Communication Mechanisms for Delivering Information to Seniors in a Changing Small Town Context

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Abstract

The settlement landscape of northern British Columbia is comprised of many small and dispersed resource towns that were designed through the 1960s and 1970s to attract young labour and their families. Over the past three decades, industrial restructuring and labour shedding technologies has prompted an out-migration of young families and an ageing-in-place of the existing workforce. The retirement experiences of older residents who remain in these places, however, have been challenged by neoliberal-inspired 'structural' changes in services and supports. The constant change in services, and limited flow of information about such changes, can result in frustration amongst older residents attempting to access services and supports. Drawing upon 74 key informant interviews with seniors and service providers in Terrace, BC, we explore problems associated with communication strategies that limit seniors' access to needed supports. Our findings provide a foundation to develop responsive institutional capacities and strengthen new multi-faceted communication approaches to address seniors' needs in rapidly changing places. As there is great diversity amongst seniors in small towns, it will be important for service providers to use multiple communication tools, engage in two-way dialogue activities, and work collectively to collate information about local and regional service supports as part of an efficient and effective communications strategy.

Keywords: resource towns, seniors, services, restructuring, communication, Canada

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1.0 Introduction

The landscape of northern BC consists of many single industry resource towns that were designed to attract young workers and their families. The demographic composition of these towns has been changing due to industrial restructuring and especially the deployment of labour shedding technologies. This has prompted the out-migration of young people and young families. This resource frontier ageing is resulting in an increasingly large share of older residents in these places. The retirement experiences and quality-of-life of those older residents, however, has been challenged by neoliberal-inspired 'structural' changes that affect service availability and delivery. Constant change in services, and a relatively limited flow

of information about such changes, can result in frustration amongst older residents attempting to access supports. Despite these pressures, the Canadian literature has not examined the use or effectiveness of communication strategies deployed by service providers to connect seniors with needed supports in an increasingly complex and constantly changing service environment. A critical question in this context is how can service providers more effectively and efficiently communicate information to seniors about their programs and services?

We begin by briefly exploring the impacts of social, economic, and political restructuring processes on resource town ageing. We also explore how policy decisions have been impeding community responses to new service pressures imposed by these demographic shifts. This is followed by a brief discussion of key issues that need to be considered when developing a communications protocol for seniors. Drawing upon 74 key informant interviews with seniors and service providers in Terrace, British Columbia, Canada, we explore how service providers promote information about their services to older residents. Lessons learned from this study provide a foundation for better communication strategies that can link seniors to needed supports. As there is great diversity in the health, education, income, and mobility of seniors, our findings indicate that it will be important for service providers to use multiple communication tools, engage in dialogue activities, and work collectively to collate information about local and regional service supports as part of an effective communications strategy. This will require organizations to make communication tasks a formal part of staff responsibilities as well as to allocate sufficient resources to support the development of communication skills and expertise within their organizations. Local and senior levels of government also need to revisit their role to assist overburdened service providers in rural and small town places to build such capacity and to facilitate collaboration across senior supports as resource towns in transition look to capitalize on a growing retirement sector as part of community renewal.

1.1 Resource Frontier Ageing

Prior to the 1980s, many resource-dependent towns in northern BC experienced considerable population growth with the expansion of large-scale industrial sawmills and pulp and paper mills (Williston & Keller, 1997). The demography of these towns was closely linked to the in-migration of labourers seeking new employment opportunities. This in-migration stream consisted predominantly of young adults and young families (Hanlon & Halseth, 2005). International trade disputes, fluctuations in commodity prices and supplies, and the recession of the early 1980s, however, sparked population decline as industrial restructuring processes led to consolidation and the adoption of labour shedding technologies (Hayter, 2000, 2003; Prudham, 2008). These restructuring trends are similar to what has been found in the United States, Australia, and New Zealand where primary production also remains a large part of their rural economies (Cockfield & Botterill, 2006; Fitchen, 1991; FitzHerbert & Lewis, 2010). Economic restructuring trends continued over the next two decades, resulting in job losses and the out-migration of young working age people (McManus, 2002). In BC, these trends have been accelerated by provincial policy decisions to remove appurtenancy clauses from forest practice – a clause that previously tied timber harvesting rights to specific local or regional manufacturing facilities that were built and operated as a condition to obtain those timber harvesting rights (Ross & Smith, 2002). The removal of this clause meant that communities would no longer

be guaranteed to benefit from resource production through jobs and taxes (Nelson, Niquidet, & Vertinsky, 2006).

Similar to rural regions in Australia, Finland, and Russia (Davis & Bartlett, 2008; Jauhiainen, 2009; Kinsella, 2001), towns across northern BC have been experiencing a faster rate of growth amongst its retirement age cohort. Hanlon et al. (2005) describe two factors that contribute to the ageing of the local population in these resource towns. The first factor affecting 'resource frontier ageing' occurs when a larger share of non-seniors leaves these places at a faster rate than seniors. Second, the remaining workforce has also been ageing-in-place as most northern BC communities now have more than one-third of their workforce population over the age of forty-four – a trend that did not previously exist in these towns. Data produced by Statistics Canada (1981, 1991, 2001, 2006) also reveals that more seniors are choosing to retire in these communities. These demographic changes will have important implications for service providers and local governments as these resource towns are generally not equipped with the infrastructure, programs, and services to address the needs of an older population.

