

Aging at home in the diversity of urban and rural forms in Québec, Canada

An exploration of territorial issues as seen
by their inhabitants

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abstract

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As part of the “Age-Friendly Cities” (AFC) initiative, Québécois municipalities are called on to develop thinking with a common assessment protocol aimed at the implementation of facilities and services for more inclusive and active ageing. In this context, while mobility depends to a great extent on individual characteristics, the attributes of the territory also have an impact on the mobility potential of its inhabitants and their possibility to contribute to society. As such, the relative functional diversity, residential population density and territorial accessibility of the central districts of large towns are often presented as more favourable to ageing than suburban areas. So where does that leave medium-sized towns, peri-urban territories and rural areas? Are they home to substantially different, and even contrasted, development issues requiring a particular AFC policy? In this article, we look at the role played by development and urban planning in the construction and consolidation of territories favourable to ageing according to different living environments. We start by proposing a typology of residential forms in six regions of Québec (Outaouais, Laurentides, Lanaudière, Montréal, Laval and Mauricie), highlighting common but often contrasted, and even differentiated, issues. We then debate these issues in the light of seven discussion groups organised with seniors in these territories. While the complexity of the issues appears fundamental, their common denominator is that the combination of proximity and accessibility proves to be a privileged and fundamental subject of multidisciplinary discussion and intervention.

Keywords: ageing; urban planning; AFC; urban form; metropolitan; medium-sized town; rural; at-home

PUBLISHER'S NOTE

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The proportion of the population aged over 65 has increased continually since the start of the 2000s. In Québec, this trend is true in metropolitan areas such as the Montréal Metropolitan Community (MMC), as well as in medium-sized towns and rural municipalities. Through its scale, the demographic transition has raised visibility on ageing far beyond the issues of health or ageing at home. It has also highlighted the range of challenges set in terms of development and urban planning in metropolitan and rural territories by differentiated environments offering a varying extent of opportunities and possibilities to their inhabitants.

The differences between metropolitan and rural environments mainly lie in the morphology of urban forms (street grids, volume, and height of buildings, etc.) and their functional configurations (presence of services, diversity of functions). In the research conducted on these aspects for numerous years (Newman *et al.*, 1995; Wiel, 1995), urban environments – central, accessible, densely populated and generally favourable to active mobility – are often contrasted with suburbs or peri-urban areas (Apparicio & Séguin, 2006; Lord & Després, 2012), considered as less favourable to ageing mainly due to dependency on cars. The issues we address in this article involve two distinct but inter-related forms of mobility: daily mobility (Orfeuill, 2005), i.e. individual mobility within a habitual geographical territory, and residential mobility (Amiot & Merlin, 2005, p. 543), namely a household move to change residential environment, occupancy status, type of dwelling, size of dwelling, or several of these characteristics at the same time.

It would be a good idea to start by defining the experience of ageing and the relationship to the city of seniors in different residential environments. A problem of understanding appears to persist regarding the complexity of obstacles that environmental characteristics can pose to ageing at home. These characteristics are generally considered through the contrast between the “urban” and the “suburban” or “rural”, no account being taken of the diverse specificities of these types of territories. In this respect, despite a certain number of physical barriers (entrances, stairways, inclines, urban furniture) or functional barriers (distance, transport, signage) faced by ageing people (Lawton, 1986, 1998), the relative functional diversity, residential density and territorial accessibility of the central districts of large cities are seen as favourable to ageing compared with suburban environments (Fortin *et al.*, 2002, 2011; Negron-Poblete *et al.*, 2014; Després, 2021). But where the issues behind these urban forms are addressed, the approach is largely a generalised one, leading to a lack of understanding concerning the problems experienced by seniors as well as the advantages offered by different types

of residential environments for ageing. How could certain morpho-functional characteristics lead to a positive experience of ageing at home (Clément *et al.*, 1998; Després & Lord, 2005; Lord & Després, 2011) for senior inhabitants? Does the presence of substantial differences or contrasts mean we need to step up or specify approaches such as Age-Friendly Cities (AFC) [Dahlberg, 2019; Van Hoof *et al.*, 2021] that are already firmly in place around the world?

This article focuses on development issues posed by the various urban, metropolitan and rural forms in a North American context. More specifically, we investigate the possible concordance between the physical, cognitive and socio-economic capacities of ageing individuals and the functional dimensions of the residential environment. We do so by exploring the experiential relationship to space with seniors living in different environments on the basis of a typology of residential environments and several discussion groups. We address the experience of ageing according to aspirations on lifestyle, residential project and socialisation in different forms of urban environments. And in response, we posit a series of hypotheses to be explored on the basis of the issues posed by ageing in different urban forms.

Approaching realities in ageing according to different residential environments

An overview of the literature using the keywords “ageing”, “environment” and “mobility” shows the key importance of town planning and the residential environment to a positive ageing experience, notably as concerns the socialisation of seniors and the preservation of their abilities to remain active and in good health or to maintain independent mobility. This vital aspect forms one of the bases of the AFC approach promoted by the World Health Organization (WHO). Considerable attention in this regard has been paid to the study of the opportunities, challenges, and attachment of seniors to certain types of residential environments, such as North American and European city centres (Berger *et al.*, 2010) or the typical residential suburbs constructed in the 1950s and 1960s in the New World (Davison *et al.*, 1993; Fortin *et al.*, 2002, 2011; Patterson, 1997). This work is often built on comparisons of the advantages of the “city” in opposition to the “suburbs”. While distinctions between “urban”, “suburban” and “rural” living environments¹ are still widely used in research on ageing, a number of authors recommend studying them as a continuum of urban living rather than as clearly defined urban areas (Menec *et al.*, 2011).

