerns (5)

Break and enters (2)

Drugs (1)

Pan handling (1)

Streets not as safe at night (1)

Cost of Living (4)

High gas costs (1)

High heating costs (1)

Seniors have a fixed income. They can't afford to go

out for dinner (1)

Too expensive to move away (1)

Lack of Social / Recreational Activities (4)

Lack of meeting places (1)

Lack of social / recreational activities for seniors (1)

No activities in Kitsumkalum (i.e. bingo) (1)

No hang out centre (1)

Climate (3)

Cold (1)

It is very muddy here (1)

Weather (1)

Inappropriate Design of Seniors' Housing (3)

Too many stairs (2)

Flat level accessibility is key (1)

Aging Facilities (2)

Need an updated pool (1)

Need hot tubs for seniors (1)

Range of Goods and Services (2)

Food banks are not able to provide all the staples (1)

Limited shopping (1)

Discrimination (1)

Low income, aboriginal seniors are discriminated against at the park in the evenings (1)

Out-Migration (1)

Exodus of youth due to economic downturn (1)

Poor Investment Environment (1)

Poor investment environment (1)

Restructuring at Terraceview (1)

Restructuring at Terraceview (1)

SECTION B: Housing

Table B3 Availability of Seniors' Housing

Long Waiting Lists (16)

Long waiting list for Twin Rivers (7)*

Long waiting list - general (3)

Long waiting list for Terraceview (2)

Long waiting list for McConnell (1)

Long waiting list for Muks Kum Ol Housing (1)

Long waiting list for Tuck (1)

Long waiting list for Willows (1)

*Estimated waiting list for Twin Rivers was 5 - 10

years.

Cycle of Aging (2)

Cycle of aging – seniors must wait until a resident at Willows or Twin Rivers moves into long-term care at Terraceview before someone can obtain a unit at these facilities (2)

Limited Availability of Seniors' Housing (15)

Lack of intermediate / assisted living housing (4)

Shortage of long-term care beds (3)

Lack of independent housing (2)

Lack of extended care facilities (1)

Lack of housing for aboriginal elders - general (1)

Lack of housing for elders in Kitsumkalum (1)

Lack of low-income housing (1)

Lack of seniors' housing facilities - general (1)

Willows is full (1)

Couples are Split Up (1)

Couples are split up when they need each other the most. Many spouses can't travel to be with their partner (1)

Source: Terrace and Area Seniors Needs Study

Table B4 Recommendations to Improve the Availability of Seniors' Housing

More assisted living facilities with laundry and cleaning services (5)

More independent living facilities (4)

Develop a mixed care housing facility (3)

More long-term care facilities (3)

More low-income housing facilities (3)

Couples housing with mixed care (2)

Develop a facility to meet needs between independent and assisted living (2)

Gated community for seniors (2)

Co-op housing (1)

Develop a seniors' housing facility that can facilitate services coming to seniors (1)

Develop private housing options (1)

Entry level housing (1)

More assisted living facilities with Meals on Wheels (1)

More rental facilities for seniors (1)

Table B5 Design Problems with Seniors' Housing

Positive Design Features

Aesthetically pleasing - Twin Rivers (3)

Aesthetically pleasing - McConnell (2)

Elevators - Willows (2)

Tuck units consist of one level (2)

Common room - McConnell (Residents have the option of privacy in their own units or going to the

common room) (1)

Common room - Willows (Seniors can make dinner

for their families) (1)

Elevators - McConnell (1)

Meals provided - McConnell (1)

Pets are allowed - Willows (1)

Resident caretaker - Willows (1)

Wheelchair accessibility - Willows (1)

Wheelchair accessibility - Tuck (1)

Negative Design Features

Units are small - Willows (4)

Stairs - Twin Rivers (3)

Units are small - Tuck (3)

Doors do not open correctly (2)

Narrow stairs - Twin Rivers (2)

Parking is located away from units - Twin Rivers

(Not suitable for seniors carrying groceries back to

their units) (2)

Poor maintenance of senior housing facilities (2)

Units are small - general (2)

Bachelor suites do not have closets - Willows (1)

Bachelor units - general (1)

Bathrooms are small - Kitsumkalum (1)

Bathrooms are too far away from the bedroom - Twin

Rivers (1)

Bathrooms have angled counters (1)

Counters are too high (1)

Electricity is not hooked up properly - Kitsumkalum

(1)

Facilities are old - Tuck (1)

Facilities are old - Willows (1)

Heavy doors - general (1)

Heavy entrance doors - Terraceview (1)

Lack of fire safety exits (especially with heavy doors)

(1)

Lack of handrails (1)

Lack of units with a bedroom (1)

Lack of wheelchair accessibility in rooms -

Terraceview (1)

Lack of wheelchair accessibility - general (1)

Lack of wheelchair accessibility - Muks Kum Ol

Housing (1)

Lack of wheelchair accessibility - Tuck (1)

Lack of wheelchair accessibility - Twin Rivers (1)

Main floor is not level - Terraceview (1)

Mildew - Tuck (1)

Multiple floors - McConnell (1)

Narrow stairs with no railings - Kitsumkalum (1)

No caretaker (1)

No elevator - Twin Rivers (1)

No common dining or living room - general (1)

No common area for social visits and eating -Twin

Rivers (1)

No escape ladder - Kitsumkalum (1)

No washer or dryer (1)

Small windows (especially in basement suites) (1)

Solarium is used to palliative care - Terraceview

(This space is too open for residents and family to

cope with mortality) (1)

Stairs (1)

Tiles installed at Terraceview (They do not provide a

cushion for falls) (1)

Too many bachelor suites - Tuck (1)

Units are small - Terraceview (Staff can't provide

services, such as lifting to residents. There is no

room for furniture) (1)

Windows are too high for seniors in wheelchairs (1)

Windows are too small to crawl through -

Kitsumkalum (1)

Windows push out and the screens collapse on

seniors sometimes - Terraceview (1)

Windows sweat when it is damp - Tuck (1)

Table B6 Design Recommendations

Install a common room (2)

Install a garage next to the building (not separate like

Twin Rivers) (2)

Install elevators (2)

Wheelchair accessibility for all units (2)

Better insulation is needed for hot water tanks -

Kitsumkalum (1)

Create a palliative care room (1)

Develop a craft space (1)

Develop a 4 place complex where one person looks after the other three (There is a provincial network for this) (1)

Develop more one bedroom units (1)

Develop multi-level care facilities (This would

improve relationships and familiarity with staff) (1)

Ensure floors are level (1)

