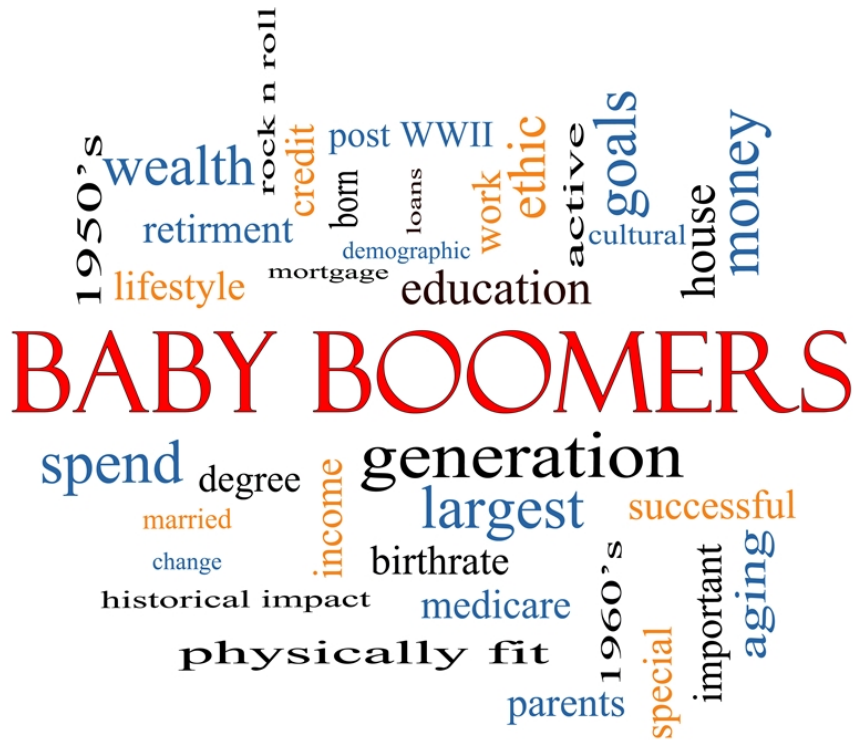


# Bracing for the Baby Boomers:

Projecting the impact on existing services

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## Demographics

Seniors make up the fastest-growing age group. This trend is expected to continue for the next several decades due primarily to a sharp decline in fertility rates (i.e. average number of children per woman), an increase in life expectancy, the out-migration of youth, and the aging of the baby boom generation (Statistics Canada, 2014). Between 2011 and 2031, all members of the baby boom generation—Canada’s largest ever birth cohort (born between 1946 and 1964)—will turn 65. In 2011, an estimated 5.0 million Canadians were 65 years of age or older, a number that is expected to double in the next 25 years to reach 10.4 million seniors by 2036. By 2051, about one in four Canadians is expected to be 65 or over (Canadian Institute for Health Information, 2011). Most seniors in the older age groups are women.

## Who are the Boomers?

Baby Boomers make up 27% of the Canadian population (Alger, 2013). They were born between 1946 and 1964 and reached adulthood between 1964 and 1982. Though there is individual variation between baby boomers, the following are some commonly agreed upon boomer characteristics include:

- **Grew up feeling secure and stable** which left room for exploration and protest
- **Benefitted from easier access to resources** (educational, financial and social opportunities)
- **Came of age during periods of great social change** (i.e. the Women’s Movement, the Cold War, the Vietnam War, the birth control pill, the Hippie sub-culture, and the Civil Rights Movement) (University of Iowa, 2009)
- **Value idealism, youth, personal gratification**, material wealth, health and wellness, individual choice and community involvement (Trower, 2009)
- **Hard working and are adaptive**, collaborative, confident and work well in teams
- **First generation to experience a dramatic rise in divorce rates**
- **Healthier than their parents** were at the same age. Boomers have a health status more similar to that of adults younger than age 65 (Canadian Institute for Health Information, 2011).

