

Table of Contents

Project Overview
Literature Review
Emerging topics (themes)
Conclusion17
Focus Groups Discussion
Introduction
Findings 21
Written Survey
Introduction
Quantitative Results
Qualitative Results
Discussion
Conclusion
Limitation of Study 44
Recommendations
Appendix A
Bibliography 48
Appendix B
FRIENDLY FACTS Information Accessing and Processing52
FRIENDLY FACTS Promising Practices: Print-Based Information Design for Seniors 53
FRIENDLY FACTS Promising Practices: Internet Information Design for Seniors
Appendix C
Multicultural Focus Group
Appendix D
Participants' List
Appendix E
Written Survey Sample 64
Appendix F
Focus Group Sample Questions

Project Overview

In late 2010, Edmonton officially became a member of WHO (World Health Organization) Global Network of Age Friendly Cities. This Global Network encourages sharing experiences and mutual learning among cities and communities as part of working towards making cities more inclusive and accessible to an ageing population. The member outcomes promote good health, active participation and quality of life. Upon considering the varied needs and capacities of an ageing population, a city or community may have to adapt or change its existing structures and services.

The Vision for an Age friendly Edmonton Action Plan (2011) is a key document that will guide the city in becoming an age friendly city. The foundation of this Action Plan was "a common vision that values, respects and actively supports the well-being of seniors and promotes an age-friendly community". It was developed through extensive consultation with seniors and their caregivers and key stakeholders. This document together with the *Edmonton Seniors Declaration* (2010) and *Edmonton Seniors: A Portrait* (2010) outlines Edmonton's commitment and vision of becoming an age-friendly city. Edmonton has since embarked on a plan of strategic action to fulfill goals of an Age-Friendly city. In order to do this, nine (9) key, strategic areas and goals have been determined. The third key goal of this strategic area pertains to information and communication in order to provide "seniors and those who support them easily access information they need when it's required" (Vision for an Age-Friendly Edmonton, Action Plan 2011, page 4). The Information and Communication working group has been tasked with reaching this goal by determining what information resources currently exist and how seniors and those who support them access information.

The goal will be reached in two parts:

- Part one provides information concerning information access issues that both seniors and those who support them could use to assist them in searching for information, and
- Part two will provide an interactive tool that allows users to locate information relevant to their personal needs and goals.

This report deals with Part one of the goals as it focuses on researching how seniors access information, what information resources currently exists and how and in what format do they prefer the information resources to be.

Method

The process for reaching the project goals has been conducted using the following strategies:

- Conducting a literature review pertaining to information seeking behaviours
- Identifying community leaders to assist with research and information dissemination
- Leading focus group discussions with those who support seniors and Edmonton seniors
- Completing written surveys by targeted groups and individuals
- Developing a final report encapsulating findings and observations for information access development.

Activities

In order to collect, review and search out resources and discussions for the designated strategies, the team, contracted to conduct Part one of this project, engaged in the following activities. Both quantitative and qualitative data for analyses were collected by the steps listed below:

- A comprehensive literature review was conducted that considered formal and non-formal (grey) literature and activities. Emergent themes were identified in order to provide information sources that informed the development of focus group questionnaires and discussions.
- 2. Focus groups were held with a variety of seniors and intermediaries (those who support seniors) both professionals and volunteers in Edmonton. There were 57 participants for nine (9) face-to-face focus group sessions. Focus group information was reviewed, synthesized and emerging themes developed. Total number of participants consisted of seniors as well as seniors' service providers who are also classified as seniors by age. One of the nine (9) focus groups was organized by the Multicultural Health Brokers Cooperative of Edmonton.

It consisted of twelve participants, representing five (5) cultural communities that engaged in discussions with interpretations by five (5) health brokers.

- 3. Two individual interviews were also conducted with two experienced social workers to talk about caregivers and seniors who are house-bound.
- 4. There were 84 written questionnaires. Of the 84 surveys, 48 surveys were completed via email by the seniors and volunteers of two senior organizations and service providers. Six (6) surveys were completed face-to-face by the clients of a senior caregiver organization. The remaining 36 questionnaires were completed by participants during five (5) focus groups meetings.
- All findings and reviews were incorporated into a final report. This report will inform the stakeholders on how best to make information more accessible to seniors.

Literature Review

Overview

As stated in the project overview on page 4, one of the strategies that will inform this project is a literature review. The following literature review surveys recent relevant information and research (provincial, national, international resources and research) in order to construct a resource overview pertaining to seniors and information access. With this information, the Communication and Information working group will be able to determine the best methodologies for information dissemination to Edmonton seniors.

The Age friendly definition of seniors relates to those who are ages 55 and over. The literature review, however, will review information and data that primarily relates to those who are 65 years of age and older.

While conducting the literature review, the term 'older adult' was viewed as preferable to using the term 'seniors'. The literature review will use the two terms interchangeably.

Process

In order to assess how seniors access information, a review of both grey literature from Edmonton, Alberta sources (literature that is not published commercially) and published research in national and international literature was undertaken. The review of primary research took into account both current and up-to-date print and online resources spanning a timeframe from 2005 to 2013. With the exception of some seminal works pertaining to foundational issues and research, the review attempted to focus on the most current information available. In this way, the literature review will provide a broader base of information upon which to make future decisions. The review will act as a guide to future "development of an interactive tool for community use for information dissemination and decision-making practices that will assist seniors in the goal of information access" (City of Edmonton, Age Friendly, 2012).

A selection of relevant information covering a broad listing of related topics and issues has been considered but is not an exhaustive review. Information pertaining to First Nations seniors, homeless seniors, and those who have only limited access to information are not discussed because current and reliable information is severely limited for these groups.

It should be noted however, that the field of information access is also rapidly changing due to emerging technologies and keeping current with information trends will require ongoing review.

For the purposes of this review, immigrant seniors are defined as: "... people who migrate from one country to another on a permanent basis" (Li, 2003, p.1 as cited in Caidi Allard 2010).

Emerging topics (themes)

While preparing the literature review, different themes or topics and information emerged. The literature review lists four topics that encapsulate research, practices and processes that are germane to the overall question of how seniors access information.

The review also provided information that illustrated how seniors accessed information using both older and recent forms of technologies. These findings will be discussed in depth later in the document.

The five topics will be presented and discussed in the order listed below:

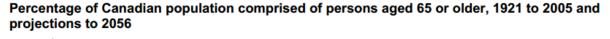
- 1. Seniors demographic context information
- 2. Information processing and accessing theories or models
- 3. Seniors (mainstream and diverse)access to information using print based resources
- 4. Seniors (mainstream and diverse) access to information using more recent technologies
- 5. Promising practices for information design.

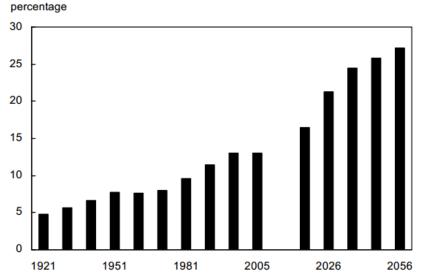
Topic 1- Seniors demographic context information

Environmental scanning- Canada

Much is being written about the burgeoning group of aging Canadians and their resultant, changing demand for information relating to their needs, wants and demands. Since the 1980s, the number of seniors in Canada has risen twice as quickly as other age groups. According to Statistics Canada (2011), the total Canadian population is

comprised of nearly 5 million citizens who are aged 65 years. This number is expected to grow to over 20% by 2026 which equates to over 10% of the total citizenry of Canada. It is suggested that this will be the highest percentage of seniors in our society in modern times with the greatest changes in the needs of older adults within the group called the 'baby boomers', those adults born between 1946 to1965. As displayed in recent decades, this specific group will be a major force in changing requests for information as well as other areas of health care, financial and social requirements. The baby boomers represent one portion of the older adult population and as such, different age groups of older adults may require different information for their needs.





Sources: Statistics Canada, Censuses of Canada; Population projections for Canada, provinces and territories.

Environmental scanning- Alberta

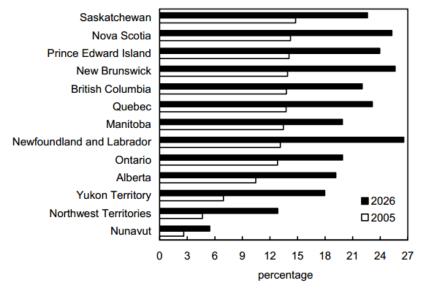
In Alberta, the growth of seniors from 2005 until 2016 will increase by 8.7 percentage points, translating to approximately 18% of the population who will be 65 years of age and over by 2026. It is possible to draw inferences that this increasing portion of citizenry may affect changes in health care, information accessing and financial and social requirements. Information from Statistics Canada 2006 and 2011, informs us that we are seeing a shift in the cultural diversity of older adults as well as other indications of change.