Ensure seniors' housing is developed with one level

Hire a caretaker (1)

Install an exercise room (1)

Install a pool and a hot tub at Terraceview for physiotherapy (1)

Install good pocket doors to free up space (1)

Install laminate flooring (Easy to clean and provide a

cushion for falls) (1)

Install lower counters (1)

Install more handrails (1)

Install more lifts at Terraceview (1)

Install one lever taps for people with arthritis instead

of two taps (1)

Install walk-in tubs (1)

Install wider doorways (1)

Larger porches to allow ambulance attendant to enter

homes - Kitsumkalum (1)

Provide a guest room for visitors (visitors could pay a

nominal fee) (1)

Provide cleaning services (1)

Provide pamphlets about social support services in all

seniors' housing facilities (1)

Put beds against the wall to prevent seniors from

falling out of bed and to provide more room (1)

Put parking in the basement and out of the rain (1)

Repaint Tuck (1)

Source: Terrace and Area Seniors Needs Study

Table B7 Affordability of Seniors' Housing

Affordable Housing Options (13)

Tuck - subsidized housing (\$240 - \$270 per month) (4)

Twin Rivers - \$75,000 - \$95,000 (3)

Willows - subsidized housing (3)

McConnell - housing costs are based on income (1)

Muks Kum Ol Housing - subsidized housing for

elders (25% of their income) (1)

Terraceview - costs are based on your income (1)

Short Notice Given for Rent Increases (1)

Landlords should not be able to just raise rents whenever they see fit.

Lack of Affordable Seniors' Housing (9)

High costs for units - Twin Rivers (3)

High costs for natural gas (1)

High costs to install chair lifts - \$7,000 (1)

High costs to stay at the hospital while waiting to get

into Terraceview (1)

High rental costs - Kitsumkalum (1)

Lack of low-income housing (1)

Muks Kum Ol Housing does not provide a discount for seniors, but takes a percentage of income (1)

Attitudes of Landlords (1)

Landlords think people get more money with government assistance and raise their rents.

Table B8 Emerging Pressures for Seniors' Housing

Demographic Pressures

Baby boomers (2) Aging population (1)

Growing ratio of seniors in the community (1)

Differences in Housing Markets

Gap between poor local housing markets and housing markets where seniors would like to move to. Seniors can't afford to sell their house and move away (3)

Uncertain Who Will Develop Seniors' Housing

Lack of interest by the private sector (1) Lack of private and public partnerships (1) Unclear who will develop public and private partnerships for seniors' housing (1)

Source: Terrace and Area Seniors Needs Study

Table B9 Lack of Services at Senior Housing Facilities

Lack of Activities at Senior Housing Facilities

Lack of entertainment and recreational activities at Terraceview (1)

Service Providers at Housing Facilities do not Seek Feedback from Seniors

Service providers do not ask seniors in McConnell what they want or require (1)

Limited Services Provided at Housing Facilities

Lack of support services to help seniors stay in their homes (1)

Terraceview has a kitchen, but only sandwiches and snacks are provided (1)

Table B10 Location of Senior Housing Facilities

Positive Location Features

Close to downtown - Twin Rivers (3)

Close to shopping - Willows (3)

Availability of Handidart makes location of all

facilities good (2)

Close to the medical centre - Willows (2)

Muks Kum Ol Housing provides housing all over the

community (2)

Beautiful area - Terraceview (1)

Bus stop in front of Twin Rivers (1)

Close to banking services - Willows (1)

Close to farmer's market - Willows (1)

Close to services - Willows (1)

Close to the convenience store - Willows (1)

Close to the post office - Willows (1)

Good location - general - Willows (1)

Negative Location Features

Distance to downtown (especially in the winter) -

Terraceview (2)

Distance to walk to downtown for services (2)

Distance to downtown - McConnell (1)

Distance to downtown - Tuck (1)

Limited proximity compounded by limited access to

Handidart service (1)

Located on a busy street - Twin Rivers (1)

Location on top of a hill - McConnell (1)

Source: Terrace and Area Seniors Needs Study

Table B11 Recommendations for the Location of Future Housing for Seniors

Locate senior housing facilities downtown close to shopping (3)

Avoid locating seniors' housing facilities on top of a hill (1)

Develop seniors' housing facility in Thornhill (1)

Develop seniors' housing by the college (quiet area) (1)

Downtown property of the Legion (1)

Locate senior housing facilities downtown close to the medical unit (1)

Old de Beau building across from the Willows (1)

Old co-op building (1)

Public Works property (1)

Redevelop 4-5 apartment blocks in town that are almost empty and poorly maintained (1)

Southside of Terrace (1)

Table B12 Regulatory and Restructuring Problems for Senior Housing Facilities

Admittance Requirements

BC Housing requires that you be on disability to get into some housing facilities (1)

Some seniors fall between assessment criteria for different facilities (1)

Terrace residents must compete against other residents in B.C. (Entry is province wide based on need) (1)

Willows is not available for all seniors because there is an income cap (1)

Lack of Awareness about Assessment Criteria

Uncertain how people are assessed for different housing facilities (2)

Difficulty Assessing Family Versus Patient Needs

Difficulty assessing what the patient can do versus what the family feels is needed (1)

Visiting Restrictions at Some Facilities

Residents are only allowed to have a visitor for one night. (They are charged extra rent for having visitors stay a longer period of time) (1)

Restructuring of Housing Facilities

McConnell was changed from supportive to assisted or extended care living (3)

Terraceview used to have meals made at their own kitchen (1)

Terraceview was changed from intermediate care to long-term care (1)

SECTION C: Health Care

Table B13 How well do you think the health system responds to seniors' needs?

