Japanese and Canadian Attitudes Towards Aging and Lifelong Learning: A Comparative Study

By Sandra Cusack, Ph.D., Adjunct Professor & Guttmann-Gee Research Fellow in Educational Gerontology, Simon Fraser University and Shigeo Hori, Ph.D., Osaka University of Education, Japan.

Introduction
Older Adult Education is growing worldwide due to a number of major trends such as population aging, the emerging emphasis on information and knowledge, the rhetoric of lifelong learning, and rising levels of formal and informal education among older adults. More than professional development or leisure activity, lifelong learning has become essential to engagement in society. This calls for innovative educational programming for adults across the lifespan and presents unique challenges for the education of older people worldwide.

In the 1990s when lifelong learning became widely popular in Japan, research was initiated to understand the life-course and the beginning of old age as a basis for developing effective educational programs. In 1994, Hori conducted a survey of three age groups (older, middle-aged and younger students) residing in a rural district of Japan. Results showed lack of agreement about when old age begins, but a consensus that it comes with physical decline. People in the old, old group (75-80) said that both physical and psychological changes (e.g., difficulty learning and concerns about memory) mark the beginning of old age. Hori concluded that “many people feel the arrival of old age by the voices of their own body or mind rather than the voice of society” (Hori, 1994, p. 447).

Also during the 1990s, as lifelong learning became popular across North America, seniors centres began to offer lifelong learning programs to their members (aged 50 - 100+). In one Vancouver centre, a Lifelong Learning Project was conducted to assess the learning needs of members as a basis for developing educational programs (Cusack & Thompson, 1993). Findings suggest that many people are concerned about memory and declining mental abilities and everyone needs an opportunity to exercise their minds through learning. Based on the report, the centre embarked on a decade of research developing a program, Mental Fitness for Life, specifically designed for people to exercise their minds, their ability to think, learn new things, and avoid memory loss as they age (Cusack & Thompson, 2003; 2005).

The Comparative Study
The purpose of our study was to compare two different environments in which education and learning take place - Japanese elder colleges and Canadian seniors centres with respect to: (a) attitudes toward aging and (b) lifelong learning needs. Elder colleges exist both in communities and prefectures throughout Japan and their primary function is to offer educational programs to Japanese seniors. The first class was held in a rural private temple in Nagano Prefecture in 1954. From 1965, elder classes at Kohminkan (people's community learning centre) were subsidized by the Ministry of Education. Since then, many classes for older people have appeared throughout Japan, and some of these classes have changed their names to “Elder College” with each college being community-based and offering 30 to 50 classes or programs. In 1969, the opening of Inamino Gakuen Elder College in Hyogo Prefecture marked a change to a more traditional college program. Inamino Gakuen, a traditional elder college with a 50,000m² site, currently offers classes to 2,000 students (63+). It has a 4-year educational program and a 2-year community leadership training program with courses in gardening, pottery, health and welfare, cultural studies and general education.

With the exception of Inamino Gakuen, elder colleges have been relatively small, community-based learning centres for the elderly. Beginning in the 1990s, however, many larger, elder colleges began to emerge as a result of the enactment of the Lifelong Learning Act (1990) and restructuring of the Ministry of Education. More importantly, the Health and Welfare Ministry began to recognize that learning opportunities for the elderly were a good vehicle for health promotion and many elder colleges were founded, organized, and sponsored by the Welfare Ministry. At the present time, Japan has four types of elder colleges: (1) Education stream - small (community based); (2) Education stream - large
Gerontology Research Centre
Simon Fraser University
#2800 – 515 West Hastings Street
Vancouver, BC, V6B 5K3
Phone (604) 291-5062
Fax (604) 291-5066
E-mail: gero@sfu.ca
http://www.sfu.ca/grc/

Acting Director, Gerontology Research Centre: Dr. Andrew V. Wister
Editorial Advisor: Dr. Gloria M. Gutman,
Gerontology Department & SFU Director,
Dr. Tong Louie Living Laboratory

Research Focus
The Gerontology Research Centre conducts research on individual and population aging, and provides consultation on research design and program development and evaluation. Research activities are most intense in five areas:
• Aging and the built environment
• Health and aging
• Prevention of victimization and exploitation of the elderly
• Older adult education
• Changing demography and lifestyles

The Centre was established with the help of grants from Imperial Oil, the Real Estate Foundation of B.C., Shoppers Drug Mart and the Social Sciences and Humanities Research Council of Canada.

