

## Document 1 – Ottawa Older Adult Health Overview

This document provides a high-level overview of the health, social determinants of health, health care usage and health care costs for older adults in Ottawa. Data is presented for adults aged 55 and over, where available.

### Ottawa's aging population is growing and becoming more diverse

According to the 2016 census, 29% of the Ottawa population is aged 55 and older (approximately 266,000 people).<sup>1</sup> By 2036, 32% of the population will be aged 55 and older (400,000 people).<sup>2</sup>

Ottawa's older adult population is also growing more diverse. Almost 1 in 6 older adults identified as a member of a visible minority in 2016<sup>3</sup> compared to just over 1 in 10 in 2001.<sup>4</sup> The five most common visible minorities include Chinese, South Asian, Black, Arab and Southeast Asian. Almost 4100 older adults identify as Indigenous. This represents almost 20% of the Indigenous population in Ottawa.<sup>5</sup>

Approximately 3% of older adults in Ottawa have no knowledge of either English or French.<sup>6</sup> Approximately 10% of Ottawa residents aged 55 to 64 years and 9% of people aged 65 years and older are living in low income based on the after-tax low income measure.<sup>7</sup>

### Healthy Lifestyle

A healthy lifestyle, including healthy eating, regular physical activity, limiting alcohol, avoiding stress and not smoking can lower the risk for chronic diseases and improve the quality of life of older adults.

Overall, many of Ottawa's older adults engage in healthy behaviours (i.e. not smoking, limiting alcohol intake, being physically active, and eating healthy). For instance, among adults aged 65 and older, 7%<sup>a</sup> of Ottawa older adults are current smokers; less than 1 in 5 (17%<sup>a</sup>) of Ottawa older adults reported exceeding the Low Risk Drinking Guidelines in the past year (compared to 21% of all Ottawa residents aged 19 and older<sup>8</sup>); approximately 53% report they were active or moderately active in their leisure time<sup>9</sup> and 54% of women and 35% of men report meeting their Vitamin D recommendations.<sup>10</sup>

At the same time, of adults aged 65 and older, 27% report eating fruits and vegetables 5 times a day or more<sup>11</sup> and 68% are overweight or obese based on their adjusted self-

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<sup>a</sup> interpret with caution due to high sampling variability

reported height and weight.<sup>12</sup> In addition, 43% of people aged 65 and older take four or more prescription medications daily and 30% have not reviewed their prescriptions with their medical doctor to discuss possible side effects in the past year.<sup>13</sup> In Ontario, people aged 65 and older make up the age group with the highest percent of people prescribed an opioid (22.0%) (This high prevalence of opioid use in older age groups could be influenced by the use of these drugs to treat cancer related pain, post-surgical pain (i.e. after hip or knee surgeries) and palliative care.<sup>14</sup>)

### Mental Health <sup>15</sup>

The majority (68%) of Ottawa's adults 65 years and older feel a strong sense of community belonging<sup>16</sup> and almost all (87%) of Ottawa residents aged 65 and older were satisfied or very satisfied with their life <sup>16</sup>. At the same time, the highest rates of suicide death in Ottawa are among men aged 50 to 64 years at 18 suicides per 100,000.<sup>16</sup>

There are risk factors that can contribute to poorer mental health. Risk factors include depression, desperation, or feeling unappreciated and unwanted, which can negatively impact health of older adults and could contribute to unhealthy behaviors, such as smoking, drinking or not taking medications, as prescribed.<sup>17</sup> . In addition, risk for social isolation increases by living alone, having low income, being age 80 or older, and having compromised health status.<sup>18</sup>

### Chronic Conditions and Injuries

While, many of Ottawa's older adults are healthy - just over half of Ottawa residents aged 65 and over rate their health as excellent or very good - many are living with at least one health issue and/or may experience an injury due to falls.