There is a difference in language usage for senior Canadians. Language usage information that was gathered in the early 2000s, tells us that almost all Canadians

spoke either English or French as their primary language of communication. However, those figures are changing with the growth of senior immigrants in Canada. In Edmonton, for example, information (Statistics Canada, 2011) illustrated that 30% of the senior population in the city were immigrant seniors whose first languages were neither English nor French. This key factor will affect information access and dissemination in several ways not only in terms of the languages themselves, but the cultural and social backgrounds that are deeply embedded in diverse languages. Information that is currently presented in the two official languages will not be sufficient to meet the growing information demands of diverse seniors.

It would follow that there are additional factors pertaining to information dissemination to immigrants whose social and language needs may not fall within the two official languages of Canada.

The composition of Canadian and Albertan citizenry is in flux. These key changes should be reflected in information design for access points as well as information gathering processes.



Percentage of population aged 65 or older comprised of seniors, by province, 2005 and projection for 2026

Sources: Statistics Canada, Censuses of Canada; Population Estimates, Population Projections for Canada, Provinces and Territories, 2005.

Topic 2- Information processing and accessing theories or models

To understand how individuals seek information, we will examine accessing information processes for both mainstream and immigrant seniors. This section focuses on foundational theoretical research and literature that defines the concept and processes of information seeking; lists seminal works pertaining to adult information seeking mechanisms; and finally, acknowledges that there are many barriers that can arise or currently exist in information seeking processes.

Information seeking models

The definition for information seeking is "an action through which individuals seek information to close or reduce a perceived or real information gaps" (Library and Information Science Wiki. 2013). Finding the information reduces cognitive uncertainty and allows the individual to solve problems and make decisions as to any course of future action. Individuals seek information on a daily basis through formal and informal channels. Information is sought that is personally relevant to the seeker as well as providing opportunities to initiate goals to reduce knowledge gaps. The societal structures of everyday life within which individuals act also influence what and how information is sought and what if any actions result (Caidi, 2008). Basically, information process models tell us that there are two (2) major reasons for seeking information: 1) daily, recreational or practical use information and, 2) information related to crises.

The discipline or field of information seeking behaviours suggests that there is no one theory of information seeking but rather models of processes that are subject to the individual seeker's perceived need for information (Wilson, 1999 as cited in Liswiki, 2013). Earlier models of information seeking models (Taylor, Belkin, 2000) suggested that the path of finding information was a linear process in which the seeker moved through the process in a lockstep fashion until he or she was successful in obtaining the required information.

Savolainan (1995) suggests that information seeking processes will be different when looking for information in an everyday life situation; that is to say, ELIS (Everyday Life Information Seeking) processes for practical information may be different than seeking information in a crisis situation. Information seekers may indeed use channels of information that appear to be unrelated to any specific task or problem solving actions when searching for everyday information. However, the processes that they may follow to acquire information and knowledge is guided by their previous searching habits which are based upon other factors such as social and cultural values. In this way, when information seeking becomes more urgent, the seekers may already have formed their process of looking for information through their previous practical everyday life processes. Information seeking is a complex process and many factors influence its pathways. This is an important consideration when designing information access points.

Recent models (Wilson, 2010) suggest that seeking information is an iterative process and less simplistic than originally thought. "We understand information behavior better within social contexts and as integrated with cultural practices and values" (Bates, 2010 retrieved from <u>http://pages.gseis.ucla.edu/faculty/bates/articles/information-behavior.html</u>).

Some studies organize information seeking behaviours around two major topics: information seeking for daily issues and information seeking for crises. How seniors search for different types of information for daily issues is not well developed. What has garnered more research are health information seeking behaviours. Initially seniors tend to turn to physicians and pharmacists for information and then to family and friends while printed resources are a secondary conduit for information (Erickkson-Backa, 2011). Within recent years, using the internet to locate health-related information has occurred. Information is usually sought after the senior has discussed the issues with health care providers, but this process may be changing in today's world of internet access.

Current research about the information accessing behaviours of immigrant Canadians suggests that there are differences in information seeking processes. "Information behavior research has grown immensely from its scattered beginnings earlier in the twentieth century. We now have a much deeper and less simplistic understanding of how people interact with information. We understand information behaviour within social contexts and as integrated with cultural practices and values" (Bates, 2010 retrieved from http://pages.gseis.ucla.edu/faculty/bates/articles/information-behavior.html). The information seeking behaviours will also be discussed in upcoming topics.

In summary, a perceived need for information to fill a gap of knowledge or understanding propels seniors to search for information. The ways in which older adults look for information will be discussed in Topic 3.

Topic 3- Seniors (mainstream and diverse) access to information using print based resources

When older adults sought information, local Edmonton area research (2007; 2008; 2013) suggested that seniors were more comfortable using radio, television or newspapers to locate information upon which to make decisions. We also know that seniors may approach friends and family when commencing their information searching. The personal face-to-face contact remains a key positive action for their quest for information.

Culturally diverse seniors

There can be language issues which preclude using only English or French language documentation as we know that there is a growing number of seniors in Canada whose first language is neither English nor French. Resources that pertain to culturally diverse seniors and their information searching processes (Caidi, 2010) suggest that written information in other languages is key when developing resources. Although seniors from other countries of origin may initially approach family, friends and community sources for their information needs, there remains a need for print documentation for the other community members that assist this group of seniors. As language usage reflects cultural standards, processes and social organizations, it is important to translate information to other key languages in order for the reader to feel connected to the information search in a different homeland.

Topic 4- Seniors (mainstream and diverse) access to information using more recent technologies

Use of internet, email and social media

The growth of information communication technologies (ICT) and computer usage has increased dramatically for all Canadians with access to these technologies. In 2005, general computer usage had changed from 16% of the general population to over 67% of persons accessing the computer and internet. Computer use has become part of everyday life for many Canadians. Between 1990 and 2003, the share of households with a personal computer increased from 16% to 67%. Internet penetration followed suit, with the share of households accessing the internet from home more than tripling between 1997 and 2003, rising from 16.0% to 54.5%.

The share of senior-led households with home computers has seen internet access increased from 3.4% to 22.7% and access among households headed by someone aged 55 to 64 increased more than four-fold (Figure a).

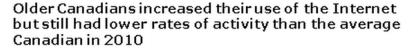
Canadian statistics (2011) suggest that 67.5% of seniors use the internet daily. Only 3.1% of this age group use the internet less than once a month. Usage relates to email and social media usage rather than searching for information or participating in online shopping or streaming movies. Using email programs is the core source for online communications. As of August 2011, 86% of internet users ages 65 and older use email, with 48% doing so on a typical day. Among all adult internet users, 91% use email, with 59% doing so on a typical day.

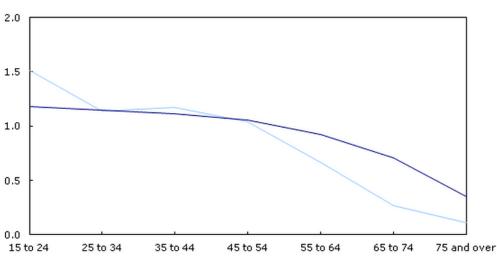
Often viewed as the purview of younger users, Canadian and international statistics tell us that the age group with the fastest growing use of the internet, is older adults aged 65 years of age and over. In the United States, as of 2012, 53% of Americans over the age of 65 were using the internet or email. Although seniors are not the age group with the largest numbers of users, this increase in use of internet in this particular age group is significant. Seniors are using the internet to stay in touch with friends and family, primarily through the use of email programs or social media such as Facebook.

Email activity lessens once the users reach their 70s. The research does suggest as the baby boomers reach their 70s, there will be more changes. This prediction is based on several factors; the formal education level of baby boomers is usually higher than older

seniors, they may have been exposed to internet usage in their education and employment, and that seniors live longer than before. Other changes for the literate baby boomers are suggested as they begin to enter the later years. There may be a need for new products or information access points that include gathering information via an e-reader. It is difficult to predict some of these changes with any certainty. There will be continued change and this may well introduce additional demands for flexible information options in the future.

However, when attempting to determine how seniors may access information pertaining to different information needs, the resources invariably discuss using the internet for seeking health information. The search suggests that older adults use the internet for searching health information after they have engaged in face-to-face discussions with their health care providers. This is the process of seeking patterns that have been discussed in the information seeking topic. After face-to-face discussions, older adults will then seek additional information by searching the internet.





relative rate of activity



- 2010 – Used the Internet in previous month

Note: See Data sources, methods and definitions for actual question wording. Source: Statistics Canada, General Social Survey, 2000 and 2010.

