

1. How long have you been a member of GANS?

[Edit this question](#)

Response	Chart	Frequency	Count
Less than 2 years		72%	42
Two to 5 years		14%	8
More than 5 years		14%	8
Total responses:			58

2. Why did you originally join GANS?

[Edit this question](#)

Variable	Responses
	Show 55 responses to this question »

2.

Responses

- 1 Recommended while in school
- 2 As secondary duty to my regular job.
- 3 it was about gerontology
- 4 work with seniors
- 5 Became a member of a Geriatric Team
- 6 to network with other individuals and companies to assist with connecting my clients to additional resources
- 7 To meet and collaborate with other professionals in the field/interested in aging issues in NS
- 8 As a DRC at that time, I felt it was imperative that I stay abreast with current geriatric info
- 9 They seem to be offering a more integral role in the education and connection of health professionals around aging
- 10 I work in a long term care facility
- 11 in a new role for my district and looking for information, networking opportunities
- 12 To bridge the gap between theory and practice.
- 13 Had completed an educational program in gerontology and was looking to gain further information and experience about working with seniors.
- 14 To join a more local gerontology association
- 15 to be informed
- 16 working in Geriatrics
- 17 It was free.
- 18 As my work involves supporting services to and for seniors I felt it would be beneficial to be connected to an organization that is representative of work and services going on for our older population in the province.

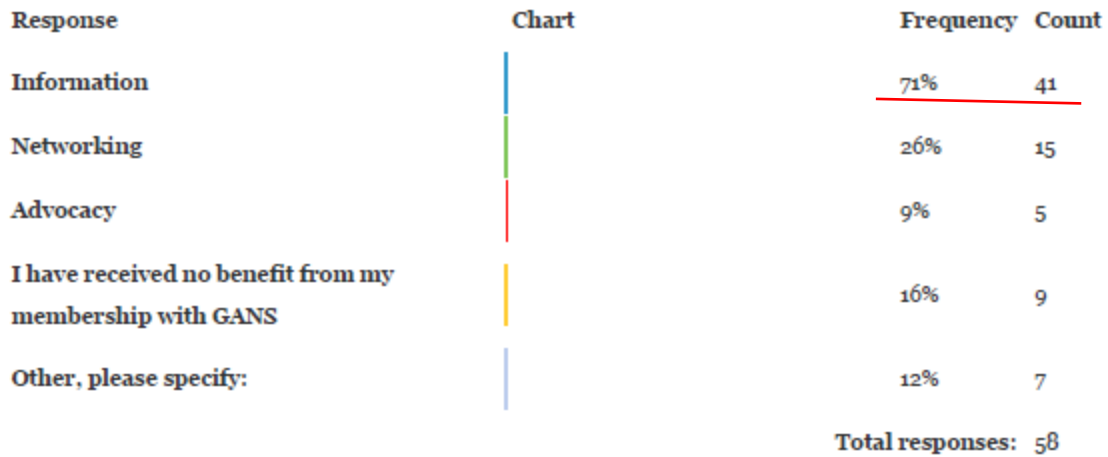
Responses

- 19 To become a member of a networking group concerned with issues and care of the elderly
- 20 Work related
- 21 Information & networking
- 22 to connect with likeminded people
- 23 I had heard of GANS from another nurse.
- 24 work as family practice nurse- looking for all available resources
- 25 enjoy gerontology
- 26 interested in gerontological research in Nova Scotia
- 27 workin with seniors and wanting to stay informed on issues/programs etc. in the province
- 28 I work in geriatrics
- 29 It looked like an excellent knowledge resource.
- 30 free registration
- 31 interest in senior issues; thinking of starting business but no longer doing so
- 32 up to date information and resources
- 33 access to additional resources
- 34 Information and newworking
- 35 for information and networking
- 36 I have a passion for geriatrics.
- 37 It was in conjunction with membership in NSGNA.
- 38 networking
- 39 to get correspondence on geriatric research and best practices
- 40 Email about free membership
- 41 Specific area of interest/passion for gerontology
- 42 -to be as up-to-date as possible on information
- 43 Stuent involvement
- 44 Interest in research and service planning
- 45 additional souce of info
- 46 I work with a largely geriatric population so topics are relevant
- 47 To maintain up to date information.
- 48 membership was free, work in aging related field, thought this group would have its finger on the pulse of current issues / events / actions/ advocacy related to working with aging populations
- 49 visited new website and was impressed by it
- 50 work with elderly clients
- 51 as a conference exhibitor I wanted to reach the membership
- 52 To make connections with others outside my field who are interested in aging-related issues

