

Seniors in Alberni

Population

(2011 LHA 70)	Total Population	Men	Women
Total Seniors	5125	2500	2625
65-69	1670	865	805
70-74	1250	615	635
75-79	955	480	475
79-84	680	325	355
85 - older	570	215	355

Projections to the year 2034 see the total Alberni population remain the same at 31,704. Interesting to note, however, is the population 75 years and older is expected to increase 96% by 2034. (LHA 70, 2013)

Housing

An aging population will likely translate into an increased demand for senior's oriented housing (e.g. independent living, assisted living, congregate care, etc.) These forms of housing are under-developed in the City. If this residential niche is not filled, it will ultimately force some seniors to move from the community and cause a loss of potential service employment for this sector.

- Port Alberni Official Community Plan 2007

Port Alberni OCP – 4.1 Housing - Council Policy

- *With the projected increase in the senior's population, the provision of appropriate housing choice and range of care options shall be supported.*

Alberni Housing Statistics 2013

- There were a higher percentage of dwellings needing major repairs in Alberni (12.7%) than BC (7.2%) or Island Health (6.9%).
- There was a higher percentage of older housing in Alberni (32.9%) than BC (16.0%) or Island Health (20.2%).
- 27.4% of seniors in Alberni live alone.

Health

Port Alberni OCP - 3.4 Health Care - Council Policy

- *The City will work closely with the appropriate health care providers for the purposes of improving the provision of health care services to meet the current and future needs of residents.*
- *Support services, businesses and industries that cater to the needs of seniors and enhance quality of life will be encouraged and promoted.*

Mortality Statistics

Alberni ranked highest in deaths due to ischaemic heart disease and medically treatable diseases in Island Health and second highest in deaths overall.

Chronic Disease Prevalence

Alberni had a higher crude prevalence of several chronic conditions including depression/anxiety (29.1%), hypertension (28.9%), and diabetes (10.3%) compared to BC (24.5%, 24.6%, and 8.2%) and Island Health (27.0%, 26.5%, and 8.1%).

Hospital Admissions

- Convalescence was responsible for the most inpatient cases (127);
- Lens extraction/insertion, typically for cataracts, was responsible for the most day cases (362).

Of the 29,161 days for Alberni residents in 2012/2013:

- 28.5% were for an alternate level of care (ALC); (awaiting placement in facility)

Emergency Department Visits

Of the 21,299 emergency visits by Alberni residents in 2012/13:

- 25% were for individuals aged 60 years and older.

Economic Well-Being

10% of persons 65 years of age and over were identified as low income in 2010 (based on the after tax low-income measure) compared to 13.9% in BC and 11.1% Island Health.

- Comparatively, 21.5% of the **under** 65 population was identified as low income in Alberni.

Social Support

The analysis of interview, focus group and community forum feedback suggests two significant themes of vulnerability for seniors in Port Alberni – social isolation and safety, both of which are validated by both provincial and national research on aging (Cloutier----Fisher et. al.; 2006; United Way, 2011; Statistics Canada, 2006).

Alberni Statistics

- 27.4% of seniors in Alberni live alone compared to 25.7% in BC and 27.6% Island Health.
 - 60% are women
- While seniors reported a familiarity with community support groups, only 25% of those surveyed knew how to access information about them.

Transportation

Port Alberni OCP - 8.4 Transit – Council Policy

- *The City in conjunction with BC Transit will ensure the provision of efficient transit service in order to connect all areas of the community.*
- The location of bus stops should be coordinated with sidewalk design for reasons of pedestrian safety and universal access.
- The City will promote and encourage efforts to provide regional transit connections to Sproat Lake and Cherry Creek.

People participating in the Better at Home community development process identified the most common barrier to maintaining and growing social networks among seniors is lack of transportation.

Seniors reported that the limitations of HandyDART services prevented them from using this service as often as they needed to. Limitations were described as a lack of service on Sundays and evenings, and geographically among the Regional District communities. Seniors still able to drive independently described transportation barriers such as only driving in daylight hours and suffering the effects of long drives to out of town specialist appointments. (Better at Home 2013)