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# **National Report: Implementation of the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy (December 2021)**





**Government of Canada - Implementation of the Madrid International Plan of Action on Ageing and its Regional Implementation (December 2021)**

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## 1. List of Abbreviations

**AFC**

Age-Friendly Communities

**AFM**

Age-Friendly Municipalities

**AMPED**

Assisting Mature Persons in Employment Development

**ASO**

Alzheimer Society organizations

**CABHI**

Centre for Aging and Brain Health Innovation

**CASE**

The Council for Advancement and Support of Education

**CCNA**

Canadian Consortium on Neurodegeneration in Aging

**CCRs**

Coordinated community responses

**CFN**

Canadian Frailty Network

**CIHR**

Canadian Institutes of Health Research

**CLSA**

Canadian Longitudinal Study on Aging

**CPHO**

Chief Public Health Officer



**CPP**

Canada Pensions Plan

**CRN**

Community Response Networks

**CSC**

Canada Services Corp

**DCI**

Dementia Community Investment

**DSF**

Dementia Strategic Fund

**EI**

Employment Insurance

**ESDC**

Employment and Social Development Canada

**FPT**

Federal, provincial, and territorial governments

**GBA+**

Gender Based Analysis Plus

**GBV**

Gender-based violence

**GIS**

Guaranteed Income Supplement

**HSP**

Healthy Seniors Pilot Project

**ILC Canada**

International Longevity Centre

**ILC GA**

International Longevity Centre Global Alliance



**LMDAs**

Labour Market Development Agreements

**LTC**

Long-term care

**LTHC**

Long-Term Health Care

**MAID**

Medical Assistance in Dying

**MCI|Dem**

Mild cognitive impairment and dementia

**MIPAA**

Madrid International Plan of Action on Ageing

**MSAA**

Ontario's Ministry of Seniors and Accessibility

**NAFC**

National Association of Friendship Centres

**NCE**

Network of Centres of Excellence

**NGO**

Non-Governmental Organization

**NHCF**

National Housing Co-Investment Fund

**NHS**

National Housing Strategy

**NHSP**

New Horizons for Seniors Program



**NRC**

National Research Council of Canada

**NSC**

National Seniors Council

**OACAO**

Older Adult Centres' Association of Ontario

**OAS**

Old Age Security

**OEWGA**

Open-ended Working Group on Ageing

**PTs**

Provincial and territorial governments

**PVN**

Patient Voices Network

**QADA**

Québec ami des aînés

**QCCP**

Queen's Community Connections Program

**QPP**

Québec Pension Plan

**RIS**

Regional Implementation Strategy

**SAQ**

Seniors Action Quebec

**SDGs**

Sustainable Development Goals

**SSPs**

Seniors' Safety Grant program

**TIOW**

Targeted Initiative for Older Workers

**TPL**

Toronto Public Library

**UN**

United Nations

**UNECE**

United Nations Economic Commission for Europe

**VNR**

Voluntary National Review

**WDAs**

Workforce Development Agreements

**WHO**

World Health Organization

**YNWP**

Yukon Northern Wellness Project





## 2. Executive summary

Canada welcomes the chance to provide a fourth report to the United Nations Economic Commission for Europe (UNECE). The report will outline Canada's progress achieved on:

- the implementation of the Madrid International Plan of Action on Ageing (MIPAA)
- its Regional Implementation Strategy (RIS)

To inform the report, the Government of Canada engaged with:

- several federal departments and agencies
- provincial and territorial governments and
- various stakeholder and Indigenous partner organizations

The report includes 5 main sections:

1. Canada's ageing situation
2. key achievements and main actions to advance the implementation of the 2017 Lisbon Ministerial Declaration goals
3. Canada's engagement on international initiatives on ageing
4. most important achievements to fulfill Canada's commitment to advance the MIPAA/RIS
5. lessons learned from the COVID-19 pandemic

During the last 20 years, Canada has made important progress on fulfilling its MIPAA/RIS commitments. Canada has put in place various measures that respond to the opportunities and challenges of population ageing. One important step towards recognizing and addressing issues unique to older persons took place in July 2018. A Minister of Seniors was appointed to help the Government of Canada better understand the needs of Canadian seniors, as well as to ensure that programs and services respond to Canada's aging population.

Another key achievement was the launch of the Canadian Longitudinal Study on Aging (CLSA) in 2009. The Canadian Institutes of Health Research (CIHR) established the CLSA to be a national research collaboration, comprising more than 160 researchers from 26 universities. The CLSA is conducting a large-scale longitudinal study with 50,000 participants involved until 2033. The CLSA will generate much needed evidence in understanding the determinants of healthy aging to help guide decision makers in creating evidence based opportunities to improve the health of all Canadians as they age.

Since 2015, the Government of Canada has been systematically using Gender Based Analysis Plus (GBA+) while developing policies, programs and legislation. Canada is encouraged by recent milestones, which help to better identify and address the needs of older persons, but understands there is much more work to do moving forward.

The COVID-19 pandemic has also posed unique challenges to the health and wellbeing of older persons in Canada and around the world. Canada will continue to seek ways to improve its pandemic response and reflect on the impact of COVID-19 on older persons.

We look forward to hearing best practices among fellow United Nations Economic Commission for Europe (UNECE) member states.

### 3. General information

#### Country name

Canada

#### Contact details

Seniors Policy, Partnerships and Engagement Division  
Seniors and Pensions Policy Secretariat  
Income Security and Social Development Branch  
Employment and Social Development Canada

#### Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing

The Government of Canada has been working to advance a number of seniors' priorities. Canada recognizes that the growing senior population presents both new opportunities and challenges. It has provided leadership and made investments in many areas important to seniors, such as income security, housing, accessibility, and caregiving. The Government is also committed to actions related to improving long-term care, pharmacare, elder abuse and providing support to seniors during the pandemic.

The National Seniors Council (NSC) advises the Government of Canada on matters related to the health and well-being and quality of life of seniors. The government has asked the NSC to provide advice on gaps that could potentially be addressed if a national seniors strategy were to be developed. A number of provincial and territorial governments have developed strategies that respond to seniors' needs which fall under their areas of responsibility.

This report provides information on implementation by all orders of government. References to "the Government of Canada" refer to the Canadian federal government, while a reference to "Canada" is generally a reference to the federal, provincial and territorial (FPT) governments combined. References to a specific province or territory are generally a reference to its government.

## 4. Canada's ageing situation

### Current demographic indicators

Older persons are not a homogenous group. The seniors population in Canada is diverse in many ways, including age, gender, culture, health and socio-economic status. As of July 1, 2020, there were more than 38 million people living in Canada. This includes just under 7 million persons over the age of 65. This represents 18% of the population.<sup>1</sup> The ratio of females to males in Canada was larger for every age group over 65.<sup>2</sup>

The number of individuals under the age of 65 relative to seniors is declining. In 2000, there were about 4.4 people aged 25 to 64 for each senior (aged 65+), compared to a ratio of 3.0 in 2020. This is expected to fall to 2.2 in 2030.<sup>3</sup> The Canadian senior population is expected to grow by 57.2% from 2020 to 2040.<sup>4</sup>

Statistics Canada tracks precise annual changes in the age structure of the Canadian population, provinces and territories as well as sub-provincial regions. The share of older Canadians (aged 55+) in the population has increased by 10 percentage points in the past 2 decades. It rose from 21.3% in 2000 to 31.9% in 2020.<sup>5</sup> The number of older Canadians aged 55+ has nearly doubled (+85.9%) over the last 20 years – from 6,531,915 in 2000 to 12,141,003 in 2020. Lower fertility and rising life expectancy are driving the aging of the population.<sup>6</sup>

The average age in Canada varies by province and territory. Atlantic Canada is home to an older population compared to its prairie or northern counterparts, as shown in Table 1: Average Age by Province and Territory.<sup>7</sup> Alberta, Manitoba, Saskatchewan, and the territories are younger on average.<sup>8</sup>

<sup>1</sup> Statistics Canada, [Table: 17-10-0005-01](#).

<sup>2</sup> Statistics Canada, [Seniors and Aging Statistics](#)

<sup>3</sup> Statistics Canada, Table: 17-10-0005-01 (1971 to 2020) and Table: 17-10-0057-01 (2021 to 2068; M1 Scenario).

<sup>4</sup> Statistics Canada, [Table: 17-10-0005-01](#).

<sup>5</sup> Statistics Canada, [Table: 17-10-0005-01](#).

<sup>6</sup> Employment and Social Development Canada (2016), *Promoting the labour force participation of older Canadians*.

<sup>7</sup> Statistics Canada, [Demographic estimates by age and sex, provinces and territories](#)

<sup>8</sup> Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities, [Advancing Inclusion and Quality of Life for Seniors](#)

Further statistical indicators on active aging in Canada are included in Annex A.

**Table 1: Average age by province and territories**

| Province/Territory        | Average age (2020) |
|---------------------------|--------------------|
| Newfoundland and Labrador | 44.80              |
| New Brunswick             | 44.30              |
| Nova Scotia               | 43.80              |
| British Columbia          | 42.60              |
| Quebec                    | 42.60              |
| Prince Edward Island      | 42.40              |
| Ontario                   | 41.20              |
| Yukon                     | 39.60              |
| Saskatchewan              | 39.20              |
| Manitoba                  | 39.10              |
| Alberta                   | 38.50              |
| Northwest Territories     | 36.10              |
| Nunavut                   | 28.50              |

### Notable initiative

In 2019, the Government of Canada launched the portal [Older Adults and Population Aging](#), bringing together all the statistical products and analyses available on older adults and population aging. It includes data and analysis sources by various themes, key indicators (life expectancies, median age, etc.), features analytical products, and an interactive dashboard with regional demographics and age and sex distribution of the Canadian population. Estimates include an age pyramid, a table on indicators of healthy aging from the Canadian Community Health Survey, and other resources available to researchers. This portal is updated when new data and analyses are released.

### Key quantitative social and economic indicators

Demographic changes have affected social and economic outcomes for seniors, notably older women, in recent years. Since the late 1990s, older Canadians, especially older women, have significantly increased their labour force participation. Some reasons for higher participation include:

- improved health and life expectancy
- higher levels of education
- later labour force re-entry
- relatively fewer physically demanding jobs

- cultural shifts
- financial reasons
- changes to the retirement income system<sup>9</sup>

While the employment rates among older Canadians fell from 2019 to 2020 due to COVID-19, they have increased significantly in the last 20 years. Employment rates increased by 12.3 percentage points from 2000 to 2020 among older adults aged 55 to 64 (48.1% to 60.4%). They also rose by 13 percentage points among seniors aged 65 to 69 (11.0% to 24.0%). The employment rate of older Canadians grew more quickly among women than men. The employment rate of older women (aged 55-64) increased 15.8 percentage points from 2000 to 2020 (39.1% to 54.9%). Meanwhile, the employment rate of older men increased by 8.7 percentage points (57.4% to 66.1%). The gender gap in employment rates between older men and women narrowed from 18.3 percentage points in 2000 to 11.2 percentage points in 2020.<sup>10</sup>

### Social and economic impacts of COVID-19

The COVID-19 epidemic has disproportionately affected older Canadians, especially those living in collective housing, such as retirement homes or healthcare institutions.

As of August 12, 2021, of the COVID-19 cases for which there was detailed case information (1,435,035), approximately 17.2% were adults 60 years old and over. This age group represents the highest proportion of hospitalizations (63.6%) and intensive care unit admission (60%). This age group also represents the vast majority of deaths (94.1%).<sup>11</sup>

The implementation of public health restrictions to control the spread of COVID-19 led to significant employment losses among older Canadians, such that between February and April 2020, their employment rate fell by 8.5 percentage points to 55%. Following the lifting of first-wave restrictions,

<sup>9</sup> National Seniors Council (2011), *Report on the Labour Force Participation of Seniors and Near Seniors, and Intergenerational Relations*, Human Resources and Skills Development Canada, ISSD-086-09-11E.

Carrière, Y., Légaré, J., Léger St-Cyr, M., Ronteix, C. and Diaconu, V. (2015), *Living and Working Longer in an Aging Society: Toward Increasing Inequalities?*, Population Change and Lifecourse Strategic Knowledge Cluster Discussion Paper Series/ Un Réseau stratégique de connaissances Changements de population et parcours de vie, Document de travail: Vol. 3: Issue 1, Article 11.

<sup>10</sup> Statistics Canada, Labour Force Survey, Table: 14-10-0327-01.

<sup>11</sup> Public Health Agency of Canada, [COVID-19 daily epidemiology update](#)

older adults' employment rate held relatively steady through subsequent waves, and even hit a new record high in March 2021 (63.7%). By June 2021, the rate (62.6%) sat just below the newest record high and was closest to full recovery than other age groups.<sup>12</sup>

## 5. Methodology

The preparation of Canada's national report for the fourth review and appraisal cycle of the implementation of the MIPAA/RIS was coordinated by Employment and Social Development Canada (ESDC). ESDC is the Government of Canada's focal point on ageing.

ESDC consulted with several other federal departments and agencies, provincial and territorial governments, key seniors' stakeholders and Indigenous partner organizations from across civil society. This process took place from February 2021 to June 2021.

Canada's assessment of the implementation of the MIPAA/RIS is qualitative in nature. Federal departments and provincial and territorial governments were asked to provide:

- key facts
- performance measurement indicators
- statistics about programs or initiatives implemented to fulfill the commitments of the *2017 Lisbon Ministerial Declaration* goals

Stakeholder and Indigenous partner organizations completed a questionnaire in order to gather their views on important issues affecting older Canadian adults. Participants could also highlight promising practices put in place across the country that contributed to the achievement of the 3 Lisbon goals. A targeted approach was adopted to consultation. To that end, ESDC identified key stakeholder organizations that work in different sectors of society such as health, research, advocacy, and social services.

