賽馬會齡活城市
Jockey Club Age-friendly City

Jockey Club Age-friendly City Project

Final Assessment Report

Wan Chai

Initiated and funded by:

The Hong Kong Jockey Club Charities Trust

Project partner:

香 港 大 學
THE UNIVERSITY OF HONG KONG

香港大學秀圃老年研究中心
Sau Po Centre on Ageing
The University of Hong Kong

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1. EXECUTIVE SUMMARY

The Jockey Club Age-friendly City Project has an overall aim to build momentum in districts to develop an age-friendly community, in joint hands with various stakeholders in the community. This report describes the baseline and final assessments conducted in the Wan Chai District as part of the project. The objective of the assessments was to understand the age-friendliness and sense of community of the Wan Chai District. The assessments consisted of a quantitative (questionnaire survey) study and a qualitative (focus group) study. A total of 502 and 562 participants completed the questionnaire survey in baseline and final assessments, respectively. The participants were from five sub-district communities, including Causeway Bay (CWB), Wan Chai (WC), Happy Valley (HV), Canal Road (CR), and Tai Hang (TH) (Appendix 1). Five focus groups were conducted with residents in the district.

The typical participant of the baseline and final assessments was a married woman aged over 65 years who has resided in the district for 30 years. The age of the building that participants were living in was usually over 30 years, with elevator, although around 40% residents would still need to take the stairs to go out. Majority of the older adults (aged 60 years or above) expected themselves to age in place in the coming 5 years; however, the percentage of older adults with such expectation dropped considerably if their health condition deteriorated. Both the percentage on definite negative response (perceived 0% likelihood of moving into a residential care unit) increased from baseline to final assessment, implying a lowering of their expectation to use residential care services when encountering health deterioration.

Participants perceived the district to be age-friendly in general. They perceived significantly higher ratings between baseline and final assessments in seven domains, namely Outdoor spaces & buildings, Transportation, Housing, Social participation, Respect & social inclusion, Civic participation & employment, and Communication & information. There was significantly higher rating on needs fulfilment of sense of community, particularly in CWB wand TH; yet, emotional connection significantly dropped in the district. Moreover, the older the participants, the more likely they perceived stronger sense of community and age-friendliness in the district.

Participants of the focus groups listed out a number of improvements in different areas in the district within these three years. Improvement in physical environment is evident from the installation of elevators & seats, better hygiene, and clearer bus arrival information at bus stops. The social and cultural environment remains to be age-friendly, as shown in the respectful environment with sufficient and wide range of social activities and volunteer opportunities for residents. The use of smart phones and social networking applications among older people facilitates their information exchange; the elderly appointment quota system in general outpatient clinics increases their accessibility to health care services. However, they also drew attention to (1) physical

environment issues: noise and waste pollution caused by bars and restaurants, and insufficient support for renovating and maintaining tenement houses and old units; (2) social and cultural environmental issues: reduced social participation due to a lack of suitable and accessible gathering places, and few job opportunities available; and (3) communication and services issues: insufficient promotion among elderly centres, and long waiting time for specialist health services.

Results from this baseline assessment suggested a reasonably high and improved sense of community and perceived age-friendliness among residents in the district. Future efforts to make Wan Chai District more age-friendly can target specific areas for improvement based on the eight domains outlined by the World Health Organization's Age-friendly City framework.

2. INTRODUCTION

2.1 Project Background

The rapid population ageing in Hong Kong means rapidly increasing needs of the older population. The population aged 65 years or above is projected to increase from the current 14% of the total population to 26%, or every 1 in 4 people, by 2029; and to 32%, or every 1 in 3 people, by 2041.[1] This presents a great challenge to the society in multiple ways, including a shrinking labour force with a working age to elderly population ratio of 1.8:1 by 2041, and increasing burden on and cost for public services. Building an age-friendly city will help meet the needs of older people and enable them to live an active, independent, and good-quality life.

The Sau Po Centre on Ageing of The University of Hong Kong (HKU) received a donation from The Hong Kong Jockey Club Charities Trust in 2015 to conduct the *Jockey Club Age-friendly City Project* in the Central and Western District and the Wan Chai District. In both districts, the study was implemented in two phases: Phase 1 was from September 2015 to February 2016 and Phase 2 was 3 years since March 2016. Phase 1 of the project consisted of three parts. The first part was a baseline assessment of district age-friendliness using a questionnaire interview design. The second part used a focus group design to gain an in-depth understanding of residents' and key stakeholders' views on age-friendliness in their communities. A baseline report of district-based recommendations and implementation proposals was generated based on those findings. The third part was to organize an "Age-friendly City Ambassador Programme" in the districts, to get ambassadors familiarized with the knowledge and methods in building an age-friendly community. Phase 2 of the project consisted of provision of professional support from the HKU team, in collaboration with key district stakeholders, to develop, implement, and evaluate district-based age-friendly city programmes for enhancing district age-friendliness.

Between July and October 2018, the Sau Po Centre on Ageing conducted the final assessment of the *Jockey Club Age-friendly City Project* in the Central and Western District and Wan Chai District. It aimed to examine the 3-year change in perceived district age-friendliness between baseline and final assessments. Similarly, the final assessment used a questionnaire interview design and a focus group design to understand the change in district age-friendliness.

This report presents the baseline and final assessment findings. The objective of this report is to understand the 3-year change and current needs of the Wan Chai District in preparing to become an age-friendly city.

2.2 District Characteristics

Wan Chai District is a sophisticated district with a long history of development. Within

the district, several areas are characterized by high resident population density and high volume of non-resident visits for work and other activities. These areas, such as Southorn and Causeway Bay, are packed with old residential, commercial and governmental buildings. Other areas in the district, such as Tai Hang and Broadwood, have a lower resident population density and are relatively less busy. According to the 2015 District Council division, the whole Wan Chai District consists of 13 Constituency Areas (CA), that can be categorized into five meaningful sub-district communities, namely (1) Causeway Bay, (2) Wan Chai, (3) Happy Valley, (4) Canal Road, and (5) Tai Hang.

According to the Hong Kong Census and Statistics Department,[2] the Wan Chai District has a population of 180,123 in 2016. The number of elderly population aged 65 years or above was around 29,683, comprising 16.5% of the total district population. This can be compared with the 15.6% as reported in the 2011 Hong Kong Population Census. The district ranks the sixth among other districts in its percentage of elderly population, and is higher than the Hong Kong average of 15.9%.

Table 2.1 shows the changes of domestic household characteristics in the district. In 2016, the total number of domestic households increased from 56,100 to 65,196. According to the Hong Kong Population Census, the median monthly income from main employment of the working population increased from HK$20,000 to HK$21,790. The median domestic household mortgage payment increased from HK$12,500 to HK$18,240, while the median domestic household rent also increased from HK$12,000 to HK$14,000.

Table 2.1 Domestic household characteristics of Wan Chai District

Domestic household characteristics	**2014**	**2016**
Total number of domestic households	56,100	65,196
Type of housing, private permanent	99.5%	94.0%
Median monthly income	HK$20,000 (2011)	HK$21,790
Median domestic household mortgage payment	HK$12,500 (2011)	HK$18,240
Median domestic household rent	HK$12,000 (2011)	HK$14,000

The predominant type of housing in Wan Chai District is private permanent housing: 94.0% of the domestic households and 94.5% of the population in the district are living in private housing estates or buildings. One public rental housing – Lai Tak Tsuen[3] is available in the district but subsidized home ownership housing is not available in the district.

Regarding the provision of elderly centres and health care services, the district has a total of 5 elderly centres (2 District Elderly Community Centres[4] and 3 Neighbourhood Elderly Centres[5]), 8 hospitals (3 public[6] and 5 private[7]), 2 general clinics[8] and 1 elderly health centre.[9]

2.3 Previous Age-friendly City Work in the District

In the Wan Chai District, age-friendly city has been a key area of interest and concern for several non-government organizations (NGOs), the Wan Chai District Council, and government departments, who have worked together on projects to enhance age-friendliness of the district.

Key stakeholders in the Wan Chai District have made continuous effort to enhance the age-friendliness, starting from the territory-wide "Age-Friendly Hong Kong" project led by the Hong Kong Council of Social Service (HKCSS)[10] in 2012. The Community Building Committee of Wan Chai District Council in joint hands with local stakeholders supported the project "灣仔社區友善無疆計劃" (herein translated as the "Wan Chai Friendly Community Without Boundary Project")[11] to train up elderly embassadors and raise public concern on the development of age-friendly city. Another important effort was the "2014-2015 年灣仔長者友善社區計劃" (Wan Chai Age-friendly Community Project 2014-2015)[12] coordinated by the Wan Chai District Council and several collaborators. This project promoted the concept of age-friendly city in the district and empowered older people to express their comments and participate in the development of a harmonious and age-friendly community.

Since 2015, The Hong Kong Jockey Club Charities Trust has launched the Jockey Club Age-friendly City Project and joint hands with various stakeholders including the District Council, NGOs, and the Sau Po Centre on Ageing to build Wan Chai District into an age-friendly city. Over the past 3.5 years, the Project has trained 30 Age-friendly City Ambassadors to enhance their understanding of age-friendly city concepts and supported 5 district-based programmes that helped build up the momentum of age-friendly city at community level. With the support of the Project, Wan Chai District officially joined the World Health Organization (WHO) Global Network for Age-friendly Cities and Communities in August 2017. It was a recognition of the district's commitment to becoming an age-friendly city.[13, 14]

Examples of recent endeavours were the "健康松齡樂社區計劃" (translated herein as "Community Based Health Involvement Project")[15] led by the St. James' Settlement. The project aimed to foster positive living attitudes and promotion of healthy living lifestyles for frail elderly living in Wan Chai District in 2018. In the same year, the Development, Planning and Transport Committee of the Wan Chai District Council funded the Wan Chai Methodist Centre for the Seniors to organise the "安 · 行灣仔－長者交通安全微電影" (translated herein as "Elderly Road Safety Micro-Film – Safe Walking in Wan Chai").[16] The micro-film aimed to raise the awareness of road safety among elderly in Wan Chai District. In addition, RTHK held the "長者友善城市專題講座(灣仔區)" (translated herein as "Seminar on Age-friendly City Wan Chai District")[17] and invited leaders from various disciplines to share and discuss about age-friendliness of transportation in Wan Chai District.[17]

3. METHODOLOGY

Participants were recruited by convenience sampling in the district within 3 years to complete two assessments: baseline assessment conducted between September 2015 and February 2016, and final assessment conducted between July and October 2018. The two assessments consisted of a quantitative study and a qualitative study. The quantitative study used a questionnaire survey to understand the sociodemographic characteristics, the sense of community and perception on age-friendliness of the district, among residents of five sub-district communities in the Wan Chai District. The qualitative study used focus groups to capture in-depth opinions of the residents on age-friendliness of the district, with reference to the eight domains of the Age-friendly City as defined by the World Health Organization (WHO). This report aims to understand the 3-year change of district age-friendliness in the Wan Chai District.

3.1 Questionnaire Survey

3.1.1 Participants

Participants recruited by convenience sampling for the questionnaire survey in the baseline and final assessments were usual residents in the Wan Chai District aged 18 years or above. Exclusion criteria were foreign domestic helpers or individuals who are mentally incapable to participate in the study.

Participants were recruited from five meaningful sub-district communities (Table 3.1). The communities were derived *a priori* according to features and characteristics of the district, and validated by stakeholders who are familiar with the district.

Table 3.1 Sampling sub-district communities for Wan Chai District

Sub-district Communities	Constituency Areas
Causeway Bay (CWB)	Victoria Park
	Tin Hau
	Causeway Bay
Wan Chai (WC)	Hennessy
	Oi Kwan
	Southorn
	Tai Fat Hau
	Stubbs Road
Happy Valley (HV)	Jardine's Lookout
	Broadwood
	Happy Valley
Canal Road (CR)	Canal Road
Tai Hang (TH)	Tai Hang
	Lai Tak Tsuen

A total of 502 participants were recruited in the baseline assessment in 2016. The final assessment recruited a total of 562 participants from multiple sources including public rental housing estates, elderly centres, community centres, and advertisement and

snowball referrals from stakeholders.

3.1.2 Measures

The questionnaire survey was conducted by face-to-face interviews and self-administration (in a small number of cases who preferred the latter mode) to cover the following areas (Appendix 2):

(i) Sociodemographic Information

These included age, gender, marital status, education, living arrangement, housing type, employment, and income of the participant. Self-reported health was captured using an item for assessing subjective health from the SF-12 Health Survey.[18]

(ii) Community Care

These included caregiving, use of assistive device, use of elderly centres, and ageing-in-place expectations.

(iii) Perceived Age-friendliness

Perceived age-friendliness of the district was assessed using 61 items developed based on a local adaptation of the WHO's Age-friendly City Framework and Guidelines. Participants were asked to rate their perceived age-friendliness along eight domains, namely 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. These can be further divided into 19 sub-domains.

(iv) Sense of Community

Sense of community, including needs fulfilment (the perception that a person's needs is met by the community), group membership (a sense of belonging to the community), influence (a sense that a person can make a difference in a community and the community can make a difference to the person), and shared emotional connection (a feeling of attachment or bonding rooted in community members' shared history, place or experience) were measured using the 8-item Brief Sense of Community Scale. [19, 20]

3.1.3 Data Analysis

Descriptive analyses were performed by the Wan Chai District and its five sub-districts to identify patterns in sociodemographic, community care, perceived age-friendliness, and sense of community in both baseline and final assessments. Independent t-tests were performed to examine the 3-year change between baseline and final assessments in the district and its sub-districts in perceived age-friendliness that consists of eight domains and 19 sub-domains, and sense of community that consists of 4 sub-domains.

Further, participants were divided into two age groups: younger participants (aged 18-49), and older participants (aged 50 or above). Independent t-tests were performed in each age group to examine the 3-year change in the district and its sub-districts between baseline and final assessments in perceived age-friendliness and sense of community.

3.2 Focus Group

There were five focus groups conducted in the final assessment, with one non-elderly focus group recruited by convenience sampling and four elderly focus groups recruited by the community support services in the district. The focus groups conducted following the procedure based on the WHO Age-friendly Cities Project Methodology-Vancouver Protocol. In this study, we have adopted the Chinese version of the protocol devised by The Hong Kong Council of Social Service. A focus group discussion guide was compiled (Appendix 3). The participants in the focus groups were asked about their perceived changes concerning the eight domains of age-friendliness in the district over the last 3 years. Each focus group meeting lasted approximately 1 to 1.5 hours. Each focus group consisted of 6 to 8 people. Focus group sessions were held in community locations; the discussions were audio-recorded and transcribed.

4. RESULTS

4.1 Questionnaire Survey

4.1.1 Participant Characteristics

The baseline assessment recruited a total of 502 participants in 2016, while the final assessment recruited 562 participants between July and October 2018 (Table 4.1). The participants represent residents in the five sub-district communities of Causeway Bay (CWB), Wan Chai (WC), Happy Valley (HV), Canal Road (CR), and Tai Hang (TH).

We recruited participants according to the population distribution in the five sub-districts. In the sub-district of CWB, the percentage of participants decreased from 15.3% in baseline assessment to 8.0% in final assessment. The proportion of participants in other sub-districts slightly increased from baseline assessment to final assessment (WC: 38.6% to 40.9%; HV: 9% to 11.4%; CR: 6% to 6.8%; TH 31.1% to 32.9%).

