

# Housing Concerns of Vulnerable Older Canadians\*

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## RÉSUMÉ

La préparation pour les besoins futurs de logement des personnes âgées est impérative dans les pays avec des populations vieillissantes, mais peu est connu sur ces questions parmi les adultes plus âgés vulnérables. Cette étude a utilisé une approche qualitative pour identifier les préoccupations majeures au sujet de logement dans ce groupe. Un total de 84 personnes âgées vulnérables, y compris des personnes âgées indigènes souffrant de divers handicaps et des minorités ethniques ont participé en 10 groupes de discussion. Les normes de besoins de logement de la Société canadienne d'hypothèques et de logement (SCHL) ont offert un cadre d'analyse de données de base, avec l'identification des thèmes de logement clés supplémentaires entre et au sein de groupes des personnes âgées vulnérables. Les résultats fournissent un aperçu sur les caractéristiques de logement préféré, indépendamment de la forme de logement. En outre, les résultats fournissent un aperçu de comment prendre en charge les adultes âgés vulnérables qui choisissent de rester dans leurs maisons et leurs communautés, et comment garantir que logement approprié est développé qui répond aux besoins de cette population diversifiée.

## ABSTRACT

Preparing for the future housing needs of older adults is imperative in countries with an aging population, but little is known about these issues among vulnerable older adults. This study used a qualitative approach to identify key housing concerns in this group. A total of 84 vulnerable older adults including Aboriginal elders, those with various disabilities, and ethnic minorities participated in 10 focus groups. The Canadian Mortgage and Housing Corporation's (CMHC's) standards of core housing need provided a framework for data analysis, along with the identification of additional key housing themes across and within groups of vulnerable older adults. The results provide insight into preferred housing characteristics, regardless of housing form. Additionally, the results provide insight into how to support vulnerable older adults who choose to remain in their homes and communities and how to help ensure that appropriate housing is developed that meets the needs of this diverse population.

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\* The Social Sciences and Humanities Research Council of Canada provided funding for this study. We thank the members of the Atlantic Seniors Housing Research Alliance focus group working group, moderators, graduate assistants, and focus group participants. Finally, we thank Lorraine Buck for providing editorial assistance.

Manuscript received: / manuscrit reçu : 30/09/09

Manuscript accepted: / manuscrit accepté : 03/05/10

**Mots clés :** logement, Canada Atlantique, indigène (autochtone), minorité ethnique, handicaps

**Keywords:** housing, Atlantic Canada, Aboriginal, ethnic minority, disabilities

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Although shelter is a basic necessity of life, access to basic housing for all Canadians is not guaranteed, for during the early 1990s the federal and provincial governments either reduced or stopped providing social housing assistance (Canadian Mortgage and

Housing Corporation [CMHC], 2000). While some publicly funded programs still exist, in the current social and economic climate it is clear that housing in Canada is primarily an individual responsibility. Many citizens have access to sufficient resources to purchase

appropriate housing for themselves and their families, but some older adults, and especially those who are vulnerable, face many challenges.

The purpose of this study is to identify, by means of a qualitative approach, key housing concerns among the population of vulnerable older adults. The first research question that guides this study is: "To what extent are vulnerable older adults concerned about housing affordability, adequacy, and suitability?" For some time, CMHC (2005) has used these three standards to identify those who are in *core housing need*. Affordability, adequacy, and suitability are especially useful in identifying those individuals who need housing-related supports and in comparing housing needs both across specific groups and across time. Housing is identified as affordable if all of the shelter costs combined (i.e., rent, mortgage, utilities, taxes, and maintenance) total less than 30 per cent of the household's before-tax income. *Suitability* refers to crowding and is determined by whether there are enough bedrooms to meet the household's space needs as defined in Canada's National Occupancy Standards. *Adequacy* is a self-reported measure of need for major repairs to the home. A household is in core housing need if their home does not meet at least one of the three standards and they are unable to afford housing that meets all of the standards. According to the definition of core housing need, 16.9 per cent of senior households and 12.9 per cent of non-senior households are in core housing need in Canada (CMHC, 2005). Little is known, however, about the extent of the standards of core housing need among vulnerable older adults.

Although different indicators are used in other countries to determine housing need, such as the needs of particular groups or as a general indicator of poverty (CMHC, 1992), the Canadian definition of core housing need has received surprisingly little critique in published research. This leads to our second research question: "In addition to the current standards of core housing need, what other housing-related concerns do vulnerable older adults have?" We are interested in both identifying additional housing factors of primary concern to vulnerable older adults and in examining the extent to which the standards of core housing need are currently defined.

A precise definition of vulnerability has received much discussion but little consensus. In the gerontological literature, *vulnerable* often refers to those with limited income and material resources as well as those experiencing chronic illnesses (Barak & Cohen, 2003; Buijss, Ross-Kerr, Cousins, & Wilson, 2003; Fortress, Soumerai, McLaughlin, & Ross-Degnan, 2001; Keiser, Farris, Stoupa, & Agrawal, 2009; Lexchin & Grootendorst, 2004; Nour, Laforest, Gignac, & Gauvin

2005; O'Brien, 2005). In addition, vulnerable older adults can include those who are socially isolated, such as seniors who are ethnic minorities or those who live in rural areas (Allan & Cloutier-Fisher, 2006; Gellad, Huskamp, Phillips, & Haas, 2006; Hayward, 2005; Sharman, McLaren, Cohen, & Ostry, 2008). Moreover, researchers have identified older women as a vulnerable group (Dupuis, Weiss, & Wolfson, 2007; Glass, 1990; McDonald & Robb, 2004; Rozanova, Northcott, & McDaniel, 2006). The three vulnerable groups of older adults chosen to participate in this study are Aboriginal seniors, ethnic minorities, and those with disabilities. Within each of these groups, we are particularly interested in those who may be at increased risk of vulnerability, such as women and those with limited financial resources.