Limited Access to Health Care Services (33)

Long waiting lists for physiotherapy (2)

Long waiting period for eye specialist (5 months) (2)

Long waiting period for orthopedic surgery (12

months - 17 months) (2)

Long waiting period for knee / hip replacements (1-2 years) (2)

Long waiting periods for opthamalogist (2-5 months) (2)

Quick access for breast cancer surgery (within days - 2 weeks of diagnosis) (2)

Abuse of drug and alcohol rehabilitation services (1)

Difficulty accessing health care services (1)

Difficulty obtaining disability (especially with non-visible disabilities) (1)

Drug & alcohol services only help extreme cases (1)

Longer diagnosis periods as doctors must send specimens to Prince George for testing (1)

Long waiting period for back (14 months) (1)

Long waiting period for CT scan (2 months) (1)

Long waiting period for diagnosis (general) (1)

Long waiting period for echocardiogram (2.5 months) (1)

Long waiting period for MRI (6-8 months) (1)

Long waiting period for angiogram (5 months) (1)

Long waiting period for angioplasty (6 months) (1)

Long waiting period for hysterectomy (8 months) (1)

Long waiting period for neurologist (6 months to 1 year) (1)

Long waiting periods for out-of-town treatments (1)

Long waiting period for prostate surgery (1)

Long waiting periods for shoulder repairs (6 months -2 years) (1)

Long waiting periods for test results (2-3 months) (1)

Long waiting period for ultrasound (2-3 months) (1)

Long waiting periods for visiting specialists – general (1)

Okanagan facilities have signs stating facilities are for Okanagan residents only (1)

Financial Barriers (19)

Hospital lacks funds to serve catchment area (3) Low income seniors must pay for dental check ups and dentures (2)

Aboriginal band will only pay for dental visits once every 2 years (1)

Aboriginal medicines are not covered by Indian Affairs (1)

Financial Barriers Cont'd

Aboriginal residents only have funding to visit optometrist once every two years through Indian Affairs (1)

Costs for the optometrist (1)

Deposits are required to obtain crutches (1)

Eye glasses are expensive (1)

Home support has a limited budget (1)

Limited financial support for medical travel (1)

Patients must pay for medivac transportation (1)

Private health care services not covered by medicare

Seniors cannot afford medical bracelets (1)

Seniors must now pay for all visits to a chiropractor

(used to receive 12 treatments) (1)

Seniors must pay for physiotherapy (1)

Some drugs are no longer covered by Pharmacare (1)

Lack of Health Care Services (19)

No orthopedic surgeon (2)

Shortage of acute care beds (2)

Dental specialists only come for three days every eight months (1)

eight months (1)

Heart attack patients are stabilized and sent to Vancouver (1)

Lack of entertainment for seniors living at the

hospital (1)

Lack of public house cleaning services (1)

Lack of private house cleaning services (1)

Lack of 24 hour nursing care (1)

Lack of support services for shopping (1)

No echocardiogram (1)

No hip repairs (1)

No radiation (1)

No support services for drug and alcohol addictions

(seniors addicted to medications) (1)

Orthopedic specialists do not come often enough (1)

Patients requiring dialysis must go to Prince George (1)

Shortage of long-term care beds (impact acute care at the hospital) (1)

Visiting neurologist does not come often enough (1)

Closure of Programs and Services (10)

Cutbacks with cleaning staff (1)

Government cutbacks – general (1)

Home support eliminated shopping services (1)

Home support eliminated cleaning services (1)

Hours for home support have been reduced (1)

Closure of Programs and Services (Cont'd)

Loss of specialists (went from 22 to 16) (1)

Lost echocardiogram specialist (1)

Provincial funding for seniors' advocate at the Happy Gang eliminated (1)

Provincial government eliminated waiting list for long-term care, but seniors waiting for long-term care are still there (1)

Reduction in hospital beds (1)

Limited Human Resources (10)

Difficulty retaining health care professionals (2)

Heavy workload for nurses (2)

Lack of nursing staff (2)

Lack of equipment technicians (1)

Lack of incentives to attract doctors (Other communities give doctors more power to run their own operations) (1)

Lack of visiting specialists (1)

Shortage of staff (1)

Quality of Health Care Services (7)

Difficulty getting diagnosis for glaucoma (1)

Difficulty identifying nursing staff (they no longer wear caps) (1)

Doctors reluctant to operate on seniors (1)

Heavy reliance on pills for treatment (1)

Hospital workers place meals too far away from the patients (1)

Lack of cleanliness at the hospital (1)

Seniors are discharged too soon (1)

Infrastructure Challenges (6)

Shortage of beds (specialists / physicians will not come if patients can't get a bed at the hospital) (3) Aging hospital (1)

Lack of maintenance at the hospital (1)

Lack of operating room space (1)

Operational Challenges (5)

Short notice given for appointments with specialists out-of-town (2)

Too much administration (health care system is top heavy) (2)

Operational Challenges (Cont'd)

Poor coordination between health care providers in Terrace and Vancouver to organize medical trips for multiple needs (1)

Distance to Travel for Medical Services (3)

Distance to larger medical centres (Prince George, Kamloops, Kelowna) (2)

Doctors in Vancouver do not understand the distance Terrace seniors must travel (1)

Lack of Awareness about Health Program (2)

Seniors don't know where to access programs (1) Lack of awareness about NHA brochures (1)

Lack of Informal Support Networks (2)

Better family support needed to help seniors cope with transition (1)

Limited ability of families to care for seniors (1)

Medical Supplies and Equipment are Outdated (2)

Wheelchairs do not have brakes (1)

Bathing equipment is old and bulky (1)

Political Barriers (2)

Challenge defining service catchment area for health care services (aboriginal residents boycott census, so defining need or use of health care services is difficult) (1)

Fighting between communities for health care services (1)

Psychological Barriers (2)

Some seniors refuse care (1)

Terraceview is viewed as a place to die (1)

Assessment Criteria for Long-Term Care Housing is High (1)

Many seniors are refused (patients are older and don't stay in beds as long) (1)

Lack of Awareness about Assessment Criteria (1)

Uncertain how people are assessed for different housing facilities (1)

Table B14 Most Useful Health Care Services

Ophthalmology (3)

Medical centre - convenient location (3)

Medical centre is a one-stop shop for doctors, labs,

and pharmacy (3) Specialists (3)

Labs do house calls (2) Ambulance service (1) Chemotherapy (1)

CT scan (1)

Dentist visits Terraceview (1)

Dialysis (1)

Doctors are upfront (1)

Handidart (1)

Home support (1) Hospital Auxiliary (1)

Medical centre - good range of services (1)

Medical centre - no long waits (1) Nurses at Terraceview (1)

Oncologist nurse (1) Ophthalmologist visits seniors (1)

Podiatrist does home visits to provide foot care (1)

Respite care (1)

Some chemotherapy is available locally (1)

Sunshine centre - adult daycare (1)

Thrift shop (1)

Source: Terrace and Area Seniors Needs Study

Table B15 Most Critical Health Care Needs

Hip and knee replacements (2)

More acute care beds (2)

More physiotherapists (2)

MRI (2)

Orthopedic surgeon (2)

Reclassify Mills Memorial Hospital as a regional

hospital (2)

Angioplasty surgery (1) Another eye specialist (1) Build a new hospital (1)

Develop a mobile medical unit (1)

Dialysis (1)

Doctors who specialize in illnesses that impact

seniors (1)

Doctor visits to Terraceview (1) Expand Handidart service (1)