Table 4.1 Number of survey participants in the five sub-district communities

Sub-district communities	Baseline assessment		Final assessment	
	N	%	N	%
Causeway Bay (CWB)	**77**	**15.3**	**45**	**8.0**
Victoria Park	3	0.6	3	0.5
Tin Hau	20	4.0	14	2.5
Causeway Bay	54	10.8	28	5.0
Wan Chai (WC)	**194**	**38.6**	**230**	**40.9**
Hennessy	66	13.1	62	11.0
Oi Kwan	53	10.6	69	12.3
Southorn	29	5.8	50	8.9
Tai Fat Hau	44	8.8	39	6.9
Stubbs Road	2	0.4	10	1.8
Happy Valley (HV)	**45**	**9.0**	**64**	**11.4**
Jardine's Lookout	3	0.6	24	4.3
Broadwood	8	1.6	12	2.1
Happy Valley	34	6.8	28	5.0
Canal Road (CR)	**30**	**6.0**	**38**	**6.8**
Tai Hang (TH)	**156**	**31.1**	**185**	**32.9**
Tai Hang	33	6.6	41	7.3
Lai Tak Tsuen	123	24.5	144	25.6
Total	**502**	**100.0**	**562**	**100.0**

Sociodemographic characteristics of the participants in baseline and final assessments are summarized in Table 4.2. Most of the basic characteristics showed similar pattern between baseline and final assessments. More than half of the participants were females (baseline: 73.1% vs. final: 77.2%; p=0.122), aged 65 years or above (baseline: 74.7% vs. final: 75.4%; p=0.472), had secondary education or above (baseline: 54.8% vs. final: 53.0%; p=0.378), and retired (baseline: 70.0% vs. final: 68.0%; p=0.643). The

distribution by marital status significantly varied, with a change in the percentage of widowed or divorced/separated participants from 36.3% in baseline assessment to 43.2% in final assessment (p=0.047). In terms of living arrangement, nearly half of the participants were either living alone or living with their spouse only (baseline: 54.9% vs. final: 49.8%; p=0.956). There was no significant change in the proportion of participants living with a domestic helper (baseline: 14.2% vs. final: 13.2%; p=0.617) and participants being a caregiver (baseline: 21.1% vs. final: 17.2%; p=0.111).

There were more participants self-reported to have more than sufficient or abundant fund for daily expenses in final assessment than in baseline assessment (baseline: 18.3% vs. final: 23.3% (p=0.013). In terms of fund sufficiency, there was significant change in CWB (p=0.002) and HV (p=0.006). Despite the change, majority of participants in baseline assessment (70.0%) and final assessment (65.8%) reported to have no income or a monthly personal income below HK$6,000 ($p$=0.789).

Residence characteristics of participants in baseline and final assessments are summarized in Table 4.3. The average years of residence were significantly longer in final assessment than in baseline assessment (baseline: 34.1 years vs. final: 36.8 years; p=0.024), particularly in TH sub-district (baseline: 30.5 years vs. final: 38.0 years; p<0.001). Majority of the participants lived in privately owned housing (baseline: 59.5% vs. final: 65.3%; p=0.061). The characteristics of building that they resided in were similar between the two assessments.

Table 4.2 Sociodemographic characteristics of questionnaire survey participants

	Total				**CWB**				**WC**				**HV**				**CR**				**TH**			
	Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Gender																								
Male	135	26.9	128	22.8	17	22.1	12	26.7	56	28.9	62	27.0	8	17.8	14	21.9	10	33.3	9	23.7	**44**	**28.2**	**31**	**16.8**
Female	367	73.1	434	77.2	60	77.9	33	73.3	138	71.1	168	73.0	37	82.2	50	78.1	20	66.7	29	76.3	**112**	**71.8**	**154**	**83.2**
Age group																								
18-49 years	60	12.0	63	11.2	11	14.3	6	13.3	19	9.8	32	13.9	9	20.0	13	20.3	4	13.3	5	13.2	**17**	**10.9**	**7**	**3.8**
50-64 years	67	13.3	75	13.3	16	20.8	8	17.8	22	11.3	32	13.9	8	17.8	17	26.6	4	13.3	2	5.3	**17**	**10.9**	**16**	**8.6**
65-79 years	220	43.8	235	41.8	34	44.2	20	44.4	79	40.7	89	38.7	17	37.8	22	34.4	12	40.0	19	50.0	**78**	**50.0**	**85**	**45.9**
≥80 years	155	30.9	189	33.6	16	20.8	11	24.4	74	38.1	77	33.5	11	24.4	12	18.8	10	33.3	12	31.6	**44**	**28.2**	**77**	**41.6**
Marital status																								
Never married	**65**	**13.0**	**72**	**12.8**	11	14.5	10	22.2	31	16.0	25	10.9	8	17.8	18	28.1	4	13.3	5	13.2	**11**	**7.1**	**14**	**7.6**
Married	**254**	**50.6**	**247**	**44.0**	43	56.6	21	46.7	83	42.8	104	45.2	22	48.9	24	37.5	13	43.3	18	47.4	**93**	**59.6**	**80**	**43.2**
Widowed	**162**	**32.3**	**203**	**36.1**	19	25.0	12	26.7	72	37.1	77	33.5	13	28.9	17	26.6	12	40.0	13	34.2	**46**	**29.5**	**84**	**45.4**
Divorced / separated	**20**	**4.0**	**40**	**7.1**	3	3.9	2	4.4	8	4.1	24	10.4	2	4.4	5	7.8	1	3.3	2	5.3	**6**	**3.8**	**7**	**3.8**
Education																								
Nil / pre-primary	80	16.0	120	21.4	8	10.5	8	17.8	33	17.0	46	20.0	1	2.2	6	9.4	9	30.0	9	23.7	29	18.6	51	27.6
Primary	147	29.3	145	25.8	14	18.4	6	13.3	65	33.5	65	28.3	9	20.0	3	4.7	7	23.3	12	31.6	52	33.3	59	31.9
Secondary (F.1-3)	83	16.6	82	14.6	14	18.4	8	17.8	32	16.5	36	15.7	6	13.3	7	10.9	4	13.3	3	7.9	27	17.3	28	15.1
Secondary (F.4-7)	98	19.6	115	20.5	20	26.3	15	33.3	29	14.9	43	18.7	15	33.3	18	28.1	6	20.0	10	26.3	28	17.9	29	15.7
Diploma	23	4.6	28	5.0	6	7.9	1	2.2	8	4.1	14	6.1	3	6.7	5	7.8	0	0.0	1	2.6	6	3.8	7	3.8
Associate degree	2	0.4	2	0.4	0	0.0	0	0.0	1	0.5	2	0.9	0	0.0	0	0.0	0	0.0	0	0.0	1	0.6	0	0.0
Bachelor degree or above	68	13.6	70	12.5	14	18.4	7	15.6	26	13.4	24	10.4	11	24.4	25	39.1	4	13.3	3	7.9	13	8.3	11	5.9
Employment status																								
Working	80	16.1	87	15.6	21	28.0	11	25.0	20	10.4	43	18.8	**5**	**11.4**	**21**	**33.3**	**9**	**30.0**	**2**	**5.4**	**25**	**16.1**	**10**	**5.4**
Unemployed	4	0.8	8	1.4	1	1.3	1	2.3	1	0.5	4	1.7	**0**	**0.0**	**0**	**0.0**	**1**	**3.3**	**1**	**2.7**	**1**	**0.6**	**2**	**1.1**
Retired	347	70.0	379	68.0	44	58.7	26	59.1	150	78.1	152	66.4	**26**	**59.1**	**32**	**50.8**	**16**	**53.3**	**27**	**73.0**	**111**	**71.6**	**142**	**77.2**
Homemakers	58	11.7	73	13.1	9	12.0	6	13.6	20	10.4	24	10.5	**10**	**22.7**	**8**	**12.7**	**4**	**13.3**	**6**	**16.2**	**15**	**9.7**	**29**	**15.8**
Students	7	1.4	10	1.8	0	0.0	0	0.0	1	0.5	6	2.6	**3**	**6.8**	**2**	**3.1**	**0**	**0.0**	**1**	**2.7**	**3**	**1.9**	**1**	**0.5**
Living arrangement																								
Living alone	158	31.5	164	29.2	21	27.6	9	20.0	80	41.2	76	33.0	**13**	**28.9**	**16**	**25.0**	8	26.7	10	26.3	36	23.1	53	28.6
With spouse only	117	23.4	116	20.6	13	17.1	5	11.1	49	25.3	46	20.0	**8**	**17.8**	**5**	**7.8**	6	20.0	10	26.3	41	26.3	50	27.0
Spouse & other family members	101	20.2	111	19.8	26	34.2	13	28.9	20	10.3	46	20.0	**12**	**26.7**	**18**	**28.1**	4	13.3	5	13.2	39	25.0	29	15.7
With children / grandchildren	83	16.6	95	16.9	10	13.2	10	22.2	26	13.4	33	14.3	**6**	**13.3**	**5**	**7.8**	9	30.0	8	21.1	32	20.5	39	21.1
With other family members	42	8.4	45	8.0	6	7.9	6	13.3	19	9.8	13	5.7	**6**	**13.3**	**13**	**20.3**	3	10.0	4	10.5	8	5.1	9	4.9
With others	0	0.0	31	5.5	0	0.0	2	4.4	0	0.0	16	7.0	**0**	**0.0**	**7**	**10.9**	0	0.0	1	2.6	0	0.0	5	2.7
Living with domestic helper	70	14.2	74	13.2	13	18.1	8	18.2	22	11.4	18	7.8	18	42.9	36	56.3	5	16.1	1	2.6	12	7.7	11	5.9
Participant is a caregiver	104	21.1	96	17.2	**17**	**23.3**	**3**	**6.8**	39	20.3	43	18.9	13	30.2	13	20.3	3	10.0	9	23.7	32	20.5	28	15.3
Caregiver for elderly	74	73.3	66	68.0	13	76.5	2	66.7	28	71.8	27	61.4	9	69.2	7	53.8	3	100	6	66.7	21	72.4	24	85.7

Table 4.2 Sociodemographic characteristics of questionnaire survey participants

	Total				CWB				WC				HV				CR				TH			
	Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Finance																								
Very insufficient	**9**	**1.8**	**10**	**1.8**	**1**	**1.3**	**0**	**0.0**	2	1.1	6	2.6	**0**	**0.0**	**0**	**0.0**	1	3.3	1	2.6	5	3.2	3	1.6
Insufficient	**74**	**14.9**	**57**	**10.2**	**9**	**12.0**	**3**	**6.7**	25	13.2	28	12.2	**2**	**4.4**	**3**	**4.7**	7	23.3	6	15.8	31	19.9	17	9.2
Sufficient	**322**	**64.9**	**363**	**64.7**	**52**	**69.3**	**21**	**46.7**	123	64.7	147	63.9	**27**	**60.0**	**21**	**32.8**	19	63.3	29	76.3	101	64.7	145	78.8
More than sufficient	**80**	**16.1**	**114**	**20.3**	**11**	**14.7**	**17**	**37.8**	34	17.9	46	20.0	**15**	**33.3**	**31**	**48.4**	3	10.0	2	5.3	17	10.9	18	9.8
Abundant	**11**	**2.2**	**17**	**3.0**	**2**	**2.7**	**4**	**8.9**	6	3.2	3	1.3	**1**	**2.2**	**9**	**14.1**	0	0.0	0	0.0	2	1.3	1	0.5
Monthly personal income																								
No income	50	10.3	52	9.8	12	17.1	6	14.3	25	13.1	22	10.0	5	12.2	10	18.5	**0**	**0.0**	**5**	**13.9**	8	5.2	9	5.1
HK$1 to HK$5,999	290	59.7	296	56.0	30	42.9	16	38.1	122	63.9	134	60.6	18	43.9	12	22.2	**18**	**62.1**	**27**	**75.0**	102	65.8	107	60.8
HK$6,000 to HK$9,999	47	9.7	63	11.9	5	7.1	6	14.3	13	6.8	18	8.1	4	9.8	4	7.4	**4**	**13.8**	**1**	**2.8**	21	13.5	34	19.3
HK$10,000 to HK$19,999	43	8.8	68	12.9	12	17.1	6	14.3	13	6.8	30	13.6	2	4.9	9	16.7	**1**	**3.4**	**1**	**2.8**	15	9.7	22	12.5
HK$20,000 to HK$29,999	22	4.5	22	4.2	6	8.6	3	7.1	5	2.6	9	4.1	5	12.2	6	11.1	**1**	**3.4**	**2**	**5.6**	5	3.2	2	1.1
HK$30,000 to HK$59,999	24	4.9	20	3.8	4	5.7	4	9.5	12	6.3	7	3.2	2	4.9	7	13.0	**3**	**10.3**	**0**	**0.0**	3	1.9	2	1.1
≥HK$60,000	10	2.1	8	1.5	1	1.4	1	2.4	1	0.5	1	0.5	5	12.2	6	11.1	**2**	**6.9**	**0**	**0.0**	1	0.6	0	0.0

Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

Table 4.3 Residence characteristics

	Total				CWB				WC				HV				CR				TH			
	Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Residence years (mean, SD)	**34.1**	**19.2**	**36.8**	**19.2**	29.9	16.9	33.2	18.2	39.5	21.9	37.5	20.7	27.3	17.5	30.4	19.0	38.8	20.6	41.6	23.9	**30.5**	**14.6**	**38.0**	**15.7**
Housing, N (%)																								
Public rental	126	25.1	142	25.3	2	2.6	0	0.0	**0**	**0.0**	**0**	**0.0**	0	0.0	0	0.0	0	0.0	0	0.0	124	79.5	142	76.8
Private, rental	71	14.2	39	6.9	11	14.3	3	6.7	**41**	**21.2**	**25**	**10.9**	5	11.1	7	10.9	4	13.3	2	5.3	10	6.4	2	1.1
Private, owned	298	59.5	367	65.3	62	80.5	42	93.3	**151**	**78.2**	**195**	**84.8**	37	82.2	56	87.5	26	86.7	35	92.1	22	14.1	39	21.1
Private, unknown	5	1.0	0	0.0	2	2.6	0	0.0	**1**	**0.5**	**0**	**0.0**	2	4.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Others	1	0.2	14	2.5	0	0.0	0	0.0	**0**	**0.0**	**10**	**4.3**	1	2.2	1	1.6	0	0.0	1	2.6	0	0.0	2	1.1
Age of building																								
≤10 years	14	2.8	11	2.0	1	1.3	2	4.4	8	4.2	7	3.0	1	2.2	1	1.6	0	0	1	2.6	**4**	**2.6**	**0**	**0.0**
11-20 years	24	4.8	23	4.1	1	1.3	3	6.7	17	8.9	11	4.8	2	4.4	6	9.4	1	3.4	0	0.0	**3**	**1.9**	**3**	**1.6**
21-30 years	45	9.1	40	7.1	4	5.2	4	8.9	21	11.1	21	9.1	7	15.6	5	7.8	1	3.4	2	5.3	**12**	**7.8**	**8**	**4.3**
≥31 years	412	83.2	488	86.8	71	92.2	36	80.0	144	75.8	191	83.0	35	77.8	52	81.3	27	93.1	35	92.1	**135**	**87.7**	**174**	**94.1**
Building environment																								
No. of floors (mean, SD)	20.0	(8.7)	19.8	(9.2)	17.5	(7.6)	20.5	(10.0)	17.9	(8.9)	17.1	(9.0)	17.1	(9.9)	16.8	(11.5)	17.6	(6.3)	16.8	(6.8)	25.0	(6.8)	24.7	(6.1)
With elevator	448	90.1	490	87.3	73	96.1	40	90.9	164	85.9	192	83.5	38	84.4	46	71.9	25	83.3	33	86.8	148	95.5	179	96.8
Need to take stairs	214	43.2	243	43.2	25	33.3	13	28.9	88	46.3	114	49.6	22	48.9	31	48.4	8	26.7	16	42.1	71	45.8	69	37.3

Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

The self-reported health status, social participation and use of community services in baseline and final assessments are presented in Table 4.4. There was no difference in mean of self-rated health (p=0.768) or in the proportion of participants rating their health as good, very good, or excellent between baseline and final assessments (p=0.905). Around one-fourth of the baseline and final assessment participants had to use the assistive devices, such as cane, walker, or wheelchair (baseline: 24.6% vs. final: 25.3%; p=0.787). Among those aged 60 years or above, the majority of participants were users of elderly centres (baseline: 74.5% vs. final: 78.4%; p=0.171). There was significant difference in HV from 96.6% to 74.4% (p=0.004) and in TH from 64.6% to 81.4% (p=0.001).

