Merritt
FLOURISH UNDER THE SUN

City of Merritt

Age-friendly and Accessibility Plan

DECEMBER 1, 2025

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Land Acknowledgement

The Nicola Valley is the traditional, ancestral and unceded territory of the Nleʔkepmx and Syilx Nations, including the Shackan, Nooaitch, Lower Nicola, Coldwater, Cook's Ferry, and Upper Nicola Bands. The City of Merritt acknowledges the Nleʔkepmx and Syilx Nations and their connection to this land, and aims to incorporate their collective knowledge, values and traditions regarding environmental management and stewardship practices.

> This Age-Friendly and Accessibility Plan provides a practical, evidence-informed roadmap for creating a community where people of all ages and accessibility needs can participate fully in civic, social, economic, and cultural life.
>
> It guides coordinated action to remove barriers, enhance inclusion, and improve health, safety, independence, and wellbeing now and into the future.

Recognition of Contributions

The City of Merritt gratefully recognizes the many people who contributed their time, experience, and insight to this Age-Friendly and Accessibility Plan. We thank the older adults, people with accessibility needs, caregivers, and families who participated in interviews, focus groups, community conversations, and the community survey. Their willingness to share candid experiences about what helps and what gets in the way is the foundation of this report.

We acknowledge the guidance and knowledge shared by Indigenous partners. Their perspectives on aging, accessibility, culture, and land are essential to shaping more inclusive approaches in Merritt.

We also thank local and regional partners, including Interior Health Authority, safety, non-profit and community organizations, housing and social service providers, business and economic development partners, and advocacy groups who shared reports and participated in discussions.

We extend our thanks to members of the Age-Friendly and Accessibility Advisory Committee, who reviewed ideas, identified practical priorities, and helped ground recommendations. City staff from across departments, including Community Services, Development Services, Public Works and Engineering, Housing Bylaw, Fire and Emergency Management, Building, and the CAO's Office, contributed data, context, and practical guidance on what is feasible within existing budgets and capital commitments.

Finally, we acknowledge the Mayor and Council for their support of this planning process and their ongoing role in advancing age-friendly and accessibility priorities over time.

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Executive Summary

This Age-Friendly and Accessibility Plan sets out a practical three-year roadmap to make Merritt safer, more accessible, and more inclusive for older adults, people with accessibility needs, and others who experience barriers in daily life. The report points out that significant floods and wildfires have impacted capital budgets, making targeted, smaller adjustments especially valuable.

The plan is structured in four main parts, each designed to stand alone. These are:

- Background and local context
- A description of the guiding frameworks
- Five Strategic Directions, organized into quick wins, near-term actions, and longer-term system and policy shifts
- "What we heard" from the community engagement activities categorized across the eight age-friendly community dimensions, followed by suggestions for implementation, monitoring, and evaluation

Together, these sections are intended to guide both day-to-day decisions and longer-range planning.

PURPOSE AND GUIDING FRAMEWORKS

The purpose of the plan is to improve the accessibility and age-friendliness of Merritt's built environment, programs, services, and decision-making processes, while aligning with provincial legislation and existing municipal strategies. It is explicitly framed by four key frameworks:

1. The eight age-friendly community dimensions used in British Columbia.
2. The statutory requirements of the Accessible British Columbia Act, including the need for an accessibility committee, plan, and feedback mechanism.
3. A social determinant of health lens, emphasizing how income, housing, transport, social connection, and culture shape access and community participation.
4. Foundational universal design principles that aim to make environments usable by as many people as possible without the need for adaptation.

The plan also builds on existing documents such as the Official Community Plan, Road Corridor Assessment, Economic Development Strategy, Parks, Recreation and Culture Master Plan, regional (TNRD) and Interior Health accessibility plans, and other related strategies.

HOW THE PLAN WAS DEVELOPED

The plan draws on:

- A resident survey focused on age-friendliness and accessibility, with responses primarily from older adults and people with accessibility needs.
- Key informant interviews and small group discussions with older adults, caregivers, Indigenous partners, service providers, and City staff.

- A detailed review of municipal and regional policy documents, transportation and infrastructure assessments, and previous age-friendly work.

Community engagement results have been summarized across all eight age-friendly dimensions: outdoor spaces and buildings; transportation; housing; social participation; respect, social inclusion and cultural safety; civic engagement and employment; communication and information; and community support and health services. These findings underpin the recommended actions.

KEY THEMES FROM "WHAT WE HEARD"

Across the eight dimensions, several cross-cutting themes emerged:

- **OUTDOOR SPACES AND BUILDINGS:** Residents value Merritt's parks, overall walkability, and compact downtown, but some reported barriers such as uneven sidewalks, steep grades, winter snow and ice, limited benches, and inconsistent accessibility of washrooms and civic buildings.
- **TRANSPORTATION:** Local transit is available and works well for many, but there are limited supportive transit (e.g., HandyDART or volunteer driver) options, and many older adults rely on family, friends, volunteer drivers, or scooters. Winter conditions, hills, and sidewalk gaps make walking and rolling difficult in key areas.
- **HOUSING:** There are few affordable, accessible units for older adults and people with accessibility needs, and many live in older homes that are hard to maintain. Housing and transportation barriers interact meaning that moving closer to services is often unaffordable.
- **SOCIAL WELLBEING AND RECREATION:** Merritt has strong assets (Seniors' Centre, civic programs, parks, informal social networks), yet many older adults remain isolated, especially those with mobility, mental health, or income challenges.
- **RESPECT, SOCIAL INCLUSION AND CULTURAL SAFETY:** Cultural events and Indigenous partnerships are strengths, but some Indigenous residents and equity-deserving groups report experiences of feeling unwelcome in some public spaces.
- **CIVIC ENGAGEMENT AND EMPLOYMENT:** There is a strong volunteer culture, but opportunities are not centrally coordinated and inclusive employment options for people with accessibility needs or health issues are limited.
- **COMMUNICATION AND INFORMATION:** Many residents find it hard to know what services exist, how to access them, or how to give feedback. Digital tools alone are not enough, especially for those without reliable internet or other accessibility barriers.
- **COMMUNITY HEALTH AND WELLNESS SERVICES:** Health and social services are appreciated but stretched. Access challenges include long waits, the need to travel to larger centres, limited outreach to those who are housebound, and complex navigation in the system.

FIVE STRATEGIC DIRECTIONS

In response, the plan proposes five Strategic Directions with targeted recommendations. Each includes:

- Quick wins (0–18 months): low-cost, practical steps.
- Near-term actions (18-36 months): pilots, tools, and modest projects.
- System and policy shifts (three to five years): embedding accessibility in bylaws, policies, capital planning, and partnerships.

The five directions are:

1. **CREATING ACCESSIBLE PUBLIC SPACES AND INFRASTRUCTURE FOR ALL**
   Focus on micro-fixes to existing sidewalks and crossings, better snow and ice management at key corners, more benches on priority routes, small accessibility improvements in civic facilities, and a realistic "priority routes" network to guide future investments. Longer-term actions integrate accessibility into capital planning, bylaws, and design standards, recognizing limited budgets and major infrastructure demands.

2. **ADVANCING SOCIAL INCLUSION AND ACCESSIBILITY EQUITY THROUGH PROGRAMS AND SERVICES**
   Emphasizes inclusive recreation and social programs (e.g., multicultural socials, intergenerational events), staff training on accessibility and inclusion, outreach to isolated older adults, and low-cost adjustments within existing budgets. Over time, the City would adopt accessibility and inclusion policies, embed accessibility into annual departmental planning, and support the Accessibility Advisory Committee in a more strategic, ongoing role.

3. **IMPROVING COMMUNICATION AND AWARENESS OF PROGRAMS AND SERVICES**
   Prioritizes accessible City communications and web content, multi-channel outreach (online, print, radio, community boards), clear accessibility information for events, and a simple feedback mechanism that meets Accessible BC Act requirements. Longer-term, accessibility becomes a core part of the City's communications standards and policies, with regular monitoring of performance.

4. **ADVANCING INDIGENOUS ACCESSIBILITY AND CULTURAL INCLUSION**
   Centres Indigenous perspectives by inviting Indigenous representatives to the Accessibility Committee, improving accessibility of Indigenous-centred events, and supporting Indigenous-led programs. Longer-term actions include co-exploring naming and signage of key civic spaces, encouraging use of local Indigenous contractors in relevant accessibility projects, and aligning accessibility work with reconciliation and the UN Declaration on the Rights of Indigenous Peoples (UNDRIP) commitments.

5. **COORDINATING LOCAL SUPPORT AROUND HOUSING AND TRANSPORTATION CHALLENGES**
   Recognizes that the City cannot solve housing supply or regional transit alone but can improve coordination and access. Early actions include clear "Housing and Getting Around in Merritt" information, priority winter routes, regular meetings with housing and transportation partners, small pilots for coordinated rides, and bringing "pop-up" services closer to where people live. Over time, accessibility and aging are more fully integrated into land use, housing and transportation planning, and the City is better

positioned to partner on accessible and supportive housing and community mobility models when opportunities arise.

IMPLEMENTATION, MONITORING, AND EVALUATION

To support implementation, the plan proposes:

- Clear leads and key partners for each action, with an emphasis on building on existing roles rather than creating new stand-alone programs.
- Phased timelines that match Merritt's current fiscal reality: starting with small, visible changes that build momentum and trust.
- Simple, meaningful indicators that can be tracked over time (for example, number of barriers removed, participation levels, reported feelings of safety and inclusion, and specific improvements to infrastructure or services).

Monitoring and evaluation are framed as iterative and practical. The City and the Age-Friendly & Accessibility Advisory Committee are encouraged to:

- Review progress annually against the action tables.
- Use the accessibility feedback mechanism, survey data, and partner input to understand where barriers remain.
- Update priorities as circumstances, funding, and community needs evolve.

Overall, the plan is intended as a working guide. It provides a structured but flexible framework to help Merritt, its partners, and community members move toward a more age-friendly and accessible city.

This report provides a practical roadmap to strengthen age-friendliness and accessibility in Merritt in the context of an aging population that is leading to rising accessibility needs. It is intended to guide realistic, staged action over the next three years, support compliance with provincial accessibility requirements, and align day-to-day decisions with existing City plans and policies.

The report is organized into five main sections, each designed to be readable as a standalone component. The background section outlines the local context, demographics, and recent events that may impact planning, decision-making, and budgets. This is followed by a brief description of the four guiding frameworks that anchor the work. These include the eight age-friendly community dimensions used in British Columbia, the Accessible British Columbia Act, the social determinants of health, and universal design principles.

The Strategic Directions section then sets out a phased action plan, organized into five strategic directions with quick wins, near-term actions, and longer-term system and policy shifts. The Context and Community Engagement section summarizes community input and survey findings in each of the eight age-friendly dimensions, highlighting both assets and barriers. The final section offers suggestions for implementation, monitoring, and evaluation so that progress can be tracked over time, adjustments can be made as conditions change, so that the plan can function as a living document.

SECTION 1:

Background

This Background section outlines the report structure and format, summarizes city demographics and the community health profile, highlights key trends in population aging, and outlines important barriers and supports for people with accessibility needs. It sets the context for the recommendations and action plan presented in the sections that follow.

OVERVIEW

The report is organized into five main sections, each designed to be readable as a standalone component. The background section outlines the local context, demographics, and recent events that may impact planning, decision-making, and budgets. This is followed by a brief description of the four guiding frameworks that anchor the work. These include the eight age-friendly community dimensions used in British Columbia, the Accessible British Columbia Act, the social determinants of health, and universal design principles.

The Strategic Directions section then sets out a phased action plan, organized into five strategic directions with quick wins, near-term actions, and longer-term system and policy shifts that can be assessed at the three-year mark. The Context and Community Engagement section summarizes community input and survey findings in each of the eight age-friendly dimensions, highlighting both assets and barriers. The final section offers suggestions for implementation, monitoring, and evaluation so that progress can be tracked over time, adjustments can be made as conditions change, so that the plan can function as a living document.

DEMOGRAPHICS

Merritt is in the Nicola Valley on the traditional lands of the Nlaka'pamux and Syilx (Okanagan) Peoples. The community has been shaped by its role as a meeting place for transportation and trade in southern British Columbia, and by its ranching and forestry roots. In recent years, Merritt has been significantly affected by major flood and wildfire events, which have disrupted housing, infrastructure, and community services.

In summer 2021, the Lytton Creek and July Mountain wildfires triggered city-wide evacuation alerts for Merritt and nearby rural areas, closed key highways, and blanketed the community in smoke for extended periods. In mid-November of the same year, a record "atmospheric river" brought extreme rainfall across southern BC. In Merritt, the Coldwater River overflowed its banks and the entire city was ordered to evacuate on November 15, 2021.

Flooding destroyed or severely damaged dozens of homes and critical infrastructure in low-lying neighbourhoods along the Coldwater and Nicola Rivers. Merritt is consistently described as one of the communities hardest hit by the 2021 floods. The floods also had a profound impact on the local Indigenous population, for example, the Shackan Indian Band, where some members remain displaced and the community is still in recovery. The 2021 floods are now characterized by the Province of BC as the most expensive natural disaster in BC's history, with

catastrophic impacts on communities, transportation, and critical infrastructure.[1] This combination of events has had long lasting impacts on decision-making for City budgets.

Merritt also is experiencing pressures from a rapid shift in its age distribution. According to the 2021 Canadian Census, Merritt's population is characterized by a significant proportion of older adults, with 28% aged 65 and older and 15% aged 55 to 64. Population estimates provided by BC Stats project the median age in Merritt (currently 49) will rise to 51 by 2046.[2][3]

Eighty-four percent of residents aged 25 to 64 have at least a high school diploma or equivalent. Merritt's population also has a diverse socioeconomic profile, as indicated by the 2021 Statistics Canada Census. The median total income for individuals in 2020 was $36,000, with the median after-tax income at $34,000. Over half of the population (56%) falls within the bottom half of the adjusted after-tax family income distribution, and low-income status is notably prevalent, affecting 55% of those aged 18 to 64 and 26% of older adults aged 65 and older. The city's unemployment rate is 9.4%, higher that the provincial average of 6.6%.[4][5]

Merritt is home to a large Indigenous community, with 22% of residents identifying as Indigenous. The "visible minority" population as defined by Stats Canada includes 6% South Asian, 0.6% Chinese and Filipino, and 0.4% Latin American and Black residents. The city's linguistic profile is predominantly English-speaking, with 94.2% of residents reporting English as their only language and 89.5% indicating English as their mother tongue. Interestingly, French is virtually absent as a sole language.[6]

According to Statistics Canada, most households in Merritt are owner-occupied (73%), while renters represent 27%, and the vast majority (92%) are not condominiums. The two largest age groups among households are older adults aged 55 to 64 (20%), and those aged 65 to 74 (20%).[7]

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[1] Government of British Columbia. (2025, March 25). *Province funds replacement of flood-damaged dikes in Merritt*. Ministry of Emergency Management and Climate Readiness. https://news.gov.bc.ca/releases/2025EMCR0008-000251

[2] Statistics Canada. "Census Profile, 2021 Census of Population." Statistics Canada, 2 Aug. 2024, www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/details/page.cfm?LANG=E&GENDERlist=1 .

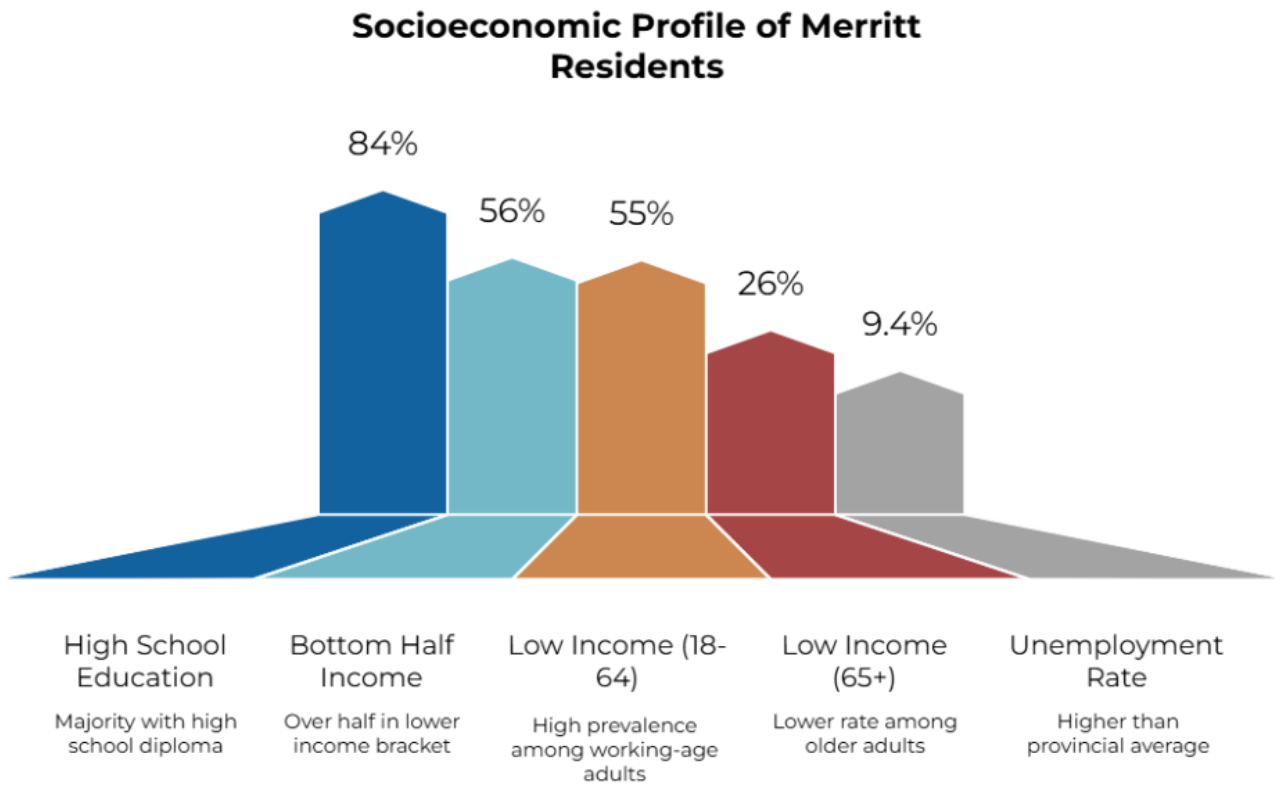
[3] (n.d.). *Population estimates and projections app*. Province of British Columbia. Retrieved from https://bcstats.shinyapps.io/popApp/

[4] Government of British Columbia. (2025, November 7). *Labour Force Statistics Highlights Issue #22-12*. https://catalogue.data.gov.bc.ca/dataset/466ddecd-2701-4e97-84fb-df60bd5aca95/resource/ceca73dc-73d4-4aea-bc6c-874631ced909/download/lfs_highlights.pdf

[5] "When the unadjusted after-tax income of household pertaining to a person falls below the threshold applicable to the person based on household size, the person is considered to be in low income according to LIM-AT. Since the LIM-AT threshold and household income are unique within each household, low-income status based on LIM-AT can also be reported for households." Statistics Canada. "Census Profile, 2021 Census of Population." Statistics Canada, 2 Aug. 2024, www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/details/page.cfm?LANG=E&GENDERlist=1

[6] Statistics Canada. "Census Profile, 2021 Census of Population." Statistics Canada, 2 Aug. 2024, www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/details/page.cfm?LANG=E&GENDERlist=1.

[7] Statistics Canada. (2022). *Merritt, British Columbia (Census subdivision) Census Profile, 2021 Census of Population*. Government of Canada. https://www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/index.cfm



During the project community engagement phase, survey responses reveal that 63% of participants rated Merritt as a good or excellent place to live. Based on analysis of the 2018 Canadian Housing Survey, 67% of British Columbians rate their neighbourhood satisfaction as 8, 9, or 10 out of 10, compared with 68% in small population centres across B.C. [8]In terms of retirement, 54% of respondents considered Merritt a good place to retire.[9] Community connection was notably strong as reported by survey respondents, with 69% of participants described their sense of belonging as good or excellent, which slightly surpasses the provincial average of 68% reporting a somewhat strong or very strong sense of belonging.

HEALTH PROFILE

According to the 2021 Interior Health profile, the Thompson Cariboo Shuswap Health Area included 12,008 residents for the "Merritt" designation (which differs in size from the census community profile). Life expectancy in Merritt as of 2020 was notably lower than the provincial average, with women living to 81 years (compared to 86 across B.C.), men to 72 years (B.C. average 80), and an overall average of 76 years (B.C. average 83).

