Research Articles

Coverage of Aging Well of Individuals Aging with a Disability in Canadian Newspapers: A Content Analysis
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Abstract: Aging well is a significant issue for an increasing number of disabled people, yet there is limited attention to what it means to age well from the perspectives of disabled people. This article shares the results from comparative analysis of representations of disability in 4899 Canadian newspaper articles and four policy reports on aging well, and discusses its implications for aging well for disabled people.

Keywords: ability studies, IAD, interpretive analysis

Introduction

The number of individuals aging with a disability (IAD) is increasing (Klingbeil, Baer, & Wilson, 2004), and aging well is increasingly a matter of concern for disabled people. The media plays a significant role in how the public views certain issues and social groups (Abroms & Maibach, 2008) and, as such, the media impact, what aging well means for disabled people. The purpose of our study was to analyze how Canadian newspapers covered aging well for disabled people. Study findings were compared with representations of aging well for disabled people in four policy reports on aging well, which range from regional to international. The analytical framework of ability studies was used to interpret the newspaper and report findings.

Individuals Aging with a Disability

IADs can face significant social challenges related to retirement (Ashman, Suttie, & Bramley, 1995), lack of knowledge of professionals in dealing with IADs (Sheets, 2005), ageism (Sheets, 2005), limited health services (Brown & Gill, 2002), society’s unfamiliarity with the discrimination towards IADs (Sheets, 2005), a greater risk of being abused compared to other groups (Walsh, Olson, Ploeg, Lohfeld, & MacMillan, 2010), including being financially abused (Walsh et al., 2010), experiences of isolation (Evans, Evans, & Alberman, 1990), poverty (Klesges et al., 2001; Strax, Luciano, Dunn, & Quevedo, 2010), non-accessible housing (Connell & Sanford, 2001), lack of social support (Jensen et al., 2014), socioeconomic issues (Clarke & Latham, 2014), negative portrayal of aging with a disability (Angus & Reeve, 2006; Stone, 2003), fear of aging which comes with fears of disability and dependency (Angus & Reeve, 2006; Stone, 2003), lack of access to technologies (Kemp, 1999; Thielke et al., 2012) and research gaps in relation to the demographics of IAD (Freedman, 2014). How individuals with
disability age is influenced by many factors; one factor being how the media reports on aging in general, and in particular, how they cover IAD.

**The Media’s Coverage of Aging**

The media can play an influential role in how the public views certain issues and social groups (Abroms & Maibach, 2008). How the media portrays aging - aging well in general, and IAD in particular, influences how the public might view IAD. Studies have examined media coverage of diseases associated with older adults, such as Alzheimer’s disease (Kang, Gearhart, & Bae, 2010; Kirkman, 2006); the coverage of issues of health and illness related to Canadian seniors (Rozanova, 2006), and areas of aging such as successful aging (Rozanova, 2010) and active aging (Abdullah & Wolbring, 2013); however, no study has focused on IAD. Our study, which analyzes the coverage of IAD within 300 Canadian newspapers from 1970-2015, provides a first step in addressing this critical knowledge gap.

**Theoretical Framework**

We interpreted our findings from the newspaper analysis using two approaches. The first approach contextualizes findings by comparing them with the results of an interpretive analysis of four policy reports on aging well that represent regional, national and international scope. The second approach employs the analytical framework of ability studies to interpret and discuss the newspaper findings and the findings of the comparison between the newspapers and the policy reports.

**The Four Policy Documents on Aging**

Aging well is impacted by local and global factors. We chose two international policy documents that are widely recognized as highly influential, The WHO Framework of Active Aging (from now on referred to as the WHO Report) (World Health Organization, 2002) and the 2002 Madrid International Plan of Action on Ageing (Second World Assembly on Ageing, 2002) (from now on referred to as the Madrid Plan). We also included a Canadian policy document of national scope, the Canada Parliament Senate Special Committee on Aging Report (from now on referred to as the Canadian Report) (Canada Parliament Senate Special Committee on Aging, Carstairs, & Keon, 2009), and Let's Talk About Aging: Aging Well in Alberta (from now on referred to as the Alberta Report) (Chief Medical Officer of Health Alberta, 2013) a report of regional influence and of being influenced by regional considerations. As to how these four documents cover disability and IAD; the WHO Report (World Health Organization, 2002) uses words starting with “disab” n=74 times. The WHO Report uses the term disability, and its variations, mostly within a medical context such as having the increased risk of disability as their Challenge 2 of aging. When they do not focus on decrease or prevention of “disability” they also acknowledge that IAD are likely to be inactive, experience low social status and multiple other
barriers and that researchers need to provide policymakers with more evidence on enabling processes in the broader environment. IAD are also mentioned under Challenge 5: Ethics and Inequities.