1.2 Service restructuring

Health and community services in small places such as home support, meals-on-wheels, and physicians have experienced new pressures and demands from an ageing population (James, 1999; Everitt & Gfellner, 1996). Large distances and low population densities have been longstanding challenges for rural and small town places striving to maintain services that have high delivery costs per capita / user. Against these longstanding challenges are policy decisions aimed at reducing government expenditures by downsizing, offloading, closing, or regionalizing a range of public sector services (Halseth & Ryser, 2006a; Lowndes, 2004). In particular, health care facilities, elderly care services, home care services / nursing, community services, transportation services, economic development organizations, and social housing are now more limited (Halseth & Ryser, 2006b). The closures of hospitals, and the centralization of a range of physical and mental health services, have profound impacts on seniors who do not have access to a vehicle and who may live in places with limited local and inter-community transportation services (Liu, Hader, Brossart, White, & Lewis, 2001). For services that remain in these communities, reduced government funding has prompted changes in hours of operation as well as changes in the types and levels of service provided. In other cases, services formerly delivered by the public sector have been divided and may now be offered via a combination of public sector, private sector, and voluntary sector organizations. The deployment of appropriate information and communication strategies directed towards seniors is now more important than ever with the increasing complexity associated with the specialization and bureaucratization of services (Murty, 2001; Pugh, 2003).

1.3 Developing appropriate communication protocols to link seniors with supports

Within a broader context of literature on ageing and communication, researchers have argued that there is a disconnection between the design and execution of information and communication strategies with those preferred by seniors (Selwyn, Gorard, Furlong, & Madden, 2003). Service providers disseminating information may assume that residents are familiar with costs, processes, and other

mechanisms linked with supports. In research exploring effective information programs in the medical sector, Jayanti (2001) discusses several key differences with how older people pursue, perceive, and use information. Seniors are more likely to report problems with both accessing services and obtaining useful and current information. Older residents also process information at a slower rate, engage in fewer searches, and remember less information compared to younger adults. Furthermore, seniors may not know what information they are looking for or how to ask for it (McKinley & Netting, 1994).

Considerable work has also been done to explore seniors' limited use of information and communication technology (Bruce & Black, 2000). For example, Selwyn (2004) identified that cost, health, limited previous exposure to information and communication technology (ICT) in the workplace, differing perceptions of usefulness, lack of interest, lack of skills, and lack of computer social networks as key barriers impeding seniors' use of ICTs. Instead, conversations or one-on-one communication has been regarded as an effective strategy to promote information and learning (Romanow & Bruce, 2006). Older residents have also been found to rely more on established technologies, such as television, the radio, and telephones (Selwyn et al., 2003).

Unfortunately, most of the work that explores communication protocols for seniors is focused in urban areas. With rural and small town places experiencing an accelerated pace of change, timely access to information to link residents with service supports is fundamental in order to enhance seniors' quality-of-life. Unfortunately, the use of technology to support communication strategies has been limited by a lack of information technology infrastructure, services, and support staff in rural and small town places (Skinner, 2008). For example, McKeown, Noce, & Czerny (2007) noted that, in 2005, nearly half (47%) of Canadian communities, mostly rural and small town places, did not have access to broadband services. Instead, much of the technology infrastructure investments have been focused on rural areas surrounding metropolitan regions (Grimes, 2003).

Skinner (2008) also notes that there has been a lack of information available about services and supports for seniors in rural communities. McKinley et al. (1994) discuss some of the organizational constraints that impede the deployment of effective information and referral systems to link seniors with appropriate supports. First, cutbacks mean that service providers have limited staff to execute routine information and communication strategies. Policy changes too often now mean staff are fully engaged in delivery services and fill out their time with future funding applications. Second, local communication strategies may be established by offices in distant urban centres that do not understand the unique challenges and needs of operating in a rural or small town context. There may also be delays with local groups receiving new information protocols from parent organizations to be distributed to local seniors. Given the diversity and uniqueness of many small town contexts, the intent of our work is to build upon these foundations and contribute to an understanding of key issues impacting the effectiveness of communication strategies used by service providers, as well as to assess potential solutions that can strengthen organizational capacities to deploy multi-faceted communication strategies to address seniors' needs and enhance wellness.

2.0 Methodology

The City of Terrace approached the University of Northern British Columbia's (UNBC) Community Development Institute (CDI) to examine housing and support service needs for seniors in the community. Using an exploratory qualitative methodology, key informant interviews were conducted. Through in-depth interviews with key informants, the research team was able to "learn a great deal about issues of central importance to the purpose of the research" (Patton, 2002, p. 230). Our key informants were purposefully and strategically chosen (Babbie, 2004) from community groups, service provision agencies, local government, and people actively engaged in seniors' issues. A total of 54 interviews were conducted, with a total of 74 people participating. A general breakdown of interview participants by community sector is shown in Table 1.

Table 1. *Sampling of Key Informant Participants by Sector*

Sector	Number of Respondents	% of Respondents
Health Care	5	6.8
Housing	5	6.8
Government	4	5.4
Social Support Services	15	20.3
Social and Recreational Activities	15	20.3
Senior – general	27	36.5
Other	3	4.1
Total	74	100.0

Source. Terrace and Area Seniors Needs Study, 2006.

