

FORUM ON HEALTH OUTCOMES AND HEALTHCARE COSTS: WHAT CAN WE AFFORD?

Re-imagining a Health System

Good Enough for All of Us:

**Responding to the Health Needs of the
Poorest, Oldest and Most Vulnerable Persons
in our Society**

MY PERSPECTIVE

- ✓ **A leader in the tertiary care health system in the 1980's and 1990's**
- ✓ **A member of health-related Boards and other leadership groups from the 1980's to the 2000's**
- ✓ **Presently, leader of the Congregation which owns and operates St. Patrick's Mercy Home and The Gathering Place**

RADICAL INCLUSION

**Good enough
for all of us**



WHAT IS HUMAN HEALTH?

- ✓ **The absence of illness or injury**
- ✓ **A state of complete physical, mental, and social well-being**
~ WHO 1948
- ✓ **The extent to which an individual or group is able to realize aspirations and satisfy needs and to change or cope with the environment – it is a resource for everyday life, not the objective of living – it is a positive concept, emphasizing social and personal resources, as well as physical capacities**
~ WHO 1986
- ✓ **Not just the physical well-being of the individual but the social, emotional, spiritual and cultural well-being of the whole community – this is a whole of life view and includes the cyclical concept of life-death-life**
~ Australian Aboriginal community

THREE TRANSFORMATIONS IN HEALTH CARE IN PAST 60 YEARS

1. Medicare (1957, 1966, 1984) = medically necessary services provided in hospital or by practitioners (usually physicians)
2. Social determinants/population health/health promotion (*A new perspective on the health of Canadians, 1974 & Ottawa Charter for Health Promotion, 1986*)
3. Regional health systems (early 1990's)

STRENGTHS OF OUR PRESENT HEALTH SYSTEM

- ✓ **Universal health care coverage for specific services**
- ✓ **Acute care ~ Tertiary care ~ Primary care**
- ✓ **Community health care**
- ✓ **Competent, dedicated health professionals and healthcare workers**
- ✓ **Strong unions**
- ✓ **Professional formation and oversight**
- ✓ **Regionalization**
- ✓ **Research – clinical, genetics, health policy**

FLAWS IN OUR PRESENT SYSTEM

Health and Health Care for:

- ✓ **Older people**
- ✓ **Poor people**
- ✓ **Mentally ill people**
- ✓ **Indigenous people**
- ✓ **Refugees and immigrants**

**These flaws are not
a failing of the health care system
BUT
are a failing of our society**

CEMETERY



**Elderly
people**

**In the 20th century, old age was but a footnote.
In the 21st century, however,
it is to become the main theme.**

~ World Assembly on Aging, 2002

WORLD REALITIES

- ✓ **For the first time in history, most people can expect to live into their 60s and beyond**
- ✓ **Number of persons aged 60 to rise from its current 740 million to reach 1 billion by 2020**
- ✓ **By 2050, more than 20% of the world's population will be 60 years of age or older**
- ✓ **In 2050, for the first time in human history, more persons will be over 60 than children**
- ✓ **Women outnumber men among those aged 60 or older, twice as numerous among those over 80**
- ✓ **A longer life brings great opportunities – depending heavily on one key factor: health**
- ✓ **Evidence suggests that older people are not experiencing better health than previous generations**
- ✓ **Those who have experienced disadvantage across their lifetime have a higher risk of poor health**

LIFE EXPECTANCY

COUNTRY	AVERAGE LIFE EXPECTANCY	FEMALES	MALES
World	71.0 years	73.5 years	68.5 years
Japan	84	87	80
Australia/ Switzerland	83	85	81
Italy/Singapore	83	85	80
France/Spain	82	85	79
Canada/ New Zealand	82	84	80
Ireland	81	83	79
United Kingdom	81	84	79
United States	79	81	76

