



賽馬會齡活城市
Jockey Club Age-friendly City

Jockey Club Age-Friendly City Project

Baseline Assessment Report



North District Park

策劃及捐助 Initiated and funded by:



香港賽馬會慈善信託基金
The Hong Kong Jockey Club Charities Trust
同心同步同進 RIDING HIGH TOGETHER

計劃夥伴 Project partner:



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The Chinese University of Hong Kong

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Acknowledgement

We would like to thank The Hong Kong Jockey Club Charities Trust to support the CUHK Jockey Club Institute of Ageing in conducting the baseline assessment study and publishing the results of the study contained in this report.

Executive Summary

The CUHK Jockey Club Institute of Ageing has conducted a baseline assessment in the North District under the Jockey Club Age-friendly City Project initiated and funded by the Hong Kong Jockey Club Charities Trust. The project is aimed at understanding the age-friendliness of the district and implementing age-friendly related initiatives to make the community more age-friendly.

The assessment was conducted between May and August 2017 using the framework of eight domains (outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, and community support and health services) of an age-friendly city set out by the World Health Organization. It comprised of both quantitative approach of questionnaire survey of 511 residents and qualitative approach of five focus group interviews.

Questionnaire survey showed that residents in North District were most satisfied with the domain of transportation while there were more room for further improvement in the domains of community support and health services as well as civic participation and employment. On the latter two domains, residents participating in focus groups raised more specific issues, such as limited employment opportunity for those aged 65y and above, limited health services in remote areas, and inadequate specialist care service in the district.

Results of the baseline assessments shed light on future directions for an age-friendlier North District. It is suggested that several initiatives could be launched to promote and facilitate employment of the elders as well as to strengthen the community support and health services for the elderly in the district with the support of District Council, government departments and NGOs. Recommendations such as providing job search information and matching services and empowering elders to better self-manage their health are set out in the report for discussion and adoption in future district-based programmes.



1. Background

The fast demographic change since the inception of new millennium has posed great challenges for the city. Population ageing is a critical issue for Hong Kong particularly given the high density urban living, environmental degradation, and limited provision of resources. Currently various initiatives have been launched to articulate “age-friendliness” as a future development pathway for Hong Kong. In the Policy Address 2016, the HKSAR government is committed to tackling the ageing population in five years, with the aim of promoting active ageing and age-friendly communities at district level. Efforts will be concentrated on the ways of exploring and encouraging older adults’ contributions to the community. Elderly will be provided with an easier access to pedestrians and public facilities. However, what are the opinions from the elderly towards these initiatives? How do they evaluate the age-friendliness for their own community? These important questions need to be considered before any initiative is proposed and implemented.

This report sheds light on key findings from our assessment in relation to the age-friendliness of districts in Hong Kong. Both questionnaire survey and focus group interviews have been conducted. The report consists of four parts. First, the ageing population of Hong Kong is briefly reviewed, followed by an introduction and summary of the major characteristics of the study district. Methodologies and key findings of the study are presented in Chapter Two and Chapter Three. Relevant recommendations are made to inform the future community based projects.

1.1 Ageing population in Hong Kong

Population ageing is enduring in Hong Kong. The proportion of people aged 15y and below decreased from 17% in mid-2001 to 12% in mid-2014. In contrast, the proportion of people aged 65y and above increased from 12% to 15% over the same period (Legislative Council Secretariat, 2015). By 2064, more than one-third (36%) of the overall population will be elders, equivalent approximately to 2.6 million in absolute number (Census and Statistics Department, 2017a, Figure 1.1-1) . Accordingly, the old age dependency ratio has been projected to elevate from 211/1000 in 2014 to 658/1000 in 2064. The proportion of the oldest-old, i.e., aged 80y and above, is likely to increase by more than threefold, from 318,100 (4.6%) in 2014 to 1,144,300 (15.9%) in 2064 (Census and Statistics Department, 2015).

While the elderly themselves are ageing, they reveal some potential to be integrated with the community. The overall educational attainment of elderly in Hong Kong has been improving. The percentage of the people aged 65y and above with no schooling or only pre-primary education decreased from 31.7% in 2011 to 23.3% in 2016; whereas there was an 8.6% increase of those with secondary and higher educational level over the same period (Census and Statistics Department, 2013, 2016c). It is suggested that the majority of the elderly of the next and future generations are likely become better educated and better informed (The Chief Executive of HKSAR, 2016).

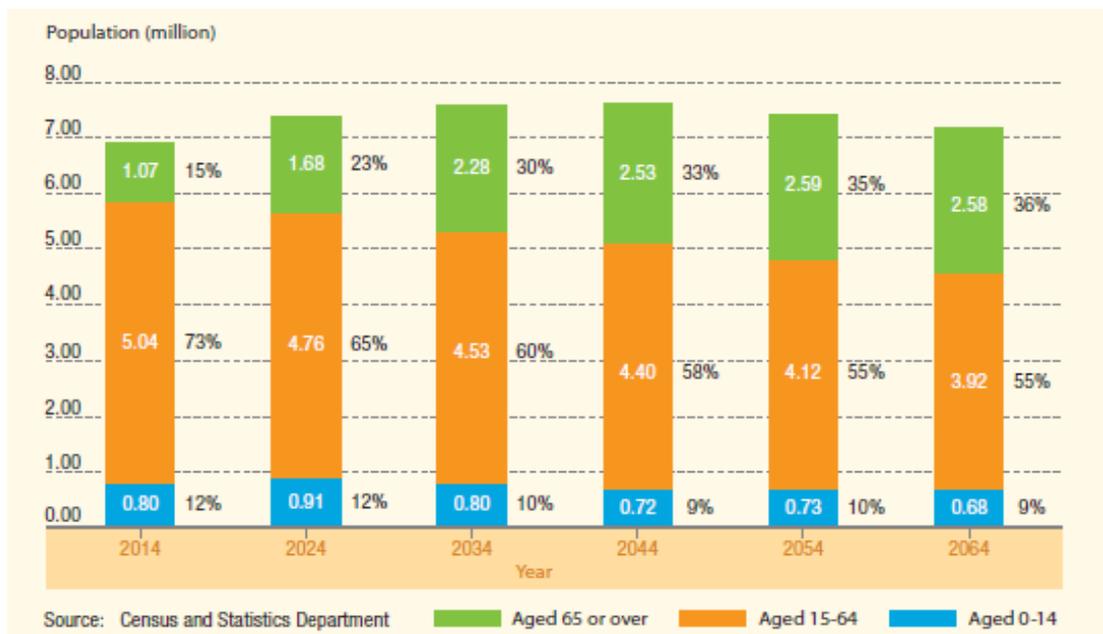


Figure 1.1-1. Population Ageing in Hong Kong (figures exclude foreign domestic helpers). Adapted from Public Engagement Exercise on Retirement Protection by Commission on Poverty, 2015, p.4. Copyright 2015 by Government of the Hong Kong Special Administrative Region

Geographically, the elderly population aged 65y and above is not evenly distributed in Hong Kong. In 2016, 50.9% of them resided in the New Territories, while 31.4% and 17.8% in Kowloon and on Hong Kong Island (Census and Statistics Department, 2016d). Analyzed by District Council District, Wong Tai Sin and Kwun Tong had the largest proportion of elderly population (17.2%), followed by Kwai Tsing (16.7%). The districts with the smallest proportion of elderly were Tsuen Wan and Sai Kung (14.7%) (Figure 1.1-2).

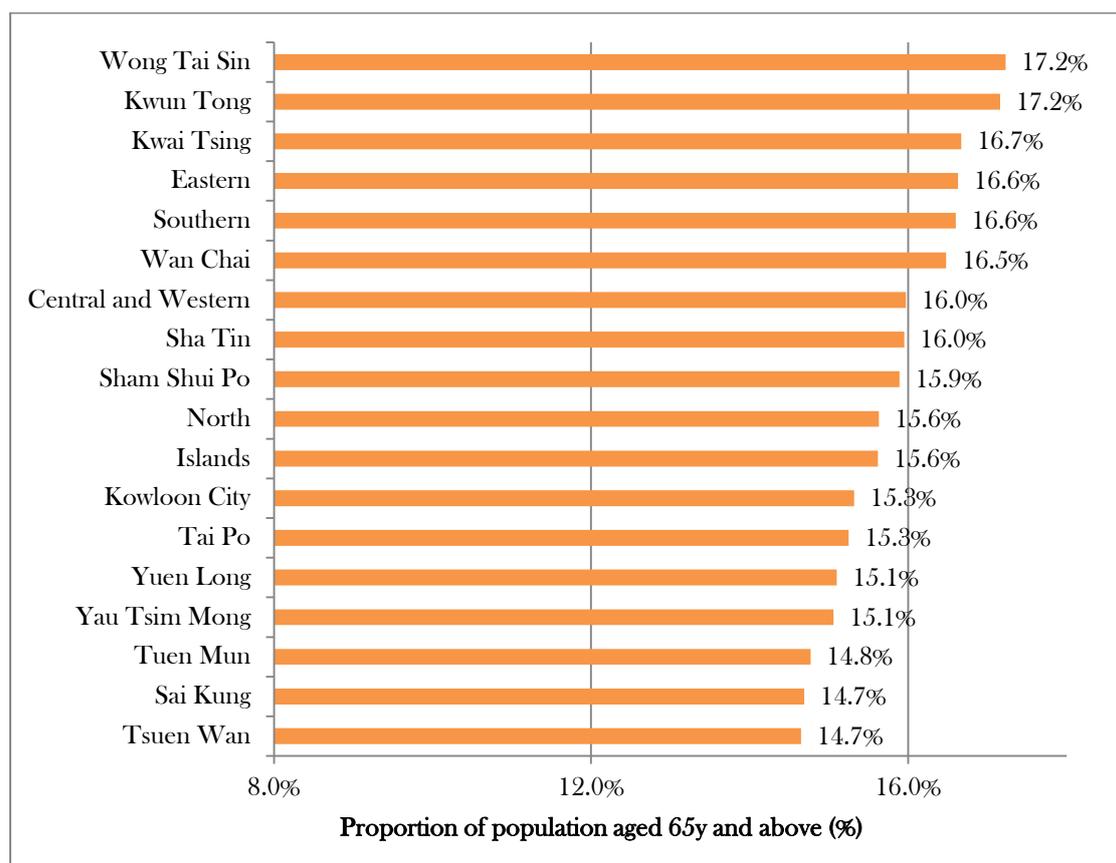


Figure 1.1-2. Proportion of Older Persons by District Council Districts in 2016. Adapted from Population by Sex, Age, Year and District Council District | 2016 Population By-census by Census and Statistics Department, 2017. Copyright 2015 by Government of the Hong Kong Special Administrative Region

Within our society, public perceptions on older adults are not in favor of a supportive ambience. For instance, the expressed willingness of older adults in social participation is prone to be dismissed, and this is evidenced by a previous study in Sha Tin and Tuen Mun (Wong, Chau, Cheung, Phillips, &Woo, 2015). The variation among older adults as to their commitment to different roles of a society is overlooked, such that existing initiatives for the elderly are not matched with the real needs from the ground.

The above characteristics of population ageing reveal three issues to be addressed. First, population ageing needs an in-depth study in particular with reference to different locations. Understanding context specific characteristics affecting ageing well are essential for effective elderly policies. Second, neighborhood is the primary resource the elderly use to satisfy various needs. As such, the certain attributes of neighborhood, that is, the built environment, housing, transportation, etc., should be carefully studied and evaluated. Last but not the least, pertinent policies on community must focus on the quality of home and neighborhood environment, instead of hospital care, for elderly to improve their well-being. Elderly people play a crucial role in communities that can only be ensured if older persons enjoy good health and societies address their needs. These three propositions inform our study in North District wherein various domains of neighborhood and elderly behaviors are benchmarked with World Health Organization (WHO)'s Age-friendly Model through both quantitative and qualitative research methods.

1.2 Age-friendly City Project by the World Health Organization

Making cities and communities age-friendly is one of the most effective policy approaches for demographic ageing. A society with an increasing ageing population will generate additional demands different from those in general. In 2007, WHO published a document entitled *Global Age-Friendly Cities: A Guide*. According to the definition in the Guide, “an age-friendly environment fosters active ageing by optimizing opportunities for health, participation and security in order to enhance quality of life as people age” (WHO, 2007b). Eight domains are highlighted based on opinions of the elderly and caregivers. The eight domains are outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, and community support and health services (Table 1.2-1).

Community is one critical geographical scale to promote Age-friendly City (AFC), upon which public awareness of older people and needs can be enhanced, the living condition improved, and social and cultural life revitalized. The Guide provides a useful reference to articulate age-friendliness under the urban context. Central to this idea is to provide an enabling environment through a checklist of action points integral to the creation of health, wisdom, justice, social networks and economic well-being of older people. In 2010, WHO launched the “Global Network of Age-friendly Cities and

Communities” (“WHO-GNAFCC”) in an attempt of encouraging the implementation of policy recommendations. By June 2017, the Network has included 500 participating cities and communities from 37 countries worldwide. The checklist of action points provides a useful reference for our study in designing questionnaire that encompasses the most relevant aspects.

Table 1.2-1. WHO's Age-friendly City domains and major areas of concern. Adapted from WHO Global Age-friendly Cities: A Guide, 2007. Copyright 2007 by WHO

AFC domains	Major areas of concern	
Outdoor spaces and buildings	<ul style="list-style-type: none"> – Environment – Green spaces and walkways – Outdoor seating – Pavements – Roads – Traffic 	<ul style="list-style-type: none"> – Cycle paths – Safety – Services – Buildings – Public toilets
Transportation	<ul style="list-style-type: none"> – Affordability – Reliability and frequency – Travel destinations – Age-friendly vehicles – Specialized services – Priority seating – Transport drivers – Safety and comfort 	<ul style="list-style-type: none"> – Transport stops and stations – Information – Community transport – Taxis – Roads – Driving competence – Parking
Housing	<ul style="list-style-type: none"> – Affordability – Essential services – Design – Modifications – Maintenance 	<ul style="list-style-type: none"> – Ageing in place – Community integration – Housing options – Living environment
Social participation	<ul style="list-style-type: none"> – Accessibility of events and activities – Affordability – Range of events and activities – Facilities and settings 	<ul style="list-style-type: none"> – Promotion and awareness of activities – Addressing isolation – Fostering community integration
Respect and social inclusion	<ul style="list-style-type: none"> – Respectful and inclusive services – Public images of ageing – Intergenerational and family interactions 	<ul style="list-style-type: none"> – Public education – Community inclusion – Economic inclusion
Civic participation and employment	<ul style="list-style-type: none"> – Volunteering options – Employment options – Training – Accessibility 	<ul style="list-style-type: none"> – Civic participation – Valued contributions – Entrepreneurship – Pay
Communication and information	<ul style="list-style-type: none"> – Information offer – Oral communication – Printed information 	<ul style="list-style-type: none"> – Plain language – Automated communication and equipment – Computers and the Internet
Community support and health services	<ul style="list-style-type: none"> – Service accessibility – Offer of services 	<ul style="list-style-type: none"> – Voluntary support – Emergency planning and care

1.3 Jockey Club Age-friendly City Project

In tandem with the vision to make Hong Kong an age-friendly city, the CUHK Jockey Club Institute of Ageing (“the Institute”) has participated in the “Jockey Club Age-friendly City Project” (“JCAFC Project”) led by the Hong Kong Jockey Club Charities Trust together with Hong Kong’s four gerontology research institutes – The Chinese University of Hong Kong Jockey Club Institute of Ageing, The University of Hong Kong Sau Po Centre on Ageing, Lingnan University Asia-Pacific Institute of Ageing Studies, and The Hong Kong Polytechnic University Institute of Active Ageing. The key objectives of the project are:

- Build the momentum in districts to develop an age-friendly community through an assessment of their respective age-friendliness;
- Recommend a framework in order that districts can undertake continual improvement for the well-being of our senior citizens; and
- Arouse public awareness and encourage community participation in building an age-friendly city.

The Institute has conducted baseline assessment in Sha Tin, Tai Po, Kwai Tsing, North and Sai Kung districts. Based on the framework of eight domains of an AFC set out by WHO, the Institute aims to reach out to citizens and understand their views through questionnaire survey and focus group interviews across diverse socio-demographic backgrounds, that serves as a useful reference for future initiatives.

In addition, a scheme of ambassadors for the JCAFC Project has been launched with the aim of encouraging the general public to acquire knowledge on and share the concept of AFC to the community; and encouraging the general public to participate in and promote the JCAFC Project. Residents aged 18y and above were recruited from these five districts as ambassadors. For North District, the ambassador training workshop on the AFC concept was conducted in September 2017. A total of 55 residents living in the North District completed the training, which included an introduction to AFC concept, community visit and sharing session to deepen the understanding of ambassadors. The community visit was an outing activity where ambassadors attempted to explore and identify strengths and weaknesses of age-friendliness of the district. Ambassadors shared their observations by using the information and photos collected from the outing activity.

1.4 District characteristics of North District

North District is located at the northern part of the New Territories, with its boundary connecting to Shenzhen. The district consists of four major geographical areas, namely Sheung Shui, Fanling, Sha Tau Kok and Ta Kwu Ling, with a land area of about 13,670 hectares (North District Council, 2017).



Figure 1.4-1. Locations of 18 Districts in Hong Kong

There are three important border control points along the boundary, namely Lo Wu, Man Kam To and Sha Tau Kok, linking Hong Kong to Mainland China. Traditional Chinese heritages under good preservation condition are widely distributed across the district, for instance the Tang Chung Ling Ancestral Hall in Fanling; the Liu Man Shek Tong Ancestral Hall in Sheung Shui, and the Tin Hau Temple on Kat O Island (North District Council, 2017).

There is a clear rural-urban divide of population in North District in terms of living area. Nearly 80% of the district population lives in town areas whereas the rest of them scatter across 117 rural villages. In these villages, rural affairs are managed by four District Rural Committees in Sheung Shui, Fanling, Ta Kwu Ling and Sha Tau Kok. Regarding the provision of residential units, Housing Authority and Housing Society have allocated over 48,000 units serving more than half of the housing demand in North District (North District Council, 2017).