Stakeholders' perspectives were also collected during the federal Minister of Seniors' Virtual Tour that took place from November 2020 to January 2021. These events did not seek feedback specifically on the implementation of the MIPAA/RIS. However, they provided an opportunity to hear concerns from stakeholders in different parts of the country, particularly in the context of the pandemic, on issues that are relevant to advancing the MIPAA/RIS.

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<sup>12</sup> Statistics Canada, Labour Force Survey, Table: 14-10-0287-01.

## 6. Advancing the MIPAA/RIS and the 2017 Lisbon Ministerial Declaration goals

In Canada, addressing the needs of seniors requires joint efforts on the part of all orders of government and civil society.

Canada has 3 orders of government: federal, provincial or territorial and municipal, and works bilaterally with Indigenous self-government groups. All orders of government have distinct responsibilities with respect to the provision of programs and services for seniors. They work with civil society and other stakeholders on a number of shared areas of responsibility.

Over the past 5 years, all relevant stakeholders have taken a wide range of actions to support seniors. These actions help seniors maintain active lifestyles, remain engaged in their communities and stay well informed about the services and benefits available to them. At the federal level, some of the key measures that contribute to the Lisbon goals are:

### **National Housing Strategy**

Canada's first ever National Housing Strategy (NHS), announced in 2017, is a \$72+ billion plan that is helping to ensure that Canadians have access to housing that meets their needs and that they can afford. The NHS recognizes distinct housing barriers faced by older Canadians. The National Housing Co-Investment Fund (NHCF), an initiative of the NHS, aims to create at least 7,000 new affordable units for seniors by 2027-28. As of March 31, 2021, the NHCF has created over 2,900 senior units and repaired or renewed over 33,800 housing units for seniors.<sup>13</sup>

Reaching Home: Canada's Homelessness Strategy is also a component of the NHS. Reaching Home provides funding to urban and rural communities, which have the flexibility to fund projects based on local priorities, including supporting seniors experiencing and at-risk of homelessness. An additional commitment of over \$1.7 billion in funding (in Budgets 2017 and 2018) for the co-development of distinctions-based Indigenous Housing Strategies will help address the specific housing priorities of First Nations, Inuit, and Métis communities. The First Nations-led National Housing and Related Infrastructure Strategy is specifically guided by a holistic approach to housing that is inclusive of all generations and all aspects of life, and First Nations elders play a key role in the holistic, culturally-informed decision-making processes associated with this Strategy.

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<sup>13</sup> National Seniors Strategy, [Progress on the National Housing Strategy | A Place to Call Home](#)



## **A Dementia Strategy for Canada: Together We Aspire**

In 2019, the Government of Canada released A Dementia Strategy for Canada: Together We Aspire. This strategy marks a key milestone in efforts to create a Canada where all people living with dementia and caregivers are valued and supported, and experience an optimal quality of life and where dementia is prevented, effectively treated and better understood. Federal investments that support Canada's dementia strategy include initiatives that are intended to:

- increase awareness of how to prevent dementia, reduce stigma and encourage communities to be more dementia-inclusive
- improve access to and use of dementia guidance
- enhance dementia surveillance
- further dementia research in priority areas
- support and evaluate the impact of community-based projects

## **Continuous adjustment to the Canada's Retirement Income System**

1. Canada's Retirement Income System was designed to provide adequate income replacement in retirement and reduce poverty amongst seniors. It is comprised of 3 pillars that work together to meet these objectives. The Old Age Security (OAS) program provides a basic level of retirement income to seniors who meet the legal status and residence requirements, along with additional support for those in low-income. The benefits under the program include the OAS pension, which is paid to nearly all seniors aged 65 and over, the Guaranteed Income Supplement (GIS) for low-income OAS pensioners, and the Allowances for low-income Canadians aged 60 to 64 who are the spouses or common-law partners of GIS recipients, or who are widows or widowers. The OAS program is a non-contributory, residence-based program, financed through general tax revenues
2. The Canada Pension Plan (CPP) and the Quebec Pension Plan (QPP) provide basic income replacement for contributors and their families. This is accessed when the contributor retires or dies or if they become disabled. Contributions from employees, employers and self-employed individuals as well as the investment income from these contributions finance those plans
3. The third pillar of the retirement system consists of voluntary tax-assisted private savings and employer-sponsored pension plans. This includes registered pension plans, pooled registered

pension plans, registered retirement savings plans and tax-free savings accounts. Individuals and their employers may contribute to these savings vehicles

Canada's retirement income system continues to evolve to respond to demographic and socio-economic changes.

In recent years, various initiatives have been undertaken by the Government of Canada with a view to ensuring that eligible seniors, including low-income seniors, receive the benefits to which they are entitled. These initiatives include the introduction of automatic enrollment for the OAS pension and the GIS. Seniors who are automatically enrolled for the OAS pension are automatically assessed for the GIS each year, provided they file a tax return on time.

The Government has also taken different measures to improve the financial security of Canada's seniors, including those with the lowest incomes.

In 2019, the federal and provincial governments took action to strengthen the retirement income system by implementing the biggest change to the contributory pension plan since its inception. The enhancement to the CPP (and QPP) will provide more financial support for Canadians after they retire by increasing both the range of covered earnings and the replacement rate of the Plans. Contributions to the enhancement began their 7-year phase-in in 2019. Benefits under the fully-funded enhancement will grow over time as Canadians work and contribute, with the largest benefits for today's youngest workers. Once mature, the fully-funded CPP enhancement will increase the maximum CPP retirement pension by more than 50%. Enhancing the CPP will significantly reduce the number of Canadian families at risk of not saving enough for retirement. This will particularly affect those who do not have a workplace pension plan.

In 2020, the Government enhanced the GIS earnings exemption so that low-income seniors who work are able to keep more of their benefits. As of July 2020, the enhanced exemption applies to both employment and self-employment income, and provides a full exemption on up to \$5,000 of annual earnings, as well as a 50% exemption on the next \$10,000 of earnings. In the case of couples, as the GIS is calculated on the joint income of both spouses, this means they can earn up to \$10,000 before their GIS is reduced. This enhanced exemption will reduce barriers to work and ensure that lower-income seniors who work are able to retain more of their benefits.

Additionally, the Government introduced in May 2020 a one-time tax-free payment of \$300 for seniors eligible for the OAS pension, with an additional tax-free payment of \$200 for seniors eligible for the GIS. This measure provided a total of \$500 to low-income seniors who receive both the OAS pension and the GIS. Allowance recipients also received \$500. This \$2.5 billion investment in financial support was to help Canadian seniors cover increased costs due to the COVID-19 pandemic.

The Government of Canada is committed to moving forward with investments that give Canadian seniors a better quality of life, including stronger financial security. To that end, effective July 2022, the Government will increase the OAS pension by 10% for seniors aged 75 and over. In order to help

address the immediate needs of this group of seniors, the Government will also provide a one-time payment of \$500 in August 2021 to OAS pensioners who will be aged 75 and over as of June 30, 2022. These measures will give more than 3 million seniors greater financial security.

The next section will take a closer look at how the federal, provincial and territorial, and civil society organizations have contributed to the advancement of the Lisbon Ministerial Declaration Goals.

## 7. Recognizing the potential of older persons

Seniors in Canada are a rapidly growing portion of the population and are living longer and healthier lives than previous generations. Improved longevity means that seniors in Canada have the opportunity to participate in society and engage in their communities longer.

To ensure seniors have the opportunity to lead as full and healthy lives as possible, there are varied solutions. This can include providing tools (digital and non-digital), tailoring services to their needs, and working towards a high level of health. Empowered seniors can enjoy higher independence, access to information, and connection with their peers and community at-large.

This next section will present different measures that the federal, provincial and territorial governments and civil society organizations have put in place to recognize the potential of older persons, according to specific Regional Implementation Strategy commitments.

### 1. Developing and implementing socially responsible and future-oriented economic and financial strategies

Efforts are underway in Canada to ensure social and economic progress for the future, ranging from the federal government investing in housing (for example, the National Housing Strategy) to provincial/territorial action plans that address economic development.

Provincial governments are moving forward with action plans to address economic challenges. In 2018, the Ontario government released the **Made-in-Ontario Environment Plan** that considers the province's specific priorities, challenges and opportunities, and commits to reducing the province's greenhouse gas emissions to 30 per cent below 2005 levels by 2030, a target that aligns with the Federal Government's Paris commitments. The government will be following through on its commitment to undertake Ontario's first-ever broad, multi-sector provincial climate change impact assessment to identify where the province is vulnerable and which regions and economic sectors are most likely to be impacted.

**The Government of Quebec 2020 to 2025 Social Economy Action Plan** renewed its support to collective businesses that provide services to independent seniors and those with loss of autonomy to establish conditions conducive to the development of services adapted to this clientele.

## 2. Fostering effective consultations with, and involvement of, older persons and their representatives at the national, regional and local levels in designing policies

Federal and provincial/territorial governments have taken concrete steps to consult on key initiatives affecting seniors. In many cases, they work to reach advocacy groups or seniors directly. In designing policies to improve Canada's retirement income system and enhance retirement security, the Government of Canada engages with Canadians. This occurs through public consultations to hear from all stakeholders, including pensioners and labour groups.

In November 2020, the Government of Canada consulted with Canadians on proposals to strengthen the framework for federally regulated private sector pension plans. The Government of Canada received written submissions from more than 40 stakeholder groups over the consultation period, including groups representing pensioners and retirees.

British Columbia's **Patient Voices Network (PVN)** is a community of patients, families and caregivers. They work together with health care partners to improve BC's health care system. PVN connects patient partners with health care partners who are seeking to engage the patient voice in their efforts to improve quality of care. Every British Columbia resident is invited to join PVN. Currently, British Columbia has more than 900 patient partners, more than 500 health care partners, and more than 200 initiatives.

In Alberta, the **Alberta Resident and Family Councils Act** ensures all residents of licensed supportive living and long-term care facilities have an equal opportunity to participate in decisions made about the care and services they receive.

This enables them to have their voices heard. These councils provide an opportunity for residents and family members to talk regularly. They can then have a say in decisions that affect residents' day-to-day experiences in the places they live.

## 3. Promoting a positive image of older persons, acknowledging their contributions to society

The Government of Canada and provincial/territorial governments are working to promote a positive image of seniors in Canada. This is achieved by investing in various projects and taking time during the year to celebrate seniors. October 1 is National Seniors Day, an occasion on which all Canadians can join in celebrating seniors across Canada.

The **New Horizons for Seniors Program (NHSP)** is a \$70 million Government of Canada grants and contributions program. It provides funding for projects that make a difference in the lives of seniors and in their communities. Projects funded under NHSP contribute to promoting a positive image of seniors and acknowledging their contributions to society. For example, the NHSP funded the Saskatchewan Seniors Mechanism's "Creating a Culture of Inclusion" project (from 2016 to 2019). The project aimed to promote healthy, accessible, inclusive and safe communities where seniors are valued, included and supported among rural, small urban and francophone communities. It was

designed as well to increase awareness of senior abuse and how to respond to it; and improve the way seniors are portrayed in media. It also sought to increase public education to reduce ageism throughout Saskatchewan; and reduce rural seniors' isolation in south and central Saskatchewan as well as in Regina.

In Manitoba, October is proclaimed as **Seniors' and Elders' Month**. In Ontario, June is Seniors' Month. Seniors' and Elders' Day/Month represents an opportunity to celebrate the accomplishments of seniors. It recognizes the valuable contributions that they have made in their communities.

As part of its **A Quebec for All Ages 2018 to 2023 Action Plan**, Quebec is developing an annual awareness strategy to promote the contribution of older persons among the Quebec population. Furthermore, the Secretariat for Seniors financially supports many local, regional and national projects geared toward enhancing and promoting a positive image of older persons in society.

In 2017, the Government of Nova Scotia launched **Shift: Nova Scotia's Action Plan for an Aging Population**. The central vision of this strategy is that "together, Nova Scotians value, promote, support older adults and their contributions to our province." The strategy has 3 goals or pillars: value the social and economic contribution of older adults; promote healthy, active living, and support aging in place, connected to community. It commits 9 government departments to activity in support of the 3 goals.

### **Promising practice from civil society - Network of the National Association of Friendship Centres**

#### **Organization: National Association of Friendship Centres (NAFC)**

The NAFC is governed by a national Board of Directors that incorporates a Senate, an integral part of the Friendship Centre Movement. Senators are individuals who are recognized for representing a set of core values which reflect the history and evolution of the Friendship Centre Movement. Senators may be called upon to provide information, guidance or advice to the Friendship Centre Movement from time-to-time. They are role models to Indigenous youth and are highly respected ambassadors of the Friendship Centre Movement.

The NAFC has a network of 100+ local Friendship Centres and Provincial/Territorial Associations from coast to coast to coast across Canada. Friendship Centres offer programming, education and support to urban Indigenous people while bridging the cultural gap in communities. All Friendship Centres have some form of programming or gathering space for elders/seniors in their community. They are honoured with feasts and celebrations. As well, their skills and knowledge are sought for support and ceremony with the protocols of the local Indigenous communities followed.

In conjunction with the Truth and Reconciliation Report released in 2015, the NAFC supports a number of the Calls to Action for its urban, rural and remote members. NAFC recognizes that many of its Indigenous elders are Indian Residential School survivors and the intergenerational effects have

resulted in hesitance when working in sectors such as health, justice, education, etc. This has necessitated the development of programs with an Indigenous perspective that collaborates with urban programs run by Friendship Centres.

#### 4. Fostering work and volunteering of younger and older persons in intergenerational settings

In 2018, more than 24 million people volunteered, accounting for 79% of Canadians aged 15 and older. Mature volunteers (born between 1918 and 1945) were contributing the most average hours per year.<sup>14</sup> To foster youth opportunities in intergenerational settings, federal and provincial/territorial governments have invested in grants and contributions programs that support relevant projects.