And while these categorisations are the subject of much debate, several authors stress the considerable variability of opportunities and challenges observed in the same residential environment considered as “urban”, “suburban” or “rural”. For example, a study by Keating, Eales & Philipps (2013) underlines the substantial differences observed in the

1. “Urban” refers to the city centre, relatively densely populated and well equipped in terms of local services. “Suburban” refers to environments with relatively low population densities, developed according to mono-functional zoning dominated by single family dwellings and where a car is necessary to accessing shops and services. These two types of habitat are integrated in metropolitan areas. “Rural” refers to territories located outside metropolitan areas where the habitat is located in sectors urbanised to varying degrees, including forests, farmland and resorts, and where shops and services are located in villages or medium-sized towns.

ageing experience in two so-called “rural” communities in Canada: Robertville (Ontario), a village of 3,000 inhabitants located 156 km from Toronto (4.6 million inhabitants), and Borough Bay (Nova Scotia), a coastal village of 1,500 inhabitants devitalised by the loss of its manufacturing industry and the decline in its population. In contrast to the “bucolic” ageing experience of seniors in Robertville, a village stimulated by the growing inflow of a community of engaged and active retirees, the seniors of Borough Bay are faced with the increasingly pronounced disappearance of shops and services in their community.

In the same vein, Mahmood *et al.* (2012) stress the differences involved in the ageing experience in various districts of the same metropolitan region, particularly as concerns the feeling of safety in daily journeys, transport issues (public transport service, traffic, comfort, etc.) and the diversity of available destinations, as well as support networks for seniors.

These results echo the differences observed in other work on the experience of ageing in terms of several dimensions related to the location and form of the residential environment. For us, four particularly important aspects are to be taken into account when studying the opportunities and challenges presented by various types of urban or rural habitats:

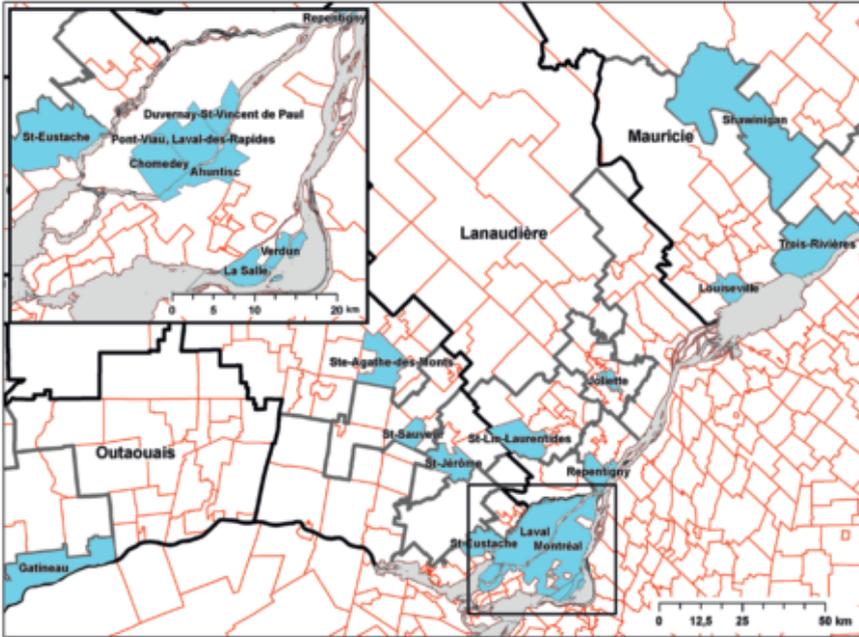
- property prices and the average cost of housing (Blein & Guberman, 2011; Lavoie *et al.*, 2011);
- the form and type of dwelling in which seniors live (Lord & Després, 2011; Iwarsson, 2012);
- public transport service, walkability and the accessibility of destinations (Negron-Poblete, 2015; Kerr, 2012; Hallgrimsdotir *et al.*, 2015; Wennberg *et al.*, 2009);
- the availability of places for socialising (third-party venues) and public amenities (parks, libraries, community centres, etc.) in the territory (Kent & Thompson, 2014; Annear *et al.*, 2014).

As a whole, the characteristics relating to location and urban form identified as decisive in the literature are clearly still the same as those updated by the WHO in the research behind the AFC project (WHO, 2007). However, as underlined by Keating *et al.* (2013) or Van Hoof *et al.* (2021), the relative importance of those characteristics is expected to vary strongly according to the particular context of the cities or regions where seniors live, and notably whether or not the living environment falls under the influence of a metropolitan area.

