

Data from the NIA's *Ageing in Canada* Survey

2025 Home Care Ontario
Symposium

Mark Hazelden, Executive Director
National Institute on Ageing



Improving the Lives of Older Adults in Canada

- **Mission:** Improve the lives of older adults and strengthen the systems that support them.
- **How we work** : conducting research, convening stakeholders, sharing information, shifting attitudes and advancing policies and practices.
- **Vision** : A Canada where older adults feel valued, included, supported, and better prepared to age with confidence.

Presentation overview

→ How the National Institute on Ageing is supporting older adults:

- ◆ Dementia Campaign
- ◆ Pension Delay Guarantee
- ◆ Vaccines

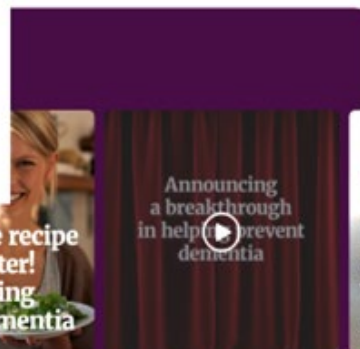
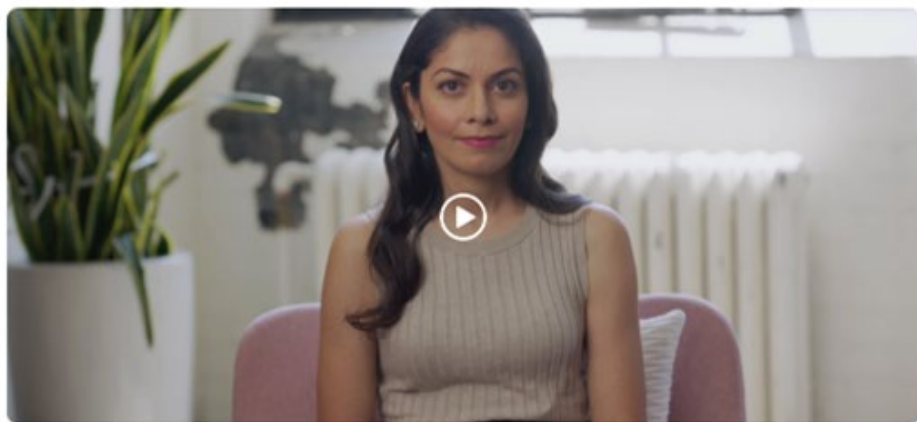
→ Highlights from the *Ageing in Canada* survey:

- ◆ Perspectives on Ageing
- ◆ Access to Health Care, Home Care, Community Care
- ◆ Social Isolation + Ageism
- ◆ Ageing in the Right Place
- ◆ Policy case study

It's Never Too Early—or Too Late—to Protect Your Brain Health

Your choices matter. Research shows that nearly half of dementia cases could be prevented or delayed by taking simple, healthy actions—at any age. Whether it's staying socially connected, managing your blood pressure, getting active, or protecting your hearing, each step you take supports your brain's resilience. The sooner you start, the more benefits you gain—but it's never too late to make changes that can help protect your memory, thinking and quality of life.

Start with the video, then scroll down to learn what you can do.



Announcing a breakthrough in help to prevent dementia

We share family resources, or resources—including video, infographics and expert-backed tips—offer practical, hopeful ways Canadians can reduce their risk and support others.

- Share real stories
- Promote the 14 known ways to help prevent or delay dementia
- Break stigma, inspire change and support healthy ageing

If you're an organization, health professional, caregiver, or advocate—we invite you to help amplify this campaign. Every post, mention, or conversation makes a difference.

DOWNLOAD THE 14 THINGS YOU CAN DO

EXPLORE ADDITIONAL RESOURCES



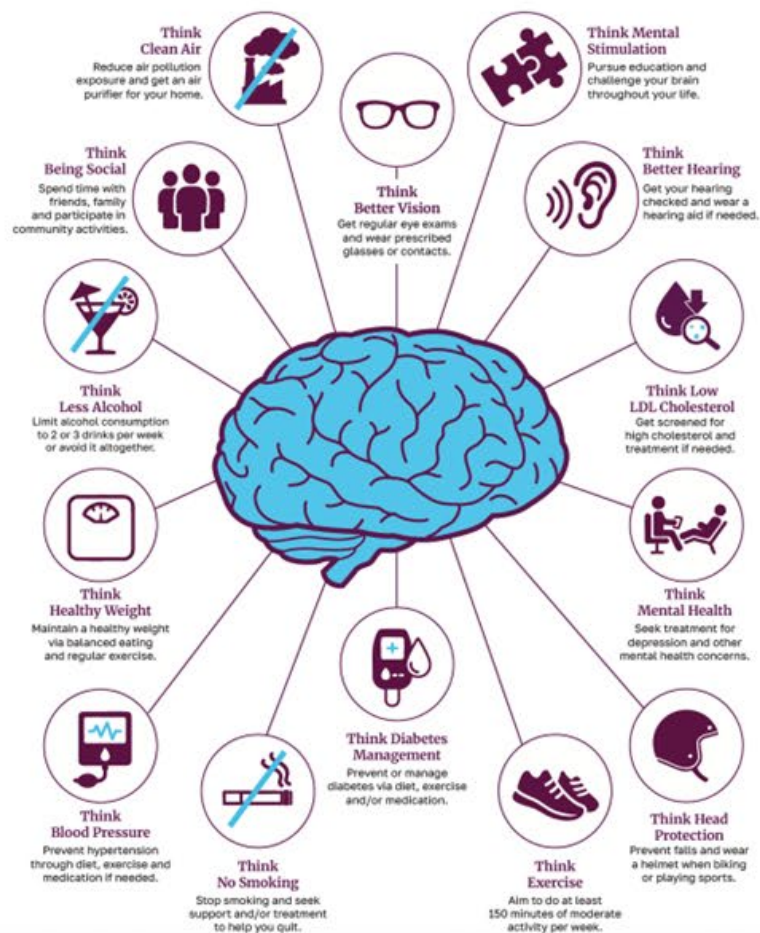
Public Education Campaign: Dementia Awareness

