



Addressing Stigma: Aging and Older Adults

Public Health Agency of Canada, Western Region

Nick Poulos, Senior Program Officer



Outline

1. Introduction: PHAC's Role in Health Aging
 - Age-Friendly Communities
 - Older Adults' Mental Health
 - Dementia
 - International Work

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 - Stigma Overview
 - The Stigma Pathways to Health Outcomes Model
 - Action Framework for Building an Inclusive Health System

3. Resources and Contact Information

PHAC'S ROLE IN HEALTHY AGING

What is Healthy Aging?

The World Health Organization (WHO) defines healthy aging as “the process of developing and maintaining the functional ability that enables wellbeing in older age. This includes a person’s ability to meet their basic needs, learn, grow and make decisions, be mobile, build and maintain relationships, and contribute to society.”

PHAC's Role in Healthy Aging

As the Government of Canada's lead for seniors' health promotion, the Public Health Agency of Canada works to help seniors live healthy, active and independent lives.

PHAC does this by:

- providing a seniors' health perspective to support the development of policies and initiatives that promote seniors' health and quality of life;
- conducting surveillance on factors that influence healthy aging, such as falls and elder abuse; and
- engaging with key partners and stakeholders to build evidence, raise awareness, and develop resources on key health issues for seniors.

PHAC's priority areas include promoting age-friendly communities, seniors' mental health, preventing seniors' injuries, and addressing the challenge of dementia.

Age-Friendly Communities

- Policies, services and structures related to the physical and social environment are designed to help seniors "age actively."
- PHAC partners with provincial and territorial governments to promote the uptake and implementation of AFC. There are currently more than 1400 age-friendly communities across the country.
- The AFC approach helps combat ageism by ensuring that older adults are collaboratively engaged in the effort to make communities more age-friendly.

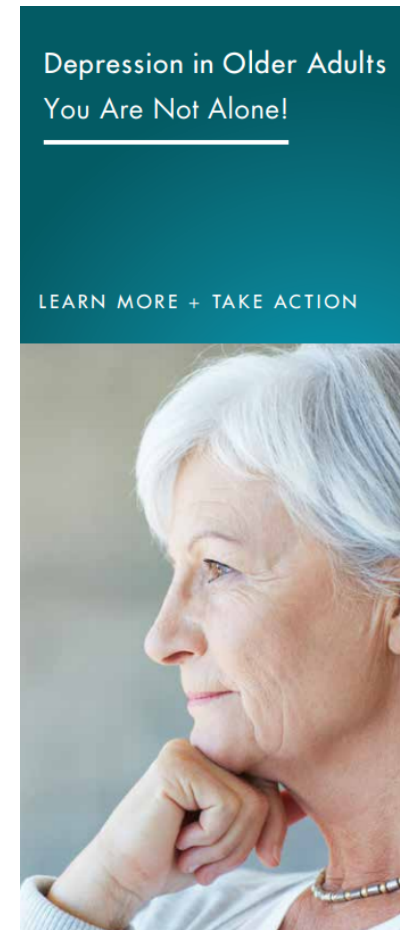


Older Adults' Mental Health

Older adults experience stigma around mental health issues. One common misperception is that depression is a normal part of aging.

PHAC works with key partners to raise awareness and reduce stigma around older adults' mental health.

- For example, PHAC funded the Canadian Coalition for Seniors' Mental Health (CCSMH) to develop a series of four guides for seniors and their families on depression, suicide prevention, delirium, and mental health in long term care.
- PHAC also facilitated funding for the Canadian Coalition on Seniors' Health to develop guidelines related to the use of alcohol, opiates, benzodiazepines and cannabis.