With reference to the 2016 population by-census, the total population in North District was 315,270. Among this number, the proportion of elderly population aged 65y and above accounted for 15.6%, increased significantly from 10.7% in 2011 (Census and Statistics Department, 2011a, 2016a).

Regarding the educational attainment, 32.5% of the district population aged 65 years and above had attended secondary or tertiary education, and yet this proportion among those aged 45-64y was 73.9% (Census and Statistics Department, 2016b).

Among the 106,483 domestic households residing in North District, 21.7% lived in public rental housing whereas 26.2% in subsidized home ownership housing. The proportion of domestic households in private permanent housing was 46.8% (Census and Statistics Department, 2016a).

Labour force participation rate in North District was 58.9% in 2016. In terms of economic characteristics, the median household income was HKD 21,500 in North District. Of all domestic households, approximately 34.1% had monthly income less than HKD 15,000; and approximately 28% had a monthly income between HKD 15,000 - HKD 30,000 (Census and Statistics Department, 2016a).

The median individual monthly income in North District was HKD 15,000, which was slightly lower than average of Hong Kong (HKD 15,500). The income characteristics might be associated with the types of occupation. Most of the working populations in North District were associate professionals, accounting for approximately 21% of the total district workforce, followed by 18.9% of service and sales workers, and 18.4% of elementary occupations (Census and Statistics Department, 2016a).

The increasing ageing population in North District has caught the attention of the Working Group on Age-friendly Community Network (the Working Group). It was established in 2016 with an aim to improve the age-friendliness of community with reference to the World Health Organization's (WHO's) guidelines. The Working Group collaborates closely with the NGOs and other district stakeholders to collect the citizens' opinions on community facilities and services. Since 2016, North District has been working on a four-year working plan to improve the community facilities and public areas in the district. Giving credit to these efforts, the North District has been

accepted as a network member of the Global Network of Age-friendly Cities and Communities (GNAFCC) by the WHO (North District Council Secretariat, 2017b).

In addition to the efforts of the district council, the Social Welfare Department has also been putting effort to promote age-friendliness in North District. The Department has a working group in North District, namely “推廣關愛護老文化工作小組”, to promote the culture of respect and care towards the elderly, with another aim to achieve intergenerational cohesion and mutual respect in the district. Moreover, a scheme called “風中暖流社區支援計劃” involving government departments, health care professionals, social workers and passionate individuals from the district provides outreach and medical-social support to elders living alone or elderly households of poor living conditions. The scheme also provides visits to the elderly living in rural areas, giving them education on fall prevention and drug management (North District Council Secretariat, 2017a).

North District Hospital has a passionate attitude towards social services and healthy ageing in community. The Community Geriatric Assessment Team of North District Hospital schedules regular visits by health care professionals to the elderly residents in the community, and provides medical services to them during the visits (North District Council Secretariat, 2017a).

HKYWCA Ellen Li District Elderly Community Centre and other Neighbourhood Elderly Centres (NECs) in the community have organized a 「北區長者友善社區聯席」 to discuss and promote the issues of age-friendliness in community. Elders in the district have conducted investigations on transportation and medical services in the community (North District Council Secretariat, 2017a).



2. Objectives and method

2.1 Objectives

The JCAFC Project adopts a bottom-up and district-based approach to address population ageing in Hong Kong. Using both quantitative (questionnaire survey) and qualitative (focus group interviews) approaches, the baseline assessment measures the age-friendliness of districts and identifies areas of improvement.

2.2 Quantitative approach of baseline assessment

2.2.1 Sampling methods

The survey was designed using both stratified and quota sampling methods and set out to interview 500 local residents aged 18y and above from the district. In our study, the district was divided into three major geographical regions, namely Sheung Shui, Fanling, and Sha Tau Kok & Ta Kwu Ling. Considering the geographical distribution of socially vulnerable groups and socio-economic status (SES), district sub-areas (i.e., District Council Constituency Areas (DCCAs/CAs) in each of the three regions were stratified according to the Social Vulnerability Index (SVI) and the predominant type of housing therein as proxy of SES.

The SVI is an assessment tool to evaluate the vulnerability level of the older populations in Hong Kong, and identifies the distribution of vulnerable groups across the district sub-areas (Chau, Gusmano, Cheng, Cheung, & Woo, 2014). Using official statistics of 2011, composite scores of SVI, ranging from 0 to 10, were compiled for all CAs in Hong Kong based on seven indicators, namely population size, institutionalization, poverty, living alone, disability, communication obstacles and access to primary care. The higher scores indicate greater vulnerability of an area. Based on the SVI scores, CAs were categorized into five SVI bands with equal interval values, i.e., Band I, SVI score <2; Band II, SVI score 2-<4; Band III, SVI score 4-<6; Band IV, SVI score 6-<8; Band V, SVI score ≥ 8 . The SVI scores of North District CAs correspond to values grouped under Band II to IV.

For all CAs grouped under respective SVI band, we examined the predominant type of housing accommodating the largest number of population therein as proxy of SES of CAs. We sampled questionnaire respondents from three major types of housing, including public rental housing, subsidized home ownership housing and private permanent housing. Currently, they accommodate almost 99% of the Hong Kong population (Census and Statistics Department, 2011b). For CAs within the same SVI

band, we selected 3 different CAs with the largest population living in public rental housing, subsidized home ownership housing and private permanent housing respectively. In cases where there were less than three CAs representing different housing characteristics in the SVI band, the only CA remaining in the band was selected and the sample was drawn in proportion to the population distribution by housing types.

Table 2.2-1 shows the selection of sampling sites for the questionnaire survey in North District. In total, 11 CAs were selected, with six in Sheung Shui, four in Fanling and one in Sha Tau Kok/Ta Kwu Ling. In this district, we selected Tin Ping East (Sheung Shui, Public, Subsidized & Private) in SVI band II; Tin Ping West (Sheung Shui, Public & Subsidized), Shek Wu Hui (Sheung Shui, Subsidized & Private), Yan Shing (Fanling, Public & Subsidized) and Fanling Town (Fanling, Private) in SVI band III; Ching Ho (Sheung Shui, Public), Choi Yuen (Sheung Shui, Subsidized), Sheung Shui Rural (Sheung Shui, Private), Wah Ming (Fanling, Public & Subsidized), Shing Fuk (Fanling, Subsidized & Private) and Sha Ta (Sha Tau Kok/Ta Kwu Ling, Public & Private) in SVI band IV. In North District, reduced number of sample was collected from SVI band II due to small number of CAs in the band.

Prospective respondents were recruited from major estates and areas within the CA boundaries, according to the Electoral Affairs Commission (Electoral Affairs Commission, 2014). Field surveys were organized accordingly for subject recruitment and field observations.

In each selected CA, convenience sampling was applied. To avoid over-sampling of particular demographic representation in the final sample, quotas were set on age and sex. Accordingly, five age strata were applied to the overall sample, which set to include 50 samples from aged 49 years and below, 100 from 50 to 59 years, 150 from aged 60 to 69 years, 150 from aged 70 to 79 years, and 50 from aged 80 years and above, to reflect and examine divergent views on the neighborhood environment across ages. A sex (male-to-female) ratio of approximately to 0.88 was set to match with the overall sex ratio of the district population. By this approach, the prospective respondents would represent views and opinions from a wide spectrum of local residents, including the most vulnerable elders and residents with different geographical, socio-economic and demographic characteristics.

Table 2.2-1. Selection of sampling sites for the questionnaire survey in North District

Region	SVI Band	Constituency areas	Type of housing		
			Public rental	Subsidized home ownership	Private permanent
Sheung Shui	II	Tin Ping East 天平東	x	x	x
Sheung Shui	III	Tin Ping West 天平西	x	x	
Sheung Shui	III	Shek Wu Hui 石湖墟		x	x
Sheung Shui	IV	Ching Ho 清河	x		
Sheung Shui	IV	Choi Yuen 彩園		x	
Sheung Shui	IV	Sheung Shui Rural 上水鄉郊			x
Fanling	III	Yan Shing 欣盛	x	x	
Fanling	III	Fanling Town 粉嶺市			x
Fanling	IV	Wah Ming 華明	x	x	
Fanling	IV	Shing Fuk 盛福		x	x
Sha Tau Kok/ Ta Kwu Ling	IV	Sha Ta 沙打	x		x

2.2.2 Questionnaire respondents and recruitment strategies

All prospective respondents were community dwellers of Chinese origin, aged 18y and above, normally residing in Hong Kong and able to speak and understand Cantonese at time of participation. Foreign domestic helpers and individuals who were mentally incapable of communicating were excluded. All eligible respondents had lived in our selected sampling sites for not less than six consecutive months at time of participation in the survey.

Respondents were mostly recruited directly from the community, with a minor proportion of elders who regularly visit District Elderly Community Centres (DECCs) and NECs. We tried to limit this segment of elders to 20% in our sample, close to the average of Hong Kong, since they may represent views considerably different from other community elders (HKU, 2011; Legislative Council Panel on Welfare Services, 2007).

2.2.3 Data and materials

A structured questionnaire was used in the survey, which consisted of two major sections. The first section sought information on the respondents' perception of the age-friendly neighborhood environments, and their sense of community (SOC); the second section collected the respondents' individual characteristics, including age, sex, marital status, educational level, type of housing, residential area, total length of residence in the neighborhood, living arrangement, economic activity status, occupation, prior experience of delivering informal care to elderly, use of elderly centre services, income, and self-rated health.

Respondents' perception of the age-friendly neighborhood environments was assessed with reference to the checklist of the essential features of AFC developed by the WHO. In the assessment, a tailor-made version of questionnaire items was developed, with reference to the original checklist. We examined and worded each of the checklist features according to Hong Kong's context, so that local residents are more familiar with the checklist items being asked about. The questionnaire consisted of 53 items across the eight domains (WHO, 2007a, 2007b), covering physical, social and service environments, which mapped onto outdoor spaces and buildings (9 items), transportation (12 items), housing (4 items), social participation (6 items), respect and social inclusion (6 items), civic participation and employment (4 items), communication and information (6 items), and community support and health services (6 items). On each item, respondents were asked to rate the age-friendliness of their neighborhood on a six-point Likert-type scale, ranging from "strongly disagree" (1) to "strongly agree" (6).

The SOC was measured using an 8-item Brief Sense of Community Scale (BSCS), consisting of four dimensions including needs fulfilment, group membership, influence and shared emotional connection. Each dimension contains two items. On each item, respondents were asked to rate the statement on a five-point Likert scale, ranging from "strongly disagree" (1) to "strongly agree" (5).

2.2.4 Procedures

Data were mainly collected by trained research assistants via face-to-face or telephone interviews; a minor proportion of the relatively literate respondents self-administered the questionnaires with assistance from trained research assistants.

The study protocol was approved by the Survey and Behavioral Research Ethics Committee (SBREC) of the Chinese University of Hong Kong (Ethical code: 070-15). All prospective respondents were fully informed of the procedures, in speech and in writing. Written informed consent was sought from respondents prior to the interview.

2.2.5 Quantitative data analysis

Responses to individual AFC items were averaged to produce a mean AFC domain score. Mean domain scores were calculated only if over half of the domain items had valid responses (1 to 6). Standard deviations and confidence intervals were calculated for the mean scores of AFC domains. In terms of SOC, responses to each of the four dimensions were summated to produce a component score. A total score of SOC was also calculated by summing all component scores.

Differences in mean scores of AFC domains were analyzed by respondents' individual characteristics and geographical locations, using Analysis of Variance (ANOVA) and Analysis of Covariance (ANCOVA) adjusting for demographic and socio-economic characteristics of the questionnaire respondents. The individual characteristics included age, sex, marital status (currently married, currently not married), educational level (primary and below, secondary, post-secondary), type of housing (public rental housing, subsidized home ownership housing, private permanent housing), total length of residence in the neighborhood, living arrangement (living alone, not living alone), economic activity status (working, not working), self-rated health (poor/fair, good/very good/excellent), prior experience of delivering informal care to elderly, use of elderly community centres, and disposable income (insufficient, enough/abundant). Geographical variations of mean scores of AFC domains were examined at regional level, adjusting for individual characteristics. All statistical procedures were carried out using the Window-based SPSS Statistical Package (version 21.0; SPSS, Chicago, IL, USA), where a significant level at 5% was adopted for all statistical tests.

2.3 Qualitative approach of baseline assessment

2.3.1 Sampling methods

The design of the focus group methodology is based on the Vancouver Protocol, which aims to “provide rich descriptions and accounts of the experiences of older people” and “bring together and compare the discussions of the nine areas (warm up question and eight topics) across the groups in order to bring to light aspects of the community that are age-friendly (advantages), barriers and problems that show how the community is not age-friendly (barriers), and suggestions to improve the problems or barriers identified” (WHO, 2007c).

Conditions upon which a person was considered eligible as a questionnaire respondent were also applied to focus group participants. Based on the Vancouver Protocol, five focus groups were formed and interviewed in North District. Diverse demographic characteristics were built into the sampling of groups in order to collect opinions of four age groups and three housing types in areas with different SVI bands (Table 2.3-1). Effort was made to recruit eight to ten interviewees in each group, with similar numbers of male and female.

Table 2.3-1. Summary of the profiles of five focus groups in North District

Group	Age (Years)	Housing Type	SVI Band
1	50 to 64	Private	II
2	80 and above	Public	IV
3	65 and above	Public	IV
4	65 and above	Public, Subsidized	III
5	18 to 49	Private	III

Effort was also made to recruit participants living in the same or adjacent housing estates. Otherwise, divergent views and experiences emerging from a group might simply be due to participants living in different neighborhoods, evaluating different transport routes, or using different parks.

Similar to the Vancouver Protocol, we attempted to recruit focus group participants in different age groups. However, we are interested not only in comparing views of the old-old and young-old, but a wider range of age groups. Therefore, we recruited participants in the age groups of 18 to 49y, 50 to 64y, 65y and above. In addition, we

aimed to understand and represent the perspectives of the oldest population, hence one focus group was exclusively assigned to participants aged 80y and above. Four different age groups were interviewed.

Housing type is an important factor affecting resident perceptions of age-friendliness towards their community. Effort was made to form more groups of participants living in public and subsidized housing, corresponding to the Vancouver Protocol in recruiting participants from middle and low socio-economic levels. In addition, two groups of residents living in private housing estates were interviewed in North District.

We aimed to include the views from participants unable to come to the focus group interview due to frail or disabled conditions. As such, caregivers were recruited with a view to offering more comprehensive views from the elderly. Different from the Vancouver Protocol, we did not form a separate group exclusively for caregivers of the disabled elderly. Instead, we incorporated caregivers into our existing focus groups. A survey question from the demographics section was used to identify these caregivers among questionnaire respondents.

2.3.2 Interview procedures and protocol

A venue accessible by participants was chosen for carrying out each focus group. A total of 1.5 to 2 hours were allocated for each group, with light refreshments offered to participants afterwards. Name tags with first name or surname only were provided to participants, interviewer, and assistants so that everybody was addressed by their names during the interview. Where possible, PowerPoint presentations were used to introduce each interview topic with appropriate photos taken from the participants' living areas. The aim was to elicit their response to age-friendliness specific to their community.

Each group began with a brief introduction of the JCAFC project, the purpose of the focus group and how participants would contribute towards the project. The use of audio and video recorders and steps for ensuring confidentiality of participants were also explained. A consent form similar to the one used with the questionnaire interview was distributed to each participant for signature after explanation by interviewer.

The interview consisted of three parts, including warm-up, discussion of the eight topic areas based on the WHO AFC domains, and wrap-up. In line with the Vancouver Protocol, open questions were asked so that participants were able to 'spontaneously

raise the specific areas and concerns relevant to them' (WHO, 2007, p.10). More specific questions were used to prompt participants to explore additional issues once an issue has been sufficiently explored. Following the same principle adopted by the Vancouver Protocol when interviewing non-elderly participants (i.e. service providers and caregivers groups), the group aged 18 to 49y was asked to think of advantages and barriers as faced by the elderly in their community and suggestions in relation to the elderly. Interview sessions were audio-recorded using two recorders to be transcribed in full as soon as possible afterwards. Where possible, a video recorder was used with participants' consent to help identify speakers and pick up non-verbal communication for transcription purpose.

The running of focus group was carried out by a focus group leader - also the interviewer - and two to three assistants depending on group size. The focus group leader, with experience in conducting focus group interview and familiar with the AFC project, was responsible for various duties including welcoming participants, taking questions that participants had about the project, and supervising the signing of consent forms. Assistants, who had received briefing beforehand, were mainly responsible for setting up and using the recording equipment during the interview.

2.3.3 Qualitative data analysis

The analysis of focus group interviews followed the guidelines of the Vancouver Protocol and aimed to highlight under the eight domains those aspects of the community that are age-friendly (advantages), problems in the community that are not age-friendly (barriers), and suggestions to improve the barriers identified, all grounded in the local participants' response.

Since the common view, rather than individual view, was sought, advantages and barriers that elicited the greatest consensus were coded as key features. These were then compared across the five groups, leading to the identification of common advantages and barriers under the eight domains.

In addition, less commonly cited views were included if they addressed the following:

- (a) A unique scheme providing a useful reference/model for other districts

- (b) Concerns over vulnerable groups, oldest-old (aged 80y and above), disadvantaged groups e.g. persons with disability, older people living alone, elderly marginalized for other reasons
- (c) Issue(s) that can be generalized and applied to other districts/regions despite few mentions e.g. perceived insufficiency of burial sites

Driven by the philosophy of the AFC which emphasizes the initiation of change from community members themselves, participants' suggestions for improving their local community were seen as important. Therefore, effort was made to include in the findings suggestions that are relevant to the eight domains whether or not they were common across all groups.



3. Key findings

3.1 Quantitative assessment

3.1.1 Socio-demographic characteristics of the questionnaire survey respondents

A total of 511 completed questionnaires were collected in North District and included in the analysis. Of these respondents, the mean age was 64.6 ± 14.7 years (range 18 to 93 years). 57.1% were aged 65y and above and 53.4% were female (Figure 3.1-1a and Figure 3.1-1b). 72.8% were married, and 50.1% had secondary education and above (Figure 3.1-1c and Figure 3.1-1d).

