

# SOCIAL PARTICIPATION AND ITS BENEFITS



Report Prepared by:

Sheila Novek  
Verena Menec  
Tanya Tran  
Sheri Bell

August 2013

Centre on Aging



UNIVERSITY  
OF MANITOBA

The Centre on Aging, established on July 1, 1982 is a university-wide research centre with a mandate to conduct, encourage, integrate, and disseminate research on all aspects of aging.

For further information contact:

Centre on Aging, University of Manitoba  
338 Isbister Building  
Winnipeg MB R3T 2N2  
Canada

Phone: 204.474.8754 | Fax: 204.474.7576  
Email: [coaman@umanitoba.ca](mailto:coaman@umanitoba.ca) | Web site: [www.umanitoba.ca/centres/aging](http://www.umanitoba.ca/centres/aging)

How to cite this report:

Novek S, Menec V, Tran T, Bell S. Social Participation and its Benefits. Winnipeg, MB: Centre on Aging, August 2013.

© Centre on Aging

This report may be reproduced, in whole or in part, provided the source is cited.

Photo credits:

Seniors in gym © Health Canada

Seniors sitting © 123RF Stock Photos\_Qi Feng

This report was funded by the Manitoba Seniors and Healthy Aging Secretariat.

# SOCIAL PARTICIPATION AND ITS BENEFITS



Report Prepared by:

Sheila Novek  
Verena Menec  
Tanya Tran  
Sheri Bell

August 2013



# TABLE OF CONTENTS

<b>Executive Summary .....</b>	<b>1</b>
<b>Exploring the Impacts of Senior Centres on Older Adults .....</b>	<b>7</b>
What is this report about? .....	7
Social participation .....	9
The impact of social participation on health .....	9
Senior centres .....	12
The benefits of senior centre participation .....	13
Limitations of current senior centre research .....	16
<b>Section 2: Interviews with older adults .....</b>	<b>17</b>
Methods .....	17
Participants .....	17
Health and well-being profile of participants.....	19
Attending the senior centre .....	21
Perceived benefits of attending a senior centre: Quantitative findings.....	22
Older adults' perspectives on the benefits of attending senior centres: Qualitative findings .....	26
Positive features that enhance senior centre participation .....	37
Challenges that impact senior centre participation .....	40
<b>Section 3: Interviews with directors and program coordinators of senior centres..</b>	<b>43</b>
Methods .....	43
Perceived benefits of senior centres .....	43
What are the biggest challenges senior centres face? .....	44
Evaluating the impacts of senior centres .....	45
Pertinent information .....	46
Potential issues and challenges .....	46
<b>Section 4: Recommendations for developing tools to evaluate senior centres .....</b>	<b>47</b>
<b>Section 5: Discussion .....</b>	<b>49</b>
<b>Section 6: conclusions .....</b>	<b>55</b>
<b>References .....</b>	<b>57</b>

<b>Appendix: Examples of possible evaluation tools .....</b>	<b>63</b>
Facility tool.....	63
Membership tool.....	65
Program evaluation tool.....	67
Centre satisfaction tool .....	69
Outcome evaluation tool.....	71

## LIST OF FIGURES

<b>Figure 1: General health questions .....</b>	<b>19</b>
<b>Figure 2a: Has someone to listen to.....</b>	<b>20</b>
<b>Figure 2b: Loneliness .....</b>	<b>21</b>
<b>Figure 3: Activities participants engaged in at the senior centre once a month or more .....</b>	<b>22</b>
<b>Figure 4a: Perceived benefits of senior centre—psychological .....</b>	<b>23</b>
<b>Figure 4b: Perceived benefits of senior centre—social benefits .....</b>	<b>24</b>
<b>Figure 4c: Perceived benefits of senior centre—mental health .....</b>	<b>24</b>
<b>Figure 4d: Perceived benefits of senior centre—physical health .....</b>	<b>25</b>
<b>Figure 5: Satisfaction with senior centre.....</b>	<b>25</b>

## LIST OF TABLES

<b>Table 1: Demographic profile of participants .....</b>	<b>18</b>
<b>Table 2: Logic model of senior centre outcomes.....</b>	<b>48</b>





# EXECUTIVE SUMMARY

## Background

The Centre on Aging was contracted by the Manitoba Seniors and Healthy Aging Secretariat to examine the benefits of social participation on the health and well-being of older adults, as well as the role senior centres might play in promoting the health and well-being of older adults who use them.

The project had two aims:

1. To examine the benefits of social participation in general, as well as the benefits of seniors centres by conducting a review of existing research, and by interviewing older adults who attend senior centres.
2. To make recommendations for a tool (or tools), based on the literature review, interviews with older adults, and directors or program coordinators of senior centres, that could be used in the future to evaluate the impacts of senior centres.

## Methods

The present report is based on three components:

1. A review of the existing research on the benefits of social participation in general, and the benefits of senior centres specifically.
2. Interviews with 60 older adults who attended five senior centres in and outside of Winnipeg. Interviews were conducted in person at senior centres between May and December 2012. A variety of questions were asked about individuals' participation in activities and the impact that the senior centre had on their lives.
3. Interviews with 10 directors and program coordinators of senior centres in Manitoba explored their views of the impacts of senior centres and the usefulness of an evaluation tool or tools.

## Findings

### The benefits of social participation

A large body of literature shows that social participation is associated with better mental and physical health. The following provides a snapshot of some research findings:

- For every 1 point decrease on a social activity scale, there was a 33% more rapid rate of decline in motor function (e.g., grip strength, muscle strength) within an average of five years (Buchman et al., 2009)
- The risk of developing a disability in activities of daily living decreased by 43% over an average of 5 years for each additional social activity engaged in; the risk of mobility disability decreased by 31% (James et al., 2011)
- Among older adults with depression, those who were highly socially active were over 2.5 times more likely to have improvements in their depressive symptoms 2 years later than those with low social activity (Isaac et al., 2009)
- An intervention that combined structured social activity with light-intensity exercise (e.g., card games, croquet) significantly improved older adults' memory function and sleep (Naylor et al., 2000)
- The rate of cognitive decline was reduced by an average of 70% in older adults who were frequently socially active compared to those who were infrequently socially active over an average of 5 years. (James, Wilson, Barnes, & Bennet, 2011)
- Older adults who participated on a daily or weekly basis in social activity had a 40% reduced risk of developing dementia compared those who were not socially engaged (Wang, Karp, Winblad, & Fratiglioni, 2002)
- Older women who participated in organizational activities or study circles had half the likelihood of dying within a twelve year time period compared to those who did not participate in these social activities (Agahi & Parker, 2008)

Research (James et al., 2011) suggests that if we could increase older adults' activity level by one social activity, we could reduce the proportion of people with ADL disabilities from 38% to 21.7%—a 16.3% decrease. Put another way, for every 7 older adults who increase their social activity level, one person would remain disability-free within about a 5-year time frame. We would further reduce the proportion of older adults who develop a mobility disability from 62% to 43% - a 19% decrease. In other words, for every 6 older adults who increase their social activity level, one person would not develop mobility disability.

## The benefits of senior centres

---

90% of participants indicated that the activities contribute to their emotional well-being and 85% reported that the activities help them to relieve stress.

---

Research on senior centres demonstrates that participation is associated with social, mental, and physical health benefits. Senior centres promote health by providing health and support services, encouraging active and healthy aging, and by fostering a social environment that is conducive to social participation and well-being. Senior centres are also ideal venues for health promotion interventions, such as falls prevention, influenza vaccines, diabetes management, and so forth.

Key findings from our interviews with older adults are:

- Virtually all participants felt that the activities they engage in almost always or often give them a sense of accomplishment.
- 80% or more also felt that the activities increased their knowledge, helped them gain self-confidence, and provided an opportunity to try new things.
- The vast majority of participants thought that the activities provided them with social benefits, allowing them to socially interact, be part of a community, and develop close relationships.
- 88% of participants indicated that it is almost always or often true that the activities help them stay healthy. The vast majority of participants also indicated that the activities contribute to their emotional well-being (90%), and help them to relieve stress (85%).

- Opportunities to stay active and socially engaged helped several participants cope with mental illness and addictions.
- Senior centres promoted older adult health by providing opportunities for physical activity and access to health information, education and health services.
- Senior centres offered a range of educational opportunities that promoted learning, creativity, and skills development.
- Volunteering opportunities enabled older adults to socialize, contribute to their communities, and share their knowledge and skills.

*“It gives me a chance to get out of where I’m living and to enjoy the friendships of the friends that I’ve made here. Everybody is so friendly, it’s such a wonderful feeling that I look forward to Wednesdays, you have no idea.”*

*“This has kept me above ground, you know, from getting totally depressed. Cause I would be sitting in the house doing nothing.”*

*“It certainly filled a large void in my life following my husband’s death. And I believe it contributed to my recovery from that depressive state.”*

### Potential uses for senior centre evaluation tools

The literature review, interviews with older adults, and interviews with directors and program coordinators of senior centres suggested that a range of information would be useful for evaluating senior centres. For example, it may be of interest to find out how many volunteers are involved in a senior centre, how many seniors attend a particular activity program (e.g., an exercise class), or whether attending a senior centre has physical or mental health benefits.

Directors and program coordinators of senior centres identified a number of possible uses for evaluation tools, including:

- Program planning;
- Identify problems with programs, services or facility;
- Improving retention of members;
- Identifying and eliminating barriers for participants;
- Finding out if people stop attending and reasons why they did not return; and
- Obtaining funding

## Conclusions

- Research demonstrates the benefits of social participation to older adults' physical and mental health. The potential cost savings of enhancing social participation and consequent health benefits should be explored.
- Securing funding to support operations is an on-going challenge for senior centres. Ensuring that senior centres have sufficient funds ensures that they are able to provide the programs, services, and resources to promote the health and well-being of older adults which, in turn, could lead to cost savings in the health care sector.
- The availability of health and support services varied considerably between senior centres. Senior centres serve diverse populations of older adults, and members vary in terms of their age, health and support needs. Whether some senior centres would benefit from additional or specialized health services, including mental health services, should be explored.
- Directors and program coordinators of senior centres identified a range of possible uses for an evaluation tool. This suggests that no single tool will meet all their needs; rather, different tools would need to be used to meet different purposes. The feasibility of implementing, as well as usefulness of these tools will need to be evaluated.



# EXPLORING THE IMPACTS OF SENIOR CENTRES ON OLDER ADULTS

## What is this report about?

The Centre on Aging was contracted by the Manitoba Seniors and Healthy Aging Secretariat to examine the benefits of social participation on the health and well-being of older adults, as well as the role senior centres might play in promoting the health and well-being of older adults who use them.

The project had two aims:

1. To examine the benefits of social participation in general, as well as the benefits of seniors centres by conducting a review of existing research, and by interviewing older adults who attend senior centres.
2. To make recommendations for a tool (or tools), based on the literature review, interviews with older adults, and directors or program coordinators of senior centres, that could be used in the future to evaluate the impacts of senior centres.

In **Section 1** of this report we provide an overview of the research on the benefits of social participation and the benefits of attending senior centres.

In **Section 2**, we present findings from interviews with older adults who attend senior centres.

In **Section 3**, we present findings from interviews with directors and program coordinators of senior centres.

In **Section 4**, we provide recommendations for developing tools to evaluate the impacts of senior centres.

In **Section 5**, we summarize and discuss the findings from the literature review and interviews.

