

Special SEDAP Section: Canada's Vulnerable Older Populations

Editorial

Driven by the aging of the baby boom generation, greater life expectancies, and historically low fertility levels, Canada's population is growing older, a reality reflected in the increasing proportion and number of old in Canada along with the growing median age of Canada's population. Beginning in 2011, when the first of Canada's baby boomers reaches retirement age, the number and proportion of old will grow significantly: from approximately 4.7 million seniors aged 65 and over (13.9%) in 2009, Canada's seniors population is projected to increase to 9.8 million by 2036, representing approximately 25 per cent of the total population. Canada's oldest old (aged 85 and over) is projected to grow dramatically as well, reaching 5.8 per cent of the total population by 2056 (Statistics Canada, 2006).

Although Canada's population is generally healthier and more affluent than previous generations (Milligan, 2008; Shields & Chen, 1999; Veall, 2008), the unprecedented changes in the demographic structure of Canadian society immediately raises questions regarding the implications of this demographic change. For instance, and despite the growth of Canada's older population, little is known about the social, political, economic, and health experiences and impacts of aging among more vulnerable elderly groups. At a very broad scale, how will the aging experiences of vulnerable older populations differ from the broader population? Will they share similar traits, or will the vulnerable require additional resources and care? Will there be sufficient affordable, adequate, and suitable housing for the old? Will particular groups, such as those living with special health conditions such as HIV/AIDS, or Canada's gays or lesbians, face particular challenges as they transition into old age? Will there be sufficient resources and protection to counter their potentially greater vulnerability?

The articles in this current issue represent a cross-section of research into Canada's vulnerable older populations, encompassing multiple disciplinary backgrounds. Prompted by a request for papers focusing on the experiences with, and impacts of, aging older populations, this special section of the *Canadian Journal on Aging* begins to address these issues. The call for papers was sponsored by the research program on the Social and Economic Dimensions of an Aging Population (SEDAP) based at McMaster University and funded by the Social

Sciences and Humanities Research Council of Canada (SSHRC; <http://socserv.socsci.mcmaster.ca/sedap/>). Representing a range of disciplinary backgrounds and interests, SEDAP researchers have been concerned with the consequences of Canada's aging population. Over the years, SEDAP researchers have published an impressive quantity of work that has (and will) shape policy and program decisions in the years to come. Articles in this issue consider the health care system and the use of private care and specialized medical intervention, health differences and disparities among older vulnerable populations, and the related topics of housing, long-term care, and end-of-life care.

With older populations acknowledged as placing greater demands on the health care system (Evans, McGrail, Morgan, Barer, & Hertzman, 2001), perhaps one of the most important implications of the aging of the Canadian population is in terms of health care provision and expenditures. Although Canada's nationalized health care system provides "free" service, private health care is different: as Fernandes and Spencer note in their article, the private cost of long-term care varies significantly across the country. Similarly, the application of health care services may discriminate by age. Grignon et al. consider admissions and treatment by age for individuals with acute myocardial infarction (AMI). Evaluating whether and how rates have changed over time, they find clear age patterns, and suggest that age-based rationing of treatment may be occurring in the province of Ontario.

Weeks and LeBlanc's article consider housing concerns among the old. Referencing the Canadian Mortgage and Housing Corporation's (CMHC) core standards of affordability, adequacy, and suitability, their work reinforces the importance of these standards. Moreover, it suggests that housing affordability may be much more important for vulnerable populations, relative to the older population in general. Weeks and LeBlanc also highlighted housing maintenance; in addition, they identify cultural appropriateness, availability, accessibility, and safety as important factors contextualizing housing and the old.

Long-term care and end-of-life poses particular challenges for the old and their families. The article by Casey and Dale Stone, for instance, examines the living

conditions and the importance of access to social support for those living with long-term impairment in the community. For those without social support, isolation or loneliness is common. The article by Duggleby et al. explores messages of hope for older patients with terminal cancer and presents findings that the old have very different meanings of hope, compared to that expressed in the media and in younger cohorts, which reflects different time frames and references.

Differences across aging population sub-groups – including Aboriginals, immigrants, and different ethnic groups – have been a particularly rich area of research, given the potentially greater vulnerability of these groups as a result of social or cultural roles, language issues, socio-economic status in society, or social exclusion, with consistent and negative effects on health and well-being. Based on the 2001 Aboriginal Peoples Survey, Wilson and Rosenberg's contribution focuses on the comparison of health between older Aboriginal and non-Aboriginal people. On average, Aboriginal people are less healthy than non-Aboriginal people, but health differences between these two groups appear to converge with increasing age, and the article raises intriguing policy questions regarding this convergence.

Adding an international comparison to the evaluation of health disparities across older population sub-groups, Prus et al. explore differences in health by race and immigrant status in the United States and Canada. Although partially exploratory, their results highlight that older non-White native and foreign-born Americans experience significant disadvantages in health status and access to health care, even after controlling for related covariates such as insurance coverage and age.

By no means should the articles in this issue represent the "final word" on vulnerable older popula-

tions. Instead, they should be seen as a springboard for future research. For instance, the work by Fernandes and Spencer raises intriguing questions about the affordability of long-term care for many Canadians, variations in the availability of care at a reasonable cost, as well as the ability of individuals to search for lower cost options and the implications for migration and mobility of the old. Similarly, the work by Prus et al. highlights the need for further comparative research, while research by Weeks and LeBlanc on housing and vulnerability demonstrates the need for a better understanding of housing concerns of vulnerable populations. Consequently, we trust that these articles will serve as fuel for future research into vulnerable populations within an aging society.

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Guest Editors

References

- Evans, R.G., McGrail, K.M., Morgan, S.G., Barer, M.L., & Hertzman, C. (2001). *APOCALYPSE NO: Population aging and the future of health care system*. SEDAP Research Paper No. 59. Hamilton, ON, Canada: McMaster University. Retrieved April 2010 from <http://ideas.repec.org/s/mcm/sedapp.html>
- Milligan, K. (2008). The evolution of elderly poverty in Canada. *Canadian Public Policy*, 38(Suppl. 1), 79–94.
- Shields, M., & Chen, J. (1999). Health among older adults. *Health Reports*, 11(3), 47–61.
- Statistics Canada. (2006). *A portrait of seniors in Canada*. Ottawa, ON, Canada: Author. Catalogue No. 89-519-XIE.
- Veall, M.R. (2008). Canadian seniors and the low income measure. *Canadian Public Policy*, 38(Suppl. 1), 47–58.