Methodology

This article is part of an applied research project on ageing, town planning and health funded by a “Concerted Action” programme led by the FRQ-SC Québec research fund for society and culture. One of the aims of the research was to analyse the issues posed by current and future ageing in planning and development. As such, it explored the living environments of six administrative regions² “retaining” or “attracting” over-65s (Figure 1). These environments were then described according to their morphological and functional characteristics in the form of a typology. To explore the obstacles and opportunities of these residential environments in terms of ageing, discussion groups were organised in each type of residential environment with inhabitants aged 65 and over, some living in senior residences and others in the community. This article presents the results of the eight discussion groups.

2. Outaouais, Laurentides, Lanaudière, Montréal, Laval and Mauricie.

Figure 1 > Six regions studied and the municipalities selected concentrating ageing

Source: Paula Negron-Poblete, 2016.

Creating a typology of residential environments

A typology of residential environments was established on the basis of the morphological characteristics of the dissemination areas (DAs) of the Canadian census, i.e. the smallest geographical unit (between 400 and 700 inhabitants) for which exhaustive and systematic data can be obtained on the built environment in Québec. The DAs were divided according to whether or not they belonged to a census metropolitan region or census agglomeration (CMR/CA). For each of these two zones, a principal component analysis (PCA) of the social characteristics of the housing units of the DA was carried out with the following aggregate variables:

- 1) construction period of residential buildings;
- 2) type of dwellings;
- 3) density of dwellings;
- 4) density of people;
- 5) form of occupancy of dwellings;
- 6) condition of dwellings³.

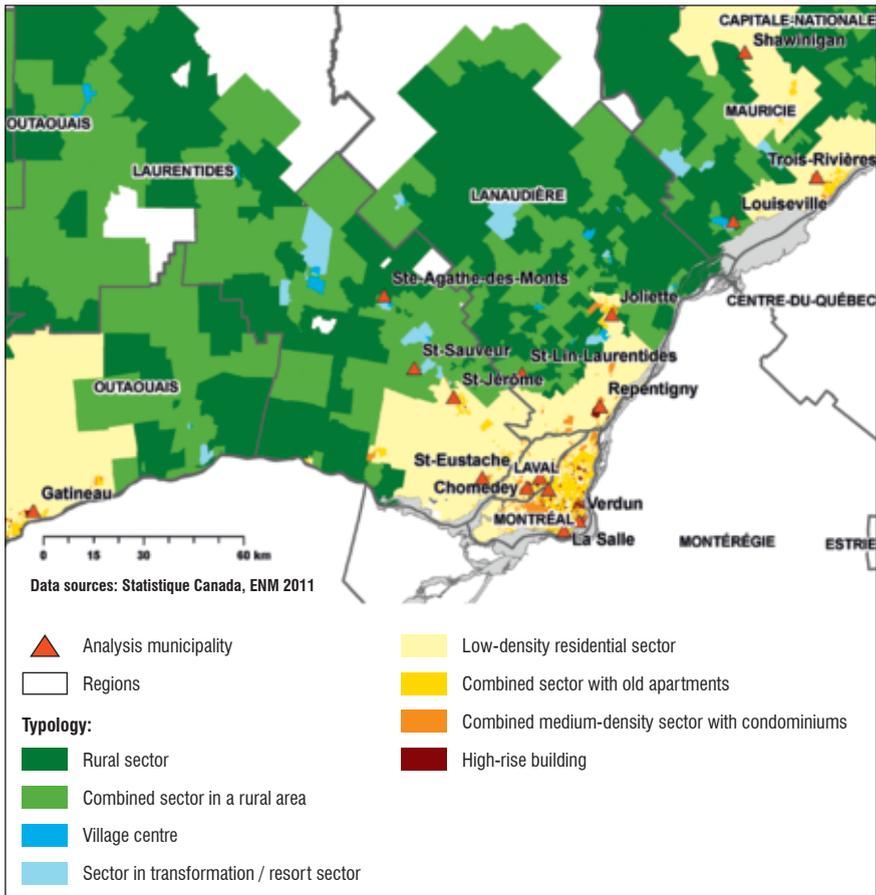
These variables were aggregated on the basis of the National Household Survey (NHS) of 2011 carried out by Statistics Canada. The PCA gave rise to five components for DAs

3. For the categorical variables, the percentage of the categories was used for making the calculations.

located in a CMR/CA, explaining 73.3% of the variance, and four components for those not located in a CMR/CA⁴, explaining 61.8% of the variance. An ascending hierarchical classification (AHC) analysis used for these components resulted in the definition of eight types of residential environment (Figure 2, Table 1).

In terms of our objectives, this typology of residential environments serves to identify sectors likely to pose distinct town planning challenges for ageing. The Low density residential sector category (Figure 3e), with its fairly low-density population of single-family

Figure 2 > Typology of residential environments



Source: Paula Negron-Poblete, 2016.

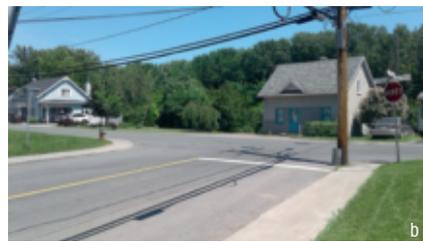
4. For DAs in CMRs/CAs, the following components were selected: 1) single-family dwelling on large plot of land; 2) two-storey apartment in poor condition and ageing; 3) recent condominiums; 4) densely populated residential towers; 5) single-family houses in a row. For DAs outside CMRs/CAs, the following components were selected: 1) tenants of densely populated apartments; 2) recent building outside village centre; 3) condominiums and housing units in a row; 4) other old buildings.

ensembles, has already been extensively documented (Berger *et al.*, 2010; Clément *et al.*, 2005) and is home to well-known issues in daily mobility, stemming from the distance of shops and services. Dependency on cars is naturally greater in rural environments (Figures 3a and 3b) with very low housing densities, as demonstrated by Pochet & Corget (2010) in peri-urban areas in France.