Lastly, in **Section 6**, we provide some general conclusions.





# SECTION 1: PREVIOUS LITERATURE

## Social participation

Social participation is broadly defined as a person's involvement in activities that provide interaction with others (Levasseur, Richard, Gauvin, Raymond, 2010; James et al., 2011).

Providing opportunities for social participation among older adults is particularly important, as social participation decreases with age (Lee et al., 2008; Bukov, Maas, & Lampert, 2002). Changes throughout the life course, including life events (e.g. retirement, death or illness among friends and family, relocation etc.), health conditions, and socio-economic status can impact patterns of social participation (Ashida and Heaney, 2008).

## The impact of social participation on health

Research on social participation has demonstrated wide-ranging health benefits for older adults, including:

- enhanced quality of life (Levasseur, Desrosiers, & Noreau, 2004)
- longer survival (Glass, Mendes de Leon, Marttoli, & Berkman, 1999)
- lower morbidity (Berkman, Glass, Brissette, & Seeman, 2000)
- better self-rated health (Lee et al., 2008)
- decreased risk of disability and functional and mobility decline (Avlund et al., 2003; Buchman et al., 2009; Mendes de Leon, Glass, & Berkman, 2003; James, Boyle, Buchman, & Bennett, 2011; Thomas, 2011)
- decreased likelihood of depression (Glass, Mendes de Leon, Bassuk, & Berkman, 2006; Golden, Conroy, Lawlor, 2009; Isaac, 2009)
- decreased likelihood of generalized anxiety disorders (Golden, Conroy, Lawlor, 2009)
- decreased risk of cognitive decline (Golden, Conroy, Lawlor, 2009; James et al., 2011, Thomas, 2011)
- decreased risk of dementia (Fratiglioni, Paillard-Borg, & Winblad, 2004).

The impact of social participation on health increases with age (Lee et al., 2008), with the most profound health effects observed among older women (Lee et al., 2008; Thomas, 2011). As a result, social participation is widely regarded as a determinant of healthy aging (Levasseur, Richard, Gauvin, Raymond, 2010; James et al., 2011). Yet, social participation rates decrease with age and older adults face increased risks of social isolation (Lee et al., 2008). Given the significant impact of social participation on health, and the heightened risk for social isolation among older adults, opportunities for social participation constitute a critical component of policies and services designed to promote the health and well-being of older adults (Lee et al., 2008).

---

The impact of social participation on health increases with age, with the most profound health effects observed among older women.

---

## Snapshot of research on the benefits of social participation for older adults

- \* For every 1 point decrease on a social activity scale, there was a 33% more rapid rate of decline in motor function (e.g., grip strength, muscle strength) within an average of five years (Buchman et al., 2009)
- \* The risk of developing a disability in activities of daily living decreased by 43% over an average of 5 years for each additional social activity engaged in; the risk of mobility disability decreased by 31% (James et al., 2011)
- \* Among older adults with depression, those who were highly socially active were over 2.5 times more likely to have improvements in their depressive symptoms 2 years later than those with low social activity (Isaac et al., 2009)
- \* An intervention that combined structured social activity with light-intensity exercise (e.g., card games, croquet) significantly improved older adults' memory function and sleep (Naylor et al., 2000)
- \* The rate of cognitive decline was reduced by an average of 70% in older adults who were frequently socially active compared to those who were infrequently socially active over an average of 5 years. (James, Wilson, Barnes, & Bennet, 2011)
- \* Older adults who participated on a daily or weekly basis in social activity had a 40% reduced risk of developing dementia compared those who were not socially engaged (Wang, Karp, Winblad, & Fratiglioni, 2002)
- \* Older women who participated in organizational activities or study circles had half the likelihood of dying within a twelve year time period compared to those who did not participate in these social activities (Agahi & Parker, 2008)

## Senior centres

Social participation is a central component of senior centre activities and programs. While senior centres vary in terms of their constituents, programs and services, all senior centres strive to provide opportunities for social participation and interaction.

### **A note regarding terminology**

Many senior centres no longer use the term “senior centres”. In this report, we use the term senior centre for simplicity’s sake to refer to centres whose target audience are older adults.

Senior centres are designed to promote health and provide a community focal point on aging by enabling older adults to come together for services and activities that enhance their dignity, support their independence and encourage their involvement in and with the community. Senior centres provide services to support older adults including health and social support services, subsidized meals, advocacy, counseling, and information and referrals. In addition, they offer a wide range of programs including fitness, recreation, nutrition, education, and volunteer activities, designed to enhance social participation and promote health and well-being. Senior centres vary in terms of the services and programs that they offer, and they range in size, facilities and program focus. This diversity reflects, in part, a response to the different needs of their members, as well as the size and source of their funding (Pardasani, 2010).

Research (Aday, 2003; Pardasani and Thompson, 2010; Strain, 2001) suggests that older adults who attend senior centres differ from those who do not in that they tend to be:

- more likely to be single, widowed or living alone
- female
- between the ages of 75-84; participation tends to decline into very old age as the likelihood of frailty and physical limitations increases
- relatively healthier

## The benefits of senior centre participation

Evidence suggests that senior centres promote the health and well-being of older adults through the provision of health and support services, by encouraging active and healthy aging, and by providing a social environment that is conducive to social participation and well-being (Aday, Kehoe & Farney, 2006; Fitzpatrick, McCabe, Gitelson, & Andereck, 2005).

### Social benefits

Research has documented the social benefits of senior centre participation including the development of:

---

Senior centres protect older adults against the negative health consequences associated with social isolation.

---

- friendships (Aday, Kehoe, & Farney, 2006)
- social support (Fitzpatrick, Gitelson, Andereck, & Mesbur, 2005)
- social networks (Ashida and Heaney, 2008)
- social inclusion (Moody and Phinney, 2012)

### Physical health benefits

There is a growing body of research investigating the relationship between senior centre participation and health.

- Fitzpatrick, McCabe, Gitelson, and Andereck (2005) study of senior centres in Arizona found that working for pay at the centre, and eating lunch there were significantly associated with health benefits. The authors also found that women reported greater health benefits than men, and low income groups reported greater health and social benefits compared to higher income groups.
- Tang, Heo, and Wiessman (2010) study of female senior centre participants in Pittsburgh found a positive relationship between length of senior centre participation and physical health.
- Fitzpatrick, Gitelson, Andereck, and Mesbur (2005) study of participants at 2 senior centres in Ontario, indicated that social support received from friends or staff at the senior centre had a significant positive impact on participants' perceptions of their physical health.

## Mental health benefits

Research on senior centres suggests that participation is also associated with a variety of mental health benefits.

---

Senior centres are well suited to deliver health promotion and prevention programs designed for older adults.

---

- Using a national sample of Latino older adults in the United States, Farone, Fitzpatrick and Tran (2005) found that among respondents undergoing stressful life situations, older adults who attended senior centres experienced lower levels of psychological distress compared to those who did not.
- Aday, Kehoe and Farney (2006) examined the impact of senior centre friendships on women's health. In total, 67% of the women in the study felt that coming to the centre had significantly improved their mental health, and the impact was more pronounced for women who lived alone (71%). The greater degree of social support that women received through their senior centre, the more likely they were to engage in health promotion activities, and to indicate significant improvements to their mental well-being. Among women who lived alone, those who had dependable friends at the senior centre had lower rates of depression compared to those who had not developed friends they could rely on for assistance.
- Choi and McDougall (2007) compared depressive symptoms between home bound older adults and those attending senior centres. The authors found significantly higher rates of depression among home bound older adults compared to older adults who participated at senior centres.
- Fulbright's (2010) study of rates of depression and senior centre participation found that perceived social support available through senior centres was associated with improved life satisfaction and reduced depressive symptoms.

Overall, the research on senior centres and mental health suggests that mental health benefits are related to the social environment and the social support that older adults access through senior centres. By fostering the exchange of social support, senior centres protect older adults against the negative health impacts associated with social isolation.

## Senior centres and health promotion

Studies have also evaluated the effectiveness and impact of health promotion interventions conducted within senior centres.

- A senior centre-based nutrition intervention showed the reported consumption of at least seven servings of fruits and vegetables daily increased by 21% (Hendrix et al., 2008).
- After participating in a diabetes self-management intervention, older adults were more likely to follow an eating plan prescribed by their doctor, eat five or more servings of fruits and vegetables daily, space carbohydrates, and inspect the insides of their shoes. A1c levels, a measure of glucose control, also improved following the intervention (Speers et al., 2008).
- An evaluation of fall-prevention programming in senior centres showed that senior centres have the potential to become effective sites for fall-prevention strategies (Baker, Gottschalk, and Bianco, 2007).
- Phelan et al. (2002) conducted an evaluation of a disability prevention program involving 304 participants in 14 senior centres located throughout western Washington. The program involved an assessment, a personalized health action plan, and voluntary enrolment in an exercise class, chronic disease self management course, peer support from trained volunteers, as well as psychosocial support provided by a social worker. After one year of enrollment, participants exhibited reduced rates of disability risk factors, including rates of depression and physical inactivity (Phelan et al., 2002).
- Krieger et al. (2000) conducted a randomized control trial of a senior centre based program designed to increase pneumococcal and influenza immunization rates in older adults. The program used an educational mailing and tracking and outreach by volunteers from the senior centre. The intervention significantly increased immunization rates.

In sum, research on health interventions suggests that senior centres can be effective venues for health promotion and prevention programs designed for older adults. In particular, senior centres commonly have members who attend on a regular basis, a volunteer base, and a social environment that is conducive to information sharing and peer support (Krieger et al., 2000). On the other hand, challenges to implementing health promotion and prevention programs include low staffing, lack of facilities or resources, as well as cultural and communication barriers (Baker, Gottschalk, & Bianco, 2007).

### Limitations of current senior centre research

Much of the research on the benefits of senior centres is cross-sectional, so it is difficult to determine causality. The majority of studies use subjective measures to assess physical and mental well being (e.g. self-reported health, perceived mental health benefits), which may not be as accurate as objective measures of health outcomes. Most studies do not include a control group to compare differences between senior centre participants and non-participants. Finally, few studies have looked at long-term impacts such as nursing home admission.



# SECTION 2: INTERVIEWS WITH OLDER ADULTS

## Methods

In order to gain a better understanding of the possible impacts of senior centres, as well as to help us make recommendations for a tool (or tools) to evaluate senior centres, we conducted interviews with 60 individuals who attended five senior centres in and outside of Winnipeg. Interviews were conducted in person at the senior centres between May and December 2012. A variety of questions were asked, including close-ended and open-ended questions. Interviews were tape-recorded and subsequently transcribed.

## Participants

Participants ranged in age from 50 to 99; the average age was 74. The majority of participants were women (67%). Almost half of the participants (45%) were widowed, with two thirds stating that they lived alone (67%). Participants had a range of educational backgrounds from less than high school to postgraduate education. Overall, the participants were similar to those in previous studies on senior centres, suggesting that our sample was reasonably representative of senior centre members in general.