The Madrid Plan (Second World Assembly on Ageing, 2002) uses words starting with “disab” n=54 times whereby various items focus on prevention of disability, disability benefit and disability insurance. But the Madrid Plan also calls for the respectful treatment of IAD, policies to extend employability, support for the caregivers of IAD, programs that increase the independence of IAD in rural areas, literacy, numeracy and technological skills training, reduction of poverty, improving the quality of life of IAD, improvement in housing and environmental design, increased access to transportation, empowerment of IAD and to consider the aging of persons with cognitive disabilities as a factor in planning and decision-making processes. Point 90 of Objective 1: Maintenance of maximum functional capacity throughout the life course and promotion of the full participation of older persons with disabilities has over ten action items. The Canadian Report uses words starting with “disab*” n=27 times. The word disability was mostly used in a medical sense as something to be avoided and something that is a burden to society and oneself. The report for example states: “Fitness is critical to preventing or delaying the onset of chronic diseases of aging, and in reducing the period of disability and dependent living” (Canada Parliament Senate Special Committee on Aging et al., 2009), p.77. The report also highlighted social aspects faced by IAD, such as the greater risk of abuse for women aging with a disability and that seniors with disabilities are less likely to be physically active. The report also brought to attention the VisitAbility project where “anyone with any disability visit[s] your home for a period of three to four hours with no problem” (Canada Parliament Senate Special Committee on Aging et al., 2009), p.88. The Alberta Report (Chief Medical Officer of Health Alberta, 2013) had words starting with “disab” appear n=32 times. Similar to the Canadian Report, the words were mainly used in a medical context. However, the Alberta Report also thematized the social issues one faces as IAD such as lack of access to physical activity, the need for accessible housing and transportation, the need for being able to continue to be part of the community and financial costs one faces as a result of aging with impairments.

Analytical Framework

According to Entman to frame is to communicate an issue in a certain way (Entman, 1993). We use a framing analysis to investigate how IAD are covered within n=300 Canadian newspapers containing the phrases aging well, active aging, healthy aging, successful aging and natural aging. We use the social reality of ability expectation to ground the analysis of our findings and to assess the consequences of how IAD are framed in the aging discourse for IAD contrasting in particular the social disablement framework with the lack of ability framework.
The disability people rights movement coined the term ‘ableism’ to highlight the situation that certain groups expect certain abilities, that certain groups perceive certain abilities as absolutely essential (Various, 2006). The disability rights movement uses the term in ways that others use sexism and racism. In the case of ableism, the focus is on the disabilism, the negative treatment by others (Miller, Parker, & Gillinson, 2004) one experiences if one’s body abilities do not measure up to the expectations of others (Wolbring, 2008a, 2008b, 2012). Labeling a body or its functions as impaired is one manifestation of ableism that is questioned by Deaf Culture and the neurodiversity movement (Hladek, 2002; Kapp, Gillespie-Lynch, Sherman, & Hutman, 2013; Runswick-Cole, 2014; Waltz, 2014; Wolbring, 2011; Zeng, 1995). Indeed, “Many disabled people perceive themselves in a cultural identity war with the so called non-disabled people, where their self-identity understanding of being ability diverse and ability variant, as being a culture and not being ability deviant and ability deficient is rejected by many” (Wolbring, 2013), p.189.

