Submission to the Standing Committee on Finance Pre-Budget 2017 Consultation

Executive Summary:

The ability to communicate is something that many of us take for granted. However, 1 out of 6 people in Canada have a speech, language or hearing disorder that makes day-to-day communication difficult. Here are some startling statistics:

- Individuals with hearing loss are 2 to 5 times more likely to develop dementia
- 95% of people with dementia have difficulty communicating
- In Canada, young men with language impairment have higher rates of arrests and convictions than those who do not
- Infants with hearing loss who are identified and receiving intervention by the age of 6 months perform 20% to 40% better on school-related language measures than children who are only identified later
- A Canadian study found that young adults (between the ages of 18 and 24 years old)
 who had a history of language impairment had one of the highest rates of psychiatric
 disorders in the community (37%)
- 7% of Canadians between the ages of 15 and 64 who have a hearing limitation report being unemployed

Speech-Language and Audiology Canada (SAC) is Canada's leading association representing the professions of audiology and speech-language pathology. SAC is the largest association of its kind in Canada, with over 6,000 speech-language pathologists, audiologists and communication health assistants. Their members are dedicated to improving the communication health of Canadians. They help assess and treat Canadians with speech, language, swallowing, hearing, balance, auditory processing and other auditory disorders.

In order to help the government in their promise to ensure greater accessibility and opportunities for Canadians with disabilities and disorders, SAC recommends the following be included in the 2017 federal budget:

Recommendation 1: As the federal government establishes a new Health Accord with the provinces and territories, it is imperative that the federal government take a leadership role in supporting provincial and territorial programs offering early hearing detection and intervention (EHDI).

Recommendation 2: As part of a renewed, nation-to-nation relationship with Indigenous peoples, the federal government must collaborate with First Nations, Inuit, and Métis

governments in Canada to establish and implement speech, language and hearing programs within their communities.

Recommendation 3: Audiologists and speech-language pathologists should be consulted as part of the planning process for the Canadian Centre for Aging and Brain Health Innovation.

Recommendation 4: The loan forgiveness program be extended to university graduates of speech-language pathology and audiology programs, including incentives for graduates to work in rural areas and remote and northern regions of Canada.

Why is Communication Health Important?

We experience the world through our senses, by communicating with each other and with our surroundings. We use communication to learn, to express ourselves, to work and to build and nurture relationships. Communication disorders can have a significant impact on our physical, emotional, social, vocational and financial well-being. The earlier a disorder is identified and treated, the better a person's chances are for improvement or even recovery. For children specifically, the ability to communicate effectively with others is the very foundation of their social, emotional and educational development.

Early identification and intervention of a communication disorder is absolutely key and is important at any stage in life. Learning is a cumulative process and difficulties early-on can have a cascading effect on the rest of a child's life. A slow start out of the gate will mean playing catch-up for years to come. Early problems with speech and language development can result in high risk behaviours, depression, poor resiliency and isolation in society in later life. Furthermore, Canada's aging population is creating an increased need for services that care for the elderly, including rehabilitation centres and nursing homes. Speech-language pathologists and audiologists are vital contributors to the health and quality of life of those recovering from strokes and treatment of the degenerative effects of Alzheimer's disease, Parkinson's disease and dementia.

Audiology and Speech-Language Pathology – The Federal Budget:

SAC recognizes that health care and education fall under provincial and territorial jurisdiction; however, a failure to address the communication health needs of the people of Canada, both young and old, will ultimately cost the federal government down the road.

- A child's vocabulary upon entering school is a prime predictor of his/her school success or failure. In fact, every \$1 spent on early childhood health and development saves up to \$9 in future health, social and justice services equating to a return on investment of 800%.
- According to population projections, by 2041 almost 25% of Canadians will be over the age of 65. Since the risk of dementia and neurodegenerative disease increases with age,

the number of Canadians living with these conditions will grow and there will be increasing health-care costs.

Solutions:

The communication health of Canadians can be dramatically improved by simple, inexpensive but targeted action by the federal government in the 2017 federal budget. SAC recommends the following solutions:

Recommendation 1: As the federal government establishes a new Health Accord with the provinces and territories, it is imperative that the federal government take a leadership role in supporting provincial and territorial programs offering early hearing detection and intervention (EHDI).