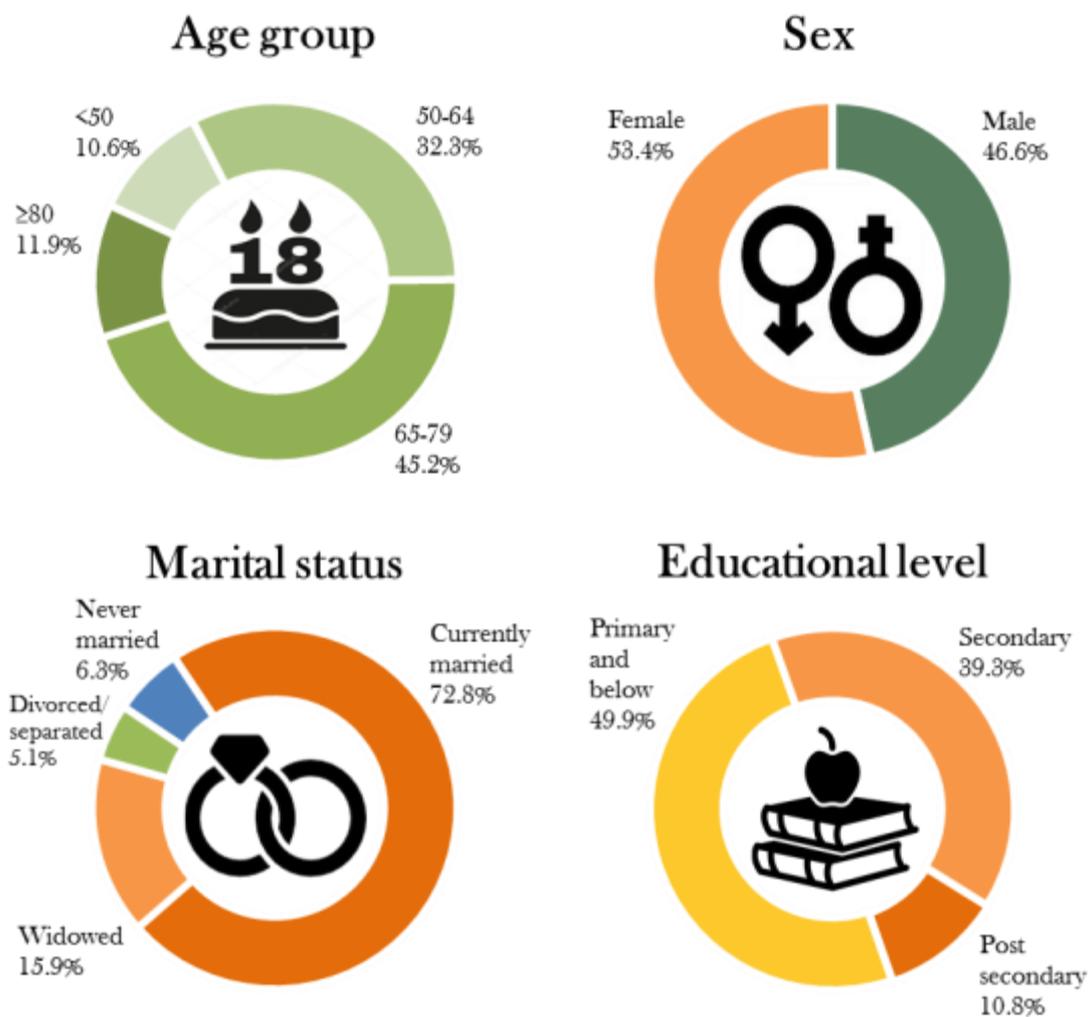


Figure 3.1-1. Distribution of questionnaire respondents by age groups (Figure 3.1-1a, Upper Left), by sex (Figure 3.1-1b, Upper Right), by marital status (Figure 3.1-1c, Lower Left), by educational level (Figure 3.1-1d, Lower Right)

About 97.5% of the respondents lived in public rental housing (33.5%), subsidized home ownership housing (35.2%) and private permanent housing (28.8%), the remainder of which lived in private temporary village houses (2.5%) (Figure 3.1-1e). Mean length of residence in the neighborhood was 21.5 ± 15.7 years. 87.9% of the respondents lived with family, while 12.1% were living alone (Figure 3.1-1f).

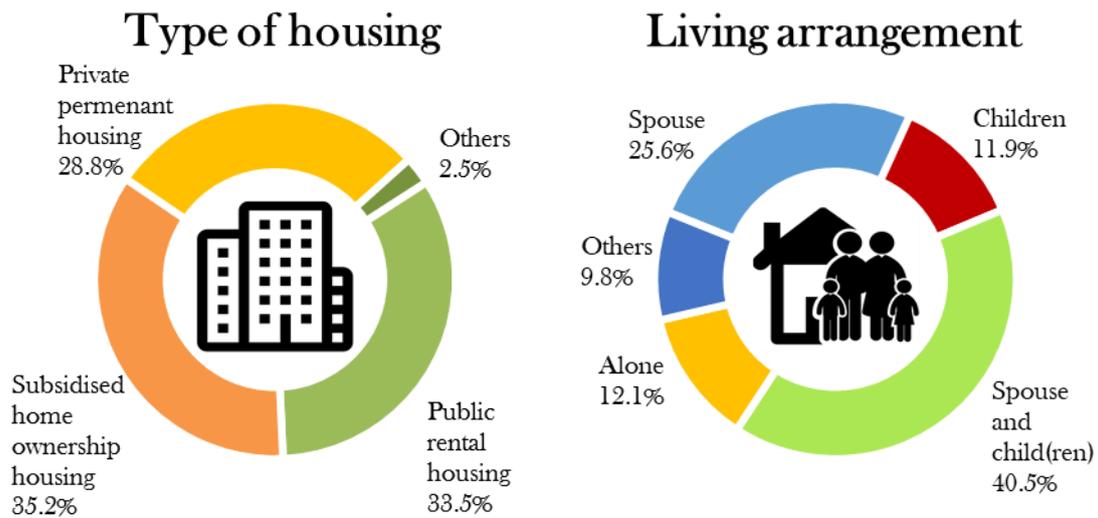
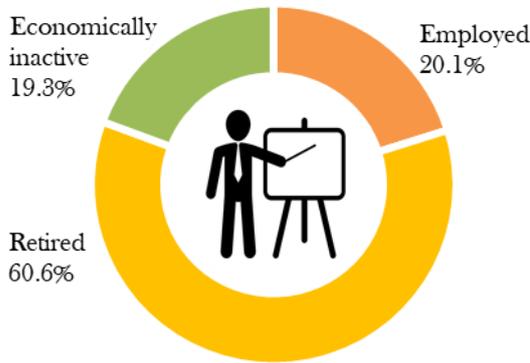


Figure 3.1-1. Distribution of questionnaire respondents by type of housing (Figure 3.1-1e, Left), by living arrangement (Figure 3.1-1f, Right)

In terms of economic activity status, 20.1% of the respondents were working full-time or part-time, while 60.6% had retired and 19.3% were economically inactive, including unemployed persons, home-makers and students (Figure 3.1-1g). Financially, 59.5% of the respondents expressed having enough fund for daily expenses (Figure 3.1-1h), yet 85.6% had a monthly personal income <\$15,000 (Figure 3.1-1i), whereas the median monthly income from main employment in Hong Kong was HKD 15,500 according to the 2016 by-census figures (Census and Statistics Department, 2016b).

Economic activity status



Disposable income

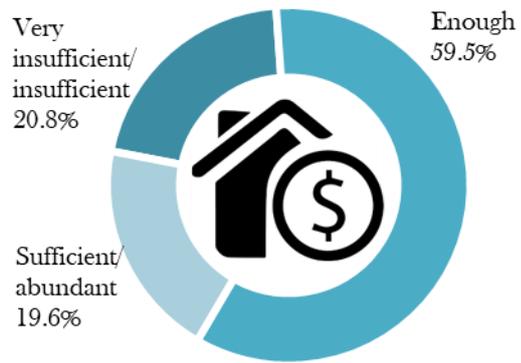


Figure 3.1-1. Distribution of questionnaire respondents by economic activity status (Figure 3.1-1g, Left), by disposable income (Figure 3.1-1h, Right)

Monthly personal income

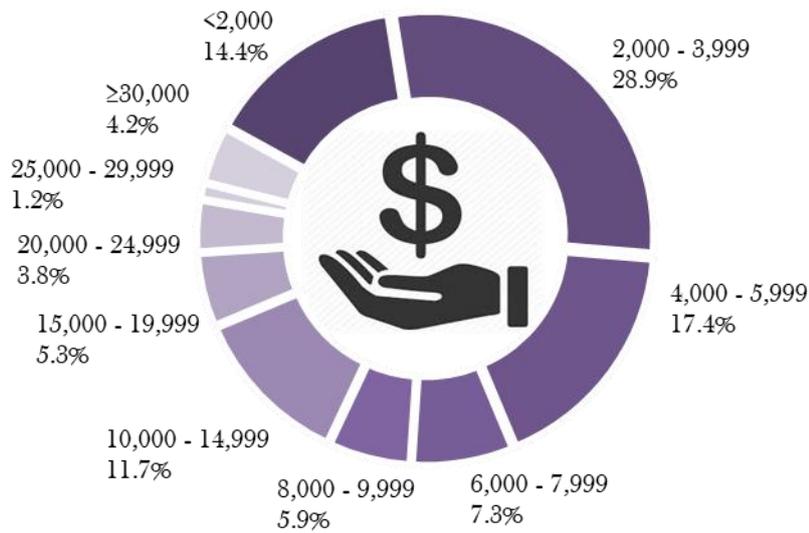


Figure 3.1-1. Distribution of questionnaire respondents by personal monthly income

In terms of their overall health condition, 48.9% of the respondents rated their health condition as good, very good or excellent (Figure 3.1-1j). Of all respondents, 48.3% had prior experience of delivering informal care to the elderly (Figure 3.1-1k). One-fifth of them (20.4%) were members or service users of elderly community centres (Figure 4.11).

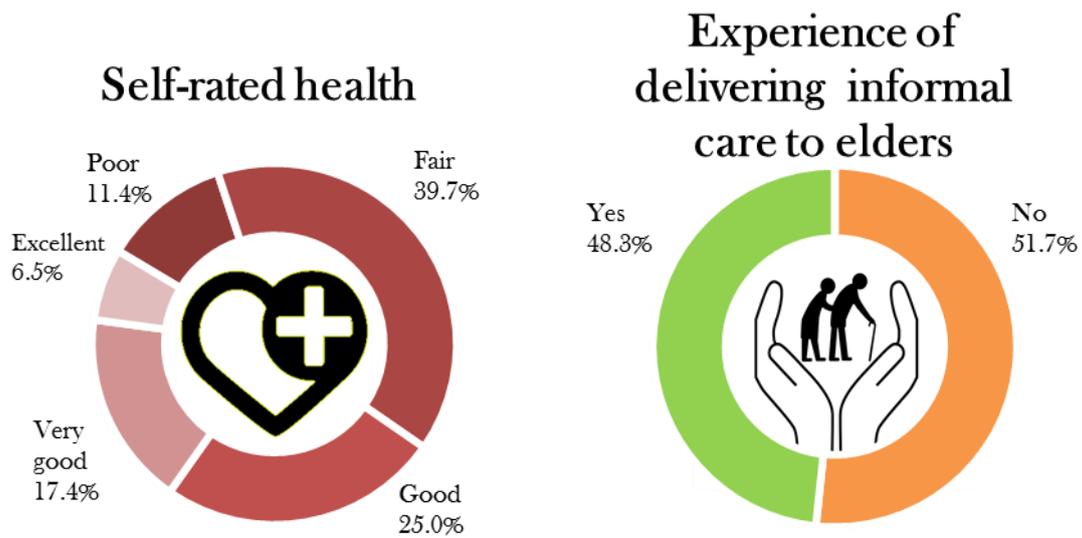


Figure 3.1-1. Distribution of questionnaire respondents by self-rated health (Figure 3.1-1j, Left), by experience of delivering informal care to the elderly (Figure 3.1-1k, Right)

Use of elderly centres

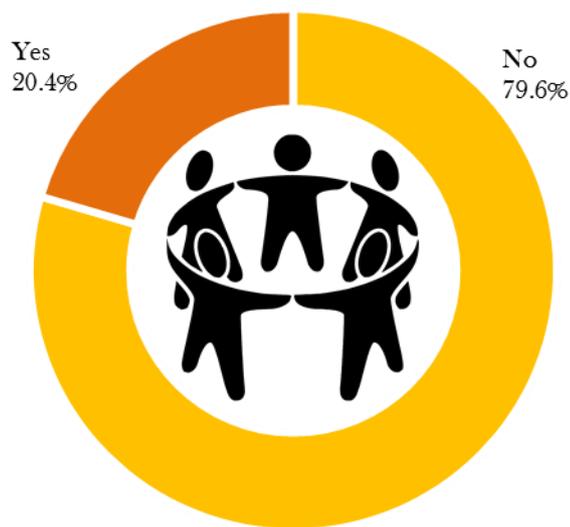


Figure 3.1-1. Distribution of questionnaire respondents by use of elderly centres (Figure 3.1-1l)

3.1.2 Mean scores of the Age-friendly City items in North District

Table 3.1-1. Mean scores of the Age-friendly City items and domains in North District

AFC items and domains	Mean	Std. Deviation	Rank of item / domain	
			Within domain	Across domains
Item A1: Cleanliness	4.47	1.10	1	4
Item A2: Adequacy, Maintenance and Safety	4.35	1.20	3	10
Item A3: Drivers' Attitude at Pedestrian Crossings	4.06	1.16	5	21
Item A4: Cycling Lanes	3.77	1.47	8	36
Item A5: Outdoor Lighting and Safety	4.36	1.13	2	9
Item A6: Accessibility of Commercial Services	4.20	1.37	4	17
Item A7: Arrangement of Special Customer Service to Persons in Need	3.17	1.42	9	52
Item A8: Building Facilities	4.02	1.30	6	24
Item A9: Public Washrooms	3.77	1.41	7	35
Domain: Outdoor Spaces and Buildings	4.01	0.76	NA	3
Item B10: Traffic Flow	4.32	1.12	7	11
Item B11: Public Transport Network	4.39	1.23	5	7
Item B12: Affordability of Public Transport	4.50	1.25	2	2
Item B13: Reliability of Public Transport	4.24	1.16	8	15
Item B14: Public Transport Information	4.13	1.22	9	20
Item B15: Condition of Public Transport Vehicles	4.38	1.04	6	8
Item B16: Specialized Transportation for disabled people	3.68	1.42	11	39
Item B17: Transport Stops and Stations	4.41	1.15	4	5
Item B18: Behaviour of Public Transport Drivers	4.49	1.08	3	3
Item B19: Alternative Transport in Less Accessible Areas	3.59	1.43	12	43
Item B20: Taxi	3.93	1.18	10	28
Item B21: Roads	4.53	0.97	1	1
Domain: Transportation	4.24	0.78	NA	1
Item C22: Sufficient and Affordable Housing	3.62	1.42	2	41
Item C23: Adequacy of Interior Spaces and Level Surfaces for Movement	4.30	1.21	1	12
Item C24: Home Modification Options and Supplies	3.48	1.37	3	46
Item C25: Housing for Frail and Disabled Elders	3.45	1.43	4	48
Domain: Housing	3.75	1.01	NA	6
Item D26: Mode of Participation	4.25	1.16	1	14
Item D27: Participation Costs	4.22	1.18	2	16
Item D28: Information about Activities and Events	3.99	1.22	4	27
Item D29: Variety of Activities	4.03	1.25	3	23
Item D30: Variety of Venues for Elders' Gatherings	3.93	1.32	5	29
Item D31: Outreach Services to Less Visible Groups	3.77	1.31	6	37
Domain: Social Participation	4.03	0.99	NA	2
Item E32: Consultation from Different Services	3.42	1.39	5	49
Item E33: Variety of Services and Goods	3.58	1.28	4	44
Item E34: Manner of Service Staff	4.40	0.99	1	6
Item E35: School as Platform for Intergenerational Exchange	3.31	1.36	6	51
Item E36: Social Recognition	4.15	1.17	2	18
Item E37: Visibility and Media Depiction	4.06	1.09	3	22
Domain: Respect and Social Inclusion	3.84	0.88	NA	5
Item F38: Options for Older Volunteers	3.73	1.28	2	38
Item F39: Promote Qualities of Older Employees	3.84	1.20	1	32
Item F40: Paid Opportunities for Older People	3.33	1.27	4	50
Item F41: Age discrimination	3.54	1.33	3	45
Domain: Civic Participation and Employment	3.63	0.97	NA	7
Item G42: Effective Communication System	4.02	1.19	3	25
Item G43: Information and Broadcasts of Interest to Elders	3.63	1.27	6	40
Item G44: Information to Isolated Individuals	3.78	1.19	5	34
Item G45: Electronic Devices and Equipment	4.27	1.09	1	13
Item G46: Automated Telephone Answering Services	3.78	1.33	4	33
Item G47: Access to Computers and Internet	4.14	1.29	2	19
Domain: Communication and Information	3.99	0.84	NA	4
Item H48: Adequacy of Health and Community Support Services	3.90	1.41	3	31
Item H49: Home Care Services	3.60	1.36	4	42
Item H50: Proximity between Old Age Homes and Services	3.91	1.32	2	30
Item H51: Economic barriers to Health and Community Support Services	4.00	1.28	1	26
Item H52: Community Emergency Planning	3.46	1.34	5	47
Item H53: Burial Sites	2.38	1.27	6	53
Domain: Community Support and Health Services	3.56	0.88	NA	8

.. : Not applicable

Table 3.1-1 above shows the mean scores of AFC items and domains. Across all domains, the mean itemized scores varied from maintenance and lighting of roads (highest-rated item: 4.53 ± 0.97) to burial sites (lowest-rated item: 2.38 ± 1.47). The perception of AFC items also varied within domain. Items such as cleanliness of public spaces (4.47 ± 1.10), outdoor lighting and safety (4.36 ± 1.13), and adequacy and maintenance of outdoor seats and green spaces (4.35 ± 1.20) were rated higher scores than other features in outdoor spaces and buildings domain, such as availability of cycle path (3.77 ± 1.47), adequacy and cleanliness of public toilets (3.77 ± 1.41), and arrangement of special customer services to persons in need (3.17 ± 1.42). In transportation, residents gave higher scores to maintenance and lighting of roads (4.53 ± 0.97), affordability of public transport (4.50 ± 1.25), and driving attitude of public transport drivers (4.49 ± 1.08); whilst they expressed concerns with lower scores on voluntary transport services in less accessible areas (3.59 ± 1.43) and specialized transport for disabled persons (3.68 ± 1.42). In housing domain, rating was higher regarding space of residential unit (4.30 ± 1.21), whilst other items tended to have lower scores, particularly on housing and nearby community services to frail and disabled elders (3.45 ± 1.43). In social participation domain, the mode of participation (4.25 ± 1.16) and cost of participation was outstanding (4.22 ± 1.18), whilst respondents also acknowledged limited outreach service to less visible groups (3.77 ± 1.31). Regarding respect and social inclusion, service staff was generally recognized as being courteous and helpful (4.40 ± 0.99), but opportunities of intergenerational exchange (3.31 ± 1.36) and consultation with older persons (3.42 ± 1.39) were less impressive. The item ratings of volunteering and paid job opportunities tended to be low (Range 3.33 to 3.84). Respondents generally felt limited paid job opportunities to older persons (3.33 ± 1.27) and age discrimination over employment opportunities (3.54 ± 1.33). In communication and information, user-friendliness of electronic devices and access to computers/internet received good responses from respondents (4.27 ± 1.09 and 4.14 ± 1.29 , respectively); whilst information of interest to elders and isolated individuals scored relatively lower (3.63 ± 1.27 and 3.78 ± 1.19 respectively). Automated telephone answering system also scored low in this domain (3.78 ± 1.33). Regarding community support and health services, respondents gave higher score on economic accessibility of community support and health services (4.00 ± 1.28), and pointed out the lack of support to the elderly whom were taken into little account in emergency situations (3.46 ± 1.34) and lack of cemetery spaces and services (2.38 ± 1.27).

