Introduction

Since March 2020, COVID-19 has been an unprecedented challenge for the people of Canada. The role of timely, high-quality data has never been more important as a strategic asset for decision makers than during this public-health emergency. In response, Statistics Canada has collaborated with all orders of government, civil-society groups and the private sector to provide data-driven insights that have served as critical decision-support tools to inform pandemic response.

As Canada moves from pandemic response to recovery, Statistics Canada is pleased to contribute to this committee’s study of the financial, social and health impacts of COVID-19 on seniors. Although COVID-19 has affected all Canadians, seniors are particularly vulnerable to its health impacts, which include a higher risk of complications as well as death.

Deaths from COVID-19

Excess mortality occurs when there are more than the typical number of deaths during a given period of time. It is measured as the difference between the number of observed deaths and the number of expected deaths over a certain period of time. There are a number of ways to measure excess mortality, and each has its strengths and weaknesses. The method chosen by Statistics Canada, which has also been adopted by several other countries, is adapted from an infectious disease detection algorithm that has been used for mortality surveillance in recent years\(^1\).

Canada has counted significantly more deaths than expected during the pandemic, and seniors aged 65 and over have accounted for the disproportionate share of these deaths. Between March 2020 and the beginning of February 2021, seniors accounted for 7 in 10 excess deaths,

and 94% of the deaths were attributed to COVID-19.² The majority of Canadians who died from COVID-19 were residents of long-term care homes.³

Of the 15,300 people who died of COVID-19 between March and December 2020, nearly 9 in 10 had at least one other health condition or complication or another cause listed on the death certificate. Dementia or Alzheimer’s was listed on the death certificate of 36% of COVID-19 death certificates and was particularly common among those age 65 or older.⁴

Other common COVID-19 comorbidities (i.e., the simultaneous presence of two or more diseases or medical conditions in a patient) reported on death certificates included pre-existing cardiovascular and respiratory conditions such as hypertensive diseases, ischemic heart disease and chronic lower respiratory diseases. Since 94% of Canadians who died of COVID-19 in 2020

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were older than 65, the overall trends for common COVID-19 comorbidities are largely driven by age.\textsuperscript{5}

\begin{figure}
\centering
\includegraphics[width=\textwidth]{frequency_chronic_conditions.png}
\caption{Frequency of chronic conditions reported on death certificates where death is due to COVID-19.}
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Note(s): Comorbidities for deaths occurring between March 1, 2020, and December 31, 2020, where COVID-19 is the underlying cause of death. Source(s): Canadian Vital Statistics - Death Database (2020)

Since the start of the pandemic, individuals older than 84 have experienced a disproportionate share of both excess deaths and COVID-19-caused deaths. From March 2020 to early March 2021, this group accounted for about a third of the excess mortality and more than half of the deaths caused by COVID-19.

Increased COVID-19 deaths may be attributable to the disease taking a heavy toll on people who may have been at a high risk of dying over this period, regardless of the pandemic. In addition, the indirect effects of the pandemic, possibly resulting in decreases in the number of deaths attributable to other causes, could also be at play.

Social impacts

For Canadian seniors, the impacts of COVID-19 were not limited to higher mortality risks. The first months of the pandemic, when little was known about the SARS-CoV-2 virus that causes COVID-19, were particularly stressful.

\textsuperscript{5} Ibid.
In April 2020, nearly 6 in 10 seniors who responded to a crowdsourcing survey reported being very or extremely concerned about their own health—more than twice the proportion reported in younger age groups. Maintaining social ties was also a concern for many seniors, with more than one-third of those aged 75 and older reporting this issue as a concern.\(^6\)

![Proportion of crowdsourcing participants who were very or extremely worried about certain COVID-19 related issues, by age group](https://www150.statcan.gc.ca/n1/daily-quotidien/200423/dq200423a-eng.htm)

Perhaps out of greater concern about their health, seniors generally took more precautions and made more changes to their habits as a result of the pandemic. For example, they were less likely than younger Canadians to report going to a grocery store or a drugstore. They were also more likely to use delivery services to get their food or medication.

Seniors continued to maintain these precautions even after public-health restrictions were eased several months after lockdown during the first wave of the pandemic. By June 2020, seniors were more likely to wear masks in public space, avoid crowds and large gatherings and keep their distances from others.\(^7\)

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By last fall, more than four-fifths of Canadians aged 65 and older living in households said they were somewhat or very willing to get the COVID-19 vaccine, compared to three-quarters of Canadians aged 12 to 64. That trend persisted well into early 2021, when 88% of seniors aged 65 and older indicated that they were somewhat or very likely to be vaccinated compared to 82% of Canadians aged 12 and older.\(^8\)

Seniors were also more willing to use a contact-tracing application than younger Canadians, even though some of those seniors may have more limited access to digital technologies. Among younger Canadians, only 16% said they would be "very likely" to use a contact-tracing application, compared to 33% of all seniors.\(^9\)

**Mental-health impacts**

Although seniors were the most at risk of developing severe complications from COVID-19, their mental health generally remained better than that of Canadians in other age groups. By the winter of 2021, when much of the country was experiencing a third wave of COVID-19, 31% of seniors aged 65 and older reported that their mental health was much or somewhat worse than before the pandemic, compared to 42% of Canadians under 65.\(^{10}\)

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The prevalence of positive screens for major depressive disorder, generalized anxiety disorder, and probable post-traumatic stress disorder was three times lower among seniors than among young adults.\(^\text{11}\)

Furthermore, in the winter of 2021, seniors were the most likely to report very good or excellent mental health.\(^\text{12}\)

![Graph showing mental health by age group]

> In January to February 2021, seniors were the most likely to report very good or excellent mental health.

Source: Canadian Community Health Survey, January to February 2021, Canada (excluding territories)

However, these results don’t tell the full picture of the mental-health issues reported by many seniors throughout the pandemic.

The percentage of seniors aged 65 and older reporting that their mental-health status was somewhat worse or much worse than before the pandemic has been increasing steadily over the course of the pandemic. This trend was also observed among younger Canadians, although they remained more likely than seniors to report that their mental health was worse than before the start of the pandemic.\(^\text{13}\)

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\(^\text{11}\) Ibid.
\(^\text{13}\) Statistics Canada. (2021) Table 13-10-0806-01 Canadians health and COVID-19, by age and gender
Economic impacts

Given that most seniors in Canada are retired, the pandemic appears to have impacted their employment and financial situation less dramatically than Canadians in other age groups.

For example, in May 2020, older Canadians were much less likely than younger Canadians to report that COVID-19 would have an impact on their job or finances. Among Canadians aged 35 to 44, 32% said the pandemic would have a moderate or major impact on their ability to meet their financial obligations, compared with 14% of Canadians aged 65 and older.\(^\text{14}\)

More recently, in May 2021, seniors aged 65 and over were least likely to live in households that reported it was “difficult” or “very difficult” to meet basic household financial commitments, compared to all younger age groups.\(^\text{15}\)

Conclusion

The information needed to assess the full impact of the pandemic on the income and financial situation of seniors is not yet available. However, an in-depth examination of this issue will be conducted using 2021 Census data, which will also enable more detailed results to be


disaggregated according to different groups of seniors. More generally, the 2021 Census will show how the pandemic has profoundly altered population growth, sources of income, commuting patterns and many other aspects of our lives. Finally, other Statistics Canada sources of information such as the Canadian Community Health Survey, Cancer Statistics and Vital Statistics (deaths) will be leveraged to better understand longer-term physical and mental health consequences of the pandemic on Canadians seniors.