**Table 1: Demographic profile of participants**

		Frequency (n=60)	Percent (%)
<b>Gender</b>	<b>Men</b>	20	33.3
	<b>Women</b>	40	66.7
<b>Age</b>	<b>50–74</b>	29	48.3
	<b>75+</b>	31	51.7
<b>Marital Status<sup>1</sup></b>	<b>Single/Separated/Divorced</b>	14	25.0
	<b>Married/Common-law</b>	17	30.4
	<b>Widowed</b>	25	44.6
<b>Living Arrangements</b>	<b>Lives with others</b>	20	33.3
	<b>Lives alone</b>	40	66.7
<b>Education</b>	<b>Less than high school</b>	17	28.3
	<b>High school</b>	11	18.3
	<b>College, diploma or certificate</b>	22	36.7
	<b>Post-graduate</b>	10	16.7

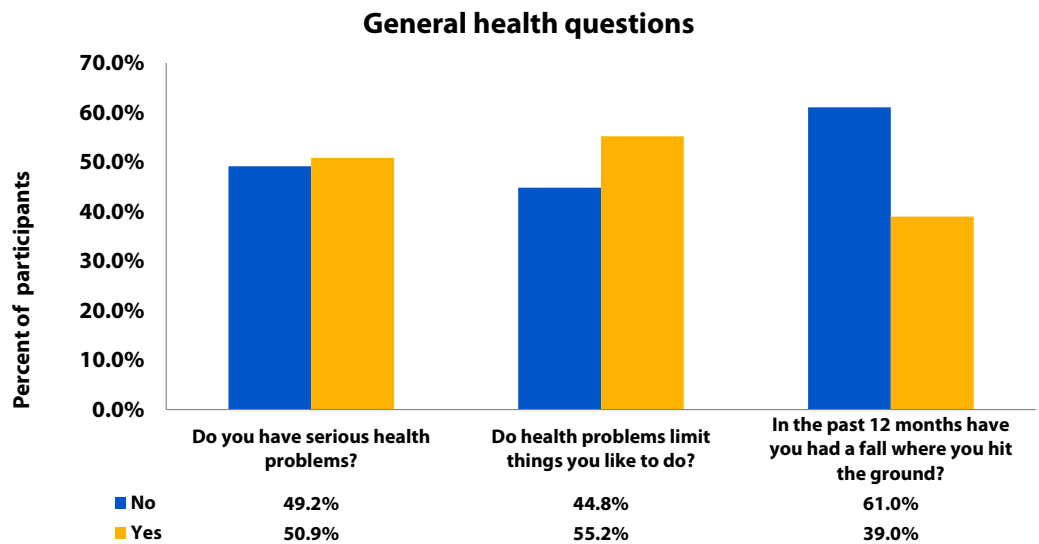
<sup>1</sup>Four participants did not provide their marital status

## Health and well-being profile of participants

Slightly less than half of the participants (45%) rated their health as very good or excellent. More female participants (50%) than male participants (35%) rated their health as very good to excellent.

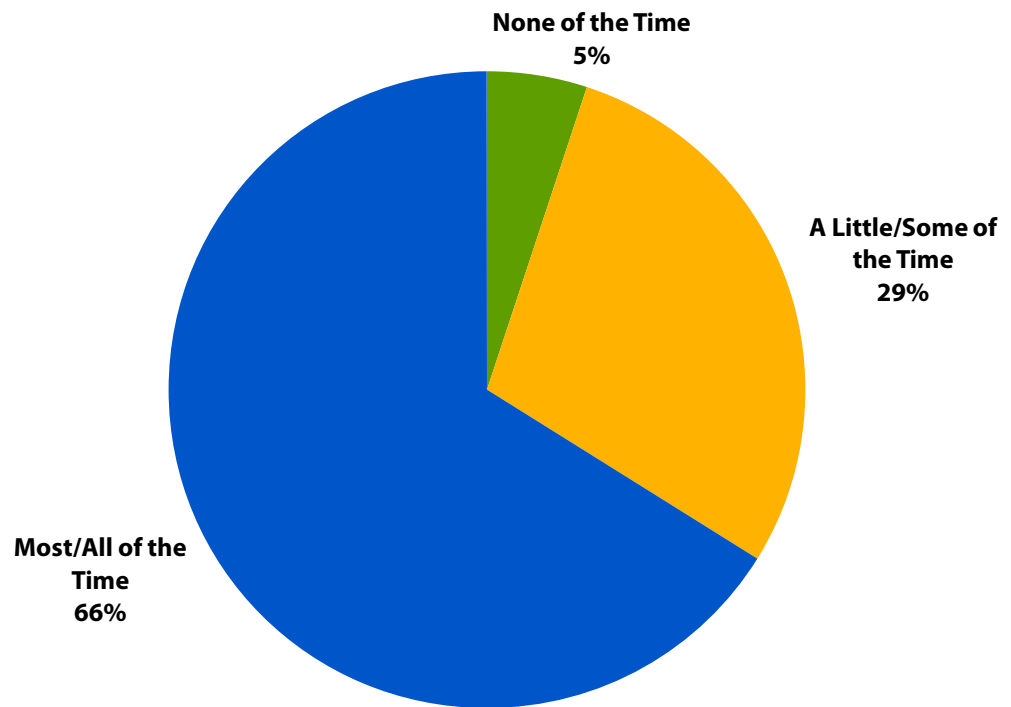
When participants were asked whether they had a health problem that they considered to be serious, 51% said yes (see Figure 1). Further, slightly more than half of the participants (55%) said that their health problems limit things they like to do. When participants were asked whether, in the past twelve months they have had a fall, 39% of participants stated yes.

**Figure 1: General health questions**

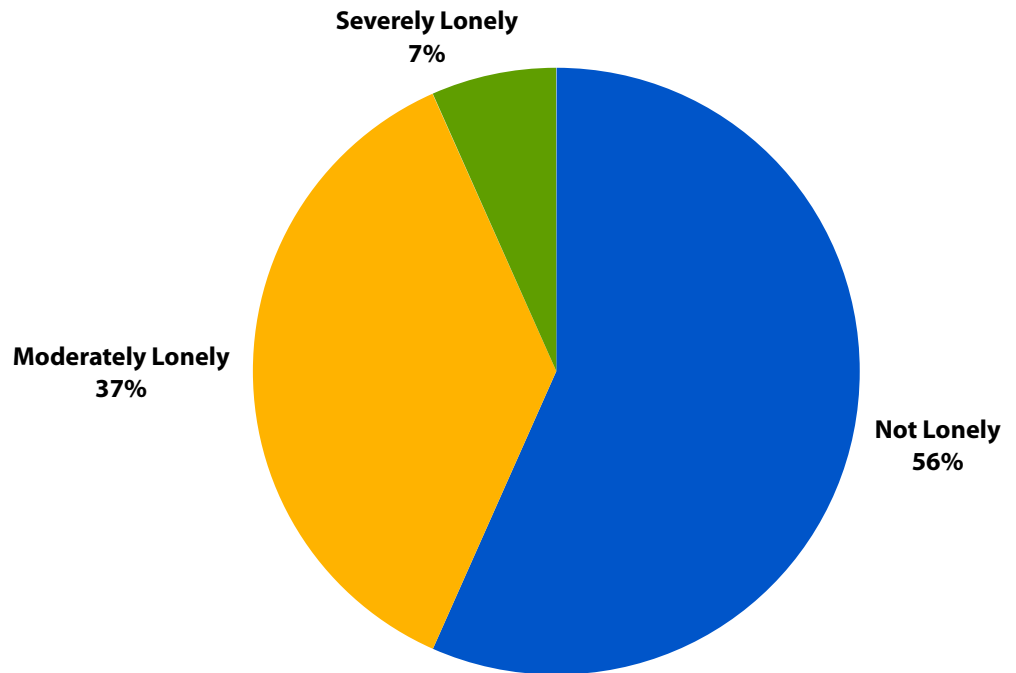


The vast majority of participants (92%) stated they were somewhat happy or very happy. When participants were asked whether they had someone to listen to them when they are anxious or upset, the majority (66%) said that they have someone to listen to them most or all of the time. Additionally, a little over half of the participants (56%) indicated that they were not lonely (see Figure 2a and 2b).

**Figure 2a: Has someone to listen to**



**Figure 2b: Loneliness**



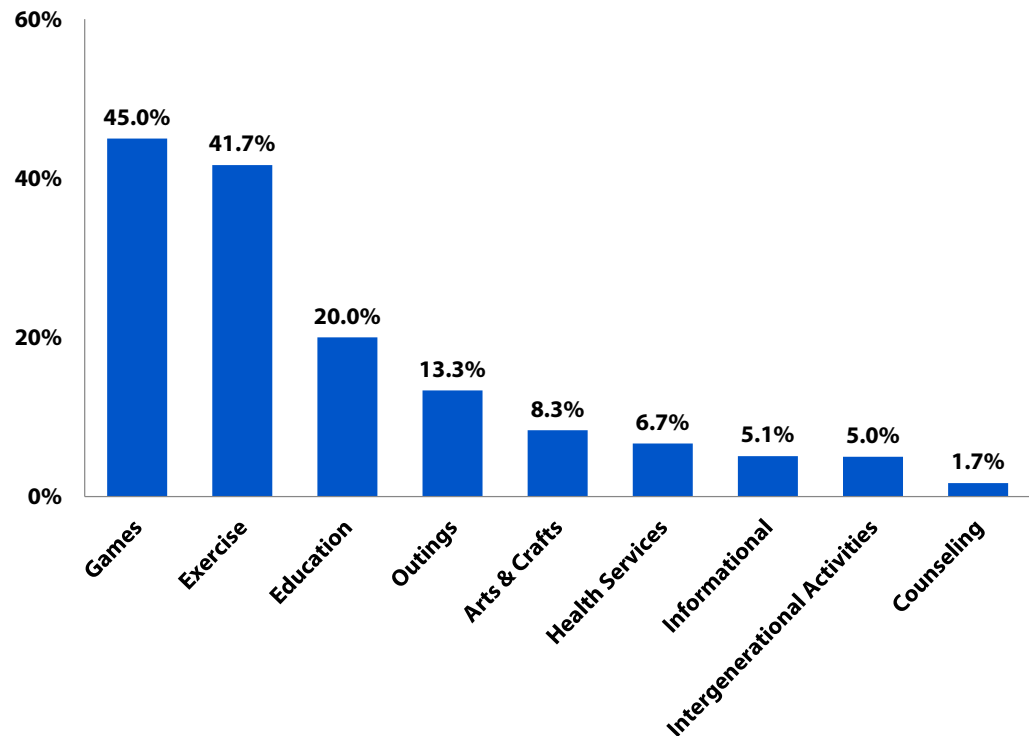
## Attending the senior centre

We asked participants how they get to and from their senior centre. Half of the participants (53%) said that they drove, 22% indicated that they walk, and the remainder used a variety of transportation options, including the bus, handi-transit, and a shuttle.

When asked how long they had been coming to the senior centre, 72% of participants stated more than five years. Just over half (53%) of participants said that they attended the senior centre three or more times per week. An additional 35% attended the senior centre once or twice a week. The remainder of participants attended the senior centre less than once a week.

Overall, 83% of participants said they volunteer at the senior centre. When asked what activities they participate in at the senior centre and how often they participate, the most frequently mentioned activities included playing games such as bingo (45%), exercise (42%) and educational activities (20%) such as internet training (see Figure 3).