Announced in 2016 with \$105 million over 5 years starting in fiscal year 2016 to 2017, and \$25 million annually thereafter, the **Canada Service Corps** (CSC) is a grants and contributions program. It is focused on promoting civic engagement among Canadian youth aged 15 to 30. The CSC gives young Canadians the chance to participate in meaningful volunteer service projects that have positive impacts in communities across Canada. Youth have been able to foster intergenerational relationships throughout their placements and micro-grants. This can include working on projects:

- teaching seniors how to use technology
- engaging elders
- establishing community knitting programs involving youth and seniors
- promoting music education to seniors
- participating in long-term care activities

**Ontario's Seniors Community Grant** program was established to help improve community supports for seniors. It provides funds supporting projects focused on learning, social inclusion, mental well-being and physical activity that embrace seniors as volunteers, delivered across the province by community organizations. In Alberta, in 2020, several community-based organizations initiated a **virtual community of practice**, to support organizations developing intergenerational programs. A grant from the Government of Alberta supported this work. In addition, a grant supported the development and delivery of intergenerational programming through libraries in southern Alberta. In Quebec, the **A Quebec for All Ages 2018 to 2023 Action Plan** provides measures to encourage intergenerational solidarity and dialogue.

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<sup>14</sup> Statistics Canada, [Volunteering counts: Formal and informal contributions of Canadians in 2018](#)



## Promising practice from civil society - Queen's Community Connections Program (QCCP)

### Organization: Canada's National Seniors' Advocacy Organization

More than 100 students signed up to volunteer since the establishment of the program, providing regular check-ins with a provided list of alumni. This is no small feat as there are upwards of 10,000 alumni over the age of 70 in the contacting pool.

This program won a global award: QCCP for an Award through The Council for Advancement and Support of Education (CASE). CASE is the global non-profit association dedicated to educational advancement—who share the goal of championing education to transform lives and society.

## 5. Encouraging businesses, non-profit organizations and public enterprises to involve older persons as consumers

The aging of the baby-boom generation is the most influential demographic force shaping Canada's marketplace.<sup>15</sup> Seniors should therefore receive recognition as a significant consumer group with shared and specific needs, interests, and preferences. Governments, service providers and civil society should take into account the views of seniors on the design of products and delivery of services.<sup>16</sup>

Awareness-raising initiatives are underway at the federal and provincial/territorial levels. This will improve the circumstances for seniors with respect to access to services and consumer protections.

**Consumer Protection Ontario** is an awareness program from Ontario's Ministry of Government and Consumer Services and other public organizations, known as administrative authorities. It promotes consumer rights, including the rights of seniors, and public safety. The ministry and these administrative authorities enforce a number of Ontario's consumer protection and public safety laws, investigate alleged violations and handle complaints.

In Nova Scotia, every 2 years the Government of Nova Scotia hosts the **Silver Economy Summit**, a coming together of people from the business community, community organizations, academics, service providers, government, and older adults to confer on the economic opportunities present in an aging population. The Summit explores and celebrates the economic contribution of older adults to the economy as older workers, and entrepreneurs, as well as consumers of products and services.

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<sup>15</sup> Office of Consumer Affairs, [The Changing Age Structure of Canada's Consumers](#)

<sup>16</sup> UNECE, [Policy Brief – Older persons as Consumers](#)

## 6. Ensuring that older persons can attain and maintain their highest possible level of health and functional capacity by supporting the development of age-friendly environments and housing

The Government of Canada and provinces and territories are working to support the health and well-being of older Canadians, including through the promotion of age-friendly community initiatives.

An age-friendly community:

- recognizes that seniors have a wide range of skills and abilities
- understands and meets the age-related needs of seniors
- respects the decisions and lifestyle choices of seniors
- protects those seniors who are vulnerable
- recognizes that seniors have a lot to offer their community
- recognizes how important it is to include seniors in all areas of community life

The National Research Council of Canada (NRC) **Aging in Place challenge program** has 4 core focus areas; safety, health, connection and standards. Collaborative research and development projects within each focus area contribute to the overarching aim of enabling safe and healthy aging. The program aims to facilitate older adults to remain active and engaged members of their communities through the development of age-friendly innovations.

Since 2008, the Government of Quebec has been developing, coordinating, promoting and implementing the Age-Friendly Municipalities (AFM) approach and its financial support program. In 2021, more than 93.5% of Quebec's population lived in AFM communities. Furthermore, since 2012, the **Québec ami des aînés** (QADA) program has provided financial support for local, regional and provincial initiatives aimed at adapting living environments to the realities of older persons. This program promotes the participation of older persons in healthy, safe and welcoming environments to enable them to remain in their homes and communities for as long as possible. Between 2012 and 2020, more than a thousand projects with local, regional and national scope have been supported by this program.

In fiscal year 2020 to 2021, the Government of Yukon has increased operational funding by 200% to the **ElderActive Recreation Association**. ElderActive provides programs and services that engage older adults in their community. In addition, as of March 2021, ElderActive received an additional \$50K in funding over 5 years through the Yukon Northern Wellness Project (YNWP). YNWP is a partnership between the Government of Yukon, the Public Health Agency of Canada and an Non-



Governmental Organization (NGO) (Recreation and Parks Association of Yukon). Through this project, ElderActive will develop an inclusive walking program for Yukoners 55+.

The Government of **Nova Scotia's Age-Friendly Communities Grant Program** offers a funding grant to local governments and community organizations to engage in planning and projects that lead to more age-friendly and inclusive communities. The grant has 2 funding streams: Age-Friendly Communities planning initiatives, and community projects that focus on programs and supports for the inclusion of older adults in all aspects of society.

**Promising Practice from civil society – Aging your Way: Creating an Age-Inclusive Canada, Together': an educational speaker series brought to you by CanAge and Toronto Public Library**

**Organization: Canada's National Seniors' Advocacy Organization**

Toronto Public Library (TPL) is the busiest urban public library in the world and a leader in delivering innovative services to its customers of all ages and backgrounds. In October 2020, TPL and CanAge partnered to strengthen each organization's ability to support and better serve seniors. The goal is to develop more opportunities for seniors to learn, contribute to their communities and build an age-inclusive city. The first stage of this partnership is the launch of an Educational Speaker series: Aging your Way: Creating an Age-Inclusive Canada, Together. All talks are delivered virtually by TPL and will educate and empower older adults, and their caregivers, on a broad range of critical issues affecting their lives.

## 8. Encouraging longer working life and ability to work

An increasing number of seniors in Canada are choosing to remain in, or return to the paid labour market. They are doing so to manage their multiple financial responsibilities and, for some, to provide support to younger generations.<sup>17</sup> Across Canada, governments are thinking of ways to enable the active participation of seniors in the workforce and their communities.

This next section will present different measures that the federal, provincial and territorial governments and civil society organizations have put in place. These measures encourage longer working life based on specific Regional Implementation Strategy commitments.

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<sup>17</sup> The Vanier Institute of the Family, [Fact and Stats: Working Seniors in Canada](#)

## 1. Promoting lifelong learning opportunities

Different levels of government in Canada offer supports to promote lifelong learning opportunities, often through publicly funded training programs.

For instance, the Government of Canada has established **Labour Market Development Agreements (LMDAs)** and **Workforce Development Agreements (WDAs)** with provincial and territorial governments (PTs). These bilateral agreements support PTs to design and deliver employment programs and services to help Canadians upgrade their skills, gain work experience, and start their own businesses. Under the Employment Insurance (EI) - funded LMDAs, more intensive programming such as skills training and wage subsidies can be provided to unemployed individuals with ties to the EI program (current or former EI claimants, or based on EI premium contributions). Programs delivered under the WDAs provide skills training and employment programming with a focus on those further removed from the labour market and those wishing to upskill, allowing for targeted programming for persons with disabilities and older workers. These agreements include specific funding targeted for persons with disabilities, and can also be used to support members of underrepresented groups. Such groups may include Indigenous Peoples, youth, women, and members of racialized communities.

The Government of Canada is working directly with the provinces and territories, as well as third-party organizations, to provide life-long learning opportunities through the **Skills for Success Program**. In the development of the Skills for Success Model, 9 foundational and transferable skills were identified and validated. In addition to literacy and numeracy skills, the Skills for Success model includes skills such as digital skills, adaptability, collaboration, creativity and innovation which will help all Canadians, including seniors, to continue to adapt to a rapidly evolving labour market. Additionally, assessment and training tools developed through the program will be provided free of cost to all Canadians, including seniors. Using both in-person and digital methods, this program will facilitate reaching seniors at a place convenient for them and facilitate aging in place.

In British Columbia, the **Skills Training for Employment program for Older Workers 55+**, focuses on individuals who are 55 years of age or older. The programs seek to help individuals overcome barriers and achieve sustainable employment. Programs include skills training and employment supports based on the needs of the participant. Programs are available throughout British Columbia and are specifically designed for older workers. Programs include: From Retired to Rehired – Putting Your Experience to Work, Vintage Advantage, AMPED (Assisting Mature Persons in Employment Development), Experience Matters!, Experience Works, Encore – The 55+ Advantage, and Encore Careers.

The Yukon University, in partnership with the Canadian and Yukon governments, delivers the **Older Workers program**. Participants in this 13-week program are provided with opportunities to increase employability, develop skills and investigate career options. They also learn about Canadian labour

practices, participate in an extended work placement, and upgrade their work-related literacy and computer skills.

The Government of Prince Edward Island's first ever **Seniors Health and Wellness Action Plan for Seniors** includes measures to promote labor force participation of older workers such as raising employers' awareness on the benefits of hiring and retaining older workers. The plan also provides additional training for government employees and employment assistance service providers to support seniors and near seniors in finding employment opportunities.

In 2019, the Newfoundland and Labrador Government launched **The Way Forward on Workforce Development**. This is the provincial government's plan for strengthening the province's workforce and supporting a productive, knowledge-based economy. The plan considers the unique employment needs of Indigenous people, persons with disabilities, youth, older workers, women and newcomers.

In Quebec, in addition to the **Workforce Training Measure**, which helps individuals acquire marketable job skills so they can integrate and stay in the labour market, experienced workers also have access to the targeted initiative for older workers. This measure provides part-time and short-term retraining—a support measure for older workers facing obstacles in their job search.

## 2. Fighting unemployment at all ages, reducing financial inequalities, poverty, and the gender pay gap

Gender equality and diversity are fundamental to creating a thriving and successful country that reflects Canadian values and achieves its full potential. When every Canadian has the opportunity to succeed, all Canadians benefit. The past half century has seen major advancements in gender equality and diversity in Canada. Yet, the COVID-19 pandemic has put that progress at risk.<sup>18</sup>

In the labour market, women were hit harder, and their jobs continue to recover more slowly. The Government of Canada, through the Women's Program launched a \$100M Call for Proposals entitled **Feminist Response and Recovery Fund** on February 11, 2021. The Fund will allow organizations to respond to a wide range of issues in order to accelerate progress on gender equality. It will also help ensure that Canada's response to, and recovery from COVID-19, is inclusive of diverse women, including senior women.

In 2018, the Government of Canada released its' first-ever **Poverty Reduction Strategy**. The strategy is built on the vision that all Canadians should be able to live in dignity. Canada's strategy is built on the belief that all Canadians deserve to be treated fairly. This includes having the means and the abilities to grow and fully participate in the development of their communities, including

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<sup>18</sup> Government of Canada, [Budget 2021](#)

seniors. Overall, this strategy is comprised of investments to support the social and economic well-being of all Canadians. According to Canada's Poverty Reduction Strategy – An Update, a large number of seniors have been lifted out of poverty. In 2019, 349,000 seniors were living in poverty (5.4%), a decrease of more than 20% from 2015. This can be attributed to the increase to the GIS top-up for the lowest-income single seniors, implemented effective July 2016. Between 2015 and 2019, there was a decrease of 41,000 single seniors living below Canada's Official Poverty Line.<sup>19</sup>

In provinces and territories, several targeted programs have been put in place to improve access to employment opportunities for vulnerable population groups. This includes improving access for seniors. Programs focus on providing skills development and counselling services for workers who want to reintegrate into the labour market.

In Manitoba, **Age is an Asset** program assists older individuals with integration and re-integration into the labour market by providing 12 weeks of classroom-based training. It includes essential skills, job search, wellness, job-specific training, short-term certificate courses, self-esteem building, and a 2-week work experience opportunity.

Under its **Workforce Action Plan**, Quebec announced 2 actions for experienced workers: the implementation of a wage subsidy for experienced part-time workers, as well as a new measure that covers 85% of corporate costs (previously 50%) associated with developing ways to facilitate job hiring and retention, namely extending the working life of individuals.

In Ontario, the **Women's Economic Security Program** aims to assist low-income women to obtain training. This training equips them with the skills, knowledge and experience to find a job or start a small business and increase their financial security.

In Saskatchewan, the Ministry of Immigration and Career Training's **Workforce Development Program** assists eligible participants to prepare for, obtain and maintain employment. It provides a flexible range of individual and group supports, programs and services that enable participants to become job ready, attach to the labour market and maintain employment. The Program can include vocational assessments, counseling, job readiness, life skills, basic education, entry level skills, work experience, job coaching, job development and individualized employment related supports. Although the program is not specifically targeted at seniors, they are eligible to participate if they are legally entitled to work in Canada and face barriers to obtaining and maintaining employment.

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<sup>19</sup> Employment and Social Development Canada, [Poverty Reduction](#)

Further, in Saskatchewan, the Ministry of Immigration and Career Training's **Targeted Initiative for Older Workers (TIOW)** program supports workers aged 55 to 64 who are currently unemployed and are legally entitled to work in Canada, but lack the skills needed to successfully secure employment. This program helps individuals target jobs that capitalize on their transferable skills to increase income opportunities and find positions that fit their personal interests and lifestyle objectives at their current stage of life.