The interview methodology and questionnaire was approved by UNBC's Research Ethics Board. Prior to each interview, participants were provided with a copy of the consent form outlining the purpose of the study, the voluntary nature of their participation, and the ethics review confidentiality agreement.

The design of the interview questionnaire was driven by three factors. First, a review of local newspaper archives revealed a highly fluctuating service environment in which hours of operations, locations, and types of services offered were experiencing considerable and ongoing change for more than a decade. However, the limited flow of information about such changes can impact seniors' access to supports and quality-of-life. Second, the academic literature in Canada has been quite silent about the communication strategies used by overburdened organizations to help seniors navigate and re-navigate the increasingly complex and constantly changing service environment. Finally, the research team worked with local decision-makers and service providers to design questions that would inform their future approaches to planning and delivering senior supports.

The interviews entailed both open and closed-ended questions that explored participant awareness of available senior supports, factors limiting seniors' awareness of available supports, the communication mechanisms used by service

providers, and recommendations for developing more effective communication strategies to link seniors with appropriate services and programs. Closed-ended questions were entered into an SPSS database while open-ended questions were evaluated through latent and manifest content analysis (Babbie, 2004). This involved identifying, coding, and categorizing themes from the data. As this particular study draws upon a small sample within one place, there are limitations to generalizing the findings to the experiences in other places (Kvale & Brinkmann, 2009). While we feel that the results reflect what our research has found in other communities across northern BC, further research will be needed to gauge which issues or concerns were unique to the context of Terrace, and which resonate across a broader cross section of small towns.

Terrace, BC

Located in the northwest region of BC in the Skeena River Valley, Terrace is 153 kilometres from Prince Rupert, 58 kilometres from Kitimat, 575 kilometres from Prince George, and 1,367 kilometres by road from Vancouver (see Figure 1). Due to its central location among northwest BC communities, Terrace functions as a regional service centre for this region. With downsizing and closures in the forest sector, Terrace provides an example of a community experiencing resource frontier ageing, and its role as a regional centre has also meant that it is attracting senior migrants from surrounding rural areas seeking to access the local range of seniors' housing and service supports.

Figure 1. Location of Terrace, British Columbia
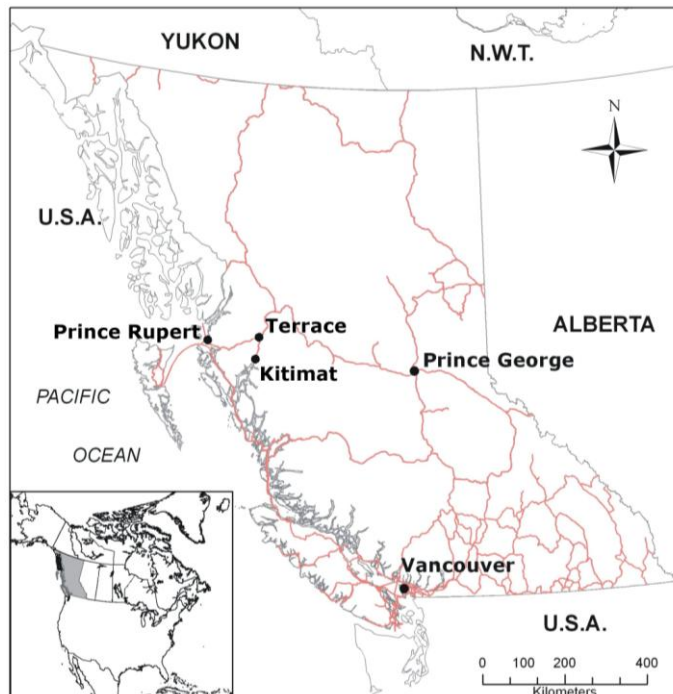
Source. K. Kusch, Community Development Institute, University of Northern British Columbia.

Similar to trends around northern BC, the population of Terrace grew until 1996, reaching a total of 12,779 people (see Table 2). By 2001, Terrace had entered into a period of decline with a loss of 5.3% of its population. This trend continued over

the next five years as the community lost an additional 6.5% of its population. By 2006, there were approximately 11,320 people in the community.

With growth being experienced in the surrounding rural areas, and with the emergence of Terrace as a service centre for the region, it is also important to consider the population changes taking place within the greater Terrace settlement area. Following a brief period of decline between 1981 and 1986, the Terrace Census Agglomeration also experienced growth until 1996 as its population increased to 20,941 people. Then two successive periods of decline between 1996-2001 and 2001-2006 resulted in population losses of 4.6% and 7.0% respectively. In 2006, the Terrace CA had a population of 18,581. Difficulties in the forest sector during the late 1990s and early 2000s have meant limited opportunity for additional population growth.

Table 2. *Population change for communities in Northwestern BC*

Place	1986	1991	1996	2001	2006	% change 1996-2006
Terrace (City)	10,532	11,433	12,779	12,109	11,320	-11.4
Terrace (CA)	17.390	18,908	20,941	19,980	18,581	-11.3
Prince Rupert	15,755	16,620	16,714	14,643	12,815	-23.3
Kitimat	11,196	11,305	11,136	10,285	8,987	-19.3
Prince George	67,621	69,653	75,150	72,406	70,981	-5.6
Vancouver	431,147	471,844	514,008	545,671	578,041	12.5
British Columbia	2,883,367	3,282,061	3,724,500	3,907,738	4,113,487	10.4

Source. Statistics Canada 1986-2006.
Note: A CA (Census Agglomeration) includes an urban core population (the municipality) together with any neighbouring Statistics Canada data collection units where 50% or more of the employed labour force commutes to work in the urban core. Statistics Canada uses such labour market commuter flows as a proxy for a 'functional region'.