Figure a

Topic 5- Promising practices for information design

Part 1. Print-based design requirements

In addition to knowing where older adults search for information, access points and information topics must consider how information is presented in order to maximize learning and absorption of information. Good design is required for both print and online materials. We shall examine print-based information design in Part 1 of this topic and Part 2 will focus on internet design.

As stated earlier in the literature review, there are physiological changes that happen throughout the ageing process. There are also cognitive changes which determine the ways in which information is read and interpreted. According to resources developed for the National Institute of Ageing in the United States, the physiological and cognitive changes that are normal in the ageing process may invoke changes in how information is presented.

"Older people may have to work harder to:

- Process information quickly, such as recalling new facts and interpreting charts
- Understand text that is densely packed with new ideas or contains complex syntax
- Draw inferences
- Solve new problems
- Manipulate different types of information at the same time
- Focus on important new information without being distracted by irrelevant details".

Adapted from: Making Your Website Senior Friendly. National Institute of Aging (2001).

Knowing this about the information users, suggests the following for content development:

- Be direct and specific. Present information in a clear and familiar way
- Limit the number of key points
- Offer manageable number of action steps
- Use positive statements and active voice.

Adapted from:

Making your Printed Materials Senior Friendly. National Institute for Aging (2001). The main thread of the design rules centres around making information easily understood by the users in a clear, direct and active manner.

Part 2. Internet design for older adults

Not unlike print-based design, online information sources also must consider the changes that the ageing process presents for seniors. Changes in eyesight acuity, hearing and co-ordination need to be considered when designing. Also, a portion of the seniors grouping do not have experience using online information sources. This is a consideration when designing any online information and to that end, the following key points should be considered and incorporated into the online materials. However, the baby boomer seniors may be both more internet literate and more likely to read books. A shift to e-readers for this age group may result in changing business models for technology developments for reading away from the computer screen as well. However, when considering internet information design and usage, the following key points should form part of online design best practices:

- Break information into short sections
- Group related topics visually
- Put the key message first
- Write in the active voice
- Give specific instructions
- Allow sufficient white space on the web page to ensure an uncluttered look
- Put all text in uppercase and lowercase letters. Never use all capitals.

Adapted from: Making your Website Senior Friendly. National Institute of Aging (2001).

As stated in the tips for developing print materials, similar principles of design apply to online information materials as well. The major considerations for both resources are the ways in which older adults now require pathways to information based on the changing information- seeking patterns and physiological changes.

Conclusion

After an extensive review of literature, resources and references, building an understanding of how older adults access information has also revealed the following conclusions. Persons who are 55 years of age and over do not represent a homogeneous group and as such, designing or establishing protocols for information dissemination must consider different needs for different aged users and audiences. We have been informed of the differences of language, cultural practices and age groups within the term of seniors thorough out this review as well. These factors too are key in information design for older adults.

As discussed earlier, the changing demographics of this group centres on more culturally diverse seniors whose first language and indeed perhaps only language, will be neither English nor French. When designing information access points, other languages should also be considered.

The current research has stated that older adults may be using internet seeking behaviours for information that is primarily related to health care. The studies suggest that besides using email or some social media sites, older adults do not appear to use this form of communication to gather information pertaining to many other topics not related to health care. Given the increasing number of baby boomers in this demographic, accessing information other than health-related issues is a distinct possibility as the boomers may have had more experience with current technologies and have more developed information-seeking behaviours due to higher levels of formal education.

However, the importance of print materials cannot be underestimated. Printed material that is easily obtained and easily understood by all seniors remains key to information seeking success, although this may change in the future. The notion of intermediaries (service providers, volunteers) who assist seniors with information seeking is also a key factor in design of information as the intermediaries must also be able to forward information to seniors that they too have been able to find easily and comprehend easily.

Internet information accessing changes implies that designing sites for use primarily by older adults should be on trend and future looking at the same time. One should also

consider the usage of handheld devices such as smart phones to rely information to an increasingly tech-savvy group of older adults.

Having stated this future possibility and its resultant information design processes, the notion of disseminating information via electronic avenues should be tempered with the realization of what is being called the 'digitally disengaged' in an ageing population. With physiological changes that may occur with ageing, new and future barriers to access to both electronic and print-based materials should be considered. Although the literature review discussed current practices in design for both online and print materials, the media used to transmit this information such as computers, note books, smart phones etc., may not reflect the abilities of older adults. Ongoing technology changes may not take into account changing motor skills or visual acuity skills when products are designed. Information dissemination processes should be mindful of these possible changes within this specific demographic.

In conclusion, designing access points for older adults is a complex and changing process. What older adults may state today as access point requirements may change within different ages of the older adult demographic. Care must be taken to ensure information access points are renewed on a regular basis to maintain easy and relevant access and information themes:

- Wide grouping of persons as seniors; not a homogenous group
- Changing demographics, more culturally diverse as time goes by and as baby boomers push through into the 70s. There are implications for design, language usage and cultural practices
- Internet usage may move from just seeking health information to other areas of information
- Future seeking design
- Ever changing online resources, hand-held devices and social media uses make it difficult to design for future.

Adapted from: Mashable.com (2011).

NOTE:

In order to present some key information in an abbreviated form for ease of use, three tip sheets titled, Friendly Facts in Appendix B, have been developed incorporating the

information discussed earlier in this document and from the focus group discussions and written surveys.

Focus Groups Discussion

Introduction

This section summarizes the findings from all focus group discussions and two individual interviews. The number of participants in all focus groups ranged from one participant to eleven participants. The breakdown of the total 59 participants is as follows:

- Eight (8) focus groups with a total 45 participants organized by seniors' organizations (Appendix D)
- One multicultural group with 12 participants representing five (5) different communities (Appendix C)
- Two (2) individual interviews (Appendix D).

The design of the focus group meeting asked participants to complete a written survey at the beginning of the session to allow the group facilitator to gather quantitative information and assist participants to focus on the discussion questions. After having two (2) focus group meetings, it was found that some seniors were either reluctant to complete the written survey or to complete the surveys by themselves. The design was thereafter revised.

At the beginning of each subsequent focus group meetings, participants were given the choice of completing the written surveys while having discussions or just having the discussion without completing the written survey. Two (2) focus groups decided not to complete the survey and proceeded immediately into the discussion. The other four (4) focus groups completed the individual surveys in between the discussions. There was also one individual at a focus group who did not complete the survey but participated in the discussion. Answers to some questions on the written surveys are included in the written survey section (page 34) and not repeated in this section.

The multicultural senior focus group meeting was organized by the Multicultural Health Brokers Cooperative with 12 participants from five (5) communities. Interpretations were provided by five (5) brokers. The five communities were: Ethiopia, Eritrea; Chile and Equador (Spanish-speaking); the former Yugoslavia/Bosnia; Iraq; and Korea. Their discussion questions were similar to that of the other eight (8) focus groups. They did not complete the written survey. Their discussions are included in this section wherever appropriate. A complete report of this focus group meeting is in Appendix C.

Findings

Seniors are not a homogenous group. Their information needs and the ways in which they access information are influenced by their experiences, their health, the stages of their life and their personal circumstances. Many of the younger seniors did not think of themselves as seniors until their health failed or an event that made them admit that they were seniors and that they needed help.

This was a snapshot of how these Edmonton seniors who participated in this project accessed information at this time. As readers, you will find that the discussion of the questions relating to access covers the wide range of preferences and needs. It was noted by the focus groups that, although small segments of the boomers have entered their senior years, majority of them have not. When majority of the boomers enters their senior years, answers to the accessibility questions will be different.

In general, accessing information is shaped by how seniors from different age groups think and how their physical mobility influences information access. Based on age, the participants stated that:

- 55– 65 age group use many different strategies: internet, talking to relatives and people in their network, print, telephone
- 65-75 and 75+ mainly use telephone, print materials and talking to people, such as family members, friends, service providers and informal leaders.

Due to language and cultural barriers, most multicultural seniors go to their own cultural organizations, to their community leaders both formal and informal, or to the brokers at the Multicultural Health Brokers Cooperatives.

In this study, the focus group participants were active seniors who were members of senior centres and many of whom were helping other seniors as service providers or volunteers. They did not require many senior services for themselves. However, they did access information for the people they helped formally or informally. They also have a wide range of sources from which they can access information.

The findings are grouped under seven (7) headings with unedited comments, wherever possible. In general, each unedited comment is not attributed to a focus group except as requested by the group.

When information is accessed

When being asked how they access information, most participants made an implicit assumption that the purpose of accessing information is to solve problems. The problem could be as simple as learning how to dance or as complex as locating housing that could meet their health, financial and home support needs. Nearly all the answers to when do they look for information were based on this assumption. This explained why during the discussions, there were comments made that they were not looking for information.