Table 4.4 Health, social participation, and use of community service

	Total				**CWB**				**WC**				**HV**				**CR**				**TH**			
	Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Self-rated health																								
Excellent	31	6.2	27	4.8	2	2.6	3	6.7	12	6.3	7	3.0	1	2.2	7	10.9	3	10.0	1	2.6	13	8.3	9	4.9
Very good	72	14.5	77	13.7	12	15.8	7	15.6	25	13.1	29	12.6	5	11.1	10	15.6	7	23.3	4	10.5	23	14.7	27	14.6
Good	131	26.3	158	28.1	26	34.2	13	28.9	50	26.2	69	30.0	11	24.4	19	29.7	9	30.0	12	31.6	35	22.4	45	24.3
Fair	217	43.6	259	46.1	31	40.8	21	46.7	82	42.9	114	49.6	25	55.6	23	35.9	8	26.7	17	44.7	71	45.5	84	45.4
Poor	47	9.4	41	7.3	5	6.6	1	2.2	22	11.5	11	4.8	6	6.7	5	7.8	3	10.0	4	10.5	14	9.0	20	10.8
Mean score (SD)	3.4	(1.0)	3.4	(1.0)	3.3	(0.9)	3.2	(1.0)	3.4	(1.1)	3.4	(0.9)	3.5	(0.9)	3.1	(1.0)	3.0	(1.2)	3.5	(0.9)	3.3	1.1	3.4	(1.0)
Assistive device using among elderly*	118	24.6	142	25.3	11	15.3	5	11.1	52	27.8	61	26.6	10	23.3	8	12.5	7	23.3	10	26.3	38	25.7	58	31.4
User of elderly centres†	306	74.5	356	78.4	35	58.3	25	71.4	139	83.7	134	77.0	**31**	**96.9**	**32**	**74.4**	17	73.9	25	83.3	**84**	**64.6**	**140**	**81.4**

*Cane, walker, or wheelchair
†Applicable only to participants aged 60 years or above
Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

Participants' ageing-in-place intention in 5 years in baseline and final assessments are summarized in Table 4.5. When asked about whether they expect to move into a residential care home in the next 5 years if their health remains the same, the definite negative response changed from 74.6% to 81.3%. The percentage of participants rated with more than 50% chance also increased from 12.7% in baseline to 13.7% in final assessment. There was similar distribution in all the sub-districts, except HV.

In addition, the percentage of participants who asserted absolutely no chance to move into a residential care home in 5 years if their health worsens slightly increased from 31.3% to 34.6%. Proportion of participants who rated themselves with more than 50% chance dropped from 50.4% to 47.3%. Likewise, there was similar distribution of participants' response in all sub-districts, except CR.

Table 4.5 Residential care service use expectation in 5 years†

	Total				CWB				WC				HV				CR				TH			
	Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final		Baseline		Final	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
If health remains the same																								
0%	306	74.6	369	81.3	46	78.0	32	88.9	119	72.1	125	72.3	27	84.4	36	83.7	17	70.8	25	80.6	97	74.6	151	88.3
10%	19	4.6	8	1.8	2	3.4	1	2.8	6	3.6	3	1.7	1	3.1	1	2.3	4	16.7	1	3.2	6	4.6	2	1.2
20%	18	4.4	6	1.3	3	5.1	1	2.8	8	4.8	3	1.7	1	3.1	0	0.0	1	4.2	0	0.0	5	3.8	2	1.2
30%	14	3.4	8	1.8	1	1.7	1	2.8	5	3.0	2	1.2	1	3.1	0	0.0	1	4.2	0	0.0	6	4.6	5	2.9
40%	1	0.2	1	0.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	3.2	1	0.8	0	0.0
50%	30	7.3	33	7.3	3	5.1	1	2.8	14	8.5	22	12.7	0	0.0	3	7.0	1	4.2	3	9.7	12	9.2	4	2.3
60%	2	0.5	2	0.4	2	3.4	0	0.0	0	0.0	1	0.6	0	0.0	1	2.3	0	0.0	0	0.0	0	0.0	0	0.0
70%	6	1.5	2	0.4	0	0.0	0	0.0	4	2.4	0	0.0	1	3.1	0	0.0	0	0.0	0	0.0	1	0.8	2	1.2
80%	8	2.0	3	0.7	1	1.7	0	0.0	5	3.0	3	1.7	1	3.1	0	0.0.	0	0.0	0	0.0	1	0.8	0	0.0
90%	1	0.2	3	0.7	0	0.0	0	0.0	1	0.6	2	1.2	0	0.0	1	2.3	0	0.0	0	0.0	0	0.0	0	0.0
100%	5	1.2	19	4.2	1	1.7	0	0.0	3	1.8	12	6.9	0	0.0	1	2.3	0	0.0	1	3.2	1	0.8	5	2.9
If health worsens																								
0%	125	31.3	157	34.6	23	41.1	16	44.4	47	29.6	52	30.1	8	25.0	22	51.2	7	30.4	7	22.6	40	30.8	60	35.1
10%	22	5.5	27	5.9	3	5.4	1	2.8	6	3.8	7	4.0	1	3.1	5	11.6	0	0.0	2	6.5	12	9.2	12	7.0
20%	19	4.8	17	3.7	1	1.8	0	0.0	7	4.4	8	4.6	1	3.1	0	0.0	2	8.7	2	6.5	8	6.2	7	4.1
30%	26	6.5	30	6.6	0	0.0	1	2.8	14	8.8	7	4.0	2	6.3	2	4.7	2	8.7	1	3.2	8	6.2	19	11.1
40%	7	1.8	8	1.8	1	1.8	0	0.0	1	0.6	2	1.2	0	0.0	1	2.3	2	8.7	1	3.2	3	2.3	4	2.3
50%	104	26.0	104	22.9	15	26.8	6	16.7	42	26.4	43	24.9	11	34.4	7	16.3	6	26.1	10	32.3	30	23.1	38	22.2
60%	6	1.5	18	4.0	2	3.6	5	13.9	3	1.9	3	1.7	0	0.0	1	2.3	1	4.3	2	6.5	0	0.0	7	4.1
70%	22	5.5	12	2.6	3	5.4	2	5.6	4	2.5	6	3.5	1	3.1	1	2.3	1	4.3	1	3.2	13	10.0	2	1.2
80%	23	5.8	17	3.7	3	5.4	1	2.8	12	7.5	8	4.6	1	3.1	1	2.3	2	8.7	2	6.5	5	3.8	5	2.9
90%	13	3.3	9	2.0	0	0.0	0	0.0	6	3.8	5	2.9	3	9.4	1	2.3	0	0.0	0	0.0	4	3.1	3	1.8
100%	33	8.3	55	12.1	5	8.9	4	11.1	17	10.7	32	18.5	4	12.5	2	4.7	0	0.0	3	9.7	7	5.4	14	8.2

†Applicable only to participants aged 60 years or above

4.1.2 Perceived Age-friendliness

Figure 4.1 and Table 4.6 presents the perceived age-friendliness and its change across the eight domains and 19 sub-domains in the WHO Age-friendly City Framework between baseline and final assessments. The possible score ranges from 1 (strongly disagree) to 6 (strongly agree).

Participants perceived the district to be age-friendly in general. Among the eight domains in the baseline and final assessments, "Social participation" ranked the highest (baseline: 4.3 and final: 4.5), followed by "Transportation" (baseline: 4.2 and final: 4.4). "Housing" ranked the lowest in both assessments (baseline: 3.6 and final: 3.7). "Outdoor spaces & buildings" climbed in rank from fifth to fourth, whereas "Civic participation & employment" dropped in rank from fifth to sixth. Seven out of eight domains showed positive change between baseline and final assessments, including "Outdoor spaces & building" from 3.9 to 4.2 ($p<0.001$), "Transportation" from 4.2 to 4.4 ($p<0.001$), "Housing" from 3.6 to 3.7 ($p=0.039$), "Social participation" from 4.3 to 4.5 ($p<0.001$), "Respect & social inclusion" from 4.1 to 4.3 ($p<0.001$), "Civic participation & employment" from 3.9 to 4.1 ($p=0.002$), and "Communication & information" from 4.0 to 4.2 ($p<0.001$).

Domain 1: Outdoor spaces & buildings

Participants gave significantly higher rating in "Outdoor spaces & buildings" (baseline: 3.9, final: 4.2, $p<0.001$). Significantly higher ratings were also observed in both "outdoor spaces" (baseline: 3.9, final: 4.3, $p<0.001$) and "buildings" (baseline: 3.9, final: 4.1, $p<0.001$) sub-domains.

Domain 2: Transportation

Participants gave significantly higher rating in "Transportation" (baseline: 4.2, final: 4.4, $p<0.001$). Significantly higher ratings were also observed in all sub-domains, including "road safety & maintenance" (baseline: 4.4, final: 4.5, $p=0.001$), "specialized services availability" (baseline: 3.9, final: 4.0, $p=0.017$), "public transport, comfort to use" (baseline: 4.2, final: 4.4, $p<0.001$), and "accessibility to public transport" (baseline: 4.4, final: 4.6, $p=0.001$).

Domain 3: Housing

Participants gave significantly higher rating in "Housing" (baseline: 3.6, final: 3.7, $p=0.039$). A significantly higher rating was observed in "environment" sub-domain (baseline: 3.8, final: 4.1, $p<0.001$), but not in "affordability & accessibility" (baseline: 3.4, final: 3.4, $p=0.782$).

Domain 4: Social participation

Participants gave significantly higher rating in "Social participation" (baseline: 4.3, final: 4.5, $p<0.001$). Significantly higher rating were also observed was in both sub-domains: "facilities and settings" (baseline: 4.4, final: 4.5, $p=0.001$) and "social activities" (baseline: 4.2, final: 4.4, $p<0.001$).

Domain 5: Respect & social inclusion

Participants gave significantly higher rating in district mean of "Respect & social inclusion" (baseline: 4.1, final: 4.3, $p<0.001$). Significantly higher ratings were also observed in both "attitude" (baseline: 4.2, final: 4.4, $p<0.001$) and "social inclusion opportunities" (baseline: 3.8, final: 4.1, $p<0.001$) sub-domains.

Domain 6: Civic participation & employment

Participants gave significantly higher rating in district mean of "Civic participation & employment" (baseline: 3.9, final: 4.1, $p=0.002$). Among the sub-domains, significantly higher rating was observed in "employment" (baseline: 3.8, final: 4.0, $p=0.001$) but not in "civic participation" (baseline: 4.3, final: 4.4, $p=0.088$).

Domain 7: Communication & information

Participants gave significantly higher rating in district mean of "Communication & information" (baseline: 4.0, final: 4.2, $p<0.001$). Significantly higher ratings were observed in both sub-domains: "information" (baseline: 4.0, final: 4.3, $p<0.001$) and "communication & digital devices" (baseline: 4.0, final: 4.1, $p=0.044$).

Domain 8: Community support & health services

Participants perceived no change in age-friendliness in "Community support & health services" (baseline: 3.7, final: 3.8, $p=0.085$). No significant change was found in the sub-domains of "medical/social services" (baseline: 4.1, final: 4.1, $p=0.221$) and "burial service" (baseline: 2.4, final: 2.5, $p=0.125$). However, participants gave a significantly higher rating in "emergency support" (baseline: 3.4, final: 3.6, $p=0.008$).

4.1.3 Sense of community

Table 4.7 shows the sense of community in the baseline and final assessments. The scale consists of 4 domains, each with a possible score from 2 to 10. A higher score means a higher sense of community. Participants gave a higher rating in the overall sense of community (baseline: 29.7, final: 29.9, $p=0.575$). Membership had the highest mean in both assessments (baseline: 8.1, final: 8.0). Participants gave a significantly higher rating in the needs fulfilment sub-domain (baseline: 6.9, final: 7.2, $p<0.001$), while a significantly lower rating was observed in emotional connectedness (baseline: 7.8, final: 7.6, $p=0.040$).

In the four sub-district communities, the total score ranged from 28.3 (HV) to 30.4 (CR) in baseline and 27.9 (HV) to 30.5 (CR) in the final assessment. Participants gave a higher rating in the overall sense of community in CWB (baseline: 29.3, final: 30.2, $p=0.238$), WC (baseline: 30.1, final: 30.3, $p=0.767$), CR (baseline: 30.4, final: 30.5, $p=0.958$) and TH (baseline: 29.8, final: 29.9, $p=0.693$). Participants gave a higher rating in needs fulfilment in CWB (baseline: 7.0, final: 7.7, $p=0.004$) and TH (baseline: 6.4, final: 7.0, $p=0.001$).