2000 NL = 11.6% > 65y
2021 NL = 22.5% > 65y
2026 NL = 27.0% > 65y

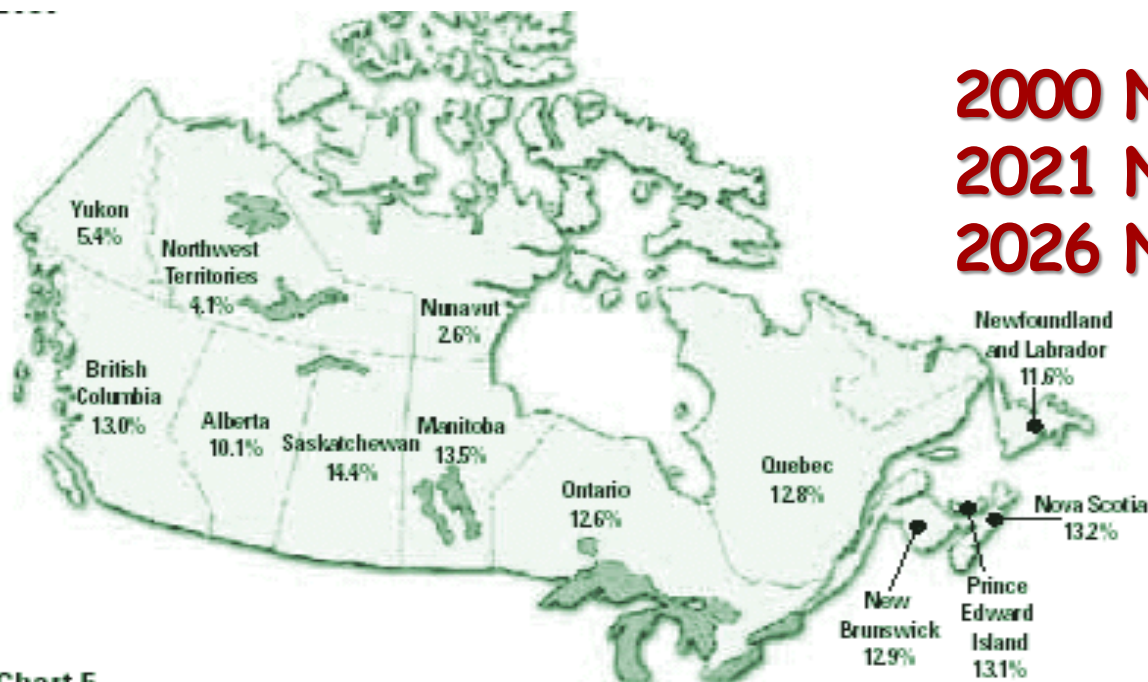
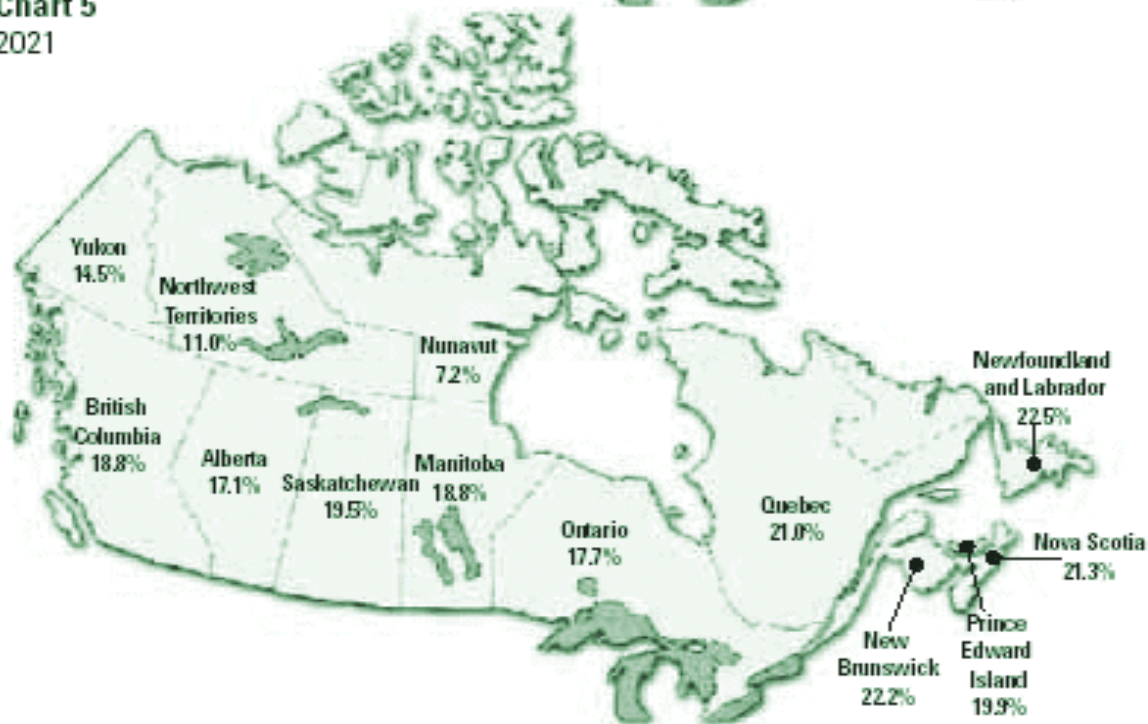