It is clear that Aboriginal peoples in Canada are vulnerable due to factors such as racism, high rates of disability and chronic disease, low income, and poor housing conditions (Cooke, Guimond, & McWhirter, 2008; Public Health Agency of Canada, 2002). Aboriginal peoples are often identified as the most poorly housed social group in Canada, and many of the health issues that Aboriginal peoples experience are a direct result of inadequate housing (O'Donnell & Tait, 2004; Walker, 2003). Research on housing for Aboriginal seniors is scarce in Canada. One study of Métis seniors has revealed that many lived in homes requiring maintenance and repair (Chenew Holdings Inc., 2004).

Studies examining the housing needs of older adults who are ethnic minorities in Canada are quite limited. Research shows that factors such as a lack of financial resources and racial barriers can make finding appropriate housing difficult for ethnic minorities (Danso & Grant, 2000). Older ethnic minorities in Canada are 1.5 times more likely to experience poverty than are older adults in the general population (Brotman, 1998). Studies of older Asian immigrants in urban areas of Western Canada reveal a preference by many, particularly for immigrants with low incomes and health issues, to live with family members after arrival in Canada (Hwang, 2008; Lai, 2005; Ng, Northcott, & Abu-Laban, 2007). Although this research reveals some knowledge of new immigrants, research is also needed on ethnic minorities who have lived in Canada for longer periods of time. The changing ethnic composition of the population in North America is accompanied by this population's aging (Angel & Angel, 2006), making it particularly relevant to study older ethnic minorities at this time.

Results of the Participation and Activity Limitations Survey conducted by Cossette and Duclos (2002) show that 40.5 per cent of Canadians aged 65 and older have a disability, defined as that which limits the everyday

activities of individuals as a result of a physical condition or a health problem (Cossette & Duclos, 2002). These individuals have high levels of unemployment and poverty that can severely limit their ability to complete the necessary maintenance and adaptations their homes require or to move to a home that better meets their needs (CMHC, 2000; Lix, Hinds, DeVerteuil, Robinson, Walker, & Ross, 2006; Nocon & Pleace, 1998; Silver, Mulvey, & Swanson, 2002). Many adults with disabilities require special features in their home to accommodate their needs, but they are often unable to make these modifications (Duclos & Langlois, 2003). Additional issues include the need for services to be provided within the home and concerns about safety in the neighbourhood arising from an individual's feeling vulnerable as a result of physical limitations (Owen & Watters, 2006).

While there is a growing body of research on housing in general, and on housing for older adults in particular, the housing concerns of vulnerable older adults remain largely unknown, especially for those older adults living outside Canada's major urban centres. Much of the housing research in Canada is conducted with urban populations, resulting in a lack of knowledge about rural housing issues. In Canada, 39.3 per cent of adults 65 and older live outside a census metropolitan area (Turcotte & Schellenberg, 2007). As the Canadian population becomes more diverse, it will be more heterogeneous than today, with respect to such factors as language, education, occupational attainment, income, and wealth (Angel & Angel, 2006). In general, more information from individual and comparative case studies is needed on the housing circumstances of various groups in Canada (Danso & Grant, 2000).

## Methods

### *Participants*

As part of the Atlantic Seniors Housing Research Alliance (ASHRA) ([www.ashra.ca](http://www.ashra.ca)), we formed a team to oversee the implementation of focus groups with the intent of complementing and enhancing quantitative survey data that our team previously collected. The analysis of survey data revealed gaps in our knowledge about the housing concerns among distinct and under-represented groups of older adults. Our purposive sampling strategy involved members of the focus group team identifying specific categories of older adults in Atlantic Canada who may face particular challenges related to housing. This analysis is based on data collected from 84 vulnerable older adults who participated in 10 focus groups in three types of groups: Aboriginal seniors, those with disabilities, and ethnic minorities.

### *Procedures*

The focus groups took place in accessible buildings such as schools, seniors' centres, or resource centres. Prior to each focus group's meeting, potential participants received an information letter about the study and provided consent to participate. When necessary (e.g., due to low literacy levels), a graduate assistant read the information letter and consent form aloud to the participant before signing. In situations where a participant had any form of cognitive impairment, consent was provided by those with the responsibility for decisions concerning the well-being of that person (e.g., spouse, other family, or professional caregiver), and each participant also indicated a willingness to participate in the study. Participants received an honorarium, reimbursement for any travel expenses, and refreshments during the focus group's session.

For each focus group, a moderator – a person who had familiarity with the participants or who identified with them – was trained and appointed. A graduate assistant supported the moderator by tape-recording the sessions and writing in-depth field notes. The moderator asked questions about the participants' current housing situation (e.g., type of housing, and length of time lived in their home), influences on current housing decisions, ways in which housing influences well-being, changes they would like to make to their housing situation in the future, factors influencing their ability to make housing changes in the future, and recommendations to improve housing for older adults. In addition, the participants completed a demographic survey. The moderator and graduate assistant met at the end of the focus group session to share thoughts, background information and observations, and to offer further insight into the data collected (Krueger, 1998; Traulsen, Almarsdottir, & Bjornsdottir, 2004).

Each focus group session lasted approximately two hours. A partner organization conducted one of the Aboriginal focus group sessions, as the organization had already arranged to conduct a focus group session on another topic with our target population, and agreed to include our questions and provide a transcript. In one group, the participants did not believe in capturing voices on tape. In this case, the graduate assistant and an additional note taker took detailed notes of the conversation. In accordance with research by Krueger (1998), the graduate assistants thoroughly reviewed and compared each transcript to the audiotape for accuracy. By recording pauses, overlaps, and the exact way each participant spoke during the focus group, and including this information in the transcripts, analysis was bolstered. Data reliability was strengthened, in addition, by comparing the transcripts

to field notes (Silverman, 2005). The analysis incorporated the facilitator's observations and field notes, along with the notes taken from discussions with each moderator.