Table 3.1-2 shows the ten highest and lowest-rated AFC items. The ten highest-rated items clustered in transportation (6 items), and outdoor spaces and buildings (3 items). Half of the domain items in transportation scored the ten highest-rated items. Manner of service staff (respect and social inclusion domain) was also highly rated. On the other hand, the ten lowest-rated items were distributed across five domains, whereby half of the items in respect and social inclusion domain (3 items), civic participation and employment domain (2 items), and housing domain (2 items) were rated as the ten lowest-rated items. The items regarding arrangement of special customer services to persons in need (outdoor spaces and buildings domain), support to older persons in emergencies and accessibility to burial sites (both in community support and health services domain) were also rated among the lowest.

Table 3.1-2. Ten highest- and lowest-rated Age-friendly City items

AFC items	Mean	Rank	Relevant domains
<i>Ten highest-rated items</i>			
Item B21: Roads are well-maintained, with good lighting.	4.53	1	Transportation
Item B12: Public transportation costs are affordable and clearly displayed. The costs are consistent under bad weather, peak hours and holidays.	4.50	2	Transportation
Item B18: Drivers stop at designated stops and beside the curb to facilitate boarding and wait for passengers to be seated before driving off.	4.49	3	Transportation
Item A1: Public areas are clean and pleasant.	4.47	4	Outdoor spaces and buildings
Item B17: Transport stops and stations are conveniently located, accessible, safe, clean, well-lit and well-marked, with adequate seating and shelter.	4.41	5	Transportation
Item E34: Service staffs are courteous and helpful.	4.40	6	Respect and social inclusion
Item B11: All city areas and services are accessible by public transport, with good connections.	4.39	7	Transportation
Item B15: Vehicles are clean, well-maintained, accessible, not overcrowded and have priority seating. Passengers give the priority seats to the people who in needed.	4.38	8	Transportation
Item A5: Outdoor safety is promoted by good street lighting and police patrols.	4.36	9	Outdoor spaces and buildings
Item A2: Green spaces and outdoor seating are sufficient in number, well-maintained and safe.	4.35	10	Outdoor spaces and buildings
<i>Ten lowest-rated items</i>			
Item E33: Different services and products to suit varying needs and preferences are provided.	3.58	44	Respect and social inclusion
Item F41: Age discrimination is forbidden in the hiring, retention, promotion and training of employees.	3.54	45	Civic participation and employment
Item C24: Home modification options and supplies are available and affordable, and providers understand the needs of older people.	3.48	46	Housing
Item H52: Community emergency planning takes into account the vulnerabilities and capacities of older people.	3.46	47	Community support and health services
Item C25: Sufficient and affordable housing for frail and disabled older people, with appropriate services, is provided locally.	3.45	48	Housing
Item E32: Older people are regularly consulted by different services on how to serve them better.	3.42	49	Respect and social inclusion
Item F40: A range of flexible and appropriately paid opportunities for older people to work is promoted.	3.33	50	Civic participation and employment
Item E35: Schools provide opportunities to learn about ageing and older people, and involve older people in school activities.	3.31	51	Respect and social inclusion
Item A7: Special customer service arrangements are provided, such as separate queues or service counters for older people.	3.17	52	Outdoor spaces and buildings
Item H53: There are sufficient and accessible burial sites (including niche).	2.38	53	Community support and health services

3.1.3 Mean scores of the Age-friendly City domains in North District

The mean AFC domain scores varied across the eight domains, from (i) outdoor spaces and buildings (4.01 ± 0.76 , 95% CI: 3.94-4.08), (ii) transportation (4.24 ± 0.78 , 95% CI: 4.17-4.31), (iii) housing (3.75 ± 1.01 , 95% CI: 3.66-3.84), (iv) social participation (4.03 ± 0.99 , 95% CI: 3.94-4.12), (v) respect and social inclusion (3.84 ± 0.88 , 95% CI: 3.76-3.92), (vi) civic participation and employment (3.63 ± 0.97 , 95% CI: 3.54-3.72), (vii) communication and information (3.93 ± 0.84 , 95% CI: 3.86-4.00), to (viii) community support and health services (3.56 ± 0.88 , 95% CI: 3.48-3.64). The mean score of the transportation domain ranked significantly higher at the top; whilst the civic participation and employment, and community support and health services domains scored the lowest in North District (Figure 3.1-2).

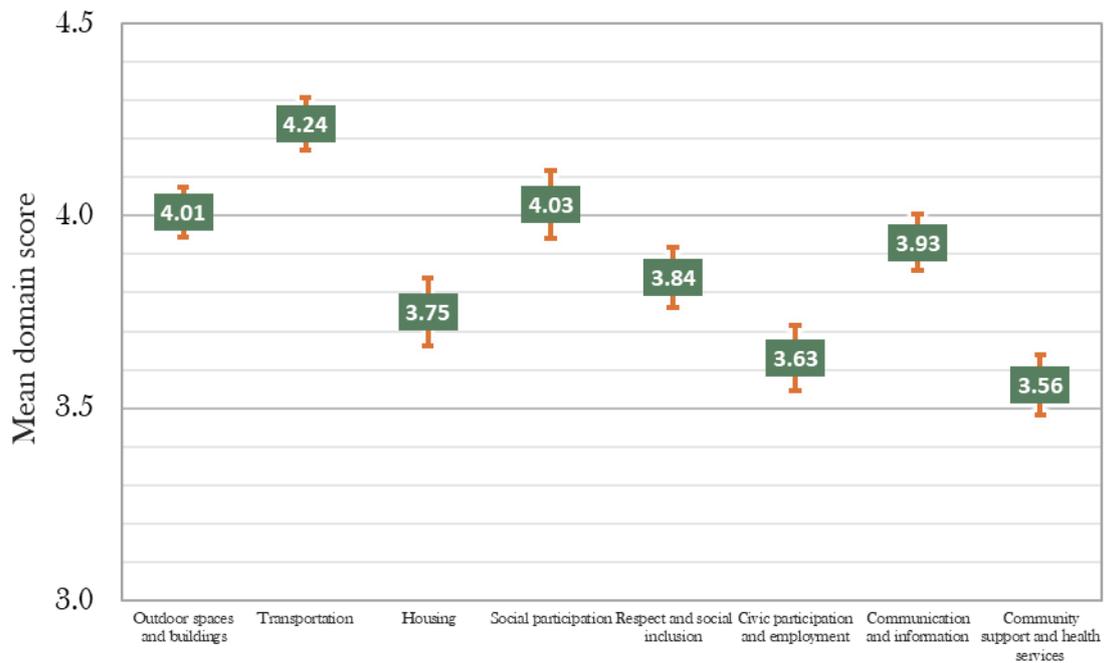


Figure 3.1-2. Mean scores and confidence intervals of the eight Age-friendly City domains.

3.1.4 Mean scores of the Sense of Community in North District

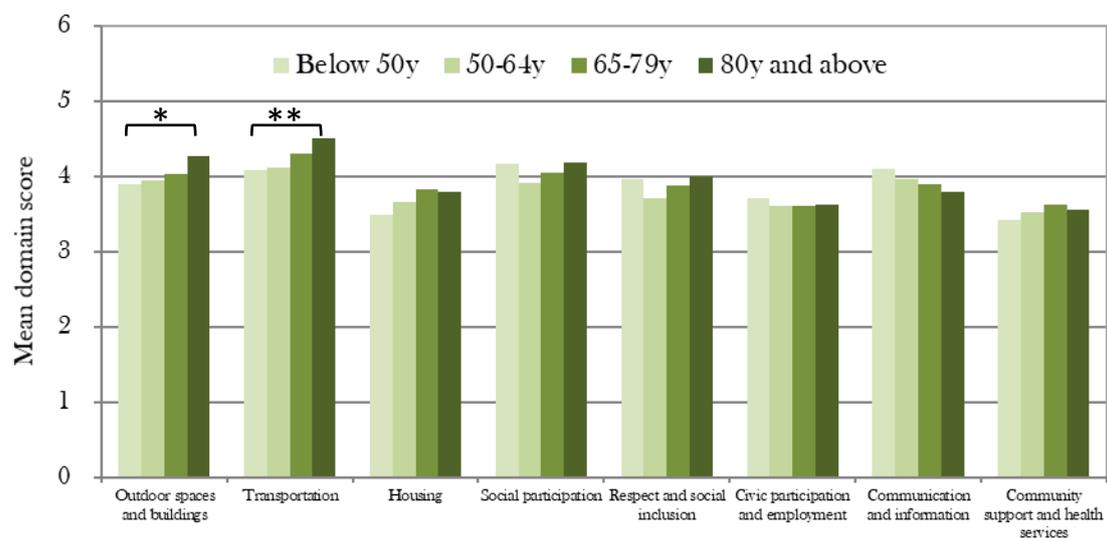
Table 3.1-3 shows the overall SOC and its four component scores in North District. Each component has a score ranging from 2 to 10, and the overall score ranges from 8 to 40. North District has a mean score of SOC of 29.71 ± 4.70 . Analyzed by component, the sense of group membership was the strongest (8.01 ± 1.49), followed by shared emotional connection (7.82 ± 1.48), need fulfilment (6.95 ± 1.79), and influence (6.91 ± 1.52).

Table 3.1-3. Mean scores of sense of community and the major components in North District

SOC dimension	Mean	Std. Deviation
Need fulfilment	6.95	1.79
Group membership	8.01	1.49
Influence	6.91	1.52
Emotional connection	7.82	1.48
Total score	29.71	4.70

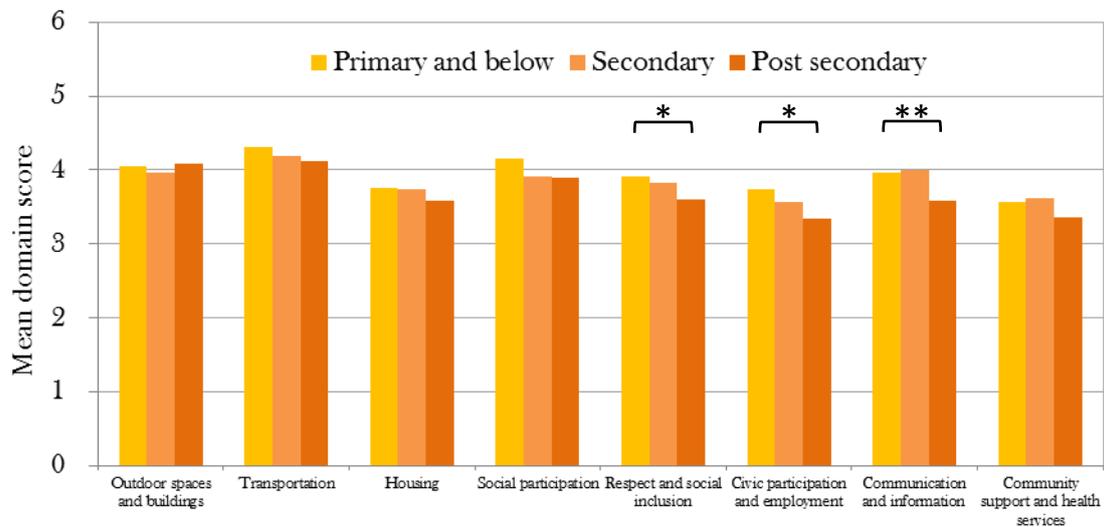
3.1.5 Mean scores of Age-friendly City domains by individual and geographical characteristics

Figure 3.1-3a - Figure 3.1-3l show the scores of AFC domains by individual and geographical characteristics in North District. After controlling for other individual characteristics, respondents at older age gave higher score on outdoor spaces and buildings, and transportation (Figure 3.1-3a). Higher scores on respect and social inclusion, civic participation and employment, and communication and information were seen among respondents of lower education (Figure 3.1-3b).



*P-trend values <.05; **P-trend values <.01, adjusted for sex, marital status, educational level, type of housing, total length of residence in the neighborhood, living arrangement, economic activity status, self-rated health, prior experience of delivering informal care to elderly, use of elderly community centres, and disposable income

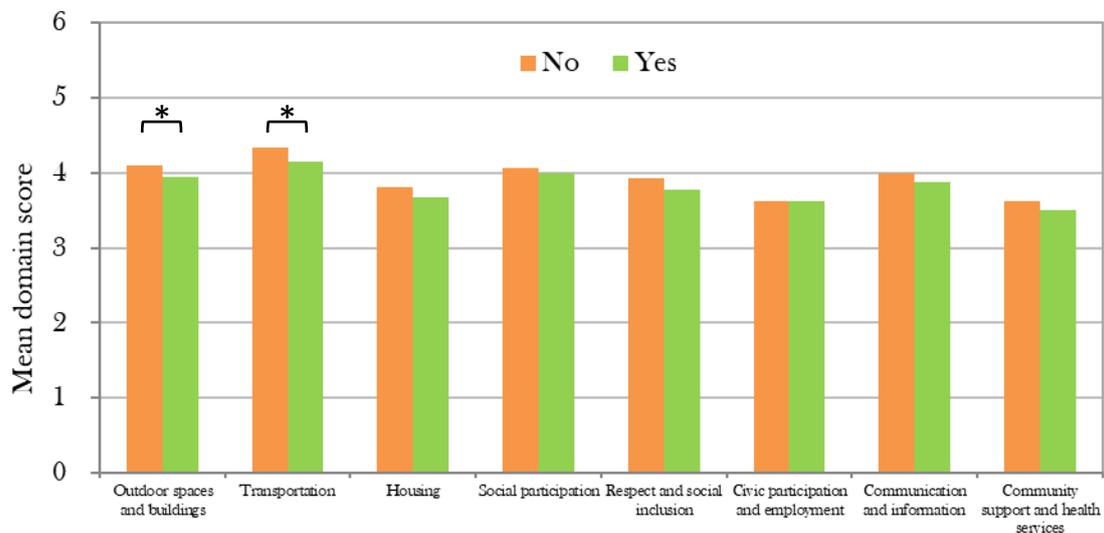
Figure 3.1-3a. Mean scores of the eight Age-friendly City domains, by age group



*P-trend values <.05; **P-trend values <.01, adjusted for age, sex, marital status, type of housing, total length of residence in the neighborhood, living arrangement, economic activity status, self-rated health, prior experience of delivering informal care to elderly, use of elderly community centres, and disposable income

Figure 3.1-3b. Mean scores of the eight Age-friendly City domains, by educational level

Respondents having experience of delivering informal care to elderly people rated outdoor spaces and buildings, and transportation poorer than those without (Figure 3.1-3c).

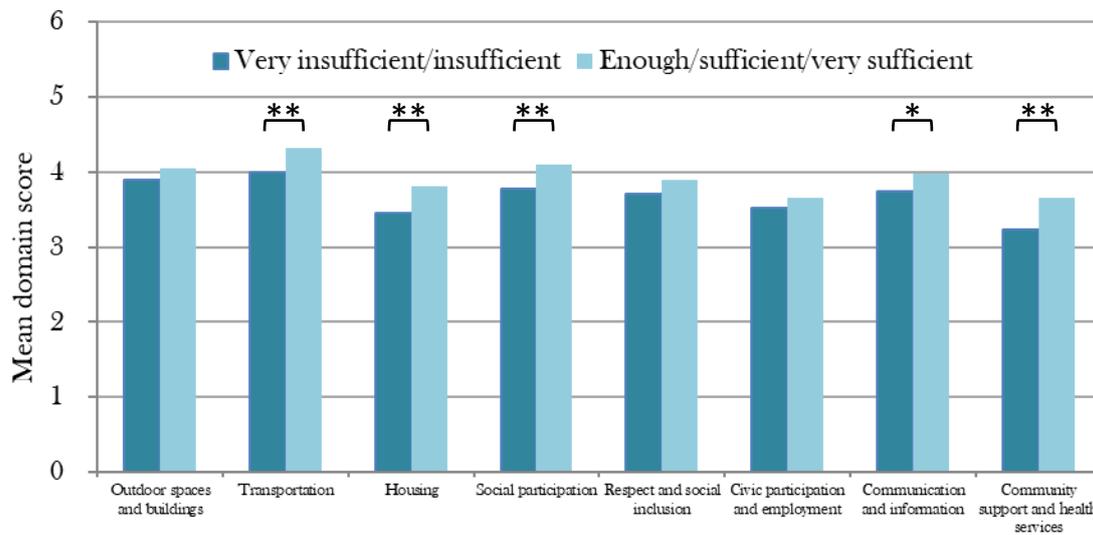


*P values <.05, adjusted for age, marital status, educational level, type of housing, total length of residence in the neighborhood, living arrangement, economic activity status, self-rated health, use of elderly community centres, and disposable income

Figure 3.1-3c Mean scores of the eight Age-friendly City domains, by experience of delivering informal care to the elderly

In terms of finance, those who had sufficient fund for daily expense gave higher scores on most of the AFC domains, except for outdoor spaces and buildings, respect and social inclusion, and civic participation and employment in which the difference of

score was insignificant compared to those having poorer financial capacity (Figure 3.1-3d).