**Figure 3: Activities participants engaged in at the senior centre once a month or more**



## Perceived benefits of attending a senior centre: Quantitative findings

Participants were asked a series of questions about how they benefitted from attending a senior centre. Four domains were examined:

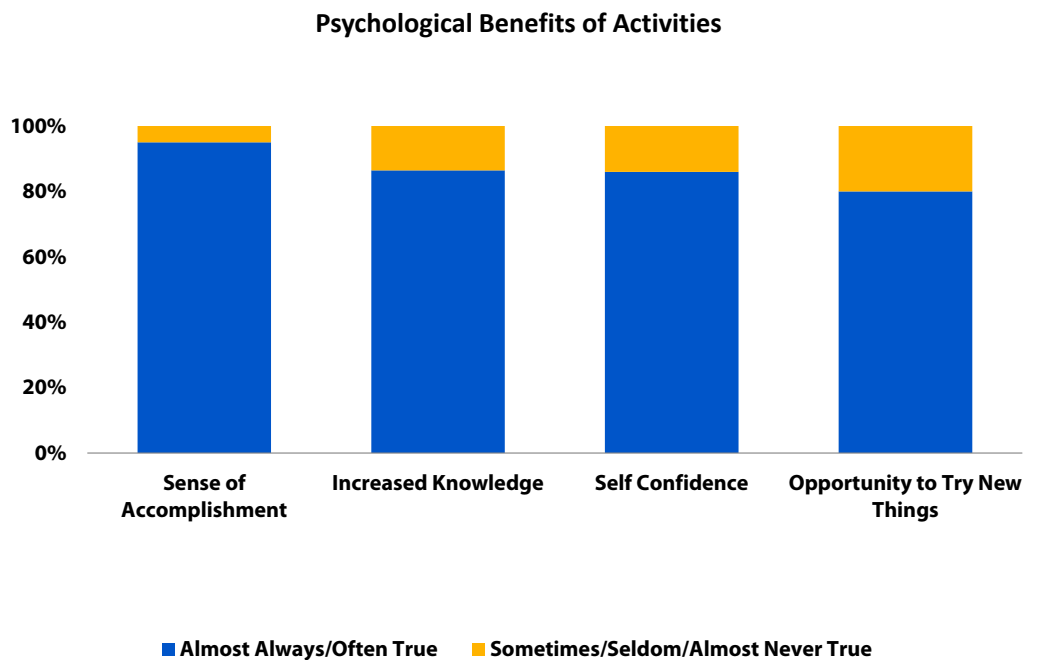
- Psychological benefits
- Social benefits
- Physical health benefits
- Mental health benefits

In terms of **psychological benefits**, virtually all participants felt that the activities they engage in almost always or often give them a sense of accomplishment; 80% or more also felt that the activities increased their knowledge, helped them gain self-confidence, and provided an opportunity to try new things (see Figure 4a, 4b, 4c, 4d).

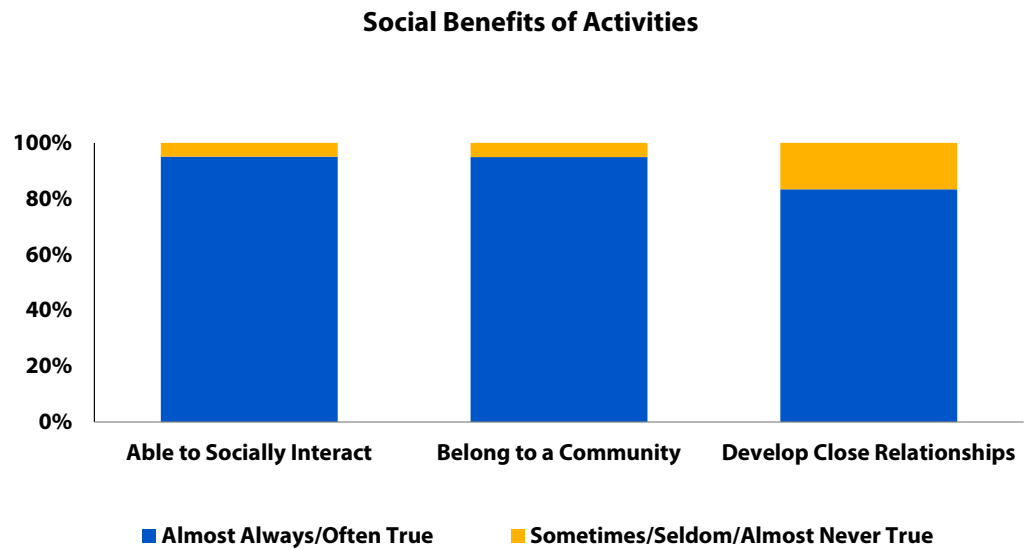
The vast majority of participants thought that the activities provided them with **social benefits**, allowing them to socially interact, be part of a community, and develop close relationships.

In terms of the **physical and mental health benefits** of participating in activities at the senior centre, 88% of participants indicated that it is almost always or often true that the activities help them stay healthy. Ninety percent indicated that the activities contribute to their emotional well-being and 85% that it helped them relieve stress. The lowest rating emerged when asked whether activities were physically challenging; only 53% of participants indicated that this was always or often true. That ratings were lower for this question is not surprising, given that many of the activities seniors participated in were not related to physical activity.

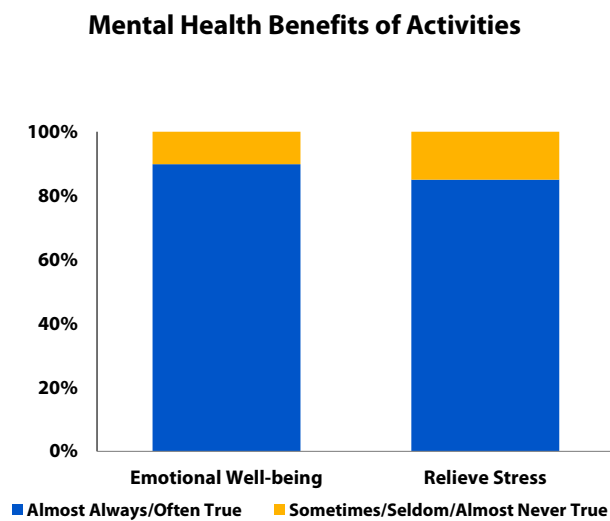
**Figure 4a: Perceived benefits of senior centre—psychological**



**Figure 4b: Perceived benefits of senior centre—social benefits**

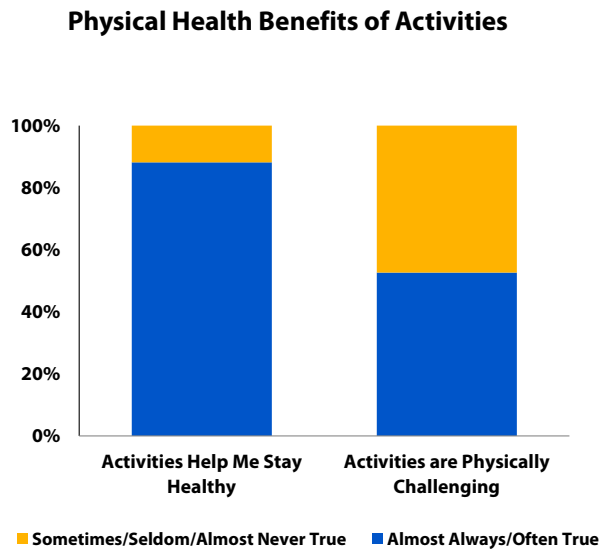


**Figure 4c: Perceived benefits of senior centre—mental health**



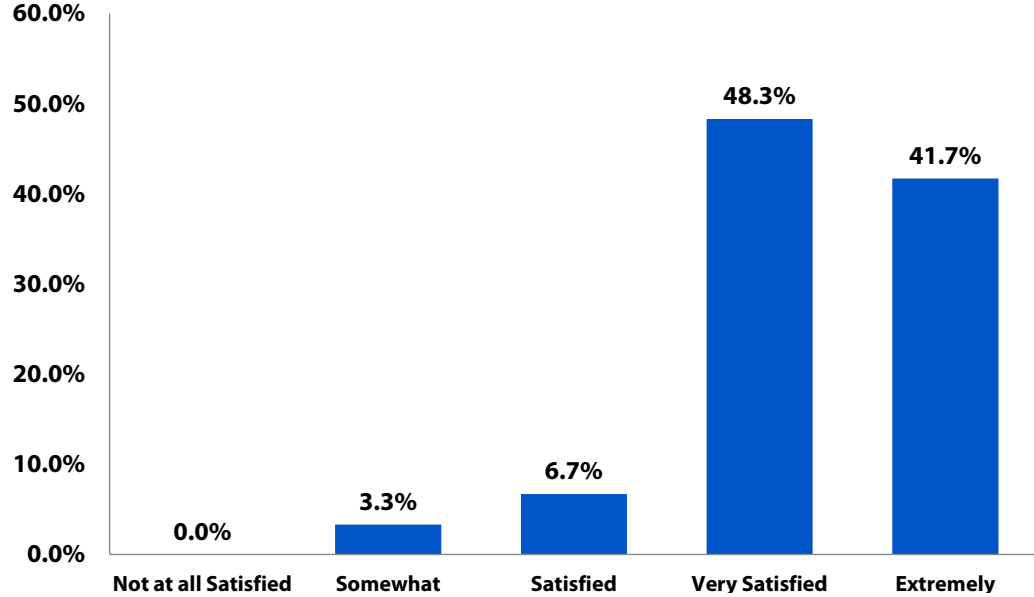


**Figure 4d: Perceived benefits of senior centre—physical health**



When asked how satisfied they were with the senior centre, the vast majority (90%) stated they were very or extremely satisfied (see Figure 5).

**Figure 5: Satisfaction with senior centre**



## Older adults' perspectives on the benefits of attending senior centres: Qualitative findings

Open-ended questions examined older adults' experiences within senior centres, their motivations for participating in programs, the perceived benefits of participation, and the perceived impact on their health and well-being. Based on the findings from the qualitative component of the study, we identified the following themes related to the benefits of senior centre participation:

### Senior Centres:

- provide opportunities for social participation
- help older adults lead active and healthy lifestyles
- contribute to older adults' well-being and quality of life
- promote mental health
- promote physical health
- provide opportunities for lifelong learning
- provide volunteering opportunities that benefit older adults

The following is a detailed description of each category presented with illustrative quotes from participants.

### Senior centres provide opportunities for social participation

Social participation was the most predominant theme throughout all of the interviews. When asked about their motivations and experiences at their senior centre, 59 out of 60 participants referred to the social aspects of participation. Overall, older adults felt that their senior centre increased their level of social participation, helped them to feel more connected, and provided them with opportunities to develop meaningful relationships.

“It’s meeting people mainly. That’s what I enjoy most. Meeting with, and working with, and being with...It’s just a great bunch that come here.”

“The interaction with the other people, because I spend a great deal of time alone. So it’s just lovely to come here and know people by name and have a chat.”

### Social participation permeates almost all aspects of senior centre programs and activities

Older adults identified various ways that social participation occurs within senior centres. Some programs and volunteer opportunities are specifically designed to encourage social interaction and cooperation (e.g. outings, clubs, social events). Other programs, while not specifically focused on social interaction, still have a strong social component (e.g., games, crafts, educational courses). Even exercise classes were a significant source of social interaction. For example, one participant described the social interaction she gained through exercise classes at her senior centre:

“I was going to a gym, to classes, where most people didn’t speak to each other. And I found that very frustrating. They came, they did their thing, and they left. And so, I really like that we get to know each other’s names, and we interact.”

In addition to programs and activities, senior centres foster social participation through informal activities such as drop-in programs, having coffee, and meals. In fact, 62% of participants reported that they spend time at their senior centre when they are not participating in an organized activity. In this way, senior centres provide a space for older adults to meet and socialize with other members.