However, when they talked about reading newspapers, watching television, listening to radio and conversations with other seniors at the senior centres or coffee meetings, they commented on acquiring information to "file" it for future use. From the discussions, there was only one comment about accessing information all the time, while there were over 10 comments about seeking information when there was a need.

- "All the time"
- "Informally, by talking to people at the Senior Centre."
- "Senior access information when they need help."
- "Seniors don't look for information until there is a crisis."
- "Information may be given but no one reads it. Because they don't need the information at that time."

Kinds of information accessed

Housing, home support, i.e. snow shoveling and taking the garbage to the curb and health, were the top three kinds of information that the participants were seeking. In addition to housing, the multicultural senior sought information about income support benefits and immigration.

Methods of accessing information

This discussion is based on using currently available information. Most of the seniors talked about going to places that were familiar and trusted by them, to ask a person for information. The people they talked to may be a friend or a staff of a senior

organization. The places included their community hubs such as senior centres, recreation centres, libraries and coffee shops. For those living in supported-living housing, information was gathered from housing staff and from printed materials that were in their housing facility. A few mentioned asking their family members or using the phone to talk to a person. Very few participants use 211 as they did not know that 211 existed. 211 is the new enhanced senior information telephone line that was launched in December, 2013.

- "The situation with seniors is fluid. It can change any time or with different seniors."
- "...Need the same information in different formats in many different places." (Greater Edmonton Alliance)
- "Active seniors in the community have a variety of information sources including doctors, senior centres and church."
- "Ask friends and family..."
- "We use our network to find out where to go to get the information directly" (Spanish-speaking seniors).

The majority of participants commented that seniors use a combination approach to look for resource materials as well as talking to people they trusted. They may talk to a trusted person after they have accessed and read some information. Or they may ask someone they trust first and then read the written information.

- "Look for information, ask someone to help."
- Talk to someone to "...define the problem, clarify the situation and talk about solutions, then follow up."
- "Information ... in plain language and with access to "real people" as support."
- "If you need information and you belong to a seniors centre, you will go to the seniors centre (staff)."
- "One on one, face-to-face, over the phone".

Participants also talked about getting information via 'word of mouth' through intermediaries. Intermediaries include service providers, caregivers, formal leaders,

informal leaders, volunteers and community connectors. The participants stated they would approach someone that they thought had the knowledge or was 'in the know'.

- "The person who is in his/her life" is the one who would ask questions.
- A senior who lives in a senior complex said, "they asked me... they know that I will find the information for them..."
- Another senior was always approached by her sister to answer questions relating to senior services. She gave her sister the answers and her sister then passed the information on to other seniors in her condo building.
- "It is best to learn about something in a group environment. Seniors like gatherings, socializing is very important."
- *"We rely on our kids or approach the broker from Multicultural health brokers cooperative"* (the former Yugoslavia/Bosnia seniors).

Print materials

Many participants talked about using the SAGE (Seniors Association of Greater Edmonton) Directory and senior centres' newsletters to get information.

• "The best way to access information for seniors is via a print directory with general topic headings - SAGE's is a good one".

Internet/websites

The discussion of using the internet was related to the discussion of using computers. Many of the participants did not use computers. Those who go to websites commented that it is difficult to find information on the websites. Sometimes, they do not know if the information is accurate or not. There were others who said that they asked their grandchildren to search for information on the internet.

- "Use websites but very difficult to find information."
- "Young seniors know computers. They can get information from the Internet.
 Older seniors don't know computers or don't have computers."
- "Low income seniors can't afford a computer and most are fearful about learning how to use one. So they get annoyed when the advice is 'to go on the Internet'".

Other media - television, radio and newspapers

The response of using television and radio as an information source was mixed. Most said they did not watch television. More participants listened to radio. The radio stations mentioned were CBC, CFCW and CHED and CBC.

Preferred format for information

The preferred way or format for information is mainly verbal and not written. Participants preferred to get information from a person face-to-face or over the phone. There were strong negative comments about automated phone services.

"Talking to a real person on the phone is the real thing!"

There was also discussion on the best information to give is where to get information.

• "If you need information, here are some places to look."

The multicultural seniors talked about having information workshops.

"Regular information workshops for seniors in different languages" (Korean seniors).

Television (TV)

TV was not viewed as a preferred format for seniors. It is considered a good format to reach 'isolated' seniors. This will be discussed further under the isolated seniors subsection.

• "But TV should be a source of good information. It is an important piece in any communication strategy because it reaches the isolated seniors".

Websites

A number of people do look for information on websites. But they raised the issue of how to determine which website can be trusted. Other comments are:

- Many websites are "Not clear...too many words."
- "...The way information is presently organized on the Internet is too timeconsuming."
- "Print resources are hard to update. So if this directory (SAGE) were on the web and topics were suitably organized, that would be useful".

Print materials

- *"If you have printed materials, you always have it."* This statement speaks loudly why most participants still prefer print materials as one of the formats. Although some prefer only using print materials, most prefer print materials combined with verbal information. This indicates that giving information in different formats is important.
- Print materials reinforce what a senior may be told verbally. "... need both... hearing and sight may be declining... memory is going... can forget what you were told."
- *"Information translated into first language"* (Ethiopian/Eritrean seniors)
- *"...Regular newspaper in... (our)...languages"* (Iraqi seniors)
- "Creating a "mini-version" of the current seniors directory (produced by SAGE)– should be in first language and include only the most relevant things– the information our seniors would like" (Former Yugoslavian/Bosnian seniors).

Location of print materials

Information has to be available where the seniors are located. Information access points could include: seniors' centres; recreation centres; doctors' offices; religious or faith gathering places; pharmacies; hospitals; libraries; coffee shops; financial institutions; and supermarkets. The participants commented on several occasions that printed information was not available at places where seniors regularly visited such as doctors' offices.

- "Information (should be available) at the point where stuff is happening."
- "Seniors go to grocery stores, pharmacy, doctor's office and church." Some gather at regular coffee spot.
- "Doctor's offices... Most have nothing... Same for walk-in, emergency clinics. And if they do carry pamphlets, not one thing relates to seniors!"
- "DynaLife medical labs, Royal Alex Women's Pavillion have TVs with the same information repeating itself. Could surely use some senior information here".

Making seniors information more easily accessible

The participants provided a wide range of suggestions. The key suggestions centered on having different formats in many different places with some form of personal interaction to guide them in their search for information. For information on the website, they suggested that there should be one entry point and that the website itself needed to be easy to navigate and tested by users or their peers.

- *"The same information in many formats at many places" on Internet, websites, TV radio and print in various places"* (Greater Edmonton Alliance)
- "...Need one source of truth.."
- "Centralization (of information) is important. There has to be communication between agencies and government departments involved in the same areas—e.g. home care, transportation."
- "Information collected by 211 for their database on senior organization used by their operators can be shared among all organizations. All organizations can work towards updating the information regularly."
- "211 can be a one-stop information and referral."
- Needs a "site with validity", i.e. a site "whose information you can trust".

Provide opportunity for personal interaction

- Most of the seniors are used to getting information from a person. So they want "A person that knows, that understands the information I need."
- "Many seniors do not have the self-confidence to do something. They need a coach to help them along... It just gets a little harder to do things."
- They need someone to guide them to navigate the layers of information and the different terminologies. *"After you found the information, how do you know what to do? What questions to ask and how do you ask it?"*
- "Getting information from the internet, then talk to someone who knows more about the subject."
- "Creating spaces where groups can come together regularly... have workshops to share information. There could be, for example, a partnership with a senior's centre- they have information and space but don't have first language" (Spanishspeaking seniors).

Marketing of available senior information and services

The general comment is that it is good to advertise to seniors. However, it is just as important to go to people around them, such as family, friends and neighbours. Many different ways of promotion such as fridge magnets and posters were discussed with emphasis on coordination and collaboration. These advertising tools are to be distributed at the places where seniors visit or congregate.

- "Coordinate our marketing, i.e. SAGE, 211, senior centres."
- "Promoting 211 using fridge magnets."
- "Could have fridge magnets at places where seniors are: doctor's office, medical clinics, senior centres, pharmacy, housing facilities, golf club."
- Promotional materials ".... containing telephone numbers or where to get information."
- "Have good sized posters in senior centres and libraries."

Promising practices for information design

Most of these comments refer to information design regardless of the medium used. How the information is organized is a foundational design concept that could be adapted to the unique characteristics of each medium.