Responses

- 53 It was a growing organization and I wanted to network with others in the field.
- 54 networking capability
- 55 1980's

3. What benefits have you received from your membership with GANS? (check all that apply)



What **other** benefits are there to joining




Responses

- 1 used to have great AGM's/workshops
- 2 I'm not even sure where my membership stands; other than receiving emails regarding upcoming events, no other benefits
- 3 Sharing research
- 4 (I have received no benefit so far because I haven't gotten involved)
- 5 general sense of keeping in touch with what's happening in NS
- 6 conferences were usually helpful

4. Have you attended a GANS event in the past year?



4a. If yes, please indicate each of the events you have attended. (check all that apply)

Response	Chart	Frequency	Count
Lunch and Learn (indicate what topics)		50%	5
Networking Tuesdays		40%	4
Annual General Meeting		60%	6
		Total responses:	<u>10</u>

4b. If no, could you tell us why you have not attended any GANS events in the past year.

Variable	Responses
	Show 49 responses to this question »

4b.



Responses

- 1 Live out of HRM
- 2 Fridays are too busy and often fall on my EDo (earned day off)
- 3 Most are a 2 hour drive from where I live
- 4 The conference was canceled. I live in rural NS and in the US-difficult to make the monthly get togethers.
- 5 Nursing in rural CB makes most events impossible to attend. With budget constraints, being able to attend 1 event in the capital area is the max if at all. The lunch and learns sound great, but are impossible for ex.
- 6 Events mainly for city residents.
- 7 Time of day is an issue for me
- 8 I live outside of the city and many events are in the evening
- 9 difficult to travel to events in Halifax, would be nice to have them elsewhere
- 10 GANS needs to clarify vision, mission for members.
- 11 Too busy, but I would like to get out at some point and become more involved
- 12 scheduling - do not live or work in Metro
- 13 location
- 14 The times/ dates interferred with other events.
- 15 I am too far away from Halifax, I have taken part in as much as I can on line.
- 16 Most of the events occur in the Halifax area and I live a distance away.
- 17 event was cancelled due to lack of attendees
- 18 Networking Tuesdays is in Halifax & cannot get there in time after work(finish at 5-5:30

Responses

- 19 not enough prior notice. The one event I planned on attending was cancelled
- 20 I live in the rural area so it is difficult to get to the city to participate.
- 21 I work until 5 pm every day and out side of the main core-
- 22 meeting always held in Halifax and never Dartmouth so getting there is difficult
- 23 I live in BC
- 24 work in Bridgewater - with budget restrictions in the district no opportunity to go out of district for meetings etc.
- 25 I live about 30 miles from Halifax and it is difficult to attend evening activities
- 26 Travel is an issue. I live in Colchester county.
- 27 lack of free time
- 28 too busy; many events have been of great interest, though
- 29 work, and I enjoy the website
- 30 distance to travel
- 31 Did not fit into my already busy schedule.
- 32 Not available to attend - dealing with other family concerns (elderly mother).
- 33 all the networking/presentations are in halifax
- 34 Time!
- 35 new member
- 36 I live over an hours drive from Halifax and rarely go there. I hope to be more actively involved when the time is right for me.
- 37 There were no events that interested me.
- 38 Hard to find the time
- 39 Conflict of time for AGM
- 40 not able to attend events in Halifax on regular basis
- 41 Live outside the city
- 42 Tuesdays I generally have something else going on
- 43 Staff shortages
- 44 no time, ED already attends some and does not encourage staff to attend
- 45 live in Chester Basin too tired after work to travel to Halifax
- 46 the conference was the reason we joined: we wanted to meet key decision-makers.
- 47 Has not been of benefit
- 48 purely a time crunch, I need to make it a priority
- 49 scheduling issues