Keeping in mind the cultural identity war of who can label a given body and in which way, the question arises how newspapers frame aging well. Newspapers could frame the experience of aging by focusing on the lack of abilities of the body as the body ages (medical/deficiency/negative body frame). Another way of framing could be to focus on the social reality of social disablement or enablement experienced by people aging (social disablement frame). This frame could include thematizing the problem of ability expectations. Indeed, the purpose of the term ableism was to highlight the social disablement linked to the reality of ability expectations and ability privileges such as the ability to work, the ability to gain education, the ability to be part of society, the ability to have an identity, and the ability to be seen as a citizen that comes with a species, ability-typical, body (Wolbring, 2014). Within the social disablement frame the newspapers could cover how ability expectations such as productivity, competitiveness, efficiency and self-sufficiently and other “-ism’s” supported by ableism such as consumerism, superiority-ism and GDP, influence how one experiences aging. Certain ability expectations and forms of ableism can support age-ism (Wolbring, 2007, 2008b) such as the need to be productive, to be able to contribute to society, to be able to work, and to be self-sufficient. However, ability expectations and ableism do not have to be negative but can also be positive or neutral (Wolbring, 2008a; Wolbring & Burke, 2013). One could decide as a society that to live in an equitable society is an ability to be cherished. Indeed one of the main focuses of disability rights and other rights groups is to change ability expectations which in turn would also decrease issues like age-ism.

Given these two main frames (medical and social), the newspaper articles could have three storylines; one purely focused on the medical frame by using terms such as impairment and patient, and by using variations of the term, disability, with the meaning of impairment with no social context; a second storyline being a medical/social hybrid frame by still portraying the
person in a medical way but highlighting the social disablement the person experiences; and a third story line could capture a purely social frame by which the person is defined in neutral terms and the focus is on the social disablement.

**Methods**

**Data Sources and Sampling**

To obtain qualitative and quantitative data on the discourse around aging well and four synonyms (active aging, healthy aging, natural aging and successful aging) as they related to people aging with a disability (IAD) we searched the n=300 newspapers of the Canadian Newsstand Complete Mail from 1970-2015 for “disab*” in the text of the newspapers (* assuring that we obtain content related to disability, disabled, people with disabilities and disabled people) with each of the terms linked to aging well (aging well, active aging, healthy aging, natural aging, and successful aging) in the text of the newspapers (August 25, 2015). We obtained n=452 articles through these keyword combination searches. The 452 newspaper articles were downloaded as PDF and imported into Atlas.ti©, a qualitative data analysis software. We also searched for terms often used with relation to disabled people such as impairment and patient in the article covering aging well and its four synonyms (October 15, 2015) and the n=489 articles containing words starting with the term, impair were downloaded into Atlas.ti©.

**Data Analysis**

The research question we investigated was: How was disability and how were IAD covered within newspaper articles containing the phrases aging well, active aging, healthy aging, natural aging, and successful aging? We read the 452 articles keeping in mind the research question and the content of the four policy documents. All articles were read by both authors and coded with the research question and the content of the four policy documents in mind to increase reliability, and differences were resolved during our discussions. Results were evaluated through the four policy documents and the academic literature covering IAD.

**Limitations**

This study involved an in-depth content analysis of only English language Canadian newspapers. As such, our findings are not generalizable for Canada or other countries: our data cannot be used to judge other media types either, as we focused only on newspapers. However, we contend that our data can be used to guide future research in this area.
Results

Timeline and Source of Coverage of Aging Well

Taking all the aging well phrases (Active aging, +Aging well, +Healthy aging, +Natural aging, +Successful aging) containing articles from the Canadian Newsstand Complete, the timeline distribution was 1970-1979, n=5; 1980-1989, n=150; 1990-1999, n=2292 and 2000-2015, n=1900 for a total of n=4899 articles.

Coverage of Aging Well and the Term Impair*

Within the n=4899 articles, n=484 articles used words starting with “impair*”. Of the 896 times words starting with “impair*” were used in the 484 articles, the phrase “cognitive impair*” was used n=163; “visual impair*”, n=563; “brain impair*”, n=2; “hearing impair*”, n=33, “mobility impair*”, n=2; and “memory impair*”, n=31. Terms related to cognition such as dementia was used n=410 and Alzheimer, n=1211.

We treat as a given that words starting with “impair*” frame the body/abilities of a person in a medically negative way. As such, using words starting with “impair*” within a purely social framework is not possible. The question is whether a social hybrid framework was evident within the newspaper articles, meaning that although the body is defined in lack of ability terms, are matters of social disablement also mentioned?