We used a thematic analysis approach, which is a form of pattern recognition within data allowing for themes to emerge directly using inductive coding (Fereday & Muir-Cochrane, 2006). This process involves generating initial codes, searching for themes, reviewing themes, and defining and naming themes, all of which result in thematic codes that represent patterned responses within the data set (Braun & Clarke, 2006). Thematic analysis is particularly useful in understanding influences and motivations related to how people respond to events (Luborsky, 1994), and thus lends itself to developing a greater understanding of the housing concerns of vulnerable older adults.

After identifying and defining main themes and sub-themes, two graduate assistants independently coded each transcript, compared the coded data, and agreed through consensus on any discrepancies in coding or consulted with the first author to decide on discrepancies. We used the qualitative data analysis program QSR N6 to aid in data organization and analysis. The themes included in this analysis are presented in Table 1. As we recognized that diversity existed within the three types of vulnerable older adults in this study, we examined both the common concerns across the three groups and the specific or unique housing concerns within each of the three groups. A qualitative approach allowed us to gain in-depth knowledge about the housing concerns of vulnerable older adults and about what can be done to ensure that appropriate housing is developed to meet the needs of Canada's diverse older population.

**Table 1: Description of themes analyzed**

Main Themes	Sub-themes	Descriptions
<b>Standards of Core Housing Need</b>		
Affordability	Direct costs of Housing	The house I live in now and costs related to it; cost of housing; amount/proportion of income spent on housing and housing-related costs (e.g., utilities, property taxes); cost of repairs; subsidized housing
	Indirect costs of Housing	I'm too poor to own/rent a house; can't afford to move; inadequate income; not being able to afford necessities; pensions; increasing expenses with age; other financial issues; costs of medications
Suitability (Size)	Too small	Not enough room for visitors or caregivers to stay overnight; not enough space; privacy
	Too large	Concerns with small space Prefer/need to live in a smaller home
Adequacy (Maintenance)	Just right	Housing met size needs
	Difficulty with maintaining a home	Indoor or outdoor; difficulty in maintaining a home; need help from others; problems with hiring help; problems getting a landlord to maintain an apartment
	Health and comfort	Furniture; temperature; impact of housing on health; air quality; dampness; mold; light; impact on health
	Seasonal issues	Winter concerns: shoveling snow, ice, winter driving; grass: mowing, raking leaves; gardening; problems with hiring help to deal with seasonal issues; move to different location during certain times of the year
<b>Additional Themes Analyzed</b>		
Cultural Appropriateness	Language and Culture	Language barriers; communication problems; discrimination; racism
Security	Safety and Security in the Home	Security features of the home; emergency call bells; access to a phone; regular visits/calls by someone
	Safety and Security outside the Home	Safety concerns in the neighborhood
Accessibility	Accessibility	Stairs; ramps; safety features such as grab bars; size of doorways, kitchens, and bathrooms; impact on health; elevators; falls due to home environment
Availability	Housing Options and Waiting Lists	I have housing options in my area; I don't have housing options in my area; housing options don't exist; I'm not aware of housing options; housing options will not meet my needs; choice or options available; waiting lists to get into a specific type of housing or housing on a reserve

## Results

We first present a description of the participants, the standards of core housing need, and additional key housing issues that we identified across the three types of vulnerable older adults. Finally, we examine the housing issues of particular importance within each type of vulnerable older adult.

### Participant Characteristics

Either the participants identified themselves as seniors, or others identified them as seniors, within their communities, resulting in almost 37 per cent of our sample being under age 65. The socio-demographic characteristics (see Table 2) indicated that the participants varied in several ways from the general older adult population in Canada. For example, our sample included a higher proportion of women, those who spoke a language other than English, had higher levels of education, earned lower incomes, lived with non-family members, and were never married (Turcotte & Schellenberg, 2007). These differences arose due to our sample being drawn from specific types of vulnerable older adults.

Owing to the participant selection process employed by the focus group team, some diversity existed within the three types of vulnerable older adults. A total of 25 Aboriginal seniors participated in three focus group sessions conducted in three provinces, and they lived both on- and off-reserve. In Canada, reserves are areas of land set aside for Treaty Aboriginal Nations (often referred to as First Nations groups in Canada). The participants described themselves as belonging to a variety of Aboriginal groups, including Mi'kmaq, Métis, and Inuit. Many Aboriginal people under age 75 participated (92%). Only 1 per cent of the Canadian Aboriginal population is age 75 or older (Turcotte & Schellenberg, 2007). Compared to the other two groups, the Aboriginal participants had the poorest self-reported health status and the lowest educational attainment, and relatively few lived alone.

A total of 34 older adults with disabilities participated in four focus groups in three provinces. Their disabilities included those that were physical, cognitive, mental health related, and developmental. These adults were among the highest proportion of participants under age 65, had never married, had low incomes, and lived with non-family members.

The ethnic minority group included a total of 25 seniors who participated in three focus groups in three provinces, including immigrants to Canada, Black Nova Scotians, and those associated with a multicultural organization. They reported belonging to a variety of ethnic and geographical origins including African, East Indian, European, Asian, and Latino-

American. They included the highest proportion of participants who were age 75 or older, spoke a language other than English, and had the highest educational attainment, although 28 per cent received less than \$15,000 in income per year. Several non-English speakers utilized a translator in order to contribute to the focus group. The proportion of older Canadians who cannot speak either English or French is increasing (Turcotte & Schellenberg, 2007).

### Standards of Core Housing Need

We analyzed the focus group data to identify not only how the participants discussed the current definitions of the three standards of core housing need, but also how they expressed concerns related to any aspect of affordability, suitability, and adequacy.

#### Affordability

In all the focus groups, participants frequently discussed the high cost of housing and housing-related expenses. Affordability issues tended to vary, depending on whether the participants owned or rented their homes. Many renters faced affordability challenges, especially if they required supportive services, such as personal care, meals, and housekeeping.