- Launched in Fall 2025
- National reach (web, TV, radio)
- 3-year campaign

SmallStepsBigDifference.ca

14 Ways to Help Prevent Dementia

Learn more at SmallStepsBigDifference.ca



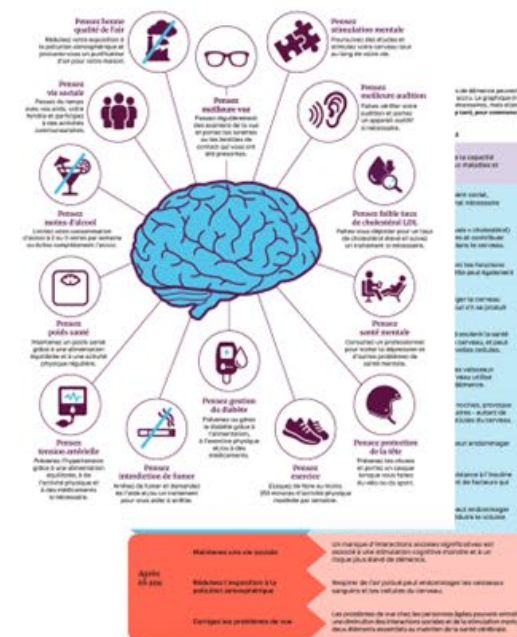
Yes, you can reduce your risk of developing dementia as you age

Research shows nearly half of dementia cases can be prevented or delayed, even with increased genetic risk. The chart shows when in life the steps are most needed, but they help at every age. It's never too early—or too late—to start.

Dementia Prevention Step	Why It matters
Early Life Before Age 45 <ul style="list-style-type: none"> Education & Cognitive Stimulation 	Why It matters Learning new things strengthens the brain's ability to cope with damage or disease and maintain function.
Mid Life Age 45–65 <ul style="list-style-type: none"> Correct Impaired Hearing with Hearing Aids Get Checked and Treated for High LDL Cholesterol Treat Depression/Mental Health Concerns Prevent Traumatic Brain Injury (TBI) Exercise Regularly Prevent/Manage Type 2 Diabetes Quit Smoking Prevent or Reduce Hypertension (High Blood Pressure) Maintain a Healthy Weight Drink Less Alcohol 	Hearing loss can lead to social isolation, depression and increases the mental effort required to process information. High LDL ("bad") cholesterol can damage blood vessels and may contribute to amyloid plaque buildup in the brain. Depression can negatively affect brain function and may accelerate cognitive decline. It can also increase social isolation. A hard hit to the head can hurt the brain and raise the risk of dementia—especially if it happens more than once. Regular exercise helps support heart health, blood flow to the brain and can help our brains grow new cells. Type 2 Diabetes can damage blood vessels and affect how the brain uses insulin, which raises dementia risk. Smoking produces harmful chemicals, causes inflammation and vascular damage – which all harm brain cells. Having high blood pressure for a long time can damage blood vessels in the brain. Obesity is linked to inflammation, insulin resistance and cardiovascular disease – all of which affect our brain health. Excessive alcohol consumption can directly damage brain cells and shrink brain volume.
Late Life Age 65+ <ul style="list-style-type: none"> Stay Social Reduce Exposure to Air Pollution Correct Impaired Eyesight 	A lack of meaningful social interaction is associated with lower cognitive stimulation and a higher risk of dementia. Breathing in polluted air can harm blood vessels and brain cells. Vision problems in later life can lead to less social interaction and mental stimulation, both crucial for maintaining brain health.

14 façons de prévenir la démence

Pour en savoir plus, visitez PetitsPasGrandsResultats.ca



FRENCH

Optimising CPP

>1000

Canadian baby boomers
are making the choice to
claim their CPP/QPP
pension every day

OCTOBER, 2025

Policy Implementation Brief: Pension Delay Guarantee

Vaccines Covered for Ontario Residents 65 Years and Older



Vaccines	National Recommendations	Coverage Details ¹
COVID-19	At least 1 dose of either Comirnaty or Spikevax COVID-19 vaccines per year	Comirnaty and Spikevax are available for free for older adults
Influenza	1 dose of either Fludac or Fluzone High-Dose per year	Fluzone High-Dose and Fludac are available for free for older adults
Pneumococcal (Pneumonia)	1 dose of either Prevnar 20 or Capvaxine ²	Prevnar 20 is available for free for older adults who have not received all previously covered doses of pneumococcal vaccines
RSV	1 dose of either Abrysvo, Arexvy or mRESVIA can be used based on personal factors	Abrysvo and Arexvy are available for free for certain adults 60 to 74 years and all adults 75 years and older
Shingles	2 doses of Shingrix	Shingrix is available for free for older adults 65 to 70 years who have not received a publicly funded shingles vaccine or paid for the Zostavax vaccine, as well as certain Veterans ³ and Indigenous ⁴ older adults
Tetanus and Diphtheria	Immunization history will determine the type of vaccine and the number of doses needed	Vaccines are available for free, including for older adults every 10 years

¹ If you have a private drug plan, it may cover the cost of vaccines that are not publicly covered.

² Recommendations vary for older adults who have received a hematopoietic stem cell transplantation.

³ Eligible Veterans may be covered for this vaccine through Veterans Affairs Canada if they are unable to access it through provincial health services.

⁴ Eligible First Nations and Inuit may be covered for this vaccine through Indigenous Services Canada's Non-Insured Health Benefits (NIHB) Program if they are unable to access it through provincial health services.

? Have more questions?

Speak with your primary health care provider, pharmacist or local public health unit. Visit Health811 online or call 811 for health information.

i Would you like more information on vaccines?

Check out our national vaccine pamphlet by scanning this QR code.