Education
The SFU Gerontology Department offers a minor, a Post Baccalaureate Diploma and a Masters Degree in Gerontology.

Information Services
The Gerontology Information Centre, managed by a professional librarian, offers a specialized collection and assistance with information search and retrieval.

Publications
The Centre publishes books, reports, and two newsletters: GRC News and Seniors’ Housing Update.

Conferences and Lectures
The Centre organizes a biennial housing conference, the Ellen M. Gee Memorial Lecture in October, the John K. Friesen Conference each Spring as well as a Fall and Spring public lecture series.

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(traditional schools); (3) Welfare stream - small; and (4) Welfare stream - large. Of the two Japanese elder colleges that we surveyed in this study, Osaka Prefecture Elder College can be classified as a type-4 and Nishinomiya Elder College as a type-2.

Canadian seniors centres are publicly-subsidized and exist within local governments with a mandate to serve the needs of older adults residing in their respective communities. The first seniors centres in Canada opened in the 1950s with a focus on recreational activities (e.g. billiards, baseball, and bingo). Since that time, as the older adult population became both healthier and better educated, a diversity of programs became available, including educational classes. Centres vary considerably in location, funding, infrastructure, physical environment, and in the particular programs they offer. They also reflect the attitude of the community toward aging and the value of older people.

Method
Surveys were conducted in two centres in Japan. Osaka Prefecture Elder College in Osaka was surveyed in 1995 (N=419), and Nishinomiya City Elder College in Hyogo Prefecture in 1999 (N=753). A similar survey was conducted in two Canadian seniors centres in 2003. Century House is a 2100 member seniors centre located in New Westminster, a primarily working class suburb of Vancouver while the West Vancouver Seniors Activity Centre is a 4700 member centre located in an upper middle class district on the North Shore. Together, they offer a sample of convenience that is similar to the Japanese sample with respect to sociodemographic variables, though smaller in numbers. (A total of 200 questionnaires were distributed with 122 valid returns).

Survey
To assess attitudes toward aging, respondents were asked:
• To indicate agreement by checking from a list of 20 items (e.g. aging “is a natural process,” “brings reduced memory,” etc.);
• To complete the sentences “Aging from 30 to 50 is …” and “Aging from 60 to 80 is …” on a 5-pt. Likert scale from “strongly positive to strongly negative and;
• To check the kinds of learning activities they were most interested in from a list of 19 items (e.g. computers, volunteer activities, and literature).

Results
Attitudes toward Aging
Aging from 60 to 80 was considered a positive process by 66.1% of the respondents (including 17.5% who answered “strongly positive”). According to 99.2% of the 122 Canadian respondents, aging “is a natural and continuous process”; followed by “brings greater freedom” (74.8%); “presents an opportunity to develop the self” (71.4%); “a time of enriched wisdom and freedom” (69.7%); and “brings maturity” (68.1%).

In the Osaka Survey, since there is no equivalent term for “aging” in the Japanese language, we divided “aging” into two segments, “toshi wo toru” and “oi.” “Toshi wo toru” has a connotation of aging as a chronological passage of time, and “oi” has the connotation of aging as a declining or descending path. Aging from 60 to 80 was considered a positive process by 35.5% of the respondents and among them 12.5% answered “strongly positive.” In addition, Japanese elders responded that aging brings “reduced memory” and “reduced contacts with other people.”

Both groups rated “declining physical fitness,” “less social activity,” and “difficulty in thinking flexibly” almost equally. Clearly, the results suggest that Canadians regard aging more positively (regardless of using “toshi wo toru” or “oi.”). Some of the positive items were selected more than twice as often by Canadian respondents.
Lifelong Learning