Figures 2 and 3 present the population pyramids for the City of Terrace from 1981 to 2006. These population pyramids show a pattern typical of resource towns in northern B.C. In 1981, the population is dominated by young families (see Figure 2). This is shown by a large proportion of the local population in the 25 to 40 year age groups and the corresponding 0 to 20 year age groups. In a place like Terrace, young families were drawn by the newly created work opportunities in an expanding forest industry and growing service base. By 2006, the local population has aged-in-place. The labour force is now older and concentrated in the 35-55 year age groups and there is a larger share of the population over age 50 than at any time in the past (see Figure 3). Ageing-in-place among those in the workforce, an out-migration of younger people in the 20-24 and 25-29 year age cohorts, and the presence of fewer young families as indicated by a lower share of children under 10 years of age clearly demonstrates this phenomenon.

Figure 2. Population of Terrace in 1981
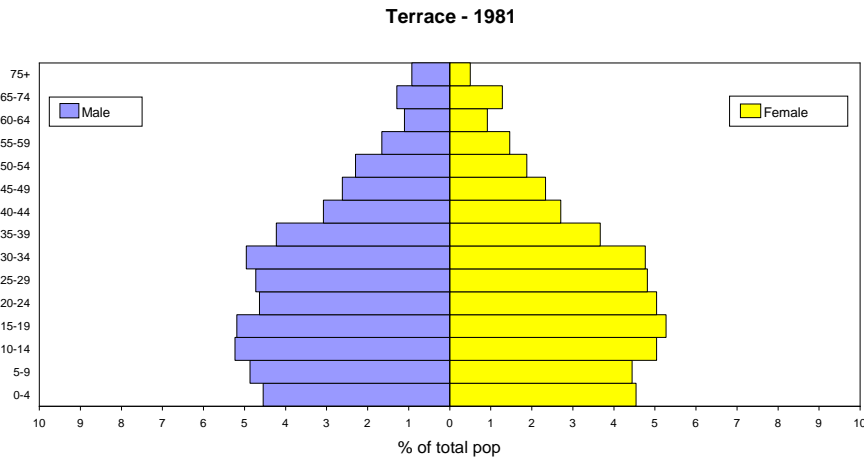
Terrace - 1981

Source. Statistics Canada 1981.

Figure 3. Population of Terrace in 2006
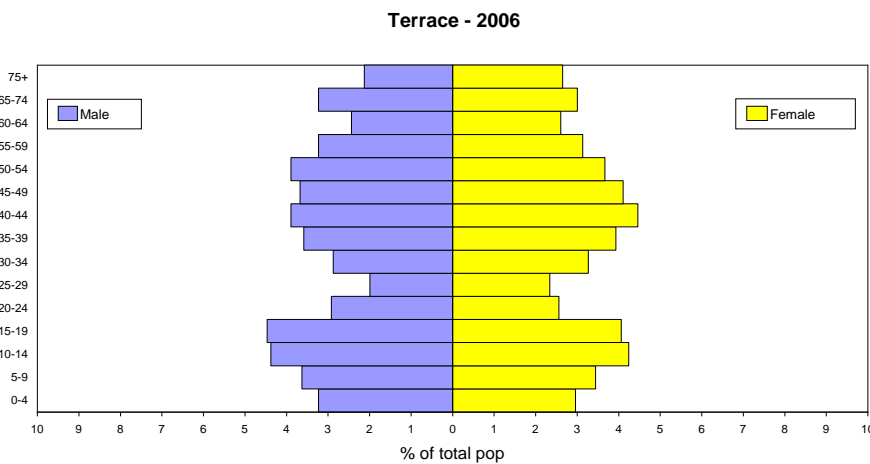
Terrace - 2006

Source. Statistics Canada 2006.

Terrace's role as a regional centre has helped it to accumulate some of the infrastructure and services to support an ageing population. There have been several local initiatives to develop a range of seniors' housing options from low-income to an Aboriginal elders' housing facility (Lee, 2009a, 2009b; Ministry of Municipal Affairs, 1999; "Work starts", 2005). Each facility has different qualification criteria, assessment and admission procedures, costs, and service supports.

There have also been significant improvements in the health care sector. In addition to becoming a regional centre for surgery, the local Mills Memorial Hospital acquired a chemotherapy treatment program, mammography screening equipment, and a dialysis unit ("Chemo clinic", 2003; "Dialysis unit", 2003; Link, 2003; "Mammography bus", 2003). The community has also benefitted from the opening of the Seven Sisters Residential Adult Mental Health Facility ("Long-awaited", 2005). In 2006, the provincial Northern Health Authority (NHA) developed the Northern Connections Bus System that offers subsidized

transportation for patients required to travel to distant regional centres for more specialized health services ("Medical care", 2006). This transportation system not only supports Terrace seniors who need to travel to northern BC's largest city of Prince George, but it reinforces the notion of Terrace as an ageing-friendly centre for those from neighbouring communities who come to the town for services.