Geriatric support (1)

Heart attack treatment in Terrace (1)

Install more sinks at the hospital (1)

Lost internist (1)

Lost ophthalmologist (1)

More federal support to compensate for aboriginal use of health care services (i.e. contribute to new CT

scan) (1)

More respite care beds (1)

Need a detox unit for adults, not just youth (1)

Need a permanent psychiatrist (1)

New CT scan (1) No dermatologist (1)

No Narcotics Anonymous (1)

Pathologist (1)

Physiotherapist visits to Terraceview (1)

Provide workshops for family members to take care of seniors (especially for mental illnesses) (1)

Seniors' advocate (1)

SECTION D:

Social and Support Services

Table B16 Key Social Support Programs and Services

Home care / home support (8)

Cancer support group (1)

Meals on Wheels (8) Cedar River Rehabilitation Centre (1)

Volunteer Bureau (6) Community health representatives on the reserves (1)

Hospice Society (5) Consignment store (1)
Churches (3) Diabetes support group (1)

Happy Gang (3)

Elks (1)

Salvation Army (3) Heart and Stroke support group (1)

Sunshine Club / adult day care (3) Interconnect Group (1)

Alzheimer's support group (2) Kinsmen (1)

Food banks (2)

Food box (2)

Kitsumkalum Band Council (1)

Knights of Columbus (1)

Handidart (2)

Lawn maintenance (1)

Kermode Friendship Centre (2)

Mental Health (1)

Legion (2)

Northwest Drug Addictions (1)

Palliative care (2) Northwest Training (for residents over 50 pushed out

Post office carriers' seniors alert program (2) of the workforce) (1)
Respite care (2) Public health nursing (1)
Soup kitchen (2) Rotary Club (1)

Thrift shop (2) Schizophrenic support group (1)
Yard work (2) Seventh Day Adventist (1)

Adult literacy program (1)

Seventi Day Adventist (1)

Terraceview Family Council (1)

Alert line (1) Terraceview staff (1)
Cadets (1) Veterans Affairs (1)

Table B17 **Problems Associated with Social and Support Services**

Lack of Services (11)

Lack of home support services (3)

Lack of drug and alcohol services (1)

Lack of retraining programs for older residents who still want to work (1)

Lack of services for seniors with a second language (1)

Lack of support to educate families (after patients are discharged, families are not shown what to do) (1) No outreach programs for home care in Kitwanga (1) No services for residents with brain injuries (1) No support group for seniors addicted to prescribed drugs (1)

Terraceview has no round the clock care (1)

Limited Human Resources (11)

Some home support workers lack expertise (2)

Volunteers lack expertise (oversee programs) (2)

Difficulty finding long-term volunteers (1)

Difficulty recruiting volunteers (1)

Heavy workload for home support workers (1)

Lack of staff for home care nursing (1)

Lack of staff for home support (only two nurses do assessments) (1)

Lack of volunteers (1)

Seasonal volunteers (1)

Financial Barriers for Social and Support Services (10)

High costs for home support services (3)

Budgets cut for alcoholic support services (1)

Complicated assessment process to determine costs for home support services (i.e. based on a point

system, e.g. if you own your own home) (1)

Costs for grief support (only one visit is free) (1)

Costs for palliative care were only covered up to 4

months (now 6 months) (1)

High costs for lawn maintenance (\$15 / hour) (1)

High costs for palliative care (\$28.00 / hour) (1) Lack of financial resources to build a new hall

(Kermode Friendship Centre) (1)

Limited Range of Services (8)

Home support does not do house work (2)

Home support does not help seniors take their pets to the veterinary (1)

Home support is only provided twice per day (1)

Home support workers are no longer allowed to help you out of the bath tub (1)

Limited availability of snacks at Terraceview (1) Limited availability of Meals on Wheels during the

No evening services provided from home support (1)

Communication Problems (7)

Lack of awareness about where to get information about services - general (2)

Difficulty reaching seniors (some seniors isolate themselves) (1)

Lack of awareness about the costs of services (1) Lack of awareness about the range of services provided for seniors (1)

Limited promotion of services (1)

New seniors moving to Terrace do not know where to go for services (1)

Limited Access to Social and Support Services (6)

Complicated process to obtain support services (doctor referrals plus additional channels) (2)

Complicated process to receive respite care services (1)

Limited access to social support services if you are not on social assistance or an aboriginal (1)

Long waiting period for grief counselling (4 months to see a grief counsellor) (1)

There are many criteria / categories to be able to access services (1)

Concerns with Quality of Social and Support Services (4)

Meals on Wheels are frozen at the hospital (2) Good quality of care for home support (set up quickly) (1)

Lack of responsibility amongst service providers (Mills Memorial took sick elders to local non-profit organizations) (1)

Cutbacks and Closure of Services (4)

Home support workers have reduced time allotted for each patient (2)

Correctional facility used to have inmates shovel snow (1)

Seniors used to be able to get fire wood from the correctional facility (1)

Operational Challenges (4)

Difficult to build relationships with seniors when different home support workers visit their homes (1) Inconsistent delivery of services (after discharge, home care nurses do not always check on patients) (1)

Poor management of donations (government could not account for donations provided by the Legion to support Meals on Wheels, so support was discontinued) (1)

Support groups do not operate consistently (1)

Regulatory Barriers (3)

Government restrictions prevent low-income seniors from supplementing their income (1)

If residents gather berries or hunt for salmon outside of Terrace, they are cut off from employment benefits (1)

Older residents on income assistance must check in once per day (1)

Discrimination (2)

Copar employment agency does not allow residents to wear cultural vests (1)

RCMP discriminate against low-income intoxicated individuals (1)

Infrastructure Problems for Social and Support Services (2)

Difficult to use space at schools for seniors programs (1)

Lack of space to provide programs for seniors (1)

Physical Barriers to Access Social and Support Services (2)

No wheelchair accessibility to the Kermode Friendship Centre (lift will be installed shortly) (1) Stairs to access the food bank (1)

Source: Terrace and Area Seniors Needs Study

Table B18 Recommendations for Social and Support Service Programs

House cleaning services (staff could also assess if seniors are deteriorating) (2)

Seniors advocate needed (could also help seniors to understand their rights) (2)

Visiting programs for elders (2)

Community health nurse to check in on seniors weekly (1)

Extend home care services (1)

Meals on Wheels needs more pamphlets (1)

Meals on Wheels should be provided 5 days per week instead of 3 days (1)

More home repair programs (especially support with obtaining materials) (1)

Need a government for seniors (1)

Need a larger palliative care unit (1)