Chronic disease rates are higher in Merritt, with depression affecting 34.5% of residents (versus 26.4% in B.C.), diabetes at 13.3% (B.C. average 9.6%), and mood or anxiety disorders

[8] Community engagement survey was a convenience sample

[9] Statistics Canada, Dwelling and neighbourhood satisfaction, by tenure including social and affordable housing and structural type of dwelling, 2018 (Table 46-10-0024-01), Canadian Housing Survey, data set (Ottawa: Statistics Canada, 2019), https://doi.org/10.25318/4610002401-eng . High satisfaction (scores of 8, 9, or 10 out of 10) follows the definition used in Statistics Canada, "Housing challenges related to affordability, adequacy, condition and discrimination, August 2 to September 15, 2024," The Daily (November 19, 2024).

impacting 44.0% (compared to 32.5% provincially). Adult overweight and obesity are lower in the Thompson Cariboo Shuswap than the provincial average (29% as opposed to 41%). Merritt offered six mental health and substance use beds in 2021/22. In 2019-2020, 59% of Thompson Cariboo Shuswap residents reported very good or excellent mental health (B.C. average 63%), and 54% described their overall health as very good or excellent (B.C. average 60%).[10]

POPULATION AGING AND ACCESSIBILITY

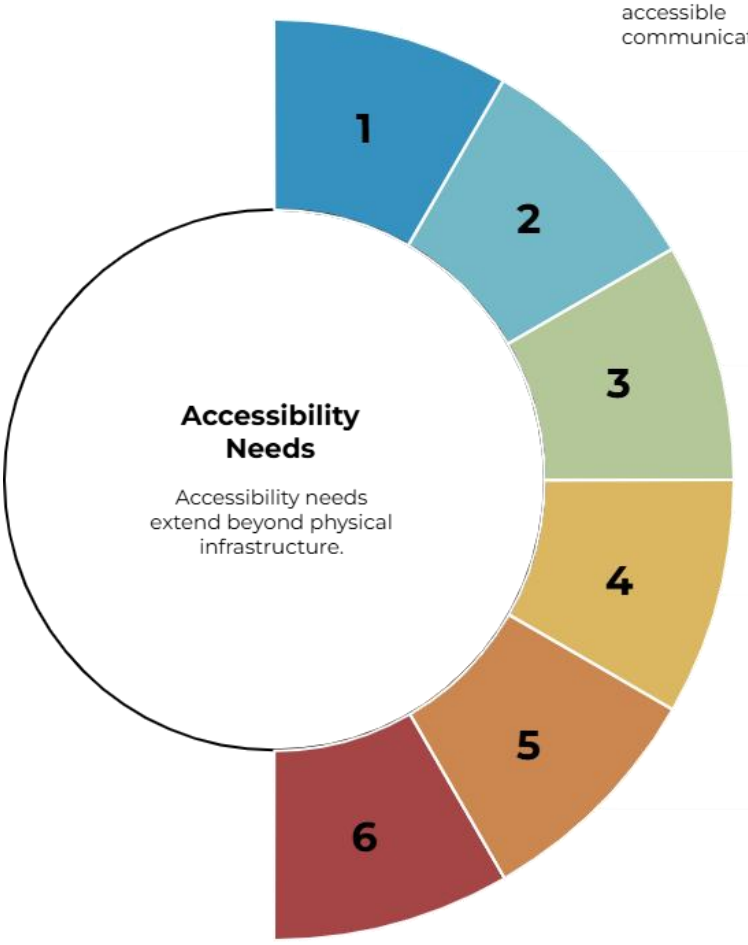
As Canada's population ages, the demand for accessible environments and services has risen sharply, especially in smaller communities like Merritt. The high proportion of older adults (43% of the population aged 55 and older) with projections indicating continued growth reflects broader demographic changes. This demographic shift has put greater emphasis on the importance of accessible housing, transportation, and public spaces.

Accessibility needs go beyond physical infrastructure, and should include inclusive communication, social participation, and access to health services. Older adults in particular often face mobility challenges, sensory impairments, and chronic health conditions. As chronic diseases, mental health concerns, and disability rates (40% of those over the age of 65) are more prevalent among older adults, communities must adapt by providing supportive environments and tailored services.[11][12] A combination of population aging and residents with accessibility needs highlights the need for planning for accessibility, inclusive design, and accessible services.

This project is part of the City's commitment to promoting an inclusive, supportive, and equitable community environment. The following report outlines both the rationale for these efforts and the steps being taken to make sure that all residents can fully participate in community activities, access essential services, and enjoy public spaces.

[10] Interior Health Authority. (2021). *Local health area profile: Merritt*. Interior Health. Retrieved from https://www.interiorhealth.ca/sites/default/files/PDFS/merritt-lha.pdf
[11] Public Health Agency of Canada. (2020). *Aging and chronic diseases: A profile of Canadian seniors*. Government of Canada. https://www.canada.ca/en/public-health/services/publications/diseases-conditions/aging-chronic-diseases-profile-canadian-seniors-report.html
[12] Statistics Canada. (2023, December 1). *Canadian Survey on Disability, 2017 to 2022*. The Daily. Government of Canada. https://www150.statcan.gc.ca/n1/daily-quotidien/231201/dq231201b-eng.htm

Important Parts of Accessibility



Inclusive Communication

Ensure clear and accessible communication for all.

Social Participation

Promote active social engagement for everyone.

Access to Health Services

Provide equitable access to tailored health services.

Mobility Challenges

Address mobility issues faced by older adults.

Sensory Impairments

Accommodate sensory impairments with appropriate support.

Chronic Health Conditions

Manage chronic conditions through supportive environments.

KEY COMPONENTS OF THE PLAN

The primary goal of this plan is to identify, reduce, and help mitigate barriers to accessibility throughout the city, while also recognizing the community's progress and leadership in promoting accessibility in an age-friendly way.

The Age-Friendly and Accessibility Plan addresses critical aspects of city life, including:

- Accessible outdoor spaces and public buildings
- Affordable and accessible transportation and housing options
- Opportunities for social participation and cultural inclusion
- Access to community support and services
- Clear communication and information sharing to keep all residents informed and engaged

The report is divided into sections that are designed to be "standalone" documents for maximum readability. The main section is an action plan which proposes ways for moving forward, including systems for prioritization and specific recommended actions for city properties, universal design for accessibility, and improved services for older adults using guiding frameworks in five strategic areas. An outline of the context review and community engagement results is detailed in the third section, and the final section makes recommendations for moving forward through implementation and evaluation.

SECTION 2:

The Action Plan

The Action Plan section outlines strategic directions for creating a more inclusive and accessible city for all residents. The five strategic directions include recommendations for quick wins (zero to 18 months), near term actions (18 to 36 months), and system and policy shifts (3-5 years). These sections are further aggregated with specific actions, resources, lead stakeholder, key partners, and example progress indicators (for use in future formal evaluation).

THE FRAMEWORKS AND COMMUNITY INPUT SHAPING THIS PLAN

This Plan is guided by using established frameworks, existing City planning documents, and extensive community input. The community engagement process, as outlined later in the plan, involved consultation with residents, local organizations, and key stakeholders to ensure their voices informed the priorities and recommendations. This approach allowed us to gather insights about lived experiences, accessibility challenges, and opportunities for improvement.

In parallel, the context review consisted of a comprehensive examination of existing city documents, best practices from comparable communities, and relevant literature review. This approach provided both a solid evidence-base and a local perspective for the Age-Friendly and Accessibility Plan, supporting its alignment with recognized plans while remaining responsive to Merritt's context. The four key frameworks providing structure and direction for the development of the plan are:

FRAMEWORK	DESCRIPTION
Age-Friendly Dimensions	Eight dimensions used in BC for community planning
Accessible BC Act	Statutory requirements: committee, plan, feedback mechanism
Social Determinants of Health	Income, housing, transport, social connection, culture
Universal Design Principles	Environments usable by all, minimizing need for adaptation

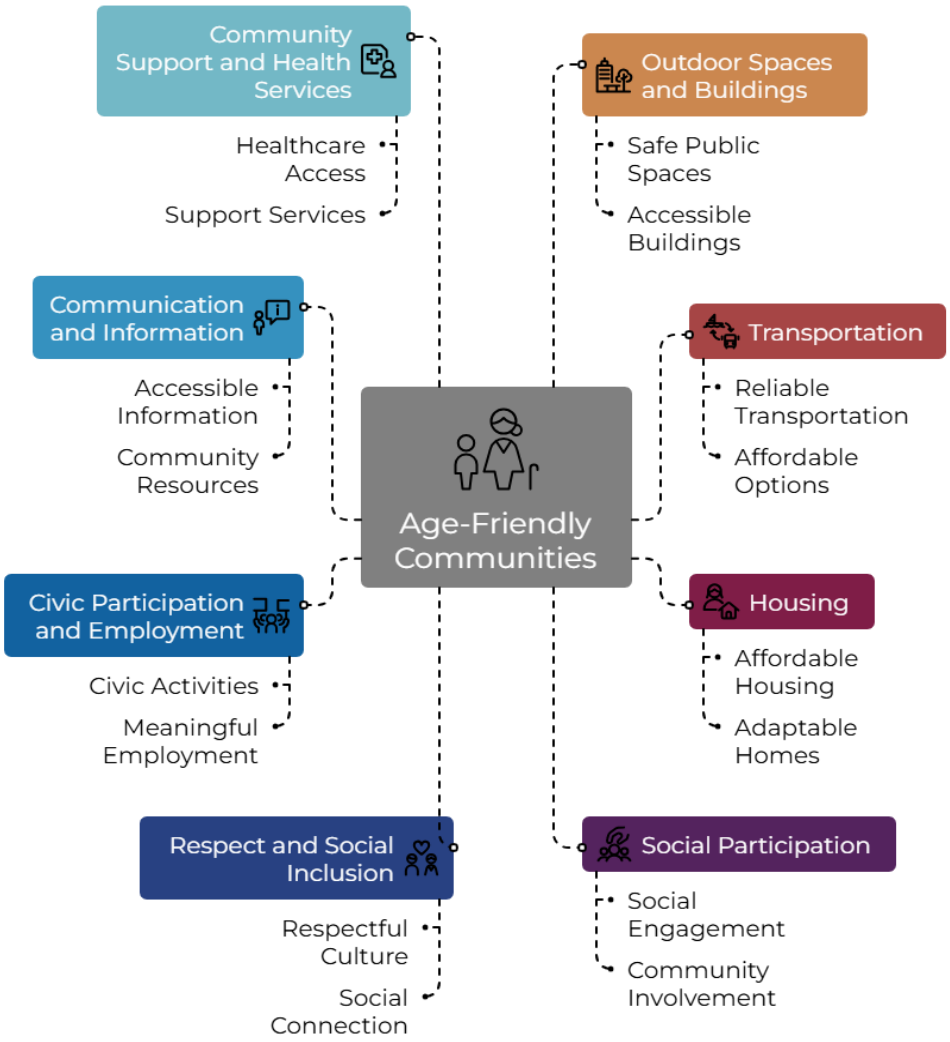
These frameworks ensure the plan is comprehensive and inclusive, covering the physical, social, and systemic aspects of accessibility. In combination, the frameworks and community feedback shaped five strategic directions in the plan, aligning Merritt's priorities with best practices and the lived experiences of residents. The following section explains each framework and how it influenced the plan's recommendations.

FRAMEWORK # 1:
Eight Age-Friendly Community Dimensions
(BRITISH COLUMBIA)

Background: British Columbia's age-friendly initiative uses eight domains to describe the attributes of an age-friendly community. The eight domains provide a structured way to assess community assets and barriers.

Why these domains matter: Each domain represents a real-world environment or system that can either facilitate inclusion or create barriers. For example, Outdoor Spaces and Buildings addresses the accessibility of sidewalks, parks, and public buildings; when they are well-designed (e.g., smooth surfaces, ramps, benches, lighting), everyone can use them safely. The transportation domain includes public transit, roads, and pathways and is a critical "gateway" domain because, without reliable, affordable transportation, many people (especially those who don't drive) can't reach jobs, healthcare, or social activities.

Key Domains of Age-Friendly Communities



Each domain similarly highlights essential features. The eight domains are:

1. **OUTDOOR SPACES & BUILDINGS:** Safe, accessible public places (e.g., level sidewalks, ramps, clear signage, accessible washrooms) so that mobility is easy year-round.
2. **TRANSPORTATION (including road safety):** Options like transit, supportive driver services, and walkable infrastructure, with attention to winter road maintenance and safe crossings, so people can travel, especially without driving.
3. **HOUSING:** A range of affordable, adaptable housing that enables aging in place (e.g., homes with barrier-free entrances, grab bars, lift or elevator access) for changing needs.
4. **SOCIAL WELL-BEING AND PARTICIPATION:** Inclusive recreation, cultural, and social activities that are accessible in terms of venue, cost, timing, and accommodations, so no one is isolated due to disability or finances.
5. **RESPECT, SOCIAL INCLUSION, AND CULTURAL SAFETY:** A culture of respect and equity, reflected in local services, customer service, and opportunities for all ages and backgrounds to be heard. This domain emphasizes reducing stigma and ensuring people feel valued.
6. **CIVIC ENGAGEMENT AND EMPLOYMENT:** Opportunities to work, volunteer, serve on committees, and otherwise participate in civic life, with adaptive supports (e.g., flexible schedules, assistive devices, accessible meeting formats) to eliminate barriers to participation.
7. **COMMUNICATION AND INFORMATION:** Accessible, understandable information in multiple formats (from large-print and plain-language written materials to websites that meet accessibility standards) so everyone can find and use information about community services.
8. **COMMUNITY SUPPORT, AND HEALTH AND WELLNESS SERVICES:** Access to needed health care and support services (like home care, meal programs, seniors' centers) that help people remain healthy and independent.

The recommendations in this plan were designed using these eight domains as a blueprint to capture themes in what we heard. During the needs assessment phase, data and community feedback were analyzed by each domain to identify Merritt's strengths, gaps, and barriers. This approach ensured the plan's eventual strategic directions would comprehensively address physical environments, transportation systems, housing, social and civic life, communication, and services. It also means Merritt's plan aligns with the same categories used by other BC communities, making it easier to compare progress and adopt best practice age-friendly interventions. In short, the eight domains provided the "compass points" for Merritt's accessibility planning, making sure key aspects of an age-friendly, accessible community were considered and integrated.

FRAMEWORK # 2:
Accessible British Columbia Act Requirements

BACKGROUND: The Accessible British Columbia Act (2021) mandates that local governments (and other organizations) take specific steps to improve accessibility. This plan was developed to help meet these requirements.

The Act requires every municipality in BC to do three main things: (1) Establish an Accessibility Advisory Committee that includes people with accessibility needs; (2) Create an Accessibility Plan to identify, remove, and prevent barriers (and update it at least every three years); and (3) Set up a mechanism for public feedback on accessibility issues. The Act also embeds six guiding principles: inclusion, adaptability, diversity, collaboration, self-determination, and universal design, which must be considered when developing the plan.

MERRITT'S ALIGNMENT: An Accessibility Advisory Committee was formed before the project, which is comprised of seniors, people with accessibility needs, caregivers, service providers, and other stakeholders. The committee's insights (for example, firsthand accounts of navigating curb letdowns or using City facilities) were invaluable in pinpointing real-world barriers and vetting proposed solutions.

This plan works to fulfill the Act's requirement of an official Accessibility Plan. It catalogues barriers in City infrastructure, programs, and policies, and sets out actions to address them. To satisfy the Act's requirement for a public feedback mechanism, there are recommendations that the City establish accessible channels for ongoing input, such as a dedicated email address and a simple feedback form on the City website. The plan calls for these channels to remain open and for feedback to be reviewed regularly by staff and the Advisory Committee.

By embedding these elements, the plan is not a one-time report but a living strategy. The Act's requirements formed the standards that Merritt's plan had to meet, and the plan was crafted to meet those standards in spirit and practice.

FRAMEWORK # 3:
Using a Social Determinants of Health (SDOH) Lens

BACKGROUND: Traditional accessibility planning typically emphasizes physical elements of the built environment, such as ramps, curb letdowns, and seating, to remove physical barriers. However, this plan also considers social and economic influences known as Social Determinants of Health (SDOH), which affect an individual's ability to participate fully in community life. Factors like income, education, housing, social support, gender, and culture all play a significant role in well-being and access to opportunities. For example, more Canadian

adults with higher incomes (61%) report very good or excellent health compared to those with lower incomes (43%).[13]

Chronic diseases become more common with age and can severely affect daily life, increasing risks of hospitalization, illness, disability, and mortality. The impact of chronic diseases is especially felt in rural communities with fewer than 10,000 residents, which have been shown to have higher rates of chronic diseases such as high blood pressure, heart disease, diabetes, obesity, and arthritis when compared to larger population centres.[14]

Benefits of Integrating SDOH into Accessibility Planning

Integrating SDOH into accessibility planning offers numerous benefits:

- **Improved Health Outcomes:** By addressing the root causes of health inequities, accessibility planning can contribute to improved health outcomes for all members of the community.
- **Stronger Communities:** By creating more equitable and inclusive communities, accessibility planning can foster social cohesion and strengthen community bonds.

HOW THIS INFLUENCED THE PLAN

The project team gathered data and stories about how social determinants impact Merritt's older adults and people with accessibility needs. Community engagement revealed, for example, that low socioeconomic status of some residents and some aspects of rural isolation can be barriers in Merritt.

FRAMEWORK # 4:
Universal Design Principles

BACKGROUND: Universal design (UD) refers to designing environments and products to be usable by everyone, to the greatest extent possible, without needing adaptation or specialized design. Instead of reacting to barriers after the fact, universal design proactively incorporates features that accommodate a wide range of abilities and circumstances from the beginning.[15] Universal design principles are integrated into other frameworks (e.g., Age-friendly planning, The BC Accessibility Act), but it is helpful to highlight the principles individually for planning. This plan uses universal design as a guiding philosophy, which influenced both the assessment of current community features and the recommendations for future projects.

KEY PRINCIPLES OF UNIVERSAL DESIGN

There are seven classic UD principles (as mentioned above), which should be used as a

[13] Statistics Canada. (2025, March 5). *Key findings from the Health of Canadians report, 2024*. The Daily. Government of Canada. https://www150.statcan.gc.ca/n1/daily-quotidien/250305/dq250305a-eng.htm
[14] Statistics Canada. (2025, March 5). *Key findings from the Health of Canadians report, 2024*. Government of Canada. https://www.statcan.gc.ca/en/daily-health-canadians-2024
[15] Centre for Excellence in Universal Design. (n.d.). *The 7 principles*. National Disability Authority. Retrieved November 21, 2025, from https://universaldesign.ie/about-universal-design/the-7-principles

checklist when evaluating infrastructure and public spaces. Table 1 below lists these principles along with examples relevant to Merritt:

TABLE 1 – SEVEN PRINCIPLES OF UNIVERSAL DESIGN (WITH MERRITT EXAMPLES)

PRINCIPLE	MEANING	EXAMPLE IN PRACTICE (MERRITT)
1. EQUITABLE USE	Design is useful to people with diverse abilities.	Improving the automatic doors at City Hall – this improves accessibility for a parent with a stroller, a person using a wheelchair, or a delivery worker with a cart equally (no one is left struggling with a heavy door).
2. FLEXIBILITY IN USE	Accommodates a wide range of preferences and needs.	Improving the City website to provide information in multiple forms text, voice output, and printable brochures so users can choose how to interact.
3. SIMPLE & INTUITIVE	Easy to understand, regardless of the user's experience.	Clear signage with symbols and plain words for City services (e.g. using a 💧 symbol and the word "Water" for a water bill drop-off) helps users of all literacy levels and languages navigate civic processes.
4. PERCEPTIBLE INFORMATION	Communicates information effectively to all users through different senses.	Pedestrian crosswalk signals that have visual cues and audible tones ensure both sighted and visually impaired pedestrians know when it's safe to cross
5. TOLERANCE FOR ERROR	Minimizes hazards and adverse consequences of mistakes.	In public parks, "soft" surfaces under playground equipment reduce injury risk from falls.
6. LOW PHYSICAL EFFORT	Can be used efficiently and comfortably with minimum fatigue.	Facilities such as the Nicola Valley Aquatic Centre and the Merritt Civic Centre are promoted by the City as accessible to people with accessibility needs, and accessibility design standards from the BC Building Code are used to guide upgrades and new construction
7. SIZE & SPACE FOR APPROACH & USE	Provides appropriate space for approach, reach, manipulation, regardless of user's body size or mobility device.	Wide aisles in the library ensure someone using a scooter or a double stroller can navigate the space easily.

FROM FRAMEWORKS AND FEEDBACK TO
Strategic Directions

The interactions of these frameworks, and the information gathered from the community engagement process and context review, ultimately shaped the five strategic directions recommended in this Plan. Each strategic direction is a tailored focus area that emerged where Merritt's local needs (as voiced by the community) was matched with the guidance of the frameworks. In other words, the frameworks provided the "bins" to sort ideas and best practices, and community feedback filled those bins with Merritt-specific priorities.

STRATEGIC DIRECTION 1:

Accessible Public Spaces and Infrastructure for All

Objectives: This strategic direction focuses on making Merritt's outdoor spaces, streets, and civic facilities safer and more usable for residents of all ages and abilities.