Figure 4.1 Change and final assessment mean on perceived age-friendliness by domains and sub-district communities

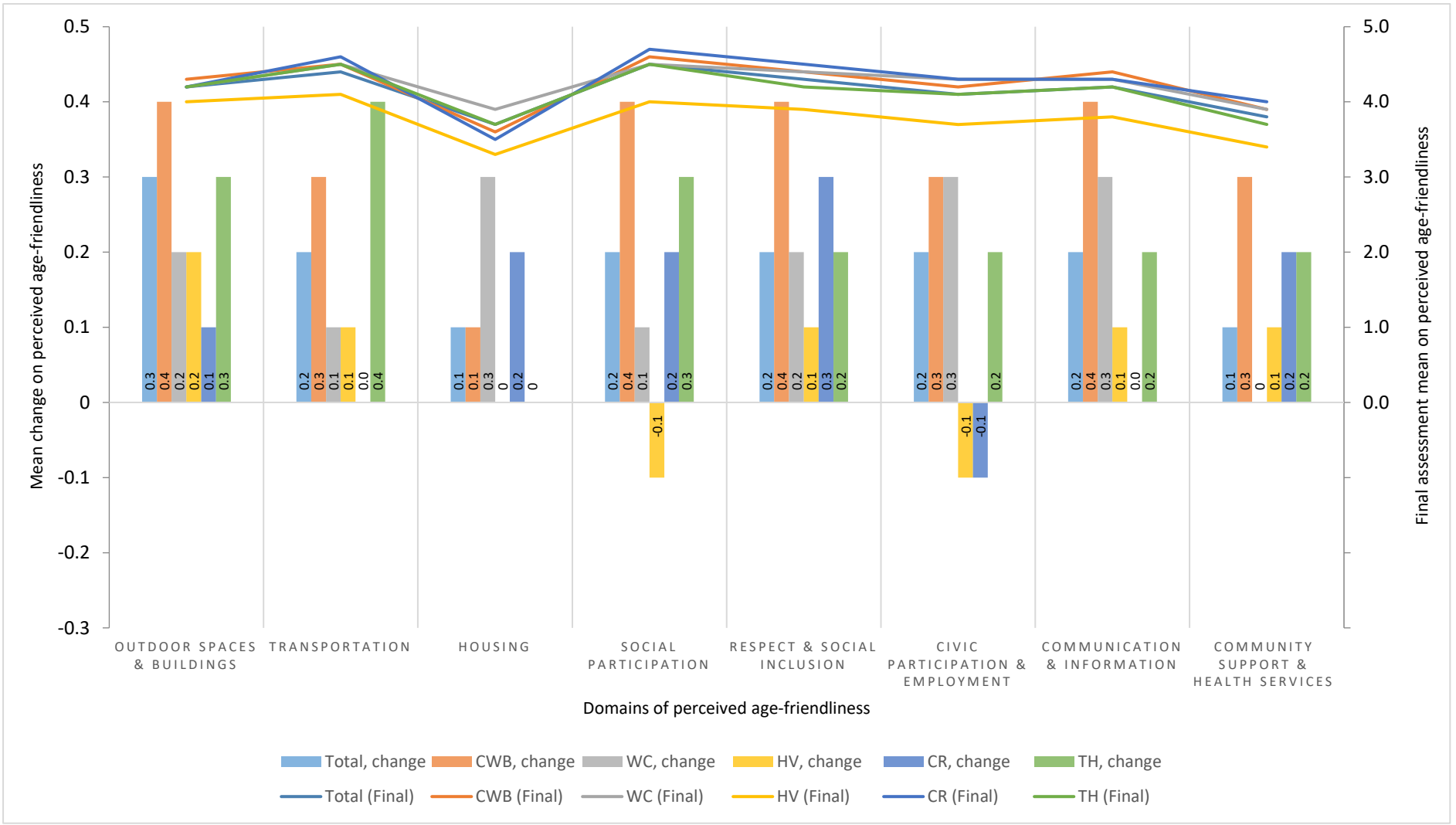

Table 4.6 Perceived age-friendliness

	Total				CWB		WC		HV		CR		TH	
	Baseline	Baseline rank	Final	Final rank	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final
Outdoor spaces & buildings	**3.9 (0.8)**	5	**4.2 (0.7)**	4	**3.9 (0.9)**	**4.3 (0.7)**	**4.0 (0.7)**	**4.2 (0.7)**	3.8 (0.7)	4.0 (0.8)	4.1 (0.8)	4.2 (0.8)	**3.9 (0.8)**	**4.2 (0.6)**
Outdoor spaces	**3.9 (0.9)**		**4.3 (0.8)**		**3.8 (1.0)**	**4.4 (0.7)**	**3.9 (0.9)**	**4.1 (0.8)**	**3.7 (0.7)**	**4.2 (0.9)**	3.8 (1.0)	4.1 (0.9)	**4.0 (0.8)**	**4.5 (0.7)**
Buildings	**3.9 (1.0)**		**4.1 (0.8)**		**3.9 (1.0)**	**4.2 (0.7)**	4.1 (0.8)	4.2 (0.8)	3.7 (0.9)	3.8 (0.9)	4.3 (0.9)	4.4 (0.8)	**3.6 (1.0)**	**3.9 (0.8)**
Transportation	**4.2 (0.8)**	2	**4.4 (0.6)**	2	**4.2 (0.9)**	**4.5 (0.6)**	4.4 (0.7)	4.5 (0.6)	4.0 (0.6)	4.1 (0.8)	4.6 (0.6)	4.6 (0.5)	**4.1 (0.8)**	**4.5 (0.4)**
Road safety & maintenance	**4.4 (0.9)**		**4.5 (0.8)**		4.2 (1.0)	4.5 (0.8)	4.4 (0.9)	4.5 (0.8)	4.3 (0.9)	4.3 (1.0)	4.5 (1.0)	4.6 (0.7)	**4.4 (0.9)**	**4.7 (0.5)**
Specialized services availability	**3.9 (1.1)**		**4.0 (1.0)**		3.9 (1.1)	4.1 (1.1)	4.0 (0.9)	4.1 (0.9)	3.5 (0.9)	3.6 (1.2)	4.3 (0.9)	4.2 (0.8)	**3.7 (1.2)**	**4.0 (0.9)**
Public transport, comfort to use	**4.2 (0.9)**		**4.4 (0.7)**		**4.0 (1.0)**	**4.4 (0.7)**	**4.3 (0.8)**	**4.5 (0.8)**	4.0 (0.7)	4.0 (1.0)	4.4 (0.8)	4.6 (0.5)	**4.2 (0.8)**	**4.5 (0.5)**
Public transport, accessibility	**4.4 (0.9)**		**4.6 (0.6)**		4.4 (0.9)	4.7 (0.6)	4.6 (0.7)	4.6 (0.6)	4.2 (0.7)	4.2 (0.9)	5.0 (0.6)	4.8 (0.5)	**4.1 (0.9)**	**4.5 (0.6)**
Housing	**3.6 (1.0)**	8	**3.7 (1.0)**	8	3.5 (1.1)	3.6 (1.0)	**3.6 (1.0)**	**3.9 (1.1)**	3.3 (0.7)	3.3 (1.2)	3.3 (0.9)	3.5 (1.1)	3.7 (1.0)	3.7 (0.8)
Affordability & accessibility	3.4 (1.1)		3.4 (1.2)		3.3 (1.2)	3.2 (1.2)	**3.3 (1.2)**	**3.6 (1.2)**	2.9 (0.9)	2.7 (1.3)	3.2 (1.0)	3.3 (1.4)	**3.7 (1.1)**	**3.3 (1.0)**
Environment	**3.8 (1.1)**		**4.1 (1.1)**		3.7 (1.2)	4.0 (1.0)	**3.8 (1.1)**	**4.1 (1.1)**	3.8 (0.8)	3.8 (1.3)	3.5 (1.0)	3.7 (1.0)	**3.8 (1.1)**	**4.2 (0.9)**
Social participation	**4.3 (0.8)**	1	**4.5 (0.7)**	1	**4.2 (0.9)**	**4.6 (0.7)**	4.4 (0.7)	4.5 (0.7)	4.1 (0.7)	4.0 (1.2)	4.5 (0.6)	4.7 (0.5)	**4.2 (0.8)**	**4.5 (0.6)**
Facilities and settings	**4.4 (0.8)**		**4.5 (0.8)**		**4.2 (0.9)**	**4.8 (0.7)**	4.5 (0.7)	4.6 (0.7)	4.3 (0.9)	4.1 (1.3)	4.6 (0.7)	4.8 (0.5)	**4.3 (0.9)**	**4.6 (0.6)**
Social activities	**4.2 (0.8)**		**4.4 (0.8)**		**4.1 (0.9)**	**4.5 (0.8)**	4.3 (0.8)	4.4 (0.7)	3.9 (0.7)	3.9 (1.2)	4.5 (0.7)	4.6 (0.6)	**4.2 (0.9)**	**4.5 (0.6)**
Respect & social inclusion	**4.1 (0.8)**	3	**4.3 (0.8)**	3	**4.0 (0.9)**	**4.4 (0.6)**	**4.2 (0.7)**	**4.4 (0.7)**	3.8 (0.9)	3.9 (1.1)	4.2 (0.9)	4.5 (0.5)	4.0 (0.8)	4.2 (0.6)
Attitude	**4.2 (0.8)**		**4.4 (0.7)**		**4.0 (0.8)**	**4.5 (0.6)**	**4.3 (0.7)**	**4.5 (0.7)**	4.0 (0.8)	4.0 (1.1)	4.5 (0.7)	4.6 (0.5)	4.3 (0.8)	4.4 (0.6)
Social inclusion opportunities	**3.8 (1.0)**		**4.1 (1.0)**		3.8 (1.1)	4.1 (0.9)	**4.0 (0.9)**	**4.3 (0.9)**	3.5 (1.1)	3.6 (1.3)	**3.7 (1.3)**	**4.4 (0.7)**	3.6 (1.1)	3.8 (1.0)
Civic participation & employment	**3.9 (0.9)**	5	**4.1 (0.9)**	6	3.9 (1.0)	4.2 (0.9)	**4.0 (0.9)**	**4.3 (0.9)**	3.8 (1.0)	3.7 (1.2)	4.4 (0.7)	4.3 (0.7)	**3.9 (0.9)**	**4.1 (0.8)**
Civic participation	4.3 (1.1)		4.4 (1.0)		4.1 (1.2)	4.4 (1.0)	4.4 (1.0)	4.5 (0.9)	4.2 (1.0)	3.8 (1.4)	4.8 (0.6)	4.5 (0.9)	**4.2 (1.1)**	**4.4 (1.0)**
Employment	**3.8 (1.0)**		**4.0 (1.0)**		3.8 (1.0)	4.1 (1.0)	**3.9 (1.0)**	**4.2 (0.9)**	3.6 (1.1)	3.6 (1.2)	4.2 (0.8)	4.3 (0.8)	3.8 (1.0)	4.0 (0.9)
Communication & information	**4.0 (0.8)**	4	**4.2 (0.8)**	4	**4.0 (0.9)**	**4.4 (0.8)**	**4.0 (0.8)**	**4.3 (0.8)**	3.7 (0.8)	3.8 (1.1)	4.3 (0.7)	4.3 (0.7)	**4.0 (0.8)**	**4.2 (0.6)**
Information	**4.0 (0.9)**		**4.3 (0.8)**		**4.0 (0.9)**	**4.5 (0.8)**	**4.1 (0.8)**	**4.3 (0.8)**	3.6 (0.9)	3.8 (1.2)	4.4 (0.7)	4.4 (0.7)	**4.0 (0.9)**	**4.3 (0.8)**
Communication & digital devices	**4.0 (1.0)**		**4.1 (1.0)**		4.0 (1.1)	4.2 (1.0)	4.0 (1.0)	4.2 (0.9)	3.9 (1.0)	3.8 (1.1)	4.4 (1.0)	4.2 (1.0)	4.0 (1.1)	4.1 (0.9)
Community support & health services	3.7 (0.8)	7	3.8 (0.8)	7	3.6 (1.0)	3.9 (0.9)	3.9 (0.8)	3.9 (0.8)	3.3 (0.7)	3.4 (1.0)	3.8 (0.8)	4.0 (0.7)	3.5 (0.8)	3.7 (0.6)
Medical/social services	4.1 (0.9)		4.1 (0.9)		**3.9 (1.0)**	**4.3 (0.9)**	4.3 (0.8)	4.2 (0.9)	3.7 (0.8)	3.7 (1.0)	4.3 (0.9)	4.4 (0.7)	**3.9 (0.9)**	**4.1 (0.8)**
Emergency support	**3.4 (1.3)**		**3.6 (1.2)**		3.3 (1.2)	3.5 (1.2)	3.6 (1.3)	3.7 (1.2)	**2.7 (1.0)**	**3.4 (1.2)**	3.4 (1.4)	3.9 (1.1)	3.6 (1.3)	3.6 (1.1)
Burial service	2.4 (1.3)		2.5 (1.2)		2.7 (1.4)	2.8 (1.5)	2.6 (1.4)	2.7 (1.2)	2.2 (0.9)	2.4 (1.2)	2.5 (1.2)	2.7 (1.1)	2.2 (1.2)	2.3 (1.1)

All reported numbers are mean (SD)
The possible responses are: 1 (strongly disagree), 2 (disagree), 3 (a little bit disagree), 4 (a little bit agree), 5 (agree), 6 (strongly agree).
Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

Table. 4.7 Sense of community

	Total		**CWB**		**WC**		**HV**		**CR**		**TH**	
	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final
Need fulfilment	**6.9 (1.6)**	**7.2 (1.5)**	**7.0 (1.3)**	**7.7 (1.5)**	7.2 (1.5)	7.3 (1.4)	7.0 (1.4)	6.8 (1.9)	6.8 (2.1)	7.5 (1.2)	**6.4 (1.8)**	**7.0 (1.5)**
Membership	8.1 (1.4)	8.0 (1.1)	7.9 (1.7)	7.8 (1.1)	8.1 (1.3)	8.0 (1.2)	7.8 (1.4)	7.6 (1.5)	8.2 (1.3)	8.2 (0.7)	8.2 (1.3)	8.2 (0.9)
Influence	7.0 (1.4)	7.1 (1.4)	6.9 (1.5)	7.2 (1.1)	7.1 (1.4)	7.2 (1.4)	6.2 (1.2)	6.4 (1.6)	7.2 (1.3)	7.2 (1.2)	7.1 (1.5)	7.1 (1.3)
Emotional connection	**7.8 (1.3)**	**7.6 (1.3)**	7.6 (1.5)	7.5 (1.0)	7.8 (1.3)	7.7 (1.3)	7.3 (1.2)	7.1 (1.6)	7.8 (1.6)	7.6 (1.2)	8.0 (1.2)	7.8 (1.1)
Total score	29.7 (4.2)	29.9 (4.0)	29.3 (5.0)	30.2 (3.4)	30.1 (3.9)	30.3 (4.2)	28.3 (4.0)	27.9 (5.1)	30.4 (4.4)	30.5 (3.3)	29.8 (4.2)	29.9 (3.3)

The possible responses are: 1 (strongly disagree), 2 (disagree), 3 (a little bit disagree), 4 (a little bit agree), 5 (agree), 6 (strongly agree).

Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

4.1.4 Sub-district Community Comparison by Age Groups

Table 4.8 and Table 4.9 present the change in perceived age-friendliness and sense of community by age groups in both district and sub-district levels, respectively. Younger participants represents aged 18 – 49 and older participants represents aged 50 or above.