Additional social service supports and retail services have also developed (Collard, 2004b; "Wal-Mart construction", 2003). Furthermore, seniors have long benefited from the social, recreational, physical, and educational programs offered by the Happy Gang Seniors' Recreation Centre.

While the community has a broad range of services, the availability, level of care, and types of supports offered by local services has been fluctuating due to policy decisions and economic restructuring pressure. Due to instability surrounding funding supports, there has been considerable uncertainty surrounding the operations of some service providers. For example, since 2003, there have been several changes in the announcements by the NHA to decrease or increase funding for long-term care beds at Terraceview Lodge, a local care facility ("Adult activity", 2009; "Bed cuts", 2003; Lee, 2005; "More beds", 2005; "Terraceview forecasts", 2004). Unfortunately, such uncertainties surrounding service and infrastructure supports can make it difficult for older residents to plan for their future care needs.

Some medical clinics and retail services have closed (Collard, 2004a; "Dollar store", 2004; "Medical clinic", 2004; "Northern Drugs", 2005). Other social supports have experienced repeated temporary closures and reduced hours of operation ("Cuts affect', 2004; "Group gets", 2009; Lang, 2004; "Women's centre", 2003). There are also services, such as food banks, that are offered irregularly, as well as on a seasonal or temporary basis ("Food bank", 2003, 2009). To enhance the synergy and economic efficiency of operations, other health and social services have re-located, consolidated, or share space with other groups ("Adult activity", 2009; "Community", 2009; "Hospice", 2004; Quezada, 2005). There have also been fluctuations in policies concerning costs and reimbursement processes to be assumed by seniors for municipal services such as snow removal ("City low", 2009; Lee, 2009c).

As service restructuring is an ongoing process, it can be difficult for seniors to continually re-navigate across a broad spectrum of supports in which they must identify new locations, new hours of operation, acquire new contact information, and learn about changing processes and criteria to access services. As the community responds to both demographic and service restructuring pressures, it will be important for service providers to deploy a collaborative, comprehensive communications strategy that will support seniors' wellness by effectively linking seniors with current information about services and programs.

3.0 Results

We begin our findings by exploring participant perceptions of seniors' awareness of available programs and services. This includes a description of reasons for a lack of awareness of seniors' supports. We then examine communication mechanisms used by service providers before engaging in a critical discussion of participant recommendations to improve communications strategies that will link seniors with needed supports. This discussion reveals that participant recommendations to improve communication strategies do not address a number of well recognized barriers impeding seniors' awareness of programs and services. In this respect, there is an

opportunity for local and senior governments to mobilize and facilitate a strategic, comprehensive planning process that will improve communication amongst service providers and seniors, and enhance Terrace as a senior-friendly community.

3.1 Awareness of Senior Services and Programs

To begin, we asked participants if they felt that the general senior's population was aware of available supports. About 65% of participants felt that seniors were largely unaware of available programs and services. Participants talked about a lack of awareness of services in general as well as a lack of awareness of specific program supports such as those offered by the Alert Line[1], home support, Mental Health, local transit programs, Handidart[2], and the Terrace Volunteer Bureau's volunteer driver program. Some participants felt that seniors had varying perceptions about whether home care workers still do housekeeping, bathing, or evening work. Confusion was also cited about referral and assessment processes for services and housing facilities, as well as qualifying criteria (i.e. age, disability, Aboriginal status) to access various existing programs. Through BC Housing, seniors can access the Shelter Aid for Elderly Renters (SAFER) supplement which is applied to the shelter costs of supportive housing (Ministry of Municipal Affairs, 1999). Shelter and care costs are also subsidized at long-term care facilities. Participants indicated, however, that there was confusion among many of their clients about how monthly costs were determined. Some also felt that elders were not aware of the First Nations housing options that were available in the community.

In order to gather information that could be used to strengthen communication strategies to link seniors with supports, participants were asked why they felt seniors were unaware of available services. Reasons for limited awareness were linked to both service providers and senior clients. In terms of service providers, participants felt there was a lack of information circulated about available supports. There was also a perception that where information was provided, it was often out-of-date and no longer reflected the current operations of programs and services. Ongoing circulation of out-of-date information was then cited as a reason for seniors' misunderstanding of service availability and confusion over costs or other parameters associated with particular supports. Others felt that service providers had limited time to promote their programs. There was also a perception that there was a lack of communication between agencies. Such problems may signify that there are larger problems with organizational capacity and resources.

Participants felt that seniors were not enticed to pursue more information about available supports because the various benefits associated with programs were not widely promoted. For those service providers whose work does not focus specifically on seniors, but whose services assist with aspects of seniors' wellness and quality-of-life, a lack of interest in seniors' needs was cited as an additional key barrier to linking seniors with supports.

There was also a perception that seniors were having difficulty being aware of, and connecting with, support groups that do not meet or operate on a consistent basis. Furthermore, participants commented that there were physical barriers preventing seniors from accessing information and library resources. The public library, for example, was not considered wheelchair accessible due to its narrow aisles and

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[1] Alert Line is an emergency response line for seniors.
[2] Handidart is a transportation service for those with disabilities or mobility challenges.

narrow Internet stalls that did not accommodate wheelchairs, as well as the absence of an elevator.