The emphasis is on small, high-impact changes that reduce day-to-day barriers in places people already use. It recognizes that for many residents, a missing curb letdown, an icy corner, or a lack of benches can be as limiting as a major infrastructure gap, especially in winter and on steep slopes.

City and regional plans already acknowledge that accessible, well-maintained sidewalks, crossings, parks, and civic buildings are essential to safety, quality of life, and economic growth. The City of Merritt's 2018 Road Corridor Assessment identified a subset of sidewalks and gravel road segments in poor condition or with drainage issues, while the Official Community Plan calls for age-friendly, all-ages-and-abilities active transportation networks, winter city design, and streets that prioritise pedestrian safety, particularly for children and seniors.

Parks, recreation, and trail policies emphasize intergenerational use, accessible design for people with mobility, sensory, and perceptual challenges, and consistent signage, mapping, and hazard management in parks and natural areas. The Economic Development Strategy highlights that well-maintained roads, pathways, and sidewalks, and better pedestrian connectivity contribute directly to the local economy and a competitive business environment. This direction draws those pieces together and into a focused set of practical, staged actions.

An explicit equity and inclusion lens is central to this direction. Survey and engagement findings show that older adults, people with accessibility needs, Indigenous residents, and those with lower incomes are more likely to rely on walking, mobility devices, and transit, and to be affected by uneven sidewalks, snowbanks, inaccessible washrooms, and long distances without places to rest.

Large, planned infrastructure projects mean that major sidewalk repair is unlikely in the short term. In that context, focusing on priority accessible routes provides a way to concentrate limited resources where they reduce risk and improve access for those most affected by current conditions.'

The actions under this strategic direction therefore concentrate on clearing and repairing the worst trip hazards on existing routes; improving winter maintenance at corners, curb ramps, and accessible parking; adding benches and small accessibility upgrades in civic facilities; and gradually embedding an accessibility lens into capital planning, development review, and bylaw updates.

Over time, this approach is intended to align municipal investment decisions, business practices, and regional partnerships with universal design principles and with broader accessibility commitments made through the Accessible BC Act, Interior Health's accessibility work, the TNRD Accessibility Plan, and Merritt's own Official Community Plan and master plans.

Accessibility upgrades range from minor fixes to major renovations.

QUICK WINS (0–18 months):
Low-cost, immediate improvements in outdoor spaces

1.1 Prioritize "micro-fixes" on existing sidewalks and crossings

Use the existing inventory of broken or raised sidewalks and curb letdowns to identify a short list of the worst hazards near key destinations (downtown, health services, grocery stores, bus stops). Complete low-cost grinding, patching, and asphalt bevels at these locations as a focused "high-risk barrier" package rather than a full sidewalk replacement program. This plan builds on the 2018 Road Corridor Assessment, which identified a subset of sidewalks and gravel road segments in poor condition or with drainage issues, and focuses limited resources on removing the highest-risk barriers first.

LEAD
- Public Works

KEY PARTNERS
- Accessibility Advisory Committee
- ICBC community road safety program

RESOURCES AND LINKAGES
- Existing sidewalk condition inventory (orange spray-paint audit)
- Active Transportation Plan and OCP policies on walkability and complete streets (to help prioritize corridors)
- ICBC or similar road-safety grants for crosswalk and curb improvements [16]

EXAMPLE PROGRESS INDICATORS
- Number of priority sidewalk and curb "trip points" removed in the first year
- Reduction in resident complaints or service requests related to uneven sidewalks and curb lips
- Qualitative feedback from the Accessibility Advisory Committee and mobility aid users about key routes

[16] British Columbia Injury Research and Prevention Unit. (2024). Vision Zero BC. https://www.visionzerobc.ca/

1.2 Improve snow clearing at corners and curb letdowns within existing budgets

Refine winter operations procedures to focus on clearing snow and ice windrows at corners, curb letdowns, and accessible parking stalls on main pedestrian routes (downtown, near pharmacies, grocery stores, and medical offices). Clarify expectations with staff so plowing does not block curb letdowns and driveways used by older adults and people with accessibility needs.

This action aligns with existing policies in Merritt's Official Community Plan, such as 8.9.6, which directs the design of roadways and pathways for efficient snow clearing and all-season use, including snow storage solutions that do not block the road network or active transportation routes, and consideration of slope for winter safety. Similarly, policy 10.4.2 emphasizes the ongoing improvement and maintenance of sidewalks, bike lanes, and roadways to prevent tripping or slipping hazards throughout the year, with particular attention to snow and debris removal.

LEAD
- Public Works and Engineering

KEY PARTNERS
- Accessibility Advisory Committee
- Better at Home and local seniors' organizations
- Private parking lot owners (malls, larger retailers)
- Bylaw Services\Good Neighbour program

RESOURCES AND LINKAGES
- Existing snow removal policy and service levels
- Potential partnerships with non-profits or volunteers for driveway and sidewalk assistance for high-risk older adults

EXAMPLE PROGRESS INDICATORS
- Updated written winter operations procedure referencing priority pedestrian locations and curb letdowns
- Number of corners and curb letdowns added to "must clear" lists
- Reduction in reported incidents of falls or mobility devices getting stuck at curb snowbanks (from complaints or incident reports)

1.3 Add and repair strategic benches along key walking routes

Identify 3–5 priority walking routes (for example, between older adult housing and grocery stores or pharmacies, and around Rotary and Central Parks) and install or repair benches and resting places at safe intervals. Prioritize replacing rotting benches and adding at least one additional bench in Rotary Park, where walking distances between seats are currently long for some users. Implementing a pilot accessible park and adding benches and rest areas on key walking routes directly advances OCP policies 7.1.13 and 7.2.11, which commit the City to parks, recreation facilities, and open spaces designed for intergenerational use and for residents of all levels of abilities.

LEAD
- Community Services

KEY PARTNERS
- Accessibility Advisory Committee
- Local service clubs and businesses for sponsorship
- Interior Health Authority and primary care network (falls prevention and mobility promotion)

RESOURCES AND LINKAGES
- OCP policies
- Active Transportation Plan recommendations for rest points
- Potential donations or sponsorship (service clubs, memorial benches)

EXAMPLE PROGRESS INDICATORS
- Number of safe resting places (benches with clear approaches) added or repaired
- Distance between benches along at least two priority routes reduced to an age-friendly range (e.g., about 200–250 m between rests)[17]
- Older adults and people with mobility challenges report that they can complete common trips (for example, to Save-On, Pharmasave, downtown) with at least one safe resting point.

1.4 Clarify expectations for keeping sidewalks and hedges clear

Communicate clearly with residents and businesses about their responsibilities to keep sidewalks shovelled and vegetation trimmed, and explain why this matters for older adults, people with accessibility needs, and general pedestrian safety. Pair this with a more responsive bylaw follow-up process for overgrown hedges and chronic obstructions, within existing staffing.

[17] World Health Organization. (2007). Global age-friendly cities: A guide. Geneva: World Health Organization. https://www.who.int/publications/i/item/9789241547307

LEAD
- Bylaw Services

KEY PARTNERS
- Communications
- Accessibility Advisory Committee
- Local media

RESOURCES AND LINKAGES
- Existing bylaws on snow, ice, and vegetation encroachment
- City's Age-friendly and Accessibility Plan and Accessible BC Act public feedback requirements (using complaints as part of the feedback loop)

EXAMPLE PROGRESS INDICATORS
- Number of communications (newsletters, social media posts, utility bill inserts) that include accessible-sidewalk messaging
- Time from complaint to first bylaw contact reduced for snow and hedge issues
- Fewer reports of hedges, parked vehicles, or merchandise blocking sidewalks and sightlines near schools and crosswalks

1.5 Small accessibility upgrades in civic facilities piggy-backed on planned work

Whenever minor works are already scheduled in civic buildings (paint, flooring, door hardware, washroom repairs), include low-cost accessibility upgrades such as lever handles, grab bars, visual contrast on steps, and door closers adjusted to be easier to open. Begin with City Hall (key fob access on main doors, elevator landing to office areas, staff washrooms, public washrooms improved), where key internal barriers have already been identified.

LEAD
- Facilities / Engineering

KEY PARTNERS
- Human Resources
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- BC Building Code accessibility guidelines and WorkSafeBC guidance for safe access
- Existing capital and maintenance plans for City Hall and other City buildings

EXAMPLE PROGRESS INDICATORS
- Number of doors with improved hardware or reduced closing force
- Number of civic washrooms upgraded with grab bars, turning space, and contrast strips
- Staff and public reporting easier, independent access to washrooms and meeting rooms

NEAR-TERM ACTIONS (18-36 months)

1.6 Targeted crosswalk and curb improvement program on priority corridors

Identify a small number of highest-risk intersections (for example, Nicola & Chapman, Nicola & Cleasby, Nicola & Blair, routes to Save-On, banks, and medical offices) and design a modest program of upgrades: smoothing curb letdowns, extending crossing times, improving drainage at corners, repainting crosswalks, and adding or improving pedestrian-controlled flashing lights where warranted.

LEAD
- Public Works and Engineering

KEY PARTNERS
- ICBC
- Ministry of Transportation and Infrastructure (for highway intersections)
- Older adult housing providers
- Local trucking and freight industry representatives

RESOURCES AND LINKAGES
- Active Transportation Plan and road safety data
- ICBC Road Improvement Program funding
- OCP policies on safe mobility and complete streets

EXAMPLE PROGRESS INDICATORS
- Number of high-risk intersections improved (curb letdowns, repainting, drainage)
- Crosswalk signal timings reviewed and adjusted at identified locations, with documentation
- Residents reporting they feel safer crossing at priority locations in follow-up engagement

1.7 Develop an “accessibility lens” checklist for all new capital projects and permits

Create a short, practical checklist for staff to apply whenever a new capital project, park upgrade, or building permit is reviewed. The checklist could cover items such as accessible routes, curb let-downs, door widths and hardware, washroom access, lighting, seating, and wayfinding. The goal is to ensure every planned project is designed to be more accessible by default, without relying on separate, stand-alone accessibility projects.

LEAD
- Planning / Building, with CAO oversight

KEY PARTNERS
- Public Works and Engineering
- Community Services
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Accessible BC Act requirements for accessibility planning and advisory committee input
- BC Building Code accessibility sections and provincial accessibility design guides
- Existing OCP policies that refer to universal design or age-friendly planning

EXAMPLE PROGRESS INDICATORS
- Accessibility checklist adopted and used for 100% of new municipal capital projects
- Number and percentage of building permit reviews where accessibility items are documented
- Documented examples where accessibility features were added early with minimal cost

1.8 Pilot accessibility improvements in one "everyday destination" park

Select one park (e.g., Rotary Park) as a demonstration site for small-scale accessibility upgrades rather than attempting city-wide retrofits. Possible improvements could include a paved route to the ballfield viewing areas, accessible picnic tables, wheelchair-friendly mats or firm surfaces for events on grass, an accessible bench cluster, and additional shade trees or structures.

LEAD
- Public Works and Engineering

KEY PARTNERS
- Event organizers
- Local sports associations
- Indigenous partners
- Service clubs
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Parks, Recreation, and Culture Master Plan and Strategic Plan 2024-2026
- Learnings from other small communities that have piloted accessible parks

EXAMPLE PROGRESS INDICATORS
- Number and type of accessibility features added to the pilot park
- Observed use of new features by older adults, families with strollers, and people using accessibility supports (qualitative observation and "what we heard" quotes)
- Evidence that features from the pilot inform the design of future park upgrades elsewhere

1.9 Partner-led snow removal support for high-risk older adults

Work with local non-profits (for example, Better at Home, faith communities, service clubs) to explore a small, targeted snow-removal support program for low-income or high-risk older adults and people with accessibility needs. The City's role could focus on coordination, communication, and modest in-kind support, rather than full program funding.

LEAD
- Community Services (or designated staff lead), with CAO sponsorship

KEY PARTNERS
- Better at Home / United Way
- Local service clubs
- High school leadership programs
- Faith communities
- Seniors' organizations

RESOURCES AND LINKAGES
- Past experience with Better at Home snow-removal program and feedback about cost barriers
- Social determinants of health lens to identify neighbourhoods with higher vulnerability (older adults living alone, low income, disability)

EXAMPLE PROGRESS INDICATORS
- Pilot program design completed and partners confirmed
- Number of households supported during a winter season
- Self-reported impact on ability to leave home safely during snow events

1.10 Strengthen expectations for accessible business entrances through development and business licence processes

Without imposing unworkable costs, use the business licence and renovation permit process to encourage gradual upgrades to accessibility at entrances (ramps, automatic door openers, level thresholds, clear routes from parking). Provide information on external funding (for example, WorkBC assistive technology and door-opener supports) and highlight case examples where small changes have made businesses more accessible and welcoming.

LEAD
• Business Licensing / Building Inspection

KEY PARTNERS
• Economic Development
• WorkBC
• Chamber of Commerce and Community Futures
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• BC Building Code and accessibility requirements triggered by a change of use or major renovation
• WorkBC Assistive Technology Services and other grant programs for door openers and accessibility equipment
• OCP and Downtown Revitalization policies that emphasize inclusive, pedestrian-oriented centres

EXAMPLE PROGRESS INDICATORS
• Number of businesses provided with accessibility information as part of annual licence renewals
• Number of businesses supported to apply for external funding (for example, door openers)
• Visible increase in accessible entrances (ramps, automatic doors, reduced lips) in key commercial areas over three years

1.11 Launch an Age-Friendly Business Program

Implement an Age-Friendly and Accessible Business Program that could help local businesses understand and reduce accessibility barriers while being publicly recognized for their efforts.

The program could:
• use a simple checklist (entrances, doors, aisles, washrooms, signage, lighting, noise, customer service) based on universal design principles
• offer on-site or virtual assessments and practical, low-cost improvement suggestions
• connect businesses to external funding where available (for example, for door openers or ramps)
• provide recognition (for example, an “Age-Friendly and Accessible Business” decal and online listing) for businesses that meet baseline standards or demonstrate clear progress

LEAD
- Economic Development

KEY PARTNERS
- Chamber of Commerce and Community Futures
- Accessibility Advisory Committee
- WorkBC and other employment and accessibility funding programs
- Local seniors' organizations

RESOURCES AND LINKAGES
- Existing Age-Friendly Business Program materials (from the Province of BC)
- OCP policies on a vibrant, walkable, and inclusive downtown and commercial areas
- BC Building Code accessibility requirements and provincial accessibility resources for small businesses
- WorkBC Assistive Technology Services and other funding for ramps, automatic doors, and related upgrades
- prioritize businesses along key walking routes and near older adult housing, health services, and transit stops

EXAMPLE PROGRESS INDICATORS
- Age-Friendly Business checklist finalized and endorsed by the Accessibility Advisory Committee
- At least 20 businesses engaged in the first year; at least 10 assessed using the checklist
- At least 5 businesses completing a low-cost accessibility improvement (for example, door hardware, ramp adjustment, clearer aisles, improved signage)
- Online and printed map or list of recognized Age-Friendly and Accessible Businesses created and distributed with other age-friendly and accessibility information

SYSTEM AND POLICY SHIFTS (3-5 years):
Embedding accessibility in bylaws, policy, and capital planning

1.12 Embed accessibility priorities into long-range capital planning and financial policies

ACTION
Integrate accessibility priorities into the City's long-term financial plan and capital asset management strategies so that when major utility, road, or facility projects proceed (for example, wastewater plant, flood-related infrastructure replacement), accessible routes, curb profiles, and entrances are included as standard project elements rather than add-ons. Development cost charges and other tools could be calibrated to recover a realistic portion of growth-related infrastructure costs without deterring essential housing development

LEAD
- Finance / CAO, with Engineering and Planning

KEY PARTNERS
- Council
- Development community
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Asset management plan, long-term capital plan, and OCP infrastructure policies
- Provincial guidance on development cost charges and accessible infrastructure
- Accessible BC Act requirement for ongoing accessibility planning and reporting

EXAMPLE PROGRESS INDICATORS
- Capital planning templates updated to include an accessibility section and budget line where relevant
- Explicit reference to accessible public spaces and infrastructure in at least one update to the financial plan or asset management strategy
- Documented examples where major capital projects (for example, flood recovery works, road renewals) include improved accessible routes and crossings as part of the scope

1.13 Formalize an accessibility review and monitoring role for the Accessibility Advisory Committee

ACTION
Clarify and formalize the committee's role in reviewing public space and infrastructure projects, development proposals with major public interface, and key bylaws (for example, snow and ice, sidewalk encroachment, business licensing). Provide clear processes and reasonable timelines so their expertise is embedded early and consistently. Link this role to a simple accessibility monitoring and reporting function (for example, an annual or biennial "Accessibility Report Card" to Council summarizing barriers identified and resolved).

LEAD
- Clerks / CAO

KEY PARTNERS
- Accessibility Advisory Committee
- Planning
- Engineering
- Parks
- Facilities
- Bylaw
- Communications

RESOURCES AND LINKAGES
- Accessible BC Act requirement for an accessibility committee and feedback mechanisms
- Terms of reference for the committee (to be updated if needed)

EXAMPLE PROGRESS INDICATORS
- Proportion of major capital projects and key bylaws reviewed by the committee before final decisions
- Committee recommendations tracked, with responses (accepted, modified, not feasible) documented
- Number of barriers identified and resolved each year, and an annual accessibility summary presented to Council and the Committee

1.14 Review and update bylaws affecting public space accessibility

ACTION
Undertake a phased review of bylaws affecting public space accessibility (for example, sidewalk encroachment by merchandise, parking over sidewalks, fencing of public parks, outdoor patios, snow and ice, and vegetation control). The aim is to better balance business and landowner interests with safe passage for older adults, people with accessibility needs, and families, while recognizing enforcement and resource limits.

LEAD
- Bylaw Services / Planning, with Legal review as needed

KEY PARTNERS
- Business community
- Accessibility Advisory Committee
- RCMP (for safety concerns)
- Community Services

RESOURCES AND LINKAGES
- OCP policies on vibrant, walkable downtowns and safe routes to school
- Examples of bylaws from similar-sized BC communities that have successfully reduced sidewalk clutter and obstructions

EXAMPLE PROGRESS INDICATORS
- Number of bylaws reviewed and amended with explicit consideration of accessibility impacts
- Reduction in chronic issues such as sidewalk parking, merchandise blocking routes, and inaccessible fenced park entries
- Improved perceptions of downtown and park safety and accessibility among older adults and people with accessibility needs

1.15 Integrate universal design and accessible infrastructure standards into planning and zoning

As opportunities arise through OCP and zoning bylaw updates, the City can more explicitly embed universal design and accessibility by referencing recognized standards such as CSA B651[18] and aligning with existing OCP policy directions. For example, OCP Policy 3.11.3 calls for standards for parks, trails, and green spaces in new neighbourhoods that include winter design elements, CPTED principles, and universal accessibility. Policy 8.3.1 directs the City to update the Subdivision and Development Servicing Bylaw to current standards and best practices, including complete streets, winter conditions, and universal accessibility. Policy 12.1.13 on Accessible Site Design further emphasizes designing outdoor spaces to address the functional needs of people with accessibility needs (including those with hearing, mobility, or visual impairments) by incorporating braille, acoustic cues, and other universal design elements, and by ensuring paved pathways with minimal slopes.

LEAD
- Development Services

KEY PARTNERS
- Council (bylaw approval)
- Developers and builders
- Engineering and Facilities
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Zoning Bylaw and development permit guidelines
- CSA B651 or comparable accessibility standards
- Council policy on universal accessibility in capital projects and municipal infrastructure

EXAMPLE PROGRESS INDICATORS
- References to universal design and accessibility standards included in updated planning and zoning documents
- Percentage of new developments that include required or encouraged accessible features in site design
- Proportion of new City projects demonstrated to meet the chosen accessibility standard

[18] Canadian Standards Association. (2018). *CSA B651-18: Accessible design for the built environment*. CSA Group.

STRATEGIC DIRECTION 2:

Advancing Social Inclusion and Accessibility Equity through Accessible Programs and Services

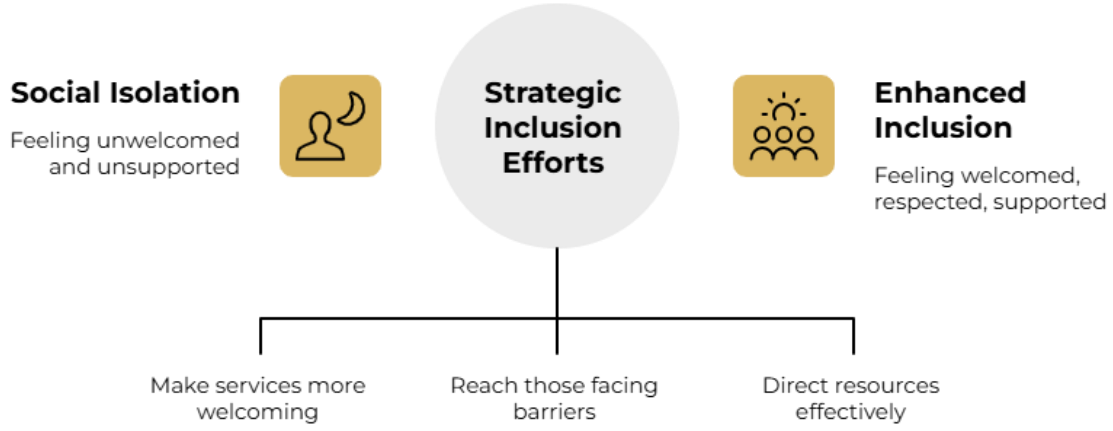
OBJECTIVE: Foster a community culture where everyone, including older adults, people with accessibility needs, and other equity-deserving groups, can participate, connect, and contribute.