Chart 5
2021



CHALLENGES

✓ Discrimination

- ✓ Ageism too often tolerated – often combined with other forms of discrimination, on the grounds of gender, race and ethnicity, religion, disability, health or socio-economic conditions
- ✓ Experience of stereotyping, political disempowerment

✓ Poverty

- ✓ Single most pressing challenge to the welfare of older persons [homelessness, malnutrition, unattended chronic diseases, lack of access to safe drinking water and sanitation, unaffordable medicines and treatments, income insecurity]

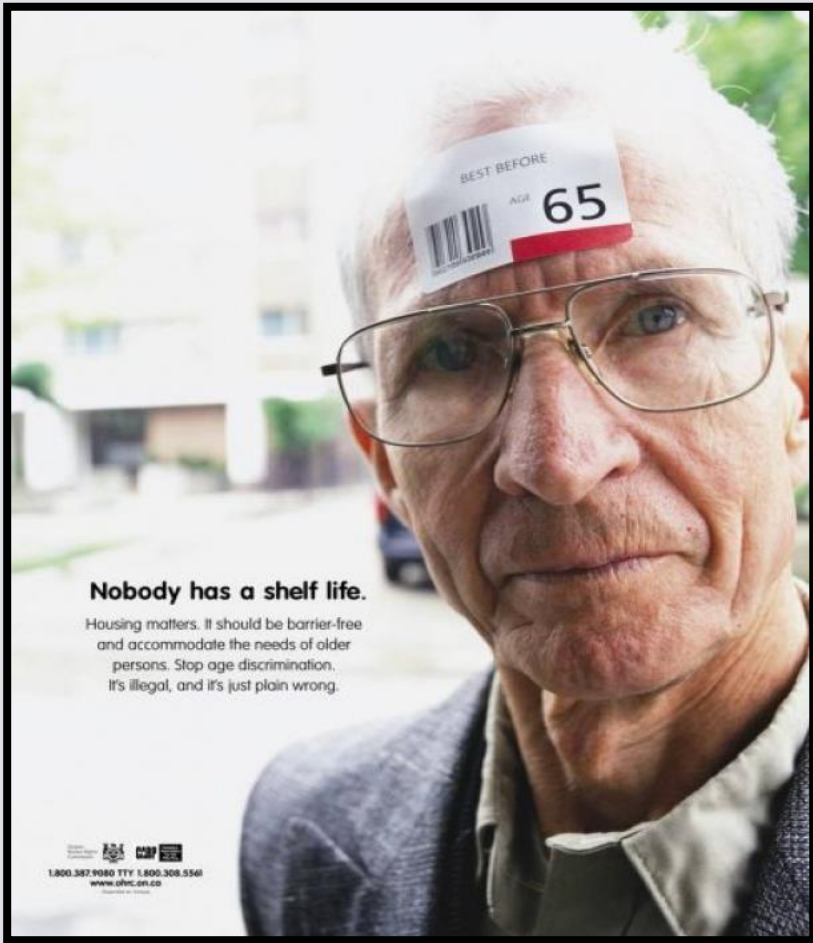
✓ Violence and abuse

- ✓ Physical, emotional, sexual, financial exploitation

✓ Organization of cities, communities and health systems

- ✓ Currently designed, resourced, organized and delivered in a way which disadvantages older adults with chronic health issues

✓ Lack of specific measures and services



Nobody has a shelf life.

Housing matters. It should be barrier-free and accommodate the needs of older persons. Stop age discrimination. It's illegal, and it's just plain wrong.

1.800.387.9080 TTY 1.800.308.5560
www.ohcra.org

The advertisement features a close-up portrait of an elderly man with white hair and glasses. A white label with a barcode and the text "BEST BEFORE" and "AGE 65" is stuck to his forehead. The background is a blurred outdoor setting with a building.



WHAT IS *HEALTHY AGEING*?

World report on ageing and health (2015)

- ✓ *Healthy Ageing* = the process of developing and maintaining the functional ability that enables well-being in older age
- ✓ Establish evidence and partnerships necessary to support a Decade of *Healthy Ageing* from 2020 to 2030