As for learning needs, Canadian seniors indicated a preference for “volunteer activities” (78.5%); “communication with other seniors” (75.2%); “physical fitness” (72.7%); and “day trips” (66.1%). In the Nishinomiya Survey, respondents preferred activities such as “history and culture of the community,” “current topics,” “practical information about healthy aging,” and “literature and classics.” Canadians selected “volunteering” and “communication with other seniors” at much higher rates than Japanese, whereas Japanese selected “history and culture of the community” and “gardening and pottery” more often than Canadians. These findings reflect the fundamental differences in the primary function of Canadian centres and Japanese elder colleges. The main function or mandate of the Japanese elder college is to offer educational courses related to culture (e.g. humanities and the arts) and lifeskills, whereas the primary function of Canadian seniors centres is to serve as a place for social activities and communication through learning among seniors and staff. The social/communicative function is the function originally conceived for this type of centre and therefore, the secondary function is to offer new kinds of learning experiences that build on the social function. In contrast, the main function of elder colleges is to offer educational courses for the elderly, and if it is to serve the social needs of elders the next step is to create a good communicative climate among the elders, staff, and instructors.

Discussion and Future Directions

The results from our comparative study raise a number of issues for further research and program development. The first is the difference between the ages of our sample populations. The average age of Japanese respondents’ was late 60s and of Canadian respondents was 75 (more than 30% of which were more than 80 years old). Both centres are witnessing a growth in the frail and isolated seniors population, and meeting their needs involves transportation and special events supported by staff and volunteers (Joy Barkwill/ Jill Johnson, personal communications, August 2003). Until now, older adult education programs in Japan and the United States have served people in their 60s and early 70s, but our survey of Canadian seniors centres suggests that education is important for those in their 80s and beyond. As one staff member (Jill Johnson, personal communication, August, 2003) said, “We have one member who is 95, and he doesn’t look more than 60.” He has been a member for many years, was a fulltime caregiver of his wife with dementia, and he is constantly challenging himself with new learning – e.g., he has just started a pen and ink drawing class. Furthermore, research is beginning to show that learning promotes positive mental health, which is particularly important in the later years (Hansen, 2004).

The second point is that we believe that positive attitudes toward aging lead to the social participation of seniors. Seniors centres offer unique opportunities for the development of older adults as leaders - staff in both centres work with a board of elected senior leaders in making decisions regarding programs and services. Volunteerism is an integral part of the operation, since they receive training and develop skills, coupled with the self-confidence they need to contribute to the wider community (Joy Barkwill, personal communication). Furthermore, the relationship is reciprocal - i.e., social participation contributes to positive attitudes toward aging. Articulate, confident, and active older people serve as role models of healthy productive aging. They create more positive attitudes toward older people and toward their own aging for people of all ages. As Hori suggests, “Aging is to be cultivated.”

Finally, many people in both Canada and Japan fear declining mental ability and loss of memory with age. Ayako and Mainichi (2003) report that thousands of Japanese adults are concerned about memory and buy books and programs designed to sharpen their minds. For too long, we have believed that declining mental ability with age is inevitable, but new research is telling us that we can maintain and even improve our mental function and memory as we age (Cusack & Thompson, 2003).

As Educational Gerontologists, we must ensure that this message is reflected in public policy and practice throughout the world. As Paul Baltes (2001) suggests, the “21st Century is the age of the continuously developing mind.”

REFERENCES


Barkwill, J. (personal communication, August 11, 2004).


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2005 SFU Gerontology's Senior Leadership Awards

In celebration of the United Nations International Year of the Volunteer in 2001, the SFU Gerontology Research Centre established an annual Senior Leadership Award as a way of recognizing and thanking very special senior leaders who have and continue to make outstanding contributions as volunteers to the field of Education and Aging.

The work of the Gerontology Research Centre is undertaken in consultation with seniors organizations and advocacy groups and, most importantly, with key individuals. Some serve as guest speakers in our classes and conferences, giving face and voice to issues of care giving and care receiving. Some serve as volunteers providing counseling and other services to their less able peers, providing practicum sites or serving as mentors for our students. Still others, through their voluntary service serve as powerful role models and exemplars of healthy aging - extremely important in maintaining a balanced view of population aging among those who work or are training to work with the most frail segment of the seniors population. The award provides an ongoing vehicle for recognizing their contributions.

Increasingly we are seeing the lines blur between paid and unpaid contributions. New research suggests that productive engagement has health benefits - and as the word “retirement” loses its meaning, we’re seeing a kind of “legacy leadership” - people finding what they are passionate about and continuing to work with or without remuneration (Freedman, 2004).