Community members emphasized that inclusion in Merritt is not only about getting into a building, but also about feeling welcomed, respected, and supported. While many recognized Merritt as a welcoming community, older adults, people with accessibility needs, Indigenous Elders, and others described experiences of social isolation, difficulty participating in recreation or cultural activities, and uncertainty about where to go for help. Some noted that even when services technically exist, they may not be advertised in accessible formats, may not reflect diverse cultures, or may not feel psychologically safe to attend.

These issues affect some groups more than others. Isolated seniors, people living on low incomes, renters without vehicles, those managing chronic illness or disability, newcomers, and Indigenous community members may face multiple barriers at once, such as transportation challenges, stigma, inaccessible communication, and limited knowledge of local supports.

This strategic direction focuses on how the City and its partners design and deliver programs and services, build staff capacity, and support community-led inclusion efforts. The emphasis is on low-cost changes that make existing services more welcoming and responsive, stronger outreach to those most affected by barriers, and simple monitoring tools so that limited resources can be directed where they have the greatest impact on social inclusion and equity.

Enhancing Social Inclusion in Merritt



QUICK WINS (0–18 months)

2.1 Provide accessibility and inclusion training for staff

ACTION
Organize basic training for City front-line staff (for example, recreation, customer service, bylaw, reception) on how to assist people with accessibility needs and seniors, including disability awareness, respectful communication, and how to offer help appropriately.

LEAD
- Human Resources / CAO

KEY PARTNERS
- Local organizations such as Summit Community Services
- Provincial or regional accessibility training providers (for example, SPARC BC or similar)

RESOURCES AND LINKAGES
- Minimal cost options such as guest speakers, free webinars, or low-cost training sessions
- Consistent with the ethos of the Accessible BC Act and accessible customer service principles

EXAMPLE PROGRESS INDICATORS
- At least one training session delivered to a cohort of front-line staff within the first year
- At least 75% of participants reporting improved confidence in serving people with accessibility needs and older adults

2.2 Adjust recreation programming for inclusivity

ACTION
Review existing City recreation programs to identify simple changes and additions, such as programming for newcomers, reserved spots in popular classes for older adults, or designated adaptive equipment hours at the pool. Implement at least one modified or new inclusive program in the next six months.

LEAD
- Community Services

KEY PARTNERS
- Seniors' Centre and seniors' groups
- Interior Health (community wellness or falls-prevention programs)

RESOURCES AND LINKAGES
- Uses existing program budgets and staff capacity
- Partner with seniors' groups and health partners to promote new or adapted classes

EXAMPLE PROGRESS INDICATORS
- Quick scan of all recreation programs created with an inclusion lens
- At least one new or modified inclusive program launched (for example, gentle fitness, chair yoga, or adaptive swim time)
- Increased participation by newcomers, older adults, and people with accessibility needs in at least one program

2.3 Publicize existing support services

ACTION
Create and share (or provide City support to the existing Better at Home newsletter) a simple information tool (for example, a one-page sheet and web page) that lists local and provincial programs that support seniors and people with accessibility needs, such as HandyDART, Better at Home, BC Seniors' Supplement, and local community support agencies.

LEAD
- Communications

KEY PARTNERS
- Interior Health
- Seniors' resource directories and information lines (e.g., Better at Home)
- Local non-profits and community service providers

RESOURCES AND LINKAGES
- Staff time to compile, verify, and design a one-pager and web page
- Use City facilities, social media, and partner networks for distribution

EXAMPLE PROGRESS INDICATORS
- One-page "Support for Seniors and People with Accessibility Needs" resource created and posted online
- Printed copies available at City Hall, the library, and major community hubs
- Partner agencies sharing or linking to the resource through their own channels

2.4 Apply accessibility checks at City events

ACTION
Apply a simple accessibility checklist to all City-hosted events and public meetings, covering items such as sound system and microphone, chairs with backs, accessible routes and entrances, and a clear way for participants to request accommodations in advance.

LEAD
- Corporate Services

KEY PARTNERS
- Accessibility Advisory Committee (to help develop and refine the checklist)

RESOURCES AND LINKAGES
- No direct cost: procedural change integrated into event planning
- Checklist used for events such as Canada Day, open houses, public hearings, and engagement sessions

EXAMPLE PROGRESS INDICATORS
- Accessibility checklist developed and adopted for City events
- All major City events within a year documented as having used the checklist
- Accommodation requests received and successfully provided (for example, reserved seating, ASL, accessible materials)

NEAR-TERM ACTIONS (18-36 months)

2.5 Develop an inclusive programming and service guideline

Create a concise guideline or policy requiring City departments to consider diverse needs in program and service delivery, including how accommodations are offered and communicated. The guideline could cover items such as registration processes, support persons, quiet spaces, cultural safety considerations, and accessible materials.

LEAD
- CAO (policy lead), with Community Services and Communications

KEY PARTNERS
- Accessibility Advisory Committee
- Council (policy endorsement)

RESOURCES AND LINKAGES
- Staff time to draft, consult, revise, and present the guideline
- No significant new budget required; can be adopted as a Council Policy or internal administrative guideline

EXAMPLE PROGRESS INDICATORS
- Draft guideline reviewed by the Accessibility Advisory Committee
- Guideline adopted and referenced in program communications in at least three departments
- Staff reporting clearer expectations around inclusion and accommodations

2.6 Intergenerational and intercultural events

Partner with community organizations to host accessible events that bring seniors, youth, and diverse cultural groups together (for example, storytelling nights with Indigenous Elders and youth, art or music workshops pairing seniors and teens, or shared meals in accessible venues).

LEAD
- Community Services

KEY PARTNERS
- School District
- Indigenous partners and Conayt Friendship Centre
- Arts council and cultural groups
- Seniors' organizations

RESOURCES AND LINKAGES
- Use existing grants such as federal New Horizons for Seniors or City arts and culture budget to cover event costs
- Partners contribute programming, space, facilitators, and outreach

EXAMPLE PROGRESS INDICATORS
- At least two intergenerational or intercultural events held in accessible locations within 18 months
- Participation includes a mix of seniors, youth, and diverse cultural groups, with simple feedback indicating increased connection or understanding
- Events repeated or expanded based on positive feedback

2.7 Outreach to include people with accessibility needs and older adults in civic life

Proactively invite and support people with accessibility needs and older adults to serve on City advisory committees, volunteer roles, and recreation leader positions, with accommodations provided as needed.

LEAD
- Corporate Services (City Clerk)

KEY PARTNERS
- Local service providers
- Seniors' organizations
- Committee chairs (to mentor and support new members)

RESOURCES AND LINKAGES
- No major cost: primarily a change in recruitment and outreach practices
- Ensure postings for City committees and volunteer roles are shared through disability and seniors' networks
- Be prepared to provide accommodations (for example, ASL interpretation, accessible documents, transportation assistance) when requested

EXAMPLE PROGRESS INDICATORS
- Committee and volunteer postings routinely shared through disability and seniors' networks
- By 18 months, at least one member with a disability or lived experience of accessibility barriers on each major City advisory committee (where interest exists and accommodations are feasible)
- New members reporting that they feel supported to participate fully

SYSTEM AND POLICY SHIFTS (3-5 years)

2.8 Adopt a formal Accessibility and Inclusion Policy for City services

ACTION
Adopt a Council-approved policy that commits the City to providing accessible customer service, programs, and communications, mirroring key principles of accessible customer service standards (for example, support persons and service animals, alternate formats on request, staff training expectations, and clear processes for feedback and complaints).

LEAD
- Council / Corporate Services

KEY PARTNERS
- Accessibility Advisory Committee (review and advice)

RESOURCES AND LINKAGES
- "Accessible Customer Service and Inclusion Policy" adopted by Council resolution
- Could be framed to align with the Accessible BC Act and Accessible Canada Act principles

EXAMPLE PROGRESS INDICATORS
- Policy adopted by Year 2 of implementation
- By Year 3, 100% of City departments have incorporated the policy into procedures and trained relevant staff
- Number and proportion of accommodation requests successfully handled each year, with complaints tracked and reviewed

2.9 Embed accessibility and inclusion in annual business planning

Make it standard practice that each City department, during annual budget and business plan preparation, identifies at least one accessibility or inclusion improvement initiative for that year (for example, a communication change, a small facility improvement, or an inclusive program adjustment).

LEAD
- Chief Administrative Officer (CAO)

KEY PARTNERS
- All City departments
- Council (oversight)

RESOURCES AND LINKAGES
- Administrative directive from the CAO, or addition to annual budget instructions, requiring an "accessibility and inclusion actions" section in each department's plan
- Linked to the City's strategic planning and business planning cycle

EXAMPLE PROGRESS INDICATORS
- By the 2026/27 budget cycle, every department's plan includes at least one accessibility or inclusion initiative
- Annual review of progress by the Accessibility Advisory Committee
- Over time, a reduction in reported service barriers and accessibility-related complaints

2.10 Monitor and report on social inclusion

Develop a small set of indicators to track how well older adults and people with accessibility needs are included in the community (for example, participation rates in City programs, survey feedback on belonging, number of inclusive City-led events) and report these in a biennial "Age-Friendly and Accessibility Report Card."

LEAD
- Community Services / Communications (reporting and coordination)

KEY PARTNERS
- Interior Health (data and health lens)
- Academic or research partners (optional, for survey and indicator design)
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Incorporated as part of the Age-Friendly and Accessibility Plan implementation
- Council receives regular monitoring reports; could be formalized as a plan-monitoring policy adopted alongside the Accessibility Plan

EXAMPLE PROGRESS INDICATORS
- First Age-Friendly and Accessibility Report Card completed by Year 3 and updated every two years thereafter
- Percentage of older adults and people with accessibility needs participating in City recreation and cultural programs tracked over time (baseline plus change)
- Self-reported loneliness or isolation rates in community surveys are monitored, to decrease over time
- Number of City-led events specifically designed or adapted for inclusion tracked annually

2.11 Sustain and strengthen the Accessibility Advisory Committee

Formalize the role of the Age-Friendly and Accessibility Advisory Committee in City bylaws or procedures so it continues beyond the current plan, with Terms of Reference aligned with Accessible BC Act criteria (for example, at least 50% members with accessibility needs, Indigenous representation, and a mandate to review City policies and plans). To maintain momentum, schedule an annual strategic planning session with the committee to set priorities and map a regular meeting schedule (for example, monthly or at least 8–10 meetings per year) with a clear work plan, rather than meeting only when a specific item arises.

LEAD
- Corporate Services (Committee Clerk)

KEY PARTNERS
- Accessibility Advisory Committee
- City Council
- CAO (for alignment with corporate priorities)

RESOURCES AND LINKAGES
- Updated committee bylaw and/or Terms of Reference adopted by Council, meeting provincial guidelines
- Administrative support to schedule meetings, prepare agendas, and support an annual strategic planning session

EXAMPLE PROGRESS INDICATORS
- Committee framework and Terms of Reference updated by 2026 to align with Accessible BC Act guidance
- Annual strategic planning session held to identify priorities and confirm a 12-month meeting and work plan
- Committee meeting at least 8–10 times per year, with minutes and recommendations recorded
- City providing a written response or follow-up to 100% of committee recommendations, with outcomes tracked (for example, implemented, partially implemented, or not implemented with rationale)

STRATEGIC DIRECTION 3:

Improved Communication and Awareness of Programs and Services

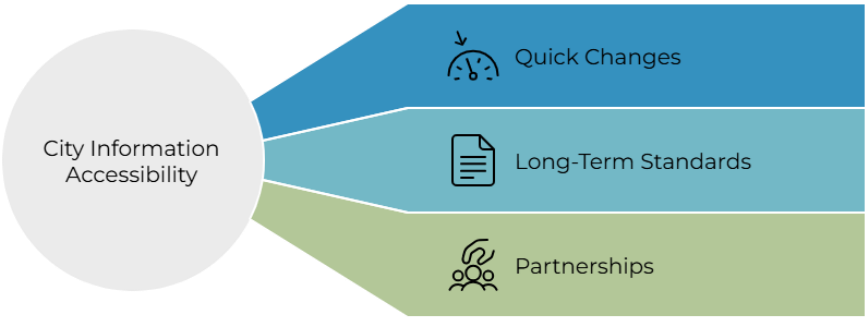
Objective: Prioritize inclusive communication strategies so that all residents, regardless of age, ability, can stay informed and engaged.

Community members highlighted that knowing what exists, how to access it, and whether information is clear and trustworthy is just as important as the services themselves. Some residents reported not knowing about HandyDART, Better at Home, or recreation programs that would benefit them. Others described struggling to find information on the City website or not being able to read small-print notices, complex wording, or PDFs that were not accessible to screen readers.

These communication barriers do not affect everyone equally. Older adults who are not online, people with low vision, those with lower literacy, people whose first language is not English, and those living alone or with limited social networks are at higher risk of missing critical information (for example, about emergencies, new programs, or engagement opportunities). Communication practices, therefore, sit directly within a social determinants of health lens, affecting access to services, safety during emergencies, and the ability to participate in civic life.

This strategic direction focuses on making City information easier to find, easier to understand, and available through multiple channels and formats. It combines quick changes to web and print materials with longer-term standards and policies, and encourages partnerships with Indigenous communities, community agencies, media, and local businesses to reach residents who are currently least likely to see City messages.

Enhancing City Information Accessibility



QUICK WINS (0-18 months)

3.1 Upgrade the City website for accessibility

Audit the City website and address basic accessibility issues, such as using plain language, adding alt text to images, enabling resizable font options, and making the Age-Friendly and Accessibility page highly visible from the home page. Aim to move closer to WCAG 2.1 AA standards over time.

LEAD
- Communications

KEY PARTNERS
- Web accessibility consultant (if needed for the audit) or online accessibility tool

RESOURCES AND LINKAGES
- Existing staff web team time
- Small budget for a consultant or accessibility tools if required
- Alignment with WCAG 2.1 AA and provincial accessibility guidance

EXAMPLE PROGRESS INDICATORS
- Accessibility audit completed and priority fixes implemented within 6 months
- Key pages such as the home page, Council information, emergency information, and Age-Friendly and Accessibility content checking positively against core WCAG criteria (for example, alt text, headings, contrast, keyboard navigation)

3.2 Establish an accessibility feedback mechanism

Create a simple way for the public to submit accessibility-related comments or report barriers, for example, a dedicated email address, web form, and promoted phone line. Ensure this mechanism meets Accessible BC Act requirements for public feedback and is clearly advertised on City materials and the website.

LEAD
- Corporate Services and Communications

KEY PARTNERS
- Accessibility Advisory Committee (to help monitor feedback and trends)

RESOURCES AND LINKAGES
- Very low cost, for example, an email alias such as accessibility@merritt.ca and a short online form
- Use existing staff to log feedback and direct it to relevant departments

EXAMPLE PROGRESS INDICATORS
- Feedback tool launched, visible on the website, and referenced in City publications
- Number and type of accessibility issues logged each quarter are tracked and summarized for the Accessibility Advisory Committee

3.3 Multi-channel outreach about City programs

Increase outreach to seniors and people with accessibility needs by consistently using both digital and non-digital channels. Examples include a regular "Accessible Merritt" column, printable PDF, or short feature in local media, and flyers or posters at the Seniors' Centre, clinics, pharmacies, churches, libraries, and other hubs.

LEAD
- Communications

KEY PARTNERS
- Local media (radio, newspaper)
- Seniors' Centre and seniors' groups
- Interior Health clinics and allied health providers

RESOURCES AND LINKAGES
- Low cost, primarily staff time to write short updates
- Existing communications budget to cover modest print or ad costs

EXAMPLE PROGRESS INDICATORS
- Regular "Accessible Merritt" feature or similar established within 6 to 12 months
- Noticeable increase in inquiries or participation in highlighted programs, as reported by front-line staff

3.4 Improve signage and printed materials

Update internal signage in City Hall, the Civic Centre, and other key facilities to be more readable and accessible, for example, larger fonts, high contrast, clear icons, and Braille or tactile signage on priority doors (such as washrooms and main entrances). Ensure public brochures and notices are available in large print on request.

LEAD
- Facilities and Communications

KEY PARTNERS
- CNIB or other low-vision specialists (advice on Braille and tactile signage)
- Local print shop (large-print versions)

RESOURCES AND LINKAGES
- Minor cost for new or replacement signage, phased in through operations budgets
- Minimal additional cost to print a small number of large-text copies of materials

EXAMPLE PROGRESS INDICATORS
- Key rooms and entrances in City Hall and the Civic Centre are equipped with updated accessible signage
- Large-print versions available for all major public brochures and notices, with staff aware of how to provide them
- Positive feedback from residents with low vision and those using mobility aids who rely on directional signage

3.5 Promote the Age-Friendly and Accessibility Plan

Once the plan is finalized, adopted by council, and posted publicly, carry out a public awareness effort that includes a one-page infographic summary and a public information session (virtual or in-person) to explain key initiatives and how residents can stay involved or provide feedback.

Lead
- Communications and Accessibility Advisory Committee

Key partners
- Library or Civic Centre (venue for information session)
- Disability and seniors' organizations (to help share information)

Resources and linkages
- Minimal printing costs for infographic copies
- Staff and committee time to present and answer questions

Example progress indicators
- Infographic produced and distributed through multiple channels (website, social media, hard copies at community hubs)
- At least one public information session held, with attendance tracked and key questions documented
- Residents reporting increased awareness of the plan in follow-up engagement

NEAR TERM (18-36 months)

3.6 Develop a targeted communications strategy for seniors and those with accessibility needs

Formulate a concise communications strategy that outlines how the City plans to regularly reach older adults, caregivers, and people with accessibility needs through both digital and non-digital channels. The strategy could identify key messages, priority channels, and roles for community partners.

LEAD
- Communications Department

KEY PARTNERS
- Interior Health (home support and community health contacts)
- Seniors' housing complexes and buildings
- Indigenous and cultural partners

RESOURCES AND LINKAGES
- Staff time to draft and maintain the strategy as part of the Communications work plan
- Potential for a voluntary sign-up list or phone tree for seniors and caregivers who want direct updates

EXAMPLE PROGRESS INDICATORS
- Strategy document completed and endorsed internally within 12 months
- Regular mail-outs, bulletin board notices, or phone-based notifications piloted with a defined number of participants
- Feedback from seniors and caregivers indicates that information is reaching them more reliably

3.7 Annual Accessibility Awareness Fair

Coordinate an annual event at the Civic Centre or similar venue that brings together service providers, community groups, and vendors to showcase accessible programs, tools, and supports, and to gather feedback from residents on accessibility needs.

LEAD
- Accessibility Advisory Committee and Community Services

KEY PARTNERS
- Interior Health
- CNIB and other disability organizations
- Local First Nations health representatives
- Community nonprofits and service providers

RESOURCES AND LINKAGES
- Seek a small provincial grant or sponsorship to support space, refreshments, and materials
- City provides venue and promotion; partners provide booths, demonstrations, and information

EXAMPLE PROGRESS INDICATORS
- First Accessibility Awareness Fair held within 18 months, with a target attendance (for example, 50 to 100 participants)
- Feedback forms collected that identify priority barriers and information gaps
- Interest from partners to repeat or expand the event in future years

3.8 Support community-based Age-Friendly and Accessible Business Recognition

Encourage the Chamber of Commerce (or similar) to build on the Age-Friendly and Accessible Business Program under Strategic Direction 1, to develop a strong communication and recognition component. This could include a web page listing recognized businesses, a map, social media spotlights, and window decals that help residents quickly identify more accessible options.