- ✓ **Functional ability** determined by the person's **intrinsic capacity** (the combination of all the individual's physical and mental capacities), relevant **environmental factors**, and the **interaction** between the two
- ✓ Environmental factors = policies, systems, and services re transport, housing, social protection, streets and parks, social facilities, and health & long-term care; politics; products & technologies; relationships with friends, family, & care givers; and cultural & social attitudes & values

STRATEGIES ON AGING AND HEALTH

- ✓ Addressing ageism
- ✓ Promoting wellness across elder friendly communities
- ✓ Supporting aging in place
- ✓ Addressing the unique needs of older Indigenous peoples
- ✓ Addressing elder abuse
- ✓ Committing action on *Healthy Ageing* in every country

STRATEGIES ON AGING AND HEALTH

- ✓ **Aligning health systems to the needs of older populations ~ providing elder friendly hospital care and effective transitions**
- ✓ **Developing sustainable and equitable systems for providing long-term care (home, communities, institutions)**
- ✓ **Addressing medication use and older persons**
- ✓ **Caring for caregivers**
- ✓ **Ensuring a sustainable and appropriately trained, deployed, and managed health workforce**
- ✓ **Improving measurement, monitoring and research on *Healthy Ageing***

HEALTH CARE ISSUES

Issue 1: we do little to empower patients and caregivers with the information they need to navigate the system

Issue 2: we don't require any current or future health or social care professional to learn about care of the elderly

Issue 3: we don't talk to each other well within and between sectors and professions

Issue 4: we work in silos and not as a system

Issue 5: we plan for today and not for tomorrow with regards to understanding the mix of services we should invest in to support sustainability