*P values <.05; **P values <.01, adjusted for age, sex, marital status, educational level, type of housing, total length of residence in the neighborhood, living arrangement, economic activity status, self-rated health, prior experience of delivering informal care to elderly, and use of elderly community centres

Figure 3.1-3d. Mean scores of the eight Age-friendly City domains, by disposable income

Other individual characteristics such as sex, marital status, type of housing, living arrangement, economic activity status, use of elderly centres, and self-rated health did not show significant difference between subgroups (Figure 3.1-3e - Figure 3.1-3k).

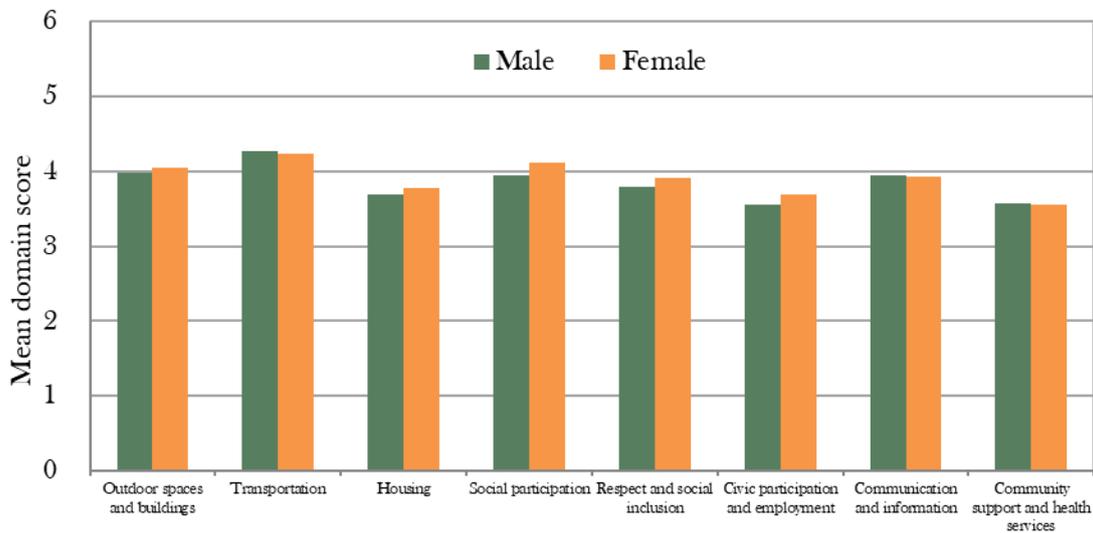


Figure 3.1-3e. Mean scores of the eight Age-friendly City domains, by sex

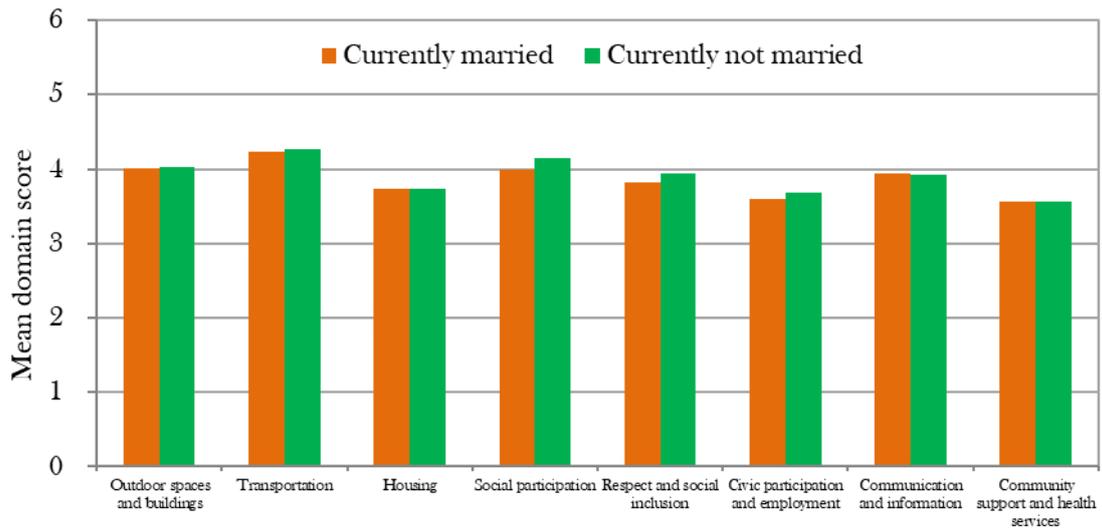


Figure 3.1-3f. Mean scores of the eight Age-friendly City domains, by marital status

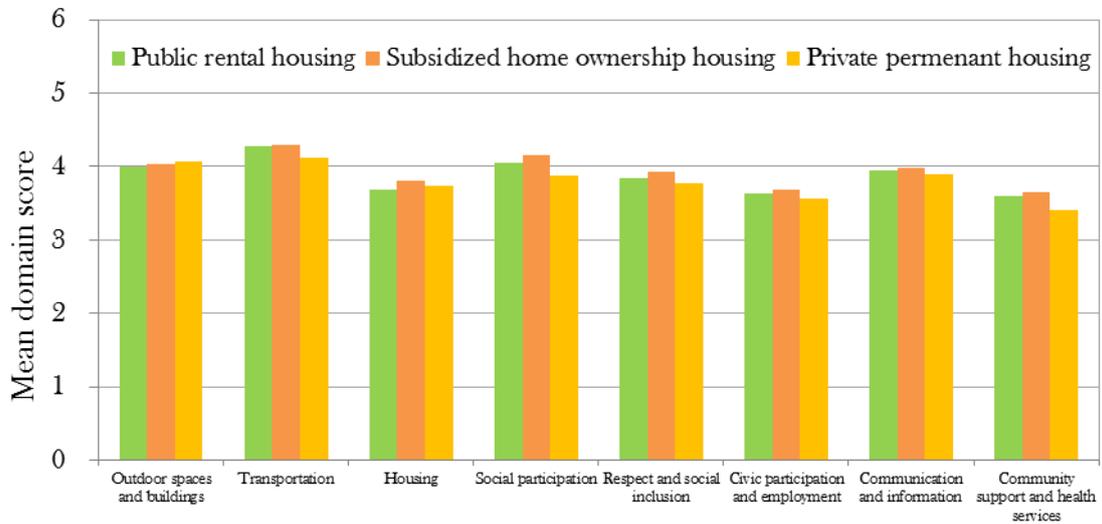


Figure 3.1-3g. Mean scores of the eight Age-friendly City domains, by housing type

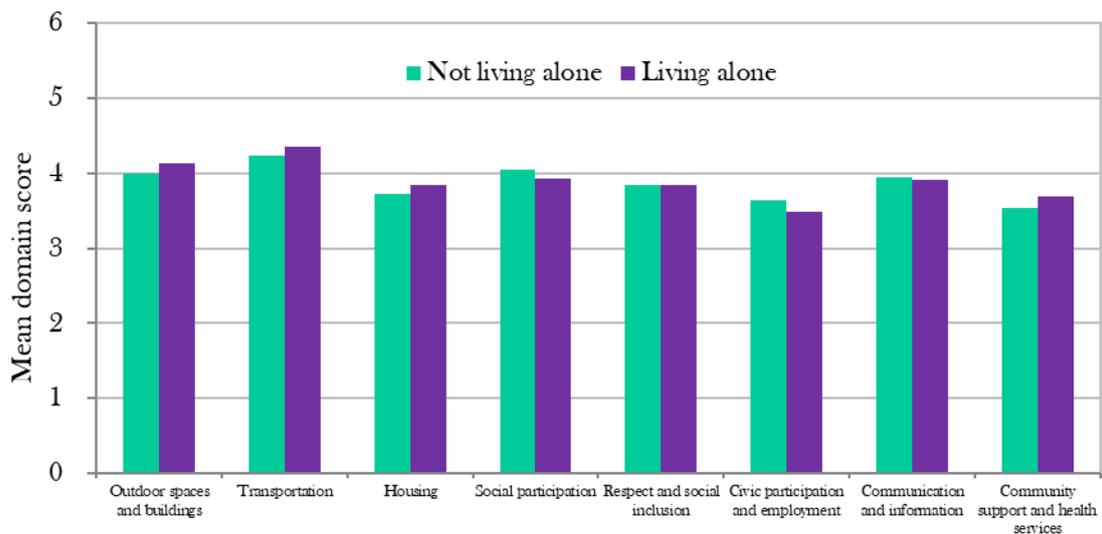


Figure 3.1-3h. Mean scores of the eight Age-friendly City domains, by living arrangement

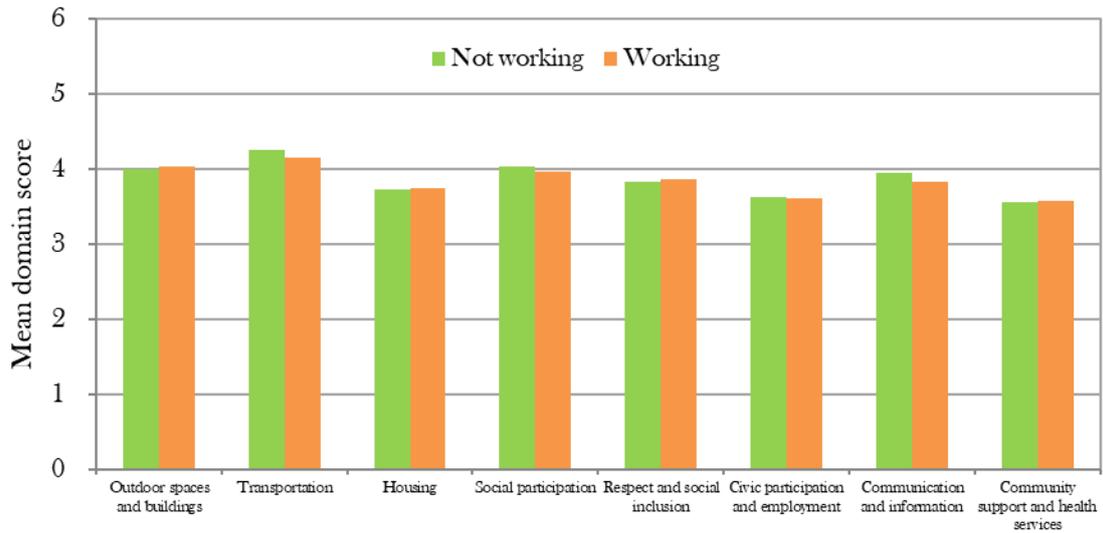


Figure 3.1-3i. Mean scores of the eight Age-friendly City domains, by economic activity status

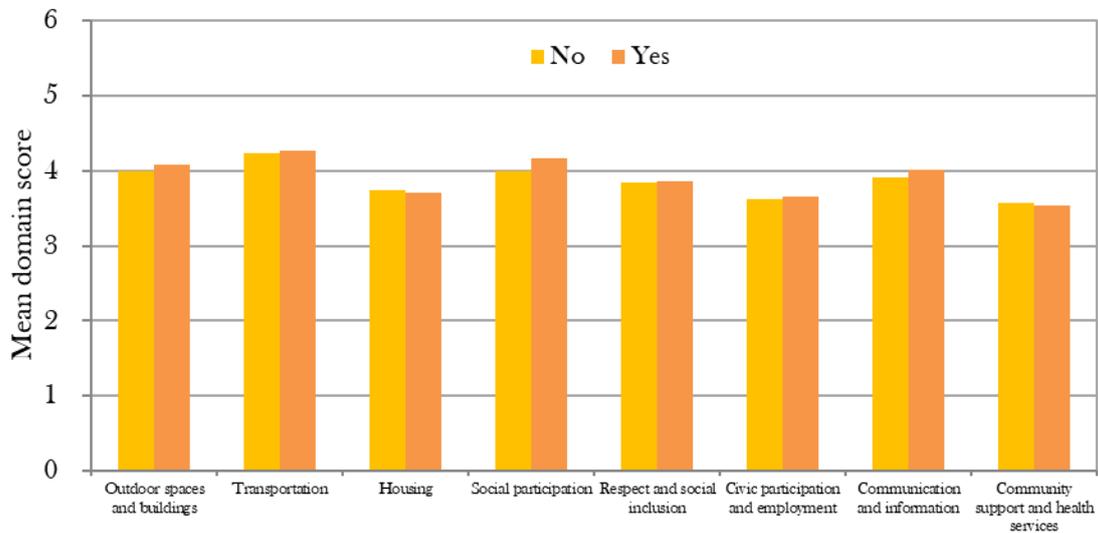


Figure 3.1-3j. Mean scores of the eight Age-friendly City domains, by use of elderly centres

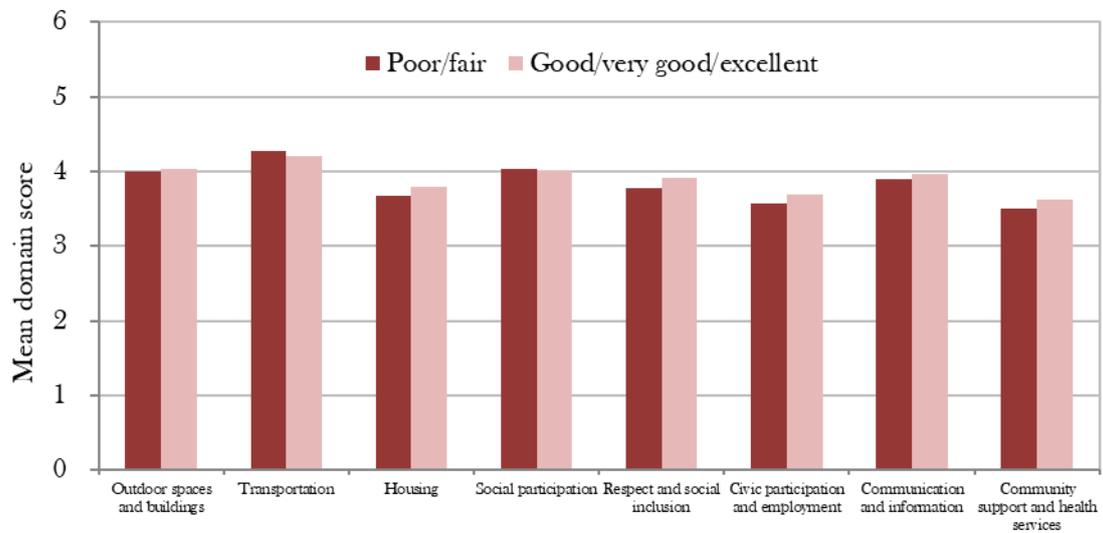


Figure 3.1-3k. Mean scores of the eight Age-friendly City domains, by self-rated health

Analyzed by region, there was no significant variation of AFC scores across Sheung Shui, Fanling, and Sha Tau Kok/Ta Kwu Ling, except in community support and health services domain where Fanling respondents tended to give significant higher scores than those living in Sha Tau Kok/Ta Kwu Ling (adjusted mean: 3.66 vs 3.29, $p=0.04$), after controlling for their individual characteristics (Figure 3.1-3l).

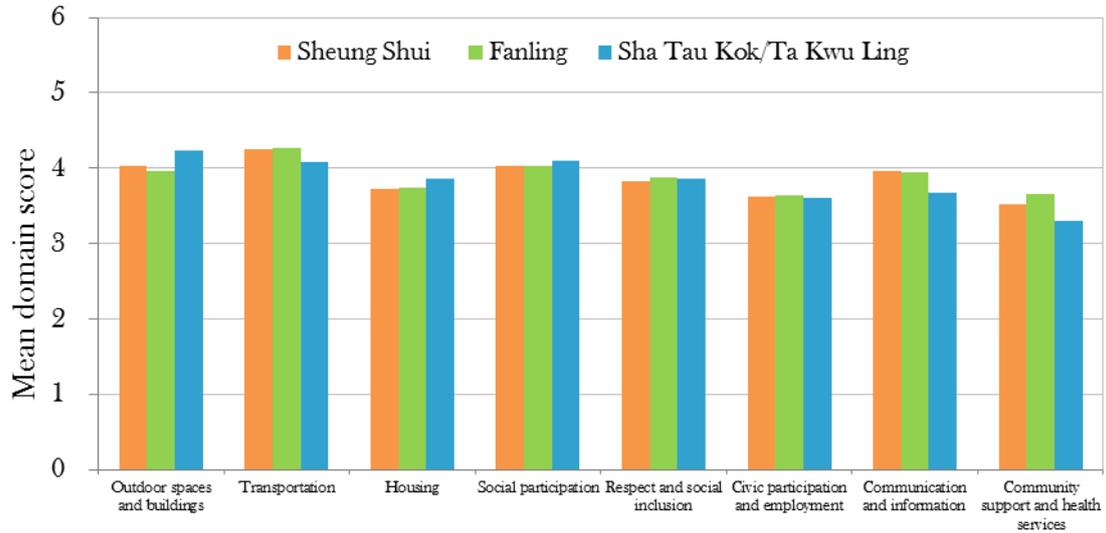


Figure 3.1-3l. Mean scores of the eight Age-friendly City domains, by sub-area

3.2 Qualitative assessment

3.2.1 Socio-demographic characteristics of the focus group participants

Five focus groups were conducted in North District between June and August. Residents of different age groups living in public, subsidized and private housing in North District were recruited. Table 3.2-1 summarizes the area and group characteristics represented in the five focus groups. The focus group interviews enabled the participants to discuss and provide their views in detail on the eight domains of an AFC set out by the WHO.