Common health problems among older adults in Ottawa include hypertension (64%), diabetes (26%), and chronic obstructive pulmonary disease (18%).<sup>19</sup> These diseases are most common among people aged 65 and older. In addition, 50% of Ottawa residents aged 65 and over identify an activity limitation that affects them some of the time or often.<sup>20</sup>

In 2017, injuries from falls caused the most injury-related emergency room visits, hospitalizations and deaths among adults aged 65 and older.<sup>21</sup> Every year in Ottawa, approximately one fifth of adults aged 65 and older who are living in private homes report falling at least once in the past year.<sup>22</sup>

Leading causes of death in people aged 65 and older include ischemic heart disease, dementia & Alzheimer's, lung cancer and cerebrovascular disease (Table 1). Dementia is one of the top three causes of death in the Champlain LHIN among older adults.<sup>23</sup> The risk of a dementia diagnosis roughly doubles every 5 years after age 65.<sup>24</sup>

**Table 1: Leading cause of death among people aged 65 and older in Ottawa 2012**

Men	Women
Ischemic Heart Disease (15%)	Dementia & Alzheimer's (16%)
Dementia & Alzheimer's (9%)	Ischemic Heart Disease (12%)
Lung cancer (8%)	Cerebrovascular (8%)

Source: National Ambulatory Care Reporting System 2012, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: Aug 2017.

### Social Determinants of Health

Despite being a relatively affluent city, differences in health status exist in Ottawa between people and groups because of their social and economic circumstances.<sup>25</sup> These differences also affect older adults who may be living with additional stresses such as chronic disease. Low income can limit older adults' ability to engage in health protective behaviours. For example, only 18% of residents aged 65 and over living in low income report having dental insurance compared to 65% of people not living in low income and are also less likely to have seen a dentist in the past 12 months compared to people not living in low income (44% versus 76%).<sup>26</sup>

### Health Service Usage

Many older adults regularly see a health care professional, participate in cancer screening and receive the flu vaccine, all of which can contribute to improved health outcomes. In Ottawa, 97% of people aged 65 and older report having a regular medical professional and 83% report seeing a medical doctor in the past 12 months.<sup>27</sup> Among adults aged 65 and older, 63% report having dental insurance and 73% reporting having a dental visit in the past year.

Based on 2014 to 2015 data, 64% of Ottawa residents aged 52 to 74 had some form of colorectal cancer screening.<sup>28</sup> Among women aged 52 to 69, 64% of reported having a mammogram in the past two years and 57% aged 50 to 69 had a Pap smear in the past

3 years.<sup>29</sup> In addition, uptake of flu vaccine is higher among Ottawa residents aged 65 and older at 76% compared to the rest of Ontario at 63%.<sup>30</sup>

### Health care cost

In Ontario, 10% of older adults who are experiencing the most complex health issues account for 60% of annual health care spending. At the same time, the healthiest 50% of older population accounts for only 6% of overall annual spending on health care.<sup>31</sup>

At a national level, the aging population is “a modest driver of increasing health care costs” at approximately 0.9% per year. In addition, per-person spending increased with age as seen in 2015: \$6,607 for people age 65 to 69, \$8,495 for people 70 to 74, \$11,570 for people 75 to 79, and \$21,407 for people 80 and older.<sup>32</sup>

Preventing and reducing the burden of disability and chronic disease is likely to help manage health care costs as well as improve quality of life.

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<sup>1</sup> Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016190

<sup>2</sup> Population Projections 2018, 2036, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH Ontario, Date Extracted Oct 2017.

<sup>3</sup> Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016190.

<sup>4</sup> Statistics Canada, 2001 Census of Population, Statistics Canada Catalogue no. 95F0363XCB2001001

<sup>5</sup> Statistics Canada. 2018. Ottawa, CV [Census subdivision], Ontario (table). Aboriginal Population Profile. 2016 Census. Statistics Canada Catalogue no. 98-510-X2016001. Ottawa. Released July 18, 2018

<sup>6</sup> Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016054.

<sup>7</sup> Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127

<sup>8</sup> Canadian Community Health Survey 2015/16. Ontario Share File. Statistics Canada.

<sup>9</sup> Statistics Canada. Table 13-10-0113-01 Canadian health characteristics, two-year period estimates

<sup>10</sup> Ottawa Public Health. Older Adults Fall Prevention Survey, 2012. Ottawa (ON): Ottawa Public Health, 2013.