- "...Make it simple so senior knows where to go for help."
- "...Large font, plain language and short to the point... further details to be given by a person not a machine. Large headline at the top."
- Design for both seniors and the people who support them, *"there is a hook for intergenerational"* usage.
- *"Organize information in the way seniors would be looking for..."* and not in terms of each organization or government organizational structure such as:
 - "By topic"
 - "Also by community or area of city– SW, SE, NW, NE"
- "In black and white, colour changes are difficult for some people.."
- "The website has to be more intuitive."
- "The website needs useful powerful search function."
- "Information in English and French and other languages".

Isolated seniors

Isolated seniors include those who are house-bound and/or do not belong to a senior's network. There is a need to systematically identify isolated seniors and find out how they access information. At the moment, isolated seniors are usually identified through referrals or when they called senior centres. Most senior centres have outreach social workers who help house-bound seniors.

- One way to identify isolated seniors is *"from the public, such as neighbours who are part of the Lamplighter program."* The Lamplighter program works with community partners to watch for seniors who are at risk in the community.
- The social infrastructure of faith groups is important to many seniors members who need help can often get it from their church groups– churches can find people to get meals to housebound seniors and someone to come in to clean their house when recovering from an injury, etc.

One key issue with isolated seniors is transportation and length of time it takes for those accessing the DATS (Disabled Adults Transit System) program to wait. It was also mentioned that DATS has a policy limiting the people eligible to ride in DATS. For example, if a spouse is the caregiver and needs to accompany the partner to a doctor's appointment, DATS is not allowed to transport the spouse/caregiver as well. So the senior does not get the proper help as the spouse does not arrive at the destination same time as him.

Television (TV) is a good medium to provide information to isolated seniors. Their contact to the outside world is usually through TV. Some suggestions are:

- Use TV as a "public service announcement"
- Have seniors information at "a set time"
- Set up teletext (broadcast teletext) pages
- Establish "a dedicated channel for seniors or one station could deliver information at a set time each day for 1 hour".

Written Survey

Introduction

The written survey had a total of 11 questions. It contained both quantitative and qualitative questions. It was distributed by email and face - to - face during the focus group meetings. This survey was based on the *Access to Information Survey, Aging in Place Project,* Millwoods, March 2012. This written survey form is in Appendix E.

Of the 84 completed surveys, 48 surveys were completed by email and 36 surveys were completed during five (5) different focus groups meetings. Participants of three (3) focus groups chose not to complete the surveys.

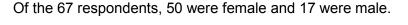
The findings of the written surveys are divided into two parts:

- Quantitative results and,
- Qualitative results.

Quantitative Results

The respondents were encouraged to answer all the questions. However, not all the questions were answered on all 84 completed surveys. Therefore, the number of respondents for each question varies. The number of respondents (n) is indicated below each chart.

Demographics of the respondents Gender



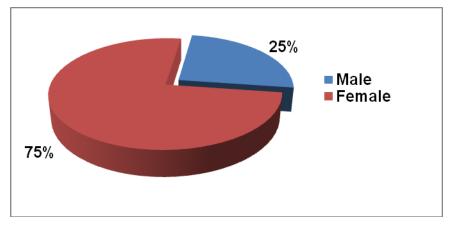
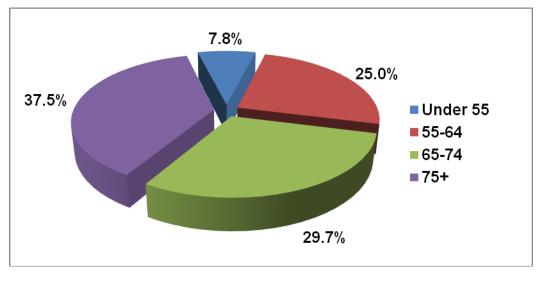


Figure 1 n= 67

Age

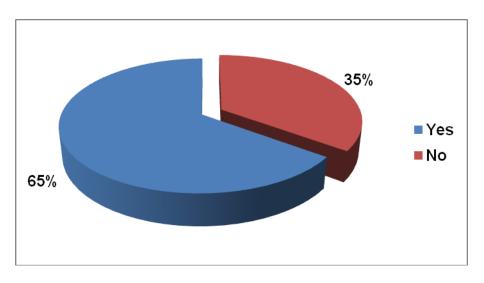
Of the 64 respondents, five (5) were under the age of 55; 16 were between the ages of 55 to 64; 19 were between the ages of 65 to 74, and 24 were 75 years old and older.





Are you the person providing support to seniors?

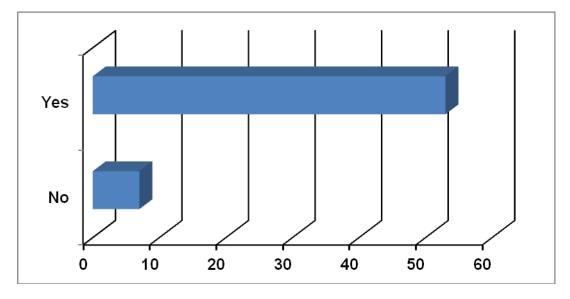
The respondents, who support seniors, include volunteers and service providers.





Do you use a computer daily or weekly?

Of the 60 respondents, 53 respondents use a computer daily or weekly.





What do you use the computer for?

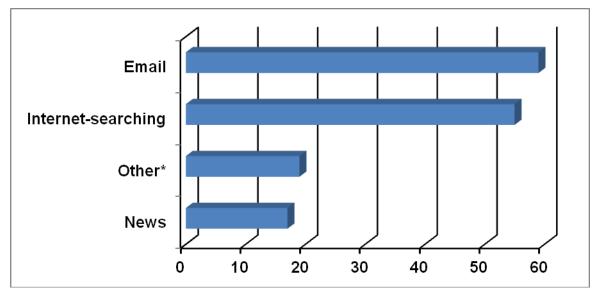
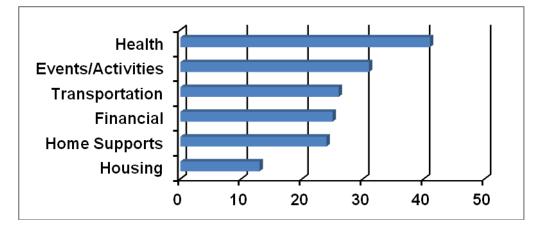


Figure 5 n= 53

*Other usages of computers are: taking notes, making spreadsheets, games.

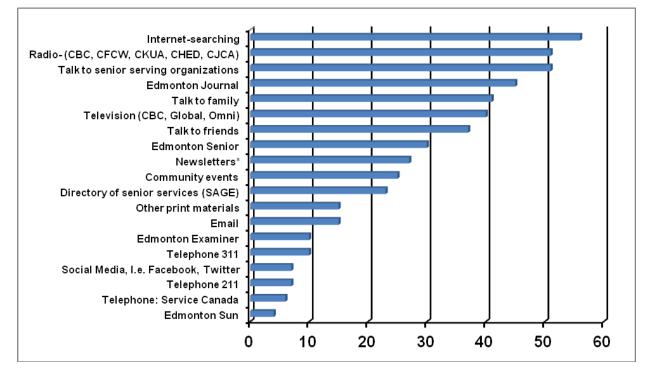
In the last 12 months, what kind of information did you need? (Check all that apply)

The respondents are active seniors. Health information is on the top of their list followed by events and activities. Their need for home support is primarily snow shoveling.



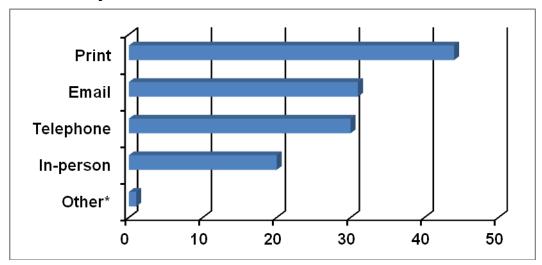


How do you get information? (Check all that apply)





*Newsletters mentioned are those of senior centres and community leagues, Seniors United Now). Other print materials included government publications and posters.



How would you like to receive information?

Figure 8 n= 84

*The only comment of 'Other' is *" a combination of all (options) to reach a broad audience*".

How do you prefer the information to be organized and made accessible?

Of the 84 respondents, 39 prefer on a website, 35 prefer a printed directory, 20 prefer telephone line.

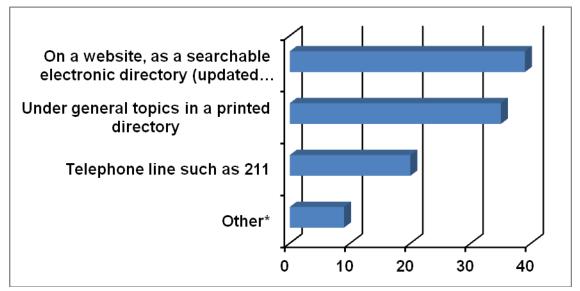


Figure 9 n= 84

*Other includes *"in person, multiple sources, in person contact, at senior centres, recreation centres".* Detailed comments are listed on page 36.