Village centres (Figure 3c), with their housing densities and diverse housing types, may stand as an attractive relocation option for rural seniors seeking to “casser maison⁵”, as they offer a core of services accessible without a car and an ease of mobility comparable with that of combined medium-density sector (Figures 3f and 3g). These last can be divided into two types, the first made up of apartment-building sectors built between the 1920s and 1960s, the second composed of sectors with a burgeoning offer of new condominiums. While both types offer similar “urban” advantages, they are nevertheless home to clearly different challenges resulting from the forms of housing units, the characteristics of which may pose numerous adaptation challenges in the case of old apartments or prohibitive costs in the case of condominium sectors (Figure 3g).

The case of high-rise apartment building sectors (Figure 3h) is more complex. These sectors have characteristics close to those of transforming or resort sectors outside metropolitan environments in terms of relatively new housing units with services (developed formally to varying extents) supporting ageing locally, as well as neighbourhoods relatively isolated from the rest of the city. The high-rise apartment building sectors may sometimes include housing specifically adapted to the realities of ageing, though visible in different forms of residence (tower rather than resort village) and territory (metropolitan rather than non-metropolitan). The offer here is relatively contrasted but attracts a majority of over-65s changing residence (Marois *et al.*, 2018; Marois *et al.*, 2019).

Figure 3 > Non-metropolitan residential environments and metropolitan residential environments



5. An expression used in Québec meaning to abandon one type of life for another, used to refer to people selling their house to live in a smaller dwelling, or sometimes in a retirement home. It can be translated roughly into English as “household disbandment”.



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Figure 3a: Rural sector: sector with a very low residential density, combined with a dispersed habitat and the widespread presence of farmland.

Figure 3b: Combined sector in a rural area: a low-density sector with more varied urban forms (single-family houses, small plex)⁶.

Figure 3c: Village centre: sector associated with village cores in rural areas. Village centres have slightly higher land use rates, where the residential fabric is combined with the presence of old shopping streets, often in the process of revitalisation.

Figure 3d: Sector in transformation / resort sector: sector on the far outskirts of metropolitan areas with tourist and resort areas in the vicinity. This type of territory corresponds to seasonal residential sectors but has an increasing population of people choosing to reside in the sector on a permanent basis all year round.

Figure 3e: Low-density residential sector: the most common sector of all the zones studied, covering territories developed for the most part after the Second World War. These sectors are located in the suburban or peripheral territories of metropolitan regions.

Figure 3f: Combined sector with old apartments: corresponding to the old manual labourer districts of the city centres of metropolitan regions, and also to be found in the centres of the immediate suburbs. These sectors are home to considerable commercial and residential diversity.

Figure 3g: Combined medium-density sector with condominiums: city-centre sector in metropolitan regions, often located close to combined sectors with old apartments. Land use and residential environments are diverse. The presence of condominiums results from more recent construction in the built environment.

Figure 3h: High-rise apartment building sector: developed more recently, often on plots having undergone a significant change in land use.

6. Plex: income-generating property with two (duplex), three (triplex), four (quadruplex) or five (quintuplex) housing units.

Discussion groups

On the basis of the types of residential environment identified, we met with residents of each investigated region through discussion groups (Geoffrion, 2003). Discussion groups are a flexible and rapid way of collecting and analysing the viewpoints of the players involved. Implemented extensively ahead of the marketing of products or services, they serve to explore the preferences and attitudes of a homogenous group of people and establish a consensus or divergences as to the issues discussed. [Table 1](#) shows the types of residential environments, the municipalities, and the number of participants for each of the discussion groups organised in autumn 2016.

Table 1 > Types of residential environments and participants in the discussion groups

Sector	Residential environment	Municipality	Number of participants	Age of participants
Metropolitan	– High-rise apartment building sector – Combined medium-density sector with condominiums	Îles-de-Sœurs (Montréal) (pop.: 2,025,928)	6 (2 M) (4 W)	80-82
Metropolitan	– High-rise apartment building sector – Combined, with old apartments	Pont-Viau (Laval) (pop.: 443,192)	7 (2 M) (5 W)	72-88
Metropolitan	– Combined medium-density sector with condominiums – Low-density residential sector	Saint-Eustache (pop.: 45,276)	9 (2 M) (7 W)	65-89
Metropolitan	– Combined, old apartments	Gatineau (pop.: 291,041)	6 (6 W)	74-92
Non-metropolitan	– Low-density residential sector – Combined, old apartments	Shawinigan (pop.: 49,620)	12 (4 M) (8 W)	67-89
Non-metropolitan	– Village centre – Combined rural and resort zone in transformation – Rural	Louiseville (pop.: 7,158)	7 (3 M) (4 W)	70-86
Non-metropolitan	– Village centre – Combined rural and resort – Rural	Joliette (pop.: 21,241)	5 (5 W)	75-90
Non-metropolitan	– Low-density residential sector – Combined, old apartments	Trois-Rivières (pop.: 139,163)	7 (3 M) (4 W)	67-81

Source: Statistics Canada, Canadian Census, 2021.

