

Submission to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA):

“Advancing Inclusion and Quality of Life for Canadian Seniors”

Submitted by the Coalition for Healthy Aging in Manitoba

October 12, 2017

INTRODUCTION

The Coalition for Healthy Aging in Manitoba (CHAM) would like to congratulate the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA) on undertaking the study “Advancing Inclusion and Quality of Life for Canadian Seniors”. The three themes of the report (housing, income security and quality of life), well reflect areas of work that need to be undertaken in Canada and around the world.

BACKGROUND: CHAM, and the WHO Report and Strategy/Action Plan

As the Standing Committee will be well aware, maximizing the quality of life of seniors must be an absolute priority for all Canadians. For this reason, CHAM (details in Appendix 1) was created. We are a diverse group of university faculty, physicians, government, and older persons who share the common goal of maximizing quality of life for seniors across Manitoba.

Our group came together with this vision following the release of the World Health Organization’s [World Report on Ageing and Health](#) (2015), and the accompanying [Global Strategy and Action Plan on Ageing and Health](#) (see Appendix 2 for a list of the Strategic Objectives). These two documents align well with the three themes that HUMA has identified. The World Health Organization (WHO) report and strategy focus on five areas:

- committing to action on healthy aging
- aligning health systems to older populations;
- developing systems of long term care;
- creating age friendly environments; and
- improving measurement, monitoring, and understanding.

CHAM has used the WHO report and strategy over the past year to create a framework for engagement with stakeholders in Manitoba on improving the quality of life for older adults. Most recently, we hosted a workshop in May of 2017 in conjunction with the University of Manitoba Centre on Aging’s Annual Spring Research Symposium to discuss actions in Manitoba to advance the WHO strategy. A highly engaged group of more than 90 older people, researchers, students, and practitioners spent the day strategizing on how best to advance the WHO strategy. The workshop was a great success, and included a presentation from the Honourable Eileen Clarke, a provincial cabinet Minister.

What we heard from the workshop participants will be what we use to drive our next steps, including further consultations across the province.

First and foremost, the participants strongly supported the objectives of the strategy, and were keen to see governments and non-governmental agencies embrace its vision.

The World Health Organization envisions “a world in which everyone can live a long and healthy life”. Their definition of health is “the process of developing and maintaining the functional ability that enables wellbeing in older age”. This emphasis on functional ability represents an important shift away from curative medical care towards increasing quality of life. The WHO further stresses that “...functional ability is determined by the person’s intrinsic capacity (i.e., combination of all the individual’s physical and mental capacities), relevant environmental factors, and the interaction between the two”.

The ***Global Strategy and Action Plan*** sets out objectives related to aging that maximize functional ability, and hence, have effects on both intrinsic capacity as well as the external physical and social environments that older adults live in. Thus, there is a strong link between the study that HUMA is undertaking related to housing, income security, and quality of life/wellness (including social inclusion and the social determinants of health). Housing and income security are both key social determinants of health, and are highly linked to quality of life. Additional environmental factors that affect older adults in particular, include: transportation, social protection, streets and parks, products and technologies, relationships with others, as well as cultural and social attitudes and values.

Canada, as a country, endorsed the ***Global Strategy and Action Plan*** at the World Health Assembly in May 2016. By endorsing the strategy and plan, Canada committed to:

1. “establish national frameworks towards healthy aging;
2. strengthen national capacities to formulate evidence-based policy; and
3. combat ageism.”

2017 CHAM Workshop

We believe that the ideas identified at our May 2017 workshop can benefit the work HUMA is undertaking to advance the inclusion and quality of life of Canada's older adults. Below is a brief synopsis of the group discussions, broken down into sub-groupings which follow the WHO report focus areas.

a) Aligning health systems and developing systems of long term care

We heard strong support for the objectives of the WHO strategy. There was strong support for health services close to the living place of older people. As well, participants noted the need for services which were culturally and linguistically appropriate for the diverse population of Manitoba. They stressed the need for increased knowledge about the care needs of older people among all care providers. There was support for the current long-term care system, but participants noted the need for more options and flexibility in the system. There were no recommendations from the WHO report which were not endorsed by participants.

b) Age friendly environments

Manitoba has many actively engaged Age-Friendly Community Committees that are striving to improve the age-friendliness of their communities. These committees use the specific needs and preferences of local older people as the starting point for taking multi-sectoral action in their communities. During the workshop, the participants heard a plethora of suggestions on how to improve communities in Manitoba, often building on success stories. For example, more housing options, including inter-generational housing, are needed. Specific communities and organizations provided examples of a variety of housing options across the continuum, from independent living to personal care homes. Smart homes or smart tools within a house could better enable older people to age in place. Champions were recognized as imperative for individual communities to become more age-friendly, with brainstorming identifying important characteristics of champions and how to develop or foster champions. The working group is also looking to expand the age-friendly initiative beyond municipal communities to other environments or groups that could either assist with building and maintaining intrinsic capacity or by providing supports that enhance functional ability across a spectrum of intrinsic capacities.

c) Measuring and monitoring

The need for global objectives and research questions that will foster understanding and monitoring for Manitoba was discussed, as well as sources of data that are already available to advance the quality of life for older adults. Existing national (e.g., Canadian Longitudinal Study on Aging, Canadian Community Health Survey) and provincial (e.g.,

Manitoba Centre for Health Policy) datasets will be important for addressing many questions that come from the World Health Organization research priorities on aging and health, and should be continued in the long term.

The most important conclusion from the workshop (and really of all of CHAM's work over the past year) is the numerous benefits of, and synergies created by, using the WHO framework to drive the work that needs to occur locally, nationally and internationally to improve the quality of life of older adults.