The federal government should actively support standardized early hearing detection and intervention (EHDI) programs throughout the country. EHDI programs use an inexpensive and painless test to quickly and accurately screen infants for permanent congenital hearing loss. The screening process is simple and should be performed before a baby is discharged from the hospital. This first step will ensure that babies with hearing loss are identified. A comprehensive EHDI program will ensure that these babies undergo proper diagnostic services then have access to the vital early intervention services needed.

An SAC report from March 2014 on the status of Canada's EHDI programs concluded that over half of the nation's provinces and territories do not have adequate EHDI programs in place. A 2016 progress report on this issue indicates that very little progress has been made since 2014.

While establishing a new Health Accord with its provincial and territorial counterparts, the federal government needs to invest in early hearing detection and intervention programs to guarantee all children in Canada have access to comprehensive hearing services.

Recommendation 2: As part of a renewed, nation-to-nation relationship with Indigenous peoples, the federal government must work with First Nations, Inuit and Métis governments to provide better access to services and the implementation of speech, language and hearing programs within their communities.

The federal government has committed to re-engaging Indigenous peoples in a renewed nation-to-nation process to make progress on important issues such as health care. Indigenous communities should be encouraged to collaborate and participate in the delivery of communication health programs. Training opportunities that empower community members to play a supportive role in delivering these speech, language and hearing programs should also be offered.

Strengthening the capacity of First Nations, Inuit, and Métis communities to offer local, culturally-sensitive communication health programs serves a dual-purpose: improving the quality of services and helping current and future generations develop and maintain their Indigenous languages and bilingual capabilities.

For example, enhancements to the on-reserve Income Assistance Program with First Nations is needed to ensure recipients have the incentive to participate in the training necessary to gain employment. This could be addressed by committing a small portion of the funds from the 2017 Budget to Indigenous and northern communities with priority health needs. This will further reduce costs associated with relying on outside health care systems and medical travel.

Recommendation 3: Audiologists and speech-language pathologists should be consulted as part of the planning process for the Canadian Centre for Aging and Brain Health Innovation.

As part of the 2015 Budget, the federal government proposed to provide up to \$42 million over five years, starting in 2015–16, to help improve seniors' cognitive health through the establishment of the Canadian Centre for Aging and Brain Health Innovation.

Communication health and aging is currently a central focus for SAC. The association applauds this initiative and the government's efforts in addressing the need for collaboration and innovation as age-related cognitive impairment and chronic conditions are becoming more prevalent in Canada.

SAC has worked to achieve high national standards of practice in speech-language pathology and audiology in Canada and maintains a strong tradition of collaborating with provincial and territorial professional associations and regulatory bodies as well as working closely with other health-care partners, both domestically and internationally. Including speech-language pathologists and audiologists in the planning process will ensure the communication health needs of Canada's aging population will be met.

Recommendation 4: The Loan Forgiveness Program be extended to university graduates of speech-language pathology and audiology programs, providing incentives for graduates to work in rural, remote and northern regions of Canada.

The federal government has taken steps to attract and retain other health professionals in rural and remote communities: doctors, nurse practitioners and nurses have a portion of their Canada Student Loans forgiven by the government as an incentive to practice in underserved communities. However, such programs have not been extended to university graduates of speech-language pathology and audiology programs.

SAC recommends the expansion of the loan forgiveness to recent graduates of speechlanguage pathology and audiology programs. Further incentives could include grants, scholarships and bursaries in exchange for a 3- or 4-year return-of-service commitment, wage incentives or a guaranteed minimum income and/or tax credits for practicing in remote areas. These incentives would encourage speech-language pathologists, audiologists and communication health assistants to move to locations where their skills are needed most.

The loan forgiveness program and other incentives would encourage Canadians to enrol in speech-language pathology and audiology programs but also attract internationally-educated communication health professionals to select Canada as a place of opportunity. Substantial employment opportunities exist in rural, remote and northern regions of the country and especially in Indigenous communities. Implementation of these measures would increase the accessibility of communication health services, which are so vital for the many Canadians who live with a communication disorder. An increase in the number of qualified communication health professionals will reduce wait times; address the need for early intervention, thereby reducing the demand for more specialized care in the future.

Summary

In summary, the federal government should demonstrate its commitment to the communication health needs of all Canadians by increasing funding for speech-language pathology and audiology services for key population groups in the 2017 budget. The growing aging population would benefit greatly from enhanced communication health services that improve their quality of life and well-being. Addressing the communication health needs of children early on prevents the need for specialised care and increases the likelihood they will contribute to the country's economic growth.