SCAN ME

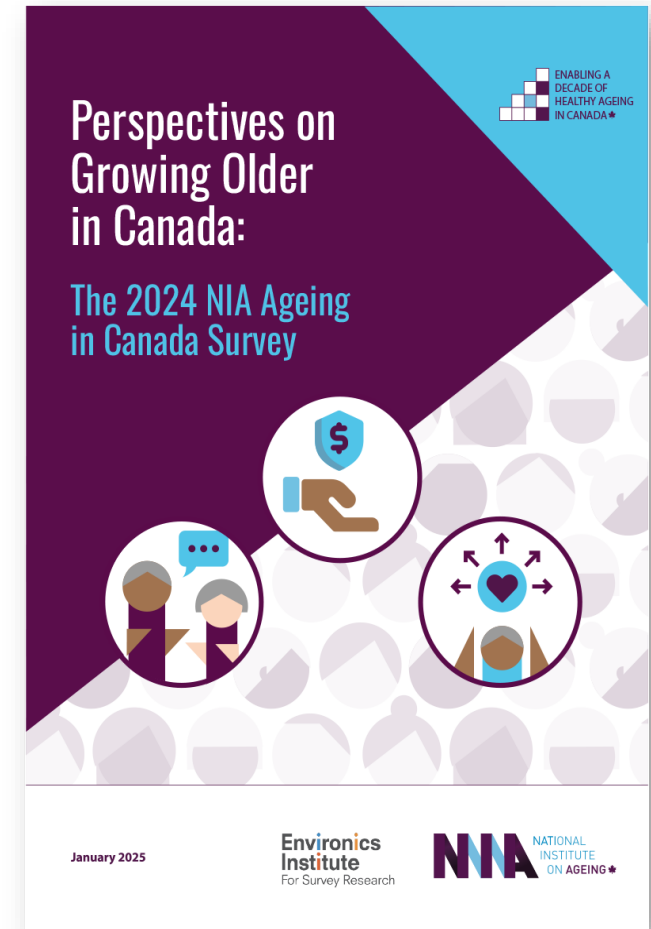
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The development and promotion of this document was made possible through the financial support of Merck Canada Inc., Moderna and Pfizer Canada.

Provincial and Territorial Vaccine One-Pagers 2025/26

The *Ageing in Canada* Survey

- The largest ongoing, public -oriented annual survey on ageing in Canada.
- Surveys 6,000 residents aged 50+ annually since 2022
- **Purpose:** To underpin our policy advocacy and feeds our research



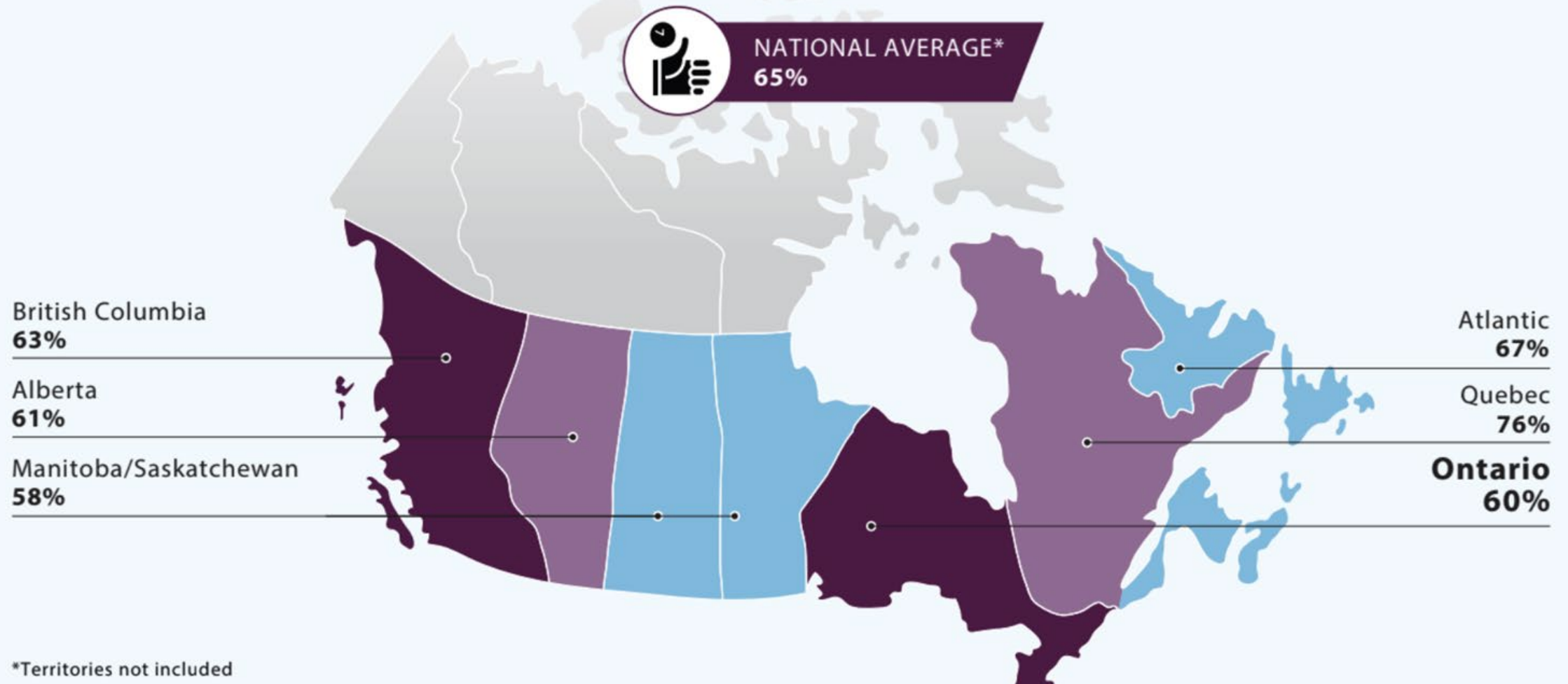
The Ageing in Canada Survey

- Focus areas
 - Perspectives on Ageing
 - Healthy ageing
 - Social wellbeing
 - Financial security
- The survey is designed to:
 - Build evidence
 - Inform policy advice
 - Supporting stakeholders across seniors serving organizations