This year we have chosen to honour two very special people, Alan Aberbach and Margaret Neylan, who embody the concept of “legacy leadership” and are true pioneers in the field of Education and Aging.” Professor Aberbach received his undergraduate degree from Rutgers, and his PhD from the University of Florida. He’s a man who found his passion early. He claims, I was born to teach. I love the excitement that comes on the first day of class when the students are sizing up the professor - wondering whether he can deliver. That first day of class has always been a thrill for me - and it continues to be a thrill to this very day.

Alan first came to SFU in 1965 as one of the six “Founding Fathers” in the Department of History, when the campus on the hill was still under construction and faculty were told on the first day of class they might need to wear hard hats. Dr. Aberbach was the first member of the History Department to receive the “Excellence in Teaching” Award. He was also one of the first - and the most popular - instructors in the SFU Seniors Program, where his Wagnerian Opera classes are legendary. When he was forced to retire from the History Department at 65, he soon directed his energy toward the Seniors Program, which has been transformed under his leadership.

When Alan first took on the role of Director of the Seniors Program, the average annual enrollment was slightly more than 200 students, aged 55+ a year. Now there are over 1100 students enrolled in 50 courses a year. Alan took a chance that SFU’s senior students wanted not recreational courses, so well offered by community colleges, community and seniors centres, but intellectually and academically challenging classes. It turned out that he was right. Under his leadership, the Senate approved the introduction of a Seniors Program Non-Credit Certificate in the Liberal Arts, which is awarded by the Dean after students complete 8 courses and submit 8 papers. They are then alumni of SFU. A free Seniors Forum is offered once a month to people of all ages where a lecture on a contemporary subject is then followed by an open discussion. The lectures are sponsored by the SFU Seniors Lifelong Learners Society, an independent society supporting the Seniors Program.

Our second award is presented posthumously to Margaret Neylan for her lifelong contribution to the field of Nursing Education. Margaret was a true pioneer, who revolutionized nursing education in Canada, beginning her formal education in General Nursing at the Brandon General Hospital in the 1940s, culminating in her work with Dr. Martha Donnelly on an Elder’s Palliative Project. Always her dedication to helping others was over and above her formal role.

Among Margaret’s many achievements:
• 1967 - organized an international conference in Montreal on Continuing Nursing Education;
• 1971 - served in an advisory capacity to the SFU Faculty of Education in the establishment of an M.Ed. in Health Sciences;
• 1973 - studied healthcare systems in Sweden, Great Britain, and Israel as a World Health Fellow;
• 1975 - visited Cuba as a member of a team to study the healthcare system and develop exchanges between Canadian and Cuban Nurses.

From 1976 to 1991, she was Associate Dean/Head of Nursing at BCIT and continued until 1999, working on a number of International projects (e.g., in Malaysia and South Africa). She is described as an extraordinary senior who never really stopped working up until 3 weeks before she passed away in March of 2005. She is the ideal example of a leader who has made major contributions to postsecondary education and provided exemplary volunteer service to her peers through her work as Chair of the Seniors Advisory Council, her work on the Care of Elders Project and her many other activities. Whether paid or unpaid, Margaret was always taking on new challenges, always making the system better for others.

During her lifetime, Margaret Neylan received a number of awards, including the Lieutenant Governor’s Award of Recognition for Women of BC, BCIT’s Distinguished Service award, a special Blanket Presentation from the Nisga’a Nation, and the Jean Manse Award from the Canadian Nurses Association. SFU Gerontology is pleased to honour Margaret as a recipient of the 2005 Senior Leadership Award.
AWARDS & HONOURS
Dr. Andrew Wister was selected as “SFU Author of the Month” for November. His new book, “Baby Boomer Health Dynamics: How Are We Aging” was prominently displayed at both SFU Bookstores during the month of November. Details about Dr. Wister’s book are available on the SFU Gerontology Department website at: http://www.sfu.ca/gerontology/07news_events/news_events_publications_wister.html

COMINGS & GOINGS
Atiya Mahmood, Ph.D., BC Real Estate Foundation Post-doctoral Fellow in Environmental Gerontology, has left the GRC for a position as assistant professor in the Department of Human and Design Environment at Oregon State University.

PUBLICATIONS


PRESENTATIONS
PAPERS, POSTERS, and PRESENTATIONS at the 34th Annual Scientific and Educational Meeting of the Canadian Association on Gerontology, October 20-22, 2005, Halifax, NS.