*The minimum is \$3,000 per month. And ... I have a pension and everything, but, when I think – my God, I have to pay \$3,000 per month (that's minimum). I could not afford that. (Ethnic minority participant)*

Concerns emerged about ongoing increases in rent, especially when combined with fixed and very low incomes.

*The rent goes up and up and up, and this is the first year that it hasn't been raised, so I'm kind of really happy. (Disability participant)*

Homeowners also faced affordability issues.

*And I have a house, yes, but you can't eat bricks. (Ethnic minority participant)*

Many faced particular challenges in being able to hire assistance with maintenance and continuing to be physically able to reduce housing costs.

*I supplement the heat with a woodstove while I can still get wood. Like I say, I can still get the wood and it helps with the light bill. [In] another few years, I may not be able to go in the woods like I do now and cut wood. (Aboriginal participant)*

Some may need to relocate due to affordability concerns.

*I've been in my home right now, and I know I'm not going to be there for too much longer, because I just – I can't afford to keep up with grass cutting, with snow removal, with the taxes the way they're going. It's just getting ridiculous. (Disability participant)*

**Table 2: Socio-demographic characteristics**

Characteristic	Aboriginal		Disability		Ethnic Minority		Total	
	n = 25	%	n = 34	%	n = 25	%	n = 84	%
<b>Sex</b>								
Male	6	24.0	9	26.4	5	20.0	20	23.8
Female	19	76.0	25	73.6	20	80.0	64	76.2
<b>Marital Status</b>								
Married/Partner	11	44.0	8	23.5	10	40.0	29	34.5
Widowed	9	36.0	6	17.6	9	36.0	24	28.6
Separated/Divorced	3	12.0	4	11.8	5	20.0	12	14.3
Never Married	1	4.0	15	44.1	1	4.0	17	20.2
No Response	1	4.0	1	3.0	–	–	2	2.4
<b>Age</b>								
Under 65	9	36.0	17	50.0	5	20.0	31	36.9
65–74	14	56.0	13	38.2	11	44.0	38	45.2
75–84	2	8.0	3	8.8	7	28.0	12	14.3
85–94	–	–	1	3.0	–	–	1	1.2
No Response	–	–	–	–	2	8.0	2	2.4
<b>Language Spoken at Home</b>								
English Only	17	68.0	32	94.0	13	52.0	62	73.8
French Only	1	4.0	1	3.0	–	–	2	2.4
Other/Combination	6	24.0	–	–	12	48.0	18	21.4
No Response	1	4.0	1	3.0	–	–	2	2.4
<b>Language Spoken during Childhood</b>								
English Only	12	48.0	30	88.2	10	40.0	52	61.9
French Only	1	4.0	–	–	–	–	1	1.2
Other/Combination	11	44.0	2	5.9	15	60.0	28	33.3
No Response	1	4.0	2	5.9	–	–	3	3.6
<b>Number of People Live with</b>								
One	6	24.0	14	41.1	10	40.0	30	35.7
Two	11	44.0	14	41.1	8	32.0	33	39.3
Three	1	4.0	4	11.8	1	4.0	6	7.1
Four or More	4	16.0	2	6.0	5	20.0	11	13.1
No Response	3	12.0	–	–	1	4.0	4	4.8
<b>Who Respondent Lives with<sup>a</sup></b>								
Live Alone	6	24.0	14	41.1	10	40.0	30	35.7
Spouse/Partner	10	40.0	8	23.5	10	40.0	28	33.3
Other Family Members	7	28.0	4	11.8	9	36.0	20	23.8
Non-family Members	1	4.0	12	35.3	–	–	13	15.5
No Response	2	8.0	–	–	1	4.0	3	3.6
<b>Employment Status</b>								
Does Not Work	15	60.0	27	79.4	23	92.0	65	77.4
Works Part-time	3	12.0	3	8.8	2	8.0	8	9.5
Works Full-time	7	28.0	3	8.8	–	–	10	11.9
No Response	–	–	1	3.0	–	–	1	1.2
<b>Education</b>								
No Formal Education	–	–	1	3.0	–	–	1	1.2
Less than High School	8	32.0	11	32.3	5	20	24	28.6
Graduated High School	–	–	7	20.6	3	12.0	10	11.9
Some Higher Education or Completed Diploma	4	16.0	5	14.7	4	16.0	13	15.5
Degree	4	16.0	9	26.4	13	52.0	26	30.9
No Response	9	36.0	1	3.0	–	–	10	11.9
<b>Self-reported Health Status</b>								
Very Poor	2	8.0	–	–	1	4.0	3	3.6
Poor	–	–	4	11.8	1	4.0	5	5.9
Fair	3	12.0	6	17.6	10	40.0	19	22.6
Good	8	32.0	17	50.0	9	36.0	34	40.5

Continued

Table 2: Continued

Characteristic	Aboriginal		Disability		Ethnic Minority		Total	
	n = 25	%	n = 34	%	n = 25	%	n = 84	%
Excellent	2	8.0	7	20.6	2	8.0	11	13.1
No Response	10	40.0	–	–	2	8.0	12	14.3
<b>Income Satisfaction</b>								
Totally Inadequate	–	–	–	–	3	12.0	3	3.6
Not Very Well	2	8.0	6	17.6	3	12.0	11	13.1
With Some Difficulty	5	20.0	10	29.4	5	20.0	20	23.8
Adequately	4	16.0	10	29.4	8	32.0	22	26.2
Very Well	3	12.0	6	17.6	3	12.0	12	14.3
No Response	11	44.0	2	6.0	3	12.0	16	19.0
<b>Income</b>								
Less than \$15,000	3	12.0	18	53.0	7	28.0	28	33.3
\$15,000–\$24,999	4	16.0	2	5.9	2	8.0	8	9.5
\$25,000–\$34,999	1	4.0	2	5.9	4	16.0	7	8.3
\$35,000–\$49,999	1	4.0	6	17.6	2	8.0	9	10.7
\$50,000–\$74,999	4	16.0	3	8.8	1	4.0	8	9.5
More than \$75,000	–	–	–	–	2	8.0	2	2.4
No Response	12	48.0	3	8.8	7	28.0	22	26.2

<sup>a</sup>Participants could select more than one category

Various government programs and policies influenced financial status, which in turn influenced their housing situation, such as being on a fixed income due to health status. Others had very limited incomes and did not qualify for other income support programs.