The majority of the articles were news postings on upcoming support group meetings; e.g. the phrase “visually impaired coffee group” was used 167 times. Then, articles covered the appearance of impairment and negative issues linked to the medical aspect of it or to impairment in general, for example, “Almost inevitably, age brings limitations that can impair an individual's ability to live independently,” says a sobering Statistics Canada report” (Fayerman, 2005a).

Only n=6 articles covered some social aspect of older adults with impairment; n=2 articles covered the usefulness of technology with one talking about Pearl, a mobile robotic assistant (Ross, 2002), n=1 mentioned about available services (The East York Mirror, 2014), n=1 stated that working in a garden is a non-threatening, non-verbal way to communicate and feel productive (Peterborough Examiner, 2000), n=1 highlighted barriers stating” seniors, too, who experience barriers to activities as part of the natural aging process”, and acknowledging that there are many different types of barriers depending on the person such as doors, signs and the telephone and that there are barriers to “facilities, services and workplaces” (Almonte Carleton Place EMC, 2013) and n=1 wrote about the problem of reaching isolated seniors such as ones with significant impairments (Anonymous, 2010).
Coverage of Aging Well and the Term Disab*

With the words starting with “disab*” all three narratives could be present. Within a medical framework “disab*” is used as a synonym for impairment with no social content; within a medical social hybrid framework, the body is seen as deficient but the social disablement is also mentioned; and within a social framework, the body is not medicalized and the focus is on social disablement.


Within the n=452 articles, words starting with “disab*” were used over 862 times. Most of the times the words were not used to explain content linked to IAD. Within the n=392 times the term disability was used, some of the associated phrases used were: child with a disability, n=92; person with a disability, n=27; disease and disability n=19; born with the disability, n=19; disability tax credit, n=17; person with a disability goes swimming, n=14; sister with a disability, n=4; disability saving plan n=2 disability benefit, n=2 or disability insurance, n=1.

Often disability was used to indicate an impairment with no context linked to IAD such as long-term disability, n=11; intellectual disability n=7; level of disability n=5; physical disability n=4; disability-free, n=4; visual disability n=2, living with disability, n=2; developmental disability n=2; congenital disability, n=2; onset of some disability, n=2. The term disabled was used 184 times; often without any linkage to IAD such as the disabled, n=37 (none linked to IAD); disabled children, n=10; developmentally disabled, n=5.

The term disabled seniors was only mentioned n=6. Various articles reported on the gain of disability (meaning impairment) as one ages (Ball, 2002; Colby, 1992; Henderson, 1986; Long, 2001; Shuttleworth, 2006). One article stated: "A lot of seniors will not admit they have a disability. They call it old age, but when you get down to it they do have disabilities" (Long, 2001). Some highlight that the disability (meaning impairment) threat is not as big as we think it will be (Anonymous, 2012; Elliot Paus & Skrapek, 2013; Fayerman, 2005b; Kelley, 2000; Zimbel, 1998). Avoiding impairments is seen as an indicator for successful aging (Hogben, 1999; Lise Diebel, 2010; Stokes, 2005).

Only n=22 articles covered social aspects. Six articles looked at accessibility (Almonte Carleton Place EMC, 2013; Anonymous, 2015; cole hobson & Transcript, 2012; McArthur,
2014; Meilleur, 2010; Taylor, 2006). Three articles mentioned specifically Universal Design (Anonymous, 2009; Harris, 2012; Moaddox, 1999). One article looked at the poor level of living conditions (The Globe and Mail, 1994) and two mentioned negative stereotypes and lack of knowledge around IAD (Long, 2001; Moorhead, 2000). One article mentioned ageism in relation to “disab*” stating: “Ageism is discrimination based on age. For example: an older adult can be stereotyped as weak, frail and disabled” (Silverman, 2010). Two articles covered the linkage of poverty and ”disab*”, where one article stated: "For many of these women, old age is accompanied by chronic illness and disability, which are often the result of lives lived in poverty, with little or no access to adequate health-care facilities"(Sweet, 1999). The other stated: “Studies in the 1980s into living conditions of seniors and adults with disabilities found hundreds of Ontario seniors living in substandard conditions, some in poverty and with no family”(The Globe and Mail, 1994).