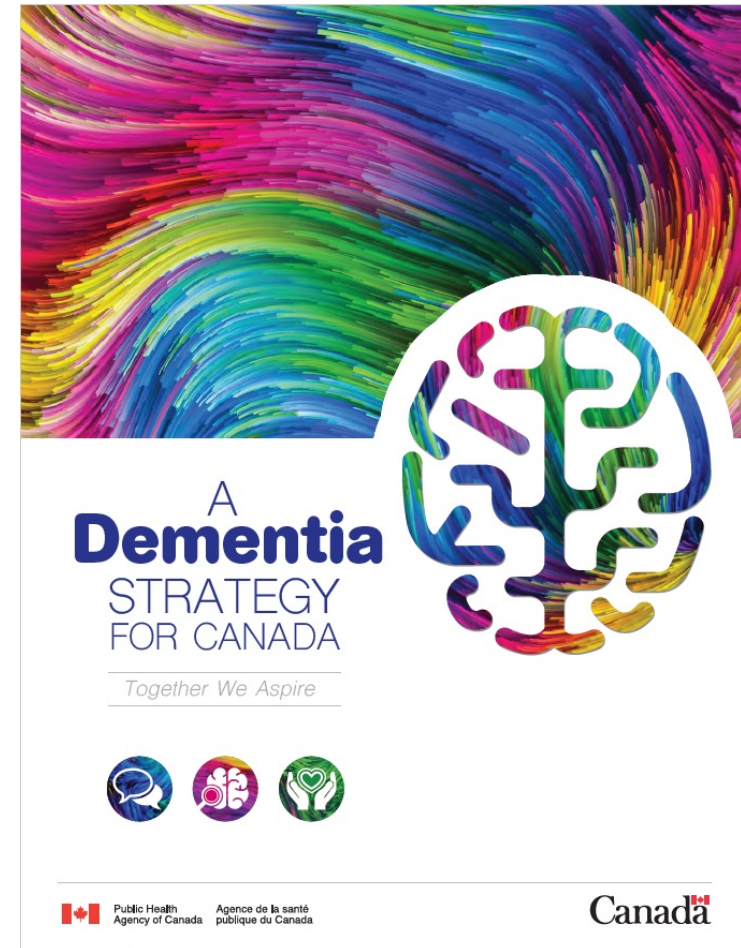


Dementia

Dementia is having a significant and growing impact in Canada, with more than 432,000 Canadians aged 65 years and older diagnosed with dementia, and almost two-thirds are women.

Stigma is one of the key challenges encountered by people living with dementia.

PHAC released Canada's first national dementia strategy in June 2019. An investment of \$50 million over five years from Budget 2019 directly supports the implementation of key elements of the Strategy which includes reducing stigma.



Dementia

The Dementia Community Investment (DCI), with \$4M per year of ongoing funding, supports community-based projects that aim to optimize the well-being of people living with dementia and family/friend caregivers and to increase knowledge about dementia and related risk and protective factors.

- Through the DCI, PHAC currently supports 17 projects. A second call for proposals was launched in November 2020 to support 2-3 advanced projects, demonstrating high quality of effectiveness, which can be delivered virtually and are focused on the COVID-19 context for people living with dementia and family/friend caregivers.

International Work

PHAC works closely with the World Health Organization to promote healthy aging, including contributing to the development of the WHO's proposal for a Decade of Healthy Ageing 2020-2030.

Two of the priority areas of the Decade are to change how we think, feel and act towards age and ageing to combat ageism, and to develop communities in ways that foster the abilities of older people.

PHAC has provided funding to the WHO to support two projects that will contribute to addressing ageism and fostering the inclusion of older adults.

- The first project will ensure that older people along with their families, and caregivers are engaged throughout the Decade.
- The second project will support the development of new guidance on the growth and sustainability of age-friendly communities.