Perceived age-friendliness

In general, older participants perceived higher level of age-friendliness across the eight domains than younger participants. In the baseline assessment, older participants gave significantly higher ratings than younger participants in all domains, namely "Outdoor spaces & buildings" (younger: 3.5, older: 4.0, $p<0.001$), "Transportation" (younger: 3.8, older: 4.3, $p<0.001$), "Housing" (younger: 2.9, older: 3.7, $p<0.001$), "Social participation" (younger: 3.7, older: 4.4, $p<0.001$), "Respect & social inclusion" (younger: 3.5, older: 4.2, $p<0.001$), "Civic participation & employment" (younger: 3.4, older: 4.0, $p<0.001$), "Communication & information" (younger: 3.5, older: 4.1, $p<0.001$), and "Community support & health services" (younger: 3.3, older: 3.7, $p<0.001$). In the final assessment, older participants gave significantly higher ratings than younger participants in seven out of eight domains, including "Outdoor spaces & buildings" (younger: 3.9, older: 4.2, $p=0.001$), "Transportation" (younger: 4.1 older: 4.5, $p<0.001$), "Housing" (younger: 2.9, older: 3.8, $p<0.001$), "Social participation" (younger: 4.1, older: 4.5, $p<0.001$), "Respect & social inclusion" (younger: 3.9, older: 4.3, $p<0.001$), "Civic participation & employment" (younger: 3.5, older: 4.2, $p<0.001$), and "Communication & information" (younger: 3.8, older: 4.3, $p<0.001$).

Between the baseline and final assessments, younger participants gave significantly higher ratings in four domains, including "Outdoor spaces & buildings" (baseline: 3.5, final: 3.9, $p=0.007$), "Transportation" (baseline: 3.8, final: 4.1, $p=0.007$), "Social participation" (baseline: 3.7, final: 4.1, $p=0.017$), and "Respect & social inclusion" (baseline: 3.5, final: 3.9, $p=0.017$). Meanwhile, older participants gave significantly higher ratings in seven domains, including "Outdoor spaces & buildings" (baseline: 4.0, final: 4.3, $p<0.001$), "Transportation" (baseline: 4.3, final: 4.5, $p<0.001$), "Housing" (baseline: 3.7, final: 3.8, $p=0.035$), "Social participation" (baseline: 4.4, final: 4.5, $p=0.006$), "Respect & social inclusion" (baseline: 4.2, final: 4.3, $p=0.001$), "Civic participation & employment" (baseline: 4.0, final: 4.2, $p=0.002$), and "Communication & information" (baseline: 4.1, final: 4.3, $p<0.001$).

Sense of community

Compared with younger participants, older participants reported greater sense of community. In the baseline assessment, older participants had a significantly higher

total score (younger: 26.4, older: 30.2, $p<0.001$) and sub-scale scores in three out of four domains, including membership (younger: 6.9, older: 8.3, $p<0.001$), influence (younger: 6.2, older: 7.1, $p<0.001$), emotional connection (younger: 6.7, older: 7.9, $p<0.001$), and the total score (younger: 26.4, older: 30.2, $p<0.001$). In the final assessment, older participants also gave significantly higher ratings than younger participants in the total score (younger: 27.3, older: 30.2, $p<0.001$) and in three of its domains, including membership (younger: 7.2, older: 8.1, $p<0.001$), influence (younger: 6.3, older: 7.2, $p<0.001$), and emotional connection (younger: 6.7, older: 7.7, $p<0.001$).

Older participants perceived the same level of sense of community between baseline and final assessments (baseline: 30.2, final: 30.2, $p=0.981$). Among the domains, older participants gave higher ratings in needs fulfilment (baseline: 6.8, final: 7.2, $p=0.002$) and influence (baseline: 7.1, final 7.2, $p=0.478$) but gave lower ratings in sense of membership (baseline: 8.3, final: 8.1, $p=0.079$) and emotional connection (baseline: 7.9, final: 7.7, $p=0.011$). Younger participants gave a higher rating in the overall sense of community (baseline: 26.4, final: 27.3, $p=0.395$). Among the domains, younger participants gave a higher rating in needs fulfillment (baseline: 6.7, final: 7.2, $p=0.102$), membership (baseline: 6.9, final: 7.2, $p=0.436$), influence (baseline: 6.2, final: 6.3, $p=0.717$), and emotional connection (baseline: 6.7, final: 6.7, $p=0.996$).

Between baseline and final assessments, younger participants gave a higher overall score in CWB (baseline: 22.6, final: 28.3, $p=0.063$), WC (baseline: 26.3, final: 27.0, $p=0.694$), HV (baseline: 26.2, final: 27.2, $p=0.614$), and CR (baseline: 25.5, final: 27.8, $p=0.483$) but not in TH (baseline: 29.3, final: 27.7, $p=0.602$). The older participants gave a higher score in WC (baseline: 30.6, final: 30.8, $p=0.538$) and TH (baseline: 29.8, final: 30.0, $p=0.621$), but a lower score in HV (baseline: 28.9, final: 28.0, $p=0.430$) and CR (baseline: 31.3, final: 30.9, $p=0.634$). CWB older participants reported no change in the total score (baseline: 30.5, final: 30.5, $p=0.951$). In the CWB sub-districts, both younger participants (baseline: 5.8, final: 7.2, p=0.032) and older participants (baseline: 7.2, final: 7.7, $p=0.033$) gave a significantly higher rating in the needs fulfillment sub-domain. Older participants in TH also gave a significantly higher rating in the needs fulfillment sub-domain (baseline: 6.4, final: 7.0, $p=0.002$).

Table. 4.8 Perceived age-friendliness

		Total		CWB		WC		HV		CR		TH	
		Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final
Outdoor spaces & buildings	**18-49**	**3.5 (0.9)**	**3.9 (0.6)**	3.3 (1.0)	3.7 (0.4)	3.5 (0.6)	3.8 (0.6)	3.8 (1.0)	4.3 (0.5)	3.8 (1.3)	3.8 (0.8)	3.5 (0.9)	4.1 (0.6)
	≥50	**4.0 (0.8)**	**4.2 (0.7)**	**4.0 (0.8)**	**4.4 (0.6)**	**4.0 (0.7)**	**4.2 (0.7)**	3.8 (0.6)	4.0 (0.8)	4.2 (0.7)	4.3 (0.7)	**3.9 (0.8)**	**4.2 (0.6)**
Transportation	**18-49**	**3.8 (0.9)**	**4.1 (0.5)**	**3.3 (1.0)**	**4.1 (0.3)**	4.0 (0.7)	4.0 (0.6)	3.6 (0.7)	4.1 (0.6)	4.4 (0.5)	4.3 (0.3)	3.7 (0.9)	4.3 (0.4)
	≥50	**4.3 (0.7)**	**4.5 (0.6)**	4.4 (0.7)	4.6 (0.6)	4.4 (0.7)	4.5 (0.6)	4.1 (0.6)	4.1 (0.9)	4.7 (0.6)	4.6 (0.5)	**4.1 (0.8)**	**4.5 (0.4)**
Housing	**18-49**	2.9 (1.0)	2.9 (1.0)	2.5 (1.0)	3.1 (1.0)	2.8 (1.1)	2.8 (1.0)	3.2 (0.7)	3.1 (1.1)	3.3 (1.3)	3.2 (1.2)	3.1 (1.1)	2.7 (1.1)
	≥50	**3.7 (0.9)**	**3.8 (0.9)**	3.7 (1.0)	3.7 (1.0)	**3.7 (0.9)**	**4.0 (1.0)**	3.3 (0.7)	3.3 (1.2)	3.4 (0.8)	3.6 (1.1)	3.8 (1.0)	3.8 (0.7)
Social participation	**18-49**	**3.7 (0.9)**	**4.1 (0.8)**	3.4 (1.0)	4.0 (0.5)	3.9 (0.7)	4.2 (0.7)	3.4 (0.9)	3.6 (1.0)	4.2 (0.9)	4.6 (0.5)	3.7 (1.1)	4.1 (1.0)
	≥50	**4.4 (0.7)**	**4.5 (0.7)**	**4.3 (0.8)**	**4.7 (0.7)**	4.5 (0.6)	4.6 (0.6)	4.3 (0.6)	4.1 (1.3)	4.6 (0.5)	4.7 (0.5)	**4.3 (0.8)**	**4.5 (0.6)**
Respect & Social Inclusion	**18-49**	**3.5 (0.9)**	**3.9 (0.7)**	**3.2 (1.0)**	**4.1 (0.4)**	3.6 (0.7)	3.9 (0.7)	3.3 (0.8)	3.4 (0.7)	4.0 (1.1)	4.7 (0.2)	3.6 (1.0)	3.9 (0.7)
	≥50	**4.2 (0.8)**	**4.3 (0.7)**	**4.1 (0.8)**	**4.4 (0.7)**	**4.3 (0.7)**	**4.5 (0.7)**	4.0 (0.8)	4.0 (1.1)	4.2 (0.9)	4.5 (0.6)	4.4 (0.8)	4.2 (0.6)
Civic participation & employment	**18-49**	3.4 (0.9)	3.5 (0.9)	3.1 (1.1)	3.8 (0.6)	3.3 (0.7)	3.5 (1.0)	3.2 (0.9)	3.0 (0.9)	4.3 (0.5)	4.2 (0.5)	3.5 (1.1)	3.4 (0.7)
	≥50	**4.0 (0.9)**	**4.2 (0.9)**	4.1 (0.9)	4.2 (0.9)	**4.1 (0.8)**	**4.4 (0.8)**	3.9 (1.0)	3.8 (1.2)	4.4 (0.7)	4.3 (0.8)	3.9 (0.9)	4.1 (0.8)
Communication & information	**18-49**	3.5 (0.9)	3.8 (0.8)	3.3 (1.0)	3.8 (0.4)	3.7 (0.6)	3.8 (0.8)	3.4 (0.7)	3.4 (0.8)	4.2 (0.9)	4.5 (0.4)	3.5 (1.1)	4.0 (0.8)
	≥50	**4.1 (0.8)**	**4.3 (0.8)**	**4.1 (0.8)**	**4.5 (0.8)**	**4.1 (0.8)**	**4.4 (0.7)**	3.8 (0.8)	3.9 (1.1)	4.3 (0.7)	4.3 (0.7)	4.1 (0.7)	4.2 (0.6)
Community support & health services	**18-49**	3.3 (0.9)	3.6 (0.9)	**2.7 (0.9)**	**3.9 (0.6)**	3.8 (0.7)	3.6 (1.0)	3.2 (0.9)	3.5 (0.7)	4.2 (0.6)	4.0 (0.7)	3.1 (0.9)	3.7 (0.9)
	≥50	3.7 (0.8)	3.8 (0.8)	3.8 (0.9)	3.9 (0.9)	3.9 (0.8)	3.9 (0.8)	3.3 (0.7)	3.4 (1.0)	3.8 (0.9)	4.0 (0.7)	3.6 (0.8)	3.7 (0.6)

All reported numbers are mean (SD)
The possible responses are: 1 (strongly disagree), 2 (disagree), 3 (a little bit disagree), 4 (a little bit agree), 5 (agree), 6 (strongly agree).
Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

Table. 4.9 Sense of community

		Total		CWB		WC		HV		CR		TH	
		Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final	Baseline	Final
Need fulfilment	**18-49**	6.7 (1.8)	7.2 (1.6)	**5.8 (1.6)**	**7.8 (1.8)**	7.3 (1.9)	6.9 (1.5)	6.8 (1.3)	7.6 (1.9)	6.8 (2.1)	7.0 (1.2)	6.5 (1.8)	7.0 (1.7)
	≥50	**6.8 (1.6)**	**7.2 (1.5)**	**7.2 (1.2)**	**7.7 (1.4)**	7.2 (1.4)	7.4 (1.4)	7.0 (1.5)	6.6 (1.9)	6.8 (2.1)	7.6 (1.3)	**6.4 (1.8)**	**7.0 (1.5)**
Membership	**18-49**	6.9 (2.0)	7.2 (1.7)	5.9 (1.9)	6.7 (1.0)	6.6 (1.7)	7.4 (1.9)	7.3 (1.4)	6.7 (1.4)	6.3 (0.5)	7.6 (1.1)	7.8 (2.5)	7.1 (1.6)
	≥50	8.3 (1.2)	8.1 (1.0)	8.3 (1.4)	8.0 (1.0)	8.3 (1.1)	8.2 (1.0)	7.9 (1.4)	7.8 (1.4)	8.6 (1.1)	8.2 (0.6)	8.3 (1.1)	8.2 (0.8)
Influence	**18-49**	6.2 (1.7)	6.3 (1.5)	5.3 (1.9)	6.7 (1.5)	6.1 (1.1)	6.1 (1.6)	5.2 (1.1)	6.2 (1.4)	6.3 (1.5)	6.4 (1.5)	7.2 (1.9)	6.6 (1.1)
	≥50	7.1 (1.3)	7.2 (1.3)	7.1 (1.3)	7.3 (1.0)	7.2 (1.4)	7.4 (1.3)	6.5 (1.1)	6.5 (1.7)	7.4 (1.2)	7.4 (1.2)	7.1 (1.4)	7.1 (1.3)
Emotional connection	**18-49**	6.7 (1.7)	6.7 (1.5)	5.6 (1.6)	7.2 (1.2)	6.4 (1.3)	6.6 (1.8)	6.9 (1.2)	6.6 (1.3)	6.3 (1.7)	6.8 (1.1)	7.8 (1.9)	7.0 (1.4)
	≥50	**7.9 (1.2)**	**7.7 (1.2)**	7.9 (1.2)	7.5 (1.0)	7.9 (1.1)	7.9 (1.1)	7.4 (1.2)	7.2 (1.6)	8.0 (1.5)	7.7 (1.2)	8.0 (1.1)	7.8 (1.1)
Total score	**18-49**	26.4 (5.9)	27.3 (5.4)	22.6 (6.2)	28.3 (4.1)	26.3 (4.8)	27.0 (6.2)	26.2 (3.5)	27.2 (4.6)	25.5 (4.4)	27.8 (4.8)	29.3 (7.1)	27.7 (5.4)
	≥50	30.2 (3.7)	30.2 (3.6)	30.5 (3.7)	30.5 (3.2)	30.6 (3.5)	30.8 (3.5)	28.9 (3.9)	28.0 (5.3)	31.3 (3.9)	30.9 (2.9)	29.8 (3.7)	30.0 (3.2)

The possible responses are: 1 (strongly disagree), 2 (disagree), 3 (a little bit disagree), 4 (a little bit agree), 5 (agree), 6 (strongly agree).

Outcomes with significant changes are marked in bold. Comparisons are based on the means between baseline and final assessment population.

4.2 Focus Group Study

4.2.1 Participant Characteristics

We conducted five focus groups to collect residents' opinions on the age-friendliness of the Wan Chai District. A total of 34 participants joined the focus groups. Majority (76.5%) of the participants were aged 65 years or above and have been living in the district for 38.9 years on average. Table 4.10 shows the sociodemographic characteristics of the focus group participants.

Table 4.10 Sociodemographic characteristics of focus group participants

Characteristics	**N**	**%**
Gender		
Male	6	17.6
Female	28	82.4
Age group		
18-49 years	4	11.8
50-64 years	4	11.8
65-79 years	19	55.9
≥80 years	7	20.6
Education		
Nil / pre-primary	1	2.9
Primary	5	14.7
Secondary (F.1-3)	11	32.4
Secondary (F.4-7)	6	17.6
Post-secondary	11	32.4
Housing		
Public housing	0	0.0
Private, housing	33	97.1
Other	1	2.9
Residence years (mean, SD)	38.9	16.0
Living arrangement		
Living alone	13	38.2
With spouse only	7	20.6
Spouse and other family members	6	17.6
With children / grandchildren	5	14.7
With other family members	3	8.8
Monthly personal income		
No income	5	14.7
HK$1 to HK$5,999	16	47.1
HK$6,000 to HK$9,999	6	17.6
HK$10,000 to HK$19,999	1	2.9
HK$20,000 to HK$29,999	2	5.9
HK$30,000 to HK$59,999	2	5.9
Unknown/ reject	2	5.9

Findings from thematic analyses of the focus groups are presented for the eight domains of WHO Age-friendly City framework, which are further grouped into three areas, namely (1) physical environment; (2) social and cultural environment; and (3) communication, community and health services. Most participants expressed a sense of pride and belonging of living in the Wan Chai District, and offered many comments to identify areas for further improvement.

