
CONFERENCE ABSTRACT

Lessons learned from co-creating seniors' community hubs for older adults in social housing

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Introduction

An increasing number of older adults are aging in place in social housing. However, low-income older adults in social housing are disproportionately affected by poverty, social isolation, and health challenges that increase their vulnerability. Access to health and community support services are therefore critical for helping older adult tenants age in place, but access to these services within social housing buildings is uneven. Community hubs one strategy to co-locate health, social, cultural, recreational, and other resources for older tenants in one location to facilitate better access to services.

Aims Objectives Theory or Methods

The goal of our project was to co-create a seniors community hub model to be implemented in the seniors' buildings of a large social housing landlord serving 14,000 older adults in Toronto, Canada. To do this, we conducted in-depth qualitative interviews and focus groups with 58 health and community support service providers, as well as with 74 older adults living in the housing complex. Interviews focused on the relevance and need for co-locating community hubs directly in buildings, the types of services and programs that should be offered, and the barriers and facilitators that partners may face during implementation.

Highlights or Results or Key Findings

Participants acknowledged that most recreation spaces in the buildings were not well-utilized, and that the limited programs currently available were misaligned to the interests and needs of older tenants. A co-located community hub model centered on principles of trust, equity, inclusion, and flexibility was thought to be the best way to promote access to services while reducing isolation and fostering a sense of community. Service providers highlighted considerations for selecting a hub location, including accessibility, public transit access, availability of on-site kitchen, and the size of the programming space.

While older tenants wanted access to a variety of recreation, social and health programs through a community hub, some were concerned that the hub would limit their access to communal spaces

within the building for their own tenant-led activities. Others were concerned about safety, especially if the community hub were to be open to other older adults living in the community.

Conclusions

Findings highlight the opportunity for seniors' community hubs to increase access to health, social, cultural, and recreational programs for older adults living in social housing. Several recommendations were made to engage tenant leaders and community partners to ensure program offerings with the needs and interests of the local community.

Implications for applicability/transferability sustainability and limitations

Our findings point to several design and implementation considerations that may impact the success of a seniors' community hub model in a low-income social housing building, which can serve as a roadmap for other community partners looking to implement a similar initiative. Engaging tenant leaders is key for successful implementation.