Shopping support programs (1)

Support groups for families coping with illnesses (1)

Support to develop informal support networks (1)

Volunteer Bureau could provide skilled volunteers for seniors that are ill (1)

Workshops to explain life insurance options to seniors (1)

Workshops to show families how to care for seniors (especially dementia) (1)

Table B19 Key Social Clubs / Community Groups

Happy Gang (7)	Chess Club (1)
Kinsmen / Kinettes (4)	Heritage Group (1)
Legion (4)	Horseshoe Club (1)
Seniors Games - Zone 10 (4)	Kermode Friendship Centre (1)
Churches (3)	Kitsumkalum Treaty Office (1)
Elks (2)	Royal Purple (1)
Lions (2)	Square Dancing Club (1)
Rotary (2)	Walking Club (mall) (1)

Source: Terrace and Area Seniors Needs Study

Table B20 Key Social Events

Kinsmen's Sweetheart Dinner and Dance (5)	George Little House teas and book signings (1)
Pentacostal tea (5)	Happy Gang - bridge night (1)
Happy Gang - breakfast (4)	Happy Gang - pot luck dinners (1)
Happy Gang - lunch (3)	Happy Gang - trips and tours (1)
Church teas - general (2)	Legion - bridge night (1)
Legion dinners for veterans (2)	Lieut. Governor visit (1)
Legion steak night (2)	Music festival (1)
Visiting program - Volunteer Bureau (2)	REM Theatre (1)
Coffee - A & W (1)	River Boat Days (River Boat king and queen are
Coffee - Tim Horton's (1)	seniors) (1)
Elders gathering - Kermode (1)	Terraceview day trips for seniors (1)
Elders luncheon - Kitsumkalum (1)	Theatre (1)
Fall Fair (1)	

Table B21 Key Sports and Recreation Activities

Fishing (1) Floor curling (1) Games night (1) George Little House is wheelchair accessible (1) George Little Park (1)
Games night (1) George Little House is wheelchair accessible (1)
George Little House is wheelchair accessible (1)
<u> </u>
George Little Park (1)
Ocoige Lime I aik (1)
Golfing (1)
Mall walking programs - Heart and Stroke (1)
Millenium walkway (1)
Paces gym (1)
Puzzles (1)
Scrabble (1)
Senior discounts at the Recreation Centre (1)
Seniors Games (1)
Seniors hockey (1)
Shuffle board (1)
Skiing (1)
Stretching (1)
Tennis courts (1)
*** • • •
Weight room (1)
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Source: Terrace and Area Seniors Needs Study

Table B22 Key Arts and Educational Programs

Quilting (3)	Entertainment at Terraceview (1)
Art groups (2)	Kneedle work (1)
College courses / programs for seniors (2)	Library common area (1)
Art gallery (1)	Library computer courses (1)
Ballroom dancing entertainment at Terraceview (1)	Library - general (1)
Church services (1)	Music programs (1)
Crafts (1)	Painting - water colours (1)
Cultural dancers (1)	School choirs performing at Terraceview (1)

Table B23 Recommendations for Recreation Programs

New larger facility for the Happy Gang that is

wheelchair accessible (3)

Extend the Millenium trail (2)

Line dancing (2)

Ballroom dancing (1)

Build a community centre in a central downtown

location (1)

Build a new recreational facility for residents 50 and

over (1)

Carpet bowling (1)

Dancing - general (1)

Develop an exercise program for seniors as part of a

healthy living initiative (1)

Develop a cultural room at a seniors' recreational

facility (1)

Develop a one stop shop for seniors' recreation (1)

Develop a sewing room at a seniors' recreational

facility (1)

Develop more visiting programs (1)

Develop programs at the recreation centre for youth

and seniors to mix (1)

Exercise programs specifically for seniors (1)

Extend trails at Ferry Island (1)

Install benches along walking routes for seniors (1)

Install benches in the mall (1)

Low intensity aquafit classes (1)

More access to space for seniors to create their own

activities (1)

More coffee shops (1)

More hot tubs (1)

More tea socials (1)

Movie nights at a recreational facility for residents 50

and over (1)

Need an updated pool (1)

New larger facility for the Happy Gang with a large

common room that seniors could sign out to host

their family or have a party (1)

New seats for the theatre (1)

Promote recreational and social programs on Channel

10(1)

Provide transportation to social events (1)

Shuffle board (indoors for year round activities) (1)

Stocked lake for fishing (1)

Trips to the hotsprings once per week (1)

Walk a seniors program (could get grandchildren

involved) (1)

Warmer pool for seniors to do exercise and

physiotherapy (1) Workshops (1)

Physical Barriers for Recreation and Leisure Programs (5)

Arena is not handicap accessible (1)

Art gallery has no elevator (1)

Lack of space for larger seniors' recreation programs at the Happy Gang (1)

No elevator at the Happy Gang (activities are downstairs) (1)

Stairs at the Happy Gang (1)

Psychological Barriers for Recreation and Leisure Programs (5)

Lack of interest (4)

Poor attendance for social and recreational activities (1)

Human Resource Problems for Recreation and Leisure Programs (4)

Criminal record prevents residents from volunteering with elders (1)

Lack of family involvement (1)

Lack of motivate people to develop and maintain programs (1)

Volunteers require a criminal check (1)

Operational and Maintenance Barriers with Recreational Programs and Facilities (4)

Sauna is uncomfortable (water drips and is too hot) (1)

Swimming pool is dark and dingy (1) Water in the swimming pool is too cold (1)

Whirlpool is too hot (1)

Limited Availability of Services (2)

No seniors' gym (1)

Walking program at the mall no longer operates (1)

Financial Barriers for Recreation and Leisure Programs (1)

Many activities require membership fees, which are expensive (1)

Health Barriers to Participating in Recreation and Leisure Programs (1)

Stroke victims have difficulty participating (can only watch) (1)

Limited Accessibility of Services (1)

Must be a Happy Gang member to participate in activities (1)

Safety Barriers for Recreation and Leisure Programs

Too many drug addicts at the parks (1)

^{**}Tuck has organized social and recreational opportunities in the past, but these are poorly attended.