Brink, S. Push and pull factors affecting the retirement decision. Paper.

Cooke, H. Chair, Paper session, Dementia risk factors and longitudinal studies.


Cusack, S. Mental fitness for life. Paper.

Cusack, S. Chair, Invited symposia, Third age education in the age of the continuously developing mind.

Gallagher, E. Discussant, Workshop Session, Dear Prime Minister: Seniors policy past and future.

Johnston, A.K. Predictors of alternative therapy use: Mutual aid, health knowledge, and illness self-efficacy among Canada’s aging population. Poster.


Kupferschmidt, A., Lewis, D., Molloy, D., Standish, T., & Babineau, T. Using duration of memory loss to improve differentiation of mild cognitive impairment from normal cognition. Paper.

O’Rourke, N. The experience of conjugal bereavement and the well-being of widowed men and women. Poster.

Spencer, C. No roof over my head: Age related discrimination in housing. Paper.

Spencer, C. Up in smoke: Canadian policy and older adult smokers. Paper.

PAPERS, POSTERS, and PRESENTATIONS at the 58th Annual Scientific Meeting of the Gerontological Society of America, November 18-22, 2005, Orlando, FL.

Cappeliez, P., O’Rourke, N., & Guindon, M. Empirical validation of a comprehensive model of reminiscence and health in later life. Poster.


McDonald-Miszczak, L. & Wister, A.V. Health behaviours across the lifespan. Poster

O’Rourke, N. Chronic caregiver depression as a predictor of patient institutionalization. Paper.


Other Presentations:


VISITORS TO THE CENTRE
August 23, 2005 - Jun Suzuki, PhD, (Associate Professor, Dept. of Economics, Kobe University, Japan).

November 10, 2005 - Brian devVries, Ph.D., Professor, (former Director) Gerontology Program, San Francisco State University.

November 16, 2005 - Mary N. Haan, Ph.D., Professor, Epidemiology, University of Michigan, School of Public Health.

November 29, 2005 - Bob Knight, Ph.D., Merle H. Bensinger Professor of Gerontology, Andrus Gerontology Center; Professor of Psychology and Director of Clinical Training, Department of Psychology, University of Southern California.

ALUMNI NEWS
Congratulations to Gail Low (MA Gero 2000) upon being awarded a PhD in Nursing by the University of Victoria and on her appointment as Assistant Professor in the School of Nursing at the University of Alberta.

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The Gerontology Graduate Caucus (GGC) is the graduate student organization of the Department of Gerontology at Simon Fraser University. The GGC represents Gerontology graduate students in discussion of academic and intellectual issues at both the departmental and university level. The GGC also promotes career opportunities in Gerontology and organizes social and recreational activities for Gerontology graduate students. The GGC is a member of the Simon Fraser Student Society and maintains an active relationship with the Canadian Association on Gerontology Student Connection - Connection Étudiante. Some of the current projects of the GGC include the development of the GGC webpage, the revision of the GGC Constitution, a GGC speaker series, and coordination of social and networking events including the annual GGC Career Night. Look for upcoming articles and announcements from the GGC in future newsletters. If you would like to learn more about us, please contact the GGC Chair, Sean Keays, at skeays@sfu.ca.

The Boomerang Age: Transitions to Adulthood in Families
New book by Dr. Barbara Mitchell
Domestic changes are taking place in the lives of young adults in Western industrialized societies. Today’s young people often experience less permanency and more movement in a variety of family-related roles, statuses, and living arrangements. Among the most prominent changes is the phenomenon of “boomerang kids,” young adults returning to the parental home after their initial entrance into the adult world. The Boomerang Age, explores the implications of this development in a changing sociocultural, economic, and demographic landscape.

