

From Poverty to Place-based Quality of Life: The Evolution of Seniors Policy in Canada

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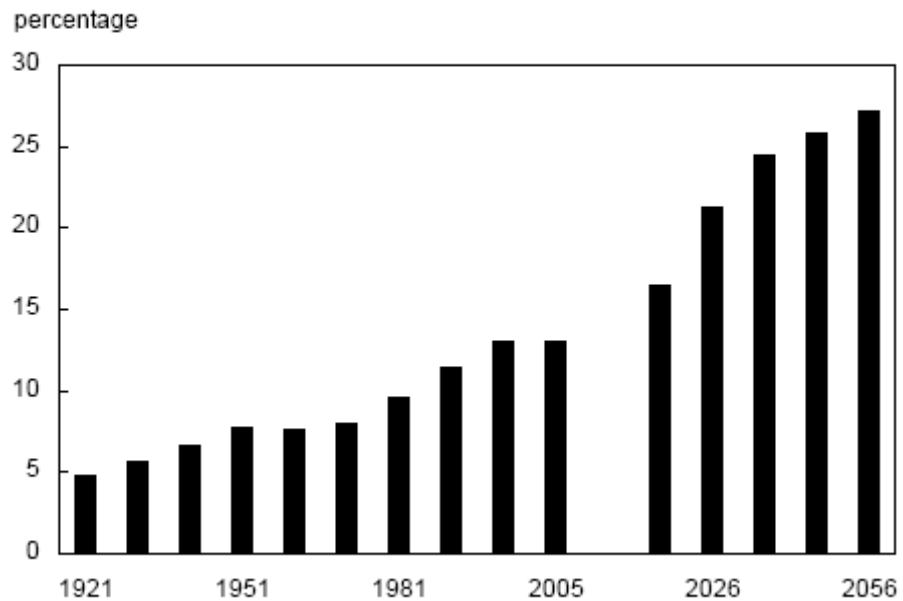


Outline of presentation

- Overview of seniors population in Canada
- Evolution of policy interventions from:
 - Income support *to*
 - Health and social services *to*
 - Participation and engagement
- Emerging governance model for seniors policy – case study of the City of Ottawa
- Challenges and probable future directions

Profile of seniors in Canada

Chart 1.1
Percentage of Canadian population comprised of persons aged 65 or older, 1921 to 2005 and projections to 2056



Sources: Statistics Canada, Censuses of Canada; Population projections for Canada, provinces and territories.

Profile of seniors in Canada

- 75% of seniors over the age of 90 are women
- 93% of seniors live in private households
- Only about 7% live in health care institutions
- 70% live in urban areas with over 50,000 residents
- 10% live in urban areas with fewer than 50,000 residents
- 20% live in rural areas
- Percentage of seniors in the lowest income group has decreased from 22% in 1998 to 14% in 2003