Qualitative Results

There were three open-ended questions on the written survey:

- What kind of information is hardest for you to get and why?
- What is one thing that you would like Age Friendly Edmonton to do to make it easier for you to find information?
- Other comments.

The answers to these questions are organized under four similar headings of the focus group discussion findings. Wherever possible, unedited comments are included inside the quotation mark.

Methods of accessing information

Most respondents commented how Edmonton seniors access information is influenced by "*where they came from*". To make information more accessible to the seniors, there is a need for:

- "Multiple sources"
- "A combination of all these (ways) to reach the broad audience of seniors".

A majority of the comments relate to accessing from a person. Typical comments are:

- "In person"
- "To talk to a real person on the phone"
- "Sit down face to face counseling/interview".

In terms of where information should be made available, the responses are:

- "@ community orgs such as senior centres or rec centres"
- "Health centres, medical clinics, physician offices".

Preferred format for information

In addition to answering the question on choosing their choice of preferred format (Figure 9 on page 33), there are many other comments.

	Comments (Unedited)		
	"One-stop access to information for senior services."		
One entry point to all	• "Bring information together at one site."		
information	• "Have a central contact email or phone number."		
	• "One point of entry– 211. Include information on		
	society, churches."		
	"Use plain English"		
	"Up to date"		
	 "Large print" 		
Format- Print	 "Create information centre/library of pamphlets" 		
	"Consolidate all directories into 1 comprehensive		
	directory; separate government services agencies		
	from not-for-profits services from private services."		
	• "Create a user-friendly website with links to resources"		
Format- Websites	• "Make it easy accessible. Some sites are very difficult		
	to navigate"		
	• "Keep information current."		
Format- TV and radio	• "Launch an information television program"		
	• <i>"Advertise on media, radio, TV."</i>		

Hardest information to find

Some respondents commented on the organization and navigation that make the information hard to find.

- "It is not so much the kind but how information is organized."
- "Navigation is critical for me. So much information, how do you make sense of it?"

The respondents identified seven (7) subject areas that they find hard to find information about. The variety of areas speaks to the fact that the needs of seniors are varied and is influenced by what they need at the moment.

	Comments (Unedited)
Housing	 "Housing options are complex and dependent on a multitude of factors." "Housing for persons with disabilities, alternative
(7 comments)	 <i>ifestyle.</i>' <i>"Housing, especially if you are in the low income category."</i>
Health (5 comments)	 <i>"Health care system is fragmented."</i> <i>"Mental health assessment and support."</i> <i>"Sometimes medical related info is hard to track down."</i>
Finances- Programs and benefits	 "Federal and provincial financial information, poor communication services, poorly written- not senior friendly, no direct service provision for help with forms."
(3 comments)	 "Information to support such as income supplements." "Getting information from government for help as to who
Government Services (3 comments)	 will look after me when I am left alone. I have no money. Can I depend on the help available?' "Service Canada information, very complex to access."
Home support – Housekeeping, snow shoveling (3 comments)	 <i>"Help in home for housekeeping or outside with snow, there often is a lack of providers that are affordable."</i> <i>"Who qualifies for senior services, i.e. snow shoveling, home and yard services."</i>
Home Care (3 comments)	 "Parameter for obtaining home care. How does CCA determines who gets what as far as care hours. Can decision by care management be appealed if your needs are not met?" "Continuity of care as medical condition deteriorates."

Making senior's information easily accessible

The respondents provided many valuable suggestions. Some key suggestions are:

- "As people age and their needs are constantly changing and evolving ... (need to) ensure to continue to measure their needs. There are so many ways to reach people, utilize all possible methods of media to get the message out and collect information to see what is most effective at the time."
- Finding a way to make information accessible to the seniors who are "shut in". A typical comment is: "...get info to seniors (who are) shut in/isolated and people in long term care."
- "Advertise 211."
- "Inform not just seniors but other organizations...about resources available."
- "Educate primary care physicians re: referrals to service providers".

Discussion

This written survey provides feedback from 48 seniors and people who supported seniors. These forty eight seniors did not participate in the focus group meetings.

57.1% of the respondents completed the survey on their own and had the freedom to not answer some questions. These results should not be analyzed in isolation by itself. They need to be collaborated with the findings of the focus group discussions.

Conclusion

The findings of the written surveys, the focus groups discussions and the interviews consistently reflect the fact that seniors access information in many different ways and in different preferred formats. How they access information is guided by their experience, training and their physical capability. The key findings from these three data sources address similar issues expressed in different ways. It is suggested that information dissemination is a multi-faceted process and requires sound communication plans to be able to maximize information access.

When information is accessed

Accessing information was being viewed solely for the purpose of solving a problem. Participants' comments focused on they will look for information when they need it. Yet the participants mentioned listening to news and hearing about programs, services or an issue during social activities. They do not have immediate need for this information. However, they will 'file' it away for future reference. This gathering of information during the course of everyday life is what the literature referred to as Everyday Life Information Seeking (ELIS). In summary, the seniors acquire information in their everyday life unintentionally and look for information intentionally when they need to solve a problem or what the literature referred to as "filling an information gap."

Kinds of information

The kinds of information that the seniors were looking for are: health-related; events/activities; transportation and financial issues (senior benefits); housing and home support i.e. snow shoveling. For the multicultural seniors, in addition to housing, income support benefits and immigration related information are on the top of their list.

Methods of accessing information

The results of the focus group discussion indicated that seniors use a combination of different methods to access information. They favoured asking friends, informal leaders, social workers of a senior centre or family members for information. Other methods included using printed materials such as the SAGE (Senior Association of Greater Edmonton) Directory and senior centres' newsletters; listening to the radio; watching TV and searching the internet. The written survey results showed that the top seven ways

seniors access information (in descending order) are: searching the internet; talking to senior serving organizations; listening to radio; reading the Edmonton Journal; talking to family; watching television; and talking to friends. The difference of the number of respondents among each option is between one to six, a relatively small number. The complete written survey results can be found on page 29. This confirms the fact that no single format is suited for all seniors. Seniors use multiple ways and multiple formats when accessing information.

Preferred format for information

The participants at the focus group discussions preferred accessing information verbally from a person either face-to-face or on the telephone. Although they do not mind using the telephone, they do not like automated telephone systems wherein they do not speak with a person. On the written survey, there were a total of four more respondents who preferred information to be on a website as a searchable directory over a printed directory. This again speaks to the fact that seniors are not a homogenous group. They each have their preferences.

Both focus group discussions and written surveys suggested using television to deliver information to isolated seniors. The idea of a dedicated senior TV channel or program was suggested by both.

Hardest information to find

The written survey asked what kind of information is the hardest to find. This question was not asked at the focus group meetings. However, some information related to the issue was discussed. There were seven areas of information that the survey respondents identified as hard to find. In the order of the most number of comments to the least are: housing; health; finances; government services; home support – snow shoveling; home care; and transportation. It was interesting to note that housing was the top issue that was identified by focus groups.

Making seniors information easily accessible

The participants provided a wide range of suggestions. The key suggestions centered on having different formats in many different places with some form of human interaction to guide them in their search for information. For information on the website, they suggested that there be one entry point and that the website itself is easy to navigate. Statistics Canada (2011) stated that 30% of the senior population in Edmonton were immigrant seniors whose first languages were neither English nor French; translating information to French and other languages was suggested.

• A single entry point to all information for seniors

As users of the information, the seniors want to be able to go to one 'place' and know that the information is accurate and comprehensive. Although there was a difference of opinion as to the format of a single entry point, the seniors and those who support them would like to have the information accessible from one point, be it a website, printed materials such as a directory or a telephone line such as 211 answered by a person.

• Multiple formats and available at multiple places

At first glance, this may seem to be contradictory to the issue of single entry point. This refers to specific information such as Disabled Adult Transportation System (DATS), whereas the single entry point refers to all information. Seniors, not unlike other groups of people, access information in many ways and at many different places. To reach a broad audience, information needs to be in multiple formats and made available in many locations both real and virtual.

Need for personal contact in accessing information

Older seniors are used to getting information from their friends, informal leaders and their family. Seniors who were comfortable doing their own research, mentioned they needed someone to help them navigate the available information and in formulating their question in order for them to be able to interpret and apply the information that they found; personal contact is very important.