The Ageing in Canada Survey

Positive feelings about ageing among older adults

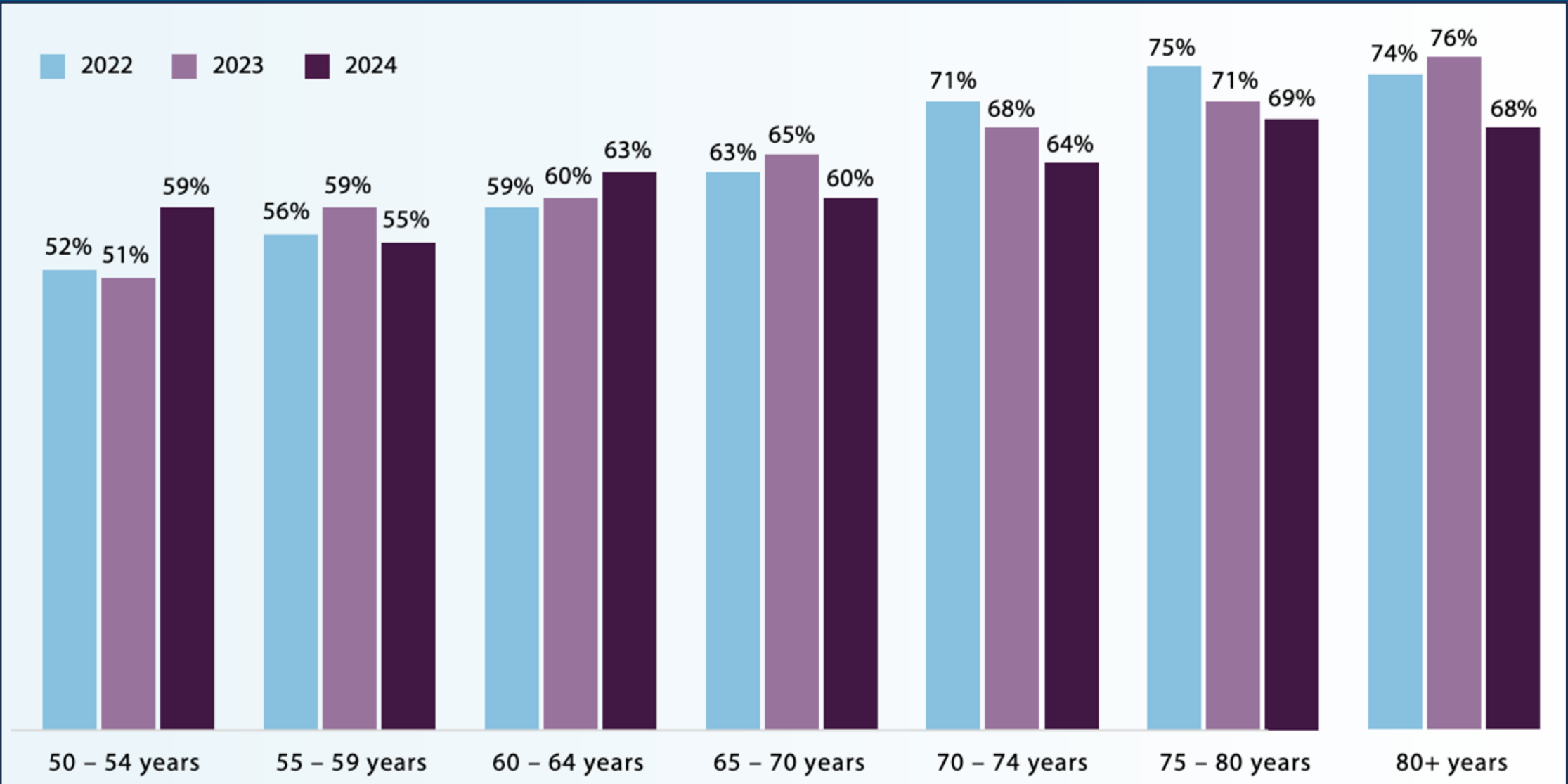
% who report very or somewhat positive feelings





Positive feelings about ageing: Perspectives across age groups

Percentage who report feeling very or somewhat positive about ageing



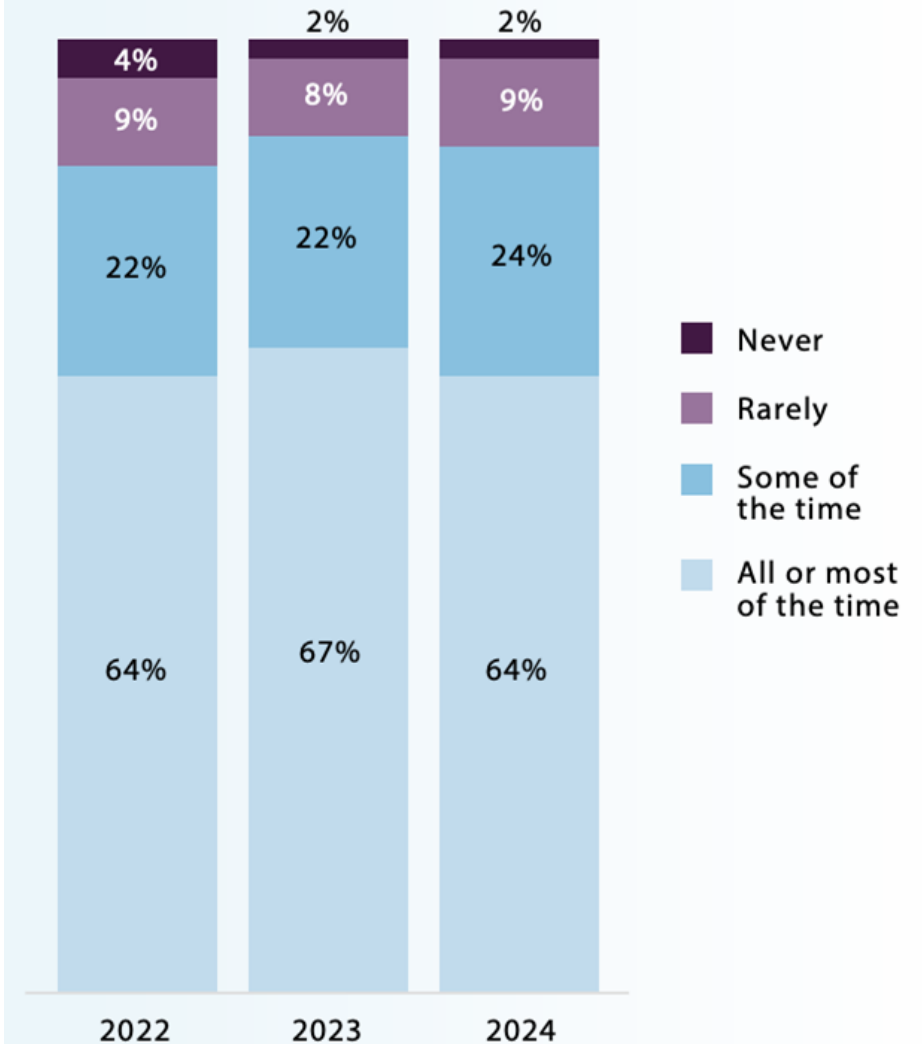


Access to Health Care

The Canadian health care system is “running to stand still”.

