

Written Submission for the Pre-budget  
Consultations in Advance of the Upcoming  
Federal Budget

July 29, 2020

By: Home Instead Senior Care



## **Recommendations**

**Recommendation 1:** That the government support a United Nations (UN) Convention on the Rights of all Older Persons.

**Recommendation 2:** That the government commit to the establishment of an advisory group of thought leaders to challenge conventional approaches aging.

**Recommendation 3:** That the government provide funding in the amount of \$5 million per year for five years in order to spread the Compassion Care Community initiative.

**Recommendation 4:** That the government launch a national conversation on aging well.

**Recommendation 5:** That the government work with experts to create financial options to ensure that older Canadians are supported if they outlive their savings.

## Discussion

This submission focuses on the future of aging in Canada. With the demographic shift to an older population, and the impact of COVID on that group, restarting the economy post COVID-19 must include strategies to address our aging future.

COVID highlighted the plight of older people because 1) they were more susceptible to the disease; and, 2) they were more likely to die from the disease – those over the age of 60 account for 95% of COVID-19 deaths<sup>i</sup>.

COVID put seniors on the “front page” for all the wrong reasons. However, it provides an opportunity for the federal government to provide leadership in addressing the aging population - one of the biggest social challenges of our time. The dilemma facing government is to ensure fiscal sustainability, a healthier aging process, and a new social contract, while caring for a significantly larger older population. And with the number of people in Canada aged 65 and older expected to grow by 68% over the next 20 years<sup>ii</sup>, the time to act is now.

## International Commitment

Recommendation 1: That the government support a United Nations (UN) Convention on the Rights of all Older Persons.

An unassailable and fundamental starting point is to support a UN Convention on the Rights of the Older Person. Such a Convention would establish a universal position that ageism is morally and legally unacceptable and oblige member states to adopt non-discriminatory laws. A Convention that specifically references older persons would have positive impacts to their quality of life; it would provide legally binding protection of older persons rights under international law; it would improve accountability for violations of older people’s rights; and, it would provide a framework for policies on older persons, encouraging the collection of information on older persons and helping governments to allocate resources more fairly. It would encourage greater development of programs benefiting older persons.

Leadership is vital to take the bold step of recommending a UN Convention. As with other such special UN Conventions – for Women, and Children, for example, a Convention on the Rights of the Older Person will be an important and effective tool for influencing change.

Canada’s support for the UN Convention will do much to restore Canadian pride, and most importantly will set a path to eliminate the stigma of aging and create a better future for all citizens.

## Aging Agenda

Recommendation 2: That the government commit to the establishment of an advisory group of thought leaders to challenge conventional approaches to aging.

The government must appoint an advisory group of thought leaders to work primarily on the first two pillars of the National Seniors Strategy<sup>iii</sup>: 1) Independent Productive and Engaged Citizens; and, 2) Healthy and Active Lives. These two pillars address the priorities of independence and wellbeing. The Advisory Group must be prepared and capable of challenging the status quo and shattering conventional thinking.

Creative thinking is needed to address the 21<sup>st</sup> century aging issue. Accordingly, the advisory group must represent key sectors to inspire and lead away from complacency while recognizing the existing pressures that will worsen without transformational change. For example:

- Business growth in the face of a shrinking younger work force, a significant increase in older talent and an increase in marketplace demand.
- Academia preparing future generations to tackle an aging world; and addressing workplace automation and reskilling of those in their 50s, 60s, and 70s.
- Healthcare balancing the need for increasing demand for care with rising costs of care and shortages of providers.
- The social sector preparing for a massive spike in demand for aging services with volunteer shortages and fewer donor contributions.
- Employers learning how to accommodate a multigenerational workforce.
- Individuals needing to plan for, fund and manage their own aging journey.<sup>iv</sup>

Commitment to the future of aging will require new actions to change the narrative on aging. These include:

- Continuously leveraging clear and relevant data on the 60+ cohort to better understand the varied needs of this demographic group to positively invest in the social determinants and assets.
- Investing in vigorous innovation that improves aging experiences and recognizes that meaningful life exists beyond age 65.
- Insisting on productive collaboration across all sectors.

Good policy for older people is good policy for all Canadians.

## Disconnection

Recommendation 3: That the government provide funding in the amount of \$5 million per year for five years in order to spread the Compassion Care Community<sup>v</sup> initiative.

There is growing awareness of the challenges and poor health outcomes related to isolation of people who are vulnerable. The issue has been exacerbated by the on-going COVID-19 pandemic, and there is an increasingly urgent need for new models to help people who are disconnected.<sup>i</sup> Lack of social connection is widely considered to be the next major public health crisis.<sup>vi</sup>

50% of factors that lead to poor health and high health care use in individuals and groups are caused by the economic and social conditions in which people live.<sup>vii</sup> Today, many people feel disconnected despite the availability of services. There are a growing number of seniors and family caregivers who are unable to access physical, mental/emotional and social care that addresses individualized needs in an effective and sustainable way.

Addressing this gap through community action, research shows that people who are connected to their peers and community are happier, enjoy better health, use fewer health services and recover faster when they do get sick. People who carry out meaningful roles in supportive social contexts live longer, get sick less often, suffer less disability, and recover faster from life-threatening events.<sup>viii</sup> Both social context and social connection have a strong underlying link to health promoting behaviour.