*We have to rely on our regular seniors' Canada Pension or whatever, and that's all we have to rely on.* (Aboriginal participant)

Participants suggested improvements to government programs and policies, such as increasing the level of benefits or providing new financial supports for older adults.

In sum, the high cost of renting or owning a home is the affordability issue of greatest concern. Undesired relocation can result from living on relatively ungenerous benefits received from various income support programs for older and/or disabled adults.

#### Suitability

Many participants discussed issues related to the core housing standard of suitability. While this standard refers to the appropriate number of bedrooms, the participants provided a broader and more nuanced depiction of their space needs. In six focus groups, they discussed living in homes that are too small for their needs, and they desired to have more space for a variety of reasons, such as meeting personal comfort and safety needs.

*So I guess my biggest challenges right now are [that] need to keep doing the things that I love doing ... to keep my mind healthy and to feel good*

*about my life and myself, and about living and about being in the world. It's so difficult to do these things in this little space that I'm only doing just the smallest portions, fraction, bit of what I could do if I could move around more safely.* (Disability participant)

Some participants discussed having access to enough space for themselves but not for others, such as caregivers, to stay with them on either an occasional or a permanent basis.

*It's good when you are not sick, but when you become sick, it is no good. There is nobody who can come and be with you because you have [only] one bedroom.* (Ethnic minority participant)

Although the criteria for suitability only referred to the number of bedrooms, the participants also discussed problems with rooms being too small, including bathrooms, and not enough space to store important personal possessions.

*It was very difficult for me [when I had to move] because I couldn't bring all the things I was used to having around me, and I guess I shed a lot of tears – didn't sleep good."* (Aboriginal)

The participants anticipated having even smaller living spaces in the housing or care facilities that they might need in the future. Conversely, participants in four focus groups with ethnic minority and Aboriginal participants experienced difficulties because their home was too large for their present needs.

*The only thing is, the house is way too big for us now. It was too small when all the kids were home,*

*but now it's too big that it's just [spouse] and I... I would like to get a smaller house and maybe move out of the big one for a bigger family, but it's a shore lot, and I don't really want to give it up.* (Aboriginal participant)

In sum, the size of the home emerged as an important concern for the participants, with the number of bedrooms being only one aspect. The size of bathrooms and living spaces also emerged as important concerns, along with having enough space to add household members, and having control over with whom they live when renting. Having a home that is too large was also revealed to be a concern for some participants.

#### *Adequacy*

This standard of core housing need relates specifically to whether major repairs to the home are needed, and this need existed for many participants. In eight groups, participants also discussed the influence of their home on their health or level of comfort, including issues with temperature, amount of sunlight, air quality, and humidity levels. While some experienced difficulties with cold and dampness, others experienced too much heat.

*I [am living on the] ground floor, and I have arthritis, and it bothers me ... I am using lots of heat, but it's no help to me. It's still cold.* (Ethnic minority participant)

Since such problems may not require major repairs, they may not be identified as adequacy issues in accordance with the CMHC definition.

Another area related to repair involved the difficulty experienced by participants in eight groups in continuing to complete both indoor and outdoor maintenance tasks, often due to changes in health status.

*All these years you're too proud, and you do it all on your own. And you realize now you do need assistance.* (Disability participant)

Some participants received help with maintenance from family and friends, while others without this support faced financial barriers in employing people to help, felt taken advantage of financially, or had difficulties in finding appropriate people to hire.

*I want my home to look as well as everybody else's in the community, and I like to have a nice garden, but even when you have the finances, it's difficult to find the individual to do the work for you.* (Ethnic minority participant)

Although a number of participants received support from programs, such as those for veterans, others felt there was too little government support, or they did not know where to go to get assistance with maintenance. The seasonal and climatic issues in Atlantic Canada posed challenges to participants in six of the

focus groups, and this influenced their housing decisions.

*I'm trying to now sell my house and move to a condo where I don't have any snow cleaning or the lawn; garden work, or anything like that.* (Ethnic minority participant)

Most of the discussion about maintenance issues revolved around those who owned their own homes, yet some renters experienced difficulties having a landlord who responded to their maintenance needs.

In sum, while major repair needs was a concern for participants, many more aspects of maintenance emerged. These included having the physical ability to continue to complete routine indoor and outdoor maintenance in all seasons, and limited financial resources to purchase assistance with these repairs.

#### *Additional Key Housing Concerns*

Beyond the standards of core housing need just described, we identified four additional key housing concerns of importance to the vulnerable older adults in this study.

#### *Cultural appropriateness*

In seven of the focus groups, including each of the Aboriginal and ethnic minority groups, participants discussed a concern about the cultural appropriateness of housing. A lack of language skills in either English or French can create social isolation, and language skills can also influence the ability to be employed in Canada. Some participants did feel accepted into the dominant culture.

*It's a pretty friendly neighbourhood, really. Everybody knows one another.... It's pretty good as far as race is concerned .... It's sort of like a family area, more or less. I'm Black, but I feel like I'm White sometimes.* (Ethnic minority participant)

Others identified significant problems with being accepted in their communities.

*There's so many of my neighbours that are still racist; they're very racist. If you go to them for help, you know they want nothing to do with you.* (Aboriginal participant)

For Aboriginal participants in particular, they felt a special attachment to a particular location where they no longer lived, and this had a great impact on their well-being.