## Social interaction fosters the development of friendships and social networks

Older adults identified friendships as one of most important benefits of attending senior centre programs and activities. Opportunities for social interaction enable older adults to meet people, make friends, and expand their social networks.

*“I’m alone now so I met a lot of ladies that are also on their own, which I would probably not have met otherwise”*

*“I made a lot of new friends, and there’s always somebody there for you.”*

## Friendships developed through senior centres are an important source of social support

Older adults received emotional and instrumental support from friends they met at the senior centre.

*“I’ve met some wonderful people here, and there’s carry over. Like, I lunch with people and do things like that. Not as a group, but as individuals getting together, as friends... That was instrumental in life satisfaction for me. I have lots of people I can count on.”*

*“Everybody asks, ‘Why didn’t you come last time? We’re sorry you’re not feeling well.’”*

## Senior centres foster a sense of community

Senior centres provide a focal point for older adults to meet with other people in their community, to contribute to their community through volunteer work, and to engage in community initiatives and advocacy.

“I think one of the greatest assets is making new friends and being able to be of service to the community.”

“Doing things together, that camaraderie, the warmth of community.”

### Senior centres protect against social isolation and loneliness

Senior centres provide older adults who are at risk of social isolation with opportunities to participate in social activities and build friendships. For many older adults, this helped them overcome loneliness and the negative health effects related to social isolation. For others, participating at their senior centre helped to prevent social isolation following stressful life transitions.

---

It's really brought me out of my shell, and gives me something to look forward to when I get up in the morning. And that's the most important thing in your life is having something to look forward to.

---

“I'm a widow and I live in an apartment, so I'm pretty isolated as far as sociability. And I didn't live in Winnipeg. I wasn't always a Winnipeg person, so I didn't always have a circle of friends. So that's what I really appreciate here. I've gotten to know people here, I've found friends here.”

“I think it fills a gap of loneliness, because I've also been so alone. I've lived alone for years. It kind of takes away that loneliness for the time being. And then I go home and think, well, tomorrow I have to go and be back in again.”

“I would imagine if I didn't come to [the senior centre], you can be pretty lonely if you want to just sit around in the house and do nothing.”

## Senior centres support active and healthy lifestyles

### Staying busy

Participants commonly described staying active and busy as a key benefit of attending programs at their senior centre:

“I like being involved. It’s helped me keep involved in things. I’ve always been like that. Like, I’m not a stay-at-home person. I’m a person who likes to get out and get going, and participating, and volunteering.”

“Keep busy, I’m a person who has to keep busy. I get bored if I’m not busy, and get down in the dumps. If I’m not doing something, then something’s wrong.”

### Something to look forward to

---

It gives me a chance to get out of where I’m living and to enjoy the friendships of the friends that I’ve made here. Everybody is so friendly, it’s such a wonderful feeling that I look forward to Wednesdays, you have no idea.

---

Having plans to attend the senior centre enabled older adults to maintain a sense of well-being. Below are some comments that highlight the positive impact of having plans to look forward to.

“[Coming to the centre] gives me something to look forward to everyday.”

“It’s uplifted me...I look forward to it. It gives me something to think about all week. It’s something that I plan ahead for.”

## Going to the senior centre helps to structure the week

For some, regularly attending a senior centre provided structure to their week and a reason to get up in the morning. Staying active and having scheduled plans during the week helped some older adults maintain their lifestyle following retirement.

“It’s like going to work, get up in the morning and do all the same things as if I was going to work.”

“It’s grounded me. It’s given me a structure that I really enjoy having in my life.”

“It gets me out of the house, like I live alone, and it gets me in with different people. Usually I sleep until sometimes 10 or 11 o’clock, now this way I can get up early and have some place to go.”

When discussing the benefits of staying active, older adults often contrasted their participation at the senior centre with the inactivity and isolation that they had encountered in the past, or that they might experience if they did not have access to the senior centre. These comments highlight the importance of staying active and the role that senior centres play in reducing inactivity, social isolation and depression.

---

Probably if I didn’t come here, I would sit and read or forget to get out of bed until noon. Whereas this way I have to get up and come so it keeps you active.

---

“Being disabled, I have difficulty getting around and out. [And I would] rather do something out than sit in the apartment all day.”

## Senior centres contribute to older adults' well-being and quality of life

When asked if participating at their senior centre changed anything in their life or attitude, older adults commonly referred to their sense of well-being. Many described the enjoyment of socializing with other members and staff, and felt that the senior centre enhanced their quality of life.

"I think it's helped my well-being and health and everything that I keep myself busy."

"It certainly has enriched me tremendously in that I've been able to get to know people I wouldn't have otherwise, and that's important to me."

Others described improvements to their self-confidence and self-worth that they gained from learning new skills, helping others, and making new friends.

"When I worked on the board that was a challenge for me because I never sort of done anything like that before. It gave me the confidence to speak up and express my views on different things which I never really had a chance to do."

"It gives you a sense of self-worth, when you're helping other people."

"I think it's added to my life. That's for sure. Like I said, [the senior centre] actually saved me. I became a different person, an outgoing person, my personality changed, I don't shy away from people...I made a lot of new friends, and there's always somebody there for you."



Another common theme was an improved attitude or mood, and many older adults reported feeling better, happier and more positive since participating at their senior centre.

“It makes me feel better when you get involved with other people.”

“It gave me a big lift...like when I used to be home I would just lay around in my pajamas. But now I feel like I can get dressed and come here and you know feel good, feel good about myself.”

## Senior centres promote mental health

### Senior centres help with depression

For older adults who were struggling with mental health problems, such as depression, the impact on their well-being was particularly important. Some participants described their experience with depression and felt that their senior centre was a significant source of support that enabled them to cope with, or overcome their illness.

---

This has kept me above ground, you know, from getting totally depressed. Cause I would be sitting in the house doing nothing.

---

“[The senior centre] helped me from being depressed...While I’m here, I’m enjoying everything. When I go back home, I go back to whatever is bothering me.”

“If you’re feeling down and out, all you have to do is come here and you’re going to run into somebody who’s going to make you smile, or laugh, or whatever.”

## Senior centres offer support to older adults dealing with the loss of a loved one

Almost half (44.6%) of the older adults who participated in this study were widowed. For many of them, the senior centre was an important source of support after the loss of a loved one. Making friends at the senior centre, meeting other people who had similar experiences, and increasing activity levels helped many participants overcome the loneliness and isolation they experienced following the loss of their spouse.

---

It certainly helped me because I just lost my husband a year and a half ago. There was so much support here for me, like, it gives you support when something like that happens.

---

*“I’m a widower twice over—I’ve lost two wives, and the activity here at [the senior centre] has been very good in helping me establish myself again as an independent.”*

*“It’s a wonderful place. I’m glad I came back. If I didn’t, I’d be a very lonely person. You know, when you’re married for 45 years and you miss your spouse, it’s pretty hard to get back into activities and do things... And this is really meeting that.”*

*“It certainly filled a large void in my life following my husband’s death. And I believe it contributed to my recovery from that depressive state.”*

## Senior centres help older adults dealing with addictions

Some of the participants described their experiences living with addictions. For them, the senior centre provided a positive and sober environment that played an important role in maintaining their sobriety.

*“[The senior centre] just gives me a life of sobriety. That’s one thing. Cause there’s no alcohol or drugs or alcohol allowed on the premises. If people were bringing it, it would just give you that urge to want to do it. But here, I feel like I’m safe, you know, hanging with people that aren’t into that kind of world.”*

## Senior centres promote physical health

As noted earlier, 88% of participants indicated that the activities at their senior centre almost always or often helped them to stay healthy (see Figure 4d). A number of factors were identified that could explain such an impact on physical health.

### Senior centres promote older adults health by providing opportunities for physical activity

Older adults who participate in exercise classes felt that the classes helped them to stay healthy. Some older adults had suffered from serious injuries, and found that the exercise programs at their senior centre helped them to recover.

“I just think that the exercise and the sense of well-being that you get when you’re at the centre and doing things like this, really contribute to an improvement in your health. And that, therefore, cuts back the cost of medications, your dependence on the medical system, and so on and so forth.”

### Senior centres provide access to health information, education and health services

Senior centres vary in terms of the health information and health services that they offer. Some have health professionals such as nurses, dieticians and occupational therapists on staff, others provide limited health services such as foot care or influenza immunizations, and some do not offer any health services. Thirty-eight percent of participants in this study reported accessing health services through their senior centre at least once. Senior centres also varied in terms of health education and information. Eighteen percent of participants had received information or referrals related to health care through their senior centre. Participants who attended senior centres with extensive health services valued the access to health information and health services.

“With the health care, they have such a variety of people presenting that you can get information about all the things you asked. My mother was in care at that time. Just general interests, foot care and all that sort of thing, just in case.”

## Senior centres provide opportunities for lifelong learning

Senior centres offer a range of educational and learning opportunities for older adults. These include courses, workshops and seminars that cover diverse topics such as arts, nutrition, computer classes, and current events. These programs promote learning, creativity, and skills development.

“I enjoy singing, so I joined that. I wanted to try drama, so there is a drama program and a drama production. I wanted to see if I could improve my speaking, so there is toastmasters, and I definitely wanted to play cards, and so there’s bridge.”

## Senior centres provide volunteering opportunities that benefit older adults

Older adults perceived volunteer work at their senior centre as highly rewarding and satisfying. Volunteering enabled older adults to socialize, contribute to their communities, and develop and apply their skills.

---

Many of us are putting in a lot of hours for [the senior centre] because we enjoy being of service to the community and it’s a learning experience.

---

“I’ve always had a difficult time not doing anything. So when you get called to volunteer, it’s something to do. Something to get out and be with people and help people. I really like to take care of people. So it gives me great pleasure.”

Some volunteers felt that the senior centre enabled them to contribute their talents and skills, while others described learning new skills through volunteer work.

---

I also like coming as the receptionist. That was my line of work, and it really keeps me going in what I was trained to do.

---

“You know I never worked selling before and I’m working in a book store, I’ve never made or served soup and sandwiches before, so I’ve acquired skills I didn’t have! I had always worked in an office, and I had never done things like that, and I enjoy doing it.”

Older adults make substantial contributions to their senior centres through volunteer work. Eighty three percent of participants said they volunteer at their senior centre. This finding highlights the important contributions that older adults make to their senior centres and communities.

Volunteers contributed to:

- program delivery
- special events
- office work
- fundraising
- food preparation
- administration
- transportation
- meal delivery and food programs

## Positive features that enhance senior centre participation

The following section reviews the key features and issues identified by participants that impact older adults’ experiences and participation at their senior centre.

### A diverse offering of programs

Offering a variety of programs provides older adults with choices and reflects the diversity of older adults’ interests and experiences.

“They offer so many programs and such a variety that as I say if you want something to do you can always find it, as long as you have the time.”

“I found that there is such a wide variety of activities that I’ve found that they suit my needs.”

### Providing services (health and support services, referral, information)

Older adults valued having access to health and support services and information. All senior centres provided information that was pertinent to older adults. However, senior centres varied in terms of the services that they offer. Some older adults highlighted the value of the health and support services available through their senior centre, while others identified a need to expand health related services and programs within senior centres.

“Another benefit of the centre is the health service that it provides. Lots of people don’t realize that there is on staff a nurse, and OT, and you can come through the door and ask for a variety of things.”

“The three things I would love to see happen. I don’t know how it would be done, but one is dentistry.”

