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Conference Chronicle

West Coast Conference on Aging
Apri 21 and 22, 2023

FEATURED ARTICLE

Planning to help us grow old

Peter McKnight : Editorial

Originally published in the Toronto Star on November 5, 2022.

Aging is an inevitability. But aging in the right place is something we can and must choose for our families, our friends, and, ultimately, for ourselves.

Definitions don't just clarify our thinking; they also dictate our actions.

Take "long-term care," for example. If we define it as a synonym for a nursing home, then that's where we'll spend most of our long-term care (LTC) funding, time and energy. We'll underfund and undervalue other forms of care, including home care and community-based services. And we'll admit to nursing homes people who would fare much better at home.

As it turns out, that's precisely what we've done. In 2019, Canada spent just 18 per cent of its LTC dollars on home care and community-based services. In contrast, Germany and Denmark invested half of their LTC funds, and Organization for Economic Co-operation and Development countries spent an average of 36 per cent of LTC funding on community and home care.

Since institutional care costs far more than caring for people at home, and since Canada's population is ageing rapidly, our skewed distribution of resources is unsustainable. While we spent about $22 billion on LTC in 2019, that number is expected to more than triple, to $71 billion, by 2050.

And the effects are felt far beyond the public purse: Recent estimates suggest one in nine Canadians admitted to nursing homes could have remained at home with proper support - a particularly sad statistic given that the vast majority of Canadians prefer to age at home.

This is not to suggest that nursing homes are never appropriate: For some people, LTC homes are the best option. But not for everyone. We ought, therefore, ensure that everyone can age in the place that's right for them.

A new report from Toronto Metropolitan University's National Institute on Ageing defines "ageing in the right place" as "the process of enabling healthy ageing in the most appropriate setting based on an older person's personal preferences, circumstances and care needs."

To ensure Canadians can age in the right place, the report outlines four overlapping pillars: providing preventive health care and chronic disease management, improving home and community care including support for unpaid caregivers, building more accessible and safer living environments, and reducing loneliness and social isolation.

Chronic diseases like cancer, diabetes and especially heart disease often lead to hospital admissions, and, since many older patients go directly from hospital to LTC homes, prevention and better management of chronic conditions are paramount.

The chronic condition most likely to lead to nursing home admission is dementia, yet a recent report in the Lancet found 40 per cent of dementia cases can be delayed or prevented simply by addressing factors like depression, social isolation and inactivity.

Social isolation and loneliness have also been linked to heart disease, cognitive decline, malnutrition and early death. Programs that encourage social participation through things like volunteering and mentoring are therefore important, as are outreach and screening - "preventive home visits" - for loneliness among seniors.

In addition to preventing chronic diseases, preventing falls and consequent hip fractures can also substantially reduce the number of LTC home admissions. Since half of all falls occur at home, addressing and improving home and furniture design is crucial.

Home sharing or co-housing, in which a group of adults live together, can improve safety, while also addressing social isolation and loneliness. Such arrangements allow residents to simultaneously give, and receive, social and physical support.

Similarly, in-home support for those at risk can reduce the chances of nursing home admission. Any successful home care program will ensure the presence of qualified caregivers, and will recognize and remunerate informal caregivers.

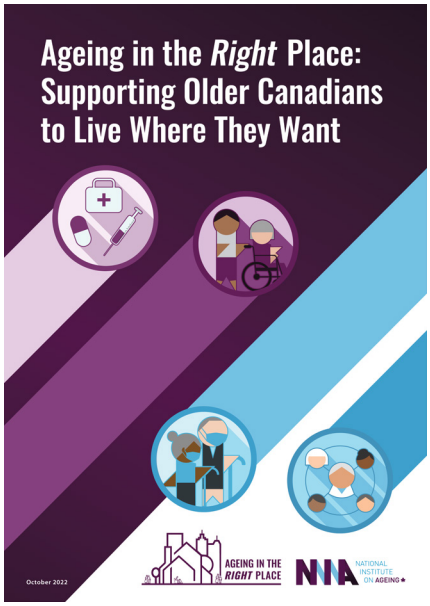
Indeed, home care services are estimated to cost 40 to 75 per cent less than institutional care, yet they're still not prioritized in Canada. And support for unpaid caregivers is limited and uneven across the country.

According to the report, unpaid caregivers provide about $10 billion in free care, and that will likely increase threefold by 2050. Yet the support they receive - financial or otherwise - is severely limited. Since unpaid caregivers provide 75 per cent of the home care support for older adults, few initiatives are more important than remedying this injustice.

Now all of this said, Ottawa and the provinces have taken steps toward addressing these issues. But the initiatives vary dramatically from jurisdiction to jurisdiction, and are often sorely lacking in remote and rural areas.

We therefore need a Canada-wide financial, legal and moral commitment to ensure that services are consistent across the country, that we devote as much money and attention to home and community care as we have to LTC homes. In other words, we need to redefine “long-term care” to ensure that everyone can age in the right place.

After all, ageing is an inevitability, something we all experience every day. But ageing in the right place is something we can and must choose - for our families, our friends, and, ultimately, for ourselves.



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Aging in the *Right* Place: Supporting Older Canadians to Live Where They Want

National Institute on Aging, October 2022

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