Sometimes the “disabled” were mentioned as a group alongside older adults such as seniors and the disabled, n=6; programs for the disabled and aging seniors, n=3; seniors, disabled, n=3. Pulver for example wrote: “Liberal Leader David Peterson talked about freedom of mobility for older people. He promised the elderly [sic] and the disabled better access to public transportation, lower municipal transit fares and changes in conventional transit systems. ‘Without mobility, our seniors and disabled are forced to the confines of their own residences, and they can't get around,’ Mr. Peterson said. ‘These measures will increase access not just to transportation but to the social and economic life of our province’(Pulver, 1987). (See also (Barrick, 2010; Denton, 2011; Ginabeth Roberts & Transcript, 2012; van den Hemel, 2015).

Only one article covered the relationship between the so called able and disabled older adults, stating, ‘It's high time that people like myself who have aged all their life (61 years for me) with a congenital disability (cerebral palsy) and seniors who are aging into disabilities begin communicating with each other,’ says James Hunsberger of Waterloo” (Hayes, 2005).

Discussion

In the discussion section we reflect on the newspaper findings by comparing the newspaper findings with findings from four policy documents on aging that range from international, to Canadian national compared to regional in scope, in order to understand whether the newspaper findings are particular different to other sources or not. We also use the ability studies lens to interrogate the findings.

Visibility of Disability and IAD

The first issue of importance is how often a word is mentioned. Words starting with “disab*” were only present in 9.2% of the articles covering aging well; 452 articles in 300 newspapers for 45 years makes 0.03 articles per newspaper per year. Given that some
newspapers cover more than the average, many of the 300 newspapers will have no coverage at all. Our findings suggest an invisibility of IAD in the aging well coverage which is a problem for IAD given that readers will not think about IAD in relation to aging well. However this lack of mentioning of disabled people in Canadian newspapers is not limited to the aging well discourse (see for example coverage of food security, (Wolbring & Mackay, 2014) or for that to disabled people per se. The terms “aboriginal people”/”indigenous people”/ “first Nation” were rarely mentioned in regards to active aging (Abdullah & Wolbring, 2013) or other topics of relevance to them (Wolbring & Noga, 2013). Looking at the coverage of social groups in the four policy documents disab and IAD are mentioned comparable to or more than other social groups indicating a difference in focus between the newspapers and the policy documents. Interestingly “aboriginal people”/”indigenous people”/ “first Nation” were mentioned quite a bit in the two Canadian documents but not at all in the two international documents indicating that how social groups are covered can play itself out differently on the global versus national level. As to the numbers the WHO Report (World Health Organization, 2002) uses of words starting with “disab” n=74 times which is higher than the mentioning of the terms “aboriginal people”/”indigenous people”/ “first nation”, n=0; “gender”, n=12 and the term “women”, n=68. The Madrid Plan (Second World Assembly on Ageing, 2002) uses words starting with “disab” n=54 times which is higher than the mentioning of the terms “aboriginal people”/”indigenous people”/ “first nation”, n=1; “gender”, n=24 and only a little less than the term “women” n=61. The Canadian Report uses words starting with “disab*” n=27 times which is lower than the mentioning of the terms “aboriginal people”/”indigenous people”/ “first Nation”, n=169 and the term “women” n=49 but higher than “gender” n=1. The Alberta Report (Chief Medical Officer of Health Alberta, 2013) had words starting with “disab” appear n=32 times which is higher than for “aboriginal people”, “indigenous people”/ “First Nation”, n=12, “gender” n=1 and the term “women” n=17.