*We all came from somewhere else, and that somewhere else is probably the dwelling place of our heart and soul, and we got to get back there, and I think that's really important for us, this particular group of people.... We love it here, but it's not home.* (Aboriginal participant)



Participants who grew up with different types of housing and living arrangements often did not feel comfortable with the norms and regulations surrounding the current housing available in Atlantic Canada.

*When they tell people they all live together, there are people here that find it weird. It's less common. In Europe it's fine.* (Ethnic minority participant)

Some participants identified that the cultural expectations placed on family members to provide housing and support to older parents are changing, and this caused concern for the future.

*If my mother came, it was my responsibility to take care of her, or any of the parents. Now the parents are coming, so we take full responsibility. We do not want them to live separate. This is a part of our culture ... but now when we are getting older, our children [have] left this town. They are in Toronto and Vancouver and New York and England, some of them. So now we are looking [out] for ourselves. How are we going to manage?* (Ethnic minority participant)

The theme of cultural appropriateness that emerged, therefore, related to Aboriginal and ethnic minority group participants who faced issues of comfort and acceptance living in their neighbourhoods. Cultural appropriateness also established norms for the size of homes and household composition, as well as the meaning attached to a particular place.

#### Security

The participants discussed issues about security within two different contexts. First, participants in eight focus groups discussed the extent to which they felt secure within their homes. Some felt less secure in their homes at certain times, such as during storms, or when power or other utility interruptions occurred.

*That's another thing: if the phone line is down. Her phone line was down; [the power company] told her [it would be] 24 hours before they could do anything, so she had no other connection for 24 hours.* (Ethnic minority participant)

An individual's sense of security often was derived from having access to a phone or an emergency communication system, and for having someone to check on them regularly. However, some participants identified the financial cost of adding safety or security features to their home.

A second concern raised by participants, in five of the focus groups, involved the extent to which they felt secure outside their homes and in the broader community. A number of participants indicated that they felt safe and secure in their community, but these experiences varied greatly.

*That's one thing we have ... advantage of where we live in the seniors' complex. We do have the security, and it's really good there. Most seniors in the community don't have that in their own homes.* (Aboriginal participant)

*I would say I know what places are safe, but I have to go [an unsafe way] to get home. In those woods, someone could come out and attack you.* (Disability participant)

Many participants provided information on what would need to be done to make them feel safe, such as having better lighting, fences with locked gates around their homes, and enhanced police protection.

#### Accessibility

In all focus groups, participants discussed accessibility concerns related to housing, and participants with physical disabilities, in particular, frequently discussed this topic. Several of the accessibility issues related to problems using stairs or steps.

*I don't like going up the steps. Because every time I go up the steps, my legs feel kind of weak ... but the steps really hurt my leg pretty bad, too. Yeah, that's not good for me.* (Disability participant)

Those with access to elevators discussed how sometimes the elevators were not working or could not be used in a fire. Other accessibility issues included a lack of grab bars, the size of doorways, or the design of door knobs, kitchens, and bathrooms.

*I think of people in wheelchairs. I think that [on] the stoves, instead of having your [stove] buttons up top, where they are normally, they need to be down."* (Disability participant)

Participants discussed how accessibility issues adversely affected their health, such as experiencing falls in bathrooms and on stairs. The lack of financial resources impaired their ability to make their homes more accessible or to move to an accessible home.

*I am beginning to think ahead. I'm looking at different apartments as they are built, to see what their accessibility is like, but I guess to be honest about it, I can't really afford it.* (Disability participant)

Thus, various types of accessibility issues emerged as key concerns for certain participants, especially those with physical disabilities. Individuals in the other groups also experienced problems related to being able to safely and comfortably live in their homes.

#### Availability

In all of the focus groups, participants discussed issues related to housing options available to them. They discussed the extent to which available housing options would meet their needs, and several participants felt that appropriate options did not exist for them.

*There's getting to be more and more elders and they're getting older; like you say, it's the baby boom, and in about another 5 to 10 years you're going to have a lot of senior citizens that are going to be homeless.* (Aboriginal participant)

Much discussion surrounded the issue of extremely long waiting lists, such as housing on-reserve, or publicly funded housing.

*I put my name in with NB housing, or that's what it was when I first came down, and I was looking for [an] affordable handicapped apartment, and after I bought my mini home, I got a letter from them asking me if I wanted to keep my name on file. That's 10 years [ago].* (Disability participant)

Another participant said:

*I've been asking for a house ... I never heard any more from them anymore. I don't know what happened. They forgot me, I guess.* (Aboriginal participant)

These results indicated that many problems exist related to accessing housing that meets the needs of vulnerable older adults. Awareness of what forms of housing are available is crucial, along with desired housing being available when the need arises.

### *Housing Concerns within Groups*

In addition to identifying the above housing concerns common to each of the three groups of vulnerable older adults, unique housing concerns emerged within each of the three groups.

#### *Aboriginal Seniors*

In general, the Aboriginal seniors described very difficult current housing arrangements: "The housing situation is harder for Natives."

Many Aboriginal seniors discussed wanting their basic needs met, such as housing that does not negatively impact their health, and housing that meets special health care needs.

Issues for off-reserve Aboriginal seniors included a lack of stable long-term housing and the desire to belong to part of an Aboriginal community that is similar to what they experience when living on a reserve. Some seniors made unsuccessful attempts to return to living on a reserve.

*I had applied to be, you know, accepted back on the reservation and it hasn't happened, and I've been applying for over twenty-some years.*

Both on- and off-reserve Aboriginal seniors expressed the importance of interdependence, including helping neighbours, remaining involved in the community,

and having a positive influence on youth by teaching them language skills and respect.