### 3. Encouraging employers to value the experience of, and to retain and hire, older workers

There are various barriers that prevent older workers from remaining employed or that could push them to retire. Some challenges that older workers are likely to face are:

- ageism
- lack of education and access to training
- difficulty in finding and applying for jobs
- health issues, work-life balance issues, and lack of workplace accommodations
- disincentives or lack of incentives to work in the retirement income system

To better understand the specific workforce challenges facing many older Canadians and to promote their labour force participation, the Forum of Federal/Provincial/Territorial Ministers Responsible for Seniors released the report entitled **Promoting the Labour Force Participation of Older Canadians – Promising Initiatives**.<sup>20</sup> This report offers key trends for older adult labour market participation, as well as challenges faced by them in the labour market. It also reviews initiatives implemented by governments and organizations to reduce barriers to older worker participation and encourage them to keep working. Finally, it identifies promising initiatives for promoting the labour force participation of older Canadians.

At the provincial level, the Government of Nova Scotia collaborated with the Nova Scotia Centre on Aging at Mount Saint Vincent University to engage in research into the barriers to older worker employment in the province. This work helped strengthen the supports for older workers at the province's employment centres. The centres employ employer engagement specialists who work

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<sup>20</sup> Employment and Social Development Canada, [Promoting the Labour Force Participation of Older Canadians – Promising Initiatives](#)

directly with employers on recruitment and retention issues, including the benefits of hiring and keeping older workers in the workforce.

### Promising practices from civil society organization - Cog@Work

#### Organization: AGE-WELL Network of Centres of Excellence (NCE) – Canada’s technology and aging network

Cog@Work is a program that focuses on research and networking in order to enable employers to provide affordable, sustainable and inclusive workspace models for employees with mild cognitive impairment and dementia (MC|Dem). With an aging workforce and earlier detection comes an exponential rise in the number of workers who will develop MC|Dem on the job. To provide supports to workers with MC|Dem, the program build stakeholder partnerships in preparation for a real-world proof-of-concept, and progressive development of relevant supporting technologies that will emerge from the developmental evaluation of annual outputs. The impact of continuing employment for this “invisible” group of workers will support their rights and citizenship, and positively impact the overall economy while reducing costs to the social support system.

## 9. Ensuring ageing with dignity

Seniors are not a homogenous group, and the challenges they face in the protection or enjoyment of their human rights vary greatly. While some continue to lead active lives as part of their community, many others face homelessness, lack of adequate care or isolation.

A person’s health and well-being are essential to living as full a life as possible. Older adults are no exception. A good life entails participation in activities and experiences of meaningfulness and inclusion.

It is important to allow older persons to meet their fundamental human needs for socialization and self-fulfilment and help society to better face population aging. Currently, approximately half of older adults have restricted social participation. Because such participation is a critical element of older adults’ health, its decline has been associated with serious health outcomes. This includes a 29 percent greater risk of mortality.<sup>21</sup>

This next section will explore how federal, provincial and territorial jurisdictions, non-governmental organizations implemented measures that contributed to protecting seniors’ enjoyment of all human

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<sup>21</sup> Melanie Levasseur, *Policy Options*, [Social participation is critical to seniors’ health](#)



rights and dignity, promoting their autonomy, self-determination and participation in society based on specific Regional Implementation Strategy commitments.

### **1. Protecting older persons' enjoyment of all human rights and dignity, promoting their autonomy, self-determination and participation in society**

The Government of Canada works closely with provincial and territorial governments, the World Health Organization (WHO) and other stakeholders to promote and advance **Age-Friendly Communities (AFC)** in Canada and globally. The federal government supports the development of the AFC model across Canada. They do so by convening partners, and providing tools and resources to provincial and territorial governments, non-governmental organizations and promoting exchange of best practices between all level of governments and the international community.

Canada's **Dementia Strategic Fund: Awareness Raising Initiatives** focuses on reducing the risk of dementia, reducing stigma, and encouraging and supporting communities to be more dementia-inclusive. Projects aim to ensure people living with dementia and caregivers can continue to be active and engaged in their communities, supporting quality of life.

Provinces also have mechanisms in place to protect seniors' enjoyment of human rights. For example, in Manitoba, The **Manitoba Human Rights Commission** takes complaints from persons who experience discrimination on the basis of age and age related characteristics or grounds. The Commission mediates and investigates these complaints of discrimination. Substantiated complaints move forward at a hearing where, if proven, orders are made to remedy the discrimination. The Commission also promotes human rights principles through its policy, research and advocacy work. In 2020, the Commission released a research report entitled "A Human Rights Based Approach to the COVID-19 Pandemic: Principles and Actions". The report outlines the impacts of the COVID-19 pandemic on seniors in Manitoba and outlined steps to lessen the disproportionate impact of this public health emergency on older people.

### **Promising practice from civil society organization - Resilience Training for English-speaking seniors in Quebec**

#### **Organization: Seniors Action Quebec (SAQ)**

SAQ's Resilience project is a series of train-the-trainer modules accessible online to members focused on teaching resilience skills (such: as resilience and self-awareness; strength of character; competence and confidence; contribution; connection; coping and control) to Quebec's English-speaking seniors.

## 2. Supporting the necessary infrastructure and assistance to prevent all types of abuse and violence against older people

The abuse of older people remains an often hidden but serious social problem that affects the lives of thousands of seniors in Canada. In 2015, more than 9,900 seniors (65 years and older) were victims of police-reported violent crime in Canada. Of these victims, 1 in 3 (33%) were victimized by a grown child, spouse, sibling or extended family member (a rate of 60 per 100,000 population). 6 in 10 (60%) of senior victims of family violence were female, with a rate 26% higher than that of male seniors.

Overall, senior victims of police-reported family violence were most likely to have been victimized by an extended family member (30%), a grown child (30%) or a spouse (28%). Physical assault was the most common form of police-reported family violence against seniors.<sup>22</sup>

The Government of Canada recognizes that elder abuse is a serious issue affecting many older people in Canada. The *Criminal Code* contains a comprehensive set of offences and sentencing provisions to address the abuse and neglect of seniors. Recent sentencing amendments to the *Criminal Code* specifically address factors, which increase the vulnerability of older victims. The first amendment requires courts to consider it an aggravating factor, when sentencing an individual for the offence of fraud, that the offence “had a significant impact on the victims given their personal circumstances including their age, health and financial situation”. The second amendment codified the common law and requires the court to consider it an aggravating factor where evidence shows that an offence had a significant impact on the victim, having regard to age, and other personal circumstances such as health and financial situation (for all *Criminal Code* offences not just specifically to fraud cases).

In 2017, the Government of Canada launched ***It's Time: Canada's Strategy to Prevent and Address Gender-Based Violence***, and committed more than \$219 million to prevent gender-based violence (GBV), support survivors of GBV and their families, and promote response from the legal and justice systems. Through this funding, a 10-year, National Housing Co-investment Fund was established, to give more Canadians a place to call home. The funding is supporting the creation or repair of at least 7,000 shelter spaces for survivors of family violence. Additionally, more than \$50 million was invested to develop promising practices to support survivors and their families. To date, more than 345 new partnerships have been created to develop training on cultural safety and trauma informed service delivery, transform care for LGBTQ2S survivors of GBV, and pilot new supports to help survivors of GBV navigate the legal system.

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<sup>22</sup> Statistics Canada, [Police-reported family violence against seniors](#)



The COVID-19 pandemic has created unprecedented challenges for those experiencing gender-based violence and the organizations that provide supports and services to them. To support Canada's most vulnerable people, in fiscal year 2020 to 2021, the Government of Canada invested \$100 million in **COVID-19 Emergency Response** funding for more than 1,200 shelters, sexual assault centres and women's and other organizations, who provided supports and services to over 1.1 million women and children experiencing gender-based violence.

Provinces have also established initiatives that support the prevention of abuse and violence against seniors. For example, in British Columbia, the **BC Association of Community Response Networks** facilitates elder abuse prevention and education activities. It also works with community-level organizations throughout British Columbia to better prevent and respond to elder abuse. As of March 2020, there were 81 Community Response Networks (CRN). This includes:

- a provincial Francophone CRN
- LGBTQ CRNs on Vancouver Island and on the Lower Mainland
- several Aboriginal CRNs, active in 233 BC communities

In Quebec, the ***Act to combat the maltreatment of seniors and other persons of full age in vulnerable situations*** received assent on May 31, 2017. In addition, on World Elder Abuse Awareness Day, on June 15, 2017, the "**Plan d'action gouvernemental pour contrer la maltraitance envers les personnes âgées de 2017 à 2022**", the government's action plan to address abuse of older persons, was announced. This plan reflects the desire to mobilize all players concerned to create a society that is more respectful, inclusive, and caring for older persons. 2 priorities for action were proposed, namely promoting good treatment and combating material and financial abuse.

In Newfoundland and Labrador, **The Respect Aging Project** is designed to educate and train various audiences in the recognition and prevention of, and intervention in violence against seniors. The project's vision is that all seniors in this province should live free from fear, exploitation and violence. They should be able to enjoy safe and supportive communities. Respect Aging is part of the Violence Prevention Initiative and training is delivered by the Violence Prevention Newfoundland and Labrador organizations throughout the province.

Through its **Seniors' Safety Grant program**, Nova Scotia funds community-based Seniors' Safety Programs (SSPs) across the province. These programs address the safety concerns of older adults by promoting education and awareness about senior abuse prevention, crime prevention, and safety and health issues. The Programs enhance communication between older adults and the police by providing information, educational sessions, and referral services to older Nova Scotians through direct contact with the Seniors' Safety Coordinator via home visits and phone calls.

During the first wave of the COVID-19 pandemic, Nova Scotia provided emergency funding to assist SSPs in providing direct support to older adults left vulnerable by pandemic isolation. The flexibility of this funding allowed individual SSPs to respond quickly to specific needs of individuals in their communities.

In March 2021, the Alberta government provided \$750,000 over 2 years to the **Alberta Elder Abuse Awareness Council**, to provide one-time funding to the province's 31 eligible coordinated community responses (CCRs) to elder abuse. CCRs are multidisciplinary partnerships that can include a range of partners such as local governments, non-profit organizations, businesses, health service providers, and police services.

### **3. Fostering the development of innovative methods and services as well as user and age-friendly technology**

Technology is having an impact on all aspects of Canadians' lives, changing the way we shop, work and receive services. Technology offers a unique occasion to improve the health and quality of life of seniors, create more sustainable health-care solutions, and open up new possibilities for businesses and government.<sup>23</sup>

In 2018, the Government of Canada invested \$75 million for the **Healthy Seniors Pilot Project** (HSPP). The project aims to foster healthy aging, increase independence and quality of life, ensure seniors are enabled to live safely and securely in their homes with appropriate supports and care, and to disseminate best practices to support healthy aging.

In 2018, the Alberta government launched the **Aging Well in Community** grant program. The program helped local organizations improve the lives of seniors by funding community-based initiatives, which helped to remove barriers for seniors to stay in their homes and engaged in their communities. The grant program was guided by the following principles: collaboration, innovation, sustainability, and evidence-based.

Successful applicants received grants for project-based proposals to develop programs, services, pilot and research projects. The program will help address issues such as ageism, social inclusion, elder abuse prevention, and age-friendly communities.

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<sup>23</sup> AGE-WELL, [The Future of Technology and Aging in Research](#)

#### 4. Raising quality standards for integrated social and long-term care and health services and continuously adapting the status, training and working conditions of professional care workers

Canada's publicly funded health care system is dynamic. Over the past 4 decades, governments reformed the system to continue responding to changes impacting our society. The foundation remains the same, universal coverage for proper health care services provided on the basis of need, rather than the ability to pay. The federal, provincial and territorial governments share roles and responsibilities in health care.

The traditional primary health care model has served Canadians well. However, the aging population, rising rates of chronic disease, and other changing health trends have highlighted the need for the health care system to maintain and continue to develop the capacity to respond to the changing needs of Canadians.<sup>24</sup>

#### Integrated social and long-term care and health services

##### Integrated social and health services

Several integrated care strategies, processes and models of integrated social and health services have emerged across Canada, particularly since 2000. Integrated delivery systems have been part of the planning and delivery of health services in most Canadian provinces since the 1970s, largely to address service fragmentation, system inefficiencies, and escalating costs. To address these issues, all provincial governments, with the exception of Ontario, have established regional health authorities.<sup>25</sup>

In Ontario, the government is taking further steps to build an integrated, connected health care system centered on the needs of patients. **Ontario Health Teams** are being introduced to provide a new way of organizing and delivering services in local communities. Under Ontario Health Teams, the health care providers (including hospitals, doctors and home care providers) will work as 1 coordinated team — no matter where they provide care. On February 25, 2020, the government announced its plan to modernize the delivery of home and community care with Ontario Health Teams. The teams will gradually be assuming responsibility for care delivery within an integrated and patient-centred service model. The Ontario government will continue working with its health care partners until Ontario Health Teams are fully established across the province and everyone is supported by a team.

<sup>24</sup> Health Canada, [Canada's Health Care System](#)

<sup>25</sup> Izzat Jiwani, PhD and Marie-Josée Fleury, PhD, Associate Professor, *Integrated Journal of Integrated Care*, [Divergent modes of integration: the Canadian way](#)

## Long-term care

According to census data, almost 160,000 people lived in Canada's long-term care (LTC) facilities in 2016.<sup>26</sup> Although the *Canada Health Act* defines the health services that must be included by each provincial health insurance program in order to qualify for federal funds, LTC is not included. Instead, LTC is considered an extended health care service. Long-term care facilities across Canada are a mix of publicly and privately owned facilities governed by provincial/territorial legislation. Publicly owned LTC facilities are all not-for-profit, and privately owned ones can be either for-profit or not-for-profit.<sup>27</sup>

All provincial and territorial governments have in place legislation, regulation, and standards governing LTC facilities.