4.2.2 Physical Environment

WHO Domain 1: Outdoor spaces and buildings

Improvements:

(i) Street hygiene and outlook: The overall street hygiene has been improved, especially the alleys around those old buildings in Wan Chai. Participants attributed it to the increasing frequency of street cleaning activities.

(ii) Elevators: New elevators installed in the footbridge that connects to the Hong Kong Convention and Exhibition Centre, and the footbridge that connects to the Revenue Tower make the footbridges more accessible to older people and people with disability.

(iii) Seats: Participants acknowledged the growing number of seats provided in the bus stops near the Southorn Playground, Duke of Windsor Social Services Building, Gloucester Road, and Tin Hau MTR station. These seats could provide necessary support to older people when they are waiting for transportation, although some expressed their concern about the close proximity of seats to roadside which might create health problem to the older people with the poor air quality.

(iv) Outdoor public space and facilities: The redeveloped Lee Tung Street that provides a refurbished pedestrian walkway with modern restaurants and outlets has attracted many visitors. Participants appreciated the sufficient number of seats provided in the walkway. Since the opening of Exit D of Wan Chai Station in 2017, residents can access Lee Tung Avenue from Hennessy Road through the underground walkway. The new escalator in Lee Tung Avenue allows participants to take the route without climbing stairs. Participants also noticed the expansion of open space and green belt near Swatow Street Sitting-out area and the waterfront area.

Concerns:

(i) New bars and restaurants in Swatow Street and Amoy Street bring about noise pollution and hygiene problem. The noise created by the bars' patrons affects participants' life at night. These bars and restaurants also create different types of environmental pollution in the streets by disposing kitchen waste and foul water and emission of cooking fume.

(ii) Parks: Some participants indicated the insufficient park and fitness equipment in Wan Chai hindered active participation in physical activities among older people. Participants suggested to install more fitness equipment in existing parks as well as ensure timely maintenance of existing equipment in Wan Chai Park. Moreover, some participants pointed out the squat toilets in Southorn Playground is unfriendly to older people and should be replaced by sitting toilets.

(iii) Hygiene: Participants expressed concerns over hygiene problem in outdoor spaces that affect older residents' satisfaction of the community. Some examples were bird droppings in Wong Nai Chung Road as people regularly feed the pigeons in the area; trash in On Lok Lane due to housing rehabilitation in 1-3A

On Lok Lane until 2016; and street refuse near the Hopewell Centre, Wan Chai Road, and Tai Wong Street.

(iv) Overcrowdedness: Participants reported that Wan Chai was overcrowded by residents and visitors. Lee Tung Avenue and Tai Yuen Street are crowded with visitors during holidays. The increasing population due to recent development of high-rise building exacerbates the problem. The crowded streets and open areas make older people prone to accidents. Illegal parking in Wan Chai Road, Tai Wo Street, and Tai Wong Street has caused safety concern that ambulance may not drive through in the emergency.

WHO Domain 2: Transportation

Improvements:

(i) Attitude of driver: Participants indicated that bus and tram drivers were nice to older people. They are willing to answer older people's questions about the route, and provide sufficient time for older people to get on and off the vehicle.

(ii) Real-time bus information: The digital screen installed at some bus stations provide real-time bus arrival information, with big enough font size for older people to read. However, only limited bus stops have installed the system and participants suggested that the system should be installed in more bus stops as well as in tram stations.

Concerns:

(i) Public transport accessibility: Public transportation in Happy Valley was considered less accessible. Participants complaint about frequency reduction of minibus routes no. 5, no. 10, and no. 31 which led to longer waiting time.

(ii) Tram information: The tram information provided by mobile phone app become less accurate over these two years. Participant indicated that the destination displayed in the app was inconsistent with that of the actual arriving tram at the indicated time. This created confusion and inconvenience for older people.

(iii) Road Safety: Participants suggested to bring in the pilot traffic light system that is currently pilot tested in North Point. Older people can tap their octopus cards to extend the walking time. Participant suggested the system should be installed in Hennessy Road, as older people walking with assistive devices can hardly cross the wide road within limited time.

(iv) Sheltering areas of tram station: Participants noted that tram shelters at stations were too small for passengers to wait in the rain. Several tram stops do not have a shelter with a back panel that keeps passengers off the rain while they are waiting.

WHO Domain 3: Housing

Improvements:

(i) Accessibility: The urban renewal programme redevelops ageing buildings into new buildings with improved accessibility and more age-friendly design. Frail older people with poor mobility are more likely to be homebound when living in

tenement buildings without elevator. Participants believed that the redevelopment in the district could, on one hand, enhance the living environment, and make the housing more accessible to older people on the other hand.

Concerns:

(i) Renovation & maintenance: Most residential buildings in the district are privately-owned tenement houses requiring renovation and maintenance, which were challenging for older people. Older people often need minor in-house renovation and maintenance, such as the replacement of light bulbs and repairing broken windows. Generally, the workers charge a certain amount (e.g., few hundred dollars) for checking and charge more for materials and the actual work, which are unaffordable for many older people. Participants expressed the need to have a platform that advised sources of financial support and information for cheap and reliable contractors for undertaking minor maintenance and renovation works.

(ii) High property price: Some participants were concerned about the high property price in the district, making it difficult for older residents to own a home or rent an apartment. All of the new residential buildings in the district are luxury apartments targeting middle and upper class. Older people affected by the urban renewal programme may not be able to afford the high property price and relocate in the same district. Relocation of these people would weaken their existing social networks and force them to live in an unfamiliar environment.

(iii) Sub-divided flats and guesthouses: Some of the apartments in Wan Chai and Causeway Bay are turned into guesthouses or subdivided into four to five smaller units. These create pressure to existing facilities (e.g. elevators) due to increasing number of people getting in and out of the building. Moreover, it creates safety concern, as those sub-divided flats often extensively altered the flats without adherence to proper standards. Participants were worried about the building safety and environmental hygiene which may not meet the standards.

4.2.3 Social and Cultural Environment

WHO Domain 4: Social participation

Participants appreciated the sufficient and wide range of social activities in the district. They primarily engaged in such activities via District Elderly Community Centres, Neighbourhood Elderly Centres, NGOs, as well as the Leisure and Cultural Services Department of the district. Although participants have sufficient social participation opportunities, they posted some concerns under this topic:

Concerns:

(i) Lack of indoor gathering places: It was reported that there was a lack of suitable and accessible venues for social gatherings in the district. Most of the participants spend their leisure time in the district elderly centres, and a few of them would go to the public library. In absence of shopping mall as well as a civic centre for holding events and activities (e.g., Chinese operas), it may hinder residents' motivation to actively participate in the community.

(ii) Insufficient space and opening hours of elderly centres: Participants enjoyed going to elderly centres, which provided opportunity for meaningful social engagement such as interest classes, gathering, and entertainment in a comfortable indoor area. However, insufficient space and opening hours in elderly centres limit their participation. Some participants said that the centre ran out of space for routine activities (watching TV and reading newspaper) if there were group activities. Participants expressed their wish to expand the centre's physical space and extend the opening hours (from 8am to 8pm).

(iii) Ethnic minorities: Participants noted the lack of service for ethnic minorities. There are some services for young ethnic minorities in the district, but no elderly centre provides targeted services for ageing ethnic minorities. As the older generation of non-Chinese speaking population may not integrate well in local elderly centre, participants recommended to offer more support to this population in the district.

WHO Domain 5: Respect and social inclusion

(i) Respect: Older participants reported an advance of the culture of mutual respect and friendliness in the district. For example, some participants were offered seats on public transports, though not all shared similar positive experiences. Some older participants reported incidents when passengers focused on their smartphones and failed to give up priority seats to people in need. Besides, some elderly activities such as poon choi feast (or 'big bowl feast') organized by the District Council were appreciated by the participants, as this could enhance the mutual respect in the community.

WHO Domain 6: Civic participation & employment

Participants reported sufficient volunteer opportunities offered by elderly centres in the district. Some of them visited homes of and shared information with older people who lived alone. Some participants also reported their active engagement with District Council members to share their opinion regarding the district issue. Although participants have sufficient civic participation opportunities, they posted some concerns under this topic:

Concerns:

(i) Job opportunity: Participants recognised that very few job opportunities for older people are available in Hong Kong. They said the current insurance system which does not cover employees aged over 65 years old made employers hesitate to hire older adults. The lack of proper job retraining and information platform also hinder the elderly employment opportunity.

4.2.4 Communication, Community and Health Services

WHO Domain 7: Communication & information

Improvements:

(i) The use of smartphone communication application: Participants learned to use

messaging and social networking applications in mobile phone (e.g., WhatsApp) from elderly centres and reported the applications improved information sharing and exchange. They could deliver and receive district-related and centre-related information easily compared with the old time.

Concerns:

(i) Lack of promotion: Some participants highlighted the importance of elderly centre serving as the information hub in the district. They suggested that these centres should be more proactive in promoting their services and recruiting new members, as many older people in the district (especially in Tai Hang Road) were not aware of the existence of the centres and their services.

WHO Domain 8: Community support & health services

Improvements:

(i) Shortened waiting time in pharmacy: The waiting time for filling prescriptions in Tang Shiu Kin Hospital Violet Peel General Outpatient Clinic has been shortened from around 1-2 hours to half an hour. Participants attributed the improvement to the recent increase in resources and manpower in the clinic.

(ii) Accessibility of health services: Participants found the health service more accessible recently. Older people could use the automated telephone system to make a limited number of medical appointments only reserved for older people. The system also refers older people to other clinics should the booking is full in the original clinic. Older people have better access to general health care service.

Concerns:

(i) Accessibility: Although the automated telephone system and appointment quotas can enhance older people's accessibility to health care services, participants also unanimously agreed that it was very difficult for them to navigate the automated telephone appointment booking system. Most found the instructions given by the automated machine difficult to follow. Moreover, participants were also concerned about the long waiting time for specialist consultations, especially with ophthalmologists.

5. CONCLUSIONS

The Wan Chai District is a relatively old district in Hong Kong with 16.5% residents aged 65 years or older. Despite the within-district variation in resident population density and crowdedness, the district as a whole has made significant progress toward becoming more age-friendly in the past three years.

Our baseline and final assessments found that participants perceived the district to be age-friendly in general. Social participation ranked the highest among the eight perceived age-friendliness domains, followed by Transportation and Respect & social inclusion. The lowest rank was Housing. Participants perceived significantly higher ratings in seven domains from baseline assessment to final assessment, namely Outdoor spaces & buildings from 3.9 to 4.2, Transportation from 4.2 to 4.4, Housing from 3.6 to 3.7, Social participation from 4.3 to 4.5, Respect & social inclusion from 4.1 to 4.3, Civic participation & employment from 3.9 to 4.1 and Communication & information from 4.0 to 4.2. When comparing the sub-district communities, HV appeared to have a lower score in all eight domains of perceived age-friendliness. The age-friendliness in HV dropped slightly in Social participation from 4.1 to 4.0 and Civic participation & employment domain from 3.8 to 3.7.

The significantly improved age-friendliness in the domains of Social participation, Respect & social inclusion, Civic participation & employment, and Communication & information likely reflect the cumulative efforts of the district stakeholders that have been put into the district in the past years. The high score in the domains of Transportation and Outdoor spaces & buildings likely reflect the superior location of the district with access to all kinds of public transportation and outdoor spaces.

Focus group findings highlighted participants' views on improved areas during the past three years, and also highlighted some areas for further improvement. In terms of Outdoor spaces and buildings, participants found a noticeable improvement in the street hygiene and hardware (e.g., the installation of elevators, seats, as well as open space and green belt) within the district. Focus group participants also suggested to (1) better regulate the waste and noise pollution created by bars and restaurants, (2) improve street hygiene, and (3) improve park facilities, such as installing fitness equipment and overhead covers and ensuring timely maintenance of existing equipment.

With regard to Transportation, older people found the installation of digital screen displaying bus arrival information with large font size very useful to them. Moreover, participants agreed that bus and tram drivers were more helpful and nice to older people in recent years. Further improvements are needed including (1) increasing the frequency of certain bus and minibus routes; (2) improving accuracy of bus arrival information; (3) improving the traffic light system that facilitates older people to cross the roads safely; and (4) improving designs of tram stations to provide people a more comfortable environment during poor weather.

Urban renewal increases the accessibility of housing and makes it more age-friendly towards older people, although many of the new residential buildings are not affordable to older people. To improve the age friendliness in the Housing domain, the district can focus on increasing support to older tenants of tenement houses. Specific suggestions included (1) increasing support for renovating and maintaining tenement houses and old units; (2) mechanisms to control high property prices to ensure affordability of owning or renting a housing unit in the district by older adults; and (3) increasing law enforcement and regulation on sub-divided flats and guesthouses in the district.

To improve the age friendliness in the Social participation domain, the district can focus on (1) developing more suitable and accessible indoor venues for holding events and activities; (2) increasing resources and enhancing elderly centre capacity; and (3) providing services for ageing ethnic minorities.

Participants reported an atmosphere of mutual respect and friendliness in the district especially found in transportation. They suggested to continue the promotion of mutual respect and kindness, with younger people and visitors on public transportation as potential targets.

To improve the age friendliness in the Civic participation and employment domain, the district can focus on promoting elderly employment. Providing necessary job training and creating flexible and meaningful job opportunities to older people would be an important area for improvement.

Regarding the domain of Communication and information, a growing number of older population communicate and receive information through smartphones and instant messaging applications. Focus group participants suggested that elderly centres can further promote their services to more elderly non-members.

Participants acknowledged the shortened waiting time for filling prescriptions and increased accessibility to health care service in the district. However, they also suggested to (1) provide assistance for older people in navigating the automated telephone appointment system; and (2) reduce the waiting time for specialist services.

To conclude, there is a noticeable improvement in age-friendliness in the district during the past three years. Residents enjoy a good general sense of community and perceived age-friendliness in the Wan Chai District as found in both baseline and final assessments. Future work to move the district to become more age-friendly should leverage on the sense of membership and emotional connectedness in the district, strengthen the sense of influence and need fulfilment, to include older adults in implementing age-friendly work in the specific areas of improvements as outlined above.