5. Which of the following would you like to receive through your GANS membership? (check all that apply)

Response	Chart	Frequency	Count
Practitioner guidelines		41%	24
Research findings		79%	46
Networking opportunities (what types?)		45%	26
Educational opportunities (what types?)		66%	38
Advocacy (what topics?)		33%	19
GANS website updates focused on aging in Nova Scotia		74%	43
Other, please specify:		9%	5
		Total responses:	58

More info below

More info below

More info below

More info below

What **networking** opportunities would

Responses

- 1 informal guided events
- 2 collaborative projects
- 3 during the day....coffee?
- 4 day time socials
- 5 more affiliation with other organizations with similar interests as GANS
- 6 research
- 7 informal social
- 8 connections with other members through website and events
- 9 other healthcare practitioners
- 10 The new services offered to seniors
- 11 with those who care for seniors
- 12 social and directed
- 13 meals at educational events works fine
- 14 informal or come together around a common problem
- 15 governance and operational
- 16 just to discuss issues at hand

What **Educational** opportunities would you like?

Responses

- 1 Once a year face to face, newsletters

Responses

- 2 webinar
- 3 lunch and learns, presentations
- 4 teaching and as a student
- 5 more access to tele - ed; we have the technology, yet the number of limited sites is limiting
- 6 marketing, social media, resource and community based options
- 7 lunch and learns
- 8 educational workshops or conferences
- 9 Ongoing research here & how to apply to practice.
- 10 service provision, expectations of seniors, surveys of seniors etc.
- 11 talks and presentations by members and invited experts
- 12 staying healthy; supporting elderly with multiple diseases
- 13 Healthy Aging ,
- 14 Dealing with Behavioural issues in the elderly.
- 15 lunch and learns
- 16 conference, lunch and learns, workshops, webseminars
- 17 available resources in NS for rural areas
- 18 inter-professional
- 19 any updates on senior care

What **Advocacy** topics would you like

Responses

- 1 LTC, \$\$ and seniors
- 2 ageing, falls prevention
- 3 funding, aging in place, technology
- 4 issues of daily life
- 5 affordable housing, in home care giving
- 6 as society evolves away from former standards we need to advocate for higher standards of service provision and fair financial costs
- 7 navigating medical system
- 8 Financial Abuse, Housing, Hospital Treatment
- 9 Reducing elderly poverty
- 10 driving
- 11 Persons with dementia
- 12 transportation
- 13 poverty

Responses

14 health charities perspective

What **Other** opportunities

Responses

1 clear updates re membership

2 connecting what organizations are out there offering services to our older population

3 job postings

4 best practice info etc.

5 conference

6. How would you like to receive GANS-related information or opportunities? (check all that apply)

Response	Chart	Frequency	Count
Print materials (reports/brochures)		26%	15
Small/casual events		29%	17
GANS website updates		72%	42
Conferences		52%	30
Social media sites (Twitter, Facebook, blog)		19%	11
Email		91%	53
Other, please specify:		3%	2
		Total responses:	58

Other

Responses

1 Telehealth

2 webinars

7. Would you prefer the information or opportunities to be:

[Edit this item»](#)

Response	Chart	Frequency	Count
Specific to your discipline or area of interest		24%	14
Interdisciplinary		76%	44
		Total responses:	58