While there was a perception that service providers were not distributing sufficient information about available supports, there was also a sense that seniors were not pursuing information. Some participants felt that seniors will not pursue information about programs and services until they are in need, while others felt that limited community involvement in social and recreational groups prevented seniors from being exposed to information. Linking seniors with adequate supports was also challenging due to fears or uncertainties that seniors had in asking the right questions in order to obtain useful information about needed supports.

There was also a perception that seniors did not know where to go to obtain information about available seniors' supports. In a resource town experiencing an in-migration of seniors and out-migration of youth, participants felt that challenges associated with linking seniors with information supports were compounded by the absence of family to provide assistance in pursuing and sifting through information. While seniors' limited use of computers was cited as another reason why they were unaware of programs and services, we would argue that such assertions do not consider the full range of communication mechanisms required to reach seniors. Given the diverse needs, interests, education, mobility challenges, incomes, and lifestyles of seniors, agencies will need to draw upon multiple communication tools and mechanisms, and involve seniors in the design and development of communication strategies. A final comment offered by participants concerning the limited awareness of programs and services was simply linked to the memory capacity of some seniors.

3.2. Current Communication Strategies Used by Service Providers

Given the limited awareness of seniors' supports, we wanted to explore the information and communication strategies that were being used by service providers. Four general approaches were used (see Table 3). The first involved informal methods of communication, including personal contact, word of mouth, churches, bulletin boards, and relying on a reputation established through a track record. In a small town setting, the use of informal methods of communication can be beneficial in developing service provider-client relationships and trust. There can be considerable challenges, however, in ensuring the effectiveness of informal methods if they are sporadically used, particularly if organizations have 'limited time' for communication. It is also difficult to guarantee the consistency and quality of information that is shared. Inconsistent 'messages' about services and programs can result in confusion, especially when groups of seniors meet and each person has a different story to share with respect to a particular service. A heavy reliance on informal methods of communications also leaves seniors with nothing tangible to refer to at a later date. As change is a common component of organizations operating in an era of rapid restructuring, it can be easy for residents to misinterpret or misplace details of available supports through informal methods of communication. Such methods should be considered as one key component, but not 'the' key component, of a communications strategy.

Secondly, service providers utilized printed materials, specifically newspaper articles and advertisements, newsletters, booklets, brochures, pamphlets, letters, posters, and signs. Many of these mechanisms are beneficial to provide seniors with tangible materials that can be referred to when needed. The quality of

information produced in such printed materials will be equally important; however, and information needs to be current, concise, and clear. Seniors with limited mobility may not be motivated to seek printed materials from multiple supports if it is not collated or available in a central location.

A third strategy involved more formal processes of interaction between service providers and clients. Examples cited by participants included referrals and assessments, making public presentations around the community, organizing public awareness campaigns, setting up booths at the mall, handing out information at fundraising events, organizing public functions and events, and organizing workshops. Like informal methods of communications, these formal methods of communication are beneficial as they help to build client-service provider relationships and trust. They also provide an opportunity for two-way dialogue to answer questions and help alleviate confusion or misunderstandings about accessing services. These methods can enhance the visibility of supports in the community, particularly if they are delivered in locations where seniors spend their time. Given the time and resources that are required to deliver such formal mechanisms, however, it may not be possible for overburdened organizations to offer them on a routine basis. Given the importance of routine exposure to enhance seniors' awareness, learning, and relationships with service supports, it will be important to use such formal communication mechanisms to supplement a comprehensive communications strategy.

Table 3. *How does your organization promote / advertise programs / services provided for seniors?*

Informal Method of Communication	**Printed Materials**
Including:	Including:
Word of mouth	Newspaper advertisements
Telephone calls	Brochures
Track record	Newsletter
Bulletin boards	Newspaper articles
Personal contact	Booklets
Churches	Pamphlets
	Letters
	Posters
	Signs
Formal Methods of Communication	**Technology**
Including:	Including:
Referrals and assessments	Radio
Public presentations	Channel 10 announcements
Awareness week / month	E-mail
Booths at the mall	Television advertisements
Fundraising events	Television interviews
Public functions / events	
Workshops	
	Other
	Services not promoted

Source. Terrace and Area Seniors Needs Study, 2006.

Technology was the fourth approach used to promote available supports to seniors. Radio, a local television channel, and e-mail were used. None of the local service providers mentioned that they used the Internet to routinely promote their services to seniors. For public sector services, much general information was available on government websites but these did not usually extend to local hours, locations, and contact numbers. Furthermore, some organizations did not promote or advertise their services to seniors.

3.3 Assessing Participant Recommendations to Improve Communication Protocols with Seniors

Finally, to improve information sharing protocols that target seniors, participants were asked to identify how information about seniors' supports should be provided (see Table 4). Seven general recommendations were provided to improve and support existing communication strategies. First, there were calls to collate information to ease seniors' access to information about a range of supports. In this respect, some participants recommended the development of a seniors' newsletter where announcements concerning services and programs could be made and shared. This would provide seniors with one source of information concerning updates to services and would relieve the pressure for seniors to sift through newspapers to find what is relevant to them or to pursue information from multiple sources. Seniors' newsletters are already being used for this purpose in other small communities around northern BC (Halseth, Ryser, & Manson, 2008). Others suggestions included a community directory as one piece of a welcome wagon package distributed to new senior residents and available to existing residents as they age. Development of a one-stop information centre to consolidate and distribute information about available senior supports was also suggested. Such a one-stop information centre should be spearheaded by an information coordinator to assist seniors who may have difficulty sifting through information and understanding how to access services.