Table 3.2-1. Socio-demographic characteristics of focus groups participants

Group	1	2	3	4	5
<i>Area Characteristics</i>					
	天平東 Tin Ping East	沙打 Sha Tau Kok	清河 Ching Ho	欣盛 Yan Shing	粉嶺市 Fanling Town
Constituency area					
SVI band	II	IV	IV	III	III
<i>Group characteristics</i>					
Group size	10	11	16	8	4
Age group, year (mean, ±SD)	50-64 (59.6,±4.81)	≥80 (85.1,±4.93)	≥65 (76.4,±6.44)	≥65 (73.9, ±5.30)	18-49 (25.5,±7.05)
Female, n (%)	8 (80.0%)	11 (100.0%)	11 (68.8%)	5 (62.5%)	4 (100.0%)
Retirees, n (%)	5 (50.0%)	7 (63.6%)	13 (81.3%)	6 (75.0%)	0 (0.0%)
Good self-rated health, n (%)	5 (50.0%)	2 (18.2%)	5 (31.3%)	1 (12.5%)	3 (75.0%)
Secondary education and above, n (%)	8 (80.0%)	0 (0.0%)	6 (37.5%)	3 (37.5%)	4 (100.0%)
Major type of housing represented	Private	Public	Public	Public & Subsidized	Private
Owner-occupier, n (%)	8 (80.0%)	0 (0.0%)	0 (0.0%)	3 (37.5%)	1 (25.0%)
Living alone, n (%)	0 (0.0%)	7 (63.6%)	8 (50.0%)	2 (25.0%)	2 (50.0%)
Experience of delivering informal care to elderly, n (%)	7 (70.0%)	3 (27.3%)	6 (37.5%)	6 (75.0%)	1 (25.0%)

3.2.2 Age-friendliness of North District by domain

i. Outdoor spaces and buildings

Table 3.2-2. Advantages and barriers perceived by participants in outdoor spaces and buildings

Advantages	<ul style="list-style-type: none">✓ Spaciousness of outdoor areas for hiking and exercise✓ Closeness to open space and parks
Barriers	<ul style="list-style-type: none">✗ Inadequate barrier-free facilities✗ Lack of shelter and seat in outdoor areas

Shelter and seats in outdoor areas

The participants perceived the spaciousness of outdoor areas in North District as an age-friendly advantage. They commented that the district was good for hiking and doing exercise, especially along the Ng Tung River (梧桐河). Parks were also close to residential areas. However, many participants indicated that the number of seats in outdoor areas was inadequate, and most of them were without shelter. Therefore, most of the elders would stay in the public libraries or restaurants with air-conditioners rather than staying outdoors during hot summer. This made the libraries and restaurants extremely crowded in summer. Many elders enjoyed doing exercise and having social gathering in the outdoor areas. However, due to lack of sheltered open space, they could not find place to do so in rainy days. Some of them chose to exercise under footbridges. The participants suggested setting up more pavilions and sheltered seats in open space, to enable the elderly to have social gathering and activities under sunny and rainy days.

Barrier-free facilities

Some of the participants reported that the property management of their estates started to install elevators in the footbridges connecting to the residential areas, such as Fanling Centre and Sheung Shui town centre. It was convenient for the elderly in particular the wheelchair users. However, some participants commented that facilities for wheelchair users were not user-friendly. They pointed out that ramps and automatic doors were inadequate in the shopping malls at Fanling Centre (粉嶺中心) and Avon Park (碧湖花園), resulting that wheelchair users had to take a longer distance to access the shopping malls. The participants of Yan Shing Court (欣盛苑), Yung Shing Court (雍

盛苑) and Cheong Shing Court (昌盛苑) commented on the poor paving of the pedestrian roads and inadequate non-slip tiles and handrails would easily make elders fall down during rainy days.

Facilities and maintenance of open spaces

Residents in North District enjoyed the spaciousness of outdoor areas for exercise and social gathering. However, many participants commented that the facilities in the open spaces should be improved. The participants in Ching Ho Estate (清河邨) strongly requested to have public washrooms in the open spaces. There was only one public washroom at the entrance of the Estate, which was inconvenient and inadequate for the elderly. The participants of Yan Shing Court, Yung Shing Court and Cheong Shing Court suggested improving the cleanliness of the open spaces in their estates. They remarked that many people left their litter, cigarette ends and dog mess in the open space. There were also problems of dropping objects from height and snakes near the hill side, affecting the elderly to use the open spaces for social gathering and activities. Other participants raised that the sport facilities and water dispensers were inadequate in the outdoor areas. They suggested setting up more water dispensers along Ng Tung Rivers, where many elders enjoyed walking along the River as exercise.

ii. Transportation

Table 3.2-3. Advantages and barriers perceived by participants in transportation

Advantages	<ul style="list-style-type: none"> ✓ \$2 public transport fare for elderly aged 65y and above ✓ Sufficient public transport network ✓ Helpful bus drivers to the elders and disabled people
Barriers	<ul style="list-style-type: none"> ✗ Expensive fares for passenger aged 60-64y ✗ Inadequate intra-district transport connection ✗ Indirect bus services and long travelling time to other districts

Accessibility of public transport

Most of the participants aged 65y and above appreciated the \$2 public transport scheme “Government Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities”. The participants were also satisfied with the choice

of transportation and public transport network as they could choose to take MTR, bus or minibus to other districts with low transport fares. On the other hand, some participants living in Luen Wo Hui (聯和墟) and Yan Shing Court in Fanling felt that the intra-district transportation in the district was insufficient. They had to take buses or minibuses to MTR stations and they had to wait for a long time especially during the peak hours. Some participants also commented that the travelling time by bus to other districts was very long since the buses had many stops in Fanling and Sheung Shui before accessing the highways to other districts. Therefore, most of the residents would prefer taking MTR to other districts, which was not preferred by the elderly as they had to transit to the MTR on which it was usually overcrowded. The transportation cost was perceived as expensive for the retirees aged 60-64y who were not yet eligible to enjoy the \$2 public transport scheme. The transport cost would be over \$20 for a single journey from the North District to Hong Kong Island. The participants in this age group indicated that they seldom travelled to Kowloon or Hong Kong Island due to high transportation cost. The participants suggested extending concession fares coverage to passengers aged between 60-64y.

Transportation for the elderly and disabled people

Although most of the participants had good comments on the behavior of bus drivers for helping the elders and disabled people to get onto the bus, they perceived that the minibus services as not very age-friendly. The doors of the minibus were not big enough for wheelchairs and the stairs made the carers difficult to lift the wheelchair onto the minibus. The participants also commented that most of the minibus drivers were not willing to wait for the elderly people. The participants also indicated that the bus service to North District Hospital was insufficient. There was only one minibus and one bus route travelling between Fanling and North District Hospital and they had to wait for a long time for the services.

Facilities of bus /minibus stops

Most of the participants aged 65y and above expressed that most of the bus / minibus stops did not have seats. This was challenging for the elders especially when the waiting time for some services was long. They also reported that the size of the information sheets at the bus stops was small, which was difficult for the elders to read and find out

the information. They appreciated the “Real-time Bus Service Information Display Panel” installed at the bus stops outside Fanling MTR station. It showed clearly the route information of the buses and the arrival time of the next bus. They hoped that these panels could be installed at other bus stops.

iii. Housing

Table 3.2-4 Advantages and barriers perceived by participants in Housing

Advantages	<ul style="list-style-type: none"> ✓ Affordable housing with different choices of housing among public, subsidized and private housings ✓ Adequate interior space for movement ✓ Adequate maintenance service (public housing)
Barriers	<ul style="list-style-type: none"> ✗ Lack of information and choice of home maintenances service (private housing) ✗ Lack of wet market and service in local community

Housing conditions

The participants perceived that the housing in North District as affordable when compared to that in other districts. Although most participants agreed that there were choices of housing between public, subsidized and private housings in the district, some of them expressed that it was difficult for the sandwich class to apply for subsidized housing and they had to pay for high rent in private housing. The participants also perceived that the housing density was acceptable, as the population was relatively less dense than the urban areas, so their flats were more spacious with enough interior space for movement. However, the participants also became aware of the housing development in the district as the population was increasing. They worried that the housing conditions would deteriorate if more houses were built that would affect the quietness and views of their existing living areas.

Home maintenance services

Participants living in public housing such as Ching Ho Estate and Sha Tau Kok Chuen (沙頭角邨) appreciated the home maintenance services provided by the estate management offices. The staff would help install handrails in toilet for the residents in

Sha Tau Kok Chuen and replace the drying rack to meet the standard for the residents in Ching Ho Estate without fees. However, the participants in private housing perceived the maintenance service as inadequate. The participants living in Luen Wo Hui expressed that there was problem of leakage in their buildings, but it was difficult to find maintenance service.

Accessibility of community services

Most of the participants agreed that it was convenient to access community services such as public libraries, sport centres and shops for necessary goods. However, many participants expressed that there was lack of wet market in their communities. Residents in Sha Tau Kok Chuen, Ching Ho Estate, Yan Shing Court and Fanling Centre reported that there were only supermarkets in their communities and they had to travel for a long distance to buy fresh meats in wet markets in Luen Wo Hui Market or Shek Wu Hui (石湖墟) Market.

iv. Social participation

Table 3.2-5 Advantages and barriers perceived by participants in Social Participation

Advantages	✓ Adequate outdoor spaces for social activities
Barriers	<ul style="list-style-type: none"> ✗ Insufficient indoor venue for social activities ✗ Limited availability of social activities

Venues for social activities

The participants perceived the outdoor spaces for social activities such as dancing and Tai Chi were sufficient in North District due to the relatively low density of the population. On the other hand, they found that the indoor venues for social activities were limited, particularly in private housing. The participants living in private housing in Luen Wu Hui pointed out that there was only one community hall in their neighborhood, which could not meet the need. Some of the indoor venues were not large enough for social activities. The residents in Ching Ho Estate expressed that the social services centre operated by NGO was too small that they could not even find space to read newspaper and wheelchair users were unable to enter the centre due to the limited space.

Availability of social activities

Except for the participants in Sha Tau Kok, most of the participants expressed that the social activities in their communities were limited. The participants pointed out that there was one elderly centre in Luen Wu Hui, but for Ching Ho Estate and Yan Shing Court, there was no elderly centre in the communities. The participants observed that there were many social services centres in their communities but there were limited activities for elderly as the centres were designated to various targeted groups. The participants living in Ching Ho Estate and Yan Shing Court expressed that most of the elderly people would sit in the open area to read newspaper or play chess but did not have other activities, so they strongly requested to set up elderly centres in their communities. On the other hand, the participants aged below 50y indicated that most of the activities in their private housing were for kids and elderly people, they were unable to find any activities for themselves.

v. Respect and social inclusion

Table 3.2-6 Advantages and barriers perceived by participants in respect and social inclusion

Advantages	✓ Basic sense of respect towards elderly ✓ Sense of community
Barriers	✗ Lack of opportunity to express needs and views

Sense of respect

Most of the participants living in public and private housing agreed that the SOC was good. They would take care of their neighbours by looking after their kids or pay attention to their Tai Chi classmates who felt sick. They also found that the general public showed basic sense of respect towards the elders such as young people offering their seats on public transport and security guards helping wheelchair users. Some of the participants expressed that people would be gentler towards the elderly people who walked slowly or used wheelchairs.

Social inclusion

Although some of the participants expressed that they could talk to the district councilors about their problems or views on the community, they found that the

channel to express their views was limited. On the other hand, some of the participants indicated that they were satisfied with their living environment so they did not need to complain or express their views actively.

vi. Civic participation and employment

Table 3.2-7 Advantages and barriers perceived by participants in civic participation and employment

Advantages	✓ Voluntary work available
Barriers	✗ Limited employment opportunity for those aged 65y and above

Voluntary work

The participants agreed that there were various volunteer activities in community centres organized by NGOs. There were also volunteer activities such as home visits and cooking classes to promote for intergenerational exchange between with young people and the elderly. However, some of them expressed that there were not many voluntary opportunities for the elderly especially when they were getting older.

Employment

Most of the participants expressed the lack of employment opportunity for aged above 65y as the employers preferred employing younger people. Some of the participants aged above 65y said they had tried to find jobs but could only find part-time or temporary jobs. The young participants also mentioned that as most of the job postings were disseminated through emails or on job hunting websites, which would be a barrier for the elders to find jobs. They also mentioned some suggestions to encourage employment of senior citizens. For instance, Labour Department could set up a special corner for the people aged 55y and above to provide job matching service to them. NGOs could employ senior citizens with special skills as instructors of workshops to teach sports, cooking or even management skills as many of them were retired from managerial position. NGOs could also make reference from examples in Taiwan and Japan by employing senior citizens as local tour guides to introduce the local community to tourists or help new immigrants get familiar with the community by showing them where to buy necessary goods and how to access community services.

vii. Communication and information

Table 3.2-8 Advantages and barriers perceived by participants in communication and information

Advantages	✓ Distribution of information through different channels in public and subsidized housing
Barriers	✗ Limited information received in private housing

Distribution of information

The participants living in public and subsidized housing agreed that they could obtain the information of their community easily from the notice posted in the elevators or newsletters in their mailboxes. For the residents in Sha Tau Kok Chuen, they could get the information from the community centre as it was close to their living places. Most of the participants also agreed that personal communication was the most efficient way to collect information and they could be informed easily through their neighbours, friends or social workers. For the participants living in private housing such as Fanling Centre or Luen Wu Hui, they expressed that they did not receive any information about community services and activities in the district, as the notice boards in their buildings only displayed information of the estates but nothing about the district. Some of the participants living in private housing even did not notice a community hall nearby. It was their first time to use the community hall when they joined the focus group.

Media for communication

Some of the participants noted that the notice boards in their buildings were small. The font size on the notices was too small and unattractive to the residents. They suggested that a LCD monitor could be used to display the information so that the message would be large enough and more attractive. Some of the participants also noted that their estates had Facebook pages, and management office and residents could use the platform to distribute information. Some of the participants suggested distributing information through mobile apps, but some of the elders may need to be taught by family members or social workers as they were not familiar with these digital platforms.

viii. Community support and health services

Table 3.2-9. Advantages and barriers perceived by participants in community support and health services

Advantages	<ul style="list-style-type: none"> ✓ Health services available in the community ✓ Affordable health services for those aged 65y or above ✓ Basic community support services available to person in need
Barriers	<ul style="list-style-type: none"> ✗ Insufficient health service in remote areas ✗ User-unfriendliness of automated telephone booking system ✗ Limited specialist out-patient service ✗ Insufficient community support services

Health services

Most of the participants agreed that clinics were available and affordable in their nearby communities. Besides the general out-patient clinics, Chinese medicine mobile clinic services were also provided by NGOs in many residential areas. The introduction of elderly health care vouchers was appreciated by the elderly, especially when the age limit was lowered to age 65y. Some of the participants expressed that the automated telephone booking system of general out-patient clinics was difficult to use and the waiting time was long. Therefore they could not make appointment in advance and had to wait for a long time for out-patient services. Some of the participants chose to visit private clinics to avoid the long waiting time despite higher consultation fees. The participants also pointed out that there were inadequate specialist out-patient clinic services in North District, so that they had to go to Kowloon for specialist care. The elders living in Sha Tau Kok pointed out that the health service was insufficient in their community. In Sha Tau Kok, there is only one clinic, viz. the Sha Tau Kok General Out-patient Clinic which only operated 4 days a week with limited consultation hours (half-day on Monday, Tuesday, Thursday and Saturday, closed on Wednesday and Sunday). Elders in need of service at night or during Wednesday and Sunday would call emergency service and attend emergency department at the North District Hospital. The elders in Sha Tau Kok also expressed that they had to take 10 minutes of public transport or 20 minutes walking to reach the out-patient clinic. It would be a big barrier for the elders who have problems with walking.

Community support

The participants pointed out that meal delivery services were available for elders living alone but required referral by social workers to prove limitations of daily living. Residents in Sha Tau Kok Chuen appreciated the home care services provided by NGOs such as the home cleaning service. Most of them also installed Call and Care Services at home. However, the participants living in private housing found that they did not receive any information about the community support services. They suggested that NGOs could employ housewives or young-old to provide meal delivery service or cleaning service to elders living nearby such that they could also earn money and reduce the workload of NGOs. Some of the participants also noted that many old couples were living together. As one of them had to take care of their spouse, the healthier one could not join social activities. These housewives / young-old could provide home care services for these elders for a few hours when necessary, which could provide employment opportunities and encourage the elders to join social activities.



4. Recommendation

The baseline assessment reflected an overall satisfaction of age-friendliness in North District. Among the eight AFC domains by the WHO, North District has been doing particularly well in transportation domain but less impressive in the domains of civic participation and employment, and community support and health services. The high score in transportation was contributed by the efficiency of public transportation network and the relatively low transportation cost, especially the \$2 public transport scheme enjoyed by senior citizens. The lower scores of civic participation and employment, and community support and health services reflected the increasing demand on these two aspects due to the increasing population of old age. Based on the findings of baseline assessment, recommendations to the eight domains are proposed to improve the age-friendliness of the district. It is suggested that more effort should be put on encouraging employment of senior citizens and improving the current community support and health services in the district.

4.1 Outdoor spaces and buildings

Aim: To create safe outdoor spaces with age-friendly design

- Engage elders in assessing the age-friendliness of the community, such as the need of shelters in existing community facilities, suitable locations of public washrooms, need for barrier-free facilities, sport facilities and water dispensers.
- Engage and discuss with relevant departments on providing safe pedestrian walkways separated from cycle paths in locations such as Sha Tau Kok and Luen Wo Hui.

Aim: To enhance the age-friendliness of shopping malls and community services

- Encourage local shops to provide special customer services to persons in need, e.g. priority service counters for the elders and disabled people in banks and supermarkets.
- Discuss with government departments and commercial services on strengthening barrier-free facilities connecting the residential areas to nearby shopping malls and social service, such as installing more automatic doors for wheelchair users, and installing handrails and non-slip paving tiles.