LEAD
- Economic Development and Communications

KEY PARTNERS
- Chamber of Commerce or Business Improvement Association
- Accessibility Advisory Committee
- Disability advocates (advice on messaging that reflects lived experience)

RESOURCES AND LINKAGES
- Use existing Age-Friendly and Accessible Business checklist materials
- Minimal cost for decals, certificates
- Coordination with SD1 action on business accessibility assessments

EXAMPLE PROGRESS INDICATORS
- Age-Friendly and Accessible Business recognition is clearly visible on the City website and in print materials
- Number of businesses promoted through the program in the first 18 months
- Residents report that recognition tools help them choose businesses that are easier to access

3.9 Develop simple City communication and accessibility standards

Create a short, practical "Communication and Accessibility Standards" guide for staff and, where appropriate, community partners. The guide could cover:
• reading level and plain-language expectations
• use of headings, lists, and white space
• accessible PDF practices (tagging, alt-text, logical reading order)
• captioning for videos and images on social media
• expectations for alternate formats and translation where feasible
• minimum timelines and multi-channel outreach for public meetings and engagement opportunities

LEAD
• Communications

KEY PARTNERS
• Accessibility Advisory Committee
• Human Resources (for staff training)
• IT and web support

RESOURCES AND LINKAGES
• Accessible BC Act requirements for accessible information and feedback
• Provincial guidelines on accessible communications
• OCP and Council policies on community engagement

EXAMPLE PROGRESS INDICATORS
• Standards document prepared and endorsed by senior leadership
• At least one staff orientation session delivered on the standards
• Growing proportion of new City documents and web pages meeting the standards, based on periodic spot audits

3.10 Strengthen emergency communication outreach

Within existing emergency management structures, strengthen how emergency and hazard information (for example, flooding, wildfire smoke, heat events, and power outages) reaches older adults, people with accessibility needs, and residents without reliable internet.

Steps could include:
- promote the emergency preparedness webpage and Prepare BC Guides on the City website and provide print versions at strategic locations
- design pre-scripted notices for different hazards that can be quickly adapted and pushed to multiple channels
- agreements with local radio, the weekly paper, seniors' housing, Indigenous organizations, and Better at Home to help share urgent information
- clear, plain-language instructions in alerts about what people should do

LEAD
- Emergency Management Coordinator and Fire Department

KEY PARTNERS
- RCMP or Police
- Interior Health (home care and vulnerable client lists, where appropriate and privacy-compliant)
- BC and regional emergency management partners
- Indigenous partners

RESOURCES AND LINKAGES
- Existing Emergency Response and Recovery Plans
- Lessons learned from recent flood and air quality events

EXAMPLE PROGRESS INDICATORS
- Emergency information webpage advertised to vulnerable groups through partner organizations and referenced consistently in public communications
- Multi-channel distribution lists and templates in place before the next hazard season

3.11 Begin offering key information in additional languages where most needed

On a pilot basis, identify a small set of high-priority notices or materials, for example, emergency flyers, key program summaries, or Age-Friendly highlights, and translate them into the most relevant languages in Merritt (such as Punjabi, Filipino languages as capacity allows). Provide clear contact information for language assistance.

LEAD
- Communications

KEY PARTNERS
- Local cultural and faith communities
- Indigenous partners
- School District and any settlement supports

RESOURCES AND LINKAGES
- Census and local data on language groups (where available)
- Qualitative feedback from community leaders on where language is a barrier

EXAMPLE PROGRESS INDICATORS
- At least one key notice or flyer translated and distributed in additional languages in the first year
- Feedback from community leaders about the usefulness and clarity of translations
- Adjustments made to translation approaches based on experience and demand

SYSTEM AND POLICY SHIFTS (3-5 years)

3.12 Integrate accessibility and inclusion into the City's corporate communications policy

Review and update any existing corporate communications policy, or develop one if needed, so that accessibility and inclusion are embedded as core principles. The policy could reference:

- use of plain language and multiple formats
- expectations for alternate formats and translation in key situations
- requirements for accessible digital content
- minimum notice periods and multi-channel outreach for public engagement

LEAD
- CAO and Communications

KEY PARTNERS
- All departments
- Accessibility Advisory Committee
- Legal or policy support

RESOURCES AND LINKAGES
- Accessible BC Act and provincial accessibility guidance on information and communication
- Existing City policies on public engagement and transparency

EXAMPLE PROGRESS INDICATORS
- Updated corporate communications policy adopted by Council
- Policy referenced in staff training and in project planning templates
- Evidence that major City initiatives consistently follow the policy, for example, communication plans attached to Council reports

3.13 Formalize and expand the accessible feedback and reporting mechanism

Building on the early feedback mechanisms established in 3.2, formalize an accessible way for residents to:

- ask questions about City information and services
- report accessibility barriers in communication (for example, unreadable documents, inaccessible web pages, missing information)
- suggest improvements

The mechanism could include an accessible online form, a dedicated email address, and a phone option for residents who cannot use the internet, along with clear internal procedures for routing and responding to feedback.

LEAD
- Designated Accessibility Lead or Corporate Services

KEY PARTNERS
- Communications
- IT and web support
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Existing complaints and service-request systems
- Accessible BC Act requirements for feedback mechanisms

EXAMPLE PROGRESS INDICATORS
- Feedback mechanism clearly visible on the City website and promoted in key documents
- Number and type of communication-related accessibility issues logged and tracked annually
- Annual summary of feedback and the City's response included in accessibility reporting to Council

3.14 Monitor and report on communication performance over time

Develop a practical set of indicators to monitor communication and information accessibility over time. Possible indicators include satisfaction with information clarity, availability of information in multiple formats, and knowledge of where to find City information. Use existing surveys, quick polls, or feedback tools rather than launching costly new research. Report on these indicators as part of regular Age-Friendly and Accessibility updates to Council.

LEAD
- Community Services and Communications

KEY PARTNERS
- Accessibility Advisory Committee
- Health authority or academic partners (for light-touch evaluation support)

RESOURCES AND LINKAGES
- Baseline survey data from the Age-Friendly and Accessibility survey
- Ongoing community engagement and open houses

EXAMPLE PROGRESS INDICATORS
- Indicator set and data collection approach agreed and documented
- Annual communication performance update presented to Council and posted online
- Evidence of incremental improvements, such as higher ratings of information clarity or awareness of where to find information, over the plan period

3.15 Language and cultural inclusion in communications

Develop guidance or policy for incorporating Indigenous language and culturally appropriate content into City communications and key signage. Examples include local Indigenous greetings or symbols on welcome signs, dual-language signage for significant sites, or Indigenous language elements on key publications developed in partnership with local First Nations.

LEAD
- Communications and Development Services

KEY PARTNERS
- Local First Nations (language speakers and cultural advisors)
- Indigenous partners involved in reconciliation and cultural initiatives

RESOURCES AND LINKAGES
- City Communications Strategy and any Public Art Policy
- Reconciliation commitments and related Council directions

EXAMPLE PROGRESS INDICATORS
- By approximately 2027, at least three key City signs or publications incorporating Indigenous language or artwork developed with guidance from Indigenous communities
- Ongoing practice of appropriate dual-language acknowledgements or Indigenous content in selected City communications and events

3.16 Maintain compliance with provincial accessibility standards for information and communication

Formally commit to staying current with Accessible BC Act requirements and future provincial accessibility standards related to information, communication, and service delivery, and to updating City policies and practices accordingly.

LEAD
- CAO and Council

KEY PARTNERS
- Provincial government (for updates on standards)
- UBCM and other municipal associations (for guidance and training)
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- City Accessibility Plan and related policies
- Provincial regulations and guidance documents

EXAMPLE PROGRESS INDICATORS
- Accessibility Plan reviewed and updated at least every three years to reflect new regulations and standards
- Periodic confirmation that communication practices meet current provincial standards
- Staff training updated when new standards or expectations come into effect

STRATEGIC DIRECTION 4:
Advance Indigenous Accessibility and Cultural Inclusion

Objective: Make Merritt's accessibility and age-friendly initiatives more inclusive of Indigenous peoples by incorporating Indigenous perspectives, addressing unique barriers faced by Indigenous elders and people with accessibility needs, and fostering cultural safety.

This direction recognizes that nearly 22% of Merritt's residents identify as Indigenous, and that Indigenous older adults may face additional challenges, such as historical mistrust of institutions, language differences, or lack of culturally relevant services.

Indigenous Elders, adults, youth, and people with accessibility needs in and around Merritt often face layered barriers like distance from services, transportation challenges, experiences of discrimination and stigma, and the ongoing impacts of colonization and residential schools. These factors shape health, mobility, housing, and comfort in civic spaces, and influence whether Indigenous community members feel welcome, safe, and included in public life.

Local Merritt Indigenous peoples include Scw'exmx communities of the Nlaka'pamux and Syilx Nations, and Métis and other Indigenous people. Bands such as Coldwater, Lower Nicola, Nooaitch, Shackan, Upper Nicola, and Cook's Ferry already provide many programs and supports, yet City policies, facilities, and communication practices still affect how easily Indigenous residents can access services in town, participate in events, and be represented in decision-making.

This section is guided by the Truth and Reconciliation Commission of Canada's Calls to Action (TRC) and by the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), which the TRC identifies as the overall framework for reconciliation and which is being implemented through federal and provincial legislation in Canada and British Columbia.[19][20] Actions emphasize collaboration, respect for Indigenous leadership, and practical changes that make it easier for Indigenous Elders and people with accessibility needs to participate fully in community life.

[19] United Nations. (2007). *United Nations declaration on the rights of indigenous peoples* (A/RES/61/295). United Nations General Assembly.
[20] Truth and Reconciliation Commission of Canada. (2015). *Truth and Reconciliation Commission of Canada: Calls to action*. Truth and Reconciliation Commission of Canada.

QUICK WINS (0–18 months)

4.1 Invite an Indigenous representative to the Accessibility Committee

Merritt could invite the six local Indigenous bands (Coldwater, Lower Nicola, Nooaitch, Shackan, Upper Nicola, and Cook's Ferry) to collaborate on accessibility needs on and off reserve by:

• inviting Indigenous representatives (including, where possible, Elders or people with lived experience of disability) to the Accessibility Advisory Committee

This approach could help Indigenous voices guide municipal accessibility initiatives, including facility upgrades, public realm improvements, and program design. For example, when new community infrastructure or a major route is planned, early input from band representatives could highlight cultural considerations (spaces for Elders, ceremony, gathering) and help coordinate improvements such as accessible transit routes connecting reserve communities to town.

LEAD
• Community Services / CAO

KEY PARTNERS
• Accessibility Advisory Committee
• Coldwater, Lower Nicola, Nooaitch, Shackan, Upper Nicola, and Cook's Ferry First Nations

RESOURCES AND LINKAGES
• Existing committee terms of reference (potentially updated)
• Future Reconciliation Action Plan

EXAMPLE PROGRESS INDICATORS
• At least one Indigenous representative sits on the Accessibility Committee
• Examples are documented where Indigenous input shaped accessibility decisions (for example, facility design, public space improvements, priority routes)

4.2 Improve how City information reaches Indigenous Elders and families

Staff could work with bands and Indigenous organizations to identify how Elders and families prefer to receive information (for example, band newsletters, bulletin boards at band offices, community radio, printed flyers delivered to Elders, or key staff as information "hubs"). These preferred channels could then be used to share:

- emergency and hazard information
- key City notices and consultations that affect Indigenous residents
- accessible program and event information, including cost, location, accessibility features, and transportation options.

LEAD
- Communications

KEY PARTNERS
- Band administrations and Indigenous service providers
- Library, Civic Centre, and seniors' program staff

RESOURCES AND LINKAGES
- Age-friendly and accessibility survey findings
- Program and services guide actions under Strategic Direction 2

EXAMPLE PROGRESS INDICATORS
- Communication preferences are documented with at least two Indigenous partners
- City information appears regularly in Indigenous-identified communication channels
- Indigenous partners report that Elders and families are more aware of relevant City programs and notices

4.3 Make Indigenous cultural events in civic spaces physically accessible

City staff and Indigenous partners could co-plan Indigenous Day and other Indigenous-centred events in civic spaces, so they are physically accessible and comfortable. This may include:

- accessible routes into and through event sites
- sufficient seating and some shaded or covered areas
- accessible washrooms
- clear signage and wayfinding
- basic accessibility information in event promotion (for example, parking, mobility access, quiet spaces).

LEAD
- Community Services

KEY PARTNERS
- Indigenous governments and organizations
- Facilities and Parks
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Existing event planning processes
- Inclusive event checklist actions under Strategic Direction 2

EXAMPLE PROGRESS INDICATORS
- Accessibility considerations are recorded in plans for Indigenous Day and at least one other Indigenous-led gathering
- Elders and people using mobility aids report that they could attend and participate comfortably
- Practices from these events are reflected in the City's general event standards

NEAR-TERM ACTIONS (18-36 months)

4.4 Culturally safe services and spaces

The City could begin strengthening cultural safety across services and public spaces so they feel welcoming for Indigenous seniors and others. Near-term steps might include:

- introducing Indigenous language signage alongside English in key civic locations (for example, greetings or place names in Nlaka'pamux or Syilx at City Hall, major parks, and the Civic Centre)
- offering basic cultural safety learning opportunities for staff in public-facing roles (recreation, front counter, Bylaw, facilities, and any transit contractors), co-designed or delivered with local First Nations or the First Nations Health Authority.

Learning content could cover:
- residential school and colonization impacts on health, housing, and disability
- respectful communication protocols, including the role of Elders
- how discrimination and stigma may affect Indigenous people with accessibility needs, chronic conditions, or who are unhoused.

LEAD
- Human Resources / Public Works & Engineering

KEY PARTNERS
- Local First Nations leaders and cultural staff
- First Nations Health Authority and regional health authority Indigenous teams
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Provincial and FNHA cultural safety and humility resources[21]
- Future Reconciliation Action Plan

EXAMPLE PROGRESS INDICATORS
- Indigenous language signage is in place in at least two civic facilities or parks
- At least one cultural safety learning opportunity has been offered to priority staff groups
- Indigenous partners and Elders describe improved experiences in key City spaces

4.5 Pilot an Indigenous-centred accessible gathering space in an existing facility

In partnership with Indigenous organizations, the City could pilot a regular Indigenous-centred gathering in an accessible civic facility (for example Civic Centre room, or co-hosted time with the Friendship Centre). The gathering might focus on crafts, culture, language learning, food, or intergenerational activities, and could:

- be scheduled at times that work for Elders and families
- include clear transportation information and, where feasible, coordinated rides through existing programs
- be advertised through Indigenous-preferred channels
- use an accessible layout with space for mobility devices, quiet areas, and culturally appropriate design elements.

[21] First Nations Health Authority & Health Standards Organization. (2022). British Columbia cultural safety and humility standard. https://nccdh.ca/learn/library/british-columbia-cultural-safety-and-humility-standard

LEAD
- Community Services

KEY PARTNERS
- Indigenous governments and organizations
- Conayt Friendship Society
- Interior Health Authority (Elders' wellness programs)
- Better at Home and seniors' organizations

RESOURCES AND LINKAGES
- Underused time blocks in existing civic facilities
- Small grants for Indigenous wellness and cultural programming

EXAMPLE PROGRESS INDICATORS
- At least one regular Indigenous-centred gathering is piloted in a City facility
- Attendance and feedback from Indigenous participants are documented
- Decisions with partners are made about sustaining, adjusting, or expanding the pilot

4.6 Work with Indigenous partners to reduce barriers to recreation and aquatic programs

The City could collaborate with Indigenous health and recreation staff to address cost, transportation, and scheduling barriers that limit Indigenous Elders' and families' participation in aquatic and recreation programs. Options might include:

- band- or grant-funded passes or subsidies for Elders and low-income families
- coordinated group visits (for example, scheduled swim or fitness times with organized transport)
- adjusting selected program times to better match when Indigenous participants can travel into town
- tailoring some activities to include traditional arts, movement, or land-based themes.

LEAD
- Community Services

KEY PARTNERS
- Band health and recreation departments
- Scw'exmx Community Health Services
- Conayt Friendship Society
- First Nations Health Authority and Interior Health Authority

RESOURCES AND LINKAGES
- Existing recreation and aquatic schedules and participation data
- Indigenous wellness and physical activity grant programs[22]

EXAMPLE PROGRESS INDICATORS
- Increased advertising of at least one cost or schedule barrier-reduction measure (e.g., free family swim, weekly discounted seniors skate)
- Indigenous participation in selected programs shows a measurable increase (tracked with partner consent)
- Elders and Indigenous program staff report that participation has become easier

4.7 Support Indigenous-led programs and services for Elders and people with accessibility needs

Where Indigenous-led programs already exist, the City could focus on supporting and amplifying rather than duplicating them. This might include:

- offering small grants or fee reductions for accessible use of civic facilities for Indigenous Elder gatherings, wellness circles, and disability-related programming
- aligning City-run programs (as per Strategic Direction 2) to explicitly invite Indigenous Elders and participants, for example, by incorporating traditional arts or inviting Elders to open events
- coordinating promotion of Indigenous-led services such as Elder outreach or transport so they appear in City program and service guides.

[22] Indigenous Sport, Physical Activity & Recreation Council. (2024). The Indigenous Active Communities Grants launches. https://isparc.ca/the-indigenous-active-communities-grants-launches/

LEAD
- Community Services

KEY PARTNERS
- Conayt Friendship Society
- Scw'exmx Community Health Services
- Band health departments
- First Nations Health Authority

RESOURCES AND LINKAGES
- Community grants program and Civic Centre/library booking policies
- Age-friendly program guides and communication standards

EXAMPLE PROGRESS INDICATORS
- The number of Indigenous-led Elder or disability-focused programs receiving grants or in-kind facility use increases
- Use of civic facilities by Indigenous Elders and organizations rises over time
- Indigenous partners indicate that City support has helped sustain or expand their programs

4.8 City-wide education and awareness on aging, disability, and inclusion (with Indigenous perspectives)

The City could launch a community education initiative to deepen understanding of aging, accessibility, and inclusion across cultures, with Indigenous perspectives as a visible part of the series.

Possible components could include:
- quarterly workshops or speaker events on themes such as "Healthy Aging in Different Cultures," "Understanding Disability and Accessibility."
- promotion of, and accessibility supports at, events such as National Indigenous Peoples Day (for example, seating, shade, accessible washrooms, and ASL where feasible).

LEAD
- Community Services / Communications

KEY PARTNERS
- Indigenous governments and organizations
- Conayt Friendship Society
- Interior Health Authority (seniors, mental health, Indigenous health teams)
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Civic Centre, library, and park spaces
- Grants for seniors' wellness or community education

EXAMPLE PROGRESS INDICATORS
- An education series schedule is developed and promoted
- Several events are held with strong attendance, including Indigenous Elders and people with accessibility needs
- Participants report improved understanding of aging, accessibility, and Indigenous perspectives

SYSTEM AND POLICY SHIFTS (3-5 years)

4.9 Encourage inclusion of local Indigenous contractors and businesses in accessibility-related City projects

As part of reconciliation and efforts to advance Indigenous accessibility and inclusion, the City could explore ways to encourage the use of local Indigenous contractors and businesses in projects that affect accessibility, the public realm, and civic facilities, within existing trade agreements and procurement rules.

Possible approaches might include:

- inviting local Indigenous businesses and contractors to information sessions on upcoming tenders that include accessibility components, particularly for projects involving public spaces, facilities, sidewalks, trails, transit stops, and neighbourhoods.
- asking prime contractors, where appropriate, to describe in their submissions how they might engage local labour and Indigenous businesses, including specific opportunities related to accessible design features, barrier removal, Indigenous art and language panels, and wayfinding that support people with accessibility needs
- sharing information about local Indigenous contractors and businesses (with permission) who

have relevant experience in accessible design, construction, maintenance, or culturally grounded public realm work, so City project teams and external proponents are more aware of who is available locally.

The intent is to strengthen local Indigenous economic participation in a way that also supports more culturally grounded, accessible designs and services for Elders, people with disabilities, and other residents.

LEAD
- Financial Administration

KEY PARTNERS
- Coldwater, Lower Nicola, Nooaitch, Shackan, Upper Nicola, and Cook's Ferry First Nations
- Conayt Friendship Society and other Indigenous organizations
- Planning, Engineering, Facilities, and Parks
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Existing purchasing and procurement policies
- Reconciliation Action Plan and any local UNDRIP/Declaration Act work
- Directories or lists of Indigenous-owned businesses, where available and consented to
- City accessibility plans and capital plans for accessibility-related projects

EXAMPLE PROGRESS INDICATORS
- An initial scan of procurement policies is completed, with options identified for recognizing accessibility, social, and cultural inclusion objectives
- One or more information sessions or outreach activities are held with local Indigenous businesses, specifically about participating in City accessibility and public realm projects
- Contractors begin to reference Indigenous participation, local labour, and accessibility-related roles or subcontracts in submissions for relevant projects
- Indigenous partners note increased awareness of, and opportunities for, Indigenous contractors in City work related to accessibility and the public realm

4.10 Align accessibility actions with reconciliation and UNDRIP

Accessibility and age-friendly actions could be intentionally aligned with Merritt's broader reconciliation commitments. As the City develops and implements a Reconciliation Action Plan and considers UNDRIP at the municipal level, it may:

- recognize accessibility and aging as part of Indigenous rights to participate fully in community life
- integrate accessibility considerations into protocols or agreements with local First Nations

(for example, MOUs that reference Elders' access to services, emergency support, and participation in civic life)
• use both Western indicators (for example, participation, facility upgrades) and Indigenous feedback when assessing progress.

An annual or biennial meeting between City leadership and Chiefs/Councils of the six bands could provide a practical forum to review how City services, facilities, and public spaces are working for their members, and to set shared priorities for the coming period.