• Marketing of available information resources

The findings indicate that many seniors do not know where information is located. They commented that information has to be available where the seniors are located. Information sites could include: seniors' centres; recreation centres, doctors' offices; religious or faith gathering places; pharmacies; hospitals; libraries; coffee shops; financial institutions; and supermarkets.

They also suggested that the information should be promoted not just to seniors but also to the people who are around them, such as friends, family members and senior organizations.

Changes to how information is organized

Most of the existing information was seen as organized to reflect the organizational structure of a government or an organization. This structure tended to present a problem for the seniors when looking for information because they were not familiar with the organizational structure. The search for information is further made complicated when the information on the website and its search engine is not as intuitive. The focus group suggested that the information should be organized and presented from the senior's point of view.

Promising practices for information design

Both the focus group participants and the survey respondents made suggestions on future information design. Some of the design issues related to writing in plain English; typeface and font size; both print and website(s) materials be organized and presented in a similar way mirroring how seniors look for information. In order to assist designers in planning information resources, the report has two Friendly Facts (Appendix B) on information design tips for both print-based information as well as internet-based information resources.

Isolated seniors

Isolated seniors include those who are house-bound and those do not belong to a senior's network. Survey respondents, focus group participants and interviewees indicated the need to have a system to identify isolated seniors, to find out how they access information and to provide support.

These findings provide useful information from the seniors as to how they access existing information, how they would like to access information and how information could be organized to enable easier access. There is no single solution or 'one size fits all' as seniors are individuals, not a homogeneous group. The written survey results leaned towards using the internet while the focus group findings favoured human contact illustrates the diversity. The comment about having information in multiple formats and in many places real or virtual speaks volumes to what is needed.

Limitation of Study

There are three limitations to this study. Firstly, the study is a snapshot in time of how current Edmonton seniors access information. Over 67% of the participating seniors are within the age group of 65 to over 75. However, the demographics of seniors are changing rapidly. Although baby boomers, those born between 1946 to1965, are starting to enter the senior (age 65) population, the majority of them have not. When the majority of them reach age 65, they will have different ways of accessing information. Therefore, the findings of this study may not be fully applicable in the near future.

Secondly, the participating seniors are those who are connected to senior organizations and do not include those who are house-bound or 'shut in', low income, and aboriginal. Although a multicultural focus group represented by five cultural groups provided information included in this report, it is a very small sampling of the existing 25 plus cultural communities in Edmonton. Further research needs to be conducted to include these groups whose needs and ways of accessing information may be different from the findings of this study.

Thirdly, 57% of the written survey was distributed and completed by respondents using email. This biased the results relating to the use of computers by the respondents.

Recommendations

The research findings provide meaningful insights into how seniors access existing information, how they would like to access information, and how information could be organized to enable easier access. There is no single solution or 'one size fits all' as seniors are individuals and they each may have a different way of finding information. Depending on the circumstance and the kind of information they are looking for, their approach to searching may also vary. It is important to recognize the need to continue to find ways to understand how seniors view information. The following seven recommendations (not in order of importance), to make information more accessible to seniors and those who support them are based upon the literature review and findings from the project focus groups, interviews and written surveys.

- Develop and promote two entry points that act as the first entry way to all available senior information. These first entry points could be in the form of a telephone line, such as the newly established Enhanced Senior Information Line - 211, or a website or a fully searchable SAGE Directory. The entry points will act as central points that refer or link those looking for information to the appropriate sources. These first entry points using different formats, give seniors the choice to talk to a person or to do their own research. Once these entry points are developed, they need to be promoted to the seniors and those who support them (intermediaries).
- Develop a self-help information seeking guide for seniors and intermediaries with sections pertaining to how to access different areas of information, i.e. health, transportation. The findings indicate that there is available information but it is very hard to navigate. This guide could assist information seekers to frame their questions using the 'correct' terminologies; to make suggestions on where to go for information and the required steps to find this information. It could be designed in different formats using existing technology such as websites; print-based documents, mobile phone applications (apps) or other new and developing technologies. The self-help guide would adhere to senior-friendly design requirements and show case how to present information to seniors. Although this guide does not replace the personal contact, it can be an important tool in assisting seniors.

- Further increase the capacity of those who support seniors to coach seniors in their search for information and give information to seniors who are unable to access information on their own. Providing sufficient financial resources to the seniorserving organizations and increasing awareness of the available information resources are possible ways to increase their capacity.
- Develop and implement strategies to involve seniors in the development of information resources. This will help to contribute to the organization and presentation of senior information from their perspectives and to the use of seniorfriendly information design.
- Develop a coordinated marketing strategy for existing and new information. This
 could include joint marketing among senior organizations and could be coordinated
 by the Edmonton Senior Coordinating Council. Marketing should be targeted not
 only to seniors but also caregivers, friends, family members and other people who
 support seniors.
- Develop strategies for government, senior organizations and communities to systematically assess how to make information more accessible to seniors. The strategies should involve seniors from all communities working together to address issues. Collectively, they can be part of the solution and have a strong voice to help guide the government and other organizations. A suggestion from the multicultural focus group is to have a multicultural senior collective to support each other, help government support them, help create solutions and improve well-being for many seniors.
- Conduct further research with seniors who are house-bound or 'shut in', low income, multicultural and aboriginal.

Appendix A

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FRIENDLY FACTS

Information Accessing and Processing

- 1. Seniors access information in two general ways:
 - During the course of their daily life lives unintentionally or incidentally. This is referred to as Everyday Life Information Seeking (ELIS) in the literature;
 - Look for information intentionally when they need to solve a problem or to reduce information gaps.
- 2. The seniors' information needs and the ways in which they access information are influenced by their experiences, their health, their stages of life and their personal circumstances.
- 3. Information seeking methods may be different depending on information being sought and the surrounding circumstances.
- 4. Information resources need to be in multiple formats and made available in many locations both real and virtual.
- 5. Information may be initially collected from friends, family, service providers or community members.
- 6. Seniors need personal contact either to get the information or to verify information found by them.
- 7. Although large number of seniors accessing verbal or print information, information seeking on the internet is increasing.
- 8. Culturally diverse seniors seek information that is culturally encapsulated and in their native languages.
- 9. Medical information is primarily sought from health care professionals.

These are the salient points summarized from the literature review and the project findings.

FRIENDLY FACTS

Promising Practices

Print-Based Information Design for Seniors

- 1. Involve seniors in the information design
- 2. Present information in a way mirroring how seniors look for information
- 3. Present information in a clear, concise and direct manner
- 4. Use every day, plain language
- 5. Define terminologies used
- 6. Use positive statements and active voice
- 7. Present information with real-life examples or stories
- Offer a number of manageable steps in order to solve information seeking issue
- 9. Repeat main points several times
- 10. Double space information wherever possible
- 11. Avoid yellow, blue and green of the same intensity in close proximity
- 12. Have adequate amount of white space on a page
- 13. Use 12-14 point non-serif font
- 14. Use graphics to illustrate key points or areas
- 15. Provide additional reference sources.

Adapted from:<u>http://www.nia.nih.gov/health/publication/making-your-printed-health-materials-senior-friendly</u> and the project findings

FRIENDLY FACTS

Promising Practices

Internet Information Design for Seniors

- 1. Involve seniors in the information design
- 2. Present information in a way mirroring how seniors look for information
- 3. Make the size of the text scalable. Use 14 point font, sans serif as the default size
- 4. Use upper and lower case letters, never in all capitals
- 5. Use high contrast colour combinations, such as dark on light background or light on dark background
- 6. Minimize the use of graphics as text. Graphics are not scalable
- 7. Use positive statements in an active voice
- 8. Be direct and specific
- 9. Make it clear how the information is organized
- 10. Write a clear, informative heading for each section
- 11. Limit number of key points
- 12. Give clear instructions and number each step
- 13. Place information into short sections
- 14. Use single mouse click where possible
- 15. Have more space around a clickable target
- 16. Minimize scrolling
- 17. Provide an audio version of information where possible
- 18. Link to additional resources.