*If it [housing] was in your community, then they [wouldn't] have that distance. They'd [seniors] be more accessible to the community and not be alienated from the community.*

While many Aboriginal seniors lived with younger family members out of necessity, not all preferred this arrangement, although they did want to live where multiple generations could interact as a community.

*Elders don't have a voice anymore. They don't even come to ask you what you think. And that's sad because we're losing our culture and we're losing it fast. And, you know what we have today, regardless of the education or housing or whatever, it means diddly squat because we're not a community anymore.*

Frustration emerged in dealing with both the federal government and local Aboriginal authorities when trying to access housing-related programs that depend on factors such as Aboriginal or veteran status.

*You write to your Chief and Council, you write to your government – they just put you on the back burner. And you know, us as elders, we don't have a voice anymore. [At] one time, the elders had a voice on what was to be and what was not to be, with the Chief, with the Council, with the government.*

Many Aboriginal seniors discussed a deep desire to have input into housing for seniors.

*They don't want big fancy houses. They just want a comfortable place to live with all the necessities that they need.*

#### *Ethnic minorities*

Participants in the three ethnic minority focus groups included both newcomers to Canada, who tended to live in rental units, and those who had lived in Canada for many years or generations and who often owned their homes. Each group faced challenges in affording housing-related expenses such as rent, renovations, utilities, and taxes. Newcomers to Canada faced many particular challenges related to immigrating to Canada and settling into a new culture. Some expressed concern over the employment opportunities (e.g., due to a lack of language skills in English or French), and when combined with ineligibility for social programs for many years after immigrating to Canada, they had no choice but to live with family members.

Some ethnic minority participants discussed the issue of access to unpaid support in old age, and many perceived a value shift regarding children's providing support to parents.

*The kids are growing up, and the difference is that they don't care for the seniors.*

This lack of support from family members and others, such as friends and neighbours, creates a need for housing that includes various forms of support.

*It's not just "build the four walls", whether two-bedroom or three-bedroom. This is not going to solve the problem .... A support system is as important as a house. So it has to be a mixture .... Where the seniors are living, they should make sure the nurse or somebody is there, even if you pay them a little bit extra for this service. But it has to be there.*

The combination of failing health and a lack of financial resources to purchase the necessities of life caused concern, and many clearly required subsidized housing.

*There are a lot of women that we know of who are living on the poverty line. What do they do? They have this Guaranteed Supplement income, but that is nothing compared to the expenses you have to pay.*

Each of the housing concerns for the ethnic minority group related to financial concerns in some manner.

#### *Participants with disabilities*

Individuals with physical disabilities often discussed the extent to which current housing met their particular needs, including accessibility and the size of their living space. These participants expressed concern that their physical disabilities would worsen over time, and they desired to have opportunities to be as healthy as possible for as long as possible.

*I'm saying another 5 years or so: God knows what will happen then, but if it came time that I had to be in a wheelchair, I couldn't stay [where I am].*

Specific services, such as transportation, emerged as being very important to these older adults, along with support from family, friends, and neighbours.

*I have fantastic neighbors who look in on my situation, and help me immensely with things, if I need anything lifted or anything. That's the reason that I like where I am.*

A high proportion of those with mental or developmental disabilities lived in rental units, and many reported conflicts with roommates or others who lived in the same building. Much discussion revolved around the adequacy of housing and associated services designed to help them retain independence.

*[It would be good to live in a place] with a staff on hand, where you could have your own private apartment but there'd be someone available to talk to you.*

These participants accessed various income support programs but still had difficulty meeting their financial needs.

*They only allow me \$450 [per month] to live on, Community Services, and then the \$185 has to come out of that, automatically, to pay the rent.*

Many participants with disabilities reported very low incomes, yet diversity existed. While some participants expressed concerns about their financial status, others described not feeling poor. Those with lifelong disabilities often faced a combination of low incomes and high health care costs that, over time, made their financial status more precarious. Meeting both physical and service needs is crucial for these vulnerable older adults.

## Discussion

Although the participants provided little information about what form of housing they preferred, they did offer insight into desired housing characteristics that could be made available. It is evident that, across the three types of vulnerable older adults, many participants struggled with housing affordability and the availability of support from family members, friends, or neighbours. This research contributes to the argument that affordable housing – which includes a variety of services either within or very near the home – is warranted (Golant, 2008). Whereas many models of successful supportive living rental accommodations exist where health and social care are provided (Taylor & Neill, 2009), these services are also needed both in rental and private homes, and in urban and rural locations. Moreover, these services need to be affordable.

Our results did show that the three standards of core housing need are important issues to the participants. As with other studies, our results indicated that affordability tends to be the most problematic standard of core housing need in Canada, and in particular, affordability is a greater problem for renters than for owners (Clark, 2005; CMHC, 2004; Danso & Grant, 2000). In Canada, 18 per cent of older adults have problems with housing affordability (Clark), but our results indicated that affordability may be a much greater issue for vulnerable older adults than for the general older adult population.

Adequacy is a concern, but we found that the more general issue of maintaining a home is a key concern since the inability or reduced ability to maintain a home can influence housing decisions. Although CMHC offers assistance to various vulnerable groups so that their homes meet health and safety standards through the Residential Rehabilitation Assistance Program, none of the participants mentioned receiving

assistance from this program, indicating that education about this program is needed.

Suitability is generally not the most common housing concern in Canada, as household sizes are decreasing, but it may be a particular issue for ethnic minorities (Danso & Grant, 2000). Some older adults in this study, especially those living in rental units, did prefer to have more space to accommodate living with others, such as a caregiver or several family members. Conversely, while living in a home that is larger than necessary is not a concern when calculating core housing need, a number of participants did identify this as a concern. Some participants no longer required extra space, and they often did not have the ability or resources to continue to maintain a large home.