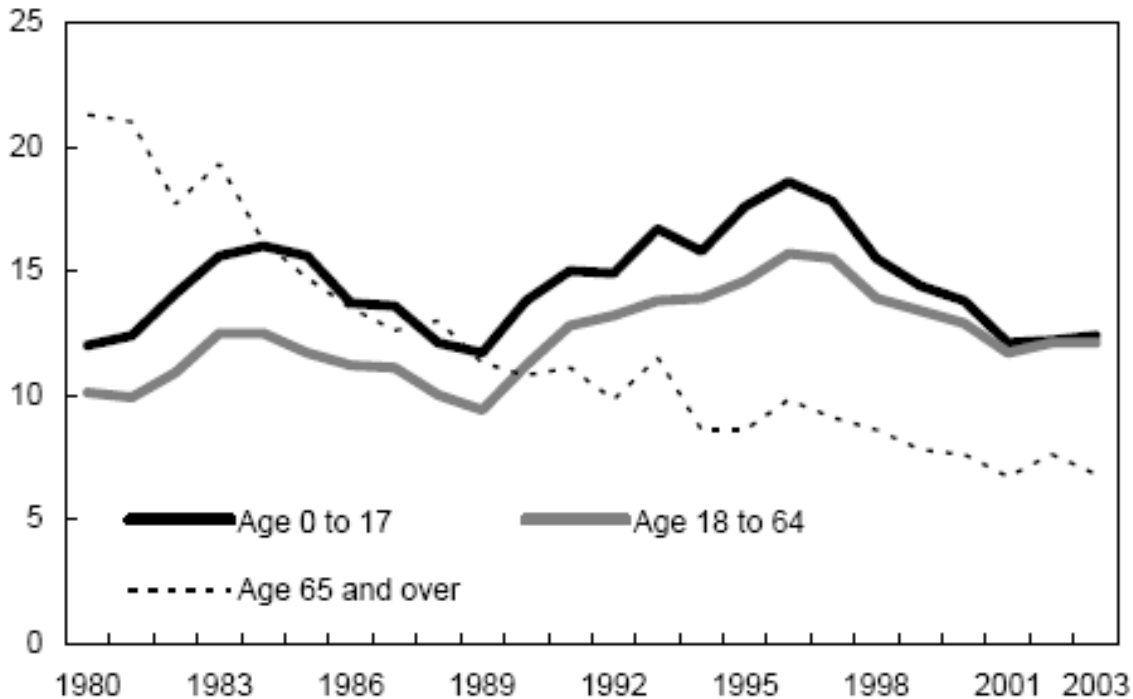
Income support for Canadian seniors

- Three-tier national public pension regime:
 - Old Age Security (OAS) – 1952
 - Guaranteed Income Supplement (GIS) – 1967
 - Canada/Quebec Pension Plan (CPP/QPP) – 1966
- Seven of the ten provinces and two of the three territories also provide income supplements for seniors
- Fourth tier of pension coverage – private employer pension plans and Registered Retirement Savings Plans (RRSPs) that allow individuals to make tax deductible accounts for retirement

Incidence of poverty among Canadian seniors

Incidence of low-income¹, by age group, Canada 1980 to 2003

percentage



1. Low-income cut-off after tax, 1992 base.

Sources: Statistics Canada, Survey of Consumer Finances; Survey of Labour and Income Dynamics.

Health and social services

- Area of provincial jurisdiction – although federal government has taken leadership role – e.g. *National Framework on Aging – 1998*
- Provinces administer a variety of health and social services programs for seniors
- Example: Ontario Ministry of Health and Long-Term Care administers:
 - Ontario Drug Benefit Program
 - Inspection service for long-term care homes
 - Community Care Access Centres providing services for seniors living at home
 - Infoline and Telehealth – 24-hour health information
 - *Aging at Home Strategy - 2007*

Seniors' participation, engagement and quality of life

- Shift of emphasis to “aging in place” with focus on local services
- Federal government – New Horizons for Seniors Program (support for active living)
- Example: Ontario – Ontario Seniors Secretariat (policy initiatives to improve the quality of life of seniors)
- Municipalities – many adopting WHO “Age-Friendly Cities” model

Emerging governance model – City of Ottawa case study

- Place-based approach to seniors policy with collaboration between all levels of government and the non-profit sector
- City of Ottawa – provides:
 - long-term care homes
 - seniors' recreation centres
 - reduced rates for public transit
 - Elder Abuse Unit as part of Ottawa Police Services
 - library services for homebound seniors

Emerging governance model – City of Ottawa case study

- Heavy reliance on the non-profit sector for services such as:
 - promotion of healthy living among seniors
 - “Meals on Wheels” program
 - training of volunteers and home support workers
 - assisted living (homemaking) services
 - culturally adapted services for francophone seniors
 - seniors fitness programs
- Emerging governance model unstable due to underfunding and perception that quality of life issues are less important than income support or health care

Challenges and probable future directions

- Public pension tiers fiscally sound but increased instability in private pension tier
- Only one-third of Canadians are saving enough to meet basic needs after retirement
- Health care system – integrated care - transitions difficult and complex to access, human resource deficits looming
- Shift to emphasis on quality of life may have to be revisited