Mitchell begins by addressing definitional, conceptual, and measurement issues relevant to the “boomerang age.” She then places the issues in historical perspective by considering trends in family organization—the nuclear family, marriage and divorce rates and fertility—over the past hundred years with emphasis on the 1950s family as a cultural benchmark, evaluating the issues by means of cross-cultural comparisons. The book then turns to the contemporary trajectory of home leaving and returning, analyzing the “launch” and return phases with regard to economic factors, regional differences, and racial and ethnic backgrounds. Mitchell then explores the more personal dimensions of how a return to the family is complicated by partnership (marriage, divorce, cohabitation, homosexuality) and parenthood among young couples. Moving outside the home, she looks at how public issues such as globalization, the decline of the welfare state, and various forms of social inequality affect the circumstances of young adulthood. Here Mitchell offers specific social policy recommendations pertaining to education, housing and dependency issues, childcare, and gender and racial equality. The book concludes by critically evaluating the advantages and drawbacks of two possible future scenarios: increased individualization in the pursuit of social goals, or a more or less permanent return to the traditional, extended family.

The theoretical contributions and empirically based research presented in The Boomerang Age will provide key knowledge on historical and contemporary youth transitions in an international perspective.

Dr. Mitchell holds a joint appointment with the Department of Sociology/Anthropology; she also coordinates the Certificate in Family Studies Program. Her current research interests include the cultural aspects of family support over the life course, with a focus on living arrangements and social policy issues; parent-child relationships; women and aging; and issues germane to families, communities and health.

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Video clips from the 15th Friesen Conference (“Quality of Life at the End of Life: Decisions and Choices”) are now available on the GRC website


The page has been reorganized so that the speakers and clips are grouped by the discussion sessions they were a part of. The PUBLIC LECTURE is at the bottom of the webpage. Each clip is mounted separately to facilitate the limits of ‘streaming’ large files as well as making it simpler to select a specific speaker.
The purpose of this study was to examine the effects of welfare state retrenchment on the retirement income system in Canada during the years 1980-2000. In order to provide perspective on the Canadian experience, this study included an examination of the effects of retrenchment on the pension systems in the Netherlands and Sweden. The countries selected were chosen both for their similarities (mature welfare states and members of the OECD) and for their differences (regime types and approach to providing retirement income). The theoretical foundation for this study was supported by Esping-Andersen’s (1990) welfare-state regime typology (liberal, conservative and social-democratic). In order to study retrenchment phenomena, this study incorporated Rice and Prince’s (2000) model of retrenchment strategies. It was hypothesized that: 1) there is a link between regime type and the retrenchment strategy that is pursued; and, 2) the liberal regime (Canada) will be more likely to experience retrenchment than either the conservative (the Netherlands) or social-democratic (Sweden) regimes. Contrary to these predictions, it was found that while all three countries did experience retrenchment, the results indicate that the Netherlands experienced the most significant levels of retrenchment.

This thesis explores effects of access to primary care on the self-care of older Canadians, across 5 residential categories. Previous research indicates persons living in rural environments experience profound barriers to primary care, compared to their urban counterparts. Further, self-care is influenced by health knowledge, often acquired through the formal health care system. It was hypothesized that the association between residential status and self-care will be partially explained by access to primary care.
Data from the CCHS - Cycle 1.1 (2001) were used. The research sample consisted of 24,281 Canadians, aged 65 and older. Logistic regression results evidenced several predictors of self-care. However, none of the independent variables fully explained the association between access to primary care and self-care. Since previous research employs dichotomous rural/urban comparisons, these findings provide an important and unique contribution to the literature. The results suggest need for research identifying factors mediating group differences in self-care.

Place attachment refers to the experience of emotional and cognitive ties to the physical environment. Among older adults, attachment to home and community may be experienced and represented as a sense of insideness that consists of three dimensions: physical insideness, social insideness, and autobiographical insideness (Rowles, 1990). Factors that contribute to place attachment in late life include age, length of residence, homeownership, marital status, and local friendship and kinship ties (O’Bryant, 1987; Rowles, 1998; Earhart & Weber, 1992; Hayward & Lazarowich, 2001). The study employed a qualitative research method to examine the dimensions of place attachment among older adults living on the Queen Charlotte Islands, a northern remote setting in British Columbia. The study involved content analysis of data obtained from interviews conducted with 16 individuals, selected on the basis of age (60 years and older) and duration of residence in their community (under and over 15 years). The research provided insight into the dimensions of place that promote and reinforce place attachment in northern remote communities. Overall, aspects of the physical and social environment, rural lifestyle, and time in place are salient to the development and reinforcement of place-based ties. Findings from the study have relevance for health and housing policy for older rural populations in reducing potential trauma from relocation, planning and development of appropriate housing options and improving service delivery for new and long-term residents.