

About the Eight Domains of Livability

Information on these pages was taken from:

World Health Organization. Global Age-friendly Cities: A Guide. © World Health Organization 2007. Printed in France. ISBN 978 92 4 1547 30 7. Pages 9 and 10.

Although we will be looking at the 8 Domains of a livable Community from the eyes of a senior citizen, making improvements for seniors also helps others. For instance if a surface or entrance is useable for a walker or wheelchair, it is also helpful for a stroller. Also if an entrance to a building or retail space is set up for a person using a can, it is also easier for a person holding a child's had to use.

The eight domains of likeability are loosely divided into the following three areas:

- Physical Environment;
- Social Environment;
- Misc.

The physical environment has a strong influence on personal mobility, safety from injury, security from crime, healthy behavior and social participation and includes the following three domains:

- Transportation;
- Housing;
- Outdoor spaces and buildings.

The three topics that the different aspects of the social environment and culture that affect the participation and mental wellbeing are the following:

- Respect and Social Inclusion;
- Social Participation;
- Civic participation and employment.

The following two misc. topics involve both the social environment and health and social services elements:

- Communication and information;
- Community Support and health services.

Although these areas are listed as independent components to explore, in “real life” they overlap and interact.” Respect and social inclusion are reflected in the accessibility of the buildings and spaces and in the range of opportunities that the city offers to older people for social participation, entertainment or employment.”

In addition, “transportation and communication and information particularly interact with the other areas: without transportation or adequate means of obtaining information to allow people to meet and connect, other urban facilities and services that could support active ageing are simply inaccessible.”

The following gives a little more information about the eight domains of livability and includes major reoccurring themes that surfaced during the worldwide survey conducted by the World Health Organization. *Ibid.* pages 12-71.

Outdoor Space and buildings (pages 12-19) have a major impact on mobility, independence and quality of life and affects the ability to “age in place”. The reoccurring themes from the surveys include the following: pleasant and clean environment, Importance of green spaces; somewhere to rest; age-friendly pavements; safe pedestrian crossings; accessibility; a secure environment; walkways and cycle paths; age-friendly buildings; adequate public toilets; older customers.

Transportation (Pages 20-29) allowing one to ability to move about the city determines social and civic participation and access to community and health services. The reoccurring themes from the surveys include the following: Availability; affordability; Reliability and frequency; travel destinations; age-friendly vehicles; specialized services for older people; priority seating and passenger courtesy; transport drivers; safety and comfort; transport stops and stations; taxis; community transport; information; driving conditions; courtesy towards older drivers; parking.

A link has been shown between appropriate housing (pages 30-37) and access to community and social services in influencing the independence and quality of the life of older people. The reoccurring themes from the surveys include the following: affordability, essential services; designs; modifications; maintenance; access to services; community and family connections; housing options; living environment.

Social participation and social support (pages 38-44) are strongly connected to good health and well-being throughout life. In fact, in her opening statement at the May 17, 2017 United States Senate Special Committee on Aging , Chairperson Senator Susan Collins said that social “isolation is associated with a greater incidence of depression, diabetes, and heart disease. In fact the health risks of prolonged isolation are comparable to smoking 15 cigarettes a day.” The reoccurring themes from the surveys include the following: accessible opportunities; affordable activities, range of opportunities, awareness of activities and events, encouraging participation and addressing isolation; integrating generations, cultures and communities.

The findings from the survey for Respect and social inclusion (pages 45-50) are difficult to summarize. The WHO findings overview is stated in full: “Older people report experiencing conflicting types of behaviour and attitudes towards them. On the one hand, many feel they are often respected, recognized and included, while on the other, they experience lack of consideration in the community, in services and in the family. This clash is explained in terms of a changing society and behavioural norms, lack of contact between generations, and widespread ignorance about ageing and older people. It is clear from the consultation that the respect and social inclusion of older people depend on more than societal change: factors such as culture, gender, health status and economic status play a large role. The extent to which older people participate in the social, civic and economic life of the city is also closely linked to their experience of inclusion. “ (Page 45). The reoccurring themes from the surveys include the following: respectful and disrespectful behavior, ageism and ignorance, intergenerational interactions and public education; place within the community; helpfulness of the community; place in the family; economic exclusion.

Civic participation and employment (pages 51-59) in an age-friendly community provides options for older people to continue to contribute to their community, through paid employment or voluntary work if they so choose, and to be engaged in the political process. The reoccurring themes from the surveys include the following: volunteering options for older people; better employment

options and more opportunities; flexibility to accommodate older workers and volunteers; encouraging civic participation; training; entrepreneurial opportunities; valuing older peoples' contributions.

Regarding communication and information (pages 60-65), it was generally agreed that staying connected with events and people and getting timely, practical information to manage life and personal needs is vital for active aging. Regardless of the variety of communication choices and the volume of information available, the central concern in the focus groups was to have relevant information that is readily accessible to older people with varying capacities and resources. The reoccurring themes from the surveys include the following: widespread distribution; the right information at the right time; will somebody speak to me?; age-friendly formats and design; information technology; boon and bane; a personal and collective responsibility.

Community support and health services (pages 66 -71) are vital to maintaining health and independence in the community. In their surveys the WHO focused on those aspects of community support and health services that are within the scope of an age-friendly city's influence. The reoccurring themes from the surveys include the following: accessible care; a wider range of health care; ageing well services; home care; residential facilities for people unable to live at home; a network of community services; volunteers wanted; other issues.