4.2 Transportation

Aim: To enhance the intra-district transport services

- Discuss with relevant stakeholders (e.g. Government departments, service operators and residents) on the needs and means to improve bus and minibuss services between MTR stations, town centres and residential areas, especially in rural villages, through increasing the service frequency and restructuring of the existing routes, etc.
- Step up dissemination of information on the enhancement of public transport services such as section fare of buses and progress on installing real-time bus arrival information display panels at covered bus stops to residents, noting that some of these services were not known to them.

Aim: To improve the transport services for frail elders

- Explore the possibility with relevant departments and potential operators of providing specialized transportation for elderly and disabled people to access social services, especially for the villagers in rural Sheung Shui, Sha Tau Kok and Ta Kwu Ling.
- Explore the possibility and priority of providing shelters and seats at bus stops, especially in rural villages where long waiting time is required.

4.3 Housing

Aim: To enhance home modification and maintenance services for frail elders

- Consider the feasibility of providing one-stop information unit on home modification options and supplies for elderly and disabled people at locality/in the district.
- Liaise with relevant stakeholders such as NGOs and companies to promote home modification services to the elders living in private housing.
- Engage and discuss with NGOs and companies on providing affordable home safety assessment for the elders living alone.

Aim: To ensure the availability of fresh food in local community

- Since the Agricultural Park will be located in Kwu Tung South, District Council can promote and encourage the residents living near Kwu Tung to purchase fresh vegetable from the farmers market in the Agricultural Park. NGOs can also explore the feasibility to cooperate with the famers there to arrange delivery services for the elders

4.4 Social participation

Aim: To capitalize on the existing venues for elders' activities

- Liaise with relevant stakeholders such as District Council and NGOs to identify the areas where elderly activities were in demand and to expand elderly service coverage where appropriate.
- Explore ways to provide more venues of indoor space for elders such as availability of rooms and halls in NGOs, school and churches during non-peak hours.

Aim: To facilitate the social participation of less visible groups

- Encourage collaboration among District Council, NGOs, private housing premises and village representatives to understand the activities of interest to elderly people, and to provide outreach activities using clubhouses in private housing premises, village committee offices or other areas available in housing estates and villages.

4.5 Respect and social inclusion

Aim: To engage students in intergenerational exchange

- Organize intergenerational activities such as photo-taking of the community, cooking competition, oral history of village life etc. with students to promote mutual understanding and respect across generations.
- Encourage NGOs to organize innovative intergenerational programmes in which elders can share their knowledge and experience to the youth, thus facilitate the building of positive image of elderly and diminish age discrimination.

Aim: To engage the elderly in building an age-friendly city

- Encourage service providers in the district to consult and listen to the views of the elders.
- Encourage the formation of elderly group to understand and express their opinions on social issues related to their daily life.

4.6 Civic participation and employment

Aim: To promote and facilitate employment for the elderly

- Provide support to NGOs or social enterprises to provide job search information and job matching services for senior citizens in places accessible to them.
- Explore the feasibility of setting up neighbourhood network in which organizations and residents in the district could provide flexible job opportunities to senior citizens who are looking for jobs.
- Liaise and discuss with government departments and NGOs on providing training to retired people to re-enter the labor market as mentor.

4.7 Communication and information

Aim: To enhance and strengthen district communication and information channels

- Encourage the setting up of notice boards in public areas of private estates to facilitate information flow to elder residents.
- Noting that the elders, in particular those living in rural villages, receive information through oral communication from their family members, relatives and neighbors, promote the use of existing social platforms (e.g. Whatsapp, Facebook) and establish new media such as mobile app to provide age-friendly information to both the elders and their family members.

4.8 Community support and health services

Aim: To empower the elders to self-manage their health

- Encourage NGOs to understand the needs of elders and provide targeted community-based programmes to enhance their physical and mental well-being.
- Explore the feasibility of setting up of information kiosk in different public venues, such as the Government Offices, community halls, public libraries or public parks, to educate elders in the district about health management and provide health check equipment such as blood pressure monitor at venue where necessary.
- Explore the feasibility of expanding the existing health care services in rural villages provided by NGOs, such as increasing the frequency of health check

services or expanding the regular health care services to the rural villages where clinic is not accessible.

Aim: To facilitate home care services through community networks

- Identify areas in the district requiring community care services and part-time domestic helpers and step up provision of information to the elders in those areas.
- Encourage NGOs to provide training on home care services to the young-old and housewives where community care services are not available (e.g. in rural villages), in order to facilitate home care services through community networks.

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Annex

The initiatives undertaken or to be taken by government departments to enhance the age-friendliness of North District

A. Department of Health

The Elderly Health Service under the Department of Health (DH), comprising 18 Elderly Health Centres (EHCs) and 18 Visiting Health Teams (VHTs), was established to enhance primary health care to elderly people living in the community.

- VHTs reach out to the community and residential care settings to provide health promotion activities for the elderly and their carers in collaboration with other elderly services providers. The aim is to increase their health awareness, the self-care ability of the elderly, and to enhance the quality of caregiving. Using the train-the-trainer approach, VHTs provide training programmes for formal carers as well as informal carers (such as family members, domestic helper and volunteers) to enhance their health knowledge and skills in caring for the elderly. All services provided by the VHTs are free of charge. VHTs also conduct media interviews, publish books, news articles, and videos on various health topics to raise awareness and promotion of caring skills.
- To support ageing in place, effective maintenance of health and functional ability are crucial. To this end, the EHS has geared up its efforts in health promotion, targeting at the elderly and their caregivers. Focus is put on enhancing elders' self-care ability, preserving their functional ability, and managing health risks, as well as equipping formal and informal caregivers with elderly caring skills. DH will also provide priority access to our health assessment service in Elderly Health Centres for those needy elders. Individual programme details as follows:
 - Community carer capacity building programme - VHTs will collaborate with NGOs by training and supporting their staff and volunteers responsible for delivering home-based services to elders (e.g. elder-sitting services). Two pilot projects based on this mode of collaboration were launched with the Senior Citizen Home Safety Association and the Hong Kong Red Cross since April 2017 and September 2017 respectively.

- Elderly care training for foreign domestic helpers - To enhance the capacity of foreign domestic helpers (FDHs) in taking care of elderly persons, EHS is collaborating with SWD and NGOs to provide FDHs with training on elderly care. A pilot programme will be started in 2018.
- “Estate-based” ageing in place programmes - To support ageing in place, EHS is collaborating with the Hong Kong Housing Society (HKHS) to conduct targeted health promotion activities and self-management training for the elderly residents of around 20 public housing estates under HKHS who have specific health problems, such as diabetes, hypertension, and risk of falls. To promote exercise among these elders, staff and volunteers of the HKHS are trained by VHTs to become exercise ambassadors.
- As EHCs’ services are heavily subsidised, it is considered that priority should be given to those elders who are most in need, e.g. the hidden and needy elders. In this regard, EHS is implementing a pilot collaborative model at EHCs with comparatively shorter waiting lists (Kwai Tsing EHC, Nam Shan EHC, and Shau Kei Wan EHC and Lek Yuen) under which the EHCs concerned will collaborate with relevant NGOs which are experienced in reaching out to "hard-to-reach" elders. Priority is given to serve the elders identified and referred by the social workers of these NGOs to receive primary healthcare services at the EHCs.

B. Food and Environmental Hygiene Department

In response to the Equal Opportunities Commission (EOC) report released in 2010 concerning the accessibility in publicly accessible premises including the public toilets managed by FEHD, FEHD has carried out a number of improvement works to upgrade the barrier-free access and facilities of their public toilets in accordance with requirements under the "Design Manual - Barrier Free Access" issued by Buildings Department, other legislation and codes of practice relating to barrier free access. These include the provision of accessible urinal and accessible toilet to assist the elderly and health impaired person in newly-built/refurbished public toilets subject to site constraint and space availability. Moreover, in response to Policy Address 2016 for providing larger toilet compartments for priority use by the elderly (priority compartments), FEHD will also provide priority compartments in newly-built/refurbished public toilets subject to site condition and space availability and where four or more toilet compartments in male or female toilets are provided, the toilet compartment nearest to the entrance of both toilets will be designated for priority use by the elderly.

All public toilets managed by FEHD are provided with non-slippery floor tiles. Besides, the majority of the public toilets in North District has already been equipped with hand-grip rails and infra-red sensor tape to facilitate the elderly after the upgrading works.

C. Leisure and Cultural Services Department

Name of facilities/activities/services	Nature/content	Duration of facilities/activities /services	Location	Completion date
1. Providing priority seats for the elderly	Around 40 priority seats for the elderly have been provided in the lobbies/ auditorium of swimming pools and sport centres	-	Lung Sum Avenue Sports Centre 、 Tin Ping Sports Centre 、 Po Wing Road Sports Centre 、 Luen Wo Hui Sports Centre 、 Wo Hing Sports Centre 、 Fanling Swimming Pool and Sheung Shui Swimming Pool	12/2016
2. Sitting-out area at Cheung Lek Village, Sheung Shui (Recently built)	Two sets of elderly fitness facilities and benches with arbours have been installed	8 months	Sitting-out area at Cheung Lek Village, Sheung Shui	07/2017
3. Providing toilets and changing rooms at Sheung Shui Garden No. 1	Installation of automatic sensor water taps	6 months	Sheung Shui Garden No. 1	07/2017
4. Carnival for the Elderly	Carnival	3 hours/ Carnival	North District Sports Ground 、 Sheung Shui Garden No. 1	06/08/2017 and 18/11/2017

D. Transport Department

- Majority of the public transport services in the North District have participated in the "Government Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities", elderly in North District basically can enjoy lower public transport fare.
- KMB has been working to install more benches and display panels for bus arrival time in North District under government subsidy scheme.
- KMB has deployed low-floor buses for buses serving North District Hospital.

Appendix



計劃夥伴 Project Partner:



策劃及捐助 Initiated and funded by:



問卷編號： _____

問卷完整性： 部分完成 整份完成

調查方式： 面談 電話訪問 自行填寫

調查日期：	調查地點：	問卷員編號：
覆檢員編號：	數據輸入員編號 (首輪)：	數據輸入員編號 (次輪)：

「賽馬會齡活城市計劃」問卷調查

篩選問題：

1. 年齡： _____

2. 性別：男 / 女

3. 於現址連續居住六個月或以上：是 / 否

4. 住宅地區

- (1) 油尖旺 (2) 九龍城 (3) 黃大仙 (4) 深水埗 (5) 觀塘
 (6) 西貢 (7) 荃灣 (8) 葵青 (9) 沙田 (10) 大埔
 (11) 元朗 (12) 屯門 (13) 北區 (14) 中西區 (15) 灣仔
 (16) 南區 (17) 東區 (18) 離島

拒絕人次 []	重覆接觸人次 []	非合適受訪者 []						
		年齡						
		地區						



計劃夥伴 Project Partner:



香港中文大學
The Chinese University of Hong Kong



香港中文大學
賽馬會老年學研究所
CUHK Jockey Club Institute of Ageing

策劃及捐助 Initiated and funded by:



香港賽馬會慈善信託基金
The Hong Kong Jockey Club Charities Trust
同心 同夢 同輝 RIDING HIGH TOGETHER

賽馬會齡活城市計劃 參加者同意書

現誠邀閣下參與香港中文大學賽馬會老年學研究所的「賽馬會齡活城市計劃」，該計劃由香港賽馬會慈善信託基金主導，聯同本地四間老年學研究單位：香港中文大學賽馬會老年學研究所、香港大學秀圃老年研究中心、嶺南大學亞太老年學研究中心、香港理工大學活齡學院，與社區不同持份者共建「齡活城市」，讓香港成為適合長者及不同年齡人士生活的地方。

研究目的

根據世界衛生組織的《全球長者及年齡友善城市建設指南》檢視香港各區對長者及不同年齡人士生活的方便及友善程度。

程序

您現只需完成一份有關長者及年齡友善社區的問卷（需時約半小時至一小時）。另外，我們亦會以聚焦小組的形式邀請閣下接受訪問（需時約一小時三十分至兩小時），而當中的對話內容會被錄音以作研究記錄用途，但卻不會作公開播放。

風險

是次研究並不存有已知的風險。

利益

當完成問卷後，您將獲得港幣伍拾圓正現金禮券。另外，當完成以聚焦小組形式訪問後，您亦會獲得港幣伍拾圓正現金禮券（即合共港幣壹佰元正）。您於問卷及聚焦小組訪問中所提供的寶貴資料，將有助研究長者及年齡友善的課題。

私隱

是次研究所收集的資料只供有關「賽馬會齡活城市計劃」之用，個人資料將絕對保密，除獲本研究所授權的人員外，將不會提供予其他人士。

參與及退出

參與純屬自願性質，您可隨時退出而不會對您造成負面影響。

如您對是項研究有任何查詢，請與汪先生聯絡（電話：3943 9294；地址：香港沙田中文大學康本國際學術園6樓602室；電郵：ioa@cuhk.edu.hk）。如您想知道更多有關研究參與者的權益，請聯絡香港中文大學調查及行為研究操守委員會（電話：3943 6777）。

如您明白以上內容，並願意參與是項研究，請簽署以下之同意書。

姓名：_____

簽署：_____

日期：_____

批准研究到期日：_____ 2018年12月份

葵青 - 葵興

<input type="checkbox"/> (801) 葵俊苑	(802) 光輝圍
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葵青 - 上大窩口

<input type="checkbox"/> (803) 大窩口邨 (部份): 富強樓 / 富國樓 / 富泰樓 / 富德樓 / 富華樓 / 富榮樓 / 富賢樓

葵青 - 葵涌邨北

<input type="checkbox"/> (804) 葵涌邨 (部份): 曉葵樓 / 合葵樓 / 雅葵樓 / 百葵樓 / 逸葵樓 / 映葵樓 / 旭葵樓
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葵青 - 石蔭

<input type="checkbox"/> (805) 寧峰苑

葵青 - 石籬

<input type="checkbox"/> (806) 石籬(二)邨 - 石祥樓 / 石福樓 / 石富樓 / 石禧樓 / 石廣樓 / 石偉樓 / 石榮樓 / 石欣樓 / 石怡樓 / 第 10 座 / 第 11 座

葵青 - 大白田

<input type="checkbox"/> (807) 葵星中心	<input type="checkbox"/> (808) 葵涌花園	<input type="checkbox"/> (809) 寶星中心	<input type="checkbox"/> (810) 瑞景大廈
<input type="checkbox"/> (811) 雍雅軒	<input type="checkbox"/> (812) 怡勝花園	<input type="checkbox"/> (813) 誼發大廈	834 金祿樓
835 葵豐樓	836 葵麗大廈	837 金恆樓	838 福蔭大廈
839 志昌樓			

葵青 - 華麗

<input type="checkbox"/> (814) 嘉翠園	<input type="checkbox"/> (815) 海峰花園	<input type="checkbox"/> (816) 華景山莊
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葵青 - 荔華

<input type="checkbox"/> (817) 荔欣苑

葵青 - 翠怡

<input type="checkbox"/> (818) 涌美老屋村	<input type="checkbox"/> (819) 海欣花園	<input type="checkbox"/> (820) 翠怡花園	<input type="checkbox"/> (821) 藍田村
<input type="checkbox"/> (822) 新屋村	<input type="checkbox"/> (823) 大王下村	<input type="checkbox"/> (824) 鹽田角村	

葵青 - 長青

<input type="checkbox"/> (825) 長青邨

葵青 - 長康

<input type="checkbox"/> (826) 青華苑

葵青 - 青衣南

<input type="checkbox"/> (827) 長宏邨	(828) 曉峰園	(829) 藍澄灣
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葵青 - 青發

<input type="checkbox"/> (830) 青雅苑	(831) 青泰苑	(832) 青宏苑
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北區 - 天平東

<input type="checkbox"/> (1301) 天平邨 (部份) : 天喜樓 / 天朗樓 / 天美樓	<input type="checkbox"/> (1302) 安盛苑	<input type="checkbox"/> (1303) 皇府山
<input type="checkbox"/> (1304) 綠悠軒	<input type="checkbox"/> (1305) 美景新村	<input type="checkbox"/> (1306) 馬屎埔
<input type="checkbox"/> (1308) 安國花園新邨		<input type="checkbox"/> (1307) 烏鴉落陽

北區 - 石湖墟

<input type="checkbox"/> (1309) 龍豐花園	<input type="checkbox"/> (1310) 新都廣場	<input type="checkbox"/> (1311) 海禧華庭	<input type="checkbox"/> (1312) 石湖墟
<input type="checkbox"/> (1313) 上水中心	<input type="checkbox"/> (1314) 上水名都	<input type="checkbox"/> (1315) 順欣花園	<input type="checkbox"/> (1316) 旭埔苑

北區 - 天平西

<input type="checkbox"/> (1317) 天平邨 (部份) : 天祥樓 / 天賀樓 / 天明樓 / 天怡樓
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北區 - 粉嶺市

<input type="checkbox"/> (1318) 碧湖花園	<input type="checkbox"/> (1319) 牽晴間	<input type="checkbox"/> (1320) 粉嶺樓	<input type="checkbox"/> (1321) 粉嶺中心
<input type="checkbox"/> (1322) 粉嶺圍	<input type="checkbox"/> (1323) 安樂村	<input type="checkbox"/> (1324) 掃管埔	<input type="checkbox"/> (1325) 瑞栢園
<input type="checkbox"/> (1326) 海燕花園			

北區 - 欣盛

<input type="checkbox"/> (1327) 昌盛苑	<input type="checkbox"/> (1328) 欣盛苑	<input type="checkbox"/> (1329) 雍盛苑
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北區 - 上水鄉郊

<input type="checkbox"/> (1330) 歐意花園	<input type="checkbox"/> (1331) 坑頭	<input type="checkbox"/> (1332) 河上鄉	<input type="checkbox"/> (1333) 古洞
<input type="checkbox"/> (1334) 馬草壟	<input type="checkbox"/> (1335) 大頭嶺	<input type="checkbox"/> (1336) 松柏朗	