- The system is keeping up with both growth in the share of 50+, and higher demands for services
- We are not closing the gap in access.

Percentage who could get the care or services they needed, when they needed it, over the past 12 months








Access and Barriers to Health Care in Ontario

- 66% of Ontarians report being able to access health care all or most of the time
- Ontario is outpacing the national average, barely.
- But people should be able to access care **100% of the time**

Top 5 barriers to health care access in Ontario

Experienced by older adults who struggled to get the care they needed

1		52%	Could not get appointments
2		31%	Appointments, treatments or services were cancelled, delayed or rescheduled
3		27%	Difficulty getting a referral
4		20%	Difficult to travel to service location
5		18%	Service not available in my area

Ageing in the *Right Place*

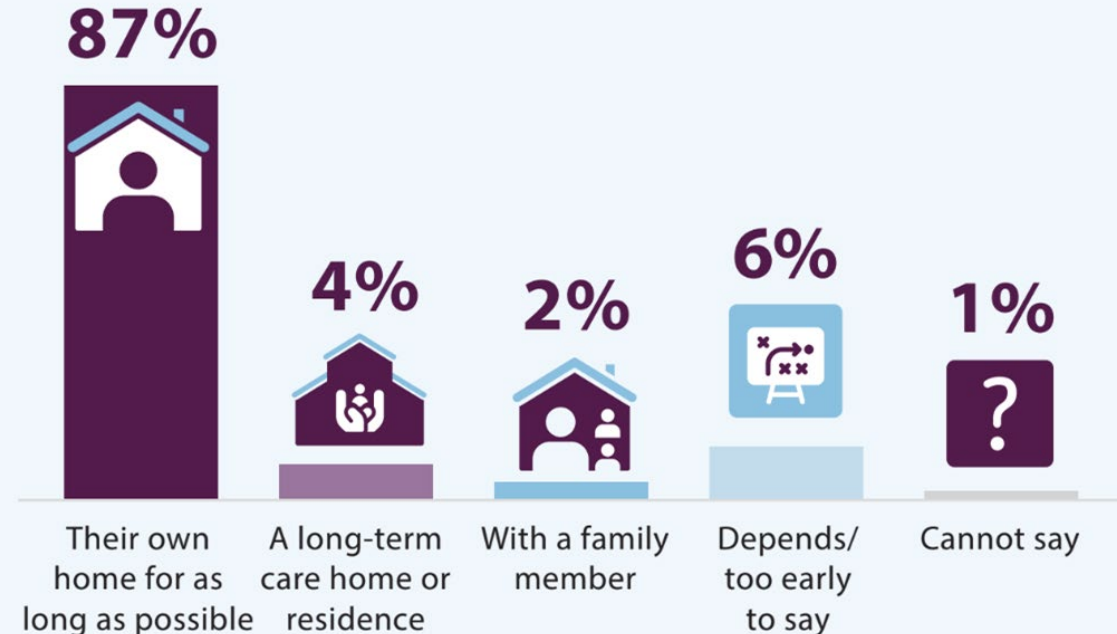
Canadians overwhelmingly want to age at home

→ 80% of Canadians overall

→ 87% of Ontarians


Most don't think their home is suitable, yet very few (18%) are saving for, or have already made (18%) modifications to enable ageing in place.

Where older adults in Ontario want to live as they age



Home Care is Part of the Solution

- 1 in 9 new residents entering LTC could have potentially remained at home with proper supports.
- New provincial support to shift from ALC

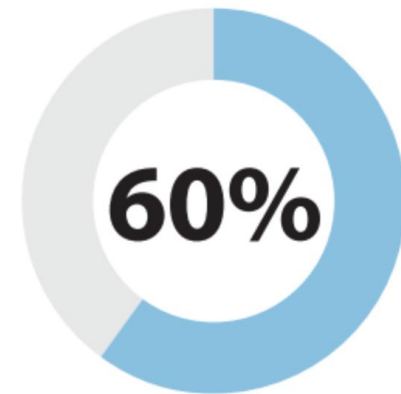
About
1 in **9** 
newly admitted long-term care
residents potentially could have
been **cared for at home**

[CIHI, 2020](#)

Home Care: Access (65+)

For those who needed to access home care, Ontarians 65+ report **slightly worse** access to home care than the Canadian average.

How often could you access home care services you needed, **when you needed them**, all or most of the time:



Home Care: Access

The overall numbers tell one story, but they hide big divides when asked if they could access the home care they need “all or most of the time” [65+]:

- **Gender** : 72% of men report being able to access home care when they need it vs only 53% of women[^]
- **Age** : those 65+ report significantly better access than 50+ all together
- **Urban / Rural** : 61% of city dwellers report timely access vs 41% of rural residents [^]
- **Immigrants** : only 45% of immigrants vs 63% of those born in Canada

[^]2025 national data, 65+

Home Care: Barriers (65+)



Ontario top 4 barriers:

1. Difficult to apply / not eligible [33%]
2. Difficult to travel to service location [25%]
3. Cost ; unable to afford [25%]
4. Wait times too long [24%]



Top 3 barriers across Canada:

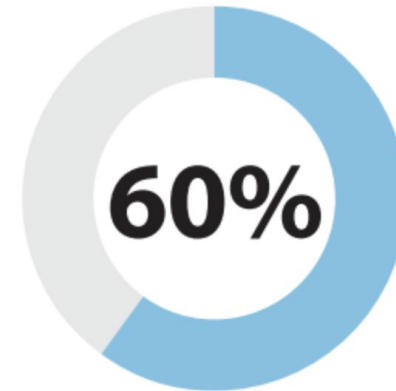
1. Difficulty qualifying or not eligible [29%]
2. Time consuming / Difficult to apply [27%]
3. Cost ; unable to afford (24%)

Home Care: Access by province

Reported ease of access varies widely from province to province

- Alberta: 81%
- 1 Manitoba / Sask: 78%
- 2 Quebec 60%
- 3 Ontario 57%
- Atlantic Canada: 53%
- BC: 50%

National
average:



Community Care Services

→ Ontarians 65+ report **average** access to community care.