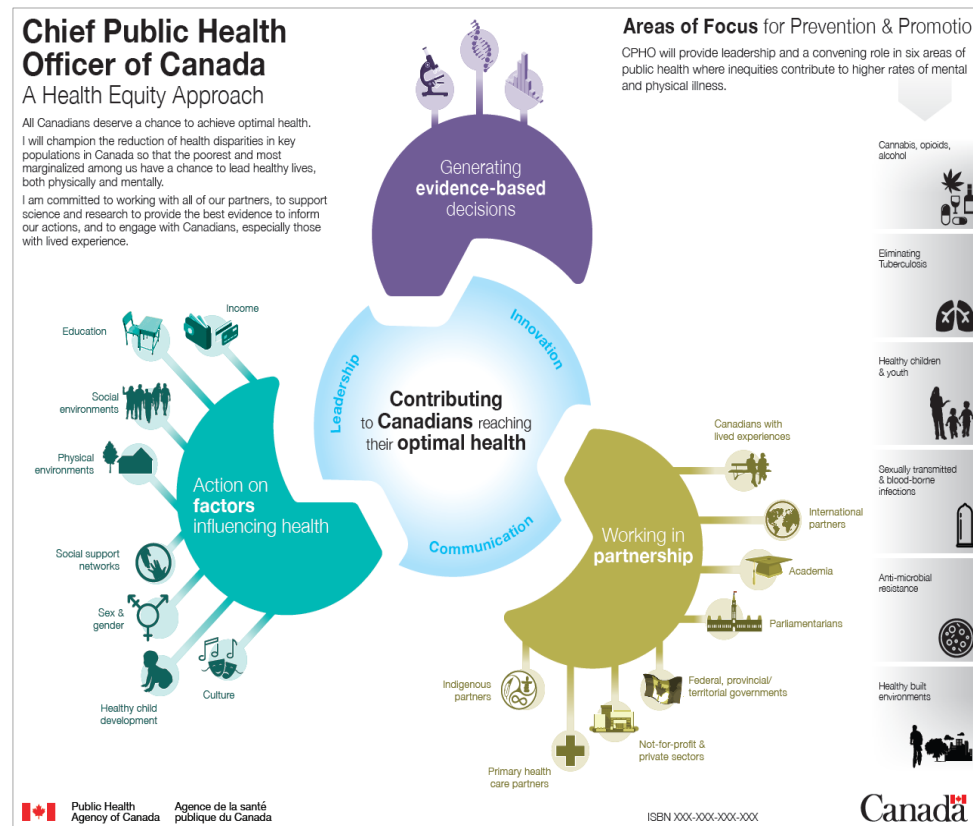


CPHO REPORT 2019 - ADDRESSING STIGMA

Towards A More Inclusive Health System

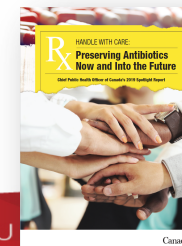
CPHO Approach and Priorities

- ✓ **Interdisciplinary approach** to knowledge generation, outreach and communications
- ✓ **Wider definition of evidence**, including living experience and expert advice along with peer-review
- ✓ **Producing range of knowledge products** and uptake tools
- ✓ **Catalyzing change** with systems leaders during report development and after



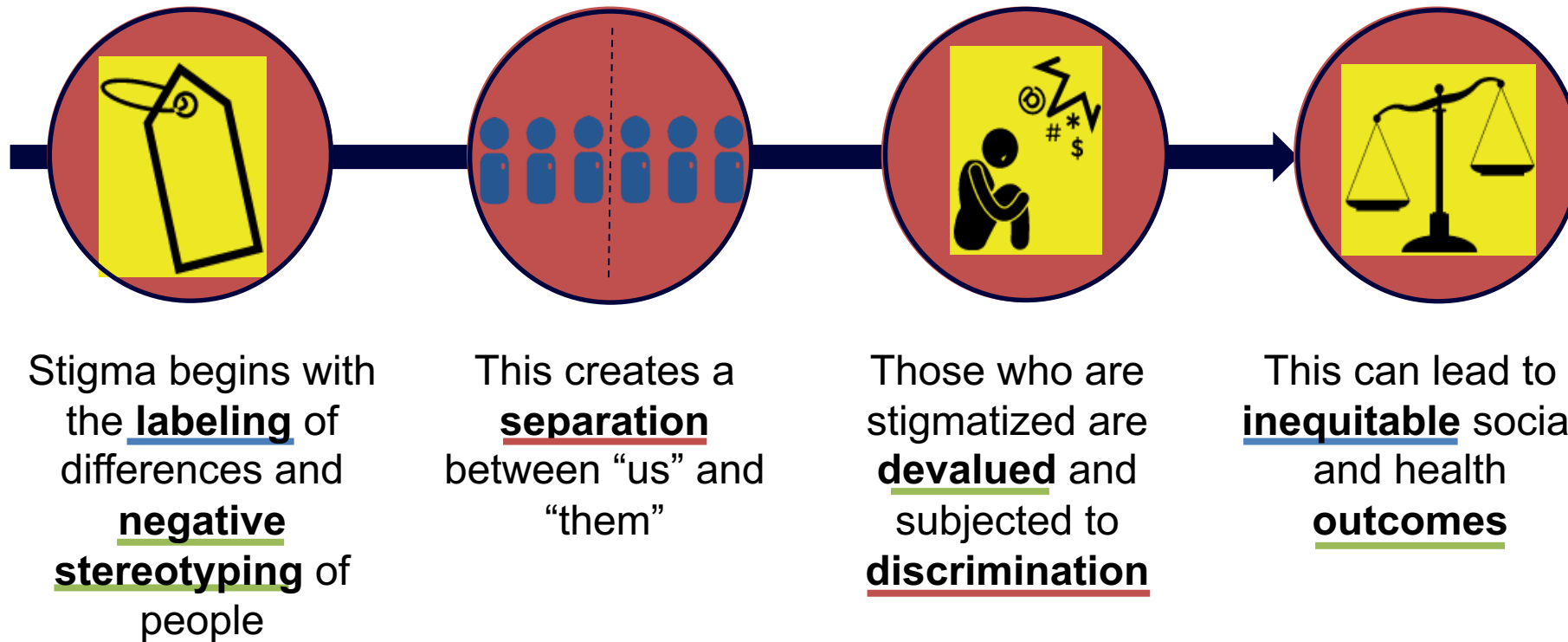
Further info [here](#)

2017 | 2018 | 2019



STIGMA IS A PUBLIC HEALTH ISSUE

What is Stigma?