北區 - 清河

<input type="checkbox"/> (1337) 清河邨

北區 - 彩園

<input type="checkbox"/> (1338) 彩蒲苑

北區 - 華明

<input type="checkbox"/> (1339) 華明邨

北區 - 盛福

<input type="checkbox"/> (1340) 嘉盛苑	<input type="checkbox"/> (1341) 欣翠花園	<input type="checkbox"/> (1342) 蔚翠花園	<input type="checkbox"/> (1343) 百福花園
<input type="checkbox"/> (1344) 豪峰嶺	<input type="checkbox"/> (1345) 維也納花園		

北區 - 沙打

<input type="checkbox"/> (1346) 沙頭角邨	<input type="checkbox"/> (1347) 上禾坑
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西貢 - 環保

<input type="checkbox"/> (601) 清水灣半島	<input type="checkbox"/> (602) 日出康城
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西貢 - 西貢市中心

<input type="checkbox"/> (603) 對面海邨	<input type="checkbox"/> (604) 明順村	<input type="checkbox"/> (605) 翠塘花園
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西貢 - 西貢離島

<input type="checkbox"/> (606) 觀海樓	<input type="checkbox"/> (607) 甲邊朗	<input type="checkbox"/> (608) 滘西洲	<input type="checkbox"/> (609) 糧船灣
<input type="checkbox"/> (610) 南山	<input type="checkbox"/> (611) 北潭涌	<input type="checkbox"/> (612) 菠蘿嶺	<input type="checkbox"/> (613) 沙角尾
<input type="checkbox"/> (614) 大網仔	<input type="checkbox"/> (615) 躉場		

西貢 - 坑口西

<input type="checkbox"/> (616) 馬游塘	<input type="checkbox"/> (617) 茅湖仔	<input type="checkbox"/> (618) 碧水新村	<input type="checkbox"/> (619) 大埔仔
<input type="checkbox"/> (620) 井欄樹	<input type="checkbox"/> (621) 將軍澳村	<input type="checkbox"/> (622) 魷魚灣村	

西貢 - 運亨

<input type="checkbox"/> (623) 疊翠軒	<input type="checkbox"/> (624) 茵怡花園
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西貢 - 南安

<input type="checkbox"/> (625) 東港城	<input type="checkbox"/> (626) 新寶城	<input type="checkbox"/> (627) 南豐廣場
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西貢 - 富君

<input type="checkbox"/> (628) 富康花園

西貢 - 維都

<input type="checkbox"/> (629) 都會駅	<input type="checkbox"/> (630) 維景灣畔
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西貢 - 彩健

<input type="checkbox"/> (631) 健明邨 (部份) : 健晴樓 / 健曦樓

西貢 - 白沙灣

<input type="checkbox"/> (632) 栢麗灣別墅	<input type="checkbox"/> (633) 蠔涌	<input type="checkbox"/> (634) 匡湖居	<input type="checkbox"/> (635) 莫遮嶺
<input type="checkbox"/> (636) 南圍	<input type="checkbox"/> (637) 澳朗村	<input type="checkbox"/> (638) 北港凹	<input type="checkbox"/> (639) 打蠔墩
<input type="checkbox"/> (640) 打鼓嶺	<input type="checkbox"/> (641) 太平村	<input type="checkbox"/> (642) 窩美	

西貢 - 厚德

<input type="checkbox"/> (643) 厚德邨

西貢 - 德明

<input type="checkbox"/> (644) 顯明苑	<input type="checkbox"/> (645) 和明苑	<input type="checkbox"/> (646) 煜明苑
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西貢 - 康景

<input type="checkbox"/> (647) 富麗花園	<input type="checkbox"/> (648) 旭輝臺	<input type="checkbox"/> (649) 怡心園	<input type="checkbox"/> (650) 慧安園
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西貢 - 尚德

<input type="checkbox"/> (651) 尚德邨

西貢 - 廣明

<input type="checkbox"/> (652) 廣明苑	<input type="checkbox"/> (653) 寶明苑
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以下有些句子，請回答您對這些句子的同意程度，以 1 至 6 分代表。1 分為非常不同意，2 分為不同意，3 分為有點不同意，4 分為有點同意，5 分為同意，6 分為非常同意。

1	2	3	4	5	6
非常不同意	不同意	有點不同意	有點同意	同意	非常同意

請就你居住的地區評分，有 * 號題目，可就全港情況評分
有些題目中會列出一些長者友善社區的條件。如各項條件並不一致，請以使用該設施/環境的整體情況評分。

您有幾同意而家……

A	室外空間及建築	非常不同意	不同意	有點不同意	有點同意	同意	非常同意
1.	公共地方乾淨同舒適。	1	2	3	4	5	6
2.	戶外座位同綠化空間充足，而且保養得妥善同安全。	1	2	3	4	5	6
3.	司機喺路口同行人過路處俾行人先。	1	2	3	4	5	6
4.	單車徑同行人路分開。	1	2	3	4	5	6
5.	街道有充足嘅照明，而且有警察巡邏，令戶外地方安全。	1	2	3	4	5	6
6.	商業服務 (好似購物中心、超市、銀行) 嘅地點集中同方便使用。	1	2	3	4	5	6
7.	有安排特別客戶服務俾有需要人士，例如長者專用櫃枱。	1	2	3	4	5	6
8.	建築物內外都有清晰嘅指示、足夠嘅座位、無障礙升降機、斜路、扶手同樓梯、同埋防滑地板。	1	2	3	4	5	6
9.	室外和室內地方嘅公共洗手間數量充足、乾淨同埋保養得妥善，俾唔同行動能力嘅人士使用。	1	2	3	4	5	6
B	交通						
10.	路面交通有秩序。	1	2	3	4	5	6
11.	交通網絡良好，透過公共交通可以去到市內所有地區同埋服務地點。	1	2	3	4	5	6

以下有些句子，請回答您對這些句子的同意程度，以 1 至 6 分代表。1 分為非常不同意，2 分為不同意，3 分為有點不同意，4 分為有點同意，5 分為同意，6 分為非常同意。

1	2	3	4	5	6
非常不同意	不同意	有點不同意	有點同意	同意	非常同意

請就你居住的地區評分，有 * 號題目，可就全港情況評分
有些題目中會列出一些長者友善社區的條件。如各項條件並不一致，請以使用該設施/環境的整體情況評分。

您有幾同意而家……

12.	公共交通嘅費用係可以負擔嘅，而且價錢清晰。無論喺惡劣天氣、繁忙時間或假日，收費都係一致嘅。	1	2	3	4	5	6
13.	喺所有時間，包括喺夜晚、週末和假日，公共交通服務都係可靠同埋班次頻密。	1	2	3	4	5	6
14.	公共交通服務嘅路線同班次資料完整，又列出可以俾傷殘人士使用嘅班次。	1	2	3	4	5	6
15.	公共交通工具嘅車廂乾淨、保養良好、容易上落、唔迫、又有優先使用座位。而乘客亦會讓呢啲位俾有需要人士。	1	2	3	4	5	6
16.	有專為殘疾人士而設嘅交通服務。	1	2	3	4	5	6
17.	車站嘅位置方便、容易到達、安全、乾淨、光線充足、有清晰嘅標誌，仲有蓋，同埋有充足嘅座位。	1	2	3	4	5	6
18.	司機會喺指定嘅車站同緊貼住行人路停車，方便乘客上落，又會等埋乘客坐低先開車。	1	2	3	4	5	6
19.	喺公共交通唔夠嘅地方有其他接載服務。	1	2	3	4	5	6
20.	的士可以擺放輪椅同助行器，費用負擔得起。司機有禮貌，並且樂於助人。	1	2	3	4	5	6
21.	馬路保養妥善，照明充足。	1	2	3	4	5	6
C	住所						
22.	房屋嘅數量足夠、價錢可負擔，而且地點安全，又近其他社區服務同地方。	1	2	3	4	5	6

以下有些句子，請回答您對這些句子的同意程度，以 1 至 6 分代表。1 分為非常不同意，2 分為不同意，3 分為有點不同意，4 分為有點同意，5 分為同意，6 分為非常同意。

1	2	3	4	5	6
非常不同意	不同意	有點不同意	有點同意	同意	非常同意

請就你居住的地區評分，有 * 號題目，可就全港情況評分
有些題目中會列出一些長者友善社區的條件。如各項條件並不一致，請以使用該設施/環境的整體情況評分。

您有幾同意而家……

23.	住所嘅所有房間同通道都有足夠嘅室內空間同平地可以自由活動。	1	2	3	4	5	6
24.	有可負擔嘅家居改裝選擇同物料供應，而且供應商了解長者嘅需要。	1	2	3	4	5	6
25.	區內有充足同可負擔嘅房屋提供俾體弱同殘疾嘅長者，亦有適合佢地嘅服務。	1	2	3	4	5	6
D	社會參與						
26.	活動可以俾一個人或者同朋友一齊參加。	1	2	3	4	5	6
27.	活動同參觀景點嘅費用都可以負擔，亦都有隱藏或附加嘅收費。	1	2	3	4	5	6
28.	有完善咁提供有關活動嘅資料，包括無障礙設施同埋交通選擇。	1	2	3	4	5	6
29.	提供多元化嘅活動去吸引唔同喜好嘅長者參與。	1	2	3	4	5	6
30.	喺區內唔同場地 (好似文娛中心、學校、圖書館、社區中心同公園)內，舉行可以俾長者參與嘅聚會。	1	2	3	4	5	6
31.	對少接觸外界嘅人士提供可靠嘅外展支援服務。	1	2	3	4	5	6
E	尊重及社會包融						
32.	各種服務會定期諮詢長者，為求服務得佢地更好。	1	2	3	4	5	6
33.	提供唔同服務同產品，去滿足唔同人士嘅需求同喜好。	1	2	3	4	5	6

以下有些句子，請回答您對這些句子的同意程度，以 1 至 6 分代表。1 分為非常不同意，2 分為不同意，3 分為有點不同意，4 分為有點同意，5 分為同意，6 分為非常同意。

1	2	3	4	5	6
非常不同意	不同意	有點不同意	有點同意	同意	非常同意

請就你居住的地區評分，有 * 號題目，可就全港情況評分
有些題目中會列出一些長者友善社區的條件。如各項條件並不一致，請以使用該設施/環境的整體情況評分。

您有幾同意而家……

34.	服務人員有禮貌，樂於助人。	1	2	3	4	5	6
35.	學校提供機會去學習有關長者同埋年老嘅知識，並有機會俾長者參與學校活動。	1	2	3	4	5	6
36. *	社會認同長者嘅過去同埋目前所作出嘅貢獻。	1	2	3	4	5	6
37. *	傳媒對長者嘅描述正面同埋有成見。	1	2	3	4	5	6
F	社區參與及就業						
38.	長者有彈性嘅義務工作選擇，而且得到訓練、表揚、指導同埋補償開支。	1	2	3	4	5	6
39. *	長者員工嘅特質得到廣泛推崇。	1	2	3	4	5	6
40. *	提倡各種具彈性並有合理報酬嘅工作機會俾長者。	1	2	3	4	5	6
41. *	禁止嘅僱用、留用、晉升同培訓僱員呢幾方面年齡歧視。	1	2	3	4	5	6
G	訊息交流						
42.	資訊發佈嘅方式簡單有效，唔同年齡嘅人士都接收到。	1	2	3	4	5	6
43.	定期提供長者有興趣嘅訊息同廣播。	1	2	3	4	5	6
44.	少接觸外界嘅人士可以喺佢地信任嘅人士身上，得到同佢本人有關嘅資訊。	1	2	3	4	5	6
45. *	電子設備，好似手提電話、收音機、電視機、銀行自動櫃員機同自動售票機嘅掣夠大，同埋上面嘅字體都夠大。	1	2	3	4	5	6
46. *	電話應答系統嘅指示緩慢同清楚，又會話俾打去嘅人聽點樣可以隨時重複內容。	1	2	3	4	5	6

1.	係公眾場所，好似政府辦事處、社區中心同圖書館，已廣泛設有平嘅或者係免費嘅電腦同上網服務俾人使用。	1	2	3	4	5	6
H	社區支持與健康服務						
2.	醫療同社區支援服務足夠。	1	2	3	4	5	6
3.	有提供家居護理服務，包括健康、個人照顧同家務。	1	2	3	4	5	6
4.	院舍服務設施同長者的居所都鄰近其他社區服務同地方。	1	2	3	4	5	6
5.	市民唔會因為經濟困難，而得唔到醫療同社區嘅支援服務。	1	2	3	4	5	6
6.	社區應變計劃(好似走火警)有考慮到長者嘅能力同限制。	1	2	3	4	5	6
7. *	墓地(包括土葬同骨灰龕) 嘅數量足夠同埋容易獲得。	1	2	3	4	5	6

以下有些句子，請回答您對這些句子的同意程度，以 1 至 5 分代表。1 分為非常不同意，2 分為不同意，3 分為普通，4 分為同意，5 分為非常同意。

1	2	3	4	5
非常不同意	不同意	普通	同意	非常同意

請就你居住的社區/屋村/屋苑（簡稱社區）評分，您有幾同意而家……

I	社群意識指數	非常不同意	不同意	普通	同意	非常同意
1.	喺呢個社區我可以得到我需要嘅東西。	1	2	3	4	5
2.	這個社區幫助我滿足我嘅需求。	1	2	3	4	5
3.	我覺得自己係這個社區嘅一份子。	1	2	3	4	5
4.	我屬於這呢個社區。	1	2	3	4	5
5.	我可以參與討論喺呢社區發生嘅事情。	1	2	3	4	5
6.	呢個社區嘅人們善於互相影響。	1	2	3	4	5
7.	我覺得同呢個社區息息相關。	1	2	3	4	5
8.	我同呢個社區嘅其他人有良好嘅關係。	1	2	3	4	5

以下有些句子，是關於您對生活不同方面的感受的程度。以 1 至 4 分代表。1 分為從來沒有這些感受，2 分為好少有這些感受，3 分為間中有這些感受，4 分為經常有這些感受。

1	2	3	4
從來沒有	好少	間中	經常

加州洛杉磯大學寂寞感量表(三項簡短版)	從來沒有	好少	間中	經常
1. 你有幾經常覺得自己缺乏人陪伴? 係從來沒有、好少、間中、定經常?	1	2	3	4
2. 你有幾經常覺得被忽略? 係從來沒有、好少、間中、定經常?	1	2	3	4
3. 你有幾經常覺得孤獨? 係從來沒有、好少、間中、定經常?	1	2	3	4

受訪者資料

1. 您嘅性別係：(1) 男 (2) 女

2. 您嘅婚姻狀況係(一定要讀出所有選擇)：
 (1) 從未結婚
 (2) 現在已婚
 (3) 喪偶
 (4) 離婚 / 分居
 (5) 其他(請註明)： _____

3. 您嘅教育程度係：
 (1) 未受教育/學前教育(幼稚園) (2) 小學
 (3) 初中 (4) 高中
 (5) 預科 (6) 專上教育：文憑/證書課程
 (7) 專上教育：副學位課程 (8) 專上教育：學位課程或以上

4. 居所類型：
 (1) 公營房屋
 (11) 租住(如公屋、長者屋)
 (12) 補助出售單位(如經「租者置其屋計劃」購入的公屋單位)
 (2) 補助出售居屋單位
 (21) 第二市場(未補地價)
 (22) 自由市場(已補地價)
 (3) 私人永久性房屋
 (31) 租住(包括免租如員工宿舍)
 (32) 自置(包括有按揭)
 (4) 私人臨時房屋(如鐵皮屋)
 (5) 其他(請註明)： _____ (如老人院)

5. 通訊地址： _____

6. 您喺以上住址/所屬社區住左幾耐： _____

7. 您的居住狀況？
 (1) 與伴侶同住 (2) 與子女同住
 (3) 與伴侶及子女同住 (4) 獨居
 (5) 其他(請註明): _____

8. 您而家有無返工？

(1)有 → 您而家嘅職位/工作：_____ (請註明)

(0)無 → 您係：(讀出所有選擇)

- (1) 失業人士 (2) 退休人士
 (3) 料理家務者 (4) 學生
 (5) 其他(請註明)：_____

9. 一般來說，您說您的健康係非常好、很好、好、一般或差？

- (1)差 (2) 一般 (3) 好 (4) 很好 (5) 非常好

10. 您有否照顧六十五歲或以上長者的經驗？

- (0)否 (1)有

11. 過去三個月內，您有否使用／參加過長者中心所提供的服務/活動？

- (0)否 (1)有

12. 您有無足夠嘅金錢嚟應付日常開支？

- (1)非常不足夠 (2)不足夠 (3)剛足夠 (4)足夠有餘
 (5)非常充裕

13. 您而家每個月收入係港幣幾多？

- | | |
|--|---|
| <input type="checkbox"/> (1) < 2,000 | <input type="checkbox"/> (7) 15,000 - 19,999 |
| <input type="checkbox"/> (2) 2,000 - 3,999 | <input type="checkbox"/> (8) 20,000 - 24,999 |
| <input type="checkbox"/> (3) 4,000 - 5,999 | <input type="checkbox"/> (9) 25,000 - 29,999 |
| <input type="checkbox"/> (4) 6,000 - 7,999 | <input type="checkbox"/> (10) 30,000 - 39,999 |
| <input type="checkbox"/> (5) 8,000 - 9,999 | <input type="checkbox"/> (11) 40,000 - 59,999 |
| <input type="checkbox"/> (6) 10,000 - 14,999 | <input type="checkbox"/> (12) ≥ 60,000 |

* 您是否願意留下你的電話號碼以作將來聯絡之用？

_____ (先生/女士/小姐) 電話號碼：_____

* 您是否有興趣參與聚焦小組作進一步意見分享？

- (0) 否 (1) 是 (2) 未確定

* MH: E / IE

* LA: E / IE

Jockey Club Age-friendly City Project



賽馬會齡活城市
Jockey Club Age-friendly City

<http://www.jcafc.hk/>

CUHK Jockey Club Institute of Ageing



香港中文大學
賽馬會老年學研究所
CUHK Jockey Club Institute of Ageing

<http://www.ioa.cuhk.edu.hk/>