Table B25 Key Library Services

Computer / Internet access (2) Computer tutoring (2) Assistance to seniors looking for information (1) Delivery of books to Terraceview residents (1) Friendly service (1) Video and DVD rentals (1) Wheelchair accessible for residents (1)

Source: Terrace and Area Seniors Needs Study

Table B26 Physical Barriers to Accessing Information and Library Resources

No elevator to get downstairs to the art gallery (3) Aisles are too narrow for wheelchairs to turn around (1)

Internet stalls are too narrow for wheelchairs (1) Library is not wheelchair accessible (1)

Source: Terrace and Area Seniors Needs Study

Table B27 Recommendations for Information and Library Resources

Delivery of talking books (1) Install an elevator to get downstairs (1) Move the art room upstairs (1) Open up a seniors' school for upgrading (1) Travelling library (1)

^{**}Hazelton is currently trying to open a seniors school for upgrading.

Table B28 Strengths of Retail Services

Delivery services (grocery and drug stores) (5) Hair stylists visit Terraceview (2) Seniors' discount days (Safeway, Shoppers, Rona, and Zellers) (2) Easy exchange policies (Wal-Mart and Canadian Tire) (1) Familiarity with store owners (1)

Rona provides assistance with home installations (i.e. wheelchair access) (1)
Some stores allow seniors to set up accounts (i.e.
Terrace Furniture) (1)
Wal-Mart staff help seniors reach for products (1)
Wheelchairs and motor carts for senior shoppers to

Restaurants offer a seniors' menu (1)

Source: Terrace and Area Seniors Needs Study

Lots of pharmacies (1)

Table B29 Problems Associated with the Retail Sector

Limited Range of Retail Services (7)

Store closure affects choice for clothing services (2) Clothing stores are geared towards youth, slim figures, or large figures (1)
Fresh produce and meat are not available in Kitsumkalum (1)
Lack of clothing options for petite sizes (1)
Limited range of retail stores - general (1)
Limited range of retail stores - Kitsumkalum (1)

Store Policies are Problematic for Seniors (2)

Complex exchange policies (must fill out forms to exchange goods - Zellers) (1)
Limited or no access to washrooms (1)

Communication and Technology Barriers (4)

Poor visibility of prices (especially in small fonts) (1) Seniors have challenges coping with computer viruses (1) Seniors with limited mobility need to become computer literate and connected (1)

Closure of Retail Services (1)

Technology is changing constantly (1)

Saan's closed (1)

use (1)

Financial Barriers (1)

High cost for retail goods in Kitsumkalum (1)

Table B30 Cost of Living

Cost of Living - Expensive Aspects

Gas prices (6)
Heating costs (4)
Municipal taxes (3)
Groceries (2)
Dental work (1)
Glasses (1)
Newspapers (1)
Optometrist (1)

Prescription drugs* (1)

Renovations (1)

Cost of Living - Affordable Aspects

Housing (2)

Shopping - big box stores (2)

Building supplies (1)

Electrical heating (1)

Prescriptions (1)

Recreational opportunities - aquasize and weight

room (1)

Source: Terrace and Area Seniors Needs Study

Table B31 Recommendations for the Retail Sector

Eliminate GST / PST for seniors (1)

Get seniors connected with web cameras to chat with family and friends (1)

Install benches in the mall and in stores (1)

More coffee shops (1)

Need a petite clothing store (1)

Need computer training support to go to seniors' homes (1)

Provide assistance for seniors in stores (1)

Purdy's Chocolates (1)

^{**}Medication for diabetics and Alzheimer's is not covered by Pharmacare.

SECTION E: Transportation

Table B32 Key Local Transportation Services

Handidart (3) Taxi (3)

Volunteer drivers - Volunteer Bureau (3)

Local transit service (2)

Ambulance (sometimes the only option to get to physiotherapy / doctor's appointments) (1)
Bus service to Twin Rivers is good (1)

Firemen will pick up some seniors for events (1)

Happy Gang members provide rides (1)

Informal car pool networks (1)

Personal vehicle (1)

Seniors can take a taxi for \$1 if Handidart is not

available (1)

Some transit buses are handicap accessible (1) Terraceview has a bus donated by the Legion and

Skeena Valley Club (1)

Limited Local Transportation Services (15)

Handidart does not operate in the evenings or weekends (5)

Frequency of bus service is low, especially during the winter (2)

Handidart does not provide transportation to social and recreational events - medical appointments are a priority (2)

No evening buses (2)

No bus service to Thornhill (1)

No transportation services on Sundays (1)

No transportation system / bus specifically for seniors (1)

No weekend bus service for south side (1)

Lack of Convenience of Local Transportation Services (10)

Handidart must be booked ahead of time (not always possible with sudden doctor's appointments) (3)

Handidart is not available sometimes (2)

Poor scheduling of local transit bus service (staff would be late for work or events) (2)

Bus stops are placed at inconvenient places (1)

Handidart can drop seniors off, but is not able to pick them up sometimes (1)

Poor scheduling of local transit for bench areas (1)

Lack of Handicap / Seniors Parking (7)

Handicap parking spaces are abused / not enforced (2)

Lack of parking around the Happy Gang (2)

Lack of parking around Safeway (1)

Lack of parking around Shoppers (1)

Lack of parking around the farmer's market (1)

Communication Problems (3)

Lack of awareness about transportation services (1) Seniors are not aware of Volunteer Bureau program with volunteer drivers (1)

Uncertain where seniors should go to get the information (1)

Financial Barriers (2)

High costs for ambulance service in Terrace (2)

Limited Access to Local Transportation Services (2)

Handidart is not open for use by all seniors - only seniors with limited mobility (1)

Taxis will not take seniors in wheelchairs (1)

Operational Challenges (2)

Volunteer Bureau's volunteer drivers must carry extra insurance (1)

Volunteer Bureau's volunteer drivers must have a special license (1)

Physical Barriers (2)

Lack of wheelchair accessibility on local transit buses (1)

Terraceview bus is not handicap accessible (1)

Psychological Barriers (1)

Handidart staff make seniors feel guilty for using taxi service with Handidart tickets (1)

Road Maintenance Problems (1)

Pot holes - Kitsumkalum (1)

Table B34 Recommendations for Local Transportation Services

Expand Handidart service weekends & evenings (3)

Improve frequency of bus service (2)

Obtain smaller buses to improve efficiency (2)

Taxi vouchers for seniors (these exist, but seniors

must have a reason to use them) (2)

Build a bike lane for seniors on scooters to improve safety (1)

Build a sidewall along the sides of roads in Kitsumkalum (1)

Develop a mini bus system for Kitsumkalum area (1)

Enforce dog control to improve safety for seniors walking (1)

Ensure bus stops are close to senior facilities (1)

Expand bus service for fringe areas (1)

Expand bus service to Kitsumkalum area (1)

Need another bridge to access the hospital (only 1

way to cross the tracks) (1)

Need more motorized wheelchairs for seniors (1)

Obtain another Handidart (1)

