

Dementia Care – A Priority in Ontario



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Alzheimer Society
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Presented to

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Pre-budget Consultation**

By Alzheimer Society of Ontario

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Introduction

The Alzheimer Society of Ontario appreciates this opportunity to talk with you about priorities for the 2009 Provincial Budget.

Alzheimer's disease and related dementias are progressive, degenerative diseases that destroy vital brain cells. They are not a normal part of aging. Symptoms include a gradual decline of memory, changes in judgment, mood and behaviour, and an inability to perform familiar tasks. Progression can be slowed, but not stopped. Today, there is no cure.

More than 180,000 Ontarians have dementia. In less than 25 years, this number will double.

The annual cost in Ontario is estimated to be over \$5 billion, including the costs of long-term care, community supports, medication, physicians' fees, and unpaid caregiver time.

These costs too will increase dramatically in the coming years.

About Alzheimer Society in Ontario – The Alzheimer Society of Ontario and its 39 Chapters provide service and care for people with dementia and their families and fund research.

Our annual revenues are close to \$30 million, over 50% of which is derived from charitable donations and fund-raising events. The Ministry of Health and Long-Term Care, through the Local Health Integration Networks provides most of the remaining funding for Chapters.

Our Society partners with a variety of groups, including health service providers, primary care practitioners, universities and colleges, to improve access to services, promote best practices and disseminate new knowledge.

Our 2009 Provincial Budget Recommendations

We acknowledge that Ontario faces severe economic challenges. While you grapple with these complex issues, we urge you to consider our recommendations which focus on five areas: continuing the Aging at Home Strategy, increasing financial supports to caregivers, adopting an 'age-friendly' approach to infrastructure investment, supporting dementia research and promoting a "Silver Economy" strategy in Ontario.

1. Continue the Aging at Home Strategy

The Aging at Home Strategy will add more than \$330 million a year in areas such as community support services, respite and supportive housing, at its maturity in 2011.

Aging at Home supports innovative approaches, such as the First Link dementia referral program through which individuals and their care partners are linked through primary care practitioners, specialized geriatric services and other health providers to participating Chapters as early as possible following diagnosis.

Early intervention in dementia has the potential to mitigate crisis situations and can have a significant impact on the health care system as illustrated in an 18-year longitudinal study released in 2006. In it, caregivers receiving social work support maintained their loved one with dementia at home significantly longer, 585 days on average, than caregivers not receiving the support. That's a potential for a 50 per cent reduction in the average length of stay in a long-term care home in Ontario, where as many as 75% of the residents have dementia.

Investment in community supports is an essential part of health-cost containment. We urge continued rollout of the Aging at Home Strategy as planned.

2. Increase Financial Supports to Caregivers

In 2007, we applauded the commitment in the Ontario Government Throne Speech to support people caring for older adults and urged action in our submission to this Committee a short while later. Last October, the Federal Government's Throne Speech made a similar commitment. The time is ripe for federal/provincial collaboration on issues relating to caregiving.

Most Ontarians with dementia are cared for in their homes, by their families, mostly spouses or daughters. In turn, many of them struggle with emotional stress, physical strain and exhaustion, depression, other illnesses, and financial burdens.

Caregivers experience financial stresses in two ways: the added cost of caregiving for such things as transportation, drugs, technical aids and home modifications; and the other is insecurity related to employment circumstances for those still active in the labour force.

The Ontario Caregiver Coalition has asked Minister Duncan to establish a Task Force. While we support this, we urge immediate steps to increase income tax credits for caregivers, include self-directed funding in the range of care options and work with the Federal Government to extend the compassionate care provisions of the Employment Insurance Act and the dropout provisions of the Canada Pension Plan.

3. Adopt an Age-Friendly Policy in Infrastructure Investment

Investing in infrastructure is accepted as an effective tool for governments to mitigate the impact of our current economic crisis. We see great potential in guiding infrastructure investment toward initiatives that support independence within our aging population, such as home modifications, affordable and supportive housing, as well as accessible transportation.

We are working to apply the principles of the age-friendly communities initiative of the World Health Organization to services, settings and structures that enable people to age actively. We are engaging municipalities and other associations, like the Institute of Professional Planners, in this work. The Federal Government is also promoting this initiative. We urge adoption of this policy framework as future infrastructure investments are made in Ontario.

4. Support Investment in Dementia Research

Ontario scientists are world leaders in dementia research. While there is no doubt that the need to find better treatments and eventually a cure for dementia remains paramount, it is fair to say that trying to find ways to delay the onset of dementia is equally as important, as is research in applied technology to help people cope.

Alzheimer Society of Ontario and Chapters donate over \$1 million a year for research. Ontario recognizes that research is an important economic driver in the new economy. Given the scope and impact of dementia and the strengths of Ontario's research community, we urge that Ontario follow British Columbia's lead in making dementia a signature pursuit within its research portfolio.

5. Consider Adopting a “Silver Economy” Strategy in Ontario

We also see tremendous potential in recasting our changing demographic from one of a so-called “grey tsunami” to one of a “silver economy” where all groups enjoy the economic benefits associated with the growing number of older persons. New technologies, housing options, transportation services etc. are needed. Just as “green” may offer opportunity for innovation, so also may “silver”. The European Union sees this possibility and is supporting a “Silver Economy” initiative (www.silvereconomy-europe.org) to promote development and marketing of innovative products and services aimed at the growing number of older people and thus contributing to economic development and job creation. One specific example of this would be to earmark money from Ontario’s “Next Generation of Jobs Fund” to companies developing technological innovations to support independent living.

Conclusion

While we face uncertain economic times, dementia does not wait. The number of people with the disease keeps growing. The impact on individuals, communities and our health care system intensifies. Creative and cost-effective responses are available. The Alzheimer Society urges you to support them.

Thank you.

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Introduction

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