### Providing nutritious meals

Older adults viewed the meals at their senior centre as an important source of nutritious food. Sharing meals, snacks, or a cup of coffee also provides an opportunity for social interaction. Senior centres varied in terms of the food services they provide (e.g., free meals, food banks, meals on wheels, subsidized meals, cafeterias, and coffee and snacks). Older adults valued the food services, although some were also concerned that they were too limited.

“It’s great that they have a food service here but unfortunately I think it should be expanded by quite a bit...It’s pretty much limited to sandwiches and soups.”

“I like to come for breakfast when they have it. It’s too bad they can’t have it all the time.”

### An inclusive and welcoming atmosphere

The atmosphere at the senior centre impacts older adults’ experiences and participation. Senior centres are social places, so feeling welcomed and comfortable was important for older adults and contributed to their level and length of participation. Older adults with positive perceptions of the atmosphere emphasized the friendliness of members and staff, and the overall environment.

“It’s nice to come into a place where you’re greeted and it’s friendly.”

“I totally feel like I belong. How people say ‘good morning’, ‘hi’, and that. You know, you can tell how a person says ‘good morning!’. It’s just a good feeling.”

“It’s just that you feel welcome when you come here. And they don’t say, ‘where are you from? And what do you do?’ And this, that. You know, you’re just welcome, ‘nice to see you here’.”

In order to feel comfortable and welcomed, it was also important for older adults to feel accepted and to not feel judged based on their gender, age, race, ethnicity or health conditions.

“Here you walk in the door there is nothing to indicate on you, your status, you are the same person coming in as the person beside you. There is no distinction and the way you are received, everyone is received the same way.”

---

A lot of places, you go there and you're handicapped or disabled, and you're looked down on ... I haven't met one person here that I couldn't sit down and talk with.

---

Promoting a welcoming and inclusive atmosphere is particularly important for encouraging the participation of older adults from minority groups. Some described previous experiences where they felt uncomfortable at senior centres or encountered discrimination. For them, finding an inclusive atmosphere was an important factor in their decision to attend their current senior centre.

"I love it here, the people are so friendly. At first I didn't think they would be, I mean being the only person of colour here, I was kind of shy at first, but they welcomed me with open arms."

## Challenges that impact senior centre participation

Participants also identified several challenges with senior centre participation.

### The diversity of older adults interests and needs

Older adults are a diverse population with different needs and interests. Providing programs and services that accommodate the diversity of older adults is a recognized challenge for senior centres. Older adults reported differences based on age, gender, and health limitations. In particular, older adults highlighted some of the different activity preferences of different age groups.

"The new seniors don't play cards anymore. I was brought up playing cards. Times are changing."

"We are beginning to attract more of the 55–65 year old group and their needs are different."



## Transportation to and from the centre

Transportation to and from the senior centre was the most common barrier for older adults. Distance, affordability, and health limitations impacted older adults' transportation options. For older adults living in rural communities, transportation to the nearest senior centre can be particularly challenging. Providing transportation services including shuttles, volunteer rides, and bus tickets helps to ensure that all older adults have access to their senior centre.

---

Sometimes it's just too much for me to come if don't have a ride.

---

*"We don't live in town, it isn't always easy to get away."*

*"I think if we had more transportation, a lot of these lonely people, especially living alone, would come out to more activities. But a lot of them are not sure-footed, and come winter, they're afraid to step out the door. They need help and they need transportation."*

## The cost of participating at the senior centre

Older adults identified membership and program costs as a barrier to participation. Related costs, such as transportation, food, and the costs of special outings were also barriers for some participants. One senior centre, for example, served a significant number of low-income older adults and offered their membership, programs and meals at no cost. Providing affordable programs and services is necessary to ensure access and encourage participation.

*"I know they say you can go and waive these fees but how many seniors are too proud to do that. They'll stay home first."*

*"Providing transportation to outings are often too expensive for people who are fiscally restricted...A lot of people here are financially restricted."*

The cost of food at senior centres was also a concern for some older adults:

“It was supposed to be a place to have coffee and a bun. Food service has now turned into a business, with profits in best interest. People can’t afford to sit around longer and socialize if coffee is \$1 per cup.”

### Ageism and the stigma associated with senior centres

Throughout interviews with older adults, many of them referred to the stigma associated with senior centres, or aging more generally. Some older adults felt that the stigma attached to senior centres deterred people from joining. It should also be noted that several older adults did not like the term “senior centres”, and felt that it carried a negative connotation.

“I have friends that don’t belong because they don’t want to be ‘old.’”

“It shouldn’t be called senior centre. It should be called centres for active living. Because senior centre tells you that ‘you’re old!’ And I don’t know anybody that is ‘old’ in this building.”

“You say senior centre and you think of a personal care home or assisted living and this is quite a whole different aspect to aging.”

# SECTION 3: INTERVIEWS WITH DIRECTORS AND PROGRAM COORDINATORS OF SENIOR CENTRES

## Methods

In order to understand the possible impacts of senior centres and the usefulness of an evaluation tool (or tools), interviews were conducted with 10 directors and program coordinators of senior centres in Manitoba. Interviews were conducted in the summer of 2012 over the telephone or in person. Questions asked included the following:

- How they think senior centres benefit older adults?
- What is the biggest challenge senior centres face?
- Are there older adults within the community who they are unable to reach?
- Would it be useful to have a tool (or tools) to track members or evaluate programs and services?
- What kinds of issues should be addressed on an evaluation tool?

## Perceived benefits of senior centres

Directors and program coordinators identified a number of benefits of senior centres for older adults that mirrored those identified by older adults, including:

- opportunities to stay physically healthy and independent (e.g., exercise, dance programs)
- opportunities to learn (e.g., computer classes, creative writing)
- opportunities for social participation (e.g., drop in programs, cribbage), friendship development, and the exchange of social support
- volunteer opportunities, helping others, sharing skills, and contributing to the community

- resource for information that is pertinent to older adults (e.g., provide government and community information)
- support services (e.g. meals on wheels, food bank)
- a safe and respectful place for older adults
- a place where older adults feel valued

“It really provides great opportunities for older adults to share the skills and the experiences and the talent that they have, often from a lifetime of work or a lifetime of raising a family, and sharing them with other people at the centre. It’s great for the centre that way and it certainly gives the volunteer a sense of contributing to the community and some pride in sharing what they do well with other people.”

## What are the biggest challenges senior centres face?

When asked what the biggest challenges are that senior centres face, the three most commonly identified issues were:

- **Funding**—participants talked about the challenge of securing core funding for operations and maintenance costs, that grants are usually for new projects only, and that it requires a lot of time and energy to fundraise. It was felt that fundraising often takes time away from the primary focus, which is providing programs for older adults.
- **Capacity**—this included challenges with having limited paid staff available, as well as the challenge of recruiting volunteers.
- **Reaching seniors**—participants further spoke of the difficulties of reaching certain groups of older adults, as well as more broadly the difficulty of retaining membership. A number of hard-to-reach populations were identified:
  - younger older adults, those newly retired
  - people with health problems, functional and mobility limitations

---

Finding money for day to day operations is a real challenge.

---

- people who live in their own homes, particularly people who are not able to get out very much; they are at risk of social isolation and difficult to connect with
- people who require encouragement following a life change (e.g., the newly widowed, older adults who moved to a retirement home, those new to a community)
- older adults who do not drive (e.g., a senior centre that is located more than a block from the nearest bus stop creates challenges for those who do not drive)

## Evaluating the impacts of senior centres

In order to help us develop recommendations for a tool (or tools) to evaluate the impact of senior centres or help track senior centre members, directors and program coordinators were asked questions about whether a tool might be useful to them and how they might use it, and what kind of questions the tool would ideally contain.

---

It would enable us to assess programs and activities, to find out if there is interest in new programs, to give us direction for programming.

---

The following were potential uses identified:

- Program planning;
- Identifying problems with programs, services or facility
- Improving retention of members;
- Identifying and eliminating barriers for participants;
- Finding out if people stop attending and reasons why they did not return; and
- Obtaining funding

## Pertinent information

When asked what information they would like to see on a tool to help track members and evaluate services and activities, participants were interested in the following information:

- Information about members
- Identify what programs people are participating in and their level of satisfaction with those programs
- Suggestions for different programs
- Level of satisfaction with facilities and equipment
- Assess affordability issues
- Measure improvements in quality of life

## Potential issues and challenges

Directors and program coordinators also identified some potential issues and challenges related to implementing tools.

- Formal questionnaires may not work well with certain older adults
- There can be language barriers, communication barriers and literacy challenges
- Members may not like being evaluated
- Tools should not infringe on members' privacy
- The tools must be easy to implement and maintain because the current workload is at a maximum

# SECTION 4: RECOMMENDATIONS FOR DEVELOPING TOOLS TO EVALUATE SENIOR CENTRES

In combination, the literature review, interviews with older adults, and interviews with directors and program coordinators of senior centres suggested that a range of information would be useful for evaluating senior centres. The logic model below provides an overview of how the evaluation of senior centres can be conceptualized. A logic model specifies what goes into running a senior centre (inputs), what activities or programs are provided (activities), the volume of work accomplished (outputs), and the changes or benefits that are expected as a result of individuals participating in programs and activities (outcomes).

Evaluation can occur at each step. For example, one might be interested in finding out how many volunteers are involved in a senior centre, how many seniors attend a particular activity program (e.g., an exercise class), or whether attending a senior centre has physical or mental health benefits. Examples of possible tools that assess some of these issues are presented in the Appendix.

**Table 2: Logic model of senior centre outcomes**

<b>What goes into running the senior centre</b>	<b>What programs and activities are offered at the senior centre</b>	<b>The volume of work accomplished</b>	<b>The changes or benefits that result from the programs and activities that are offered at the senior centre</b>		
<b>Inputs</b>	<b>Activities</b>	<b>Outputs</b>	<b>Shorter-term outcomes</b>	<b>Longer-term outcomes</b>	<b>Ultimate outcomes</b>
Facilities	Exercise classes	Number of activities offered	More active	More mobile	Fewer hospitalizations
Equipment	Recreational programs	Number of seniors who attend the activities	More socially engaged	Less disabled	Able to stay in home longer/ admitted to nursing home later
Staff	Meal programs		Eat better	Fewer falls	Live longer
Volunteers	Health clinics		More health conscious	Less depression	
etc.	etc.	etc.	etc.	etc.	etc.



**Examples of evaluation tools**

- Faculty tool
- Membership tool
- Program evaluation tool
- Centre satisfaction tool
- Outcome evaluation tool



# SECTION 5: DISCUSSION

## The benefits of social participation

A large body of literature shows that social participation is associated with improvements in mental and physical health. The benefits of social participation can be substantial, as illustrated in the example below.

### An example of the potential impact of increasing social participation

- \* Study findings: James et al. (2011) showed that 38% of participants developed an activity of daily living (ADL) disability within on average 5 years; 62% developed a mobility disability. For each increase in social activity, the risk (adjusted for other factors, such as physical activity) of developing an ADL disability decreased by 43% and the risk of developing a mobility disability decreased by 31%.
- \* What do the findings mean? If we could increase older adults' activity level by one social activity, we could reduce the proportion of people with ADL disabilities from 38% to 21.7%—a 16.3% decrease. Put another way, for every 7 older adults who increase their social activity level, one person would remain disability-free within about a 5-year time frame. We would further reduce the proportion of older adults who develop a mobility disability from 62% to 43%—a 19% decrease. In other words, for every 6 older adults who increase their social activity level, one person would not develop mobility disability.

