

**CANADIAN INSTITUTES OF HEALTH RESEARCH'S SUBMISSION TO THE HOUSE OF COMMONS
STANDING COMMITTEE ON HUMAN RESOURCES, SKILLS AND SOCIAL DEVELOPMENT AND THE STATUS
OF PERSONS WITH DISABILITIES**

Advancing Inclusion and Quality of Life for Canadian Seniors
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The Canadian Institutes of Health Research (CIHR) is Canada's federal funding agency for health research and provides leadership and support to more than 13,000 health researchers and trainees across Canada through their careers. With an annual budget of approximately one billion dollars, CIHR plays a key role in the health research enterprise, a constantly growing and highly innovative sector with key economic and employment opportunities.

CIHR established the Institute of Aging to "support research, to promote healthy aging and to address causes, prevention, screening, diagnosis, treatment, support systems, and palliation for a wide range of conditions associated with aging."

The mandate of the Institute of Aging (IA) is to promote research on the aging person in an aging society and the effects of different diseases and conditions on aging. Its goal is to improve the quality of life and health of all Canadians, through to the later stages of life, while ensuring the health and wellness of older Canadians with complex health problems requiring increasingly tailored systems, services and health care.

Background

Canada's population is aging. Canada is facing not only longer life expectancies, but also an explosion in the number of seniors aged 85 and over. Statistics Canada recently reported that in 2016 Canada had more than three-quarters of a million (770,780) people aged 85 and over, which accounts for 2.2% of the entire Canadian population and about 13% of the population aged 65 and over. For the first time in Canadian history, the number of people aged 65 and over exceeded, in absolute numbers, those aged 15 and under.¹ From 2011 to 2016, the number of people aged 85 and over increased by 19.4%, almost four times the rate of growth for the Canadian population as a whole. In addition, the number of centenarians (8,230) grew even faster (41.3%), making it the fastest growing age group from 2011 to 2016. People aged 85 and over contribute in many ways to society. However, many of them have activity limitations and particular needs related to health care, community care, housing, income security and transportation.²

In addition, health-adjusted life expectancy is not always the same as absolute life expectancy, as the goal is to reduce the number of years in poor health. It is in this context that Canada's workforce is aging, as the new aging cohort continues to work later in life either because they want to or because the economic or regulatory environment demands it. In this light, workplaces must promote health.

¹ Canada's population estimates: Age and sex, July 1, 2015, <http://www.statcan.gc.ca/daily-quotidien/150929/dq150929b-eng.htm>.

² A portrait of the population aged 85 and older in 2016 in Canada, <http://www12.statcan.gc.ca/census-recensement/2016/as-sa/98-200-x/2016004/98-200-x2016004-eng.cfm>.

The challenge of an aging population also has an impact on young workers who are increasingly called on to assume their role as caregivers for seniors with health problems. This challenge affects young women in particular, who make up the majority of caregivers. And it takes a huge effort for women who must also take care of children, who find themselves in the “sandwich generation.” For all these reasons, we must make good use of best practices to meet these challenges. Best practices stem from research into specific needs and gaps that would help inform policy as well as all stakeholders, including private companies. At the national level, CIHR’s Institute of Aging is responsible for ensuring that research is conducted on these needs and gaps, and that stakeholders and policymakers have access to the resulting findings.

Helping inform existing policies on ageing in place

In 2012, CIHR’s Institute of Aging conducted wide-ranging consultations with stakeholders across Canada and around the world. The Speaking of Aging tour stopped in 16 Canadian cities, reaching more than 600 people representing not only researchers and trainees from all fields but also partners, policy makers and the general public. These stakeholders identified various research needs, particularly access to home care. Based on lessons learned from this tour, the Institute of Aging has set out a number of strategic directions to support research in critical areas.

As a first step, we must better identify the factors of active and satisfying aging. That’s why CIHR is supporting a major longitudinal research platform of more than 50,000 Canadians. The [Canadian Longitudinal Study on Aging](#) (CLSA) will help us understand the factors of healthy aging as defined by the World Health Organization (WHO) in its 2015 *World Report on Ageing and Health*.³ This study of more than 50,000 people over 20 years will allow us over time to identify opportunities to better understand the factors of active and satisfying aging. All Canadian researchers have access to this unique data platform. We hope that policymakers will benefit from this analysis. We should also find ways together to ensure that data analyses focus on topics that are important and relevant to policy makers.