## Bracing for Impact

The growing number of Canadians in the baby boom cohort will place higher demand on existing health and community based services. It is prudent for all levels of government to collaborate with community efforts to pro-actively plan for the baby boom impact. The following section offers an overview of these impacts.

## Health Services

In 2008, the *Canadian Survey of Experiences with Primary Health Care* found that 76% of Canadian seniors reported having at least one of 11 chronic conditions and one-quarter of seniors were diagnosed with three or more of these conditions (Canadian Institute for Health Information, 2011). The highest rate of health care use was reported amongst adults with the greatest number of chronic conditions, regardless of age. Due to the complexity of their needs, seniors use almost 70% more resources while in hospital compared with non-seniors adults (Canadian Institute for Health Information, 2011). Health experts agree that the following health services are most likely to see an increase in demand with the aging population.

### Family Physicians

The demand for family physicians will increase with the aging population and their incidence of chronic disease. According to a national health survey, less than half of surveyed Canadians reported same or next day access to a doctor or nurse when they needed care. And one-third reported waiting six days or longer (Canadian Institute for Health Information, 2011). In British Columbia, the “GP for Me” initiative is working to link every BC resident who wants a family doctor with one (A GP for Me, 2013). As well, work is underway to place nurse practitioners and social workers into family practice settings.

### Primary Health Care Services

Primary Health Care (PHC) services are often the first point of contact with the health system. Multi-disciplinary staff provide treatment for illness, monitor chronic diseases and offer health promotion activities. Primary Health Care services are particularly valuable for chronic disease management and reducing costly hospital admissions. Given the growing number of seniors with chronic diseases, the demand for PHC services will grow.

### Pharmacy Services

Between 1998-2007 retail spending on prescription drugs in Canada grew from \$8B to \$19B (Canadian Institute for Health Information, 2011). With the increasing number of seniors living with chronic disease, the demand for prescription drugs will continue to grow. The issue of seniors and “polypharmacy”, where patients are prescribed five or more prescription drugs, is a genuine concern due to the increased risks for drug interactions and side effects. As well, seniors’ use of potentially inappropriate medications (either because of their ineffectiveness or unnecessarily high risk) will place additional demands on pharmacy services.

### Specialist Medical Services

It is expected that some specialties of medical professionals will be in particularly high demand in the years ahead:

- **Geriatricians:** It is estimated that Canada needs 500 Geriatricians, nearly double what we currently have. Across the country there is wide variation in the numbers of Geriatricians with the highest in Nova Scotia at 6.8 per 100,000 seniors and no Geriatricians in the Territories (Canadian Institute for Health Information, 2011).

- **Orthopedic Surgeons:** With the aging population, there is expected to be an increased need for joint surgeries to replace worn-out hips and knees.
  - **Rehabilitation Services:** It is reasonable to assume that health professionals that provide rehabilitation services such as physiotherapists, kinesiologists and occupational therapists, chiropractors, massage therapists, builders of prosthetics, etc. will also be in higher demand.
- **Radiologists:** With more screening programs, there will be greater demand for reading of ultra-sounds, x-rays, scans, etc.
- **Psychiatrists, Psychologists, Social Workers and Counsellors:** To deal with growing numbers of patients with dementia and/or depression.

### Prevention and Screening Programs

The sheer number of aging people will require an increase in disease prevention and screening programs. Examples include:

- Devising screening tools to spot adults who are developing memory problems
- Colon and breast cancer screening programs
- Programs to support and screen senior drivers

### Home Care Services

Home care type services are provided by skilled professionals and include nursing, physical, occupational and respiratory therapy and home support (help with housework and meals). The demand for home care services will grow over the next few years for several reasons:

- The growing number of aging seniors who will require support to age at home
- Seniors' incidence of multiple chronic diseases increases with age
- The growing number of seniors with some form of disability
- The changing structures of families such that adult children live further away from aging parents, and are sometimes challenged with childcare and elder parent care.