The made-in-Canada Compassion Care Community (CCC) initiative provides a ready-made solution to address these challenges, leveraging community capacity through volunteerism and better utilization of providers. CCC is unique in that it addresses the needs of vulnerable persons and families from healthy aging to end of life and from system navigation to active interventions; can measure quality within and across care sectors; promotes age-friendly community development and social innovation; and provides a pathway for long-term population level surveillance and quality of life research concurrently and at nominal cost.

CCC is an evidence-based model and set of tools to improve the quality of life, health and wellness of many vulnerable and aging populations by identifying upstream and downstream social and other risks to physical and mental health and addressing them from both within and outside government systems.

The model has been tested in palliative care, home care, community support, residential care, public and seniors' housing, family medicine, and mental health organizations, both independently and as part of an "all of community" approach. Every implementation instance is driven by local and population needs and priorities.

CCC has proven itself as an efficient, flexible and scalable model that measurably improves quality of life for individuals and families. The federal government can enable communities to build informal capacity for care through funding of the initiative over the next five years.

## Income Security

Recommendation 4: That the government launch a national conversation on aging well.

Recommendation 5: That the government work with experts to create financial options to ensure that older Canadians are supported if they outlive their savings.

In addition to the increasing prevalence of older people in Canada, Canadians are living longer, with centenarians representing the fastest growing cohort in Canada<sup>ix</sup>. This has implications for our retirement income system, for government, for the retirement and pension sector, and for Canadians themselves who increasingly report fears about inadequate savings for retirements, outliving their money<sup>x</sup> and affording supportive services to remain at home.

Aging and having the means to age with dignity is both an economic and social issue. The government must continue to draw on the expertise of pension experts, including from within the National Institute of Ageing (NIA), to improve retirement income options and financial support of older adults who outlive their savings.

The financial planning work must be coupled with a national conversation about individual longevity and rethinking the approach to an increased lifespan. Too many people in Canada assume that they will be fine. They believe that long-term care is funded by government and/or that government will cover their needs as they age. The reality is that it takes a community – the collaboration of

<sup>i</sup> "Disconnection" represents a family of problems including real or perceived disconnection from people (isolation, loneliness), disconnection from purpose in life (low life satisfaction), and disconnection from community (low sense of community belonging or perceived availability of support).  
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the public, social and private sectors. It is important to talk about and increase awareness of the scope of each sector so that individuals and families can plan for their aging.

People want to be in a position to choose the terms in which they live. This requires planning, consulting with family and considering how they want to use their money. They need to consider the financial resources that they will need beyond the available government supports.

## CONCLUSION

COVID has shone a light on seniors and the notion of aging. It is imperative that government leads a change in social norms and attitudes toward this natural phenomenon. Aging is not strictly about old people; it's about *all* people. Aging **unites** us. Government must undertake to inspire and lead a complacent mindset toward better aging experiences for all Canadians. Let that be the COVID legacy.

### For more information, please contact:

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Home Instead Senior Care is the world's trusted provider of in-home care services for seniors. With operations in over a dozen countries worldwide, Home Instead has a vision to *change the face of aging* and expand the world's capacity to care. Across Canada, Home Instead offers services in British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec, Prince Edward Island, and Nova Scotia.

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## ENDNOTES

<sup>i</sup> Government of Canada. Department of Finance. Economic and Fiscal Snapshot. Retrieved on July 14 2020 from

<https://www.canada.ca/en/department-finance/services/publications/economic-fiscal-snapshot/gba-summary-economic-response-plan.html>

<sup>ii</sup> CIHI Infographic: Canada's seniors population outlook: Uncharted territory. Retrieved on July 6, 2020 from <https://www.cihi.ca/en/infographic-canadas-seniors-population-outlook-uncharted-territory>

<sup>iii</sup> Sinha, S.K., Griffin, B., Ringer, T., Reppas-Rindlisbacher, C., Stewart, E., Wong, I., Callan, S., Anderson, G. (2016). An Evidence-Informed National Seniors Strategy for Canada - 2nd edition. Toronto, ON: Alliance for a National Seniors Strategy. Retrieved on July 6, 2020 from <http://nationalseniorsstrategy.ca>

<sup>iv</sup> Huber, J. (2019) Remarks made at the Silver Economy. Recording, Day 1 retrieved from <https://silvereconomyforum.eu>

<sup>v</sup> See <https://compassionatecarecommunity.com>

<sup>vi</sup> Connected Communities Report", 2017 Annual Report – Chief Medical Officer of Ontario, released March 2019.

<sup>vii</sup> Braveman, P. and Gottlieb, L., 2014. The social determinants of health: it's time to consider the causes of the causes. Public health reports, 129(1\_suppl2), pp.19-31.

<sup>viii</sup> Holt-Lunstad, J., Smith, T.B. & Layton, J.B. (2010). "Social Relationships and Mortality Risk: A Meta-analytic Review". PLoS Med, 7 (7), [org/10.1371/journal.pmed.1000316](https://doi.org/10.1371/journal.pmed.1000316)

<sup>ix</sup> Ambachtsheer, K., Nicin, M. (2020). Improving Canada's Retirement Income System: A Discussion Paper on Setting Priorities. National Institute on Ageing, Ryerson University. P3

<sup>x</sup> Ipsos. (2019, May). Canadian are Nervous About the Health System. Retrieved from: <https://www.cma.ca/sites/default/files/pdf/news-media/Canadians-are-Nervous-About-the-Future-of-the-Health-System-E.pdf>