Ageing at home in urban and rural forms

The seniors we met in our research were first asked about their daily mobility (mainly on foot) and travel habits in their neighbourhoods and, more broadly, in their region of residence. The discussions then moved on to other modes of transport and the day-to-day use of shops and services. The aim of these discussions was to highlight differences in the obstacles and opportunities perceived by the participants in the various residential environments.

An initial major difference was observed in the discussion groups. For those organised in territories issuing from metropolitan regions (Île-des-Sœurs, Pont-Viau, Gatineau and Saint-Eustache), the discussions focused on the space of the residential district, whether this was located in the centre, in peri-central districts or close suburbs. For the groups organised outside metropolitan regions (Louiseville, Shawinigan and Joliette), the discussions mainly concerned broader territories, with the prime considerations being the town, village or hamlet of residence in relation to a medium-sized town⁷ nearby.

The third phase consisted in talking with the participants about their residential aspirations and preferences as well as their past and current criteria for choosing residences. To conclude, the participants were asked to talk about the place attributed to seniors in the city in general, and the residential district in particular, together with the quality of dialogue and recognition demonstrated towards seniors in their residential environment. This section is split into two parts, the first addressing transport and daily mobility, the second concentrating on residential aspirations and preferences.

Mobility, transport and walkability in local environments

The seniors we met with unanimously considered walking as an important everyday activity in that it fosters a healthy lifestyle. Walking serves to organise several of their relationships to the district and notably social participation, particularly among individuals living in residences for seniors. The seniors walk to “[...] *stay healthy*” and “*to get out and see people*”. The deterioration in health that comes with ageing often affects the capacity to walk and this last can be seen as a loss: “*I like walking, I used to go on long walks, but I don’t have the balance anymore.*” These journeys on foot are made on a daily basis and sometimes more than once a day. A consensus was once again reached in the discussion groups as to the “*necessary*” nature of this activity (getting out is seen as “*good for morale*”). All the seniors also said that they walked in the day and rarely in the evening, unless they really had to. Winter considerably limits daily outings, even in the daytime, particularly among people with reduced autonomy afraid of slipping on ice or snow.

In all the discussion groups, though not for all respondents, difficulties stemming from age substantially limit the distance covered on foot or via public transport. The situation is even more difficult for those using walking aids, such as walkers and walking sticks, to get around. Two factors distinguish seniors having the possibility to maintain an active lifestyle and possibilities to socialise from those who have to content themselves with the activities organised at residences or those confined to their homes owing to the lack of a social or family network: access to local spaces (alone or accompanied) and the ability to get around on foot. This observation is fundamental in that the residential location may play a role but the quality of the local situation is vital, regardless of the type of residential environment.

Spaces dedicated to walking, arrived at in different manners, differ significantly in metropolitan regions or in more rural regions, but possibilities also differ as regards the number

7. The definition of “medium-sized town” varies in Québec. It refers to towns with a population between 15,000 and 50,000. The status is conferred on towns offering a commercial structure and services serving neighbouring towns, villages and rural area, or an even broader region.

of accessible destinations. Consensually speaking, though, the seniors seek relatively similar environmental attributes and urban qualities. These include being able to access areas on foot (benches in strategic locations, smooth surfaces, curb ramps, low-gradient pavements, regular ground levels, sidewalks in good condition, etc.), the calmness and safety of walking spaces (sufficient street lighting, co-existence with motorists and cyclists, absence of groups possibly seen as a threat, etc.) and the presence of greenery (developed green spaces, trees and shrubs maintained to keep walkways clear, shadowy areas, etc.).

Whether outside a metropolitan zone or not, the local environment of the place of residence is crucial⁸. In the opinion of the discussion group participants, the local environment is sometimes lacking in attractions, which does not encourage them to walk or, for those with access to these zones, directly or via a friend or family member, leads them to drive to the closest places of interest. On a unanimous basis, shopping centres play a major role here in the intensity of walking, as well as the number of activities carried out. This lack of atmosphere is closely related to the dearth of events in districts or residences for seniors, and to the perception of safety. As observed in previous work (Fisker, 2011; Lord & Després, 2011; Després, 2021), the car offsets in part the problems of accessibility experienced in the local environment by seniors. However, it is also possible to drive somewhere and then walk where the accessibility is better, and this is the case both inside and outside metropolitan regions. Acting as a crutch supporting journeys to spaces perceived as “walkable”, the car takes the participants, alone or accompanied, to shopping centres, public spaces or parks and walking trails, located in natural surroundings and suitably laid out. The discussion groups gave rise to this type of consensus, but no consensus was reached on the definition of what constitutes a good layout, owing to the variety of the contexts and individuals and the difficulties involved in their representation.

That said, all the participants said there was “a life with (or still with) the car” and “a life after the car”, which involves considerable changes regardless of the region under consideration. Access to a car obviously brings with it a sense of spontaneity, freedom and flexibility. It also contributes to safety (physical and dietary) and social relations for the participants living outside metropolitan regions. This is a key aspect in differences between metropolitan and rural areas. Even if rationalised use is made of the car, when driving it or access to it becomes more difficult, it remains an important asset that is used “until the end”.