Two types of outreach strategies were recommended to increase access and exposure to information about seniors' supports. The first involved the delivery of outreach programs through natural gathering places for seniors, including doctor's offices, senior centres, the public library, public functions, and mall displays. Selwyn et al. (2003) caution, however, that while libraries are physically located in communities, their connectivity with older adults is questionable. To become an effective partner in information and communication strategies, such focal points will need to ensure that they are 'accessible' both through physical design and through the provision of orientation sessions to ensure seniors can easily and comfortably use such facilities. A second outreach strategy involved dovetailing promotional efforts and making better use of professionals, such as public health nurses and long-term care staff, and volunteers who make home visits to promote programs and communicate any changes.

Websites were also recommended to complement existing strategies. A local seniors' resource website was noted as a logical compliment to a local one-stop seniors' referral centre. If organizations have sufficient expertise, the use of Internet tools such as websites can enable service providers to update changes to programs in a cost effective manner. This must be complimented with a concerted effort to provide affordable, if not free, routine training opportunities to enable seniors to become comfortable with technology (a current need that will likely fade away over

the next two decades). This will not be easy as a number of seniors in this 'resource town in transition' worked in labour intensive, technology free, resource sector jobs. Many were able to acquire their jobs (i.e. as equipment operators) in the resource sector with low levels of education. Both general literacy and computer literacy programs in non-traditional, senior-friendly learning venues will be needed.

To help seniors learn about processes to access services, participants called for more two-way dialogue sessions with service providers, such as education and information programs, meetings, presentations, workshops, and even counseling. Finally, to address concerns with limited organizational resources, free advertising for non-profits, and a collaborative mail-out campaign were suggested.

Table 4. *Recommendations for Communication Strategies*

Collating Information	**Letters**
Seniors' newsletter	Letters by civil service
Welcome wagon package for new seniors	Letters by local government
Community directory	
One-stop information centre	**Websites**
Outreach at Natural Gathering Places	**Two-way Dialogue**
Doctor's offices	Education and information programs
Seniors' centres	Meetings and presentations
Library	Workshops
Public functions	Counselling
Mall displays / booths	
Outreach via Professionals / Volunteers	**Addressing Limited Resources**
Public health	Free advertising for non-profits
Home care	Pool resources for mail-out campaign
Terraceview Lodge long-term care staff	
Terrace Volunteer Bureau	
Book delivery services	

Source. Terrace and Area Seniors Needs Study, 2006.

If we place organizational limitations within a context of service restructuring and community transition, service providers cannot assume responsibility alone for the inability to deploy an effective communications strategy to link seniors with supports. Symptoms of limited organizational capacity have been exposed and exacerbated by senior government cuts and downloading of responsibilities onto an already overburdened service sector. A coherent and effective communications strategy cannot be developed without local and senior government support that develops communication skills and facilitates cooperation amongst service agencies in order to reach the goal of enhancing seniors' quality-of-life.

4.0 Discussion

Despite the increasing trend towards resource frontier ageing in northern BC, policies and ongoing service restructuring decisions have left many places ill-equipped to cope with the different sets of pressures posed by an older population. Such local service supports and community designs have typically been directed to

meet the needs of a young labour force and their families. Global competitive pressures, industrial restructuring, and labour shedding technologies, however, have changed the demographic composition of these towns with an out-migration of young families, an ageing older workforce, and a growing presence of seniors. Although it can be challenging and frustrating for seniors to navigate and re-navigate changing service supports, little research has explored the information and communication strategies deployed to link older residents with needed supports. In order to develop responsive and appropriate institutional capacities to address seniors' needs in rapidly changing places, we need to understand problems associated with existing communication strategies and strengthen them with new multi-faceted communication approaches that are grounded in place-based solutions to meet seniors' needs.

Services in Terrace have been changing rapidly. At first glance, Terrace residents have benefitted from service and infrastructure improvements as the community works through a transition from a resource-based economy to a regional service centre. Government policies aimed at reducing expenditures, however, have also meant that service providers have faced uncertainty surrounding financial resources that support operations, reduced and/or changed hours and days of operations, automated or consolidated operations, or led to temporary or permanent closures. At the same time, the growing presence of seniors within the community is producing new service pressures and demands. Unfortunately, as services are being impacted and changed in multiple ways, seniors are struggling to connect with needed supports.

Our findings indicate several issues that inhibit the effective communication of critical service supports to seniors in Terrace, BC. The circulation of out-of-date information may be a symptom of larger capacity issues within organizations. With concerns expressed about the limited time and efforts dedicated to promoting and sharing information about senior supports, senior government policies aimed at reducing financial supports to service providers need to be reconsidered in order to ensure such organizations have sufficient human and financial resources to link seniors with appropriate supports. Local groups may wish to pool their resources to hire an information coordinator who is dedicated to this task. Professional training programs may also need to pay more attention to developing communication skills amongst graduating professionals who will be working with more constrained budget limitations in rural and small town communities.