How often could you access **community care services** you needed, when you needed them, all or most of the time:



Community Care needs in Ontario (65+)

Community support services older adults in Ontario report needing the most

Low-cost/accessible transportation services



34%

Community exercise and falls prevention programs



29%

Meal or food delivery services



30%

Friendly visiting services



29%

Light yard work/snow shovelling programs



22%

Barriers to accessing Community Care



Ontario top 3 barriers:

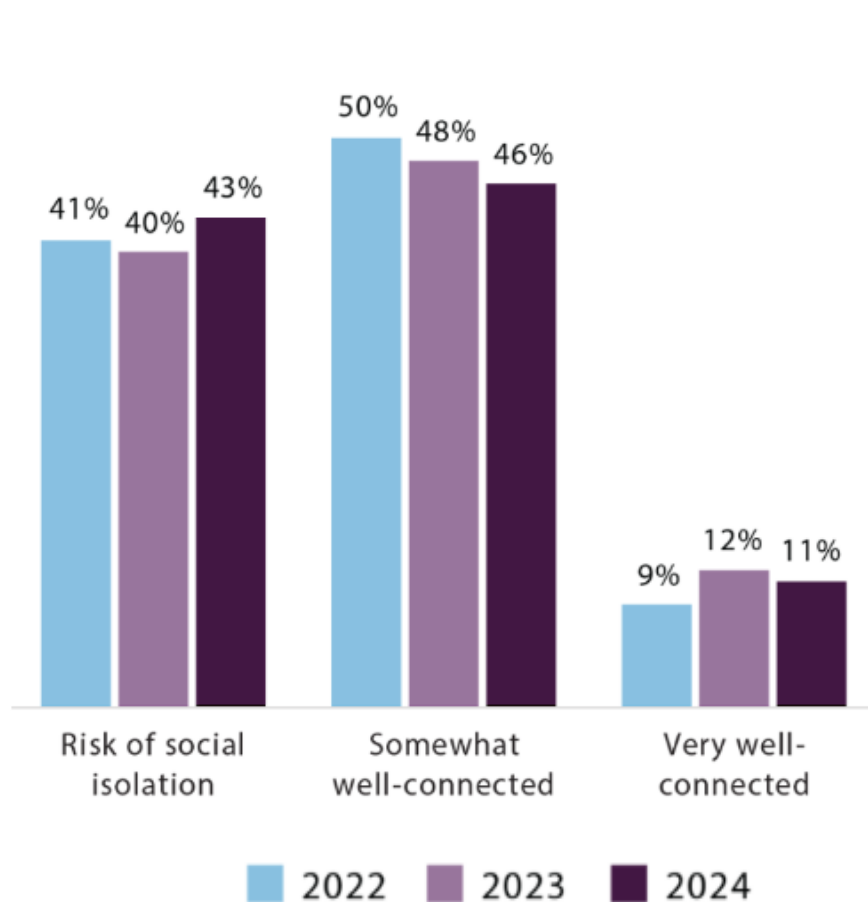
1. **Cost** , unable to afford [37%]
2. **Service not available** locally [34%]
3. **Difficulty qualifying** / not eligible [31%]



Top 3 barriers across Canada:

1. **Cost** ; unable to afford [34%]
2. **Difficulty qualifying** or not eligible [31%]
3. **Service not available** i n area [31%]

Social Isolation in Canada



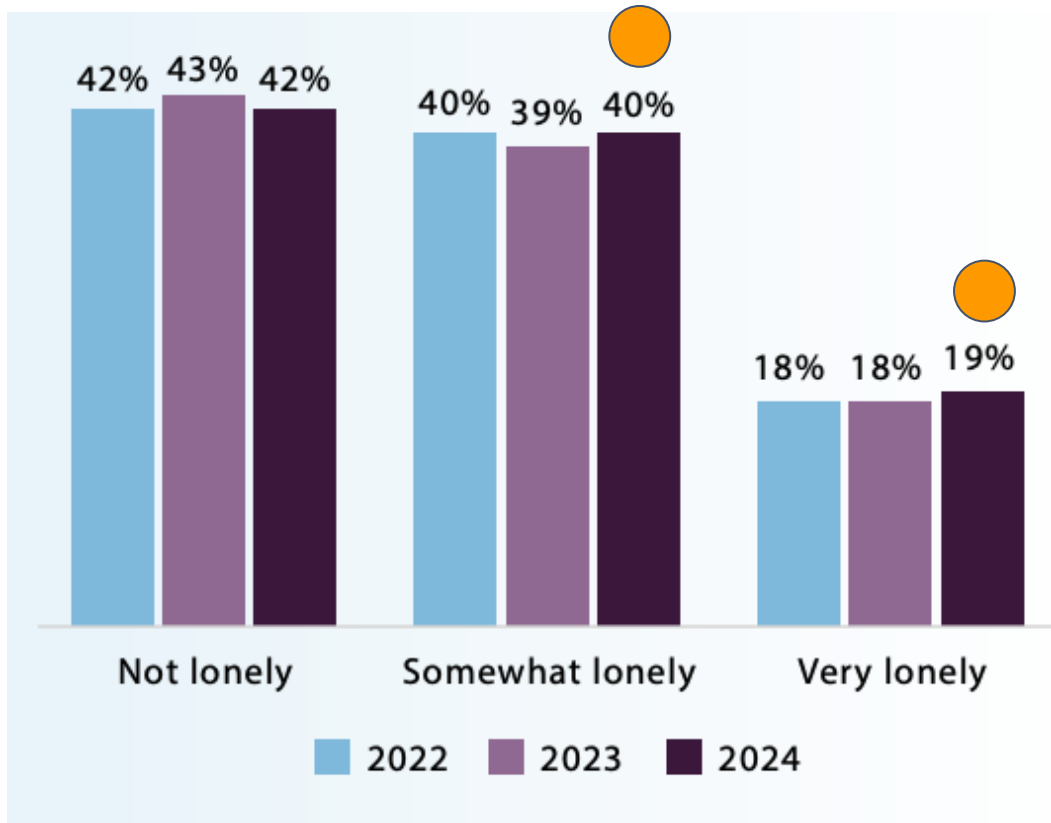
Isolation measures lack of connectedness to friends, family, or the community.