### Palliative Care Services

Across the country, the demand for palliative care services will grow. The baby boomer generation will live longer than previous generations and they have a preference to age and die in place. According to Canadian Medical Association President, Dr. Louis Hugo Francescutti: "A common thread was that people (boomers) said they don't want to die in pain, they don't want to die alone and they don't want to be a burden to their loved ones."<sup>1</sup> Fewer than 30% of Canadians who will die this year will have access to palliative care. And the issue is especially acute for Canadians living outside of major centres. In addition to the growing demand for hospital based and community based palliative care services, is the growth projected in the funeral industry.

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<sup>1</sup> Source: <http://www.cbc.ca/news/health/physician-assisted-death-divides-canadians-medical-panel-hears-1.2670162>

### Dental Care

The demand for dental care and denturists will increase with the aging population. The baby boomer generation grew up with regular dental care and they will expect it through their older years. Dental care is not a universally available health benefit, but proper dental hygiene is a critical factor in seniors' health and wellbeing. In 2008-2009, nearly half of all seniors had not visited a dental professional in the previous year compared to 27% of those aged 45-64. As well, 14% of seniors had difficulty chewing hard foods, affecting 19% of those aged 85 and older. In the Kootenay Boundary region, the Dental Access Fund provides funds for low-income residents to access affordable dental care (<http://trailfair.ca/ProgramPages/Dentalaccess.html>) and the newly opened West Kootenay Community TEETH Clinic Society provides service to people in financial need.

## Community and Social Services

### Transportation

The growing number of seniors is going to place even greater demand on the community, social and health services in communities. For rural seniors who don't drive, access to these services will require transportation. There will be greater demand for transportation services, including:

- Expansion of informal support networks of family and friends to transport seniors
- Expansion of Volunteer Driver Programs and Handy-Van services
- Expansion of services for seniors with illness and/or disabilities
- Changes to public transit services to make the experience as age-friendly as possible
- Efforts to make transportation even more affordable for low-income users
- Expansion of innovative services like the Kootenay Rideshare's "Give a Senior a Ride"
- Expansion of senior drivers safety, support and testing programs
- Communication to seniors about the transportation options available
- "Active transportation" initiatives such as widening sidewalks so they are suitable for scooters and wheelchairs
- Scooter training programs and re-charging stations for battery operated scooters
- Publicly accessible mobility aids such as wheelchairs, walkers and canes in different community locations

### Supports with Daily Tasks

There will be a growing demand for services that help seniors remain within their own homes. The term "Functional capacity" refers to a senior's ability to carry out their everyday tasks. According to the Canadian Institute of Health Information, the most commonly reported functional capacity limitations across all ages were inability to do housework without assistance, shopping without assistance, inability to go places without help, and the inability to prepare meals without help. In addition, more than ten percent of the oldest seniors aged 85+ had difficulties with bathing or showering without help, walking without help and using the washroom easily (Canadian Institute for Health Information, 2011).

Demand for services that help seniors with daily tasks will rise significantly in the coming years.

These services include:

- Help with personal grooming
- Housework, laundry, yard work and gardening
- Meal preparation,
- Home maintenance,
- Snow shoveling,
- Vehicle maintenance, and
- Transportation to shopping, appointments and social activities.

*“The health care system’s sustainability may rely in part on informal support networks to delay institutionalization as long as possible.”*

(Canadian Institute for Health Information, 2011, p. 78)

### Support for Caregivers

Most seniors want to, and do live at home. But as their needs change, they will need assistance in order to remain at home. Support in the form of caring family, friends and neighbours enables many seniors to remain at home safely and independently. There are more than two million informal caregivers aged 45+ in Canada. Nearly one-third are spouses, and almost half are children or children-in-law.