LEAD
• CAO / Mayor and Council

KEY PARTNERS
• Coldwater, Lower Nicola, Nooaitch, Shackan, Upper Nicola, and Cook's Ferry First Nations
• Conayt Friendship Society and other Indigenous organizations
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• Reconciliation Action Plan
• UNDRIP and BC's Declaration Act
• Accessible BC Act planning and reporting

EXAMPLE PROGRESS INDICATORS
• Reconciliation and/or UNDRIP commitments include reference to accessibility and participation
• Accessibility considerations appear in at least one formal agreement or protocol with local First Nations
• Regular joint meetings occur where accessibility and aging issues are explicitly discussed, and follow-up actions are noted

4.11 Build Indigenous perspectives into ongoing accessibility planning and reporting

Future accessibility planning and reporting could consistently:

• report on actions and outcomes relevant to Indigenous Elders, adults, youth, and people with accessibility needs, both on- and off-reserve
• identify where joint or parallel planning with bands is appropriate (for example, emergency routes, transit, access to services in town).

LEAD
- Community Services

KEY PARTNERS
- Band governments and Indigenous organizations
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Accessible BC Act requirements for accessibility plans and feedback mechanisms
- Data and qualitative findings from this planning process

EXAMPLE PROGRESS INDICATORS
- Accessibility plan updates contain a clear section on Indigenous accessibility and cultural inclusion
- Indigenous partners are invited to co-review annual progress and suggest adjustments
- An increasing number of accessibility actions show Indigenous partnership or focus over time

4.12 Support cultural safety and trauma-informed practice across City services

Working with Indigenous partners and health authorities, the City could gradually embed cultural safety and trauma-informed awareness into services that most directly affect Indigenous people with accessibility needs and older adults. Priority areas might include:

- front counter and customer service
- Bylaw Services and enforcement in public spaces and parks
- emergency and evacuation support
- recreation programming.

Learning and practice changes would be ongoing and co-designed, rather than one-off workshops.

LEAD
- Human Resources / Community Services

KEY PARTNERS
- Indigenous governments and organizations
- Health authorities (including Indigenous health teams)
- Bylaw Services, Community Services, Library, Emergency Management

RESOURCES AND LINKAGES
- Existing staff training frameworks and budgets
- Provincial cultural safety and trauma-informed practice resources

EXAMPLE PROGRESS INDICATORS
- At least one cultural safety or trauma-informed learning opportunity is offered each year for key staff groups
- Staff report increased confidence and skills in serving Indigenous residents with accessibility needs respectfully and effectively
- Indigenous partners observe a gradual shift in tone and approach in interactions in City facilities and public spaces

STRATEGIC DIRECTION 5:

Coordinate Local Support Around Housing and Transportation Challenges

Objective: It is important to note that housing and transportation fall largely outside the City's direct jurisdiction, relying instead on regional and provincial partners. While the City cannot directly solve the region's housing affordability or transportation service gaps, it plays a vital role in improving access through planning, coordination, and advocacy. This strategic direction focuses on enabling older adults and residents with accessibility needs to remain safely housed and mobile by strengthening partnerships, improving local infrastructure, and aligning City policies with inclusive goals.

For many older adults and people with accessibility needs, challenges are not only about the home itself or a single bus route; they are about the combined effect of:

- limited, affordable and accessible housing options
- older homes that are hard to maintain (yards, snow removal, stairs)
- the cost and logistics of moving closer to town
- steep hills, missing or uneven sidewalks, snowbanks, and icy corners that make walking, scooters, or using wheelchairs difficult and sometimes unsafe
- reliance on family, friends, or volunteers for rides, with few alternatives when those supports are not available.

This strategic direction focuses on better coordination of existing supports and decisions, and on small changes that can be layered into work the City and partners are already doing.

QUICK WINS (0–18 months)

5.1 Create a simple "Housing and Getting Around" resource for older adults and people with accessibility needs

The City could put together a short, plain-language "Housing and Getting Around in Merritt" resource for older adults, caregivers, and service providers. This might include:

- a summary of local housing supports (for example, BC Housing contacts, local non-profit housing providers, seniors' housing options, and other supported living programs)
- information on transportation options (City bus routes and times, medical transport where available, Better at Home or volunteer driver contacts, taxi information, and who to call for help with rides)
- brief tips about winter safety and who to contact if snow or ice is creating serious access issues (for example, at curb letdowns or accessible parking).

The resource could be posted in the City's website and shared through libraries, clinics, Indigenous partners, seniors' groups, and housing providers, and updated as programs change.

LEAD
- Housing / Communications

KEY PARTNERS
- Seniors' organizations and Better at Home
- Non-profit housing and service providers
- Interior Health Authority (home and community care)
- Indigenous partners and Friendship Centre

RESOURCES AND LINKAGES
- Existing resource lists held by community organizations

EXAMPLE PROGRESS INDICATORS
- A one- or two-page resource is available online and in print
- Service providers report using it in conversations with clients
- Older adults and caregivers report that it helps them understand where to go for housing and transportation help

5.2 Convene a Housing and Transportation Partners Roundtable

The City could convene a small Housing and Transportation Partners roundtable once or twice a year to bring together:

- non-profit housing and shelter providers
- seniors' and disability organizations
- Indigenous partners
- Better at Home/volunteer driver programs
- transit staff (or regional contacts)
- Interior Health Authority representatives (where possible).

The focus could be on:

• sharing information about current pressures (for example, people "stuck" due to lack of transport or losing housing due to health changes) and ways to advocate for better transit options for people with accessibility needs (e.g., explore bylaws or similar for providing wheelchair accessible taxis)
• identifying small joint fixes (such as adjusting a program time to match the bus schedule, or aligning a community meal with a volunteer driver day)
• sharing information about upcoming grants or projects.

LEAD
• Housing / Community Services

KEY PARTNERS
• Non-profit and Indigenous service providers
• Health authorities
• Transit or regional transportation contacts
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• Existing inter-agency meetings (could be added to one of these)
• Housing Needs Assessment and transportation-related plans

EXAMPLE PROGRESS INDICATORS
• At least one meeting has taken place within the first year
• Participants identify concrete follow-up actions (even small, no-cost adjustments)
• Partners report better awareness of each other's services and constraints

5.3 Identify and promote priority winter walking and drop-off routes

Using what older adults and people with accessibility needs have said about winter hazards (snow piled at corners, icy curb ramps, inaccessible parking lots), the City could map a small number of priority winter routes linking:

- key housing clusters (for example, seniors' apartments, mobile home parks)
- essential destinations (pharmacies, grocery stores, the health centre, bank, post office).

Operations staff and partners could then:

- treat these as priority areas for snow and ice clearance for sidewalks, curb let downs, and accessible parking stalls, as resources allow
- work with property owners around key parking lots to encourage better snow management and drainage
- communicate these routes and expectations so residents know where they are most likely to find safer winter conditions.

LEAD
- Public Works and Engineering

KEY PARTNERS
- Community Services
- Private property owners at key destinations
- Seniors' and disability organizations
- Accessibility Advisory Committee

RESOURCES AND LINKAGES
- Existing snow and ice control policy
- Feedback from the engagement process on snow and sidewalks

EXAMPLE PROGRESS INDICATORS
- 1–3 priority winter routes identified and mapped
- Operations staff briefed on the routes and any small adjustments that are feasible within existing budgets
- Fewer reports of impassable snowbanks or ice at key corners and accessible parking areas along these routes

NEAR-TERM ACTIONS (18-36 months)

5.4 Pilot a low-tech "community rides" coordination for essential trips

Building on existing services, the City and partners could pilot a low-tech "community rides" coordination for essential trips (for example, medical appointments, grocery, key social or cultural activities). Rather than a new service, this could focus on:

- mapping current ride-related services (Better at Home, any volunteer drivers, band vehicles, existing bus runs, school buses where appropriate, church vans, and similar)
- identifying small ways to coordinate them (for example, a shared calendar of "ride days")
- testing a limited pilot for a few months focused on older adults and people with accessibility needs who are not driving and who have no family support.

LEAD
- Community Services / Community Service Organizations

KEY PARTNERS
- Better at Home and volunteer driver programs
- Indigenous partners and band transportation contacts
- Interior Health Authority (where patient transport gaps exist)
- Local non-profits and faith communities

RESOURCES AND LINKAGES
- Existing vehicles and volunteer programs
- Age-friendly transportation feedback from this process

EXAMPLE PROGRESS INDICATORS
- A small pilot is designed and implemented (even on a limited schedule)
- Number and type of rides provided are tracked
- Pilot participants and drivers provide feedback on what works and what does not
- Partners decide whether and how to sustain or adapt the approach

5.5 Encourage age-friendly and accessible housing forms in development approvals

Within the limits of current legislation and market conditions, Planning staff could use pre-application meetings and development review to encourage housing forms that work better for aging and accessibility, such as:

- one-level, no-step homes and townhouses in areas already close to services
- adaptable or accessible units in multi-unit housing beyond the minimum code requirements, where feasible
- designs that reduce yard and snow-removal burdens for older homeowners

The emphasis could be on no or low-cost tools, such as:

- highlighting age-friendly and accessibility considerations in guidelines and checklists
- recognizing projects that integrate good accessibility features in communications or staff reports
- sharing information about provincial or federal programs that may support accessible or seniors' housing.

LEAD
• Housing/Development Services

KEY PARTNERS
• Developers and builders
• Non-profit and Indigenous housing providers
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• Official Community Plan and Housing Needs Assessment
• BC Building Code accessibility and adaptability provisions

EXAMPLE PROGRESS INDICATORS
• Pre-application discussions routinely include age-friendly and accessibility questions
• Some new developments demonstrate features such as ground-floor, no-step entries or extra adaptable units
• Developers and non-profits report that expectations are clear and predictable

5.6 Bring services closer to where people live through "pop-up" or satellite support days

ACTION
To reduce the need for travel among those with limited mobility or no vehicle, the City could enable (i.e., provide space) partners to experiment with "pop-up" or satellite support days in locations close to clusters of older adults and people with accessibility needs (for example, near Railyard Mall, Diamond Vale, or Bench neighbourhoods).

These could include:

- periodic visits by seniors' outreach workers, housing navigators, or Interior Health Authority staff in borrowed space (e.g., community rooms, churches)
- scheduled times where multiple services (for example, income support help, housing information, transportation referrals) are offered in one place.

LEAD
• Community Services / Community Service Organizations

KEY PARTNERS
• Interior Health Authority and community health teams
• Seniors' and other community service organizations
• Indigenous partners
• Service Canada / Service BC outreach where possible

RESOURCES AND LINKAGES
• Existing community spaces and "hub" locations
• Outreach programs already visiting Merritt or nearby communities

EXAMPLE PROGRESS INDICATORS
• One or more pop-up or satellite days are piloted in a high-need neighbourhood
• Attendance and feedback are collected from participants and providers
• At least some participants report that they could access help they otherwise would have missed due to transportation barriers

SYSTEM AND POLICY SHIFTS (3-5 years)

5.7 Align land use, housing, and transportation planning around aging and accessibility

ACTION
As the Official Community Plan, Housing Needs Assessment updates, and transportation planning move forward, the City could:

- treat aging and accessibility as key lenses when considering where new housing, mixed-use areas, and services are located
- pay particular attention to enabling more housing close to existing services, transit routes, and flatter, more walkable areas
- use infrastructure renewals as opportunities to add or improve crossings, accessible bus stops, and small segments of sidewalk or path that link older adults and people with accessibility needs to essential services.

This approach recognizes that major sidewalk and road projects may not be affordable in the short term, but that incremental improvements can be built into work that is already funded.

LEAD
• Development Services / Public Works and Engineering

KEY PARTNERS
• BC Housing
• Indigenous partners
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• OCP and Housing Needs Assessment
• Transportation plans and flood recovery infrastructure projects

EXAMPLE PROGRESS INDICATORS
• Policy language related to aging and accessibility is strengthened in updated planning documents
• Some capital projects include small, targeted accessibility improvements along routes used by older adults and people with accessibility needs
• Over time, more housing and services are located along routes that are easier to navigate without a car

5.8 Explore longer-term partnerships for accessible and supportive housing

ACTION
Given limited municipal resources, the City could focus on building and maintaining partnerships that are needed for new or improved accessible and supportive housing, such as:

- working with BC Housing, non-profit providers, Indigenous partners, and the Interior Health Authority to identify opportunities for small-scale, accessible, and supportive housing projects in Merritt
- sharing local data and stories about gaps (for example, older adults unable to maintain large homes, people with accessibility needs living in inaccessible rentals, flood-displaced residents) to inform provincial and federal funding decisions
- considering municipal contributions that do not create large new cost pressures, such as supportive zoning, modest fee reductions where appropriate, or making land available when opportunities arise

LEAD
• Housing / Community Services

KEY PARTNERS
• BC Housing and non-profit housing providers
• Indigenous governments and organizations
• Interior Health Authority
• Accessibility Advisory Committee

RESOURCES AND LINKAGES
• Housing Needs Assessment and any homelessness or community safety strategies
• Provincial and federal housing programs

EXAMPLE PROGRESS INDICATORS
• Merritt is actively participating in discussions about regional or provincial accessible housing opportunities
• One or more concept proposals or funding applications related to accessible or seniors' housing include Merritt
• Local partners report improved coordination when opportunities arise

5.9 Develop a longer-term community mobility and access concept

ACTION
Recognizing that existing transit and volunteer rides only partially meet needs, the City and partners could, over time, explore what a more comprehensive "community mobility and access" model might look like for Merritt. This concept might consider:

- the role of conventional transit, any HandyDART or parallel services, volunteer drivers, taxis, and band-run shuttles
- the needs of older adults, people with accessibility needs, youth, and others who do not drive
- realistic service levels, given population and funding constraints
- potential regional or cross-jurisdictional solutions (for example, shared services with nearby communities).

The goal would be to have a clear, realistic picture of where Merritt is aiming, so that when funding or partnership opportunities arise, the City and its partners are ready.

LEAD
• Community Services /Development Services

KEY PARTNERS
• Transit providers and regional transportation agencies
• Indigenous partners and band transportation contacts
• Seniors' and Community Service organizations
• Interior Health Authority

RESOURCES AND LINKAGES
• Current and projected demographic data
• Transportation-related feedback gathered through this process

EXAMPLE PROGRESS INDICATORS
• A short discussion paper or concept note on "community mobility and access" is developed
• Partners have a shared understanding of priority gaps and possible models
• Merritt can respond quickly when external funding or pilot opportunities emerge

SECTION 3:

Key Findings

COMMUNITY ENGAGEMENT AND CONTEXT REVIEW

Our context review formed the basis for the design and direction of this report, ensuring that our recommendations were aligned with the City of Merritt's prior work and existing planning documents. This section summarizes what we heard from community members and stakeholders and what we learned from reviewing local plans, policies, and data. It provides the context and evidence that informed the action plan presented earlier in this report, highlighting current strengths, gaps, and priorities across the community.

LITERATURE REVIEW

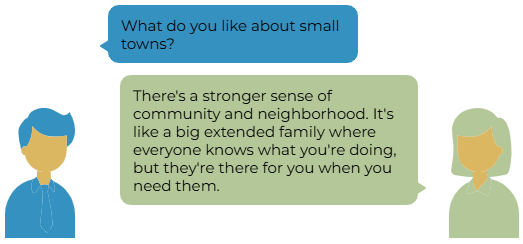
As part of our review, we examined these documents:

- Official Community Plan
- Active Transportation Plan
- Parks and Facilities Master Plan
- Housing Needs Assessment
- Economic Development Strategy
- Road Corridor Assessment
- Parks, Recreation and Culture Master Plan
- TNRD Accessibility Plan
- Interior Health Accessibility Plan
- Building Condition Assessments
- Active Transportation Network Plan
- Merritt Accessibility Requirements for Persons with Disabilities

The document review was followed by a plan for community engagement to understand the assets and barriers as identified by community members in the City of Merritt.

Community Engagement

Community feedback:
Small Town Community

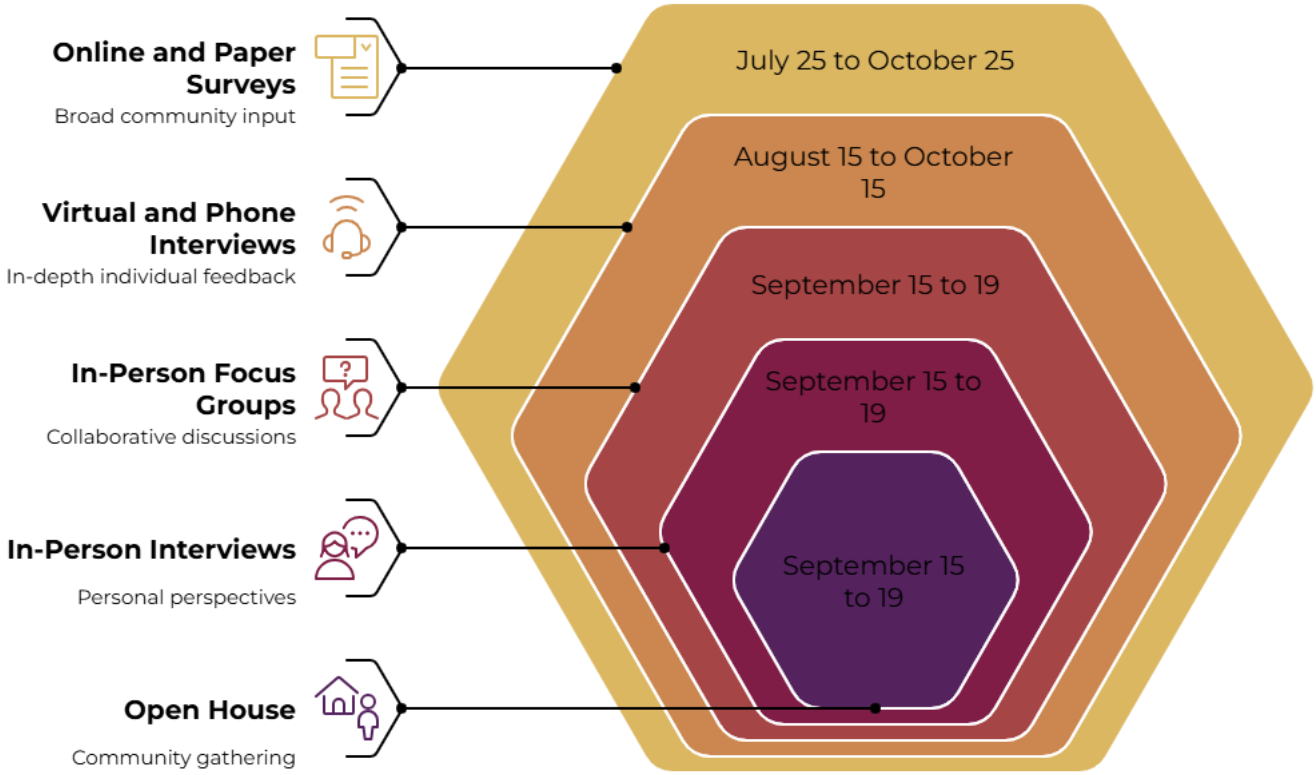


The community engagement process involved several activities, including online and paper surveys conducted from July 25 to October 25, virtual and phone interviews held between August 15 and October 15, and a dedicated week of in-person focus groups (nine focus groups with 40 participants), interviews (15 total), and an open house from September 15 to 19, 2025. Participants represented a cross-section of the community, including older adults, individuals with accessibility needs, Indigenous community members, caregivers, members of the Merritt Accessibility Committee, community service providers, City of Merritt employees, business community members, unhoused residents, and members of the Community Action Team (CAT).

The following section presents a combination of the feedback gathered through the community engagement process, reflecting the many perspectives and lived experiences of Merritt residents. Drawing on survey responses and open-ended comments, this "What We Heard" review is intended to capture the main concerns, priorities, and suggestions voiced by

participants regarding accessibility and age-friendly improvements across housing, transportation, public spaces, and community services.

Community Engagement Process in Merritt



COMMUNITY SURVEY

The Merritt Age-Friendly and Accessibility Survey, completed by 68 respondents, provides a snapshot of community perceptions and experiences related to accessibility in Merritt. Respondents assessed various aspects of the city using a 1–5 scale (e.g., 1 = very poor, 5 = excellent), with the highest average rating given to sense of belonging (3.82), followed by parks and green space accessibility (3.76), and mobility around Merritt (3.58). Community transport availability (3.48), Merritt as a place to live (3.47), and as a place to retire (3.42) also received moderate scores. Lower ratings were noted for transport to health appointments (3.29), places to rest in the community (3.21), the informal driver network (3.00), sidewalk maintenance (2.85), snow removal for roads and parking (2.84), snow removal for pedestrian areas (2.56), and accessible public washrooms (2.49), indicating these are areas of concern.

The respondent profile was primarily comprised of Merritt residents (52 out of 68), with most participants aged 65–74, though ages ranged up to 95 and above. The gender breakdown included 33 women, 19 men, and 3 others or those preferring not to say. A significant number of respondents (25) had lived in Merritt for over 20 years, and the most common dwelling type was detached single-family homes. Forty-eight respondents reported having internet access, while three did not. Accessibility needs were noted by 25 respondents.