For example, in Manitoba, all 125 licenced personal care homes (Long-Term Care beds) must meet a minimum set of standards to ensure safe and proper care to residents. The Personal Care Home Standards and Licensing Regulation under *The Health Services Insurance Act* sets out these standards. Under this legislation, Manitoba Health and Seniors Care licences and monitors all personal care homes. They regularly review facilities. Any problems or concerns found during a review must be corrected within a specified time.

In Yukon, the government operates all 4 long-term care homes. They are accredited by Accreditation Canada for meeting national standards of excellence in quality care and service.

Alberta's Continuing Care Health Service Standards (last updated in 2018) apply to home care and facility-based continuing care. These standards guide staff in providing quality, comprehensive, individualized care based on the assessed needs of each client. Compliance with the standards is required for publicly funded continuing care service providers and inspection and audits are conducted regularly.

The COVID-19 pandemic has shone a light on systemic issues affecting long-term care facilities across the country. To start addressing these issues, in summer 2020, the Government of Canada provided funding of \$740M to provinces and territories through the **Safe Restart Agreement** to support vulnerable populations, including infection prevention and control measures to protect those in long-term care, and those receiving home care and palliative care. In addition, the Government of Canada adapted its Investing in Canada Infrastructure program to respond to the impacts of COVID-19. A new temporary COVID-19 Resilience stream has been created to provide provinces and

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<sup>26</sup> Library of Parliament, [Long-Term Care Homes in Canada – How are They Funded and Regulated?](#)

<sup>27</sup> Library of Parliament, [Long-Term Care Homes in Canada – How are They Funded and Regulated?](#)

territories with added flexibility to use existing resources to fund quick-start, short-term projects, including health infrastructure such as long-term care homes.

Additionally, the Government of Canada provided funding of \$6.4 million over 2 years, starting in fiscal year 2020 to 2021, to Healthcare Excellence Canada (formerly the Canadian Foundation for Healthcare Improvement and the Canadian Patient Safety Institute) to expand its LTC+ initiative. This initiative supports pandemic preparedness in over 1500 long-term care facilities and seniors residences with coaching and seed funding to help address gaps in infection prevention and control.

The Government of Canada welcomed the news that 2 independent standards development organizations, the Health Standards Organization and Canadian Standards Association, are launching a process to help address systemic issues affecting long-term care facilities across the country. Working closely with the Standards Council of Canada, their work to develop 2 new complementary national standards for long-term care will help inform ongoing discussion with provinces and territories on improving the quality of life of seniors in long-term care.

In September 2020, CIHR and national and provincial partners, including Healthcare Excellence Canada, launched the **Strengthening Pandemic Preparedness in Long-Term Care**. This investment of \$3.4 million supported 22 implementation science teams to collaborate with long-term care homes to evaluate the implementation and sustainability of promising practice interventions and policies designed to improve pandemic preparedness within long-term care.

As such, Canada launched in December 2020 the Long-Term Health Care (LTHC) pilot project to help address labour shortages in long-term and home care (\$38.5M over 2 years). The pilot project will:

- test a new recruitment and training model for supportive care assistants (online training, work-integrated learning and a micro-credential)
- develop a pathway to assist new workers to upgrade their micro-credential to a full certificate to pursue career advancement
- explore how to improve consistency across the sector with respect to training programs, work requirements, and core competencies, with a goal of creating common standards

## **5. Supporting research on individual and population ageing processes to better address emerging needs in ageing society**

Research is important to improving the health and well-being of seniors. The Canadian Institutes of Health Research (CIHR) invests in research related to the health of older adults through its Institute of Aging. Between fiscal years 2015 to 2016 and 2019 to 2020, CIHR invested \$450 million in research related to aging, including 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. For example, in 2009, CIHR established the Canadian Longitudinal Study on Aging (CLSA), which will generate much needed evidence in understanding the determinants of healthy aging to help guide decision makers in creating evidence-based opportunities to improve the health of all Canadians to age healthy.

Additionally, in 2014, CIHR began funding the **Canadian Consortium on Neurodegeneration in Aging** (CCNA). This initiative brings together over 300 researchers and clinicians from across Canada with the goal of accelerating progress in research on age-related neurodegenerative diseases, including Alzheimer's disease and other dementias.

The Government of Canada plays an active role in promoting innovation in the development of age-friendly technology. For instance, the Government of Canada invested \$44 million over 6 years (2015 to 2021) in the **Centre for Aging and Brain Health Innovation** (CABHI). CABHI supports the development, testing, and commercialization of products and services to support brain health and aging, with a focus on dementia.

In 2017, the British Columbia Ministry of Health supported the **Raising the Profile project**. The research activities within the project were conducted to expand knowledge of the community-based seniors' services sector in BC and to build its capacity. A final report provides frameworks for understanding and key evidence on the sector's role in promoting health, well-being and resilience for seniors.

### **Promising practice from civil society organization - Initiative OA-INVOLVE**

#### **Organization: AGE-WELL Network of Centres of Excellence (NCE) – Canada's technology and aging network**

OA-INVOLVE establishes models of best practice for the active involvement of older adults in aging and technology projects to support technology development that is trans-disciplinary and 'fit for purpose' for improving the independence, health, wellbeing and quality of life of older adults.

### **6. Promoting the participation of both persons with dementia and or mental and behavioural disorders and their informal carers in social and community life**

The number of Canadians living with dementia is rising steadily, creating a higher demand on caregivers and health care systems across the country.



In 2016-2017, more than 432,000 seniors (65 years and older) were living with dementia in Canada. 2/3 of Canadians diagnosed with dementia over the age of 65 are women.<sup>28</sup> Emerging research indicates that non-modifiable risk factors for dementia, such as genetics, impact women significantly more than men. In 2011, \$8.3 billion was the estimated annual total health care costs and out-of-pocket caregiver costs of dementia in Canada. By 2031, it is estimated that these costs will double to \$16.6 billion.<sup>29</sup>

Canada's national dementia strategy, released in June 2019, identifies common principles and national objectives to help guide dementia-related actions by all levels of government, non-governmental organizations, communities, families and individuals. Federal investments in support of the strategy includes funding of \$50M over 5 years beginning in 2019. Most of this funding (\$40M) is being administered through the **Dementia Strategic Fund (DSF)**, which supports a variety of activities, including the development and implementation of:

- a national public education/awareness campaign
- targeted awareness raising initiatives
- initiatives that support access to and use of dementia guidance

Moreover, the Government of Canada established the **Dementia Community Investment (DCI)** (\$4 million per year) in 2018 to support community-based projects that address the challenges of dementia by developing, testing, disseminating and scaling up initiatives, knowledge and tools. Initiatives funded through the DCI aim to optimize the well-being of people living with dementia and family/friend caregivers. These initiatives also aim to increase knowledge about dementia and related risk and protective factors.

Provinces and territories are also playing a leading role in supporting people with dementia and their caregivers.

Alberta, Saskatchewan and the Northwest Territories are providing funding to their respective Alzheimer Society organizations (ASOs). ASOs offer programs and support services, in communities and provide public awareness and knowledge of dementia.

**Ontario's Dementia Strategy** is a series of investments for community-based services to enable the community dwelling dementia population and their families to live well in the community. The

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<sup>28</sup> Public Health Agency of Canada, [2020 Report to Parliament on the National Dementia Strategy](#)

<sup>29</sup> Public Health Agency of Canada, [A Dementia Strategy for Canada: Together We Aspire](#)

Government of Yukon, in partnership with Yukon University, provides a free training program for caregivers called **Shine a Light on Dementia**.

## **7. Respecting the self-determination, independence and dignity of older persons, especially, but not limited to, towards the end of life**

Over the years, the federal government has taken action to improve access and quality of palliative care through different policies, funding support and research.

On December 4, 2018, the federal Minister of Health tabled the [Framework on Palliative Care in Canada](#) in Parliament. It presents a common vision and guiding principles, as well as short, medium and long term goals related to:

- training and education for health professionals and other caregivers
- ways to support palliative care providers
- promoting research and data gathering
- ways to support access to palliative care no matter where you live

Under the federal *Criminal Code*, the Canada's **Medical Assistance in Dying (MAID) law** provides exemptions for medical and nurse practitioners that provide MAID and establishes the eligibility criteria that must be met and safeguards that must be applied before MAID can lawfully be provided. This law was enacted in June 2016 and was recently amended in March 2021, broadening access to eligible Canadians for whom their natural deaths may or may not be reasonably foreseeable. The [revised law](#) considers a range of interests brought forward during a 2020 public consultation process. Among these interests, self-determination for older and chronically ill adults, personal autonomy, access to health services, and the protection of vulnerable persons were of importance to the majority of Canadians.

In Canada, the provinces and territories are responsible for the delivery of healthcare services and the implementation and enforcement of the *Criminal Code*. As such, each jurisdiction has taken its own approach to the organization and delivery of MAID services that best meets their unique population needs and existing healthcare delivery system.



The federal Minister of Health also created regulations to support data collection and reporting on both requests for, and the provision of, MAID in Canada. Health Canada produces [annual reports on MAID in Canada](#)<sup>30</sup> that provide the public with information on:

- who is requesting MAID
- why MAID is requested
- circumstances when MAID is provided or when it is not provided

The 2020 Annual Report on MAID in Canada reported that the average age of persons at the time of receiving MAID was 75.3 years. This is similar for both men (75.0 years) and women (75.5 years) at a national level. Cancer (69.1%) was the most commonly cited underlying medical condition in the majority of MAID cases. As well, the majority of those that received MAID received palliative care (82.8%), or had access to palliative care services if they wished (88.5%).

Most provincial and territorial governments have strategies or policies that address improvements to palliative care.

For example, the Government of Alberta is responsible for ensuring **Medical Assistance in Dying** (MAID) services are provided in compliance with the *Criminal Code* and that quality and safety standards are met. For example, **British Columbia Palliative Care Benefits** support British Columbia's residents of any age who have reached the end stage of a life-threatening illness to receive palliative care at home. Benefits include coverage for eligible palliative care medications, medical supplies and equipment.

## 8. Respecting the self-determination, independence and dignity of older persons

Canada is committed to enhancing life-long physical and mental health and well-being, maintaining independent living and expanding the participation of seniors in society.

One way to support seniors' independence is age-friendly environments. Providing age-friendly environments and opportunities for older Canadians can enhance seniors' independence and quality of life. To help communities with this process, the Government of Canada in collaboration with key partners developed the **Pan-Canadian Age-Friendly Communities Milestones**. These milestones describe the steps a community needs to follow to successfully apply the age-friendly Communities model in Canada.

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<sup>30</sup> Health Canada: [Health Canada Annual Reports on Medical Assistance in Dying](#)

At the provincial level, the Government of Nova Scotia introduced The ***Life Partners in Long Term Care Act*** in February 2020. This Act enshrines in legislation the right for spouses who are both eligible for admission to a Department of Health and Wellness licensed and funded long-term care (LTC) facility to be placed together, regardless of the level of care at which they have been assessed, so long as they both require facility-based care.

In the summer of 2019, the Government of Ontario conducted broad province-wide consultations with seniors, family members, caregivers and support organizations. The consultation resulted in more than 8,000 interactions with a diverse spectrum of people across the province. This includes more than 5,000 people aged 65 years or older. The government is closely reviewing the feedback collected and will use it to inform a cross-government strategy to help improve the lives of older Ontarians to:

- age at home and in communities
- remain healthy, active and socially engaged
- stay safe and secure
- participate in the labour market and economy, if they choose

### **Promising practice from civil society organization - AVOID Frailty – Take Control Public Health Campaign**

#### **Organization: Canadian Frailty Network (CFN)**

Working with CFN's pan-Canadian network of researchers/clinicians and experts in frailty and aging, CFN has developed AVOID Frailty – Take Control – a self directed program which educates older adults on evidence-based steps that they can undertake to avoid frailty, dementia and chronic illness in their later years. The Acronym AVOID stands for A-activity/exercise (which also includes sleep and falls prevention), V-Vaccinate, O-Optimize Meds, I – Interact socially, and D-Diet and Nutrition.

CFN is also working with a retail pharmacy chain in Canada to pilot the AVOID Frailty-Take Control healthy aging assessment in select pharmacies across Ontario. If the pilot is successful, they would be looking at ways to implement the AVOID Frailty-Take Control healthy aging assessment across Canada. In doing so, the initiative is enabling pharmacists to intervene and help older adults find programs and services in the AVOID Framework, thus enabling them to live well longer, working longer if they choose and live with dignity on their own terms.

## Human Rights of Older Persons

The Canadian Charter of Rights and Freedoms, which forms part of Canada's Constitution, guarantees equality before and under the law and equal protection and benefit of the law, without discrimination based on age and other grounds, including, mental or physical disability, race, colour, religion, sex, and sexual orientation. These equality guarantees protected by the Charter apply to all government action in Canada, be it federal, provincial or territorial. Federal, provincial, and territorial statutes also prohibit discrimination in employment, access to goods and services, housing, and other areas, in both public and private sectors, on the basis of prohibited grounds of discrimination, including age. In addition, The *Canadian Human Rights Act*, which applies to areas of federal jurisdiction, explicitly recognizes the reality of intersectionality by prohibiting discrimination based on multiple grounds or on their compounded effects.

## 10. Indigenous elders

It is important to acknowledge that First Nations, Inuit and Métis communities, members recognize an individual as an Elder based not necessarily on age, but on wisdom, skills, lived experience and knowledge. Therefore, not all seniors are considered elders and not all elders are seniors. It is also important to note that First Nations, Inuit and Métis identities are vastly different, and so elders cannot be subsumed under a pan-Indigenous approach.