In metropolitan regions, all types of residential environments combined, the participants unanimously spoke about being “close to everything” and living “five minutes away from services” such as food stores, shops and entertainment and socialisation venues. The context varies considerably on an individual basis, but the discussion groups did not enable us to explore these limits in more depth. Outside metropolitan regions, in rural or resort zones, distances are considerably longer, “sometimes more than an hour by car”, in the case of La Mauricie or Lanaudière, from shops and everyday services. The dependency on surrounding medium-sized or regional towns is particularly strong in environments subject to economic decline (including Shawinigan and Louiseville). The seniors we met there were obliged to travel to the largest cities (such as Trois-Rivières) to acquire what they see as more interesting products. Access to quality food is vital for the most remote participants. The existence of large shopping centres, often at highway

8. The local environment can be considered as within a radius of 500 metres from the place of residence, or an area considered as accessible by foot.

intersections, requires car access and negatively affects the local retail offer, which is more suited to the mobility capacities of the seniors in the discussion groups.

The participants from metropolitan regions make relatively little use of public transport, although some of the participants in old apartment sectors or low-density residential areas with good bus networks say they use it from time to time. Outside metropolitan regions, transport services are practically non-existent or are so mismatched with activities whose hours cannot be controlled that they are not used. Public transport is used for shopping or socio-cultural activities in major destinations that are well served and can be easily reached in functional terms (frequent service, flexible times outside rush hour, limited changes, etc.). But those living in retirement homes sometimes have access to a shuttle service to shops, generally once a week. This service may be organised by the retirement home or directly by the retailers. For occasional activities located in more remote destinations, outside regular networks, seniors use adapted transport services, where eligibility is approved by a doctor and where they are available, or count on family, friends, or volunteers to get from A to B. Even in metropolitan sectors with extensive public transport networks, access to the city and a social life is not the same for all.

On a relatively consensual basis, and with varying degrees of difficulty, visiting a doctor or a clinic or going to the shopping centre or church inevitably entails rather complex planning. Seniors need to be aware of the possibilities in terms of services, routes, costs, times, and availability, as well as how long the activity will take (and above all the return time when using adapted transport). This planning is easier in metropolitan regions and village centres outside metropolitan regions than in more rural, combined and resort regions, where seniors simply do not have the same possibilities and are obliged to rely on their personal motorised networks (family or friends). For most of the seniors, taxis are not a realistic option owing to their cost, transport distances and times, as well as clearly negative perceptions of the taxi business. These observations confirm the cross-cutting problem of travel in the daily life for seniors, as well as hypotheses on the complexity of and differences between the types of residential environment we explored.

Residential aspirations and preferences

Seniors living in retirement homes talked about the importance of having “a plan B”, of planning their residential situation in the event of a loss of autonomy or serious problems in daily journeys. Many of them have already experienced situations of temporary immobility at home, either for themselves or their partner. Participants living in the community had no particular plan, saying they would think about it when the time would come. As in much research on the question since the start of the 2000s (AARP, 2000; Lord, 2011; Wagnil, 2001), the option of ageing at home as long as possible is taken to the limits of functional problems, and even autonomy and safety problems. Again as part of this approach, the possibilities of adapting to an environment providing residential stability hinge to a large extent on the day-to-day mobility of the individual or the members of their entourage.

On the question of residential choices, the seniors we met had relatively contrasted criteria, depending on whether they lived in a metropolitan region or a more rural region, and independently of the urban forms focused on in our study. The metropolitan divide also appears to separate the residential behaviour of seniors. Looking beyond needs for

home services and care (provided in some homes or available via personal networks), which are closely linked to problems in mobility and daily travel, the socio-economic vitality of the environment appears to structure the choices of the participants.

The discussions organised in metropolitan urban forms, whether in low-density residential sectors, old apartment, high-rise apartment buildings or combined sectors, imply a range of choices, both in terms of place of residence and destinations visited on a daily basis. Residential forms in these areas are adapted to varying degrees to the lifestyles of retirees and older individuals in various sectors of the agglomeration. While the choices are not unlimited, the options discussed by the participants are extensive in several price brackets. The amount of rent is crucial when choosing a residence with services, as is the length of time that they will live there (*"I don't think I'll have enough if I live to 100"*).

It is also possible to find apartments with services for retirees in their former place of residence or one nearby. The property market is extremely dynamic in this respect, with developers producing a relatively varied offering both in terms of location and the price ranges available (Fernandes *et al.*, 2010; Bigonnesse *et al.*, 2011). In metropolitan environments these residences are often located close to shopping centres or urban amenities adapted to the lifestyles of seniors, such as parks and metro stations, or near main shopping streets (Séguin, 2011). While this proximity improves geographical access, it is not always synonymous with walkability (Lord & Negron-Poblete, 2014), as discussed earlier. But the diversity of the transport offering, be it public or private, enables the participants to reach their daily destinations with relative ease.