8. What content or topics of interest would you like to see covered on the GANS website?

Variable	Responses
#	Responses
1	A multitude of topics. Certainly NS specific if possible, maybe broken out into sections like those listed above, practitioner info, advocacy, opportunities etc
2	social trends, governmental programs, community supports, general research
3	frontline issues
4	funding opportunities, networking events and opportunities, sharing of information - business profiles, recommended companies, etc.
5	Daily life, history, health, care
6	All info related to best practice geriatric care & research, and specifically related to dementia and/or mental health issues
7	searchable database to find specific resources or programs for seniors in the community
8	n/a
9	best-practice guidelines
10	Leisure and Aging, Caregiving, Inclusion Across the Lifecourse
11	more than just about caregiving or retirement
12	blogs, featured articles, success stories
13	Falls/ Fall Prevention, What research is ongoing now & opportunities for involvement
14	References and resources beyond Capital
15	Updates on the latest research in dementia/Alzheimers and other issues of aging
16	All
17	Dementia, Alzheimer Disease, challenging Behaviours
18	narrative gerontology
19	Dementia Care Research, Loss, Grief and Dementia
20	dementia, aging - proactive issues
21	definition of constipation and guidelines to follow to alleviate the condition
22	housing, social relationships, non-medical issues related to aging,
23	Best practice from other parts of Canada. Success stories.
24	supporting aging parents; prevention of disease
25	caring for elderly persons
26	recorded sessions from lunch & learn etc.
27	research opportunities, event listings
28	Healthy Aging(see answers to # 5.
29	Wellness in the elderly; Management of chronic disease on low incomes

Responses

- 30 mental health, aging, studies,
- 31 polypharmacy, mental competency, dementia/delirium, nutrition, oa, osteoporosis, chronic constipation, etc
- 32 all areas of interest to people in NS affected by aging
- 33 locations of/associations offering sessions/classes of yoga, pilates, chi-gong and such activities
- 34 care receiving by older adults, preparing for baby boomer aging
- 35 Research activities in NS
- 36 Person centred care, Non medical approaches to Dementia care
- 37 local, national, international news/initiatives possibly with commentary (relevance) explained by experts, notifications of local events and conferences that address issues related to aging and working with older populations, links to resources for those working with the elderly
- 38 housing transportation
- 39 mental health promotion, promoting healthy aging
- 40 anything that is current - with an email reminder that something new has been added
- 41 governance section that would link Boards to each other and promote the sharing of information
- 42 anything related to the care of seniors

9. If you were to attend a GANS event, what area of the HRM would be easiest for you to access?

Variable	Responses
# Responses	
1	N/A
2	Down town HRM
3	Halifax
4	Downtown, Bayers Lake, downtown Dartmouth
5	south of halifax-lunenburg area, yarmouth, shelburne or halifax proper
6	Either halifax or Dartmouth; as stated earlier, the odds of getting there are minimal
7	some place with ample parking
8	Down town
9	Bedford
10	GANS is a provincial organization. What services will GANS provide in Yarmouth, Sydney and Truro?
11	Metro area
12	any of them
13	Dartmouth
14	Halifax, Clayton Park, Bayer's Lake
15	Outside the Metro area- ex: at the airport area or a facility like Scotia Nursing Homes (now renamed I

Responses

- believe) where traffic is limited and parking is plentiful.
- 16 The Bayers Lake area or Dartmouth Crossing have accommodations and ample parking and people less comfortable with traffic could avoid the downtown core.
- 17 Any
- 18 Dartmouth
- 19 any area is fine.. good access to convenient (and free) parking would be an asset
- 20 I am okay to drive into the city.
- 21 after 5 pm- anywhere with in 15-30 min
- 22 Dartmouth sports club
- 23 Dartmouth, Fall River, Bedford...Enfield!
- 24 sackville
- 25 close to Dal
- 26 Bedford, Bayers Lake or Dartmouth
- 27 none
- 28 Halifax
- 29 Bedford/ West end of HFX
- 30 Bayers Lake area
- 31 Hfx or Dartmouth
- 32 dartmouth/sackville/truro
- 33 Peninsula
- 34 anywhere
- 35 Truro
- 36 Halifax
- 37 anywhere in Halifax
- 38 Any where
- 39 n/a
- 40 anywhere is fine
- 41 anywhere
- 42 central halifax
- 43 Bayers Lake
- 44 metro Halifax
- 45 outskirts
- 46 Any where with parking - down town is not assessible
- 47 not an issue
- 48 not

10. To continue providing information and opportunities, GANS will be reinstating a small annual membership fee for the 2011/2012 year. Will you be continuing your GANS membership with the reintroduction of a small annual fee (i.e., less than \$60)? [Edit this item](#)

Response	Chart	Frequency	Count
Yes		74%	43
No		26%	15

Total responses: 58

11. Could you please describe what you think are the strengths or benefits of the current programs, information, and opportunities offered by GANS?