### The role of the Government of Canada

The Government of Canada recognizes the distinct cultural role of Indigenous elders and the unique contexts of Indigenous seniors – many of whom are impacted by colonial policies and practices such as forced displacement, Residential Schools, and exclusionary measures associated with the *Indian Act*.

The Government of Canada is committed to renew the nation-to-nation, Inuit-Crown, government-to-government relationship between Canada and First Nations, Inuit and Métis. The federal government is also modernizing its structures that will build capacity and support the vision of self-determination of First Nations, Inuit and Métis People.

In 2016, as part of its commitment to advancing reconciliation, the Government of Canada established permanent bilateral mechanisms with First Nations, Inuit and Métis Nation government representatives. These mechanisms help identify joint priorities, co-develop policy and monitor progress.

The Government of Canada provides funding to a broad range of programs that support First Nations, Inuit and Métis seniors.

For First Nations people, Inuit and Métis, the Government of Canada's **Assisted Living Program** provides non-medical, social support services to people living on-reserve with chronic illness or

disability, including seniors. The program helps seniors maintain their independence for as long as possible in their home and communities. This further empowers Indigenous communities to provide culturally appropriate care and supports in their traditional languages. This reduces the incidence of social isolation among on-reserve seniors while promoting the transmission of ancestral knowledge.

To ensure culturally sensitive palliative care on reserve and in Inuit communities, the Government of Canada put in place the **First Nations and Inuit Home and Community Care** program. The program provides a range of basic home and community care services for First Nations people and Inuit. This program is community-based and community-driven and provides services that are culturally sensitive, accessible, and responsive to the unique health and social needs of First Nations people and Inuit. The 2017 federal budget announced an additional \$185 million over 5 years in investments for home and palliative care. This investment aims to enhance the home care program and provide communities with access to palliative care services. In fiscal year 2019 to 2020 the Home and Community Care Program served 20,000 clients to assist them with living in their communities with a high quality of life.

To support Indigenous communities during the COVID-19 pandemic during the past year, the Government of Canada has allocated more than \$1.1 billion for the **Indigenous Community Support Fund**. The fund helps support Indigenous communities and organizations to respond to short term COVID-19 related needs. This includes funding to support seniors during the pandemic, including funding to address food insecurity, reduce social isolation, and provide mental health related supports.

## 11. Canada's international engagement

The Government of Canada actively engages in international initiatives aimed at strengthening the rights of older persons, such as the:

- United Nations (UN) Open-Ended Working Group on Ageing (OEWGA)
- UN Decade of Healthy Ageing
- UN 2030 Agenda for Sustainable Development
- Global Campaign to Combat Ageism

### Canada's participation in the OEWGA

The Government of Canada has been participating in all sessions of the UN OEWGA since its first session in 2011 and has contributed substantive input to various topics discussed as part of the sessions. Many initiatives undertaken by the Government of Canada contribute directly to advancing the rights of older persons. They include measures to encourage retirement savings, international

social security agreements, publicly managed pensions, the launch of Canada's first Poverty Reduction Strategy, and the creation of the New Horizons for Seniors Program.

### **Canada's participation in the UN Decade of Healthy Ageing**

The Government of Canada is working with partners across levels of government and civil society to raise awareness of the Decade of Healthy Ageing. The federal government is encouraging action on healthy aging and leveraging global efforts to address aging issues. Canada will also continue to work in partnership with WHO.

This past spring, the Government of Canada provided WHO with financial support to carry out 2 projects that will contribute to the promotion of the Decade. The first project, *Starting the Decade of Healthy Ageing 2020 to 2030 with the voices and engagement of older people*, will set the tone for the meaningful engagement of older people along with their families, caregivers and communities throughout the Decade.

The second project, *Guidelines to Develop and Sustain National Age-Friendly Programs*, will support new guidance on the growth and sustainability of age-friendly communities. The resources developed through this project will fill a key gap at the national level for many countries. It will also help to identify what initiatives work to deliver specific outcomes for older people.

### **Canada's efforts towards implementation of the Sustainable Development Goals**

On July 17, 2018, Canada presented its first Voluntary National Review (VNR) report at the United Nations High-level Political Forum. This report recognizes older persons as a group facing particular barriers. Data in the VNR presents specific issues for older persons, including an increased risk of having low incomes.

**In February 2021, the Government of Canada** launched *Moving Forward Together: Canada's 2030 Agenda National Strategy*. The objective of the strategy is to create and foster an enabling environment for ongoing participation, dialogue, and whole-of-society collaboration to drive progress on the 2030 Agenda and its 17 Sustainable Development Goals (SDGs). The National Strategy focuses on widespread, collaborative partnerships to support everyone in addressing challenges faced by marginalized groups and those living in vulnerable situations, including older persons. On July 13, 2021, the Government of Canada also released its *Federal Implementation Plan for the 2030 Agenda*, which articulates how the federal government will contribute to advancing the National Strategy.

The Government of Canada also developed and hosts an **SDG Data Hub** to report on Canada's progress against the Global Indicator Framework for the Sustainable Development Goals and targets of the 2030 Agenda for Sustainable Development. It also hosts a Canadian Indicator Framework, which lays the foundation for Canada to track and report on its progress on the 17 SDGs. Where relevant and available, the indicators are disaggregated by age.

Given the overarching principle of leaving no one behind, older persons are relevant to all SDGs, and can be further supported by policy measures related to:

- SDG 1: No Poverty
- SDG 3: Good Health and Well-being
- SDG 4: Quality Education
- SDG 5: Gender Equality
- SDG 8: Decent Work and Economic Growth
- SDG 10: Reduced Inequalities
- SDG 11: Sustainable Cities

### **Canada's participation in the global campaign to combat ageism**

The Age-Friendly Communities model in Canada focuses on 8 domains to improve the quality of life of older people. The respect and social inclusion domain helps to promote the contribution of older people to society while indirectly combatting ageism. As part of its 2018 to 2021 work plan, the National Seniors Council (NSC) is also exploring ways to counteract ageism. The government has asked the NSC to examine how older adults and aging are depicted through a review of the literature as well as in media. The NSC will also propose strategies to reframe the discourse in ways that counteract ageism, empower older adults, and change the way people perceive the aging process.

### **Special measures/policies jurisdictions have put in place to counteract ageism in society, be it at the workplace or in the broader community**

As part of the approved Federal/Provincial/Territorial Seniors Forum's 2018-2021 Work Plan, the Forum is examining ageism and its social and economic impacts, is reviewing promising anti-ageism practices in Canada and internationally, as well as identifying the gaps in addressing ageism. More recently, the Forum initiated work on A Case Study on Ageism during the COVID-19 Pandemic. The case study will be integrated as an addendum in environmental scan that was initiated in 2019 and which is expected to be completed in fall 2021.

## 12. 20 Years of the MIPAA – most important achievements, challenges and opportunities

More Canadians are enjoying a healthy life well past the age of 65, participating actively in their workplaces, their families and their communities. Canadians are living longer than they ever have. 60 years ago, life expectancy was only 68.3 years for men and 74.2 years for women. In 2018, life expectancy had increased at least another 10 years for both genders. Long-term projections suggest this trend of increasing life expectancy will continue into the future.<sup>31</sup>

The current generation of older persons is better educated, with greater labour force attachment, retirement savings, and pension benefits than previous generations.<sup>32</sup>

In the past 20 years, Canada has designed policies and programs to meet the diverse needs of the older persons' population. The following are the major achievements that contributed to the implementation of the 3 MIPAA/RIS goals since its adoption.

### **Appointment of a Minister of Seniors**

In July 2018, the Government of Canada appointed a Minister of Seniors. The role of the Minister is to better understand the needs of Canadian seniors. It is also to ensure that federal programs and services are developed to respond to Canada's aging population and champion issues that affect them the most.

### **Canadian Longitudinal Study on Ageing**

To help better understand and prepare for the evolving needs of older Canadians, the Government of Canada, through the Canadian Institutes of Health Research, established and provides funding to the Canadian Longitudinal Study on Ageing. This national, large-scale, longitudinal study was established to enable research that moves beyond a single snapshot of the Canadian adult population. It aims to understand and observe the complex interplay between physical, social and psychological determinants of health over time and guide decision makers in creating opportunities for all Canadians to age in a healthy way.

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<sup>31</sup> Fraser Institute, [Our aging population—a serious problem for Canada](#)

<sup>32</sup> Bryan May, HUMA Committee, House of Commons, [Advancing Inclusion and Quality of Life for Seniors](#)



## Gender Based Analysis Plus

Supporting the implementation of GBA Plus across all federal departments and agencies has helped to ensure that the development of policies, programs and legislation includes the consideration of differential impacts on diverse groups of people in Canada, including seniors.

The Government of Canada has sustained its commitment to GBA as part of its strategy to advance gender equality since the ratification of the United Nations Platform for Action in 1995. The “Plus”, added in 2011, reflects that GBA is not just about sex and gender. It provides a framework to examine who is impacted by issues and what inequalities exist between and within groups. It guides analysis to contextualize various and intersecting factors such as: sex, gender, race, ethnicity, religion, age and, mental or physical disability.

GBA Plus is Canada’s approach to mainstreaming intersectional equality, diversity and inclusion considerations in all government initiatives. It informs public policy and program development and implementation, making them more responsive, inclusive and effective.

## 13. Challenges and opportunities

Like most developed countries, Canada population is aging. In 2016, for the first time ever, senior citizens, adults aged 65 and older accounted for 5.9 million people, while children, those aged 14 and younger accounted for only 5.8 million.<sup>33</sup>

Canada’s aging population will have impacts on different sectors of our society. The following section presents an overview of the challenges and opportunities of population aging in Canada. It also reflects the point of views of civil society organizations on the most important issues affecting seniors.

### Challenges of population aging

#### Retirement income system

While the retirement income system has been updated to meet the changing financial needs of older adults, its continuous review will be required to ensure that it remains affordable and that it continues to meet those evolving needs. Unlike many countries, Canada took action in the 1990s to ensure the long-term sustainability of their contributory pension plan in the face of an aging population. According to the Chief Actuary of Canada, the CPP is financially sustainable at the current contribution rate for at least the next 75 years.

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<sup>33</sup> [Canada's Aging Population](#)



## Healthcare systems

As Canadians live longer, they are more likely to experience chronic conditions. The Canadian Chronic Disease Surveillance System estimates that in 2021, the overall number of adults aged 65 years and older living with chronic conditions will be about 6.3 million.<sup>34</sup> As the Canadian population ages, we will probably observe increased healthcare costs and demands for care.

During the engagement process, participants noted that in many rural and remote communities, access to adequate primary health care was a challenge. For example, many elders/older Indigenous persons do not have access to doctors and proper culturally safe care. Participants identified systemic racism as an important barrier to elders/Indigenous seniors receiving proper care and medical supports.

## Economy

Canada may experience a declining workforce in the coming decades. Across all provinces and territories, population aging will move an increasing share of Canadians out of their prime working-age years and into their retirement years, resulting in slower growth in the labour force and impact on economic growth.<sup>35</sup>

## Long-term care

Most people would like to stay in their homes and have family members help them. However, this is not always possible and people may move into long-term care settings. It is estimated that between 2012 and 2046, long-term care cost could reach almost \$1.2 trillion.<sup>36</sup> It will be important that federal and provincial/territorial governments continue to collaborate to explore policy options for LTC funding. They will also have to find long-term solutions to ensure high quality of care.

During the engagement process, stakeholders recommended that the federal government establish national standards for long-term care. Several individuals expressed particular concern for the conditions in long-term care facilities and also noting that long-term care workers are burnt out. They called for increased wages for personal support workers; and suggested the government help facilities recruit personal support workers through immigration processes.

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<sup>34</sup> Public Health Agency of Canada, [Aging and chronic diseases: A profile of Canadian seniors](#)

<sup>35</sup> Office of the Parliamentary Budget Officer. [Fiscal Sustainability Report \(2021\)](#).

<sup>36</sup> Paula Arriagada, Statistics Canada, [The experiences and needs of older caregivers in Canada](#)

## Caregiving

Over the past few decades, as Canadians live longer and have fewer children, family structures are changing. As a result, older people could be left with fewer options for care and support as they age. Stakeholders also noted that caregivers are essential for ensuring that seniors can age in their communities. However, stakeholders noted that there is a shortage of paid caregivers in some parts of the country.

## Strengthening older people's rights

In recent years, there have been important international advocacy efforts calling for enhanced thinking and action on the human rights of seniors. Similar comments have been echoed during the consultation process. We heard from a number of stakeholders that Canada should consider supporting the development of a new, legally binding international instrument.

## Housing and age-friendly communities

During the consultation process, gaps in some of the 8 age-friendly city topic areas were identified. This includes the lack of affordable housing for older adults, especially in Northern communities, as an important issue. Stakeholders noted that access to transportation is a huge barrier for seniors' active participation in the community.

Civil society organizations raised several other issues that governments should pay attention to, such as:

- the creation of a national seniors' strategy
- protection of pension funds
- the establishment of universal pharmacare and dental care
- access to technology
- support for aging in place

## Opportunities of population ageing

Often, population ageing is described as increased healthcare costs, fiscal challenges, and supporting a growing number of individuals. However, the current demographic shift should also be seen as an opportunity. Older adults make significant contributions to society.