Informal caregivers can be stressed with the demands of round the clock care and stress levels increase with the total hours of care provided and the necessity of caring for seniors with cognitive impairments and depression (Canadian Institute for Health Information, 2011). Caregivers caring for children and parents at the same time are at increased risk of resigning from employment.

Social service organizations are wise to prepare for an increased demand for seniors’ programs as well as caregiver support programs and respite services. Examples include the following:

- Enhance the capacity within seniors’ centres to deliver day programs
- Develop programs that cater to the likes of baby boomers
- Enhance the transportation available to seniors for social outings
- Provide outreach counseling and therapy services to people in their homes
- Enhance existing nutrition programs such as Meals on Wheels
- Develop rosters of volunteers for home and yard maintenance and volunteer drivers
- Implement programs like *Better at Home* ([www.betterathome.ca](http://www.betterathome.ca)),
- Expand elder abuse services and advocacy services
- Prepare to support greater numbers of disabled seniors with mobility aids and service.

### Housing

It is becoming increasingly important to understand and plan for the housing needs of older Canadians. According to the Conference Board of Canada, about 60% of Canadians currently

live in single-detached homes and younger boomers are most of the homeowners. As the boomers downsize or retire, many will move into smaller and lower-maintenance condominiums and multi-family dwellings. This will cause a shift in demand away from single-family homes with a resultant drop in price (Curren, 2013). There will be **growing demands to adapt living spaces** so that boomers can safely age in place. Municipal governments will be faced with making **zoning changes** to allow for denser housing developments and will be urged to support **creative approaches and incentives** for building accessible coach houses, secondary “mother-in-law” suites, home-sharing arrangements and seniors’ co-operative housing with shared services.

Seniors no longer able to age in their own home will require **supportive housing options**. **Assisted Living** arrangements include nutritious meals, opportunities for socialization, participation in physical activities and access to health services. It is an option that facilitates seniors to continue living in their community, and may reduce costly hospital or facility admissions.

In 2004, senior women were more likely than senior men to be victims of *family* violence in Canada. In 2004, one-third of senior victims sustained a minor injury (33%) as a result of an offence by a family member (Public Health Agency of Canada, 2012). The growing number of seniors will place greater demand on the need for community **safe homes** and **shelters** for seniors experiencing abuse. As well, there will be an increase in demand for elder abuse counseling services, advocacy services, etc.

#### Employment and Work Support Services

BC has the highest overall poverty rate in Canada at 10.7% (nearly two percentage points higher than the national average). Many older persons have an economic need to continue working. Within Canada, the rising cost of living means that many seniors are facing delayed retirement. The stock market decline of the past few years is also causing investors in the 50-70 year old age group to adjust their retirement expectations. Seniors needing to work will require support in the way of employment services, advocacy for age-friendly places of employment (and health benefits) and advocacy for age-friendly working environments such as opportunities to job-share, work from home and subsidized transportation to and from the workplace. With shrinking energy levels, working seniors may be more challenged than their younger colleagues to juggle work responsibilities, home tasks and yard work. They will most likely need extra support from community organizations, friends and neighbours in order to maintain their employment.

### Labour Force Decline

Over the next 20 years, there will be a steady retirement of boomers. This will cause a decline in the size of the labour force in Canada, making recruitment to services required by the aging

boomers, more and more difficult. With the growth in the volume of services required to meet boomers' needs, there is also going to be a growth in the need for program administration.

There will need to be increases in the types of services that coordinate, administer, network, liaise, partner, monitor and evaluate health, housing and social programs for seniors. Examples of these include: Government and non-profit housing administrators, Assisted Living Registrars to handle issues of abuse in assisted living facilities, Community Care Licensing Offices to monitor the health, safety and well-being of people in care, Disability service administrators, Pension service administrators, Legal services providers, Health administrators to expand and manage chronic disease and screening programs, transportation administrators to revise public transit to meet seniors' needs, etc.



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