**Portrayal of Disability and IAD**

Even if a word is mentioned that does not mean it is mentioned in positive ways. In regards to how disability and disabled people are framed the newspapers had different options. We found that use of the term disability within a medical framework and the identification of “impairment” as something negative, as something to be prevented, is the prevalent framework in newspapers. Three of the newspaper articles indicated that one needs to have a positive attitude and self-esteem to age positively (Alam, 2000; Anonymous, 2006; Shuttleworth, 2006). How can this positive attitude be achieved by IAD if their portrayal is so medical and negative as our findings suggest? It also contradicts the demand outlined by all four policy documents that the media should present a more positive portrayal of aging and IAD. The Madrid Plan for example states: “Encourage the media to move beyond portrayal of stereotypes and to illuminate the full diversity of humankind,” and “The effects of impairment and disability are often exacerbated by
negative stereotypes about persons with disabilities, which may result in lowered expectations of their abilities, and in social policies that do not allow them to reach their full potential” (Second World Assembly on Ageing, 2002). It is indicative of the pervasive embeddedness of ableist thinking that the four policy reports do not see the contradiction between the demand for a positive portrayal on aging and IAD and the medical deficiency focus.

Pervasive ableist thinking is also evident in the sections demanding a positive image of aging. The Canadian report states: “A society that values the contributions and wisdom of the older person makes it easier for an older person to maintain his or her right to make his or her own decisions” and, “There is an ongoing need to foster a positive image of older Canadians which more accurately reflects today’s seniors and recognizes their contributions to the family, the community and the economy” (Canada Parliament Senate Special Committee on Aging et al., 2009). These two quotes suggest the importance of one’s ability to be a contributing member to society. The use of the ability to be wise segregates people not seen as wise (such as people seen as having cognitive impairments) as a burden to society. The Madrid Plan (Second World Assembly on Ageing, 2002) talks about focusing on older adults as being attractive, diverse and creative individuals that make vital contributions to society, setting the stage for IADs to disappoint. Disabled people are not seen as attractive by the masses and it is questioned whether many disabled people can make vital contribution to society. By adding ability expectations to a positive image the documents nearly ensure that IAD are not part of the positive imagery, short of that we use the supercrip imagery for IAD, an imagery that portrays the person to be super-human to survive against all odds (Harnett, 2000; Howe, 2011; Kama, 2004).

Issues IAD Face

The academic literature highlights many problems IAD face (see introduction). However accessibility was the only issue covered in the newspapers. The four policy documents, and especially the Madrid Plan, covered many more issues faced by IADs; however, all four policy documents missed some critical problems, for example the issue of abuse which is a known issue for disabled people in general and IAD, specifically. The Alberta Report (Chief Medical Officer of Health Alberta, 2013) has a whole section on elder abuse but does not mention IAD as a group in danger of abuse. One would have to read between the lines to see that caregivers were listed as a source of abuse. The Canadian Report covered elder abuse extensively but the report only mentioned once that IADs experience abuse: “Older women are at greater risk of abuse due to increased social isolation, cultural norms, familial status, disadvantage or disability,” linking it specifically to caregivers and institutions (Canada Parliament Senate Special Committee on Aging et al., 2009). The WHO Report also mentioned elder abuse extensively but not in relation to IAD (World Health Organization, 2002). The Madrid Plan also covers abuse extensively and has as an action item: “Sensitize professionals and educate the general public, using media and
other awareness-raising campaigns, on the subject of elder abuse and its various characteristics and causes” (Second World Assembly on Ageing, 2002) but does not mention abuse of IAD.

**Conclusion**

Our findings suggest that readers of the 300 newspapers are rarely, if at all, exposed to IAD in general and even less so to a social frameworks of IAD. Although one could use ability expectations to develop a “positive” imagery of aging well in general and IAD in particular (e.g. by focusing on the ability to live in an equitable society that supports older adults), ability expectation linked to aging well within the newspapers and the four policy documents for the most part have negative effects on how well IADs age. Most of the abilities linked to aging ill could be classified as abilities IAD lack. Given the overall negative coverage of IAD and the body related ability expectation linked to a positive image of aging, it is not surprising that newspaper articles often mentioned people with disabilities (as a general group) and older adults as two separate entities impacted by a given topic whereby IAD was not the focus. It also might be one reason why the relationship between IAD and other older adults was only covered in one article (Hayes, 2005) and not at all thematized in the four policy documents. There is a need for newspapers and policy documents to focus more on the abilities of IAD to experience their social environment in a positive way and to portray IAD in a positive way. This could lead to greater enjoyment by IAD of the aging process.

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