## Caregiving

According to a 2018 Statistics Canada study, 1.5 million caregivers were aged 65 and older and provided care or help to friends and family members with a long-term condition, a physical or mental

disability, or problems related to aging.<sup>37</sup> Furthermore, older adults have become an essential part of the modern labour market through their contribution of unpaid childcare. Without this support, many families would find it much harder, if not impossible, to navigate the complexities created by the fact that school hours rarely match working hours.<sup>38</sup> While caregiving can be time-consuming, it can also be a positive experience for many family caregivers, providing a sense of giving back to a loved one and an increased sense of competence and purpose in life. Among senior caregivers, more than half (55%) described their caregiving experiences as positive.<sup>39</sup>

## Volunteering

Older Canadians make important contributions through active participation in volunteer work and charitable donations. Based on the 2018 General Social Survey on Giving, Volunteering and Participating, younger Canadians had high volunteer participation rate. However, older adults, born between 1918 and 1946, contributed more hours to volunteering. Seniors' knowledge, experience and skills can be translated into meaningful involvement in their communities. Volunteers make a valuable contribution to economic activity in Canada. Although Canada is a wealthy country with various social programs, millions benefit from the services provided by volunteers. These services help communities prosper. Volunteering and helping others have been found to be positively associated with perceived happiness and life satisfaction among seniors.<sup>40</sup>

## Economic asset

Consumers 50 years and older are a growing economic force. They will transform multiple industries unlike any prior demographic shift in recent history. Older individuals are generally healthier than their peers in previous generations, which make them a major market of consumers. As markets change to meet their needs, new opportunities may arise. Older adults are not only consumers; they also contribute in meaningful ways to the labour force. Older employees provide emotional stability, complex problem-solving skills, nuanced thinking and corporate knowledge. Their talents complement those of younger counterparts. For some, staying longer in the workforce provides financial security, which helps them support the economy as taxpayers and consumers; their engagement enhances their own health and wellness.<sup>41</sup>

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<sup>37</sup> Paula Arriagada, Statistics Canada, [The experience and needs of older caregivers in Canada](#)

<sup>38</sup> Professor Ashwin Kumar, [Ageing Well: Policy Implications of Changing Demographics and Increasing Longevity in UK and Canada](#)

<sup>39</sup> Study: Volunteering counts: [Formal and Informal contributions of Canadians in 2018](#)

<sup>40</sup> Study: Volunteering counts: [Formal and Informal contributions of Canadians in 2018](#)

<sup>41</sup> Forbes: [Aging Populations: A Blessing For Business](#)

## 14. Lessons learned from managing the consequences and impacts for older persons in emergency situations: the COVID-19 pandemic

### Ensuring that difficult Health-care decisions affecting older people are guided by a commitment to dignity and the right to health

The COVID-19 pandemic presented numerous challenges to the health of seniors in Canada, prompting swift response from federal, provincial and territorial governments. In 2020, the annual Chief Public Health Officer's (CPHO) Report notes that while the COVID-19 pandemic has affected everyone, the health impacts have been worse for:

- seniors
- essential workers
- racialized populations
- people living with disabilities
- women

The report includes a Health Equity Approach to COVID-19 framework that proposes work in 4 high impact areas based on the consequences of COVID-19:

1. economic security and employment conditions
2. stable housing and healthy built environment
3. health, education and social service systems
4. environmental sustainability

This work needs to be supported by a foundation of tangible actions to eliminate stigma and discrimination. Examples of potential actions under the 4 areas that demonstrate a commitment to dignity and a right to health for older persons include:

- promoting safe and effective long-term care
- supporting healthy built environments
- supporting mental health

At a provincial level, jurisdictions moved to address the impacts on the pandemic in long-term care environments. For example, in March 2020, the Government of British Columbia modified policy

direction regarding temporary absences from long-term care homes. This change helped support families wanting to care for loved ones at home by extending the time that a resident can be temporarily absent while maintaining their bed and their waitlist position for a preferred care home. British Columbia also developed a COVID-19 Ethical Decision-Making Framework. The framework ensures that all people are treated fairly and guides difficult decision-making in the face of potentially limited health resources during the pandemic.

### **Strengthening social inclusion and solidarity of older persons during physical distancing**

“Physical distancing”, also known as “social distancing”, significantly affected seniors’ ability to see loved ones and participate in their communities. The Government of Canada implemented new flexibilities and made further investments for the **New Horizons for Seniors Program (NHSP)**. These changes helped respond to the pandemic and its impact on seniors, including strengthening social inclusion of older adults during physical distancing. The NHSP is a federal grants and contributions program launched in 2004. It is the single largest funding program to combat social isolation among seniors in Canada with an annual budget of \$70 million.

The NHSP took a number of steps to respond to COVID-19 and its impact on seniors. For example, in the spring of 2020, the Government of Canada provided all funded organizations with flexibilities to adapt their current project activities to support seniors impacted by COVID-19. Examples of project changes included:

- adapting in-person programming to virtual programs
- delivering groceries and other necessities
- making phone calls to isolated seniors

Early in the pandemic, provinces and territories also implemented initiatives to address the isolation of seniors. The Government of Manitoba launched a website registry called **HelpNextDoor** volunteer service. This website connects Manitobans who could provide volunteer assistance to others with those who needed assistance, for example:

- grocery shopping
- snow removal
- transportation to medical appointments

To address the challenges of isolation while in hospital, some Manitoba health care facilities reallocated patient education funding to obtaining technology, which would allow virtual visits. Manitoba health worked with long-term care facilities on the **Visitation Shelter Project**. The project

allocates resources to have external or internal rooms established, so families could safely visit loved ones in care, while keeping outside contacts to a minimum in the facility.

### **Integrating a focus on older persons into the socio-economic and humanitarian response to COVID-19**

The COVID-19 pandemic had numerous impacts with respect to the economy, social welfare, and humanitarian needs. Federal, provincial and territorial governments have worked with organizations to improve the response to COVID-19 and the quality of life for seniors. The federal government invested \$350 million through the **Emergency Community Support Fund**. The Fund, launched on May 19, 2020, supported charities and non-profit organizations that deliver essential services to those in need, including seniors. The federal government worked with 3 national intermediaries to deliver funding:

- the United Way Centraide Canada
- the Canadian Red Cross
- Community Foundations of Canada

The Fund's intermediaries channeled funds through their regional and local partners to local community organizations who support a wide range of vulnerable populations.

Provincial and territorial governments also worked with organizations to improve the response to COVID-19 and the quality of life for seniors.

Introduced by the Government of Quebec, the "**maison des aînés**" (home for older persons) concept is a major project to transform residential and long-term care services for older persons. A plan has been presented to transform some existing facilities into true living environments that are more focused on the overall needs of older persons. Many facilities will be renovated, while others will be rebuilt in line with a new, more humane, respectful approach to housing and care services.

### **Expanding the participation by older persons, share good practices and harness knowledge and data, in the context of COVID-19**

Governments have worked to share crucial best practises and data in the wake of COVID-19's impact on Canadians. A recent example of harnessing data throughout the pandemic is the innovative **Canadian Longitudinal Study on Aging** (CLSA). In 2020, the Government of Canada provided \$1.2M to the CLSA to support a special COVID-19 data module to support the collection of COVID-specific data from CLSA participants. The aim of the CLSA COVID-19 Module is to provide timely scientific evidence to develop public health strategies to mitigate the short- and long-term health effects of the pandemic on older Canadians.

In the context of supporting older Canadians in long-term care, as mentioned previously, CIHR and national and provincial partners, including Healthcare Excellence Canada, launched the **Strengthening Pandemic Preparedness in Long-Term Care initiative**.

The Government of Canada is also undertaking a **Rapid Review**. This is to understand the impacts of the COVID-19 pandemic on the prevalence, incidence and/or frequency of family violence (including elder abuse) and to identify and synthesize the evidence on public health interventions designed to prevent or reduce family violence during the pandemic. An online COVID-19 resource has been developed for seniors and caregivers. It links users to over 60 practical resources. It also provides information on how seniors can take care of their physical and mental health and help prevent COVID-19. The Government of Canada also developed **Infection Prevention and Control for COVID-19: Interim Guidance for Long-Term Care Homes**. It provides guidance on issues such as management of staff exposures and resident care and accommodation.

### **Promising practice from civil society organization - Study on the impacts of COVID-19 on older Canadians**

#### **Organization: International Longevity Centre - Canada**

International Longevity Centre – Canada (ILC Canada) is an independent, non-partisan, human rights organization which is part of the 16 country International Longevity Centre Global Alliance (ILC GA). In partnership with the LIFE Research Institute at the University of Ottawa, ILC Canada is undertaking a study entitled “Older Adult’s Experience of the COVID-19 Pandemic: Canada”. The research project is part of a larger international study involving 8 ILC GA countries and is focussed on how independent living older adults have experienced the COVID-19 pandemic. The data, based on a qualitative research design using interviews with older people, will be used to inform policy regarding public health response measures and supports for older people. In addition to specific country reports, the aim is to have the 8 countries come together to synthesize their findings.

At a provincial level, Ontario’s Ministry of Seniors and Accessibility (MSAA) supports exchanges of information between medical and academic researchers, other key ministries and health delivery agencies, retirement homes and other stakeholders. This has included close cooperation and data sharing through the Retirement Homes Regulatory Authority, local Public Health Units, the Ministry of Health and MSAA staff to address seniors’ needs and challenges throughout the pandemic and vaccine rollout. This has also included collaboration with the Canadian Institutes of Health Research to facilitate an international “Best Brains Exchange”, bringing together senior policymakers, researchers and implementation experts to discuss high-priority issues in retirement homes in Ontario during the pandemic.

In September 2020, Ontario also invested \$467,500 in the Older Adult Centres' Association of Ontario (OACAO) to administer a new **Seniors' Centres Without Walls Micro-Grant** program, and other capacity building initiatives, to support seniors' organizations in helping seniors stay connected to their



communities during the COVID-19 pandemic through telephone-based social and educational programs.

## 15. Conclusion and priorities for the future

According to the Statistics Canada 2016 census, for the first time seniors outnumber children in Canada, as the population experienced its greatest increase in the proportion of older people since the Constitution was adopted in 1867. This is due to the historic increase in the number of people over 65 — a jump of 20% since 2011.

Canadians are enjoying longer lifespans and better health than ever before. Older Canadians are better educated and more active in society. As reported by the 2016 General Social Survey on Canadians at Work and Home, older Canadians are more satisfied with their lives than those in younger age groups. Men and women in their 60s, 70s and 80s had higher average life satisfaction scores than men and women aged 20 to 59.

In the past 5 years, Canada has taken action to fulfil the commitments of the Lisbon Ministerial Declaration goals. This was achieved through collective efforts from federal, provincial and territorial governments, non-governmental organizations, and society as a whole.

Canada has strived to empower older adults to realize their full potential. This is achieved through initiatives that promote the participation of seniors in society. As a result, this allows seniors to share their knowledge and skills, support volunteerism, and create conditions for healthy and active aging.

Federal, provincial and territorial governments have also taken concrete steps to strengthen the economic security of older Canadians by making changes to the retirement income system. Canada has also supported older workers by putting measures in place that encourage lifelong learnings and remove barriers to participation to the workforce.

Canada is committed to protect older adults' enjoyment of all human rights and dignity. This is achieved by supporting them to live as long as possible in their place of choice and supporting research to address their needs.

As we know, the COVID-19 pandemic had a greater impact on older Canadians. It has also shone the light on systemic social issues that seniors were facing prior to the pandemic, especially in long-term care and other congregate residential settings. The Government of Canada is committed to support and work closely with provincial and territorial governments to address existing issues.

The importance of population aging and its global impacts have yet to be fully acknowledged. There is a need to raise awareness about not only global aging issues but also the importance of rigorous cross-national scientific research and policy dialogue that will help us address the challenges and



opportunities of an aging world. Preparing financially for longer lives and finding ways to reduce aging-related disability should become national priorities.<sup>42</sup>

Seniors are important contributors to society. They have a wealth of knowledge. They are important pillars of our communities, caregivers and important assets to our economy.

Canada is committed to respond to the opportunities and challenges of population aging and to promote the development of a society for all ages.

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<sup>42</sup> National Institute on Aging et al., [Why Population Aging Matters - A Global Perspective](#)

## 16. Annex A: Statistical Indicators on Active Aging in Canada

**Note:** The original tables were separated for accessibility reasons.

**Table A.1: Labour market (contribution of older adults through paid activities)**

| Indicator  | Variable          | Source   | 2005                                      | 2010                                      | 2015                                      | 2020                                      |
|--|-------------------|--|---|---|---|---|
| 1.1.<br>Employment rate for the age group 55 to 59 | Same as indicator | Labour Force Survey, annual estimates 2005, 2010, 2015, 2020 | Total: 64.7<br>Male: 72.4<br>Female: 57.2 | Total: 67.0<br>Male: 71.6<br>Female: 62.5 | Total: 69.1<br>Male: 74.4<br>Female: 63.8 | Total: 69.9<br>Male: 74.1<br>Female: 65.3 |
| 1.2.<br>Employment rate for the age group 60 to 64 | Same as indicator | Labour Force Survey, annual estimates 2005, 2010, 2015, 2020 | Total: 41.8<br>Male: 50.8<br>Female: 33.1 | Total: 46.0<br>Male: 52.5<br>Female: 39.6 | Total: 49.6<br>Male: 55.4<br>Female: 44.0 | Total: 50.6<br>Male: 57.5<br>Female: 43.9 |
| 1.3.<br>Employment rate for the age group 65 to 69 | Same as indicator | Labour Force Survey, annual estimates 2005, 2010, 2015, 2020 | Total: 16.7<br>Male: 22.3<br>Female: 11.6 | Total: 21.8<br>Male: 28.3<br>Female: 15.6 | Total: 23.9<br>Male: 29.7<br>Female: 18.4 | Total: 24.0<br>Male: 29.9<br>Female: 18.4 |
| 1.4.<br>Employment rate for the age group 70 to 74 | Same as indicator | Labour Force Survey, annual estimates 2005, 2010, 2015, 2020 | Total: 6.9<br>Male: 9.8<br>Female: 4.4    | Total: 9.8<br>Male: 14.5<br>Female: 5.6   | Total: 11.4<br>Male: 14.9<br>Female: 8.2  | Total: 12.4<br>Male: 17.0<br>Female: 8.3  |