## Senior centres improve older adults' social participation, well-being and health

---

Senior centres promote health by providing health and support services, encouraging active aging, and by fostering a social environment that is conducive to social participation.

---

Research on senior centres demonstrates that participation is associated with social, mental, and physical health benefits. Senior centres promote health by providing health and support services, encouraging active and healthy aging, and by fostering a social environment that is conducive to social participation and well-being. Senior centres are also ideal venues for health promotion interventions, such as falls prevention, influenza immunizations, diabetes management, and so forth.

The present study identified an extensive overlap and interplay between different benefits and features of senior centres. For example, social activities were beneficial for older adults' psychological well-being, and fitness programs often had a strong social component. The comprehensive approach to supporting older adults offered by senior centres reinforces the social, health and quality of life benefits associated with their programs and services.

### Key benefits of participating in senior centres

- Virtually all participants felt that the activities they engage in almost always or often give them a sense of accomplishment.
- 80% or more also felt that the activities increased their knowledge, helped them gain self-confidence, and provided an opportunity to try new things.
- The vast majority of participants thought that the activities provided them with social benefits, allowing them to socially interact, be part of a community, and develop close relationships.
- 88% of participants indicated that it is almost always or often true that the activities help them stay healthy. The vast majority of participants also indicated that the activities contribute to their emotional well-being (90%), and help them to relieve stress (85%).
- Senior centres provided older adults who are at risk of social isolation with opportunities to participate in social activities and build friendships, helping many participants overcome loneliness and isolation.

- Attending a senior centre helped older adults maintain an active and healthy lifestyle. This was particularly important for older adults who enjoyed being busy, for those who had undergone life changes that impacted their activity levels, and for those who were at risk of social isolation.
- Older adults reported improvements to their sense of well-being, quality of life, mood and attitude.
- Opportunities to stay active and socially engaged helped participants cope with mental illness and addictions.
- Senior centres promote older adult health by providing opportunities for physical activity and access to health information, education and health services.
- Senior centres offer a range of educational and learning opportunities that promote learning, creativity, and skills development.
- Volunteering opportunities enabled older adults to socialize, contribute to their communities, and share their knowledge and skills.

## Positive features that enhance senior centre participation

- Offering a variety of programs provides older adults with choices and reflects the diversity of older adults' interests and experiences.
- Older adults valued having access to health and support services and information. However, senior centres varied in terms of the services that they offer.
- Older adults viewed the meals at their senior centre as an important source of nutritious and food, although many felt that the meal programs were too limited.
- The atmosphere at the senior centre impacts older adults' experiences and participation. Promoting a welcoming and inclusive atmosphere is particularly important for encouraging the participation of older adults from minority groups.

## Challenges that impact senior centre participation

- Accommodating the diversity of older adults' interests and needs can be a challenge for program and service delivery.
- Transportation to and from the senior centre was the most common barrier for older adults.
- Reaching some groups of older adults can be a challenge (e.g., older adults who are socially isolated, have language barriers, functional limitations, health problems, transportation barriers, and those dealing with stressful life changes)
- Older adults identified membership and program costs as barriers to participation.
- Some older adults felt that the stigma attached to senior centres, and aging more broadly, impacts participation and membership.

## Issues for further consideration

- The social support and activities provided by senior centres helped a number of older adults to cope with or overcome mental health issues. However, only one participant reported accessing mental health professionals or counselling services through the senior centre. This finding may indicate the need for more mental health services within senior centres, as well as to the need to make referrals and provide information about available services and resources.
- Older adults valued the meals, snacks, and food services offered through their centre and viewed it as an important source of nutritious food. However, senior centres vary in terms of the types of food or meals they offer, the frequency of meals, and the cost. Expanding subsidized meal programs has the potential to improve nutrition and enhance social participation among older adults.

- Transportation was the most common barrier identified by older adults. In order to promote access and inclusiveness, senior centres should consider whether their transportation options meet the needs of older adults with limited income or mobility. In addition, bus stops should be located as close as possible to senior centre entrances.
- The atmosphere at the senior centre had a significant impact on older adults' decisions to join or stay at their senior centre. A welcoming and tolerant atmosphere is particularly important for older adults from minority groups. In order to include a diverse population of older adults,
  - offering a range of cultural programming
  - providing programming for men and women
  - providing programs and services for older adults with disabilities and health limitations



## SECTION 6: CONCLUSIONS

- Research demonstrates the benefits of social participation to older adults' physical and mental health. The potential cost savings of enhancing social participation and consequent health benefits should be explored.
- Securing funding to support operations is an on-going challenge for senior centres. Ensuring that senior centres have sufficient funds ensures that they are able to provide the programs, services, and resources to promote the health and well-being of older adults which, in turn, can lead to cost savings in the health care sector.
- The availability of health and support services varied considerably between senior centres. Senior centres serve diverse populations of older adults, and members vary in terms of their age, health and support needs. Whether some senior centres would benefit from additional or specialized health services, including mental health services, should be explored.
- Directors and program coordinators of senior centres identified a range of possible uses for an evaluation tool. This suggests that no single tool will meet all their needs; rather, different tools would need to be used to meet different purposes. The feasibility of implementing, as well as usefulness of these tools will need to be evaluated.





# REFERENCES

- Aday, R. H., Kehoe, G. C., & Farney, L. A. (2006). Impact of senior center friendships on aging women who live alone. *Journal of Women & Aging, 18*(1), 57–73.
- Agahi, N., & Parker, M. G. (2008). Leisure activities and mortality: Does gender matter? *Journal of Aging and Health, 20*(7), 855–871.
- Ashida, S., & Heaney, C. A. (2008). Social networks and participation in social activities at a new senior center: Reaching out to older adults who could benefit the most. *Activities, Adaptation and Aging, 32*(1), 40–58.
- Avlund, K., Lund, R., Holstein, B. E., & Due, P. (2004). Social relations as determinant of onset of disability in aging. *Archives of Gerontology & Geriatrics, 38*(1), 85. doi: 10.1016/j.archger.2003.08.003
- Baker, D. I., Gottschalk, M., & Bianco, L. M. (2007). Step by step: Integrating evidence-based fall-risk management into senior centers. *Gerontologist, 47*(4), 548–554.
- Berkman, L. F., & Glass, T. (2000). From social integration to health: Durkheim in the new millennium. *Social Science & Medicine, 51*(6), 843–857.
- Buchman, A. S., Boyle, P. A., Wilson, R. S., Fleischman, D. A., Leurgans, S., & Bennett, D. A. (2009). Association between late-life social activity and motor decline in older adults. *Archives of Internal Medicine, 169*(12), 1139–1146. doi: <http://dx.doi.org/10.1001/archinternmed.2009.135>
- Bukov, A., Maas, I., & Lampert, T. (2002). Social participation in very old age: Cross-sectional and longitudinal findings from BASE. *Journals of Gerontology: Series B: Psychological Sciences and Social Sciences, 57B*(6), P510–P517.
- Choi, N. G., & McDougall, G. J. (2007). Comparison of depressive symptoms between homebound older adults and ambulatory older adults. *Aging & Mental Health, 11*(3), 310–322. doi: 10.1080/13607860600844614

- Mendes de Leon, C. S., Glass, T. A., & Berkman, L. F. (2003). Social engagement and disability in a community population of older adults: The New Haven EPESE. *American Journal of Epidemiology*, 157(7), 633–642.
- Farone, D. W., Fitzpatrick, T. R., & Tran, T. V. (2005). Use of senior centers as a moderator of stress-related distress among Latino elders. *Journal of Gerontological Social Work*, 46(1), 65–83.
- Federal/Provincial/Territorial Ministers Responsible For Seniors. (2007). *Working Together for Seniors: A toolkit to promote seniors' social integration in community services, programs and policies*. Retrieved from: [http://www2.gov.bc.ca/assets/gov/topic/AE132538BBF7FAA2EF5129B860EFAA4E/pdf/working\\_together.pdf](http://www2.gov.bc.ca/assets/gov/topic/AE132538BBF7FAA2EF5129B860EFAA4E/pdf/working_together.pdf)
- Fitzpatrick, T. R., Gitelson, R. J., Andereck, K. L., & Mesbur, E. S. (2005). Social support factors and health among a senior center population in southern Ontario, Canada. *Social Work in Health Care*, 40(3), 15–37.
- Fitzpatrick, T. R. (2010). Brain fitness activities and health among older female senior center participants in Montreal, Quebec. *Activities, Adaptation & Aging*, 34(1), 30–47.
- Fitzpatrick, T. R., McCabe, J., Gitelson, R., & Andereck, K. (2005). Factors that influence perceived social and health benefits of attendance at senior centers. *Activities, Adaptation and Aging*, 30(1), 23–45.
- Florida Department of Elder Affairs. (2010). Senior center evaluation toolkit. Tallahassee, FL: Department of Elder Affairs, State of Florida. Retrieved from: [http://elderaffairs.state.fl.us/doea/sc\\_toolkit.php](http://elderaffairs.state.fl.us/doea/sc_toolkit.php)
- Fratiglioni, L., Paillard-Borg, S., & Winblad, B. (2004). An active and socially integrated lifestyle in late life might protect against dementia. *Lancet Neurology*, 3(6), 343–353.
- Fulbright, S. A. (2010). Rates of depression and participation in senior centre activities in community-dwelling older persons. *Journal of Psychiatric & Mental Health Nursing*, 17(5), 385–391. doi: 10.1111/j.1365-2850.2009.01535.x

- Glass, T. A., Mendes de Leon, C., Marottoli, R. A., & Berkman, L. F. (1999). Population based study of social and productive activities as predictors of survival among elderly Americans. *BMJ: British Medical Journal (International Edition)*, 319(7208), 478–483. doi: <http://dx.doi.org/10.1136/bmj.319.7208.478>
- Glei, D. A., Landau, D. A., Goldman, N., Chuang, Y., Rodríguez, G., & Weinstein, M. (2005). Participating in social activities helps preserve cognitive function: An analysis of a longitudinal, population-based study of the elderly. *International Journal of Epidemiology*, 34(4), 864–871.
- Golden, J., Conroy, R. M., & Lawlor, B. A. (2009). Social support network structure in older people: Underlying dimensions and association with psychological and physical health. *Psychology, Health & Medicine*, 14(3), 280–290. doi: 10.1080/13548500902730135
- Hendrix, S. J., Fischer, J. G., Reddy, S., Lommel, T. S., Speer, E. M., Stephens, H., Park, S., & Johnson, M. A. (2008). Fruit and vegetable intake and knowledge increased following a community-based intervention in older adults in Georgia senior centers. *Journal of Nutrition for the Elderly*, 27(1–2), 155–178.
- Herzog, A. R., Ofstedal, M. B., & Wheeler, L. M. (2002). Social engagement and its relationship to health. *Clinics in Geriatric Medicine*, 18(3), 593–609.
- Isaac, V., Stewart, R., Artero, S., Ancelin, M., & Ritchie, K. (2009). Social activity and improvement in depressive symptoms in older people: A prospective community cohort study. *American Journal of Geriatric Psychiatry*, 17(8), 688–696.
- James, B. D., Boyle, P. A., Buchman, A. S., & Bennett, D. A. (2011). Relation of late-life social activity with incident disability among community-dwelling older adults. *Journals of Gerontology Series A: Biological Sciences & Medical Sciences*, 66(4), 467–473. doi: <http://dx.doi.org/10.1093/geronag/qlq231>
- James, B. D., Boyle, P. A., Buchman, A. S., & Bennett, D. A. (2011). Relation of late-life social activity with incident disability among community-dwelling older adults. *Journals of Gerontology Series A: Biological Sciences & Medical Sciences*, 66A(4), 467–473.