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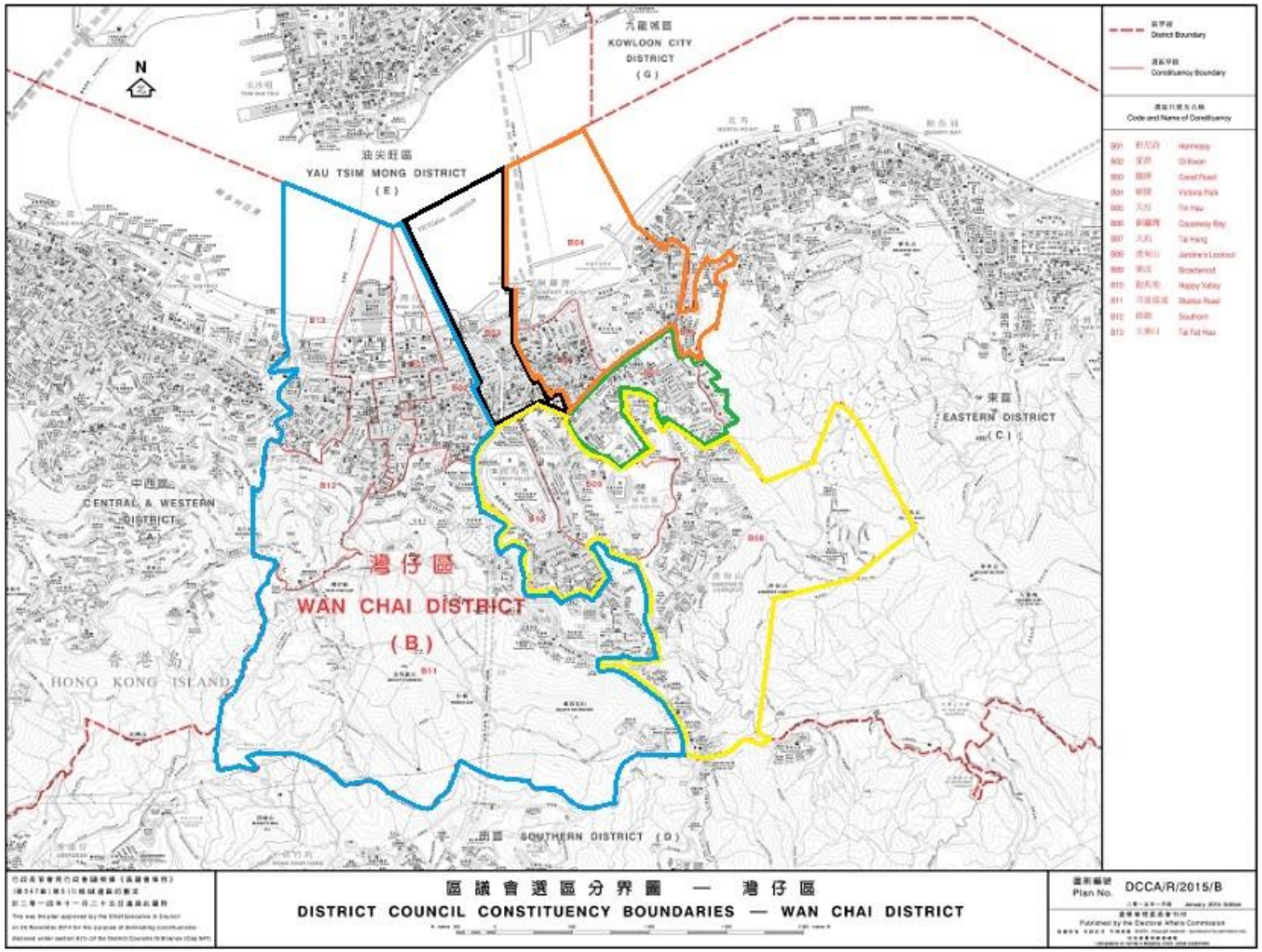
Appendix 1. District Map



Legend

The border of each cluster is marked by a particular colour:

---- Wan Chai (Blue)

---- Canal Road (Black)

---- Causeway Bay (Orange)

---- Tai Hang (Green)

---- Happy Valley (Yellow)

Appendix 2: Questionnaire (Chinese version only)

香港大學秀圃老年研究中心
Sau Po Centre on Ageing
The University of Hong Kong

職員專用 CW & WC	
參加者編號	
調查員編號	
檢查員編號	
非活躍個案	Y / N

A. 受訪者資料

A1) 您嘅性別係：
☐ (1) 男
☐ (2) 女

A2)年齡：
_____ (根據身份證上的出生日期)
若受訪者唔願意提供年齡，請揀以下最適當嘅年齡組別：

☐ (1) 18-19	☐ (5) 35-39	☐ (9) 55-59	☐ (13) 75-79
☐ (2) 20-24	☐ (6) 40-44	☐ (10) 60-64	☐ (14) 80-84
☐ (3) 25-29	☐ (7) 45-49	☐ (11) 65-69	☐ (15) 85+
☐ (4) 30-34	☐ (8) 50-54	☐ (12) 70-74	

A3)您所住嘅社區：[請在以下的社區中選擇一個，或在此處註明你居住大廈/屋苑名稱，以便職員確實你居住的社區:
(_____)

中西區:

堅尼地城
☐ (19) 堅尼地城及摩星嶺
☐ (20) 觀龍

西環、石塘咀及西營盤
☐ (21) 西環
☐ (22) 石塘咀
☐ (23) 西營盤
☐ (24) 正街
☐ (25) 水街

半山
☐ (26) 半山東
☐ (27) 衛城
☐ (28) 大學
☐ (29) 寶翠

中環及上環
☐ (30) 中環
☐ (31) 上環
☐ (32) 東華

山頂
☐ (47) 山頂

灣仔區:

銅鑼灣
☐ (33) 維園
☐ (34) 天后
☐ (35) 銅鑼灣

灣仔
☐ (36) 軒尼詩
☐ (37) 愛群
☐ (38) 修頓
☐ (39) 大佛口
☐ (40) 司徒拔道

跑馬地
☐ (41) 渣甸山
☐ (42) 樂活
☐ (43) 跑馬地

鵝頸
☐ (44) 鵝頸

大坑
☐ (45) 大坑
☐ (46) 勵德

A4)您喺所屬社區住左幾耐：

_____年

A5)您嘅婚姻狀況係(**一定要讀出所有選擇**)：

☐ (1) 從未結婚
☐ (2) 已婚
☐ (3) 喪偶
☐ (4) 離婚
☐ (5) 分居
☐ (6) 其他(請註明)：_____

A6)您嘅最高教育程度：

☐ (1) 未受教育/學前教育(幼稚園)
☐ (2) 小學
☐ (3) 初中(中一至中三)
☐ (4) 高中(中四至中七)
☐ (5) 專上教育：文憑/證書課程
☐ (6) 專上教育：副學位課程
☐ (7) 專上教育：學位課程或以上

A7a) 您住嘅房屋類型？

☐ (1)公共房屋 **(跳至 A7b)**
☐ (2)居屋 **(跳至 A7c)**
☐ (3)私人房屋 **(跳至 A7c)**
☐ (4)分租單位：如籠屋、板間房、床位 **(跳至 A8a)**
☐ (5)宿舍 **(跳至 A8a)**
☐ (6)其他，請註明：_____**(跳至 A8a)**

A7b) 您住嘅屋邨？**(完成後跳至 A8a)**

中西區:

☐ (50) 西環邨　　☐ (51) 觀龍樓

灣仔區:

☐ (52) 勵德邨

A7c) 您住嘅私人住宅單位係？

☐ (1) 租
☐ (2) 自己擁有
☐ (3) 家人擁有

A8a) 您居住樓宇嘅樓齡？

_____年

如果受訪者唔知，請揀以下最適當嘅樓齡：

☐ (1) 0-5 年
☐ (2) 6-10 年
☐ (3) 11-20 年
☐ (4) 21-30 年
☐ (5) 30 年以上

A8b) 您居住嘅大廈總共幾多層？

_____層

A8c) 您居住嘅大廈有沒有電梯？

☐ (1) 無
☐ (2) 有

A8d) 您從屋企出去，需要行樓梯？

☐ (1) 唔需要 **(跳至 A9a)**
☐ (2) 需要

A8e) 總共要行幾多級樓梯？

☐ (1) 1-5 級
☐ (2) 6-10 級
☐ (3) 11-15 級
☐ (4) 16-20 級
☐ (5) 21 級或以上

A9a) 您宜家有無同人住？

☐ (1) 無，自己一個住 **(跳至 A10a)**
☐ (2) 有

A9b) 您宜家同幾多人住？

_____人

A9c) 唔包括工人，您宜家同邊個住？**(可以揀多過一項)**

☐ (1) 配偶　　☐ (2) 子女
☐ (3) 女婿 / 媳婦　　☐ (4) 孫
☐ (5) 父母　　☐ (6) 祖父母
☐ (7) 兄弟姐妹　　☐ (8) 其他(請註明):_____

A9d) 有無工人同您住？

☐ (1) 無
☐ (2) 有

A10a) 您宜家有無返工？

☐ (1) 無 **(跳至 A10b)**

☐ (2) 有 **(跳至 A10c)**

A10b) 您宜家係？**(完成後跳至 A11a)**

☐ (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)：_____

A10c) 您宜家嘅工作模式？

☐ (1) 全職工作

☐ (2) 兼職工作

A10d) 過去一星期，工作左幾多小時？

_____小時

A11a) 您有無長期照顧其他人？

☐ (1) 無 **(跳至 A12a)**

☐ (2) 有

A11b) 您照顧嘅人係？

☐ (1) 長者

☐ (2) 殘疾人士

☐ (3) 小朋友

☐ (4) 其他

A11c) 您同您照顧嘅人係咩關係？

☐ (1) 朋友

☐ (2) 鄰居

☐ (3) 家人

☐ (4) 親戚

☐ (5) 其他

A12a) 過去三個月，您有無參與加過任何義工服務/活動？

☐ (1) 無

☐ (2) 有

A12b) **(只適用於 60 歲或以上人士)**

過去三個月，您有無用過/參加過長者中心提供嘅服務/活動？

☐ (1) 無

☐ (2) 有

A13) 您有無足夠嘅金錢應付日常開支？

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

A14a) 您宜家拎以下邊一隻嘅政府津貼？**(只可以揀一項)**

☐ (1) 綜援 (CSSA)
$2,455 - $ 5,930 (成人:健全->殘疾)、 $3,485 - $ 5,930 (長者:健全->殘疾)
☐ (2) 普通傷殘津貼 $1,720
☐ (3) 高額傷殘津貼 $3,440
☐ (4) 高齡津貼 (生果金) $1,345
☐ (5) 長者生活津貼 (長生津) $2,600
☐ (6) 唔清楚 / 唔知道
☐ (7) 無 **(跳至 A15a)**
☐ (8) 高額長者生活津貼 (高額長生津) $3,485

A14b) 每月政府津貼嘅金額：

HK$_____

A15a) 您宜家主要嘅收入來源係？**(不包括政府津貼) (可以揀多過一項)**

☐ (1)保險
☐ (2)退休金
☐ (3)家人及親友資助
☐ (4)工資
☐ (5)儲蓄
☐ (6)其他（請列明:_____）
☐ (7)無

A15b) 您宜家每月嘅收入：

HK$_____

☐ (1) 0
☐ (2) 1 - 1,999
☐ (3) 2,000 - 3,999
☐ (4) 4,000 - 5,999
☐ (5) 6,000 - 7,999
☐ (6) 8,000 - 9,999
☐ (7) 10,000 - 14,999
☐ (8) 15,000 - 19,999
☐ (9) 20,000 - 24,999
☐ (10) 25,000 - 29,999
☐ (11) 30,000 - 39,999
☐ (12) 40,000 - 59,999
☐ (13) ≥ 60,000
☐ (14) 唔想講 / 唔清楚

A16a) 如果您出街，您需唔需要用: **(可以揀多過一項)**

☐ (1) 輪椅
☐ (2) 助行架
☐ (3) 手杖
☐ (4) 全部都無

A16b) 如果您嘅屋企人出街，佢哋需唔需要用: **(可以揀多過一項)**

☐ (1) 輪椅
☐ (2) 助行架
☐ (3) 手杖
☐ (4) 全部都無

A17) 過去 3 天內，最遠一次中途唔需要休息嘅行路距離：**(如果有需要，可以用野支撐)**

☐ (1) 無行開
☐ (2) 少過 5 米
☐ (3) 介乎 5 至 49 米
☐ (4) 介乎 50 至 99 米
☐ (5) 介乎 100 至 999 米
☐ (6) 1 千米或以上

A18a) **(只適用於 60 歲或以上人士)**
未來 5 年內，假如您嘅健康狀況同現宜家一樣，您覺得您入住老人院嘅機會有幾大？**(0%=一定唔會；100%=一定會)**

0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%

A18b) **(只適用於 60 歲或以上人士)**
未來 5 年內，假如您嘅健康狀況差左，您覺得您入住老人院嘅機會有幾大？**(0%=一定唔會；100%=一定會)**

0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%

B. Age-Friendliness of a city

麻煩您講下對以下句子嘅同意程度，以 1 至 6 分代表

1	2	3	4	5	6
非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意

麻煩您以您居住嘅地區評分，有 * 號嘅題目，就以全港情況評分：

有啲題目會列出一啲長者友善社區嘅條件，如果各項條件都唔一致，麻煩您用嗰個設施/環境嘅整體情況評分

您有幾同意宜家……

A	室外空間及建築	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-A1)	公共地方乾淨同舒適	1	2	3	4	5	6
B-A2)	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
B-A3)	司機喺路口同行人過路處俾行人行先	1	2	3	4	5	6
B-A4)	單車徑同行人路分開 ☑ (9) 唔適用						
B-A5)	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
B-A6)	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
B-A7)	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
B-A8)	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
B-A9)	室外同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-A10)	整體嚟講，呢區提供適合長者使用嘅室外空間同建築	1	2	3	4	5	6

B	交通	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-B1)	路面交通有秩序	1	2	3	4	5	6
B-B2)	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
B-B3)	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
B-B4)	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
B-B5)	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
B-B6)	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
B-B7)	有專為殘疾人士而設嘅交通服務	1	2	3	4	5	6
B-B8)	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
B-B9)	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
B-B10)	喺公共交通唔夠嘅地方有其他接載服務 □ (9) 唔適用	1	2	3	4	5	6
B-B11)	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
B-B12)	馬路保養妥善，照明充足	1	2	3	4	5	6
B-B13)	整體嚟講，呢區為長者提供合適嘅交通工具同服務	1	2	3	4	5	6

C	住所	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-C1)	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
B-C2)	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
B-C3)	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
B-C4)	區內有充足同可負擔嘅房屋提供俾體弱同殘疾嘅長者，亦有適合佢哋嘅服務	1	2	3	4	5	6
B-C5)	整體嚟講，呢區為長者提供適合嘅房屋同居住環境	1	2	3	4	5	6
D	社會參與	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-D1)	活動可以俾一個人或者同朋友一齊參加	1	2	3	4	5	6
B-D2)	活動同參觀景點嘅費用都可以負擔，亦都冇隱藏或附加嘅收費	1	2	3	4	5	6
B-D3)	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
B-D4)	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
B-D5)	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
B-D6)	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
B-D7)	整體嚟講，呢區為長者提供適合嘅悠閒同文化活動	1	2	3	4	5	6

