The Changing Needs of a New Generation of Older Adults

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Outline

- Current State and Demographic Projections
- System Changes
- Looking Forward
Current State and Demographic Projections
Proportion of Older Adults in Provinces

- Compared to the other Canadian provinces, Alberta has the lowest proportion of older adults in its population.

<table>
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<th>Proportion of Population that are Older Adults (2016)</th>
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<tr>
<td>AB</td>
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<tr>
<td>12%</td>
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Proportion of Older Adults in Canada: 17%
Future Population of Older Adults

- Globally, the number of people 60+ years will grow from 962 million (2017) to 1.4 billion (2030).
- Number of older adults in Canada growing faster than any other OECD country; the province with the greatest rate of growth is Alberta.

- In 2037, nearly 1 in 5 Albertans will be an older adult.
Proportion of Oldest Cohorts is Increasing

Projected Proportion of Alberta Older Adults by Age Cohort (2019-2046)
Snapshot of Older Adults in Alberta

- 620,000 older adults in Alberta (age 65 and older)
  - 53% female, 47% male
- Median Income (2017) = $30,980
  - Single 65+ = $31,060 (Nationally $28,500)
  - Couple 65+ = $75,900 (Nationally $67,420)
- Proportion of older adults with debt has significantly increased (from about a quarter in 1999, to almost half of all older adults in 2016)
- 20% participate in the labour force (Nationally, 14%)
Alberta Indigenous Older Adults by Age Cohort

- Indigenous older adults in Alberta are younger than non-indigenous older adults.

Indigenous and Non-Indigenous Albertans by Age Cohort (2016)

<table>
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<tr>
<th>Age Cohort</th>
<th>Indigenous Older Adult</th>
<th>Non-Indigenous Older Adult</th>
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<tbody>
<tr>
<td>65 to 74 years</td>
<td>72.1%</td>
<td>62.1%</td>
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<tr>
<td>75 years and over</td>
<td>27.9%</td>
<td>37.9%</td>
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Where Older Adults Live in Alberta (2018)

- More older adults live in urban vs. rural areas.
- The proportion of older adults living in urban areas is increasing.
- The areas with the largest proportion of older adults in the population are:
  - High River, 22%
  - Camrose, 22%
  - Wetaskiwin, 19%

Proportion of Alberta Older Adults Living in Urban and Rural setting (2018)

- Urban (CMA/CA): 79%
- Rural: 21%
Where Older Adults Live in Alberta (continued)

• Most older adults live in their own home, some with community services supporting them.

• Approximately 5% of older adults live in a congregate supportive living setting (13% of those 85+).

• Approximately 2.5% of older adults live in a long-term care facility (11% of those 85+).
74% of older adults feel confident using technology.

Over 8/10 older adults believe technology can help them stay:
- safe, independent, in their homes longer, and connected to others

58% of older adults own smartphones; 93% find them easy to use.

Almost 7 in 10 Canadians over the age of 50 would be willing to pay out-of-pocket for technology that allows them to stay in their home longer.

Source: AGE-WELL, 2019
Health Characteristics of Older Adults

- **Life Expectancy** - average life expectancy at age 65 for older adults in Alberta is 21 (same as the Canadian average). This means older adults in Alberta will live on average till almost age 86 (87 for women and 84 for men).

- **Physical activity**: 41% of older adults in Alberta reported 150 min per week (second highest province next to BC at 54%).
Health Characteristics (continued)

- **Perceived mental health:** 71% of older adults in Alberta report very good or excellent (third behind PEI and Quebec – SK is lowest at 62%).

- **Life satisfaction:** 89% of older adults in Alberta report satisfied or very satisfied (third lowest ahead of BC and Manitoba – Quebec highest at 92%).

- **Life stress:** 13% of older adults in Alberta reported most days quite a bit or extremely stressful (highest rate in Canada – lowest is PEI at 6%).

- **Social isolation and loneliness:**
  - 12% of Edmonton adults age 55+ report feeling lonely at least once a week (Edmonton Seniors Coordinating Council, 2019)
  - Higher prevalence of feeling lonely, if low-income, migrant/refugee, or living alone.
  - Loneliness associated with chronic health conditions such as dementia.
Approximately 46,000 Albertans have been diagnosed with dementia (2018)

- 10% are under age 65
- 47% age 65-84
- 44% age 85+
Dementia does not have one face; it affects men and women, individuals of all ages and persons from every culture and background.
Risk Factors for Dementia

• Potentially modifiable:
  – Risk factors for vascular disease (e.g. Hypertension, hypercholesterolemia, hyperglycemia)
  – Unhealthy diet, smoking, physical inactivity and obesity
  – Severe brain injury
  – Diabetes
  – Depression

• Delaying the onset by 5 years would reduce its prevalence by 50% by 2047
Older Adults and the Health Care System

• Approximately 25% of Canadians over the age of 65 and 50% over the age of 85 are considered medically frail.
  • Over 1.2 million Canadians are living with frailty; within 10 years this is expected to increase to over 2 million.
  • If we assume the numbers are similar for Alberta as Canada there are almost 140,000 Albertans currently living with frailty.

