# **Lessons from the COVID-19 pandemic:**

# Healthy Ageing at Home in a Digitized Age

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#### Introduction

With falling birth rates and rapid advancements in medicine and technology that drive improvements in healthy living and disease prevention, the global population is ageing at an unprecedented rate. By 2050, the number of older adults, individuals aged 65 years and older, is projected to double and reach 1.5 billion. Canada is not exempt from this global phenomenon. Today, almost one in five Canadians are older adults; by 2030, this number will rise to one in four individuals. 4

While a high life expectancy is a strong indicator of a healthy population, ageing societies face multifaceted challenges, including greater financial burdens on healthcare and social protection systems, a reduced labour force, as well as social challenges on intra- and intergenerational family structures. The COVID-19 pandemic has revealed the ever-growing vulnerabilities within Canada's healthcare and social support systems for the elderly, and pushed into public consciousness how poorly equipped the country is to adequately support its present and future ageing population. However, by forcing society to quickly adapt to lockdowns and remote settings, the pandemic also illuminated the growing potential of technological innovations for improving the health of many at home. This paper will highlight the urgent need to address Canada's challenges in effectively providing quality care to its older adults. The paper will first review the nation's current health policies and programs for older adults before discussing the existing gaps within Canada's healthcare system. Finally, the paper will present policy recommendations with aims of enabling older adults to age healthily at home without being left behind in today's rapidly digitized age.

#### **Current Policies**

In partnership with the World Health Organization, the Public Health Agency of Canada has led the establishment of more than 900 age-friendly communities across the country for over a decade. This initiative enables older Canadians to safely age in place and remain involved in their communities through the provision of programs, services, and infrastructure that are accessible, available, and appealing to the elderly. Apart from establishing guidelines for age-friendly communities, the Government of Canada also provides funding to improve healthcare for older adults, such as financing the development of national educational standards for personal support workers who play a dominant role in elderly care. Additionally, certain provincial legislation, such as Ontario's *Health and Supportive Care Providers Oversight Authority Act*, 2021, drives Canada towards a more age-friendly future. However, despite these current efforts, challenges and gaps still remain which hinder Canada's preparedness in providing adequate support for its ageing population.

### The Need for A Healthcare System Evolution

At its inception, Canada's universal healthcare system was originally catered to its younger population and thus, focused on physician and acute hospital-based health services.<sup>3,8</sup> Half a century later, the system has yet to evolve alongside the changing needs of its rapidly ageing population, which call for more long-term care (LTC) for geriatric and chronic conditions.<sup>9</sup> For example, growing demands for publicly-funded LTC have outstripped current resources, resulting in a waitlist of over 77,000 individuals in 2019.<sup>10</sup> As unveiled by the current pandemic, the LTC system also lacks adequate quality care. By mid-2020, older Canadians

residing in LTC facilities constituted 81% of national COVID-19 deaths, while that of comparable countries was averaged at 42%.<sup>11</sup>

Furthermore, ageing is a key driver of healthcare spending; the annual healthcare cost for an average older adult in Canada is approximately \$12,000 compared to that of \$2,700 for an average Canadian under 65 years old. As such, it is expected that Canada's ageing population alone will add \$93 billion dollars to the existing healthcare costs within the next decade. However, the federal government has yet to factor ageing into its Canada Health Transfer payments to provincial and territorial governments. Thus, Canada faces an impending financial burden to support its growing ageing population.