E	尊重及社會包融	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-E1)	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
B-E2)	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
B-E3)	服務人員有禮貌，樂於助人	1	2	3	4	5	6
B-E4)	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
B-E5)*	社會認同長者喺過去同埋目前所作出嘅貢獻	1	2	3	4	5	6
B-E6)*	傳媒對長者嘅描述正面同埋冇無成見	1	2	3	4	5	6
B-E7)	整體嚟講，呢區對長者有足夠嘅尊重同包容嘅	1	2	3	4	5	6
F	社區參與及就業	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-F1)	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
B-F2)*	長者員工嘅特質得到廣泛推崇	1	2	3	4	5	6
B-F3)*	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
B-F4)*	禁止喺僱用、留用、晉升同培訓僱員呢幾方面年齡歧視	1	2	3	4	5	6
B-F5)	整體嚟講，呢區為長者提供適合嘅義工同就業機會	1	2	3	4	5	6

G	訊息交流	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-G1)	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
B-G2)	定期提供長者有興趣嘅訊息同廣播。	1	2	3	4	5	6
B-G3)	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
B-G4)	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
B-G5)	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
B-G6)	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
B-G7)	整體嚟講，長者係呢區容易得到佢哋需要嘅資訊	1	2	3	4	5	6
H	社區支持與健康服務	非常唔同意	唔同意	有啲唔同意	有啲同意	同意	非常同意
B-H1)	醫療同社區支援服務足夠	1	2	3	4	5	6
B-H2)	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
B-H3)	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
B-H4)	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
B-H5)	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
B-H6)	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
B-H7)	整體嚟講，長者係呢區容易得到適當嘅醫療、健康同支援服務	1	2	3	4	5	6

C. 社群意識指數

麻煩您講下對以下句子嘅同意程度，以 1 至 5 分代表。

1	2	3	4	5
非常唔同意	**唔同意**	**普通**	**同意**	**非常同意**

麻煩您以您住嘅地區評分，您有幾同意……

	社群意識指數	**非常唔同意**	**唔同意**	**普通**	**同意**	**非常同意**
C1)	喺呢個社區我可以得到我需要嘅東西。	1	2	3	4	5
C2)	這個社區幫助我滿足我嘅需求。	1	2	3	4	5
C3)	我覺得自己係這個社區嘅一份子。	1	2	3	4	5
C4)	我屬於這呢個社區。	1	2	3	4	5
C5)	我可以參與討論喺呢社區發生嘅事情。	1	2	3	4	5
C6)	這個社區嘅人們善於互相影響。	1	2	3	4	5
C7)	我覺得同呢個社區息息相關。	1	2	3	4	5
C8)	我同呢個社區嘅其他人有良好嘅關係。	1	2	3	4	5
C9)	我熟悉我正在居住的地區	1	2	3	4	5

C10) 整體嚟講，您覺得自己目前嘅生活有幾幸福？

☐ (1) 非常幸福
☐ (2) 幸福
☐ (3) 一半半
☐ (4) 大多數唔幸福
☐ (5) 非常唔幸福

C. 鄰里關係

麻煩您講下對以下句子嘅同意程度，以 1 至 4 分代表。

1	2	3	4
非常唔同意	**唔同意**	**同意**	**非常同意**

對以下的問題，選擇與你情況相符合的選項。

	社群意識指數	**非常唔同意**	**唔同意**	**同意**	**非常同意**
C11)	你與鄰居的關係緊密	1	2	3	4
C12)	當你或你的家庭有重要事情時，你的鄰居們會表示很大的關心	1	2	3	4
C13)	鄰居們相互信任	1	2	3	4
C14)	這附近的人們很願意幫助他們的鄰居。	1	2	3	4

D. 對老年人的印象和評價 (KAOP)

以下問題係關於對長者嘅印象同評價，麻煩您根據過去兩星期嘅實際情況，係六個選項（非常唔同意、唔同意、少少唔同意、同意、非常同意）中圈出適合嘅答。

例如，您對於“老年人在社會上是個負擔”呢個觀點有“少少唔同意”，就係“少少唔同意”下面嘅方格圈出答案。

	非常唔同意	唔同意	少少唔同意	少少同意	同意	非常同意
例題：老年人係社會上係個負擔	1	2	③	4	5	6

	非常唔同意	唔同意	少少唔同意	少少同意	同意	非常同意
D1) 長者應該住係安老院舍	1	2	3	4	5	6
D2) 長者成日犯錯，容易令人嬲	1	2	3	4	5	6
D3) 長者容易令人覺得唔舒服	1	2	3	4	5	6
D4) 長者成日鐘意講起佢哋嘅陳年舊事，令人好反感	1	2	3	4	5	6
D5) 長者脾氣唔好，鐘意抱怨，對人都唔友善	1	2	3	4	5	6
D6) 長者總係睇年輕人唔順眼	1	2	3	4	5	6
D7) 長者總係理其他人嘅閒事	1	2	3	4	5	6
D8) 長者嘅屋企一般係殘破不堪	1	2	3	4	5	6
D9) 長者不修邊幅，好邋遢	1	2	3	4	5	6
D10) 同其他人比，長者唔需要更多嘅關愛	1	2	3	4	5	6

E. 步行的難易程度 (只適用 60 歲或以上人士)

以下係一啲您係日常生活中可能需要經常去嘅地方，麻煩您由屋企出發，您係咪可以唔太辛苦咁行到去？(請根據受訪者嘅答案係 E20 同 E21 填下面分類嘅編號。如果受訪者答嘅地點唔適合下面講嘅任何一種類別，請填具體名稱。)			
		辛苦	唔辛苦
E1)	便利店或者報刊亭	1	2
E2)	教堂或者其他宗教場所	1	2
E3)	公園或者其他公共休憩場所（戶外健身點）	1	2
E4)	長者地區中心、鄰舍中心、活動中心、社會服務中心、家庭服務中心	1	2
E5)	社區會堂以及其他康樂中心（運動設施、劇院等）	1	2
E6)	診所（中、西醫以及牙科）	1	2
E7)	藥房	1	2
E8)	酒樓	1	2
E9)	茶餐廳或者快餐店	1	2
E10)	雜貨店	1	2
E11)	街市、超級市場	1	2
E12)	圖書館	1	2
E13)	銀行	1	2
E14)	郵局	1	2
E15)	子女的家 □ (9) 唔適用	1	2
E16)	朋友的家 □ (9) 唔適用	1	2
E17)	政府機構（社會保障部、房屋署、民政署地區辦事處、勞工署職業輔導課等）	1	2
E18)	醫院（急診、專科、日間照顧中心、康復中心等）	1	2
E19)	理髮店	1	2
E20)	過去 1 個月，您每日行路去嘅三個地方係 1) 2) 3)		
E21)	過去 1 個月，您經常坐車去嘅三個地方係 1) 2) 3)		

F. 體能活動水平

以一星期 (7 日)計算，您係過去一個月平均做左以下嘅運動幾多次？
回答下面嘅問題，麻煩：

- 只係計運動時間持續 10 分鐘或以上嘅運動
- 只係計餘暇時間做嘅運動 (唔計番工時間做嘅運動同家務)
- 注意：三個類別嘅主要分別係運動嘅**強度**

	平均頻率 (每星期次數)	**平均持續時間 (分鐘)**
劇烈運動 (心跳加速、流汗) (例如跑步、緩步跑、健康舞班、 高強度游泳、高強度單車)	F1)_____次數/每星期	F2)_____分鐘
中等強度運動 (不疲累、輕度排汗) (如快步走、打網球、騎單車、 游泳、跳民族或流行舞蹈)	F3)_____次數/每星期	F4)_____分鐘
輕度運動 (輕鬆、無汗) (如步行、輕度瑜伽、草地保齡球、河邊釣魚)	F5)_____次數/每星期	F6)_____分鐘
阻力運動 (增強肌力) (例如重複舉啞鈴、舉重機或阻力帶、仰臥起坐、深蹲)	F7)_____次數/每星期	F8)_____分鐘

F9) 平均**一星期(7 日)**入面，您有定期係餘暇時間做中等或以上強度嘅運動(即係會出汗、心跳加速)？
☐ (1) 成日
☐ (2) 有時
☐ (3) 從來都唔會/好少

F10) 整體嚟講，您有幾滿意您宜家嘅生活？
☐ (1) 非常滿意
☐ (2) 滿意
☐ (3) 一半半
☐ (4) 一半唔滿意
☐ (5) 非常唔滿意

G. 標準十二題簡明健康狀況調查表 (SF-12)

說明：呢項調查係詢問您對自己健康狀況嘅了解。呢項資料記錄您嘅自我感覺同日常生活嘅情況

麻煩您係方格內填上✓嚟答每條問題。如果您唔肯定點答，就按照您嘅理解揀最合適嘅答案

G1) 整體嚟講，您認為您宜家嘅健康狀況是係：
- ☐ (1) 非常好
- ☐ (2) 很好
- ☐ (3) 好
- ☐ (4) 一般 (不過不失)
- ☐ (5) 差

下面每項係您日常生活中可能做嘅活動。以您目前嘅健康狀況，您係做呢啲活動，有無受到限制？如果有嘅話，程度又係點？

G2) 中等強度嘅活動，例如搬枱，用吸塵機吸塵或者洗地板，打保齡球，或者打太極拳？
- ☐ (1) 有好大限制
- ☐ (2) 有少少限制
- ☐ (3) 無任何限制

G3) 上幾層樓梯？
- ☐ (1) 有好大限制
- ☐ (2) 有少少限制
- ☐ (3) 無任何限制

以下問題係關於您身體健康狀況同日常活動嘅關係

G4) 過去 4 星期，您有無因為身體健康嘅原因，令您係工作或日常活動中，實際做完嘅野比想做嘅少？
- ☐ (1) 無
- ☐ (2) 有

G5) 過去 4 星期，係工作或日常活動中，您有無因為身體健康嘅原因，令您嘅工作或活動受到限制？
- ☐ (1) 無
- ☐ (2) 有

G6) 過去 4 星期，您有無因為情緒方面嘅原因 (例如感到沮喪或焦慮) ，令您係工作或日常活動中，實際做完嘅野比想做嘅少？

☐ (1) 無
☐ (2) 有

G7) 過去 4 星期，係工作或日常活動中，您有無因為情緒方面嘅原因(例如感到沮喪或焦慮)，令您工作時或從事活動時不如往常細心了？

☐ (1) 無
☐ (2) 有

G8) 過去 4 星期，您身體上嘅疼痛對您嘅日常工作 (包括番工同做家務) 有幾大影響？

☐ (1) 完全無影響
☐ (2) 有好少影響
☐ (3) 有部分影響
☐ (4) 有較大影響
☐ (5) 有非常大影響

以下問題係有關您係過去4星期，您嘅感受同您其他嘅情況。針對每個問題，麻煩您揀一個最接近您嘅感受嘅答案

G9) 過去 4 星期，您有幾多時間覺得心平氣和？

☐ (1) 成日
☐ (2) 大部份時間
☐ (3) 好多時間
☐ (4) 間中
☐ (5) 偶然一次半次
☐ (6) 從來都無沒

G10) 過去 4 星期，您有幾多時間覺精力充足？

☐ (1) 成日
☐ (2) 大部份時間
☐ (3) 好多時間
☐ (4) 間中
☐ (5) 偶然一次半次
☐ (6) 從來都無沒

G11) 過 4 星期，您有幾多時間心情唔好、覺得悶悶不樂或者沮喪？

☐ (1) 成日
☐ (2) 大部份時間
☐ (3) 好多時間
☐ (4) 間中
☐ (5) 偶然一次半次
☐ (6) 從來都無沒

G12) 過去 4 星期，有幾多時間由於您身體健康或情緒問題而妨礙左您嘅社交活動 (比例如探親戚朋友) ？

☐ (1) 成日
☐ (2) 大部份時間
☐ (3) 好多時間
☐ (4) 間中
☐ (5) 偶然一次半次
☐ (6) 從來都無沒

問卷完成日期：_____
(日 / 月 / 年)

-「共建長者友善社區」問卷調查完成，多謝您嘅寶貴意見 -

Appendix 3: Focus Group Discussion Guide (Chinese version only)

Sau Po Centre on Ageing
The University of Hong Kong

香港大學秀圃老年研究中心
「共建長者友善社區」計劃 (中西區及灣仔區)

聚焦小組

小組簡介：
『長者友善』是世界衛生組織在 2002 年提出的概念，它建基於積極老齡化的理論框架，認為長者是社會的資源和財富，每一位長者都有權利參與到社會及從身體健康、社會參與、或人生安全保障等各方面去獲得最大限度的生活質素，而營造一個「長者友善」的城市更是社會上每一個人的責任。香港現時的人口老化迅速，為了推動香港邁向『長者友善』城市之路來迎接老齡化和城市化的挑戰，是次研究會根據世界衛生組織所定下的『長者友善』城市的八個指標來探討中西區及灣仔區的情況。

是次聚焦小組旨在了解你對中西區及灣仔區居住環境的意見及有關長者的意見。

Part A：[長者友善]總體指標體系的討論

世界衛生組織提倡的『長者友善』城市主要由八個重要指標所以組成，它們涵蓋了包括城市建設、環境、服務與政策等三大範疇，反映一個城市是否能夠達致『積極老齡化』，具體有八個方面，包括戶外空間和房屋建築、交通、房屋、社會參與、尊重和社會融合、公民參與與就業、溝通和資訊、社區支援和健康服務。

『長者友善』城市的八個重要指標：

1. **戶外空間和房屋建築**：這個指標的目的是希望透過建設一個令人舒適的戶外空間和適合長者居住的房屋設施，以增加長者在家安老的可能性。
2. **交通**：交通的便利性會影響長者的活動範圍，一個方便使用和適合長者支付能力的交通安排，對長者能否參與社區和公民活動至關重要。
3. **房屋**：由於隨著長者年紀的增加身體活動能力的減退，長者能否居住在擁有合適設施的房屋對長者是否能獨立生活及他們的生活品質有很大的影響。
4. **社會參與**：透過參與在正式或非正的社會活動可以保持令長者受到支持與關懷，因此參與社會、與家人和朋友交往是長者獲得生理和心理健康的有效保障。
5. **尊重和社會融合**：尊重長者讓他們能夠成為社會的一分子是每一個社會的基本責任，因此這一目標是讓每一個位長者在不同的社會環境下都受到尊重，包括在社會、社區、和家庭。
6. **公民參與就業**：透過社會參與和就業可以令長者繼續對社會發揮貢獻，這可以是用義務工作的形式，也可以是用參與勞動力市場的形式來達致。
7. **溝通和資訊**：社會上有不同種類的服務與支援給予長者，然而要長者瞭解取得所需服務與支援，需要透過社會要加強資訊的透明度和流通性，讓長者在最有需要的時候能及時得到可靠的資訊。
8. **社區支援和健康服務**：這一目標是希望透過提升長者的健康與生活品質，以滿足長者在熟悉的社區與在家安老的理想，為此，適切的社區支援和健康服務必不可少。

Q1： 就以上『長者友善』城市的八個指標，以中西區/灣仔區目前的情況而言，八個指標當中哪三個指標這三年有明顯改善？為什麼（有哪些表現）？

Q2: 哪三個指標仍然有待改善？為什麼（有哪些表現）？

Q3: 就以上三項指標而言，如何能通過政策、設施、服務方面改善？

Q4：就『長者友善』城市的發展，你還有什麼意見？

Jockey Club Age-friendly City Project

www.jcafc.hk

Sau Po Centre on Ageing,
The University of Hong Kong

http://ageing.hku.hk/