Although results indicated that the three standards of core housing need are useful in identifying some important housing concerns among vulnerable older adults, the additional factors of cultural appropriateness, availability, accessibility, and safety also emerged as important concerns. Our sample included a large proportion of women, and those who lived alone, were never married, and had limited financial resources. These characteristics point to the level of vulnerability of those in our sample, but additional key housing concerns may result when other vulnerable populations are examined.

Several participants discussed having plans to move from their current home or community. This finding contrasted with prior results from a study of the general older adult population in Atlantic Canada, of whom only 12.5 per cent indicated plans to move at some point in the future (Shiner, 2007). Several issues identified in Shiner's research, including the standards of core housing need, along with issues related to accessibility and security, could create a situation in which more vulnerable older adults anticipate moving because their current housing does not meet their needs. In addition, a lack of appropriate housing availability in a senior's community may also precipitate a move. It is important to distinguish whether older adults are moving out of necessity or by choice. While we know that most older adults prefer to age in place (Tinker, 1997; Wagnild, 2001), it is important to recognize that aging-in-place may not be the best or preferred option for all older adults. That would be the case for some of the participants in our study. Others have also begun to argue that vulnerable older adults, in particular, may be less inclined to age-in-place (Golant, 2008; Means, 2007).

For each of the three types of vulnerable older adults, we identified specific housing-related issues of importance to them. The Aboriginal seniors wished to live in and be contributing members of their community, yet

they faced great obstacles, including poor health, few financial resources, and a lack of programs to assist them. As only one-fifth of Aboriginal Canadians live on reserves (Spurr, Meltzer, & England, 2002), these Aboriginal seniors need opportunities to engage with and continue to contribute to their communities.

The ethnic minority group included both African Nova Scotians who have lived in Canada, often for several generations, and other ethnic minorities who moved to Canada more recently. While both groups faced challenges, newcomers to Canada encountered immense financial hurdles related to health issues, employment, and eligibility for social programs. These challenges exist within the context of often having little access to support from family members.

The group with physical disabilities often faced challenges with declining health over time, and those with mental health issues often had problems with obtaining appropriate rental housing, getting along with roommates, and surviving on meager support from social assistance programs. These results highlighted the importance of examining the housing needs of specific groups of older adults.

Many of the participants discussed issues related to renting a home. While we did not specifically ask how many of the participants rented their home, it appeared to be higher than the 22 per cent of older adults who do not own their own home in Atlantic Canada (Shiner, 2007). Many factors, such as low income and the physical inability to maintain a home, could result in vulnerable older adults' being less likely to own a home. Our results emphasized the importance of recognizing that many vulnerable older adults require assistance with obtaining affordable rental housing that meets their needs. Golant (2002) found that geographic inequalities existed in an American study of affordable rental accommodations for older adults, and further research examining locations where older adults have less access to affordable rental accommodations in Canada would be useful.

Many of the participants discussed having both financial challenges and health problems, and these two factors are frequently used to define vulnerability (Barak & Cohen, 2003; Buijss et al., 2003; Fortress, et al., 2001; Keiser et al., 2009; Lexchin & Grootendorst, 2004; Nour et al., 2005; O'Brien, 2005). These two issues appear to serve a mediating role in current housing satisfaction, and also will in housing options in the future, especially when combined with additional factors such as advanced age or a lack of social support. The results helped to reinforce that the intersection of several types of vulnerability can place certain older adults at increased risk for a variety of problems. Additional research is needed in order to

understand more fully the impact of multiple types of vulnerability on the lives of older adults.

The participants in this study clearly felt they had few housing options. This can be due either to a lack of housing options or awareness of those options. Carter and Polevychok (2004) argued that the lack of a national Canadian policy has resulted in an inadequate continuum of housing to meet the needs of low income and special needs groups. Our research provides additional evidence that social housing programs are needed to meet the needs of the most vulnerable older adults in our population. In addition, educational programs for older adults are needed in order to increase awareness of available housing-related assistance, such as programs provided by CMHC. A new innovative public initiative in the United Kingdom provides free housing, care, finance, and rights advice, and this information can empower older adults to make informed decisions about current and future housing (Ramsay, 2009). The provision of such a service in Canada would be very beneficial for all Canadians, especially for vulnerable older adults.

### Study Limitations

We recognize several limitations to this study. Our analysis was limited to three groups of older adults, and additional research is warranted on other groups, such as gays and lesbians, the homeless, and older adults living in remote locations. Such research may also result in the identification of further key aspects to consider in addressing the housing concerns of this population. As we did not specify a minimum age criterion for participation, we provide little insight into the needs of different age groups of older adults. Researchers should examine whether housing needs vary within different age cohorts of vulnerable older adults.

In the focus groups, participants had the opportunity to share their housing concerns with the other members of the group. Often, this method of data collection can spark ideas that would not have emerged using other methods, such as individual interviews. However, some participants may not have been comfortable sharing their concerns with other participants present. For example, one Aboriginal senior said, "My story is too painful to share in an open discussion." Other methods of data collection, such as face-to-face interviews or anonymous surveys, may provide additional insight especially for particularly marginalized older adults or those who require translation services.

Through utilizing local focus group moderators, we may have increased the participation level for some older adults. However, even though we utilized a training process, the moderators each had different backgrounds, experiences, and skills, thus making

each focus group unique. It may have been more effective to use one or two trained moderators to conduct all of the focus group sessions, and utilize a local community member as a co-facilitator or assistant.

### Conclusions

In this study, we used a qualitative approach to identify the housing concerns of three specific groups of vulnerable older Canadians. We believe that our results will contribute to discussions about how housing need is determined in Canada and potentially expand the current definition of housing need. Although the results are not intended to be generalized to other groups of older adults within Atlantic Canada or in other jurisdictions, they can be of particular benefit in gaining a better understanding of the concerns of specific groups, especially those living outside major urban centres, and in identifying future research areas. We anticipate that our findings will spark interest in knowing more about these and other groups of vulnerable older adults and in learning how to better meet their housing needs.

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