→ 43% of Canadians 50+ had weak connections and are at risk of social isolation.

→ 37% of Ontarians are at risk of social isolation



Loneliness in Canada



Loneliness is a subjective measure.

→ 59% of older Canadians report feeling lonely some or most of the time.

→ 53% of Ontarians report loneliness, and they're much less likely to say they're very lonely (13% vs 19% nationally)

Ageism in Canada and Ontario

% reporting at least one form of **everyday** ageism:



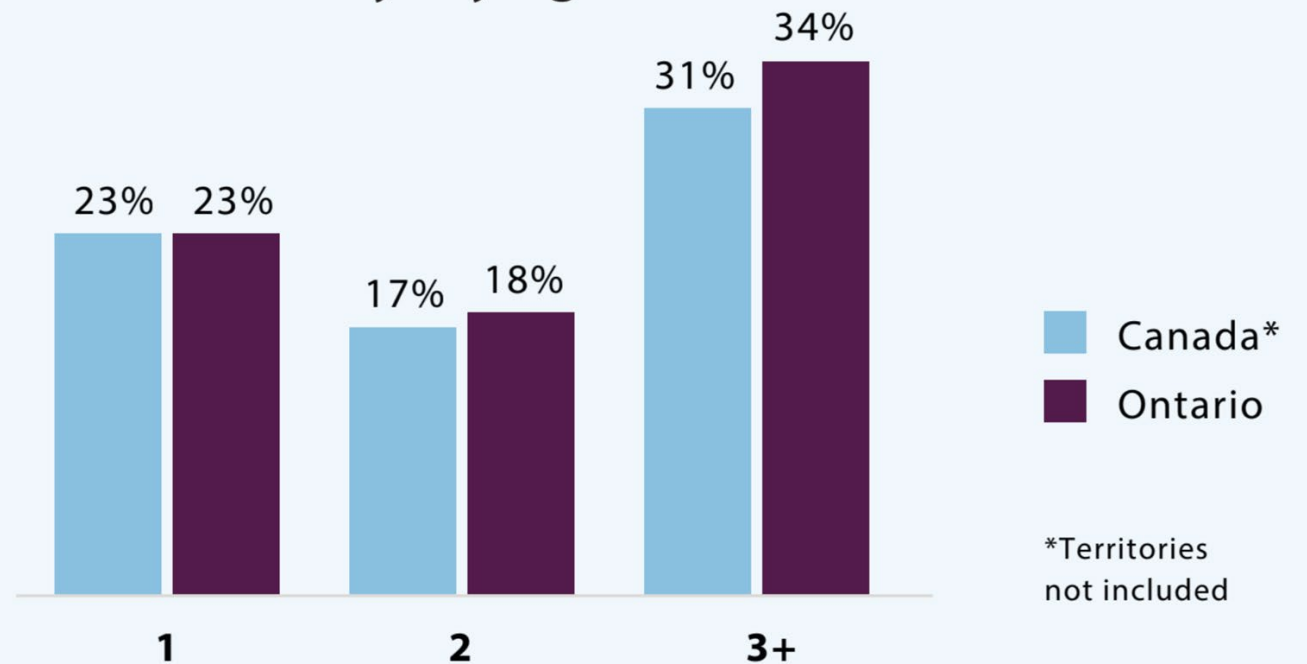
71%



75%

Older adults who experience 1, 2, or 3+ forms of everyday ageism








Older adults who experience 1, 2, or 3+ forms of everyday ageism





Ageism in Ontario

- Older people often don't think they're experiencing ageism, until presented with a list of examples
- Rates of reported ageism is holding steady

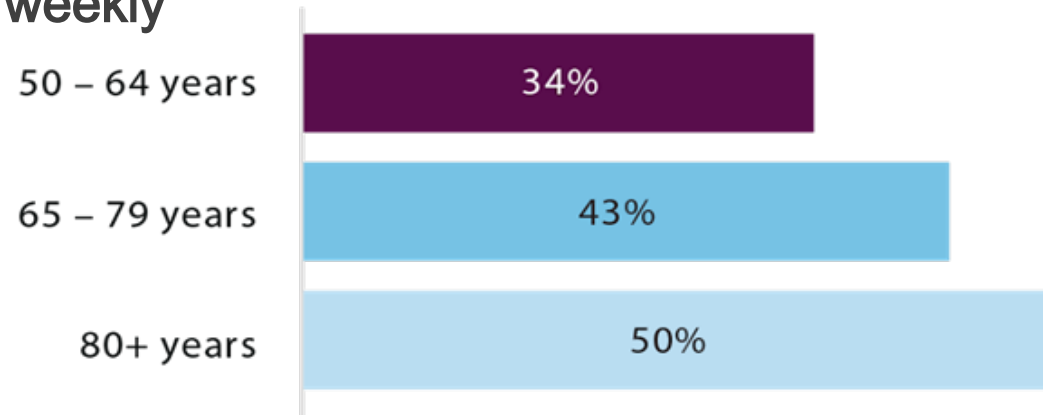
	I hear, see and/or read jokes about old age, ageing or older people.	56%
	People assume I have difficulty with cell phones and computers.	31%
	People insist on helping me with things I can do on my own.	27%
	I hear, see and/or read things suggesting that older adults and ageing are unattractive or undesirable.	27%
	People assume I have difficulty remembering and/or understanding things.	26%
	People assume I have difficulty hearing and/or seeing things.	24%
	People assume I do not do anything important or valuable.	20%



