



**CHARTING THE COURSE FOR CANADA'S
NATIONAL DEMENTIA STRATEGY**

**PRE-BUDGET SUBMISSION
TO THE
HOUSE OF COMMONS STANDING COMMITTEE ON FINANCE**

AUGUST 4, 2017

Alzheimer Society of Canada 2017 Pre-Budget Submission to the Minister of Finance

Alzheimer Society of Canada 2018 Pre-Budget Submission to the Standing Committee on Finance

EXECUTIVE SUMMARY

Dementia is a chronic, progressive health condition that causes damage to the brain. It slowly impairs memory and thinking skills, erodes independence and, eventually, takes life. There is no cure. As of yet, there is no effective way to prevent or even treat the disease. Medications may help manage the symptoms, but none can stop, slow or reverse the destruction of the brain. Today, more than 564,000 Canadians are living with dementia. Approximately 1.1 million Canadians are affected directly or indirectly. In less than 15 years, 937,000 Canadians will be living with dementia – an increase of 66 percent. Each year, 25,000 new dementia cases are diagnosed each year.

The scale of dementia in Canada places tremendous strain on the Canadian economy and the country's productivity. In 2012 alone, dementia cost \$1.2 billion in lost productivity.

Women, in particular, are disproportionately impacted by dementia, both as caregivers and people living with the condition. Today, women represent 65 percent of Canadians who have dementia and are over the age of 65.

In the face of these staggering numbers, Canada has taken significant steps to address the growing challenges of dementia. Bill C-233, the *National Strategy for Alzheimer's Disease and Other Dementias Act*, which received Royal Assent on June 22, 2017, sets Canada on course to become the 30th country with a national dementia strategy.

According to Alzheimer's Disease International (ADI), the umbrella organization of Alzheimer's groups around the world, ***a dementia strategy is the single most powerful tool to transform dementia care and support.***

The experiences of other countries show that coordinated, targeted action at the national level delivers results – but only when supported by adequate funding. During consultations for Budget 2017, the Alzheimer Society of Canada requested \$150 million, over five years, to create and implement Canada's national dementia strategy. This request was supported by the Finance Committee; however, it was not included in the final Budget.

Now, with Parliament standing firmly behind a national dementia strategy, the Alzheimer Society is re-submitting its request for a five-year, \$150 million commitment to fund the strategy and curb the economic impact of dementia.

To support the implementation of a national dementia strategy, the Alzheimer Society has proposed the development of the **Canadian Alzheimer's Disease and Dementia Partnership (CADDP)**. The CADDP is based on three strategic objectives: **research, prevention and living well with dementia**. It also outlines seven key priorities, each one with a projected cost for implementation. Based on a multiple stakeholder model, the CADDP contains measurable targets for monitoring progress of each of the seven priorities.

Our proposal is a practical, scalable, results-oriented plan that would yield solutions aligned with the Government of Canada's priorities.

Budget Recommendation

The Alzheimer Society of Canada is requesting an investment of \$30 million per year over five years, for a total of \$150 million, to support the introduction of a comprehensive and integrated national dementia strategy.

BACKGROUND

The Alzheimer Society is the leading nationwide charity for people living with Alzheimer's disease and other dementias, their caregivers and families. Active across Canada, the Society works closely with its Federation partners to improve the quality of life and care for Canadians living with dementia and fundraises to advance research into the causes, prevention and a cure. Since its inception in 1989, the Alzheimer Society Research Program has invested more than \$50 million in Canadian research, in quality-of-life and biomedical fields.

For over 10 years, the Alzheimer Society has advocated for a national dementia strategy. With the passage of Bill C-233, the *National Strategy for Alzheimer's Disease and Other Dementias Act.*, we are at a pivotal and transformative moment in how we tackle dementia and ensure that Canadians impacted by this condition receive the care and support they need. That's why we urge the Government of Canada to invest in the strategy with dedicated and sustainable funding.

To guide Canada's first strategy, the Alzheimer Society calls for the creation of a Canadian Alzheimer's Disease and Dementia Partnership (CADDP).