Adapted from: <u>http://www.nia.nih.gov/health/publication/making-your-</u> website-senior-friendly and the project findings

Appendix C

Multicultural Focus Group

By the Multicultural Health Brokers Cooperative - Edmonton

Multicultural Seniors- discussion for Age-friendly Edmonton- Dec. 5/13

Organized and facilitated by the Edmonton Multicultural Health Brokers Cooperative

Participants/Communities represented, with interpretation support by 5 Brokers:

- Ethiopian Eritrean-2
- Spanish-speaking- Chile, Equador 4
- Former Yugoslavia/Bosnia- 2
- Iraqi- 2
- Korean- 2

<u>Yvonne introduced purpose of today</u>- to give City of Edmonton, Edmonton Seniors Coordinating Council ideas re accessing information

See package: 3rd page- talks about this project

Edmonton has joined cities all over word to become an "age-friendly city"

Is committed to hearing from senior and those close to seniors – how to keep seniors healthy and well

We are probably the only group giving feedback who are multicultural

"Age- friendly Edmonton" is interested in many things tied to seniors- see the one page single pocket

Our discussion today is about **communication and information** (so can easily access information when it is required). They want to hear what kind of information is needed , how you can get it and who can help you get it—getting appropriate information will help you stay more connected, supported and healthier

so together we will use this guideline:

process: are 5 questions on outline, will do each on individually and then discuss together

1. What kind of info do you look for as a senior? (imagine in last 3 months something that came up and you wanted to look something up --for self or friends)

Yugoslavian/Bosnian :

- Senior's benefits information, especially financial benefit, CDP, old age security, income supplements in general.....
- Alberta works- social welfare benefits---what kind of resources are available for seniors in Alberta
- social life of seniors/ recreation (anything that can improve quality of life)
- immigration- related- citizenship, passport info
- affordable housing

Spanish-speaking:

• Wills and personal directives – legal side of aging, health care, help with aging, home care support and home support for seniors or spouses who are aging

Iraqi:

• Income support benefits- benefit programs (once 10 year residency is up what else am I eligible for ?)- ---wants to learn more about this Canada pension, old age pension-

Korean:

- Different kinds of housing –especially affordable housing
- Social and recreation

When you are looking for that information where do you go to get it?

- Korean: SAGE, Korean association, also Korean Seniors College (special association)....and the MCHB coop
- Iraqi: leaders in Iraqi community usually have some information, our association, or sometimes we go directly to Canada place.

- Yugoslavian/Bosnian- most seniors don't have sufficient English to search on their own. We rely on our kids or approach the broker from MCHB Coop. Our community is not highly structured so don't have an association we can approach. Often times our kids don't know either...so kids will then approach the broker MCHB broker.
- Spanish:_mainly through friends and contacts in our [cultural] community. Some of us do not have computers and don't know how to find information on line. So we will ask someone first where to find the information . Then we might go ourselves, for example to Canada Place. So we use our own network to find out where to go to get the information directly. " I ask my friend, who says , " go ask Susana (broker]
- Ethiopian/Eritrean- we get information from our community leaders, from the church, from the internet

If we were to improve how information can reach community leaders, our associations, brokers, our children and ourselves- - how can we do this better? What are some solutions so that we can access the information even better than now (be creative in what kind suggest to city of Edmonton and council):

- Iraqi: radio program and regular newspaper in languages
- Korean: regular information workshops for seniors in different langauges. The information should be translated into first languages—and available at each of the community centres or churches where senior's go- or at SAGE
- Yugoslavian/Bosnian : all of the aboves, plus creating a "mini version" of the current seniors directory (produced by SAGE)– should be in first language and include only the most relevant things– the information our seniors would like. Also translated materials from housing etc- we have it currently but it is in English. If can't do "mini-version" then translate the most essential kinds of information i.e. that on health , immigration, recreation, income support
- Spanish- similar to aboves but add the idea of creating spaces where groups can come together regularly and then can have workshops etc to share information. There could be, for example, a partnership with a senior's centre- they have information and space but don't have first language.
- Ethiopian/Eritrean : information translated into first language, information about employment is important (some seniors are still young and want to work).

Is there one final thought from each table- about seniors in your community? What is one thing "Age –friendly" should keep in mind to increase well being?

• All of us have problem with language- we have family but they are very busy with their life. In the hospital, I have trouble understanding nurses. The main

thing we would like to have is some kind of hospital- one floor for the spanish-speaking, another for another cultural community etc—this is what I would like but know it is the government's responsibility .The community needs to share this problem together- we have to push the government t to do something about us.....In a way we are a minority but in another way we will soon be the "majority" of the population. And this is what we are all thinking about .

- We must come together and have strong clear voice to guide government. We are part of solution but they need to really work with us.
- How can we be together on this issue in our different languages- we all have the same need. Could we meet regularly on this? Do we need a multicultural seniors group?
- We are parasite on our families- we wish to be helped with health care, employment ---to find employment according to our profession and training...we want to work and be part of society as actively employed people. We want to use our training from home or any work to help bring in income and reduce loneliness.
- Need an intercultural seniors' collective- to support each other, help government support us, help create solutions and improve well being for many seniors.

Appendix D

Participants' List

Focus group participants

Using Edmonton Seniors Coordinating Council's members list and suggestions by the project management team, contacts were made with seniors organizations and individual service providers. As a result, six (6) focus groups were organized by the senior organizations, one (1) by a senior housing facility (Lifestyle Options) and one (1) by the 211 – Seniors Enhanced Information Line coordinator.

- 211 Committee
- Calder Seniors Drop-In Society
- Edmonton Seniors Centre
- Glenrose Rehabilitation Hospital Consumer Advisory Group
- Greater Edmonton Alliance
- Lifestyle Options
- Scona Seniors Centre
- South East Edmonton Seniors Association.

One (1) multicultural focus group organized and conducted by the Edmonton Multicultural Health Broker Cooperative.

Individual interviews

- Rachelle Gietz, Caregiver Advisor, Alberta Caregivers Association
- Sherry McKibben, Social Worker

Written survey only

By email

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With the help of Meals on Wheel, surveys were emailed to their volunteers and to other seniors organizations.

- Meals on Wheel
- Outreach social workers
- West end Seniors Activity Centre.

By printed survey

• Alberta Caregivers Association.

Written survey completed during focus group meetings

- 211 committee
 - Calder
 - Glenrose Rehabilitation Hospital

Consumer Advocate Group

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- Greater Edmonton Alliance
 - Lifestyle option
- Scona Seniors Centre.

Appendix E

Written Survey Sample



How Edmonton Seniors Access Information

This survey is for seniors aged 55 and over.

1. In the last 12 months, what Kind of Information did you need? (Check all that apply)

Financial	Health	Transportation
Home Supports	Housing	Events/Activities
None	Other (please	
specify)		

How do you get information? (Check as many boxes that apply)
 Talk to someone:

Family Friends Senior Centres/Community		
organizations staff		
Telephone: 211 311 Service Canada		
Newspapers:		
Edmonton Journal		
Edmonton Senior Other		
Newsletters: (Which ones)		
Directory of Senior Services (Which ones)		

Other print materials	
TV (CTV, CBC, Global, other channels?)	
Radio (which stations, which programs?)	
Internet – googling/searching	ail
Social Media, i.e Facebook, Twitter (Which One	es?)
Community Events (Fairs/Forums, Celebrations)	Other
3. What kind of information is hardest for you to get a	and why?
4. How would you like to receive information?	other

5. How do you prefer the information to be organized and made accessible?

Under general topics in a printed directory

🗌 On a website, as a	searchable electronic	directory (updated
regularly) and can be	downloaded	

telephone	line	such	as	211
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- Other_____
- 6. What is one thing that you would like Age Friendly Edmonton to do to make it easier for you to find information?

7. Demographic Information

Male Female
Ageunder 5555 6465 7475 plus
Highest level of education
Iess than high schoolInigh schoolIpost-secondary educationBachelor DegreeIgraduate Degree
8. Do you use a computer daily/weekly? Yes No (why not)
9. What do you use the computer for?
email Internet – searching Other
10. Are you the person providing support to seniors? □Yes □No
11. Other comments

Appendix F

Focus Group Sample Questions

These questions serve as guide for focus group discussions. Not all the questions will be asked. New questions relating to the five (5) main questions may be asked when the need arises during the discussion.

What kind of information do you need?

- In the last 3 months, did you look for information? Or what information would you like to have?
- How do you decide when you need the information? Does an incident or a discussion, for example, something happened that triggers the need for information?

How do you finding information?

• Pls. think back of a time that you need information and how you go about getting the information. What is the first thing you did?

Probing questions

- When you want to find out about a health issue, what is the first thing you do? (Health)
- When you want to know if there is financial assistance to build a ramp on their home, how do you go about finding the information? (Finances) or
- You need a walker or a wheelchair, how would you find out how to get a free walker? (medical support)
- Your family is not in Edmonton, you are going to away to visit them and you are concerned about your husband's meals. You want to know where you can get prepared meals for him. Where would you check first? (home support)
- Most of the time, were you able to get the information you need?

Where to you get information?

- Is there a place or someone or a publication or a website that you usually go to for information? If no, why not.
- •
- Do you regularly read magazines or newspaper aimed directly at people aged 55 and up/ How do they inform you?

What would say to Age friendly Edmonton as to how the information for seniors should be organized and in what format so it would be easy for you to find?

What is the one thing that you would like Age friendly Edmonton to do with senior information?