Attributing to Canada's insufficient capacity to adequately meet the healthcare needs of its ageing population is its lack of regulation and utilization of home-based care and digital health technologies. Although home-based care is considered an integral element of healthcare by many Canadians, and its demand is expected to rise by 53.1% by 2031, accessibility and standards regarding home-based care vary vastly across the country. Ontributing to this variation is how home-based care falls outside the scope of "medically necessary" physician, hospital, or surgical-dental services, and thus is not insured by all provinces and territories or subject to national standards, as stipulated by the *Canada Health Act* (CHA). Despite calls from national associations, such as the Canadian Nurses Association, and a mandate letter from Prime Minister Justin Trudeau to the Federal Minister of Health to prioritize the improvement of access to home-based and palliative care, little progress has been made. In fact, there has been a step backward in some provinces; Ontario's *Connecting People to Home and Community Care Act*, 2020 privatizes home-based care, which further erects barriers to access for older adults. In

Digital health technologies, which enable older Canadians to age safely at home, also lack sufficient accessibility.<sup>17</sup> With innovations in digital health, such as telemedicine and online pharmacy services, Canada's digitizing healthcare system provides Canadians with convenient virtual access to health information and services. This is especially relevant in the context of COVID-19 where lockdown and stay-at-home orders persist.<sup>18,19</sup> Digital technology also fosters social connectivity in a time of prolonged isolation and loneliness.<sup>20</sup> However, varying beliefs underlying technology usage, privacy concerns, limited digital literacy and skillset, and poor accessibility to the internet are among the key barriers inhibiting the elderly from employing digital health technologies.<sup>20,21</sup> Consequently, while digital health technology harbours the potential to enable healthy ageing at home, the widening digital divide impedes the elderly from gaining the benefits offered through such technologies. Ultimately, urgent measures must be taken to ensure Canada is equipped to accommodate the increasing financial burden of the ageing population, and also safeguard the health and well-being of older Canadians.

## **Recommendations and Implications**

### Establish Home-based Care as a "Medically Necessary" Service under the CHA

Although the provision of home-based care is included under the CHA's extended healthcare services, shifting home-based care to CHA's "medically necessary" services will incentivize all provinces and territories to insure home-based care for its residents. As a result, home-based care will become more financially accessible, especially for the elderly who are often retired and rely on pensions or savings for living expenses. Accessible home-based care enables older Canadians to age at home for longer, thus preserving their independence and reducing the strain on hospitals, rehabilitation centres, and LTC facilities. The elderly constitute

one-fifth of Canada's population, but contribute to half of all healthcare spending.<sup>8</sup> Given the current trajectory of the ageing population, the projected doubling of costs within the next decade is virtually unavoidable.<sup>10</sup> However, increasing accessibility to home-based care will minimize costs and enable the shift of elderly patients from LTC to home-based care. This will ultimately save Canada's healthcare system approximately \$794 million by 2031.<sup>10</sup>

Create Governmental Regulatory Bodies to Define and Enforce Standards for Home-based

Care and Digital Health Technologies

Apart from being widely accessible, home-based care should be accountable and held to a safe standard across the country. To achieve this goal, regulatory bodies should be established under appropriate federal, provincial, and territorial ministries or agencies, such as Health Canada. Federal regulators will put forward safety and quality standards for home-based care, and those on the provincial and territorial level can set and enforce them to protect service providers and users. Furthermore, as digital health technologies are playing an increasingly important role in home-based care, the aforementioned regulatory bodies should also define standards for the provision and usage of digital health. National health agencies should also provide guidelines on how provincial and territorial healthcare systems can adopt digital health technologies as part of home-based care, and include the organization of digital health training programs for users and care staff. Establishing these governmental regulatory bodies and national standards will not only further promote the safe provision and utilization of home-based care and digital health technologies, but it will also reshape Canada's healthcare system to align with the needs of the elderly.

### Conclusion

Canada's ageing population poses an inevitable challenge that has been anticipated for decades, yet responses to effectively support this population are long overdue<sup>22</sup>. Through governmental regulation and financial support, policy solutions that increase the access and quality of home-based care and digital health technologies are imperative to addressing the challenges associated with Canada's expanding ageing population. These solutions can better equip the Canadian healthcare system to support current and future elderly populations, thereby minimizing the burden placed on Canada's healthcare system. While the COVID-19 pandemic has exposed Canada's currently grim outlook for adequate elderly care, it has also stimulated the urgently needed social and political momentum to enable healthy ageing at home for years to come.

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