- James, B. D., Wilson, R. S., Barnes, L. L., & Bennett, D. A. (2011). Late-life social activity and cognitive decline in old age. *Journal of the International Neuropsychological Society*, 17(6), 998–1005. doi: <http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1017/S1355617711000531>
- Kawachi, I., & Berkman, L. F. (2001). Social ties and mental health. *Journal of Urban Health*, 78(3), 458–467.
- Krieger, J. W., Castorina, J. S., Walls, M. L., Weaver, M. R., & Ciske, S. (2000). Increasing influenza and pneumococcal immunization rates: A randomized controlled study of a senior center-based intervention. *American Journal of Preventive Medicine*, 18(2), 123–131. doi: [http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1016/S0749-3797\(99\)00134-8](http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1016/S0749-3797(99)00134-8)
- Lee, H. Y., Jang, S., Lee, S., Cho, S., & Park, E. (2008). The relationship between social participation and self-rated health by sex and age: A cross-sectional survey. *International Journal of Nursing Studies*, 45(7), 1042–1054. doi: [10.1016/j.ijnurstu.2007.05.007](http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1016/j.ijnurstu.2007.05.007)
- Levasseur, M., Richard, L., Gauvin, L., & Raymond, É. (2010). *Inventory and analysis of definitions of social participation found in the aging literature: Proposed taxonomy of social activities* doi: [10.1016/j.socscimed.2010.09.041](http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1016/j.socscimed.2010.09.041)
- Levasseur, M., Desrosiers, J., & Noreau, L. (2004). Is social participation associated with quality of life of older adults with physical disabilities? *Disability & Rehabilitation*, 26(20), 1206–1213.
- Moody, E., & Phinney, A. (2012). A community-engaged art program for older people: Fostering social inclusion. *Canadian Journal on Aging*, 31(1), 55–64. doi: <http://dx.doi.org.proxy2.lib.umanitoba.ca/10.1017/S0714980811000596>
- Naylor, E., Penev, P. D., Orbeta, L., Janssen, I., Ortiz, R., Coleccia, E. F., et al. (2000). Daily social and physical activity increases slow-wave sleep and daytime neuropsychological performance in the elderly. *Sleep*, 23(1), 1–9.
- Pardasani, M. (2010). Senior centers: Characteristics of participants and nonparticipants. *Activities, Adaptation and Aging*, 34(1), 48–70.

- Pardasani, M., & Thompson, P. (2012). Senior centers: Innovative and emerging models. *Journal of Applied Gerontology*, 31(1), 52–77. doi: <http://dx.doi.org/10.1177/0733464810380545>
- Phelan, E. A., Williams, B., Leveille, S., Snyder, S., Wagner, E. H., & LoGerfo, J. P. (2002). Outcomes of a community-based dissemination of the health enhancement program. *Journal of the American Geriatrics Society*, 50(9), 1519–1524.
- Strain, L. (2001). Senior centres: Who participates. *Canadian Journal on Aging*, 20(4), 471–491.
- Speer, E. M., Reddy, S., Lommel, T. S., Fischer, J. G., Stephens, H., Park, S., & Johnson, M. A. (2008). Diabetes self-management behaviors and A1c improved following a community-based intervention in older adults in Georgia senior centers. *Journal of Nutrition for the Elderly*, 27(1–2), 179–200.
- Tang, F., Heo, J. G., & Weissman, M. (2011). Racial differences in social engagement and health status among older women. *Social Work in Public Health*, 26(1), 110–122. doi: 10.1080/10911350902986930
- Thomas, P., A. (2011). Gender, social engagement, and limitations in late life. *Social Science & Medicine*, 73(9), 1428–1435. doi: <http://dx.doi.org/10.1016/j.socscimed.2011.07.035>
- Turner, K. W. (2004). Senior citizens centers: What they offer, who participates, and what they gain. *Journal of Gerontological Social Work*, 43(1), 37–47.
- Wang, H., Karp, A., Winblad, B., & Fratiglioni, L. (2002). Late-life engagement in social and leisure activities is associated with a decreased risk of dementia: A longitudinal study from the Kungsholmen project. *American Journal of Epidemiology*, 155(12), 1081–108



# APPENDIX: EXAMPLES OF POSSIBLE EVALUATION TOOLS

## Facility tool

In 2007, the Social Isolation Working Group of the Federal/Provincial/Territorial Committee of Officials (Seniors) prepared a toolkit to promote older adults' social integration in community services, programs and policies. The toolkit provides a useful guide of specific issues to consider that are relevant to senior centres.

The following is an adapted tool that can assist in assessing how well a senior centre is doing in terms of facilitating the social integration of older adults. By completing the tool once a year, it becomes possible to track changes over time (Social Isolation Working Group of the Federal/Provincial/Territorial Committee of Officials, 2007).

## Sample facility tool

Approximately how many volunteers does your senior centre have?

Number \_\_\_\_\_

### ARE SENIORS INVOLVED IN THE SENIOR CENTRE THROUGH:

	Yes	No	Not sure	Doesn't apply
Program planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evaluating programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### DO YOUR PROGRAMS EFFECTIVELY INCLUDE THE FOLLOWING GROUPS:

	Yes	No	Not sure	Doesn't apply
Women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lower education and/or literacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reduced social networks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Experiencing loss (spouse, home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-English speaking background	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Different cultural background/ethnic minorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chronically ill or in poor health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other groups (e.g., gay, lesbian)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### ARE EFFECTIVE MEASURES TAKEN TO ADDRESS THE FOLLOWING BARRIERS TO PARTICIPATION:

	Yes	No	Not sure	Doesn't apply
Transportation issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural differences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### ARE EFFORTS MADE TO APPROACH SENIORS WHO ARE ISOLATED BY:

	Yes	No	Not sure	Doesn't apply
Providing outreach or in-home service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connecting via telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connecting with gatekeepers such as building managers, churches, temples and mosques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partnering with other organizations or volunteers from appropriate cultural and linguistic communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Membership tool

Many senior centres already use a brief registration form. Besides contact information, such a form can assist with program development by providing important information about the kinds of individuals who attend the centre. For example, asking about whether people live alone or with somebody is a simple and relatively non-intrusive way of identifying who is potentially at risk of social isolation. Similarly, asking individuals what mode of transportation they generally use can provide a sense of transportation needs.

## Sample membership tool

Date: \_\_\_\_\_

### MEMBERSHIP REGISTRATION

#### Participant information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Date Of Birth (mm/dd/yyyy) \_\_\_\_\_

Home Address \_\_\_\_\_ Phone Number \_\_\_\_\_

City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_ E-mail \_\_\_\_\_

### PLEASE CHECK A BOX

**Living arrangements** With somebody  Alone

**Mode of transportation** I drive  Family/friends  Bus   
Handi-van  Other \_\_\_\_\_

**Are you interested in volunteer opportunities at the Centre?** Yes  No

### EMERGENCY CONTACT INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

## Program evaluation tool

Evaluating specific programs is another useful aspect of an overall evaluation framework. Questions will need to be geared toward the specifics of the program delivered. For example, to evaluate an exercise class, it would be important to assess whether the level of intensity of the exercise is appropriate, whereas evaluating a computer class may involve asking about whether participants felt the information provided was relevant to their lives and how they intended to use a computer.

The following is a generic evaluation survey adapted from a tool developed by the Florida Department of Elder Affairs (2010) that can be adapted for specific purposes.

## Sample survey tool to evaluate a specific activity or class

Class or Activity: \_\_\_\_\_ Instructor: \_\_\_\_\_

Date: \_\_\_\_\_

**Please tell us how satisfied you are with this class or activity. Please check the answer that best matches your response.**

	Strongly Agree	Agree	Disagree	Strongly Disagree	Doesn't Apply
Overall, I am satisfied with the class or activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, the class or activity met my expectations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The instructor was knowledgeable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The instructor was enthusiastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The instructor was responsive to my interests and questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our meeting room was comfortable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our meeting room was clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The cost of the class or activity was reasonable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**We are always working to improve our classes and activities. Please tell us what you enjoyed most about this class or activity?**

**Is there anything you would change about the class or activity to make it better? If so, please tell us what.**

## Centre satisfaction tool

Evaluating specific programs is important; however, another useful perspective pertains to senior centre members' satisfaction with the centre overall. The following is an adapted version of a general satisfaction tool developed by the Florida Department of Elder Affairs (2010).

# Sample centre satisfaction tool

Date: \_\_\_\_\_

**Please tell us how satisfied you are with senior centre. Please check the answer that best matches your response.**

	Strongly Agree	Agree	Disagree	Strongly Disagree	Doesn't Apply
Overall, the centre is clean and attractive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff are professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff are responsive to my needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff are friendly and courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff are knowledgeable about activities and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel appreciated as a volunteer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall I'm happy with the classes and activities provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The cost of the classes or activities are reasonable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have no difficulties getting to the centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**We are always working to improve our senior centre. Please tell us if there are other programs, classes or activities you would like to see offered at the centre?**

**Please share any other concerns or comments that will help us serve you better.**

## Outcome evaluation tool

As shown in the logic model (Table 2), there are many types of benefits of attending a senior centre that can be evaluated. The following is an example of a general tool that can provide an overall assessment of benefits, as perceived by older adults who attend the senior centre. The questions are derived from the questionnaire that was used in the present project to interview older adults.

## Sample outcome evaluation tool

Date: \_\_\_\_\_

	Less than 1 year	1–5 years	More than 5 years
--	------------------	-----------	-------------------

For how long have you been coming to this centre?




	Daily	A few times a week	A few times a month	A few times a year
--	-------	--------------------	---------------------	--------------------

In general, how often do you come to the centre?





	Very satisfied	Satisfied	Not satisfied
--	----------------	-----------	---------------

Overall, how satisfied are you with the centre?




	Strongly Agree	Agree	Disagree	Strongly Disagree	Doesn't Apply
--	----------------	-------	----------	-------------------	---------------

The activities give me self-confidence






The activities give me a sense of accomplishment






The activities increase my knowledge about the things around me






The activities provide opportunities to try new things






The activities have helped me to develop close relationships with others






I feel I belong to a community as a result of participating in activities at the centre






The activities contribute to my emotional well-being






The activities help relieve stress






The activities help me to stay healthy






**Your gender:** Female  Male

**Your age:** Less than 60  61–74  75 or older



## Sample outcome evaluation tool (continued)

**What aspect of the senior centre do you like the best? (e.g., the learning, socializing, fitness).**

---

**Has participating in this senior centre changed anything in your life or attitude?**

---

**Are there things that make participating in senior centre activities hard? (e.g., cost, transportation, schedule)**

---

**Do you have any other comments or suggestions about any centre activities?**





Centre on Aging |  UNIVERSITY OF MANITOBA

338 Isbister Building  
Winnipeg MB R3T 2N2

web: [umanitoba.ca/centres/aging](http://umanitoba.ca/centres/aging)  
email: [coaman@umanitoba.ca](mailto:coaman@umanitoba.ca)