Open-ended comments showed several recurring themes. Many respondents cited inconsistent snow removal, particularly for sidewalks and crosswalks. Accessibility challenges in the built environment were frequently mentioned, including uneven walkways, insufficient curb letdowns, ramps, and accessible washrooms. There was a strong desire for additional outdoor amenities such as trails, benches, and green spaces. Safety concerns included requests for improved street lighting and safer public spaces. Transportation issues centred on the need for more public transit options, especially for travel to larger cities like Vancouver, and greater awareness of available services.

Housing was also highlighted, with concerns about affordability, accessibility, and a lack of assisted living options. Communication barriers were noted, with requests for information in non-digital formats (such as Braille, print, and phone) and enhanced outreach efforts. Finally, there was interest in developing compensated informal driver networks and expanding community volunteer support.

It is important to note the limitations of the survey, including its small sample size (68 responses), the predominance of older respondents, and self-selection bias, which may limit the representativeness of the results. Additionally, many survey questions had 10–20 unanswered responses, and questions directed at service providers were largely left blank, suggesting that the findings primarily reflect resident perspectives.

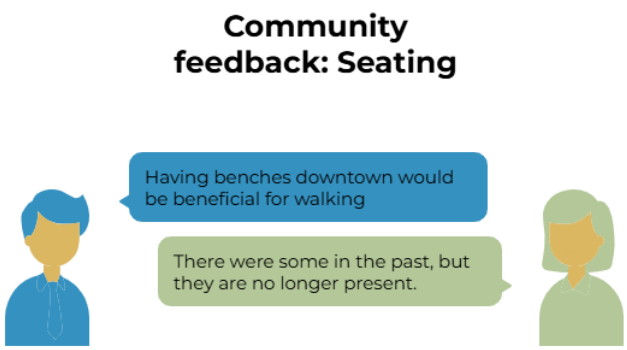
INTERVIEW, FOCUS GROUPS AND OPEN HOUSE

All qualitative data, including open-ended survey responses, were compiled, systematically coded, and organized. The resulting major themes were then sorted according to the age-friendly dimensions.

The following sections are a synthesis of what we heard in community engagement activities and what we read in the review of background documents. The results are both the survey (quantitative) and qualitative results grouped into the eight age-friendly dimensions.

What We Heard

DIMENSION 1:
Outdoor Spaces and Public Buildings



Participants emphasized that safe, well-maintained sidewalks, parks, and civic spaces are essential for older adults, people with disabilities, families, and others who walk, roll, or use mobility devices. Many noted that sidewalk gaps, cracked pavement, sloped surfaces, and blocked curb letdowns prevent them from safely navigating to basic services or community spaces.

1. **SIDEWALKS AND CURB LETDOWNS NEED REPAIR AND REDESIGN.**
   Many respondents highlighted cracked, tilted, or narrow sidewalks that are difficult or unsafe for wheelchairs, walkers, scooters, or strollers. Curb letdowns were often either missing, too steep, or blocked by debris or snow. This forces people to detour or travel on road shoulders. One person shared, “You can’t get a wheelchair up the curb. The ramps exist, but they’re steep or blocked with snow.”

2. **PARK ACCESS, SEATING, AND WASHROOM CONDITIONS LIMIT USABILITY.**
   Parks and public areas are appreciated as gathering places, but several barriers remain. Respondents described gated park entrances that are hard to open, washrooms that are locked or lack grab bars, and limited seating or shaded rest spots. These issues disproportionately affect older adults and those with mobility concerns.

3. **WINTER MAINTENANCE IS A MAJOR CONCERN.**
   Snow and ice make many otherwise accessible routes impassable. Respondents noted windrows blocking crossings, icy curb letdowns, and unshovelled sidewalks, especially in front of private properties or at key intersections. “In winter, I walk on the road – the sidewalk is a sheet of ice,” shared one older resident.

EQUITY AND INCLUSION CONSIDERATIONS
Barriers to public spaces were not evenly experienced. Older adults with mobility challenges, people who use wheelchairs or scooters, and those with low vision were more affected by sloped terrain, poor sidewalk design, and snow-related hazards. Residents who lived uphill or farther from downtown reported fewer accessible routes and more seasonal obstacles.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

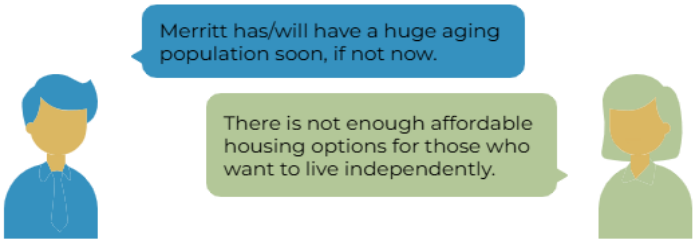
- Strategic Direction 1 (Accessible Public Spaces and Infrastructure for All) is supported by these findings, especially around sidewalk repair, consistent curb letdowns, and seating in key locations.
- Planning documents such as the Merritt Accessibility Requirements for Persons with Disabilities outline accessibility standards and improved trail surfaces, rest areas, and shade.

This feedback suggests that even modest investments in sidewalk repair, coordinated snow clearing, and accessible public toilets would have an outsized impact on inclusion and mobility.

DIMENSION 2:
Housing

Housing was one of the most urgent topics. Many residents described challenges in finding and maintaining homes that are both affordable and accessible, particularly as they age or their health changes.

Community feedback: Affordable Housing for Seniors in Merritt



1. **FEW ACCESSIBLE HOUSING OPTIONS ARE AVAILABLE.**
   Participants noted a limited supply of housing that works for people with mobility, sensory, or health-related needs. There was strong demand for units that are ground-oriented, low-maintenance, and located near services. Stair-free access, wide doorways, and walk-in showers were frequently mentioned. Some noted that even subsidized or seniors' housing buildings may lack full accessibility features.

2. **AGING IN PLACE IS FINANCIALLY AND PHYSICALLY DIFFICULT.**
   Several homeowners expressed concern about being "house rich and cash poor," with rising costs for utilities, maintenance, or taxes making it harder to stay put. Others shared that they have the equity to move but cannot find an age-friendly rental in Merritt. "I can't manage the stairs anymore, but there's nowhere else I can afford to go," one resident said. Renters described stress about rent increases and the risk of displacement as their incomes shrink with age or health changes.

3. **HOUSING AND HEALTH NEEDS ARE DEEPLY LINKED.**
   People with accessibility needs often face complex trade-offs. Some accept housing that is affordable but inaccessible, while others face long wait times or eligibility gaps for subsidized units.

4. **THERE IS AN ONGOING TENSION between the needs of unhoused residents and broader community concerns about safety and comfort in the downtown core.**

Many community members recognize that people who are unhoused are often facing multiple, overlapping challenges such as unstable income, trauma, mental health concerns, and substance use, and that they require compassionate, coordinated support. At the same time, the visible concentration of people sleeping outdoors or using public spaces for day-to-day survival has led some residents and businesses to feel less safe or uncomfortable in parts of downtown (e.g., Spirit Square), particularly at night or around key services. Participants noted concerns about public substance use and disruptive behaviour, while also emphasizing that criminalization or displacement on its own will not address underlying issues. These findings point to the need for responses that uphold dignity and support for unhoused residents, while also promoting safety, cleanliness, and a sense of welcoming for everyone who uses the downtown area.

EQUITY AND INCLUSION CONSIDERATIONS

Those most affected include older adults with fixed incomes, people aging alone, people with accessibility needs, and unhoused individuals. Participants with chronic conditions or recent injuries often lack options that accommodate changing needs. Families supporting relatives with care needs described long-term stress in trying to "make it work" in homes that were not built for aging or mobility changes.

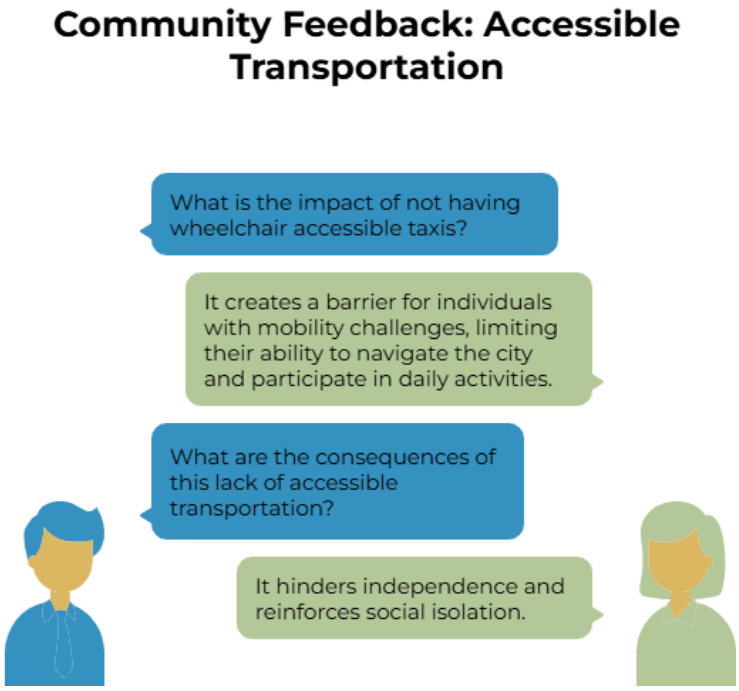
HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- Strategic Direction 5 (Coordinate Local Support Around Housing and Transportation Challenges) includes a Housing and Transportation group to solve local gaps and promote culturally inclusive solutions.
- The Merritt Housing Needs Report confirm that few units meet both affordability and accessibility thresholds, and calls for better coordination between City, non-profit organizations, and Indigenous partners.

DIMENSION 3:
Transportation

Transportation was one of the most consistently discussed topics, with residents, service providers, and Indigenous partners linking it to health, independence, and social connection. This is what people reported most often:

1. **GETTING AROUND WITHOUT A CAR IS OFTEN DIFFICULT.** Residents who do not drive, including many older adults and people with accessibility needs, described finding rides from friends, family, or community drivers. These



supports are valued but inconsistent, and many noted that they "only go out when someone offers a ride" or "try not to go out in winter." Some respondents said they stack appointments into one exhausting trip or worry about how they'll stay in their homes if they lose access to a driver. Residents living on hills or outside downtown face added challenges due to steep grades and longer distances.

2. **TRANSIT IS GOOD OVERALL, BUT DOESN'T MEET ALL NEEDS.**
   Participants appreciated that Merritt has local transit, but routes and schedules don't always align with people's lives. Key destinations like grocery stores, clinics, and recreation facilities are sometimes difficult to access by bus, and service frequency limits spontaneity. Riders raised concerns about stops lacking benches or shelters, especially during winter.

3. **WALKING, ROLLING, AND SCOOTERING ARE ALSO MODES OF TRANSPORT.**
   Sidewalks and crossings were raised again here as critical parts of how people get around without a car. Participants described sidewalk gaps, curb letdowns that are too steep or uneven, and scooter users who choose road shoulders over rough sidewalks, trading one risk for another. "Sometimes I go into the road just to avoid a bad corner."

4. **WINTER CONDITIONS CREATE SEASONAL ISOLATION.**
   Snow and ice were a recurring theme. Windrows at crossings, icy curb ramps, and uneven snow piles isolate those with balance issues or mobility aids. Bus stops and downtown crossings were particular pain points.

5. **MEDICAL TRAVEL REMAINS A CHALLENGE.**
   Several participants travel out of town for specialist appointments and shared concerns about high fuel costs, limited public or non-profit travel options, and relying on family to take time off work. These gaps increase the risk of missed or delayed care, especially for those on fixed incomes or with chronic health needs.

EQUITY AND INCLUSION CONSIDERATIONS

Transportation barriers are most acute for people who don't drive, including older people who never learned to drive, people with accessibility needs, and those with low incomes. Indigenous residents living on a reserve face additional distance and cost, and often rely on band or community vehicles. Those with the greatest need for travel often have the fewest options.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- Strategic Direction 1 (Accessible Public Spaces and Infrastructure) supports micro-fixes like sidewalk and curb cut repair, benches, and winter route clearing.
- Strategic Direction 5 (Coordinate Local Support Around Housing and Transportation Challenges) includes low-tech ride coordination.
- Planning documents like the Active Transportation Plan underscore the need for better pedestrian connectivity and more equitable transport access.

DIMENSION 4:
Communication and Information

Participants emphasized the importance of clear, timely, and accessible communication, especially when it comes to civic events, health services, emergency planning, and new programs. While many sources of information exist, residents noted gaps in coordination, format, and reach.

- **INFORMATION EXISTS, BUT DOESN'T ALWAYS REACH THE PEOPLE WHO NEED IT.** Older adults described missing out on events, deadlines, or services because they didn't hear about them in time or didn't understand what was being offered. "I found out after the deadline. It was too late to sign up," one participant said. Many people emphasized the need for word-of-mouth, posters in familiar places, and human contact over websites alone.
- **ONLINE INFORMATION IS USEFUL, BUT NOT FOR EVERYONE.** While some residents praised the City's website and social media for updates, others said digital platforms assume too much tech confidence or internet access. This was especially true for older residents, newcomers, and people living in lower socio-economic circumstances.
- **TRUSTED MESSENGERS MATTER.** Several people said they rely on familiar staff at the library, pharmacy, church, or community agencies to help them find or interpret information. Others said the best way to learn about local events is still "through someone you know."

EQUITY AND INCLUSION CONSIDERATIONS

Information gaps most affect isolated people, those living on low incomes, not fluent in English, or who live with vision or cognitive changes.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- **Strategic Direction 2: Advance Social Inclusion and Accessibility Equity** includes age- and accessibility-friendly communication practices and training for City staff.
- **Strategic Direction 3: Support Participation and Reduce Isolation** emphasizes better outreach around programs, volunteer opportunities, and events.
- **Strategic Direction 4: Advance Indigenous Accessibility and Cultural Inclusion** includes co-developed outreach and signage approaches with local Nations and Elders.

DIMENSION 5:
Social Wellbeing and Recreation

Participants strongly linked social participation to mental health, purpose, and aging well. While many praised local activities and organizations, barriers related to cost, accessibility, transportation, and inclusion were also commonly raised.

1. **MANY OPPORTUNITIES EXIST, BUT NOT FOR EVERYONE.**
   Residents acknowledged the value of Merritt's programs, especially at the Civic Centre, Seniors Centre, and the library. However, participants with mobility or health issues said they often could not attend events due to stairs, lack of accessible washrooms, or the need for assistance.
2. **SOCIAL PARTICIPATION DROPS WITH WINTER, HEALTH CHANGES, OR LOSS OF A DRIVER.**
   Seasonal isolation was frequently mentioned. Several residents said they withdraw in the winter due to snow, fear of falling, or difficulty getting out. Others shared that once they lost a spouse or driver in the household, their ability to engage socially decreased. Some also described how hearing loss, fatigue, or cognitive changes made it harder to participate in group settings that lacked accommodations.

EQUITY AND INCLUSION CONSIDERATIONS

People most affected by gaps in social participation include older adults with accessibility needs, Indigenous and newcomer residents, those who live alone, and people with low income. Transportation, lack of accessible venues, and culturally mismatched programming all reduce participation.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- **Strategic Direction 2: Advancing Social Inclusion and Accessibility** emphasizes accessible, inclusive programming and spaces that welcome older adults and people with accessibility needs.
- **Strategic Direction 4 (Advance Indigenous Accessibility and Cultural Inclusion):** calls for events and spaces that reflect Indigenous identity.
- Documents like the Parks, Recreation, and Culture Master Plan and Poverty Reduction Assessment also support intergenerational, low-barrier community spaces and programming that respond to cultural and seasonal realities.

DIMENSION 6:
Respect Social Inclusion and Cultural Safety

Participants shared that feeling welcomed and valued in public, health, and social service settings is just as important as physical accessibility. Many expressed concerns about ageism, stigma toward unhoused residents, and a lack of cultural safety for Indigenous community members. Other themes included:

1. **SOCIAL STIGMA AS A BARRIER.**
   Some residents, particularly those living with mobility challenges or on lower incomes, said they sometimes feel invisible or unwelcome in civic and commercial spaces.
2. **INDIGENOUS RESIDENTS FEEL UNDERREPRESENTED IN COMMUNITY LIFE.**
   Indigenous partners described experiences of discrimination and exclusion, particularly in downtown spaces. Some shared that Elders feel uncomfortable or not fully welcome at community events, and others noted the limited visibility of Indigenous culture in public spaces. Participants called for greater Indigenous visibility, more inclusive signage, and more opportunities for cultural expression.
3. **PEOPLE WHO ARE UNHOUSED OR PRECARIOUSLY HOUSED ARE OFTEN EXCLUDED.**
   Residents and service providers described social exclusion or displacement of people who are unhoused, many of whom live with accessibility needs or chronic health conditions. While acknowledging the challenges of managing public space, some emphasized that inclusive design means recognizing everyone's right to access public life.

EQUITY AND INCLUSION CONSIDERATIONS

Exclusion was reported to affect those who are visibly older, Indigenous, unhoused, or who use mobility aids.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- **Strategic Direction 2 (Advancing Social Inclusion and Accessibility)**: calls for more inclusive civic and cultural spaces.
- **Strategic Direction 4 (Advance Indigenous Accessibility and Cultural Inclusion)**: responds to community calls for representation, language, ceremony, and Elders-first approaches.
- **Strategic Direction 1 (Accessible Public Spaces and Infrastructure):** also addresses the physical design choices that shape social experience, like seating, signage, and gathering areas.
- Relevant planning documents reference cultural inclusion but often lack detail on how Indigenous or age-friendly inclusion would be operationalized.

DIMENSION 7:
Civic Engagement and Employment

Civic engagement, volunteering, and part-time work were described as vital to older adults' sense of identity, meaning, and contribution. However, barriers remain around accessibility, awareness, and cultural inclusion. Major themes included:

Community feedback: Hiring People with Diverse Needs

- **OLDER ADULTS WANT TO CONTRIBUTE, BUT OPPORTUNITIES ARE UNEVEN.** Many older residents expressed a strong desire to stay active through volunteering, mentoring, or part-time employment. Some praised specific groups like the Seniors Centre, churches, or Rotary for offering roles that value older people's knowledge. But others found it hard to re-engage after retirement or relocation.
- **PHYSICAL AND COMMUNICATION BARRIERS CAN LIMIT CIVIC ENGAGEMENT.** Participants noted that many community meetings aren't accessible, due to stairs, poor acoustics, fast-paced presentations, or inaccessible formats. The lack of paper-based notices and print-heavy materials was also cited as a barrier.
- **INDIGENOUS PARTNERS SEEK DEEPER, MORE MEANINGFUL PARTICIPATION.** Indigenous respondents called for deeper co-creation of public decisions.
- **EMPLOYMENT OPPORTUNITIES ARE LIMITED AND SOMETIMES INACCESSIBLE.** Several older adults described being willing to work but facing ageism, digital application processes, or physical job requirements they could not meet. Others with accessibility needs shared that employers often don't provide flexible schedules or ergonomic accommodations.

EQUITY AND INCLUSION CONSIDERATIONS

Newcomers and people with accessibility needs may face additional cultural, informational, or digital access barriers. Elders living on reserve or without reliable transport are less likely to hear about or be able to attend civic events.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- **Strategic Direction 2: Advancing Social Inclusion** supports inclusive volunteering, mentoring, and advisory roles and includes flexible, barrier-aware approaches to community engagement, employment, and digital information.
- **Strategic Direction 4: Advance Indigenous Accessibility and Cultural Inclusion** emphasizes co-creation of public policies, protocols that reflect Indigenous leadership, and culturally safe civic processes.

DIMENSION 8:
Community Health and Wellness Services

Participants consistently linked access to health care, support services, and social programs with their ability to age in place. However, they described strained systems, gaps in local services, and the difficulty of navigating supports without coordinated help. Additional themes included:

1. **BASIC HEALTH SERVICES ARE AVAILABLE, BUT NOT ALWAYS ACCESSIBLE.**
   Residents described challenges booking timely appointments, finding family doctors, or accessing walk-in care. Physical access to the hospital, clinics and pharmacies was also raised, particularly when buildings lack elevators, ramps, or accessible washrooms.
2. **PEOPLE WITH ACCESSIBILITY NEEDS OFTEN STRUGGLE WITH CARE COORDINATION.**
   Many participants said managing appointments, medication, and paperwork was difficult, especially for those with mobility, hearing, or cognitive changes.
3. **MENTAL HEALTH AND CAREGIVER SUPPORT REMAIN MAJOR GAPS.**
   Several residents highlighted mental health challenges, especially for isolated seniors, caregivers, and people with chronic illnesses. Long waits and lack of local support were recurring themes. Caregivers said they often feel invisible or exhausted, with little help.
4. **TRANSPORTATION AND AFFORDABILITY SHAPE ACCESS TO CARE.**
   Even when services exist, people described difficulty reaching them or affording extra costs like prescriptions, medical equipment, or travel. “If you need to go to Kamloops, you’re on your own unless you know someone with a car,” said one resident.