~ Ontario's Seniors' Strategy

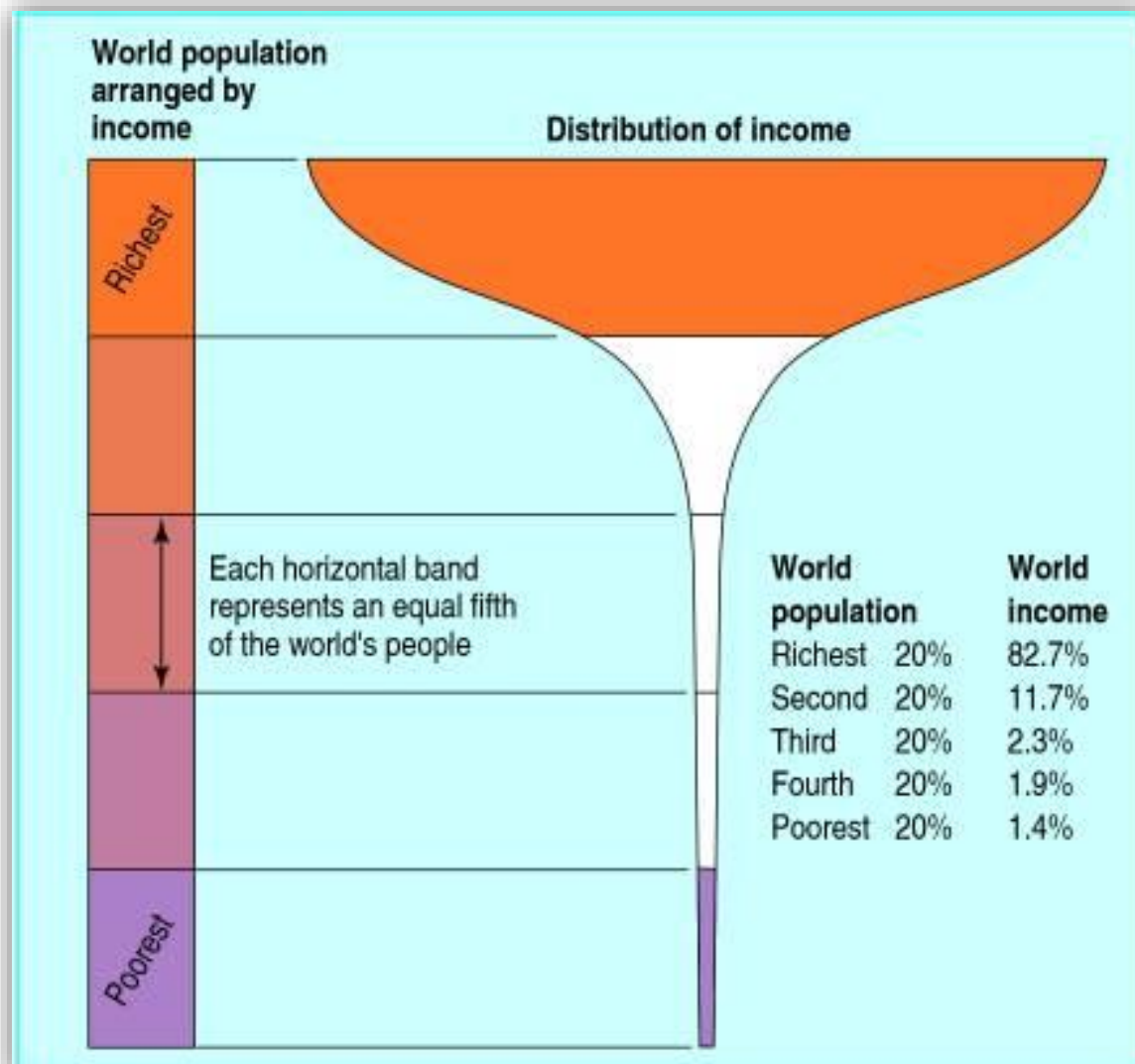
NL PROVINCIAL HEALTHY AGING POLICY FRAMEWORK (2007) – UPDATE 2015

- 1. Recognition of Older Persons**
- 2. Celebrating Diversity**
- 3. Supportive Communities**
- 4. Financial Well-being**
- 5. Health and Well-being**
- 6. Employment, Education and Research**

POVERTY



CHAMPAGNE GLASS OF WORLD POVERTY



STARTLING NUMBERS

[OXFAM 2016]