Obtain funds from resource development to reinvest

in transportation infrastructure (1)

Reduce bus pass fares for seniors (1)

Seniors discount for taxis (1)

Terraceview should have a smaller bus with a lift (1)

Volunteers to take seniors shopping (1)

Source: Terrace and Area Seniors Needs Study

Table B35 Key Transportation Services and Programs - Out-of-Town

New Transportation Services and Programs - Out-of-Town (7)

New bus transportation to Kitimat, Kitimaat Village, Hotsprings, and Thornhill to start soon (5) New bus transportation from Terrace to Prince George (medical travel) to start soon (1) Northern Health Authority is developing a

Strengths of Transportation Services - Out-of- Town (7)

BC Ferries provides good discounts on fares for seniors / travel for medical (3)

Airfares provide a 10% discount for medical travel (1)

Far West bus service to Prince Rupert (1)

Medical flights to Vancouver are covered by the band (1)

Seniors do not have to transfer their baggage with Air Canada (1)

Source: Terrace and Area Seniors Needs Study

transportation subsidy program (1)

Financial Barriers (17)

High airfare costs (compounded when multiple visits required) (6)

High costs - accommodations (2)

No discount for companion fare costs for medical travel (2)

Air ambulance is cheaper than commercial airfare costs (1)

Cheaper to go to Vancouver than Prince George (Prince George is the service centre) (1)

High bus fares (1)

High train fares (1)

Lack of support for aboriginal residents commuting to Terrace (sometimes the band will pay for a hotel) (1)

No senior discounts on airlines (1)

Overnight stays now required for out-of-town travel by train (1)

Cutbacks to Transportation Programs (6)

Greyhound is reducing their schedules to and from Terrace (3)

Air Canada cut their bereavement program (1) Reimbursements for medical travel were cut for government employees (1)

Travel Assistance Program is restricted now (1)

Lack of Transportation Services (4)

Limited direct air service to Prince George (easier to go to Vancouver even though Prince George is the service centre) (2)

No airporter (1)

No bus service to Kitimat (1)

Operational Challenges (4)

Poor coordination amongst transportation options (Difficult to catch bus after taking the ferry to Port Hardy - overnight stay required) (2)

Seniors must catch transportation services in the middle of the night (1)

Weather limited transportation - ability to travel outof-town (i.e. Kitimat / Prince Rupert) (1)

Communication Problems (1)

Lack of awareness about required transportation forms for air travel for medical reasons - hospital did not inform patient about required Air Canada forms (1)

Difficulty to Determine Costs for Medical Travel

Patients don't know when they are going to be discharged, so it is difficult to determine travel needs and costs (1)

Psychological Barriers (1)

Intimidating design of Vancouver International Airport (1)

Regulatory Barriers (1)

Northern Health Authority will not allow residents to receive treatment in Vancouver even though it is cheaper and easier than travelling to Prince George (1)

Table B37 Recommendations - Transportation Services Out-of-Town

Airfare should be covered for medical travel (3)

Develop a shuttle bus to take seniors to activities / day trips (2)

Develop a volunteer program at Vancouver International Airport to help seniors (2)

Discounts / travel assistance for companion fares for medical travel (2)

Provide financial assistance for medical travel (2)

Affordable accommodation options for out-of-town travel for medical needs (1)

Committee to collect names for transportation to other places (1)

Medivac flights could bring people back (1)

Provide meals and accommodations for medical travel (1)

Provide senior discount rates for out-of-town transportation (1)

Reduced rates for medical travel (1)

Social workers could coordinate forms required for medical travel (1)

SECTION F: Informal and Formal Care Networks

Table B38 Informal Support Networks if Family and Friends are Unable to Provide Assistance

Church groups - general (9)	Legion members visit other members at the hospital
Legion - general (4)	(1)
Elks help with travel costs (3)	Lions (1)
Service clubs - general (3)	Masons (1)
Kinsmen (2)	Pentacostal tea (1)
Neighbours (2)	Priest (1)
Church services provided at Terraceview (1)	Rotary (1)
Church visiting programs (1)	Royal Purple (1)
Independent Order of Foresters, Branch 1318 (1)	United Church (1)
Informal Volunteer Transportation Networks (1)	Veterans have informal network to call (1)
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Source: Terrace and Area Seniors Needs Study

Table B39 Formal Support Networks if Family and Friends are Unable to Provide Assistance

Home care / home support (4)	Community Services (1)
Meals on Wheels (4)	Crisis Centre (1)
Physiotherapy (4)	Emergency shelter (1)
Sunshine Club / Adult Daycare (4)	Food banks (1)
Occupational therapy (3)	Hospital (1)
Salvation Army (3)	Kermode Friendship Centre (1)
Cedar Rivers Rehabilitation Centre (2)	Kitsumkalum Band Office (1)
Doctors (2)	Ksan House (1)
Happy Gang (2)	Medical clinic (1)
Hospice Society (2)	Palliative care (1)
Public Health (2)	Post office program - carriers look out for seniors (1)
Red Cross Loan Cupboard (2)	Retail sector (1)
Stepping Stones Clubhouse (2)	Sexual Assault Line (1)
Terrace Anti Poverty Program (2)	Shopper's Drug Mart delivery service (1)
Volunteer Bureau (2)	Terraceview bus service (1)
Cancer support group (1)	Women's Resource Centre (1)
Chiropractors (1)	Diabetic support group (1)

Human Resource Barriers to Providing Support Networks (4)

Difficulty recruiting new and younger members (2) Lack of members (1)

Lack of time to volunteer (Both parents work) (1)

Communication Problems with Support Networks (1)

Programs are not well advertised (1)

Racial Barriers to Accessing Support Networks (4)

Bingo hall is the only place where everyone is equal (1)

Few aboriginal residents attend the Happy Gang (1) Non-aboriginal residents do not go to the Kermode Friendship Centre (1)

Racial discrimination for aboriginal residents accessing services (this has improved) (1)

Psychological Barriers to Providing Support (1)

Stubborness by seniors as they lose their independence (1)

Source: Terrace and Area Seniors Needs Study **Volunteer Bureau used to send out a newsletter.