<sup>11</sup> Canadian Community Health Survey 2015-2016, Statistics Canada, Share File, Ontario MOHLTC

<sup>12</sup> Statistics Canada. Table 13-10-0113-01 Canadian health characteristics, two-year period estimates

<sup>13</sup> Ottawa Public Health. Summary of Results-Older Adults Fall Prevention Survey, 2012. Ottawa (ON): Ottawa Public Health, 2013. Available from [http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/older\\_adults\\_survey\\_2012\\_physical\\_summary\\_en.pdf](http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/older_adults_survey_2012_physical_summary_en.pdf)

<sup>14</sup> Gomes T, Pasricha S, Martins D, Greaves S, et al. Behind the Prescriptions: A snapshot of opioid use across all Ontarians. Toronto: Ontario Drug Policy Research Network; August 2017.

<sup>15</sup> Ottawa Public Health. Status of Mental Health in Ottawa. June 2018. Ottawa (ON): Ottawa Public Health; 2018 Available from: [http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/mental\\_health\\_report\\_2018\\_en.pdf](http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/mental_health_report_2018_en.pdf)

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- <sup>16</sup> Ottawa Public Health. Status of Mental Health in Ottawa. June 2018. Ottawa (ON): Ottawa Public Health; 2018 Available from: [http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/mental\\_health\\_report\\_2018\\_en.pdf](http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/mental_health_report_2018_en.pdf)
- <sup>17</sup> Ami Rokach. Routledge, Oct. 18, 2013 - Psychology - 312 pages Loneliness Updated: Recent research on loneliness and how it affects our lives.
- <sup>18</sup> Report on the Social Isolation of Seniors, 2013-2014. Available on <https://www.canada.ca/en/national-seniors-council/programs/publications-reports/2014/social-isolation-seniors/page05.html>
- <sup>19</sup> Stukel TA, Croxford R, Rahman F, Bierman AS, Glazier RH. Variations in Quality Indicators Across Ontario Physician Networks, Applied Health Research Question (AHRQ) 2017 0900 918 000. Toronto: Institute for Clinical Evaluative Sciences; 2016.
- <sup>20</sup> Ottawa Public Health. Status of Mental Health in Ottawa. June 2018. Ottawa (ON): Ottawa Public Health; 2018
- <sup>21</sup> National Ambulatory Care Reporting System 2017, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: Aug 2018.
- <sup>22</sup> Rapid Risk Factor Surveillance System, 2014 Ottawa. Analysed Aug 2015
- <sup>23</sup> Sub-Region Population Health Profiles Technical Report October 2017. Available from: <http://www.champlainhin.on.ca/GoalsandAchievements/OurStratPlan/SubRegions.aspx>
- <sup>24</sup> Public Health Agency of Canada. <https://infobase.phac-aspc.gc.ca/datalab/dementia-alzheimers-blog-en.html>
- <sup>25</sup> Ottawa Public Health. Health Equity and Social Determinants of Health in Ottawa. Nov 2016. Available from [http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/health\\_equity\\_social\\_determinants\\_2016\\_en.pdf](http://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/health_equity_social_determinants_2016_en.pdf)
- <sup>26</sup> Canadian Community Health Survey 2013-2014, Statistics Canada, Share File, Ontario MOHLTC
- <sup>27</sup> Statistics Canada. Table 13-10-0113-01 Canadian health characteristics, two-year period estimates
- <sup>28</sup> Stukel TA, Croxford R, Rahman F, Bierman AS, Glazier RH. Variations in Quality Indicators Across Ontario Physician Networks, Applied Health Research Question (AHRQ) 2017 0900 918 000. Toronto: Institute for Clinical Evaluative Sciences; 2016.
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- <sup>30</sup> Canadian Community Health Survey 2015/16. Ontario Share File. Statistics Canada.
- <sup>31</sup> Institute for clinical evaluative sciences. Wordchis, W et al. 2012. High Cost Users of the Ontario Health System: preliminary Analyses. Toronto, Ontario.
- <sup>32</sup> Canadian Institute for Health Information. National Health Expenditure Trends, 1975 to 2017. Ottawa, ON: CIHI; 2017. Available from <https://www.cihi.ca/sites/default/files/document/nhex2017-trends-report-en.pdf>