Canadian Social Policy and Ageing

Introduction

This paper begins with a brief introduction to ageing in Canada, providing a demographic and cultural context before proceeding to further discussion. As a Western capitalist society with an emphasis on autonomy and independence for the individual, myths persist that elderly persons are, by and large, frail, lonely and isolated, and put into long-term care institutions where possible. Empirical research during the last three decades has demonstrated that seniors, despite gradually declining physical health, tend to cope, and are embedded within the community in social networks, preferring 'intimacy at a distance' to living with family members. Families, furthermore, are the first resort for care when health deteriorates providing an estimated 75-80% of all personal care. In other words, the focus on individualism does not mean that seniors are isolated or alone, or that they are abandoned when their health fails.

The paper goes on to discuss selected issues in contemporary Canada that relate to an ageing population. One refers to a tendency in our modern capitalist society, to value others for their productive roles and/or for their wealth, so seniors tend to be devalued. Their exclusion from paid labour leaves them without any socially defined, contributing roles within society. Theirs is a role of exclusion. This is becoming increasingly important as disability free years in old age increase. Governments view volunteerism as one mechanism that allows them to capitalize both on the resources represented by seniors, as well as providing meaningful roles for elderly persons. The next issue discussed refers to 'ageing in place', the expressed preference of the vast majority of individuals, including seniors. This broad topic encompasses sufficient economic means, adequate health care, adequate housing, and other environmental issues. This section focusses largely on the built environment as permitting ageing in place and some programs that would allow seniors to do so, including supportive housing. Still related to aging in place, the next section argues for a considerable expansion of community home care in Canada . Despite health reform at the present time in Canada, there are few signs that the Canadian health care system is becoming more appropriate for its ageing citizens. Indeed, there are indicators to suggest the opposite. The last issue deals with diversity, focussing on subcultural differences. Diversity, while a catch word in many documents, is not well understood and mechanisms for ensuring needs are met within a heterogenous elderly population has not yet been resolved.

The intent of this paper is to provide an overview of ageing in Canada, that draws on existing research knowledge. Where the research contradicts commonly accepted stereotypes about the elderly, this information is provided. Where we do not yet have answers or solutions to problems, this is made explicit. Where we know the solution, but have not seen a willingness to implement, this is also indicated. After describing the current situation of seniors in Canada, this paper focuses on a selected number of issues with which Canadian social gerontology is currently grappling. The answers are more apparent for some than for others, but for none is the future certain. Even in areas where the optimal solutions may be known (such as, for example, in health care), it is not at all clear that the political will exists to ensure the necessary change. Throughout the discussion, areas of contention requiring change are highlighted. This should not be interpreted to mean that seniors in Canada generally are dissatisfied or receive less assistance than is found elsewhere. Rather, while Canada has an enviable quality of life and has many social policies that commend it for seniors, including long established health and welfare measures, there are, nevertheless, numerous issues related to ageing that still require attention. That is, societal assistance for seniors can be improved everywhere - Canada is no exception.