SECTION G:

Physical Environment

Table B41 Physical Barriers Prohibiting Seniors' Mobility around Terrace

Poor maintenance of sidewalks - snow and ice (difficult for people with walkers, etc.) (8)

Lack of sidewalks (5) Icy sidewalks (4)

Limited wheelchair accessibility - general (4)

Potholes (4)

Heavy doors - Tim Horton's (3)

Driveways are filled in by snow ploughs (2)

Heavy doors - general (2)

Lack of benches - around the city (inhibits seniors'

ability to walk further) (2) Lack of ramps - general (2) Poor road conditions (2)

Automatic doors at post office do not work

sometimes (1)

Bus shelters are smoky (1)

College felt that wheelchairs mark up the floor (1)

Distance to services (1) Gravel on sidewalks (1)

Handicap parking spots are too small (1)

Heavy doors - Post Office (1) High curbs on some sidewalks (1)

Hill between McConnell / Terraceview and

downtown (1)

Lack of assistance to hold doors open (1)

Lack of benches - in the mall (1)

Lack of bus shelters (1)

Lack of handicap / seniors parking (Zellers) (1) Lack of public washrooms (seniors can't get to

washrooms fast enough) (1) Lack of ramps (dental offices) (1)

Limited wheelchair accessibility - arena (1)

Limited wheelchair accessibility (Lazelle and Kalum)

(1)

No bicycle lanes (no room for scooters) (1)

No wheelchair access - churches (1)

No wheelchair access - Kermode Friendship Centre

(1)

Poor access to the mall from the south side of town

(1)

Sidewalks are covered during snow removal

operations for roads (1)

Snow banks in the middle of the street (drivers can't

see seniors crossing) (1) Stairs - Best Western (1)

Stairs - Kermode Friendship Centre (1)

Trees are pushing up the sidewalks by the Royal

Bank (1)

Uneven sidewalks (1)

Weather (1)

Table B42 Improvements and Positive Urban Design Features

Lots of handicap / seniors parking (3)

New design regulations developed - building renovations must incorporate handicap access and handicap

washrooms (2)

Alliance Church has an elevator (1)

Automatic door installed at Save-on-Foods (1)

Automatic door installed at Zellers (1)

Curb cuts for sidewalks (1)

Grocery stores deliver (1)

Installation of curb cut details (1)

Mall has ramps to get onto sidewalk (1)

More ramps have been installed - general (1)

New design regulations developed - stipulate number of handicap parking spaces (1)

Pharmacies deliver (1)

Push button door installed at the post office (1)

Ramp is available to get into one corner of the arena (1)

Roads are ploughed (1)

Snow removal at Safeway is good (1)

Snow removal at the mall is good (1)

Source: Terrace and Area Seniors Needs Study

Table B43 Recommendations to Improve Physical Mobility

Install automatic doors (3)

Install more benches (2)

Underground passage to link Keith Avenue to the mall (2)

Develop a neighbourhood watch program to watch out for seniors (1)

Enforce handicap / seniors parking more (1)

Enforce sidewalk maintenance by merchants (1)

Install a sign a lights to post the time left to cross the street (1)

Install more bus shelters (1)

Install more curb cuts (1)

More elevators (especially in public buildings) (1)

Obtain equipment to have a second snow removal operator (1)

Public education program to encourage people to open doors for seniors / people with disabilities (1)

Pursue urban renewal grants (1)

SECTION H:

Quality of Life

Table B44 Positive Aspects of Quality of Life

Small Town Living (13)

Friendliness (5)

Can get out-of-town in 5 minutes (1)

Close proximity to services (1)

Good place to raise a family (1)

People care about their neighbours (1)

Quiet neighbourhoods (1)

Seniors feel lonely in a larger city (1)

Small town (1)

Social atmosphere (1)

Climate / Environmental Assets (9)

Good air quality (2)

Mountains (1)

No floods (1)

No pollution (1)

No sinus problems here (1)

No weather extremes (1)

Rivers (1)

Scenery (1)

Recreation (8)

Fishing (2)

Hiking (2)

Hunting (1)

Range of place to go around Terrace (1)

Recreational facilities (1)

Skiing (1)

Social Networks (8)

Family (2)

Friends (2)

Children and grandchildren (1)

Lots of churches (1)

Lots of meeting places (1)

Post office workers look out for seniors (1)

Urban Design Improvements (4)

Beautification Society efforts (2)

Flower pots (1)

George Little House (1)

Retail Services (3)

Farmer's market (2)

Denny's card for seniors (1)

Social Support Services (3)

Volunteer Bureau snow removal / leaf clean up

services (1)

Happy Gang resources (1)

Happy Gang rents out building (1)

Housing Programs (2)

S.A.F.E.R. provincial government program to help

seniors with rent (1)

Senior housing facilities are well kept (1)

Improved Transportation Services (2)

Hawkair has a medical rate (1)

More competition for airlines (1)

Social Activities (2)

Lots of opportunities to get involved (1)

Terraceview crafts and tea socials (1)

Cost of Living (1)

Groceries are inexpensive (1)

Educational Opportunities (1)

Free courses for seniors at the college (1)

Financial Opportunities (1)

Lots of funding opportunities (1)

Health Care Services (1)

Pharmacare (1)

Time (1)

Having more time to explore what you love (1)

Table B45 Negative Aspects of Quality of Life

Aging (6)

Aging (1)

Difficult to leave your home (1)

Difficult transition between 60 and 65 years with

limited things available (1)

Difficulty maintaining larger agreage (1)

Must hire someone to help (1)

Quality of life changes when you move (1)

Lack of Seniors Housing (5)

Lack of intermediate care (1)

Lack of subsidized seniors' housing (1)

Waiting lists for Terraceview (1)

Must visit loved ones in Kitimat (1)

Long waiting period to get loved one back to Terrace (1)

Low Income for Seniors (4)

Many seniors receive a low pension of \$470.00 per month (3)

Low income seniors cannot afford housing (1)

Quality of Health Care Services (4)

Seniors are over prescribed with medications (1) Seniors are put on and off again of their

medications (1)

Seniors are reluctant to change doctors (1)

System is reactive rather than proactive for seniors' health (1)

Climate (3)

Low periods of sunshine (1)

Rain (1)

Weather (1)

Distance to Larger Centres (3)

Distance to cities (1)

Distance to family in the Lower Mainland (1)

Seniors are expected to visit family elsewhere (1)

Cost of Living (2)

High cost of electricity (1)

High cost of natural gas (1)

Physical Barriers (2)

Poor maintenance of icy / snowy sidewalks (1)

Pot holes around parking lots (1)

Lack of Support Services (1)

No ombudsman for seniors (1)

Limited Transportation Services (1)

Seniors living outside of town must have their own vehicle (1)

Poor Preparation for Aging Population (1)

Decision-makers are reactive in preparing for aging population (1)

Safety Concerns (1)

Gun shots in the neighbourhood (1)

Urban Design Problems (1)

Improvements needed with business frontages (1)