

Spindel: Elders are not the problem – Ontario's bad public policy is

Why is all the money going to institutional long-term care instead of to non-profit community agencies and cities, which could do a better job of supporting people at home?

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Why are we directing so many resources into warehousing elders in places they don't want to be?
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Ageism appears to be the last acceptable form of discrimination. Old people are blamed for continuing to live in houses that are too big for them and are scapegoated for taking up space in emergency rooms and beds in hospitals. Few stop to think about why that is.

Many older people would love to move into smaller, affordable, more accessible homes and condos, but developers are not building those, and Canada and the Ontario government are not requiring that housing be built to universal design standards as Australia is doing to accommodate those with disabilities.

Ontario's Bill 7 removes the rights of elders who are infirm; they can be forced, against their will, into long-term care institutions many miles from their social support systems. Their personal health information can also be transferred to corporate owned institutions without their consent.

Blaming old people for their misfortune fills beds in for-profit facilities with terrible track records that the Ontario government is intent on expanding. It is dehumanizing public policy that is costly for taxpayers.

A new generation of elders has tried to inform the Ontario government about humane, respectful alternatives to mass institutionalization that would also prevent the spread of COVID, while taking the pressure off hospitals — especially important as COVID outbreaks rise again in these institutions.

One solution is lifting discriminatory requirements and allowing elders to receive direct funding to manage their own care, available to younger people and their families under Ontario's Family Managed Home Care Program. That would keep thousands of elders out of institutions.

Newfoundland and Labrador and the Northwest Territories have introduced paid family caregiver programs, helping family members to take unpaid leaves of absence to care for loved ones without facing extreme financial hardship.

Residential care need not mean institutionalization. The Ontario government could expand what it did in Kenora: construct accessible seniors' housing with care built in. It could also fund municipalities and non-profits to acquire ordinary homes and condos in regular neighbourhoods and staff them 24/7 to provide specialized care for people with dementia and other cognitive and neurological conditions. They would fare much better in small, home-like settings in their own neighbourhoods than in locked wards in institutions — all at no extra cost.

The government could have redirected some of the \$6.4 billion from institutions to these kinds of non-profit community-based residential alternatives. But the government has ignored all of these possible solutions.

Most people only need assistance with activities of daily living in order to remain at home. They may need four hours a day of home care, which is not a lot to ask. In Denmark, elders can receive up to 10 hours a day of home care.

Staffing issues could be resolved if the government would address the pay inequities for personal support workers between hospitals, institutions and home care. Inequities and low pay contribute to severe staffing shortages. But paying PSWs and nurses what they deserve is not on the policy agenda.

The Ministry of Health's own records show that 69 per cent of people currently living in long-term care facilities have "no significant disabilities." So why is all the funding going to the institutional long-term care sector instead of to non-profit community-based agencies and municipalities, which could do a better job?

What will it take for the Ontario government to stop scapegoating elders and spending billions in taxpayer funds on predominantly for-profit institutions where no one wants to go and few want to work? Why not redirect that funding to the alternatives elders have recommended for years?

It is a question we all need to ask our elected representatives.

This kind of change in public policy would free up hospital beds and keep elders from being mass-institutionalized. Even more importantly, it would restore Ontario as a caring and compassionate society that does the right thing by those who helped to build this province.

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