Housing Policy, Aging and Health Care: Problems and Policies for the Near Future

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Key Questions

• Where will older people live?
• How must we adapt new & existing urban infrastructure to needs of aging pop’n at scale?:
  • Housing
  • Social relationships
  • Transportation
  • Services
• How will we accommodate an extra 700K octogenarians in the Greater Golden Horseshoe?
• How will smaller communities cope?
• Can cities become not only age-friendly, but age-optimizing?
Our Infrastructure Fails Seniors Who Don't Drive, And That's A Problem For Everyone

What will happen when so many people are left without a practical way to get around?

Photo: Michael Kowalczyk/EyeEm/Getty Images
Housing, long-term care, aging

• COVID-19 revealed problems in LTC, retirement homes
  • Indicative of larger problem of housing and aging
• 80+ population in GGH estimated to increase from ~350K to 1.05M by 2041
• Gap in purpose-built options for ‘housing career’ b/w single family home & institution
• ‘Aging-in-place’ can mean people are stuck in inappropriate accommodation
• ~ 2M ‘empty bedrooms’ in Greater Toronto Area
• ‘Housing’ = accommodation + support
  • Includes hospitals, LTCFs, jails, shelters...all ‘housing’
  • Need more innovation and supply of ‘housing’ for aging
Housing “Career” Ladder

What’s the Role of Housing?

About 1 in 9 newly admitted long-term care residents potentially could have been cared for at home.

Why do some enter long-term care early?

Residents and family members of residents admitted to long-term care told us they experienced various barriers to remaining at home:

**Difficulty navigating the health care system** — People experienced confusion and challenges around who to contact, what services were available, the amount of time required to coordinate services and the lack of continuity across the system.

**Financial barriers** — Because publicly funded home care does not cover all costs associated with caring for someone at home, some families experienced significant out-of-pocket expenses. Those living in rural and remote communities faced higher travel costs for medical appointments and limited availability of home care services and supports.

**Responsiveness** — People emphasized the importance of reliable home care staff, as well as the need for services that were flexible to the changing needs of the person receiving care.

**Access to special services** — People highlighted the need for social and emotional support, help with non-medical needs and services tailored to their language and cultural needs.

https://www.cihi.ca/en/1-in-9-new-long-term-care-residents-potentially-could-have-been-cared-for-at-home
Urban Infrastructure & Aging

- Highly car dependent, low-density urban form
- Tests to prove driver fitness now harder
- Number of 80+ adults without DL stuck in suburbs poised to grow quickly
- 'Burden of care' of just driving people around will be significant
- Costs of providing public transportation to replace seniors' car trips in suburbs is high
- Disability = function + environment
- Severe risk of social isolation – deadly
Questions for the Future

• How can we plan our cities so that they promote greater levels of independence for older people, for longer, at scale?
  • Age-optimizing cities? Age-optimizing housing?

• What would age-optimizing housing & neighbourhoods look like?
  • Housing, transportation, social opportunities, services
  • How can this be marketable, affordable, desireable and culturally appropriate and balance ‘dignity of risk’?
  • What would also make such a built form ready for future use, post-baby-boomers?
Synergies With Other Agendas

- Urban intensification
- Efficient use of infrastructure (incl. schools)
- Reduced fossil fuel consumption
- Reduced air pollution from automobiles
- Active transport / routine physical activity
- Revitalization of downtown cores
- Affordable housing shortages
- Health system challenges
Urban form, population aging, housing & institutional care

- This part of the research will investigate
  - what’s the scope of the problem in the GGH?
    - Fine-grained patterns of population growth, urban form characteristics and care utilization in the GGH
    - Housing forms / urban form / locations that reduce risk of premature entry into LTC, etc.
  - What are the current housing/support pathway experiences of low- to moderate-income GGH older adults?
    - Influences of gender and intersectional identities on housing/support pathways and navigation; e.g. 1 in 3 older women living alone live in poverty and are in core housing need (CMHC 2019)
Co-designing equitable aging & housing/supports pathways

- Co-design sessions to determine: 1) Current needs not being met and 2) future aspirations for housing/ supports, including transit and local amenities
- Co-create journey maps through arts-based approaches, which provide space for “future-making”
- Journey maps = systems design solutions
- How do we scale solutions?
  - After co-design of options, consultation with housing and care sectors to plan scaling & implementation
  - Design/render in visual form post-consultation data to effectively inform future policymaking
- Equity analysis throughout – clear SES patterns