While several participants from metropolitan regions living in a serviced residence said they had visited a few residences before moving in, all of them knew at least one before leaving the family dwelling. A large majority of the people we met lived in places consistent with their residential trajectory or that of their descendant relatives (close to children, family members or family home). Relating to aspects of home, the continuity of the residential experience is thus possible despite a move, where individuals are able to remain in their familiar district and retain their familiar networks. The flexibility of the offering, notably in the Montreal region, has also enabled some respondents to find a residence with amenities and services, of their own choice, close to friends and children outside their district.

The situation outside metropolitan regions is more complex. Village centres and combined sectors have a relatively good offering of residences with services for seniors. However, the ranges are limited, as are the number of units available, so people may have to wait several months before moving to the residence of their choice. Relocating outside their living environment is a reality for seniors having previously lived in rural or resort sectors. Such a move – in most cases to a medium-sized town (Louiseville, Joliette) or a regional agglomeration (Shawinigan, Trois-Rivières, Gatineau) – involves a reinstallation, but one that is nevertheless carried out within existing family or friend networks. Several participants knew one or more people living in chosen residence with services, which may have made their choice easier. Unlike participants from metropolitan regions, a relocation to move closer to one's children is not considered if they live outside the living environment. Leaving would mean the loss of a sizeable part of everyday life and the feeling of being at home. *"Going to live near children, to see them a few times a month, and losing the world you know"* is not a solution.

Compromises, then, are more common and “acceptable” for participants living outside metropolitan regions. These individuals pointed out relatively problematic trends that can make the residential experience more difficult. Even people living in village centres note the devitalisation of local services, shop closures (particular food and clothing shops), and the rarefication of healthcare services. This process of devitalisation is occurring to the benefit of regional agglomerations (Shawinigan, Trois-Rivières) or metropolitan agglomerations (Québec, Montréal, Ottawa). It is “*difficult to find good-quality food or clothes*”, even “*in the city*”. While the participants do succeed in finding residences adapted to their needs, and often close to some services, this regional devitalisation requires them to travel long distances to metropolitan areas, particularly for healthcare and specialist doctors. In this respect, the participants living in La Mauricie and Lanaudière regions in the communities where the focus groups were organised said this phenomenon was slowly creeping into their districts: “*There used to be more shops in Shawinigan, now it’s really basic.*” It is an advantage for people living outside metropolitan areas to have high purchasing power with their retirement income, but it is undeniable that the increasingly pronounced loss of shops and services to the benefit of regional or metropolitan agglomerations is adding increasing pressure to seniors and municipalities alike. Seniors are obliged more and more to travel to other agglomerations to purchase goods or receive services. This accentuates the problem of capital flight for municipalities and, hence, their ability to develop better living environments for their population. While this observation comes as no particular surprise, it once again underscores the need to resituate the issue of ageing in regional areas within the broader issue of the socio-economic development of small municipalities under metropolitan influence.

On the need to address town planning issues in a differentiated manner

Our discussions with the participants in the focus groups organised in six different regions highlighted the contrasted issues in town planning as well as in regional development. This strengthens the idea whereby different types of residential environment call for a more nuanced approach to issues in ageing, town planning and healthcare. We shed light on the variants, contrasts and often significant differences between the various territories analysed. Three series of issues emerged from the discussions, leading us, for now, towards the construction of working hypotheses for the continuation of our work.

Issues relating to the continuity of local spaces

The first series of issues consists of relatively unsurprising questions concerning the balance to be struck between the scale of the city and that of the residential environments of ageing individuals and seniors. The walkability of territories (local scale) and districts (larger scale) is vital to the daily life of the participants as well as to the realisation of their residential projects. The place of residence is chosen using criteria on accessibility and proximity. The Age-friendly communities program is of particular relevance here, as it reduces senior/environment friction in numerous key destinations or places of residence. These questions are central to a number of the problems discussed with the participants, including complicated access to public spaces resulting from a lack of connectivity in the street network, problems crossing wide boulevards to access amenities situated locally, and the lack of urban furniture (benches, shaded places) for people able to walk. This raises the question of the continuity of routes leading to activity venues.

It is obviously easier to properly link up destinations in more densely populated and functionally mixed environments, such as village centres, sectors combining old apartments and condominiums, and, to a lesser extent, some parts of residential sectors with good public transport services. In this respect, it is the quality of the local environment that matters rather than the metropolitan position, even if, as mentioned earlier, this last determines a large part of the opportunities in the local offering of services and shops.

Issues relating to the metropolitan position of residential environments

The second series of issues concerns the organisation and adaptation of lifestyles and travel in the different residential environments studied. Regarding the primary objective related to ageing at home, i.e. doing so for as long as possible, different urban forms lend new dimensions to mobility problems. In addition to exacerbating the problems seen repeatedly in suburban or peri-urban environments, functional and economic difficulties such as the public transport service in spread-out, mono-function environments and mobility and travel in rural or combined resort environments also make them more complex. The discussion groups demonstrated the considerable pressure placed by the everyday mobility of seniors on their family, friend and community networks, mobility here not being limited to the district of residence but related to a regional approach. The risk of individuals resigning themselves to a lower quality of life outside metropolitan areas, and considerably limiting their activities, were realities discussed in real-life terms by the participants. These issues were compounded by the devitalisation of the socio-economic fabric of some non-metropolitan environments, particularly village centres and the combined sectors of medium-sized towns. Ageing in place here is not simply a question of town planning around the dwelling, pedestrian access or the presence of shops and services in the vicinity. The issue needs to be addressed on a much larger scale, as an integral part of metropolisation and regional development approaches. Ageing in place raises questions on the freedom of choice and inequalities in access to the city. In addition to coordinating and supporting the universal adaptation to the scale of the district or municipality, it would be appropriate here to take into account the local support of shopkeepers and service providers in the geographical space. The ageing of the population can thus be juxtaposed as a practical issue to regional development problems.

