



# SENIORS FOR SOCIAL ACTION (ONTARIO)

## *Editorial*

### IT TAKES A COMMUNITY

#### The Case for Municipal Support for Aging in Place

May 15, 2023

##### **Preamble**

Municipalities are the frontline governments, closest to the people who elected them. As such, they are the ones who can work with their constituents to advance locally created solutions, in this case to elders' desires to age in place.

There is a crisis occurring in towns and cities across Ontario, but because those involved suffer in silence, many municipally elected officials are unaware of it.

During the pandemic we saw the results of it in all of its horror, as thousands of elders died in long-term care institutions, but since then, attention has waned.

Older adults all over Ontario live in fear of being institutionalized. They dread the prospect that, because of a health crisis, they could be forced into a long-term care institution against their will because they are unable to receive needed support in their own homes and communities. Municipalities could play an important role in addressing the fear and dread that many older adults experience every day.

##### **The City of Pickering Stands Up to the Ford Government**

At least one municipality, the City of Pickering, recently stood up to the Ford government's wish to impose a Minister's Zoning Order (MZO) to facilitate the building of a 15 storey Southbridge institution in its city. Council supported the families of those who died at Orchard Villa under Southbridge's ownership and Extendicare's management, and told the Ontario government it did not favor an MZO for this purpose (Howlett, 2023). This is an example of an Ontario municipality having had the courage, conviction, and compassion to advocate for its residents.

##### **Time for Municipalities to Embrace the Alternatives to Institutions**

- The next step needs to be coming up with combined residential, direct funding, and in-home support alternatives to address waiting lists for long-term care. Waiting lists do not automatically require more institutional beds. They require a range of creative solutions like:
- Paid Family Caregivers, which would also ease the staffing shortage;
- Eliminating the discriminatory access requirements for the Family Managed Home Care program so that it can serve people of all ages with disabilities, not just younger people;
- Creation of small, fully staffed residences in every community operated by municipalities or non-profit organizations;

- Hub and Spoke models like the one the government has already funded in Kenora where services are included in seniors' housing so that services come to elders instead of elders having to be uprooted to receive services (Ontario Government, 2022).

Apparently the government knows what the right thing to do is, it just doesn't do it. Here is a direct quote from its own press release about the initiative in Kenora:

***“The Ontario government is investing \$4.5 million to build dedicated spaces for health care at a new seniors’ housing complex in Kenora. The mixed-use complex will include 56 independent living suites for residents as well as dedicated health spaces to provide a range of specialized services and supports on site to ensure residents and the surrounding community can receive the right care in the right place, instead of in a hospital or long-term care home.”*** (Ontario Government, 2022).

Seniors for Social Action Ontario could not agree more. So why not fund that program instead of trying to force more institutions on municipalities in the form of MZO's?

The Ottawa Citizen had it right:

***“The argument that Canada needs to expand the capacity of LTC homes misses the point.... Among seniors, there is actually little demand for LTC homes. The problem is the lack of alternatives and chronic underfunding of alternatives such as home care and community services.... Denmark, on the other hand, spends more on home care than institutional care. Remarkably, Denmark passed legislation in the 80s against developing new institutional LTC spaces. Spaces have been closed over time, and there has actually been a 30 per cent decline in institutional spaces.”*** (Laucius, 2021).

SSAO hopes that municipalities in Ontario will take their rightful place in standing up for the older adults in their communities by supporting all of us in our efforts to age in our own homes and communities rather than facing segregation, exclusion from community, and dehumanization in long-term care institutions. Cities, towns and regions across Ontario deserve a much more effective and responsive approach to long-term care tailored to their own citizens and communities.

### **Older Adults Are the Only Group Still Facing Mass Institutionalization**

The public has been conditioned to believe that when people become old and frail they require an institution. Experience with others, including younger people with highly complex conditions, has shown us that this is not true. People who are medically fragile are now being cared for in small, non-profit, staffed residential settings in their own communities (Rygiel Supports for Community Living, 2022), and in their own homes.

Not so for older adults. They are either forced to use a rationed, unreliable and disorganized Home Care system (CBC News, 2022) or they are forced into institutions. Older adults are the only group, besides prisoners, who continue to be mass institutionalized, but they have committed no crime. If they develop dementia, they are relegated to the most inhumane setting possible – a locked ward in an institution. This kind of treatment used to be reserved for people with psychiatric conditions, but no more. It is now understood to be inhumane, yet we subject confused older adults to it.

We can do better. Other countries and jurisdictions do better.

Even in Ontario, under previous governments, agencies like Neighborhood Link have been funded to create community-based residential options for elders to keep them out of nursing homes (See: Jean Dudley House <https://www.theneighbourhoodgroup.org/jean-dudley-house/>)

Some communities in Ontario have organized community cafes to provide natural support systems to people with dementia and their caregivers. See: Memory Cafes, Alzheimer's Society - <https://www.memorycafedirectory.com/canada/ontario/>)

### **Baby Boomers Do Not Want to be Institutionalized!**

A Campaign Research Poll conducted in 2021 showed that 89% of older adults wanted to stay home and out of institutions with only 4% planning to move in with family or into a retirement residence (Herhalt, 2021). 44% say they dread having to live in long term care. Only 1 in 5 believes change is even possible (Angus Reid, 2021).

And so, older adults suffer silently, fearful every day that they may be forced out of their own homes and communities and into an institution at the most vulnerable time in their lives. It is a future that awaits all of us – eventually – unless those of all ages advocate for change.

### **Municipalities Could Play a Key Role**

In countries with much more progressive community-based long-term care systems, municipalities do play a key role. In Denmark, for example, regions and municipalities get funding from the Federal government to deliver health services including long-term care.

*“The national government sets the regulatory framework for health services and is in charge of general planning, monitoring care quality, and licensing health care professionals. The national government also collects taxes and allocates funding to regions and municipalities based on sociodemographic criteria and activity. The state does not have a direct role in the delivery of health care services. Five regions governed by democratically elected councils are responsible for the planning and delivery of specialized health care services and play a role in specialized social care and coordination.”* (Tikkanen et al, 2020).

Canada does not have a National Home Care Program and it needs one. Ontario's policy of funding Home Care divides it between a handful of non-profit and mostly for-profit providers. (CBC News, 2022).

Municipalities could be playing key roles in helping to organize both in-home and residential long-term care in ordinary homes in peoples' own communities and in Hub and Spoke models in seniors' and community housing. They could be working with non-profits like the Victorian Order of Nurses to deliver in-home supports and services across the province.

Instead the Ontario government is trying to bully municipalities into submission with MZOs to build more institutions.

Perhaps it is time that the Federal government found a way, as Denmark has, to bypass the Ontario government completely and fund municipalities directly to provide 21st Century long-

term care services instead of the current 19th Century institutional approach based on a poorhouse model.

Is it time to talk to your Federal MPs and your municipal and regional councillors about this?

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