The limited awareness of seniors' supports, limited cooperation across service providers, lack of communication, and seniors' confusion and misunderstandings about available services all signify gaps in the communication tasks in the day-to-day activities of service providers in Terrace. Information management needs to become a formal responsibility of staff that is supported with sufficient resources. To be relevant and useful, information must be routinely updated. More strategic planning must also be done concerning the type of information that is communicated to seniors and the mechanisms for that communication. Contact information, details concerning available services, costs, benefits, qualifying criteria, and admission requirements are just some of the key pieces of information that should be distributed to seniors. Greater cooperation and sharing of information is also needed with service providers located in larger centres to ensure that communication is not just about services at the local level, but also about those which residents must access in other centres if necessary. Making this more complicated is that the types of information sought by seniors (and the way

they want to access that information) may change over time as new generations age locally. More work also needs to be done to enhance the service providers' awareness of local ageing trends and the implications for planning and investing in programs supports and infrastructure.

The lack of synergies and cooperation across service providers reflect longstanding government funding policies that have divided organizations and established competitive funding environments. Senior government policies have the potential to create greater synergies that encourage service providers to pool resources in the development, delivery, and communication of senior service supports. Local governments can provide logistical and infrastructure supports to facilitate cooperation and to develop effective communication strategies to link seniors with a broad range of services. Developing a seniors' task force that meet regularly will also enhance coordination across service providers.

As service providers embark on planning new communication strategies to reflect the changing pressures and demands of resource towns in transition, they need to draw upon a diverse set of communication tools and mechanisms as a part of their strategy to effectively deliver key supports to an ageing population. While traditional forms of communication, such as newspapers, radio, and word of mouth remain important, more formal routine opportunities for two-way dialogue events are needed to build relationships between senior clients (including future senior clients as well as advocates for senior clients) and service providers. These two-way dialogue activities are also important to facilitate learning, help allay seniors' fears, and address any misunderstandings seniors may have about available services so that they become more familiar with the complex processes associated with service supports.

Most importantly, it will be critical to use appropriate infrastructure, tools, and mechanisms to collate and facilitate the timely distribution of changes concerning a broad range of senior support services available both locally and in nearby regional service centres. There are multiple options to accomplish this goal ranging from a community directory to websites. A one-stop information centre is one good option for providing up-to-date information about available services. In BC, tourism information centres already provide us with an example of a one-stop shop to provide information to meet various tourists' needs (i.e. accommodations, restaurants, city guides, recreational/adventure activities) both locally and for other places around the region/ province. A similar model could be adopted for a one-stop shop information centre that would be of benefit to not only seniors, but other residents as well. In fact, some northern BC communities have already developed a one-stop shop to provide timely and up-to-date information to seniors (Ryser & Halseth, 2008; Ryser, Halseth, & Hanlon, 2008). Imagine a one-stop shop where seniors could obtain information about service options, costs, qualifying criteria, and application processes associated with various housing options, health care services, transportation options, social and recreational opportunities, and other community supports to facilitate healthy ageing in our resource communities. Residents could also more easily collect information about key contacts and logistical information associated with more specialized services available in larger, more distant regional centres. Such a centre, however, should also be supported with an appropriate budget and a seniors' information coordinator.

There is still tremendous opportunity for service providers with limited resources to use ICTs to more efficiently communicate information about service supports and changes to seniors. Using applications such as websites or social media demonstrates

the potential for service providers to quickly reach a range of seniors in multiple places. For example, each time updates are loaded to a Facebook site, messages are sent by e-mail to subscribing members. However, the use of ICTs is only good if routine opportunities exist for seniors to learn how to use such applications. If service providers choose to pursue ICTs (and they must be mindful of the financial diversity in local seniors populations), they will need to ensure that there are sufficient resources to support ongoing training, skills development, and troubleshooting for both staff and clients. Again, there is an important role for local and senior levels of government to play in providing expertise as well as logistical and financial supports to assist overburdened service providers develop greater synergies and efficiencies through such communication options. Finally, service providers need to follow-up their communication activities with monitoring and evaluation exercises in order to ensure that seniors are being connected with appropriate services.

Within a rural and small town context, we continue to know little about the constraints impacting working relationships and partnerships between service providers and communication supports. Research is needed on the effectiveness of processes associated with information and communication strategies across a range of rural and small town contexts (McKinley et al., 1994). This should include research about the effectiveness of information and communication strategies deployed by regionalized service providers in larger centres to reach seniors and other residents in smaller places. Furthermore, as most research on distant informal care support networks has focused on health and personal care (Fast, Keating, Otfinowski, & Derksen, 2004; Joseph & Hallman, 1998), an important future research direction will be to examine the information and advocacy supports that are offered by distant family members in order to connect seniors with both local and regionalized supports. Future research may explore motives or reasons why service providers prefer to use certain communication tools over others, or why they feel some methods will be more effective in reaching seniors in a small town setting. For example, is the limited use of the Internet technology to promote services due to limited financial supports to acquire local expertise, a lack of training in technology applications, or a desire to respond to client preferences in how they receive information? We also need to understand the types of resources that organizations allocate to services, programs, and communication strategies that target seniors in order to understand their commitment and readiness to address the needs of an ageing population. By evaluating the roles and responsibilities within organizations, we can assess the extent to which communication tasks are considered to be an important part of service delivery.

Developing an effective information and communication strategy is a key component to developing a supportive living environment that can enhance the health, wellness, and quality-of-life of seniors in small communities. By investing wisely and purposefully in our senior support services, communities can take advantage of a new opportunity for economic diversification and community renewal.

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