EQUITY AND INCLUSION CONSIDERATIONS
People most affected include low-income older adults, caregivers, and people aging with complex health needs.

HOW THIS INFORMED THE STRATEGIC DIRECTIONS

- **Strategic Direction 5: Coordinate Local Support Around Housing and Transportation Challenges** addresses the importance of wraparound supports, coordinated referrals, and practical resources like ride programs or help with forms.

SECTION 4

Implementation

MONITORING + EVALUATION

This section outlines how the action plan could be put into practice and how progress might be tracked over time. It suggests possible roles and responsibilities, indicative timelines, and supports that could enable implementation across City departments and partners. It also proposes an approach to monitoring and evaluation, including potential indicators and reporting mechanisms, to help the City understand what is working, adjust course as needed, and demonstrate impact to Council, community members, and possible funders.

IMPLEMENTATION & MONITORING

Implementation of this plan could be guided by the following principles:

- **START WITH WHAT IS FEASIBLE:** Focus on quick wins and low-cost adjustments within existing budgets, while planning toward longer-term system and policy shifts.
- **BUILD ON EXISTING PLANS AND COMMITMENTS:** Actions should align with the Official Community Plan, Active Transportation Plan, Parks, Recreation and Culture Master Plan, Economic Development Strategy, Interior Health Accessibility Plan, and future Reconciliation Action Plan so that age-friendly and accessibility improvements become part of core City business.
- **CENTRE PEOPLE WITH LIVED EXPERIENCE:** Older adults, people with accessibility needs, Indigenous partners, and front-line staff could be involved through the Accessibility Advisory Committee and other engagement. This supports relevant solutions and honours the intent of the Accessible BC Act.
- **APPLY AN EQUITY AND INCLUSION LENS:** Actions should prioritize reducing disparities for residents who face multiple barriers.
- **USE PILOTS AND LEARN AS YOU GO:** Ideas could be tested at a small scale first, feedback gathered, and then successful approaches adjusted and scaled as resources allow.
- **INTEGRATE MONITORING INTO REGULAR DECISION-MAKING:** A short set of indicators and existing feedback mechanisms should be used so that progress is tracked as part of normal planning, budgeting, and reporting cycles.

ROLES AND RESPONSIBILITIES

Implementation should require shared leadership across Council, staff, committees, and partners.

Council and Chief Administrative Officer

Council and the CAO could:

- endorse the plan and its five Strategic Directions
- integrate age-friendly and accessibility priorities into Council strategic planning, annual budgeting, and capital planning decisions
- champion the use of the Accessibility Advisory Committee as a key advisory body
- receive regular updates and the biennial Age-Friendly and Accessibility Report Card and adjust priorities as needed

Accessibility Advisory Committee

The committee could:

- provide advice on implementation priorities, especially where trade-offs are required
- review major capital projects, development proposals with significant public interface, and key bylaws through an accessibility lens
- support monitoring by commenting on indicator trends, community feedback, and emerging issues
- co-develop the biennial Age-Friendly and Accessibility Report Card

To maintain momentum, the City could:

- convene an annual strategic planning session with the committee and City staff to:
  - review accomplishments from the past year
  - set a small number of focus topics for the coming year
  - map a schedule of monthly or bi-monthly meetings and review points
  - ensure each meeting has a clear purpose, related to specific actions in Strategic Directions 1–5

Community Services and Implementation Lead

Community Services, supported by an identified implementation lead, could:

- coordinate plan implementation across departments
- maintain the implementation tracker and decision-making matrix (Appendix 1)
- coordinate the accessibility feedback mechanism under the Accessible BC Act and ensure it is linked to this plan
- support the Accessibility Advisory Committee with materials, data, and follow-up

City Departments

Departments could integrate relevant actions into their work:

- Planning and Development – apply accessibility and universal design to development review, OCP updates, and land use decisions
- Public Works and Engineering – incorporate accessibility into road, sidewalk, snow and ice, and asset management work
- Community Services– implement inclusive programming, accessible parks and facilities, and Indigenous-centred gatherings
- Communications and IT – lead accessible communications, website improvements, feedback tools, and multi-channel outreach
- Community Services – coordinate partnerships, outreach, and social determinants of health actions
- Finance – support integration of accessibility priorities into financial plans and capital budgeting
- Bylaw and Protective Services – align bylaws and enforcement practices with accessibility and inclusion goals
- Human Resources – coordinate staff training related to accessibility, cultural safety, and trauma-informed practice.

Each department could:

- identify at least one age-friendly or accessibility initiative per year that aligns with this plan
- report annually on progress and any relevant indicators

Community Partners

Key partners, such as Indigenous governments and organizations, Interior Health, non-profit and housing providers, service clubs, business associations, the school district, and provincial and federal agencies, could be encouraged to:

- collaborate on specific joint actions (for example, rides coordination, outreach, Indigenous-centred gatherings, housing referrals)
- share data and qualitative feedback where feasible
- co-design and co-deliver pilots and programs, especially those relating to Indigenous accessibility and cultural inclusion

MONITORING AND EVALUATION

Effective monitoring and evaluation are essential components of any age-friendly or accessibility-focused strategy. By systematically assessing progress and outcomes, the City and its community partners can ensure that initiatives remain responsive to residents' needs and reflect best practices in inclusion and accessibility. A clear framework for monitoring and evaluation helps to uphold accountability, foster collaboration, and guide ongoing improvements in programs and services.

Monitoring and evaluation could:

- track whether priority actions are being implemented as intended,
- identify early signs of change in residents' experiences of accessibility, inclusion, and aging in place,
- support continuous improvement by indicating what is working and where adjustments may be needed,
- support reporting under the Accessible BC Act and enhance transparency and trust with the community.

The approach should be light-touch and integrated into existing systems.

The City could use the following tools.

1. Implementation tracker:
    - A simple list of all numbered actions (for example, 1.1 to 5.10), with lead, partners, time frame, and status (not started, in progress, implemented, ongoing).
    - Departments should update this twice per year, and the implementation lead could consolidate the information.

2. Indicator matrix:
    - A small set of measurable indicators for each Strategic Direction, focusing on both outputs (such as number of benches added, staff trained) and outcomes (such as resident ratings of ease of getting around, sense of belonging).
    - This may be updated annually or biannually, depending on data availability.

3. Accessibility feedback mechanism:
    - The City could use the Accessible BC Act feedback channels (web form, email, phone) to log and categorize accessibility-related comments and service requests.
    - Reviewing this data regularly should help identify patterns and inform adjustments to operations and priorities.

4. Integrated survey questions:
    - Where the City undertakes community surveys, a small set of age-friendly and accessibility questions could be incorporated to track change over time.
    - The City may partner with Interior Health and other agencies where joint data collection is feasible.

5. Biennial Age-Friendly and Accessibility Report Card: Every two years, the City should prepare a short public report summarising:
    - progress on key actions for each Strategic Direction, indicator trends and selected community feedback, priority focus areas for the next period.
    - The report could be presented to Council and published in accessible formats on the City website and in print.
    - Joint review sessions: The report card should serve as the basis for a joint discussion with Council, senior staff, the Accessibility Advisory Committee, Indigenous partners, and other key stakeholders.

Decisions about adjustments to the implementation roadmap could be documented.

Conclusion and Next Steps

Merritt is experiencing key demographic shifts. Population aging, rising disability rates, climate-related events, and constrained capital budgets all shape how residents experience daily life. Older adults, Indigenous Elders, people with accessibility needs, families, and service providers clearly reported that many parts of Merritt already support accessibility, but persistent barriers in outdoor spaces, buildings, programs, communication, housing, and transport make it harder for some residents to participate fully.

Implementation of this plan will require leadership from Council and senior staff, meaningful roles for the Accessibility Advisory Committee and Indigenous partners, and close collaboration with health, housing, non-profit, and business partners. The plan is intended to be a living document that guides decisions, rather than a static list of aspirations.

POSSIBLE NEXT STEPS

To move from planning to action, the City could focus on a small set of clear next steps in the first year after adoption.

1. **ADOPT THE PLAN AND IDENTIFY AN INTERNAL IMPLEMENTATION LEAD**
    - Present the Plan to Council for formal adoption and publicly post the Plan.
    - Designate an implementation lead (for example, Community Services) to coordinate actions across departments and support the Accessibility Advisory Committee.

2. **CONVENE AN IMPLEMENTATION LAUNCH SESSION**
    - Bring together department leads, the Accessibility Advisory Committee, and key partners (for example Interior Health, Indigenous partners, seniors' and disability organizations) to:
        - review the Strategic Directions and time frames
        - confirm which numbered actions each department or partner is best placed to lead
        - identify 6–10 quick wins that are feasible in the first 6–12 months.

3. **DEVELOP A FIVE-YEAR IMPLEMENTATION ROADMAP (which could be reviewed at year three to align with the Accessible BC Act)**
    - Translate the plan into a simple roadmap that:
        - lists each action with lead, partners, and approximate timing
        - identifies dependencies (for example, policies or checklists that need to be in place before larger projects proceed)
        - highlights where actions can be aligned with already planned capital works, OCP updates, or grant applications.

4. **INTEGRATE PRIORITY ACTIONS INTO ANNUAL BUDGETS AND WORK PLANS**
    - Ask each department to:
        - select at least one age-friendly or accessibility action to implement in the coming year
        - incorporate it into annual business plans, operating budgets, and capital project scopes where relevant.

    - Use the financial planning process to identify modest but visible support for accessibility (for example, a small annual allocation for low-cost fixes that cannot be absorbed into existing budgets).

5. **STRENGTHEN THE ROLE AND SCHEDULE OF THE ACCESSIBILITY ADVISORY COMMITTEE**
    - Work with the committee to:
        - hold an annual strategic planning session focused on this plan
        - map out a schedule of meetings for the year, tied to key decisions
        - clarify how committee advice will be requested, documented, and responded to.

6. **FINALIZE EARLY TOOLS AND PROCEDURES.**
    - Prioritize development of a small number of enabling tools that underpin many actions, such as:
        - an accessibility lens checklist for capital projects and development review
        - an accessible communication and information standard for staff
        - accessible event and engagement checklists
        - the Accessible BC Act feedback mechanism (web form, email, phone).

7. **ESTABLISH A SIMPLE MONITORING FRAMEWORK.**
    - Set up:
        - an implementation tracker for all numbered actions
        - a concise indicator matrix aligned with the five Strategic Directions
        - a schedule for a biennial Age-Friendly and Accessibility Report Card.
    - Confirm how feedback from residents, the Accessibility Advisory Committee, and Indigenous partners will be incorporated into progress reviews.

8. **COMMUNICATE THE PLAN TO THE COMMUNITY.**
    - Prepare a plain-language, visually accessible summary of the plan.
    - Share it through the City website, social media, print copies at key locations, and partner networks.
    - Where possible, present the plan at existing community tables (for example, service provider networks, Indigenous forums, seniors' gatherings) and invite feedback on implementation priorities.

By taking these steps, the City can begin to translate community input and existing policy commitments into tangible improvements that residents notice in their daily lives. Progress may be incremental, especially under current financial constraints, but sustained attention to the actions in this plan could gradually make Merritt a safer, more inclusive place to age and live.

SECTION 4

Appendices

This section contains two appendices: Decision-making matrix for Strategic Directions 1–5 and a Glossary of Terms. The Appendices provide supporting tools and definitions to complement this report. They include a decision-making matrix for Strategic Directions 1 to 5 and a Glossary of Terms to support consistent interpretation of key concepts throughout the document.

APPENDIX 1:

Decision-making matrix for Strategic Directions 1–5

This is an example of a simple decision-making matrix to choose which recommendations to implement.

1. CLARIFY THE PURPOSE AND CONSTRAINTS

Before you score anything, be clear on:

- What you are trying to optimize (for example: "improve accessibility with limited capital over the next 3 years")
- Key constraints (for example: budget, staff capacity, political commitments, legislative requirements)

2. LIST YOUR RECOMMENDATIONS (the rows)

Make a short list of the options you are deciding between. Each row in your matrix will be one recommendation. For example:

- Add benches and shade along priority walking routes
- Develop an accessibility communications campaign
- Complete a detailed facility accessibility audit

Aim for a manageable list that you can realistically discuss in one meeting.

3. CHOOSE 4–6 DECISION CRITERIA (the columns)

Each column will be a factor you care about when choosing what to implement. For municipal or organizational planning, common criteria are:

- Impact on goals (How much does this move the dial)
- Cost (Capital and operating)
- Feasibility (Staff capacity, skills, partnerships)
- Equity and inclusion (Benefits to priority or underserved groups)
- Urgency/time sensitivity (Consequences of delay)
- Risk reduction (Safety, legal, or reputational risk)

Keep it simple. Four to six criteria are usually enough.

Optional: Decide if some criteria matter more than others. If so, you can assign a weight later (for example, Impact weight 3, Equity weight 2, Cost weight 2, Feasibility weight 1).

4. SET A SIMPLE SCORING SCALE

Use a consistent 1–5 scale for each criterion, for example:

- 1 = very low
- 2 = low
- 3 = moderate
- 4 = high
- 5 = very high

For cost, you can reverse the logic so that 5 = very low cost, 1 = very high cost, or you can score it as "affordability" instead of "raw cost."

Write a one-line description for each number if you want more rigour, for example, "Impact 5 = benefits many residents and clearly advances at least two strategic goals."

5. SCORE EACH RECOMMENDATION TOGETHER

Go through each recommendation and give it a score for each criterion.

- Encourage staff or partners to justify scores with short reasons
- If there is disagreement, note the range and either average it or talk until you reach a reasonable compromise
- Capture brief notes in a second line if needed (for example, "High impact because it addresses multiple barriers identified in engagement")

6. CALCULATE TOTAL OR WEIGHTED SCORES

For a basic matrix:

- Add the scores across each row to get a total score for each recommendation.
- Rank the recommendations from highest to lowest total

For a weighted matrix:

- Multiply each criterion score by its weight (for example, Impact score 4 × weight 3 = 12)
- Add the weighted scores to get a total weighted score
- Rank by weighted total

7. USE THE RESULTS TO STRUCTURE YOUR DECISION

The matrix gives you a starting point, not an automatic answer.

You can:

- Identify clear "top-tier" items for immediate implementation
- Identify "medium" items that may fit into later phases, or if funding becomes available
- Flag "low scoring" items that you keep on a long list or drop

Check for:

- Must-do items that stay low in the ranking but are non-negotiable (for example, legal compliance)
- A balanced portfolio across types of action (for example, not all communications and no physical improvements)

8. OPTIONAL: TURN IT INTO A VISUAL PRIORITY GRID

Once you have scores, you can also:

- Plot each recommendation on a simple grid, such as Impact (low to high) on one axis and Feasibility (low to high) on the other
- High-impact and high-feasibility items become "early wins"
- High-impact but low feasibility become "longer-term or advocacy" items

9. SIMPLE EXAMPLE MATRIX (unweighted)

Recommendation	Impact	Cost *(affordability)*	Feasibility	Equity	Total
Add benches and shade on priority walking routes	5	3	4	4	16
Accessibility communications campaign	3	5	4	3	15
Detailed facility accessibility audit	4	2	3	5	14

APPENDIX 2:
Glossary of Terms

ACCESSIBLE BC ACT (ABCA)
Provincial legislation that requires certain public-sector organizations, including local governments, to create an accessibility committee, an accessibility plan, and a way for the public to provide feedback on accessibility barriers.

ACCESSIBILITY
The degree to which environments, services, information, and programs can be used by people of all ages and abilities, without unnecessary barriers. In this plan, accessibility includes physical, sensory, cognitive, cultural, and financial access.

ACCESSIBILITY ADVISORY COMMITTEE
A committee that includes people with accessibility needs and other community members, which provides advice to the City on how to identify, remove, and prevent barriers in policies, programs, services, and infrastructure.

AGE-FRIENDLY COMMUNITY
A community where policies, services, and physical environments are designed to help older adults live safely, stay healthy, and participate fully in community life.

BC AGE-FRIENDLY COMMUNITY DIMENSIONS (EIGHT DIMENSIONS)
The eight areas used in BC age-friendly planning:

1. Outdoor spaces and buildings
2. Transportation
3. Housing
4. Social participation
5. Respect and social inclusion
6. Civic participation and employment
7. Communication and information
8. Community support and health services

AGE-FRIENDLY AND ACCESSIBILITY PLAN
This plan's overarching framework for improving how Merritt supports older adults, people with accessibility needs, and others experiencing barriers across the built environment, services, programs, and decision-making.

BUILT ENVIRONMENT
The human-made surroundings where people live, work, and move around, including buildings, streets, sidewalks, parks, and public spaces.

CIVIC ENGAGEMENT
Ways that residents take part in public life and decision-making, such as voting, attending open houses, serving on committees, volunteering, or participating in consultations.

COMMUNITY MOBILITY AND ACCESS
The combined ways people get to where they need to go, including walking, rolling, transit, volunteer rides, taxis, and band-run or community shuttles. It focuses on how easy and safe it is to reach essential destinations without relying solely on a private car.

COMMUNITY SUPPORT AND HEALTH SERVICES
Formal and informal services that help people stay healthy and live independently, such as primary care, home support, mental health services, Better at Home, and community-based programs.

COORDINATED ACCESS
A shared process among agencies to identify people with complex needs (for example, housing and support needs) and connect them more efficiently to available services, using agreed referral pathways and criteria.

CULTURAL SAFETY
An approach that recognizes and addresses power imbalances, racism, and discrimination, particularly for Indigenous peoples. Services and spaces are considered culturally safe when people feel respected, heard, and free from judgment or stigma.

DISABILITY (BARRIER-FOCUSED LENS)
A condition or set of conditions that interacts with environmental and social barriers to limit a person's full participation in community life. In this plan, the focus is on changing environments and systems rather than "fixing" individuals.

INDIGENOUS ELDERS
Respected knowledge keepers and leaders within Indigenous communities, whose experiences, guidance, and cultural teachings are central to planning that affects Indigenous peoples, aging, and accessibility.

INTERGENERATIONAL
Activities or spaces that bring together people of different ages (for example, children, youth, adults, and elders) for shared programs, events, or everyday social connections.

NEAR-TERM ACTIONS (18-36 Months)
Recommendations that can realistically be started or completed in roughly 6–18 months, often involving pilots, new tools, or moderate changes to existing programs and processes.

OUTDOOR SPACES AND BUILDINGS
Public and private physical environments such as streets, sidewalks, parks, plazas, trails, and civic facilities. In this plan, the focus is on safety, accessibility, comfort, and usability for people of all ages and abilities.

PRIORITY ROUTES (Accessible Routes Network)
Key walking and rolling routes that connect older adult housing, Indigenous partners, services, shops, and transit stops, and that are prioritized over time for improvements such as better sidewalks, crossings, benches, lighting, and winter maintenance.

QUICK WINS (0–18 Months)
Low-cost, practical actions that can be implemented quickly using existing resources, to address high-impact barriers and build momentum for longer-term work.

RESPECT, SOCIAL INCLUSION, AND CULTURAL SAFETY
The dimension of age-friendly planning that looks at whether older adults and people with accessibility needs feel valued, visible, and safe in community life, including whether they experience discrimination, stigma, or racism in public spaces and services.

SOCIAL DETERMINANTS OF HEALTH
The non-medical factors that influence health such as income, education, housing, transportation, social connection, culture, and access to services. This plan uses this lens to show how these factors shape older adults' and other residents' ability to participate.

SOCIAL PARTICIPATION
Opportunities for people to take part in social, recreational, cultural, and community activities, such as clubs, events, programs, and informal gatherings.

SYSTEM AND POLICY SHIFTS (3-5 YEARS)
Longer-term changes to bylaws, policies, capital planning, financial frameworks, and inter-agency partnerships that embed accessibility and age-friendliness into how the City and its partners operate over time.

TRAUMA-INFORMED PRACTICE
An approach that recognizes the impacts of trauma (including residential schools, displacement, and violence) and seeks to ensure that services do not re-traumatize people. It emphasizes safety, choice, trust, collaboration, and empowerment.

UNIVERSAL DESIGN
Design of buildings, spaces, and products so that they can be used by as many people as possible, regardless of age, size, or ability, without the need for adaptation or specialized design.

VOLUNTEER DRIVER / COMMUNITY RIDES PROGRAMS
Local initiatives where trained volunteers or community organizations provide rides, often in their own vehicles or shared vans, to help people without cars get to essential destinations such as medical appointments, grocery stores, or community programs.

This report was prepared with the support of closed system AI-assisted drafting tools (e.g., Microsoft Copilot, MAXQ Data, Grammarly). All analysis, findings, and recommendations were created and validated by the project team, and any errors or omissions remain our responsibility. AI outputs were treated as administrative only, and no identifiable personal information was used in prompting these tools.

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