The risk of chronic disease increases with age, and dementia is among the most feared and disabling health problems associated with aging. CIHR’s Dementia Research Strategy supports research on the latest methods of preventing, diagnosing and treating Alzheimer’s disease and the neurodegenerative diseases that cause dementia. As part of this strategy, CIHR and its partners support the [Canadian Consortium on Neurodegeneration in Aging](#) (CCNA) at the national level. In Canada, CCNA is the hub for all aspects of research involving neurodegenerative diseases that affect cognition in aging, including Alzheimer’s disease. Interestingly, CCNA has a team that focuses on dementia-related care in rural and Aboriginal settings. Among CCNA’s cross-cutting programs, the Women, Gender, Sex and Dementia (WGSD) program addresses relevant sex and gender research questions.

To support older Canadians living at home, technology is an increasingly important option, especially in rural or remote areas. Whether it’s about ensuring wellness by improving the ability to stay in touch with family and friends through social networks or allowing the health care team to monitor and intervene remotely, as needed, technology is becoming increasingly essential to the health and wellness of older Canadians living at home. CIHR’s eHealth Innovations Partnerships Program (e-HIPP) was created to find cost-effective e-health solutions, which are then integrated into the health services sector. The initiative will achieve this by developing inter-sectoral collaboration between health care

³ WHO’s *World report on ageing and health 2015*, <http://www.who.int/ageing/events/world-report-2015-launch/en/>.

innovation communities (researchers, clinicians, patients and decision makers from a variety of traditional and primary health care settings) and the private sector in so-called innovative communities. The first phase of this initiative led to the creation of 14 innovative communities focused on seniors with complex care needs.

Canada is not the only country in this situation that is taking opportunities to help its people age. It is therefore important for Canadian researchers and stakeholders to be part of important international networks in this sector. That's why Canada is a full member of European joint programming initiatives such as the EU Joint Programme - Neurodegenerative Disease Research (JPND), the largest global research initiative aimed at tackling the challenge of neurodegenerative diseases, and the Joint Programming Initiative More Years, Better Lives (JPI-MYBL) - The Potential and Challenges of Demographic Change, which seeks to enhance coordination and collaboration related to demographic change. Canada is also involved in the Active and Assisted Living (AAL) Programme, which aims to create better conditions of life for older adults and strengthen international opportunities in the area of information and communication technology (ICT). A recent report by the European Commission noted that Canada was a prominent participating third country.⁴

Guaranteeing an income for older Canadians

While Canada's population is aging, so too is its workforce. These significant demographic trends will require innovative interventions to enable a healthy and productive workforce now and in the decades to come. An ageing workforce faces the following challenges:

- women and men have different work and health needs due to differences in biology and social circumstances
- more and more workers are balancing family caregiving responsibilities with paid work
- Canadians are working longer and retiring later, and there is a growing prevalence of people with chronic conditions in the workforce
- an increasing number of workers are living and working with physical and mental health conditions
- people with disabilities are underemployed compared with the rest of the population, a loss of a significant pool of talent

The Healthy and Productive Work initiative of CIHR and the Social Sciences and Humanities Research Council (SSHRC) responds to these challenges and opportunities. This initiative supports the development, implementation, evaluation and scaling-up of evidence-based interventions to ultimately foster healthy, meaningful and productive work for all Canadians. Healthy and Productive Work is a joint initiative of CIHR and SSHRC, which relies on the financial support of Employment and Social Development Canada.

Improving the health and wellness of Canada's ageing population

CIHR's mandate extends beyond health and wellness to the social factors of health. That's why CIHR supports programs in this area. Our work on the sidelines of the JPI-MYBL initiative is very relevant. In partnership with SSHRC, we recently participated in a major exercise under the JPI-MYBL initiative on migration and demographic change. Here again, the opportunity to work with other countries, learn from their experience and share our experience is invaluable. In addition, as part of its Dementia

⁴ Evaluation of Joint Programming to Address Grand Societal Challenges (2016).

Research Strategy, CIHR recently launched a partnership with the Alzheimer Society of Canada on the social inclusion of people with dementia and their caregivers.

Conclusion

CIHR exercises its full mandate to meet the challenge of an aging population and its impact in order to promote inclusion and improve the quality of life of older Canadians. To this end, CIHR supports excellence in research and its translation into policies and practices to improve the health and wellness of the entire population. Through its various partnerships and initiatives with other institutes and funding partners, the CIHR's Institute of Aging supports research that provides evidence to make the best decisions in view of the challenges and opportunities facing Canada's ageing population.

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