• Frailty is linked with higher consumption of health care resources; currently 45% of spending on health care is for the 15% of Canadians over the age of 65.
System Changes
Changing Population and Expectations

- Higher levels of education and income
- Greater interest in being partners in own health
- Expect higher quality of services
- Greater diversity (e.g. Immigration, LGBTQ2)
- Familiarity with technology
- Living away from family and smaller families
- Desire to stay in community
Caregivers in Alberta

• 1 in 4 Albertans estimated to be caregivers.
• 50% of Alberta caregivers are employed full-time.
  – 41% missed days of paid work.
• Not seen as part of the healthcare team despite providing 10x as much care as paid healthcare staff.
  – Their input often ignored or disrespected.

Source: Research on Aging Policies and Practice, May 2019
The Alzheimer Society of Canada’s Charter of Rights for People with Dementia

• Freedom from discrimination
• Benefit from all of Canada’s civic and legal rights
• Participate in developing and implementing policies that affect them
• Supported to live independently, as engaged citizens

• Fully participate in decisions regarding their care and life
• Receive care from professionals trained in dementia and human rights; accountable to uphold rights
• Complaint/appeal procedures if rights are not respected
Primary Care in Alberta

- Health Home
- Primary Care Networks
Emergency Health Services

- Mobile medical assessment, treatment and referral for short term support for vulnerable populations.
  - Chronic conditions and complex needs met by over 30 Community Response Teams located in communities across Alberta.
  - Interdisciplinary palliative and end of life care and services to support people in their homes.
Continuing Care Current Priority Initiatives

- Home and Community Care Expansion, Self-Directed Funding Options
- Continuing Care Facility Expansion
- Dementia Strategy and Action Plan
- Palliative and End of Life Care
- Caregiver supports
- Updating Legislation
Looking Forward
Major Reports on Policy for Older Adults/Continuing Care in Alberta

- Alberta Hospital Services Commission 1974
- Hyde Report 1982
- Mirosh Report 1988
- Broda Report 1999
- Alberta for All Ages 2000
- Aging in the Right Place 2008
- Aging Population Policy Framework 2010
# Report Themes

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<tr>
<th>Pre-2000</th>
<th>Post 2000</th>
<th>Enduring Themes</th>
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<td>• Standard admission/care levels</td>
<td>• Expand care in supportive living</td>
<td>• Enhance housing and care/ supports in the community</td>
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<tr>
<td>• Integrate levels of care/build multi-level care residences</td>
<td>• Recognize needs of informal caregivers</td>
<td>• Health promotion</td>
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<td>• Design care residences for accessibility and as home-like settings</td>
<td>• Transportation needs</td>
<td>• Geriatric education</td>
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<tr>
<td></td>
<td>• Technology</td>
<td>• System coordination / integration / navigation</td>
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<td></td>
<td>• Financial security/work and retirement</td>
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2035 Operating Costs using Various Service Mixes

*Note: Dollar figures represent 2018/19 dollars, not adjusted for inflation
Focus on Quality of Life

• Social isolation and loneliness
• Safety vs. living with risk societal conversation
• Measuring quality of life
• Restorative care and reablement
Future Models of Care and Services

- Self directed care
- Integrated health and social care services in the community
- Population specific care / person-centred care
  - E.g. people living with dementia, immigrant communities
- Prevention and health promotion – e.g. Remote monitoring
Future Housing Models

• Intergenerational housing (small homes on the same property as a family member; co-locating with student housing or renting rooms to students)

• “Golden Girls Act”

• Smart houses

• Dementia care models focused on quality of life
  – Dementia Villages: Hogeweyk, Denmark; Langley, BC.
  – Butterfly care homes
Future Technology

- Smart Homes
- Autonomous Cars
- Remote Telehealth
- And so much more...
- Personalized Robotics
U of A's chatbot aims to combat loneliness among seniors

JASON HERRING

A University of Alberta artificial intelligence expert is behind a project meant to provide isolated seniors with companionship.

Omar Zaiane is the project lead for the Automated Nursing Program, an in-development chatbot designed to simulate dynamic conversation and provide social fulfillment for elders experiencing loneliness.

“Our population is aging. People live longer. We don’t have enough nursing homes for everybody and not everyone wants to go to nursing homes,” Zaiane said. “Often they lose their partner in life, so they live at home, alone, and their families are far away. There’s a significant impact with loneliness on their mental health and also their physical health.”

The project differs from popular chatbots like Siri and Alex, which are task-oriented, meaning they respond to inputs to perform functions like playing a song or turning on the lights. Instead, Zaiane’s bot is conversational, and none of its responses are hard-coded in — the bot dynamically generates dialogue on the fly, meaning conversations about topics like the weather won’t get repetitive.

The bot learned fundamentals of conversation and sentence structure when researchers fed it millions of lines of dialogue from movies and TV shows. Now, Zaiane and his team are focusing on getting the bot to process some nuances of conversation that humans tacitly understand but computers struggle to grasp.

“It’s not a trivial thing to do,” Zaiane said. “Right now we’re working on, for example, how to express emotion, how to detect emotion, how to stay on topic, how to respond to a message that doesn’t make sense.”

The bot will be able to talk about anything from family to travel to food. In addition to conversation, the bot will perform such tasks as reminding users to take their medication.

The project is part of the MetroLab Network, which connects universities and cities in an attempt to solve common social challenges. The U of A and the City of Edmonton are both members of the network.

Following further development and trials, Zaiane hopes an opportunity to commercialize the chatbot will emerge through the network. There’s no timeline for the project’s release.

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Questions?

Thank you.

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