62 PERSONS

same wealth as
poorest 3.6 billion
people in world

\$542 BILLION

↑ in wealth of
richest 62
individuals since
2010

\$1 TRILLION

fall in wealth of
poorest 3.6 billion
people since 2010

1%

= poorest half of
population received
1% of increase in
global wealth

50%

= increase in global
wealth received by
top 1% since 2000

\$3

= increase in
average annual
income of poorest
10% of people
globally

MORE STARTLING NUMBERS

[OXFAM 2017]

- ✓ **Eight men own the same wealth as the 3.6 billion people who make up the poorest half of humanity**
- ✓ **1 in 10 people survive on less than \$2 a day**
- ✓ **Seven out of 10 people live in a country that has seen a rise in inequality in the last 30 years**
- ✓ **On current trends it will take 170 years for women to be paid the same as men**

CANADIAN NUMBERS

- ✓ **Nearly 5,000,000 people in Canada live in poverty**
- ✓ **Gap widening between the highest and lowest income groups**
- ✓ **Precarious employment has increased by early 50% over the past two decades**
- ✓ **Between 1980 and 2005, the average earnings among the least wealthy Canadians fell by 20%**
- ✓ **Researchers have found that men in the wealthiest 20% of neighbourhoods in Canada live on average more than 4 years longer than men in the poorest 20% of neighbourhoods.**
- ✓ **1 in 5 immigrant families lives in poverty in Canada**

MORE LIKELY TO BE POOR

- ✓ **People living with disabilities (both mental and physical) are 2X as likely to live below the poverty line – nearly 15% of people with disabilities live in poverty**
- ✓ **Homeless individuals living with a disability or mental illness make up almost 45% of the overall homeless population**
- ✓ **Indigenous Peoples are over-represented among the homeless population in virtually all urban centres in Canada**
- ✓ **28%-34% of shelter users are Indigenous**
- ✓ **Nearly 15% of elderly single individuals live in poverty**
- ✓ **Nearly 2 million seniors receive the GIS and live on about \$17,000 per year (basic standard of living \$18,000 per year)**

MORE LIKELY TO BE POOR

- ✓ **First Nations women (living off reserve) – 36%**
- ✓ **Métis and Inuit women – 23%**
- ✓ **Visible minority women – 28%**
- ✓ **Women with disabilities – 33%**
- ✓ **Immigrant women – 20%**
- ✓ **Single mothers – 21%**
- ✓ **Children in female lone-parent families – 23% (cp to 6% of children in two-parent families)**
- ✓ **Children with disabilities 2X as likely to live in households relying on social assistance**
- ✓ **Status First Nations children – 50%**

CHILD WELL-BEING IN RICH COUNTRIES: UNICEF (2013) CANADA'S RANK

- ✓ **Average rank 17**
- ✓ **Material well-being 15**
- ✓ **Health and safety 27**
- ✓ **Education 14**
- ✓ **Behaviours and risks 16**
- ✓ **Housing and environment 11**

HOUSING

- ✓ **3 million Canadian households are precariously housed**
- ✓ **An estimated 235,000 people in Canada experienced homelessness in 2016, with roughly 35,000 people being homeless on any given night**
- ✓ **Almost 1 in 5 households experience serious housing affordability issues (spending over 50% of their low income on rent)**
- ✓ **Youth aged 16-24 make up about 20% of the homeless population**
- ✓ **The number of older adults and seniors experiencing homelessness is rising, about 4% of shelters users in 2016**

OTHER INDICATORS

- ✓ **4 million people in Canada experience food insecurity**
- ✓ **1 in 8 Canadian households struggle to put food on the table**
- ✓ **Food insecure households were 80% more likely to report having diabetes, 60% more likely to report high blood pressure, and 70% more likely to report food allergies**
- ✓ **1 in 10 Canadians cannot afford to fill their medical prescriptions – Canada is the only industrialized country with a universal healthcare system but without a national pharmacare policy**