Variable	Responses
# Responses	
1	Strong link with CHCE, diverse group
2	easy access to the website
3	knowledge exchange
4	Don't know enough about what is available to comment
5	interdisciplinary, informal
6	With the demographic reports of an aging population on the rise, and the estimated doubling of seniors with dementia in 20-25 years time, the GANS has the opportunity to be proactive and show leadership in this province, and indeed in this country
7	Very little
8	Is GANS role only information?
9	affiliation with other health service organizations, lunch and learns, advocacy for aging issues
10	Sorry, I don't know enough about the organization to comment on this at this point
11	The strength or such an organization (I can't see the end of the question but I'm assuming..) is to share information. Sharing and learning from each other is the benefit to me.
12	There seems to be a wide cross section of participants from across the province and this should help planning programs and targeting information to achieve maximum impact.
13	Increases awareness to all
14	I believe that GANS is a great way to provide information and to network.
15	Sharing Info. Current practice. Relevant. Educational opportunities/ Networking. Consult for other resources.
16	good communcations, interesting topics; otherwise, not equipped to judge
17	I like most of the articles
18	source of various other links to info
19	I am very busy and can not attend all events. I appreciate that the lunch and learns are recorded and posted online.
20	Networking/Education

Responses

- 21 Provision of information for the general public; if strong enough - influencing public policy.
- 22 networking and educational opportunities
- 23 I have not had opportunity to explore these
- 24 not sure
- 25 Important for networking, helping to move gerontological nursing forward
- 26 strength as an advocacy forum in ns where the population is aging and funds are tight
- 27 wish you had provided an undecided option for question 10.
- 28 Good website, seminars, don't know much more
- 29 None
- 30 like the website, but can never remember what the acronym stands for and then can't easily access website
- 31 I see no strengths - GANS does not exist It needs to advocate for change in this province
- 32 I have not accessed them, so I could not comment
- 33 membership list for communicating and identifying change agents and knowledge advocates

12. Could you please describe what you think are the weaknesses or drawbacks with the current programs, information, and opportunities offered by GANS?

[Edit](#)

Variable	Responses
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Responses

- | | |
|----|--|
| 1 | Lack of focus, ownership of a "thing" that drives the organization |
| 2 | not enough workshops or other opportunity for in person education & networking (Some of us do not visit bars/pubs for various reasons) |
| 3 | not as easily accessed outside of Capital Health |
| 4 | ? |
| 5 | only in Halifax which limits rural partnerships |
| 6 | Not all inclusive for people out of metro |
| 7 | just do not see very much information around gans. Maybe more visual and out in the community |
| 8 | lack of a specific focus or niche in which to direct it's efforts. |
| 9 | Perhaps that GANS could improve its communication about what it can offer? |
| 10 | Being only in Capital. The rural aspect is missed. It is a provincially names association but is very centralized. |
| 11 | The greatest weakness is that events such as Lunch & Learn, Networking Tuesdays are really only accessible to those living in or near the Halifax area. Realistically, the bulk of the membership and active members are likely from that area, but it does mean that a number of the resources are not so readily available to those in outlying areas. |
| 12 | Networking only available in Halifax not Truro |

Responses

13	One drawback is that GANS events are held in HRM.
14	meeting always held in halifax
15	a major drawback for me is the lack of email updates. I forget to check the website so I miss out on the information
16	All offered in Halifax?
17	none- great opportunities, just haven't had time lately
18	networking great for business folk, but of less interest to others, maybe
19	?
20	HRM based events, sessions not recorded and available to other areas
21	I would like to see meetings in locations closer to us in the suburbs.
22	Provision of information for the general public; not influencing public policy.
23	all in halifax
24	stagnation of events
25	NOT enough studt focussed events, not advertised enough, I don't like hearing about events after they have passed
26	So far what I've received from GANS has been quite scattered. There doesn't seem to be a focus. If there were interest groups (research might be one topic), it would be easier to justify involvement. There are so many sources of excellent information about aging these days. The GANS needs to offer something unique.
27	Lack of active members
28	info sessions not available via web based programs
29	mostly based in the city
30	seniors issues have limited appeal to many people
31	it's gone from being a respected authoritative body to a well-meaning coffee club.
32	times and/or places that are hard to get to... not sure what is available
33	apathy, lack of numbers, lack of direction, need for old blood to get off the board
34	not aware of any
35	always in the metro area