The Canadian Alzheimer's Disease and Dementia Partnership

The Alzheimer Society of Canada is proposing a pan-Canadian solution to curb the personal, societal and economic toll of Alzheimer's disease and other dementias. In their November 2016 report, the Standing Senate Committee on Social Affairs, Science, and Technology recommended that the CADDP guide Canada's national dementia strategy.

Operating under an independent, standalone model of governance, the CADDP's mandate would be to lead, coordinate and facilitate government, industry, health-care providers, national health stakeholders, community groups, researchers, caregivers and people with dementia working together to develop and implement an integrated, comprehensive national dementia strategy.

The strategy would be based on three strategic objectives and seven priorities, assessed and measured individually against key performance indicators. Some of these objectives address the intensive role of the caregiver and include an action plan to meet the special needs of Indigenous communities.

The total projected cost of this project would be \$30 million annually over five years for a total of \$150 million.

STRATEGIC OBJECTIVES

Research

Priority 1

- Accelerate investment in all areas of dementia research, including bio-medical, clinical, social, health services, and policy. **Projected cost: \$40 million over five years**

Priority 2

- Develop evidence-based practice standards of care in chronic disease prevention and management. **Projected cost: \$10 million over five years**

Outcomes

- ✓ Co-ordinating dementia research investments nationally and internationally will maximize research efforts toward a cure and improve quality of life for people with dementia.
- ✓ Canadians will have access to equitable standards of care and services, regardless of where they live.

Prevention

Priority 3

- Provide a surveillance system to inform health policy and service planning, foster evidence-based strategies for prevention and management, and support research. **Projected cost: \$30 million over five years**

Priority 4

- Promote broader public awareness of Alzheimer's disease and other dementias, and combat stigma. **Projected cost: \$25 million over five years**

Outcomes

- ✓ Early interventions will help Canadians plan for their future health, social and end-of-life care needs.
- ✓ Physicians will be able to screen and detect dementia earlier.
- ✓ Canadians will be better informed about the condition and what they can do to support those in their community or in their workplace who have dementia.
- ✓ Greater public awareness will help reduce stigma.

LIVING WELL WITH DEMENTIA

Priority 5

- Recognise and support the important role of family caregivers by providing them with tax benefits. **Projected cost: \$20 million over five years**

Priority 6

- Increase dementia-specific training for health-care providers with an emphasis on prevention, early detection and early intervention. **Projected cost: \$5 million over five years**

3

Alzheimer Society of Canada 2017 Pre-Budget Submission to the Minister of Finance

Priority 7

- Ensure that persons with dementia, including First Nations, Inuit, and Métis are involved in all aspects of the Partnership. **Projected cost: \$20 million over five years**

Outcomes

- ✓ Caregivers who must leave paid employment or curtail self-employed work will have access to job protection provisions and income support.
- ✓ Physicians and health-care providers will be able to detect symptoms and diagnosis dementia earlier.
- ✓ Physicians and health-care providers will have access to dementia-specific resources, educational materials, and training opportunities.
- ✓ Canadians will experience person-centred dementia care that is respectful and responsive to their needs.

It will be critical to ensure that Indigenous people in remote communities have access to early diagnosis and culturally sensitive care, support and information.

Alignment with government priorities

Dedicated and sustainable funding for Canada's national dementia strategy would support the government's priorities in several ways:

Helping Canadians be more productive

According to the National Population Health Study of Neurological Conditions published by the Public Health Agency of Canada, the combined health-care system costs and out-of-pocket caregiver costs for people with dementia amounted to \$10.4 billion in 2016. By 2031, this figure is expected to increase by 60 per cent, to \$16.6 billion.

In 2011, 55.5 million working days were lost due to working-age adults taking time off to care for an individual with a cognitive impairment. In 2012, 390,000 Canadians were forced to leave their jobs to provide care, with a further 2.2 million either taking a leave or reducing their hours.

A coordinated, national strategy to address dementia and support caregivers will help Canadians continue to contribute to the economy, without struggling to care for family members.