Going forward

The Centre on Aging, in conjunction with the Canadian Association on Gerontology, has been successful in obtaining funding from the Canadian Institutes of Health Research's Institute of Aging for a pre-conference workshop to be held in conjunction with the 2017 Canadian Association on Gerontology Annual Scientific and Educational Meeting. The workshop will provide an opportunity for conference delegates and community members to strategize on how to advance the WHO research priorities. Workshop attendees will: 1) hear about existing Canadian data sources, 2) prioritize research questions from a national perspective, and 3) discuss the feasibility and importance of these questions for Canada.

Recommendations

- 1) We strongly encourage your Committee to embed the WHO framework in future reports, recommendations, and legislation the committee and government may produce/consider. The government of Canada joined nations around the world in endorsing the ***Global Strategy and Action Plan on Ageing and Health*** at the World Health Assembly in May of 2016. With this endorsement, they committed to a decade of healthy aging from 2020 to 2030, so it would be advisable to use its recommendations in formulating a national strategy on aging.
- 2) Thought should be given to the language which will be used for this strategy in order to frame it for maximum success. For this reason, we would suggest a different name. A National Strategy on Aging Well (or something like this using “Aging” instead of “Seniors”) should be something that everyone can get behind, because everyone ages. Using the term “Seniors” has many issues. For one, this term, unfortunately, has been shown by research to have connotations of incompetence ([Frameworks Institute, 2017](#)). Also, by naming a group, it has the potential of “othering” older people, and can set up lower acceptance of policies, as well as create generational conflict.
- 3) The narrative of why this strategy is needed should take a more positive direction. Starting with demographic doom and gloom allows people to take a fatalistic approach and also perpetuates ageist attitudes, which is noticeably different from the narrative of the WHO’s positive perspective on the numerous benefits older adults provide, and could better provide if supported to do so. Societies all around the world, including Canada, have been very successful in achieving longer lives, which has been termed the **longevity dividend**. A Strategy on Aging Well should capitalize on this longevity dividend, and look at the funding of programs as investments instead of costs or burdens.
- 4) Mechanisms to combat ageism should be an important aspect of the national strategy. Ageist attitudes on the part of policy makers, service providers, the general public, and older people themselves are destructive and could limit any positive effects that a national strategy might have.

Again, we would like to congratulate HUMA for the work it is doing in this critical area of national policy.

If our group is able to further assist this study in any way, please let us know. There can be no more important work in Canada than maximizing the quality of life of older people.

Respectfully submitted by:

Michelle Porter, PhD,

Director of the Centre on Aging, and CHAM co-chair, on behalf of the Coalition for Healthy Aging in Manitoba

Appendix 1: Terms of Reference for the Coalition for Healthy Aging in Manitoba (CHAM)

CHAM is a newly formed (2016) coalition with the following **vision**:

Community, academic and government partners working together to promote collaboration and synergies that support Healthy Aging in Manitoba.

Its lead working group and sub-working groups collaborate for CHAM's mission:

- Increase awareness and promote multi-sector action in Manitoba on Healthy Aging using the following documents as a foundation for discussions:
 - **Health Status of Manitobans 2015: Healthy Environments, Healthy People** -Chief Provincial Public Health Officer's Report
 - **World Report on Health and Ageing** - World Health Organization (WHO)
 - **Global Strategy and Action Plan on Ageing and Health** - WHO World Health Assembly
- Support collaborative work on each of the five WHO strategic objectives:
 1. Commitment to action on healthy aging
 2. Developing age-friendly environments
 3. Aligning health systems to the needs of older populations
 4. Developing systems for providing long term care
 5. Improving monitoring, measurement and research on healthy aging
- Bring together key actors to provide a forum for strategic discussions about Healthy Aging in Manitoba. This will include Older Manitobans, Health Care Providers and Health System Partners, Subject Matter Experts and Researchers, Senior Serving Organizations, and other community groups/members.

Appendix 2: Strategic Objectives from the *Global Strategy and Action Plan on Ageing and Health*

STRATEGIC OBJECTIVE 1: COMMITMENT TO ACTION ON HEALTHY AGEING IN EVERY COUNTRY

Strategic objective 1.1: Establish national frameworks for action on Healthy Ageing

Strategic objective 1.2: Strengthen national capacities to formulate evidence-based policy

Strategic objective 1.3: Combat ageism and transform understanding of ageing and health

STRATEGIC OBJECTIVE 2: DEVELOPING AGE-FRIENDLY ENVIRONMENTS

Strategic objective 2.1: Foster older people's autonomy

Strategic objective 2.2: Enable older people's engagement

Strategic objective 2.3: Promote multisectoral action

STRATEGIC OBJECTIVE 3: ALIGNING HEALTH SYSTEMS TO THE NEEDS OF OLDER POPULATIONS

Strategic objective 3.1: Orient health systems around intrinsic capacity and functional ability

Strategic objective 3.2: Develop and ensure affordable access to quality older person-centred and integrated clinical care

Strategic objective 3.3: Ensure a sustainable and appropriately trained, deployed and managed health workforce

STRATEGIC OBJECTIVE 4: DEVELOPING SUSTAINABLE AND EQUITABLE SYSTEMS FOR LONG-TERM CARE

Strategic objective 4.1: Establish and continually improve a sustainable and equitable long-term-care system

Strategic objective 4.2: Build workforce capacity and support caregivers

Strategic objective 4.3: Ensure the quality of person-centred and integrated long-term care

STRATEGIC OBJECTIVE 5: IMPROVING MEASUREMENT, MONITORING AND RESEARCH FOR HEALTHY AGEING

Agree on metrics, measures, and analytical approaches for healthy aging

Improve understanding of the health status and needs of older populations

Increase understanding of healthy ageing trajectories and what can be done to improve them