Issues relating to the freedom of choice

The third series of issues concerns the freedom of choice of seniors, primarily involving the decision to live in a serviced residence or to continue living independently. The focus groups highlighted the key role played by autonomy in the ability to keep living at home. Autonomy is closely linked to the individual's state of health, but also to the opportunities available in the residential territory, particularly the accessibility of shops and services, which enables individuals to maintain a certain continuity in lifestyle despite changes in their state of health. Seniors adopt multiple strategies to adapt to the effects of ageing and do so before taking the decision to move to a serviced residence. This process may entail relatively complex issues in that a number of limitations impacting needs in terms of health, transport, universal adaptation, etc. may emerge during the phase of reflection and modify the terms involved. This process, of varying length, also leads the individual and their close social network to a point where a relocation decision must inevitably be taken. But in many cases, when uninformed about the options available in the residential

environment, residential choices may end up being default choices, in respect of both the dwelling and the territory of that dwelling.

Once admitted to a seniors' residence, the ability to make choices remains considerable but shifts to another level, since it now concerns activities carried out inside and outside the residence. Living in a seniors' residence does not translate into a totally closed-off lifestyle but ensures a safe environment. However, the level of choice offered to seniors in terms of residence type remains relatively contrasted. In metropolitan environments, the high number of seniors is accompanied by a certain diversity in the residential offering. This makes it easier to live in a dwelling outside a seniors' residence, which is a major issue outside metropolitan areas, where the range and number of serviced housing units are more limited.

Towards the proposal of age-friendly zones?

Our exploration of different residential environments underlines the need to provide seniors with a diverse choice of places to live, whether it is in serviced residences or autonomously. Municipalities offering that kind of choice enable seniors to adopt intermediate lifestyles between single-family houses and an apartment in a seniors' residence (apartments in rental properties of various sizes). And for those having decided to move to a serviced residence for seniors, the possibility of choosing between several residences in their community can contribute considerably to their quality of life.

The focus groups organised in six administrative regions helped us to shed light on the multitude of urban environments in which seniors live in Québec. That diversity is accompanied by various issues at play at distinct spatial levels. On a local scale, the walkability of environments surrounding the place of residence and the ability to access urban amenities on foot are issues in which the literature and best practices in town planning already offer multiple avenues for action. This is notably the case where the aim is to provide pedestrians with more space in environments that, while initially designed with collective or active transport in mind, have been adapted to car travel over the years.

The situation is quite different where the problem is closely linked to an approach encompassing several territories. This is true in towns subject to substantial socio-economic decline and those situated within a broader regional ensemble. In these territories, accessibility to everyday amenities is not possible solely on foot or via public transport, as day-to-day mobility involves very long distances and alternatives to car travel are rare. Consequently, access to shops and services for the residents of a small municipality is closely related to the offering in neighbouring municipalities.

This being said, does the idea of "Age-Friendly Cities" really make sense? In the light of the results of the discussion groups, and to take differentiated ageing contexts into account, it seems clear to us that the implementation of the AFC approach in its current form is an insufficient response to the needs of seniors, especially those living in medium-sized towns or rural regions in Québec.

Thinking on the development of age-friendly environments, and the development of services or strategic programmes on access to territories, needs to be led at a region-wide level. While one-off initiatives can be led at local level, regional consistency remains

vital. Regarding this point, town planning and development plans setting out guidelines on the physical organisation of regional county municipalities (RCMs) are an interesting avenue to explore.

Moreover, rather than attempting to intervene across the entire municipal territory, would it not be more practical to identify and prioritise, within municipalities, sectors that are favourable to ageing and concentrate resources on them? Focusing thinking on two or three precise sectors (residential areas and places of interest for seniors) could perhaps make it easier for municipalities to respond to the aspirations identified in the discussion groups concerning the residential and mobility offering. These notably include: the possibility of several alternative solutions to housing developments and high-rise apartment buildings; fast, non-car transport links to points of interest; improved accessibility to shops and services via secure routes; and the safeguarding of a minimum number of local shops and services. These aspirations need to be considered in a coherent fashion. Concerning residential aspirations, we also put forward the hypothesis that the development of such age-friendly zones could constitute a solution for individuals who are too fragile to live in their own home but do not want to leave their municipality or live in a seniors' residence.

Yet a number of questions still remain to be explored. Could age-friendly zones be developed so as to also respond to the needs of individuals in other age groups or with other social statuses? In the light of experiences led thus far, our opinion is yes. Taking account of ageing-related issues when drafting planning and development documents is a strategy that ensures the consistency of such work. Also, situating the issue of ageing within the phenomenon of the devitalisation of several regions serves to generate a number of hypotheses. We think that the identification of zones favourable to ageing could facilitate commercial vitality and justify maintaining certain local services despite the influence of metropolisation and regionalisation processes. But this remains to be confirmed and calls for more research on the development of "age-friendly" territories.

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