Bridging the gender gap

Dementia disproportionately affects women. Approximately two out of every three Canadians living with dementia are female. Adding to the gender divide, women are far more likely to take on the role of caregiver, either removing them from the workforce or severely limiting their contributions and advancement.

While dementia is not restricted to any one demographic, investments in dementia research and care will greatly benefit women – aligning well with the Gender Statement in Budget 2017.

Alzheimer Society of Canada 2017 Pre-Budget Submission to the Minister of Finance

Science and Innovation

The Alzheimer Society supports the government's commitment to science and innovation, and is delighted that action is being taken to consult on new ideas and approaches. Canada has access to some of the best research minds in the world and we need to be doing more to take advantage of that, particularly when it comes to Alzheimer's disease and dementia research.

The United States and United Kingdom have recently made significant investments in research. In July 2017, the Appropriations Committee of the U.S. House of Representatives approved an additional \$400 million increase for Alzheimer's and dementia research for the fiscal year 2018 budget.

In the U.K., the government has doubled funding in Alzheimer's research to £66 million (approximately C\$107.5 million) since 2010.

In contrast, Canada spent \$41 million on dementia research in 2014-15.

There is neither a cure or medicines that can significantly treat dementia. Canada has an opportunity to position itself as a leader in this area, while improving the lives of people with dementia and their caregivers. By further investing into development of a dementia research hub through the Canadian Consortium for Neurodegeneration in Aging, Canada will attract future funding partnerships, world-class researchers, create jobs and increase its global economic competitiveness.

Ensuring Canada meets its international obligations

According to ADI, 29 nations worldwide have developed and funded comprehensive national Alzheimer plans, including Australia, Japan, The Netherlands, France, United Kingdom, Luxembourg and Switzerland. By becoming the 30th country to present its plan, Canada will have an opportunity for leadership on the global stage.

In May 2017, Canada signed onto the World Health Organization's global action plan on dementia. One of the key messages in the plan is that dementia leads to increased costs for governments and a loss in productivity for economies. Canada can achieve many of its obligations under the plan through its investments in a national dementia strategy.

CONCLUSION

With the passage of Bill C-233, Canada has taken a significant step towards a national dementia strategy. The Canadian Alzheimer's Disease and Dementia Partnership as well as the Senate report sets out a framework for Canada's strategy. This framework incorporates government priorities to tackle both the human impact and economic costs of dementia.

The Alzheimer Society of Canada is respectfully requesting an investment of \$30 million per year over five years, for a total of \$150 million, to create and fund a national dementia strategy.

We look forward to working with the Government of Canada on this timely and critical policy initiative.

Alzheimer Society of Canada 2017 Pre-Budget Submission to the Minister of Finance

Cordially yours,

Pauline Tardif
Chief Executive Officer
Alzheimer Society of Canada
416.847.2952
ptardif@alzheimer.ca
www.alzheimer.ca

References

Allen, Kate; Amy Dempsey; and Jennifer Yang. Toronto Star.

<https://www.thestar.com/news/world/2015/11/21/the-growing-impact-of-dementia-are-we-ready.html>

Alzheimer's Disease International. Dementia statistics. <https://www.alz.co.uk/research/statistics>

Alzheimer Society of Canada. *Prevalence and Monetary Costs of Dementia in Canada*. 2015.

http://www.alzheimer.ca/~media/Files/national/Statistics/PrevalenceandCostsofDementia_EN.pdf

Public Health Agency of Canada. Mapping Connections: An Understanding of Neurological Conditions in Canada – The National Population Health Study of Neurological Conditions, September 2014, Ottawa.

<http://www.phac-aspc.gc.ca/publicat/cd-mc/mc-ec/assets/pdf/mc-ec-eng.pdf>

Senate of Canada. *Dementia in Canada: A National Strategy for Dementia-Friendly Communities*.

November 2016. www.senate-senat.ca/social.asp

World Health Organization. *Global Action Plan on the Public Health Response to Dementia, 2017-2025*.

May 2017. http://apps.who.int/gb/ebwha/pdf_files/EB140/B140_28-en.pdf?ua=1