**Table A.2.1: Participation in society (contribution of older adults through unpaid activities)**

| Indicator   | Variable  | Source   | 2004                                      | 2010                                      | 2013                                      | 2018                                      |
|---|---|--|---|---|---|---|
| 2.1.<br>Voluntary work by older adults (aged 55+) | Percentage of older population (aged 55+) providing unpaid voluntary work through organizations | Canadian Survey of Giving, Volunteering and Participating 2004, 2010, 2013, 2018 | Total: 37.1<br>Male: 36.8<br>Female: 37.3 | Total: 38.6<br>Male: 39.2<br>Female: 38.0 | Total: 36.9<br>Male: 37.5<br>Female: 36.3 | Total: 36.5<br>Male: 34.4<br>Female: 38.3 |

**Table A.2.2: Participation in society (contribution of older adults through unpaid activities)**

| Indicator   | Variable  | Source   | 2005                                      | 2010                                      | 2015                                      | 2020          |
|---|---|--|---|---|---|---------------|
| 2.2. Care to children, grandchildren by older population (aged 55+) | Percentage of older population (aged 55+) who provide care to children (at least once a week) | General Social Survey on Time Use 2005, 2010, 2015 | Total: 22.0<br>Male: 21.9<br>Female: 22.1 | Total: 20.3<br>Male: 19.4<br>Female: 21.0 | Total: 20.4<br>Male: 19.4<br>Female: 21.3 | Not available |

**Table A.2.3: Participation in society (contribution of older adults through unpaid activities)**

| Indicator  | Variable  | Source   | 2005                                      | 2010                                      | 2015                                      | 2020          |
|--|---|--|---|---|---|---------------|
| 2.3. Care to older adults by older population (aged 55+) | Percentage of older population (aged 55+) providing personal care to elderly (at least once a week) | General Social Survey on Time Use 2005, 2010, 2015 | Total: 19.3<br>Male: 19.5<br>Female: 19.2 | Total: 21.7<br>Male: 18.8<br>Female: 24.2 | Total: 22.5<br>Male: 20.8<br>Female: 24.1 | Not available |

**Table A.2.4: Participation in society (contribution of older adults through unpaid activities)**

| Indicator   | Variable  | Source  | 2003                                      | 2008                                      | 2013                                      | 2020          |
|---|---|---|---|---|---|---------------|
| 2.4. Political participation of older population (aged 55+) | Percentage of older population (aged 55+) taking part in the activities or meetings of a trade union, a political party or political action group | General Social Survey on Social Identity 2003, 2008, 2013 | Total: 20.5<br>Male: 27.1<br>Female: 14.8 | Total: 26.9<br>Male: 33.0<br>Female: 21.4 | Total: 20.9<br>Male: 25.2<br>Female: 17.0 | Not available |

**Table A.3.1.1: Independent, healthy and secure living**

| Indicator  | Variable   | Source  | 2005                                      | 2010                                      | 2014                                      | 2020          |
|--|--|---|---|---|---|---------------|
| 3.1. Physical exercise for older adults (aged 55+) | Percentage of people aged 55 years and older who were "active or very active" in their leisure time* | Canadian Community Health Survey 2005, 2010, 2014 | Total: 45.9<br>Male: 49.7<br>Female: 42.6 | Total: 45.3<br>Male: 48.6<br>Female: 42.3 | Total: 48.4<br>Male: 51.2<br>Female: 45.8 | Not available |

\*This proxy measure of physical activity is based on a series of questions on the frequency and duration of different leisure time physical activities that are combined to assign an average daily energy expenditure which is categorized into active, moderately active, and inactive. The indicator is the combination of "active or moderately active."

**Table A.3.1.2: Independent, healthy and secure living**

| Indicator  | Variable  | Source                                | Not Available | Not Available | Not Available | 2018                                      |
|--|---|---------------------------------------|---------------|---------------|---------------|---|
| 3.1. Physical exercise for older adults (aged 55+) | Percentage of people aged 55 years and older who met the Canadian Physical Activity Guidelines with 150 minutes or more of moderate to vigorous activity in the previous week | Canadian Community Health Survey 2018 | Not available | Not available | Not available | Total: 44.6<br>Male: 48.5<br>Female: 40.9 |

In 2015, the CCHS underwent a methodological and content redesign. The data on physical activities for adults was collected with a series of questions asking about the amount of moderate to vigorous activity done in the previous week, either during active travel, in leisure and recreation, or other. This data is not directly comparable to physical activity data collected in the CCHS up to 2014.

**Table A.3.2: Independent, healthy and secure living**

| Indicator  | Variable   | Source  | 2005                                      | 2010                                      | 2014                                      | 2019                                      |
|--|--|---|---|---|---|---|
| 3.2. Access to health and dental care (for those aged 55+) | Percentage of people aged 55 years and older who report no unmet need for medical and dental examination or treatment during the last 12 months preceding the survey | Canadian Community Health Survey 2005, 2010, 2014, 2019 | Total: 91.6<br>Male: 92.6<br>Female: 90.8 | Total: 90.5<br>Male: 90.9<br>Female: 90.2 | Total: 90.7<br>Male: 91.3<br>Female: 90.1 | Total: 96.7<br>Male: 97.0<br>Female: 96.4 |

This indicator is based on the Canadian Community Health Survey question "During the past 12 months, was there ever a time when you felt that you needed health care but you didn't receive it?" Note that medical and dental care are not specified. In 2015, the CCHS underwent a methodological and content redesign, use caution when comparing data from 2015 onwards with data from earlier cycles.

**Table A.3.3: Independent, healthy and secure living**

| Indicator   | Variable   | Source                    | 2006                                      | 2011                                      | 2016                                      | 2019 (only the 10 provinces)              |
|---|--|---------------------------|---|---|---|---|
| 3.3. Independent living arrangements (for those aged 75+) | Percentage of people aged 75 years and older who live in a single household alone or in a couple household | 2006, 2011, 2016 Censuses | Total: 84.4<br>Male: 91.8<br>Female: 79.4 | Total: 84.7<br>Male: 91.8<br>Female: 79.4 | Total: 85.2<br>Male: 92.0<br>Female: 79.7 | Total: 82.5<br>Male: 86.7<br>Female: 79.3 |

**Table A.3.4: Independent, healthy and secure living**

| Indicator  | Variable   | Source  | 2005                                      | 2010                                      | 2013                                      | 2019                                      |
|--|--|---|---|---|---|---|
| 3.4. Relative median income (for those aged 65+) | Ratio of the median equivalized disposable income of people aged 65 and above to the median equivalized disposable income of those aged below 65 | Historical Canadian Income Series 2005, 2010 and Canadian Income Survey 2015 and 2019 | Total: 89.9<br>Male: 93.6<br>Female: 87.1 | Total: 90.1<br>Male: 94.0<br>Female: 86.8 | Total: 91.2<br>Male: 95.1<br>Female: 87.6 | Total: 89.8<br>Male: 92.2<br>Female: 87.7 |

**Table A.3.5: Independent, healthy and secure living**

| Indicator                                 | Variable  | Source  | 2005                                      | 2010                                      | 2013                                      | 2019                                      |
|---|---|---|---|---|---|---|
| 3.5. No poverty risk (for those aged 65+) | 100 – Percentage of people aged 65 years and older who are not at risk of poverty (using the 50 percent of median income threshold) | Historical Canadian Income Series 2005, 2010 and Canadian Income Survey 2015 and 2019 | Total: 95.7<br>Male: 97.0<br>Female: 94.6 | Total: 94.1<br>Male: 95.1<br>Female: 93.3 | Total: 93.2<br>Male: 94.5<br>Female: 92.0 | Total: 92.7<br>Male: 93.9<br>Female: 91.6 |

**Table A.3.6: Independent, healthy and secure living**

| Indicator  | Variable  | Source        | 2005          | 2010          | 2013          | 2019          |
|--|---|---------------|---------------|---------------|---------------|---------------|
| 3.6. No severe material deprivation (for those aged 65+) | 100 – Percentage of people aged 65 years and older who are severely materially deprived (having an enforced inability to afford at least 4 out of the 9 selected items) | Not available | Not available | Not available | Not available | Not available |

**Table A.3.7: Independent, healthy and secure living**

| Indicator                                 | Variable   | Source  | 2004                                      | 2009                                      | 2014                                      | 2019                                      |
|---|--|---|---|---|---|---|
| 3.7. Physical safety (for those aged 55+) | Percentage of people aged 55 years and older who feel very safe or safe to walk after dark in their local area | General Social Survey on victimization 2004, 2009, 2014, 2019 | Total: 61.1<br>Male: 80.8<br>Female: 44.0 | Total: 67.8<br>Male: 86.1<br>Female: 51.6 | Total: 68.7<br>Male: 88.1<br>Female: 51.2 | Total: 76.1<br>Male: 87.7<br>Female: 65.4 |

**Table A.3.8: Independent, healthy and secure living**

| Indicator  | Variable   | Source        | Not Available | Not Available | Not Available | Not Available |
|--|--|---------------|---------------|---------------|---------------|---------------|
| 3.8. Lifelong learning (for those aged 55 to 74) | Percentage of people aged 55 to 74 who stated that they received education or training in the 4 weeks preceding the survey | Not available | Not available | Not available | Not available | Not available |

**Table A.4.1: Capacity and enabling environment for active aging**

| Indicator                      | Variable          | Source                                  | 2004 to 2006                              | 2009 to 2011                              | 2014 to 2016                              | 2017 to 2019                              |
|--------------------------------|-------------------|---|---|---|---|---|
| 4.1. Life expectancy at age 55 | Same as indicator | Custom Life Tables, Demography Division | Total: 27.8<br>Male: 25.9<br>Female: 29.6 | Total: 28.8<br>Male: 27.0<br>Female: 30.4 | Total: 29.3<br>Male: 27.6<br>Female: 30.8 | Total: 29.5<br>Male: 27.9<br>Female: 31.1 |

**Table A.4.2: Capacity and enabling environment for active aging**

| Indicator                              | Variable           | Source  | 2005                                      | 2010                                      | 2015                                      | N.A.           |
|--|--------------------|---|---|---|---|----------------|
| 4.2. Healthy life expectancy at age 55 | Same as indicator* | Life Tables, Canadian Community Health Survey, Census | Total: 17.9<br>Male: 17.7<br>Female: 18.5 | Total: 18.3<br>Male: 18.2<br>Female: 18.3 | Total: N.A.<br>Male: 18.6<br>Female: 18.4 | Not available. |

Healthy life expectancy at age 55 is conceptualized as “disability-free life expectancy including the institutionalized population,” using the Sullivan method with a single-year life table.

**Table A.4.3: Capacity and enabling environment for active aging**

| Indicator                                   | Variable  | Source  | 2005                                      | 2010                                      | 2014                                      | 2019                                      |
|---|---|---|---|---|---|---|
| 4.3. Mental well-being (for those aged 55+) | An index that measures self-reported feelings of positive happy moods and spirits | Canadian Community Health Survey 2005, 2010, 2014, 2019 | Total: 78.0<br>Male: 77.2<br>Female: 78.7 | Total: 76.6<br>Male: 77.0<br>Female: 76.3 | Total: 78.2<br>Male: 77.3<br>Female: 79.1 | Total: 77.9<br>Male: 76.9<br>Female: 78.9 |

This proxy measure is from the emotion component of the Health Utilities Index which asks “Would you describe yourself as being... happy and interested in life/somewhat happy/somewhat unhappy/unhappy with little interest in life/so unhappy, that life is not worthwhile”. This is not precisely what is asked for, but does include the emotion aspect that other possible indicators do not. The value shown represents those who answered being “happy and interested in life.” In 2015, the CCHS underwent a methodological and content redesign, use caution when comparing data from 2015 onwards with data from earlier cycles.

**Table A.4.4: Capacity and enabling environment for active aging**

| Indicator                                       | Variable  | Source  | 2005                                      | 2010                                      | 2012                                      | N.A.           |
|---|---|---|---|---|---|----------------|
| 4.4. Use of ICT by older adults (aged 55 to 74) | Share of people aged 55 to 74 using the Internet at least once a week | Canadian Internet Use Survey 2005, 2010, 2012 | Total: 36.4<br>Male: 38.1<br>Female: 34.8 | Total: 59.5<br>Male: 60.5<br>Female: 58.6 | Total: 67.0<br>Male: 67.2<br>Female: 66.7 | Not available. |

**Table A.4.5: Capacity and enabling environment for active aging**

| Indicator  | Variable   | Source   | N.A. | 2008                                      | 2013                                      | N.A.          |
|--|--|--|------|---|---|---------------|
| 4.5. Social connectedness of older adults (aged 55+) | Share of people aged 55 or more that meet socially with friends, relatives or colleagues several times a week or every day | General Social Survey on Social Identity 2008, 2013 (2003 data not comparable) | N.A. | Total: 75.7<br>Male: 72.9<br>Female: 78.1 | Total: 73.6<br>Male: 69.7<br>Female: 77.2 | Not available |

**Table A.4.6: Capacity and enabling environment for active aging**

| Indicator   | Variable   | Source  | 2005                                      | 2010                                      | 2015                                      | 2020                                      |
|---|--|---|---|---|---|---|
| 4.6. Educational attainment of older adults (aged 55 to 74) | Percentage of older people aged 55 to 74 with upper secondary or tertiary educational attainment | Labour Force Survey, annual averages 2005, 2010, 2015, 2020 | Total: 68.0<br>Male: 69.8<br>Female: 66.3 | Total: 76.1<br>Male: 76.7<br>Female: 75.5 | Total: 80.8<br>Male: 81.0<br>Female: 80.7 | Total: 85.5<br>Male: 84.8<br>Female: 86.2 |