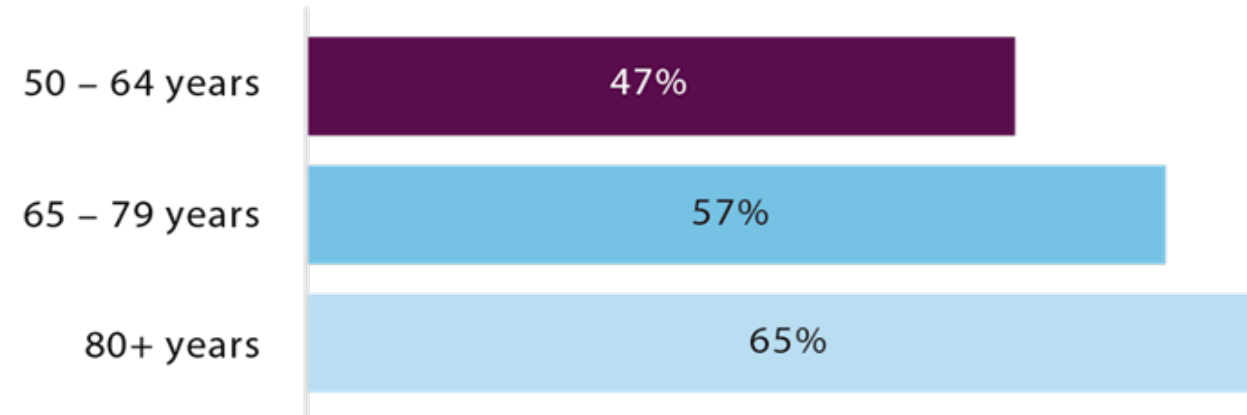
Social Wellbeing: Recreation and Socializing

Older Canadians are finding more time and access to social and recreational activities.

Percentage who participated in social, recreational or group activities **daily or weekly**



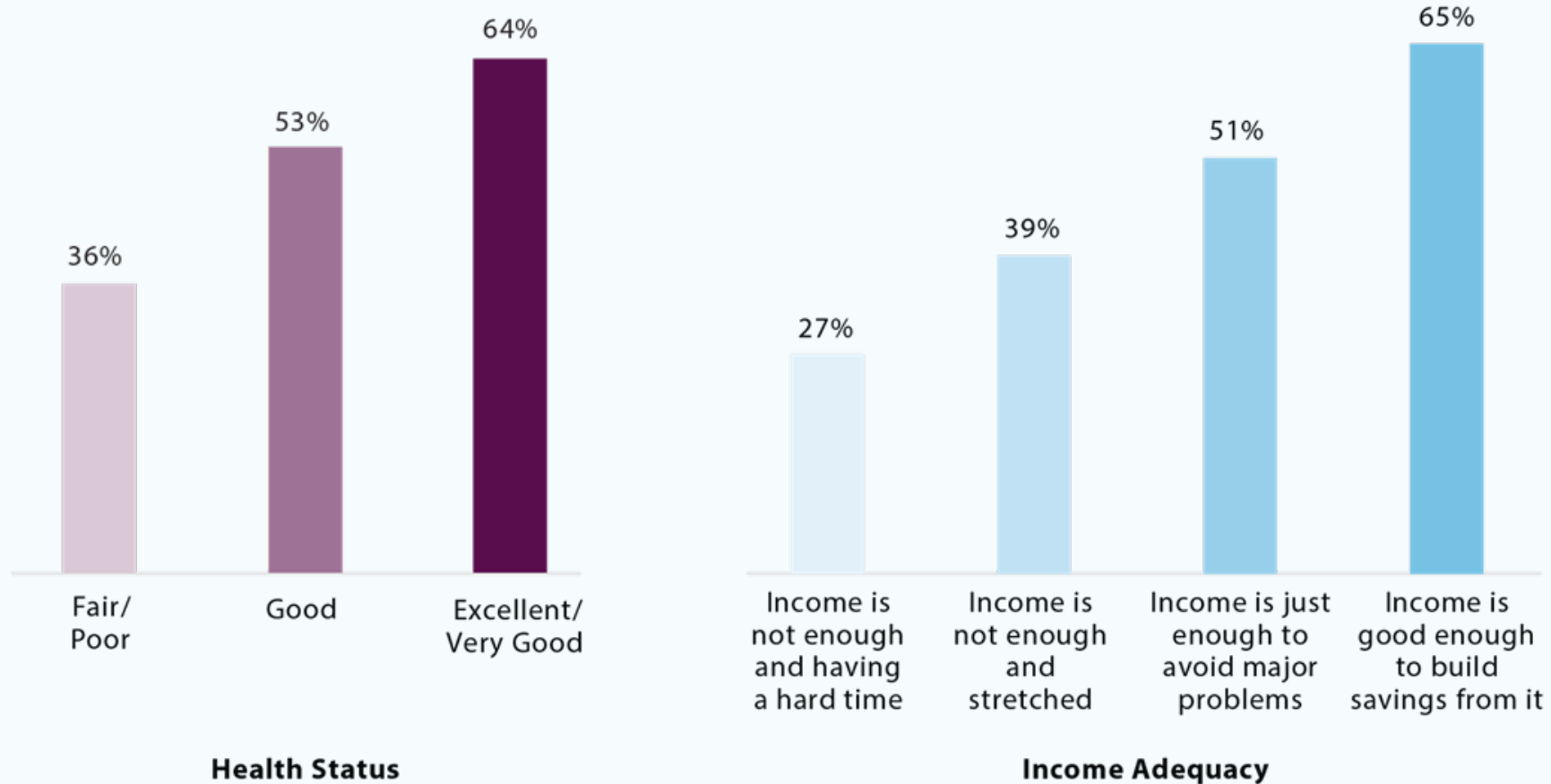
Percentage who said they participated **as often as they would have liked**





Social Engagement

Participated in activities as often as they would have liked (%)



Social Engagement

Barriers to social engagement in Ontario:
What's holding older adults back from participating in activities as often as they would like?



46%

Health
conditions



32%

No
companion



29%

Costs



26%

Lack of
energy



24%

Activity
timing is
inconvenient

Policy Matters: Alleviating Material Deprivation

Case study: the Canadian Dental Care Program

- 2024: 16% of older Canadians reported an inability to pay for dental care
- 2025: 11% couldn't afford dental care.

In just one year, the number of older adults unable to afford dental care has dropped by nearly one-third (31%).

Wrap

1. Ontario is both leading and lagging the rest of Canada in important ways.
1. There are strong provincial differences.
1. Health and financial security are key determinants of access
1. Data and dialogue together can help to pinpoint opportunities for intervention

Thank you



info.nia@torontomu.ca



www.NIAgeing.ca

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