13. What are your primary areas of interest related to aging?

Variable	Responses
# Responses	
1	Advocacy in relation of long term care
2	Challenges and barriers/social and economic impact of baby boomers aging
3	well being, engaged seniors
4	Behaviour








Responses

- 5 helping families navigate the system and find solutions when in crisis, solutions for aging in place
- 6 anthropology, folk life, health,community, housing, women, rural,nursing
- 7 Dementia & mental health issues; behaviours which may result, and dealing with those; nurses understanding needs to be elevated
- 8 ensuring the senior population has access to reliable and safe health services, recreation and community supports
- 9 all
- 10 Persons with Alzheimer's
- 11 affordable housing, in home care giving, legal issues, i.e. senior fraud, elder abuse, etc.
- 12 healthy aging, relationships as people age, retirement issues
- 13 seniors health, dementia
- 14 dementia/delirium
- 15 Keeping senior's active & healthy
- 16 How to support healthy ageing and how to facilitate motivation and interest by providing the appropriate information through the most valuable venues.
- 17 Dementias and understanding difficult behavior
- 18 falls prevention, rehab
- 19 Disease, dementia & challenging behaviours
- 20 life story and reminiscence
- 21 Aging in Place, Palliative Care and Dementia, Challenging Behaviours and Dementia
- 22 alzheimers, pain
- 23 social issues, housing
- 24 dementia, caregiving
- 25 Polypharmacy; Risks; Support to Caregivers. Respect ,autonomy & choice for people with demen
- 26 workplace
- 27 dementia; housing; estate planning; maintaining good health
- 28 research, resources, I teach continuing care assistants and look for current information
- 29 aging well in the community, LTC
- 30 healthy aging, social activity for the elderly, dementia, regional supports
- 31 Resources including the latest info on Healthy Aging ,Dementias & caregiver resources ,Advocacy against societal prejudices re
- 32 Ensuring the senior years are as happy and healthy as possible and being able to afford it.
- 33 mental health, some policy changes
- 34 as above
- 35 Long-term care placement
- 36 dementia care, abuse, navigating the system, advocacy

Responses

- 37 reseach on health issues and how to be as preventative (as far as disease is cocerned) as possible..i.e.be active (not sickly) and die a quick and peaceful death
- 38 baby boomers and receipt of care
- 39 Research on prevention
- 40 Health issues - I am a volunteer with absolutely no medical experience
- 41 Clients living well in community
- 42 Person centred care for person's with dementia and the elderly
- 43 accessible care, health problem prevention
- 44 dementia, frailty, end-of-life care, health care, policy
- 45 income security
- 46 health assessment and available services
- 47 home, respite & palliative care
- 48 mental/health promotion, chronic disease management, healthy active aging
- 49 aging baby boomers, advances in housing options in NS, support for family caregivers
- 50 dementia, care giving and support
- 51 medications, person centred care

What is your primary professional affiliation?

Response	Chart	Frequency	Count
Health Practitioner		41%	24
Government		5%	3
Student		2%	1
Researcher/Educator		17%	10
Non-Profit		12%	7
Volunteer		7%	4
Other, please specify:		16%	9
		Total responses:	58

Other

Responses

- 1 DHA
- 2 CBRC
- 3 nurse anthropologist

Responses

4 management

5 equipment supplier

6 Care Coordinator

7 caregiver

8 home care

9 Social Worker

Are you:

[Edit](#)

Response	Chart	Frequency	Count
Female		84%	48
Male		16%	9

Total responses: 57

What age group do you belong to?

[Edit](#)

Response	Chart	Frequency	Count
15-24 years		2%	1
25-34 years		7%	4
35-44 years		16%	9
45-54 years		41%	24
55-64 years		24%	14
65-74 years		9%	5
75-84 years		2%	1
85 years and over		0%	0

Total responses: 58

Do you live in the HRM?

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