INDIGENOUS PEOPLES OF CANADA



INDIGENOUS PEOPLES

- ✓ **Life Expectancy ~ Canada (total) 79 (M) 83 (F)**
 - ✓ **First Nations 73 (M) 78 (F)**
 - ✓ **Métis 74 (M) 80 (F)**
 - ✓ **Inuit 64 (M) 73 (F)**
- ✓ **Food insecurity significantly higher in Indigenous households – residents in Nunavut spend 2X as much on food as rest of the country on average (\$14,800 v. \$7,300 annually)**
- ✓ **In 2007–2010, 27% of Inuit households reported having low to very low food security (other surveys suggest this may be as high as 62%)**
- ✓ **Tuberculosis rates almost 50 times higher for the Inuit**

INTERSECTION OF VULNERABILITIES

The background is a complex, abstract composition of swirling, brush-stroke-like patterns. The colors are primarily various shades of green, ranging from light, almost white, to deep forest green and black. The strokes are dense and layered, creating a sense of depth and movement. In the center-right area, a sharp, yellowish-green pencil tip is visible, pointing towards the center. The overall effect is one of dynamic, chaotic energy.

INTERSECTION OF VULNERABILITIES



INTERSECTION OF VULNERABILITIES

- ✓ People living with this reality are severely affected by social and economic inequality
- ✓ Through no fault of their own, they face extended and often **lifetime unemployment, social exclusion, isolation, relationship distress, poor physical health and lack of hope for the future**
- ✓ It easily leads to discrimination and accessibility barriers in many areas of life (e.g., **health services, housing, education, transportation**)

INTERSECTION OF VULNERABILITIES ~ PRISON SYSTEM

✓ Challenges **before** imprisonment

- ✓ Alternative approaches to imprisonment rarely considered
- ✓ Inability to detect mental illness

✓ Challenges **during** imprisonment

- ✓ Few programs for mental illness or addictions
- ✓ Little continuity of care with previous caregiving
- ✓ Very little attention to rehabilitation

✓ Challenges **after** imprisonment

- ✓ Sent out from prison with no plan for continuity of care
- ✓ Sent from prison with no support of any kind or connection with appropriate support programs

INTERSECTION OF VULNERABILITIES

- ✓ **We are not effectively using the education system to help address the challenges faced by young people with ADHD, mental illnesses or addictions, gender diversity, bullying**
- ✓ **Complex challenges facing adults are being replicated in their children**
- ✓ **There are failures of the health system in understanding, preventing, detecting, treating and stabilizing these complex challenges**



**EARTH:
A VULNERABLE ONE**

ECOLOGY AND HUMAN HEALTH

A healthy human population is dependent upon a healthy natural environment

Intergenerational justice – We do not inherit the land from our parents; we borrow it from our children (Inuit Saying)

Sustainable health = to provide health for today's generation without compromising that same opportunity to future generations

CLIMATE CHANGE: IPCC

- ✓ **Humans = main cause of global warming**
- ✓ **Effects of climate change already occurring on all continents and across oceans**
- ✓ **World ill-prepared for risks from a changing climate**
- ✓ **The more human activities disrupt the climate, the greater the risks of severe, pervasive and irreversible impacts for people and ecosystems**

RECENT EXAMPLES FROM NL ECOLOGY AND HUMAN HEALTH

- ✓ **Hydraulic fracturing on the west coast of the Island ~ Panel recommendation not to proceed**
- ✓ **Muskrat Falls in Labrador ~ seeming disregard for the health-related issues**

WHAT ARE THE SOLUTIONS?

We need a fourth transformation of the magnitude and intensity of the three transformations mentioned earlier:

- ✓ a shift in the focus of health care and**
- ✓ a shift in the way such care is organized, funded and delivered**

We need leaders to create circles of champions

The complexity demands new and unusual partnerships and collaborative efforts across health and social sectors and indeed all domains of society