Stigma Overview

Stigma Examples

Stigma can target people's identities, characteristics, behaviours, practices and/or health conditions. Some examples include stigma based on:



Obesity



Race



Substance use disorders



Sexual orientation



Mental illness



Gender & gender identity



Dementia



Age



Tuberculosis



Language



HIV



Social class

The 2019 Annual Report focuses on 7 stigmas:

1. **Racism**: experienced by First Nations, Inuit and Métis peoples
2. **Racism**: experienced by African, Caribbean and Black Canadians
3. **Sexual** stigma and **gender identity** stigma: experienced by LGBTQ2+ people
4. **Mental illness** stigma
5. **Substance use** stigma
6. **HIV** stigma
7. **Obesity** stigma

Where Does Stigma Happen?



Individual-level Stigma

- Internalized stigma (e.g., shame)
- Anticipated stigma



Interpersonal-level Stigma

- Health professionals
- Family
- Friends
- Colleagues
- Classmates
- Strangers



Institutional-level Stigma

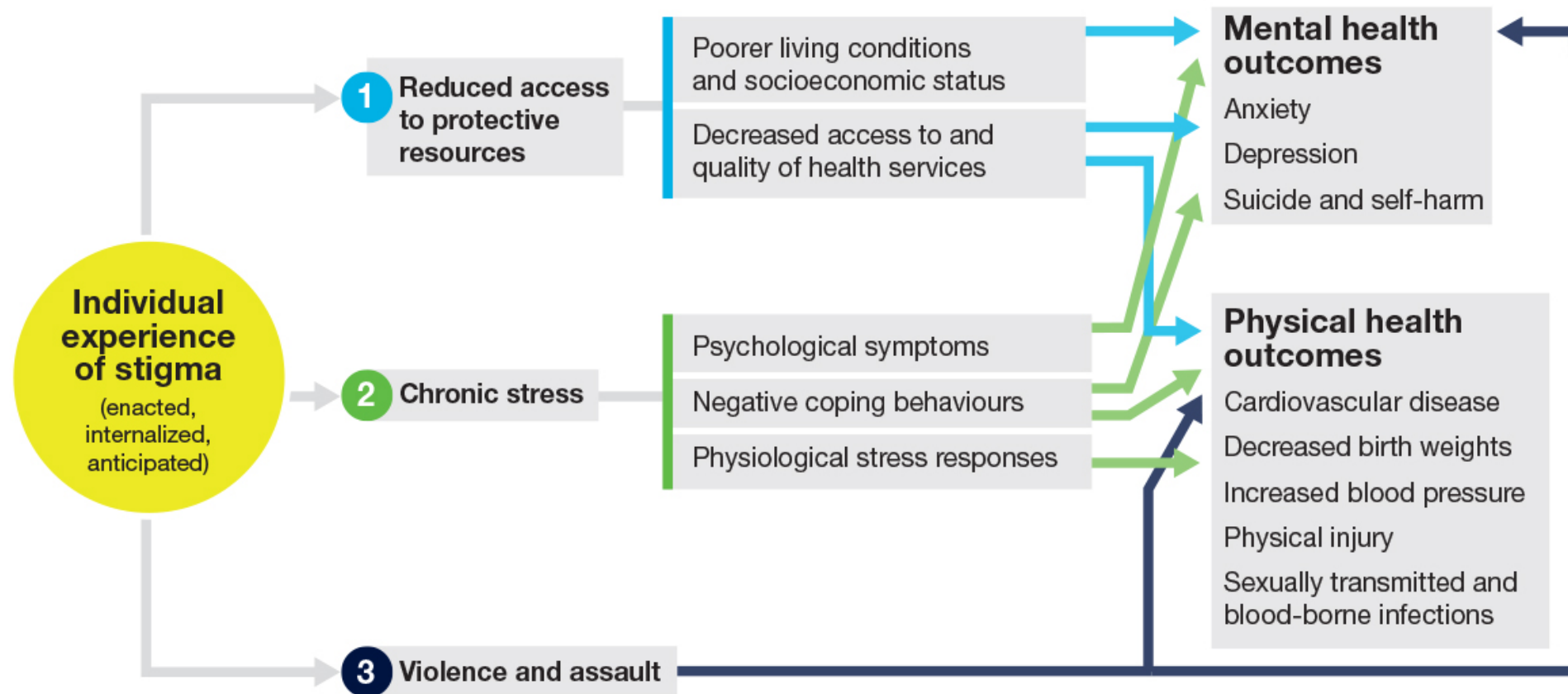
- Physical environments
- Policies



Population-level Stigma

- Policies
- Laws
- Stereotypes
- Media

How Stigma Affects Health



Stigma and Health



Stigma is a **serious and pervasive public health issue** which can lead to poorer health outcomes



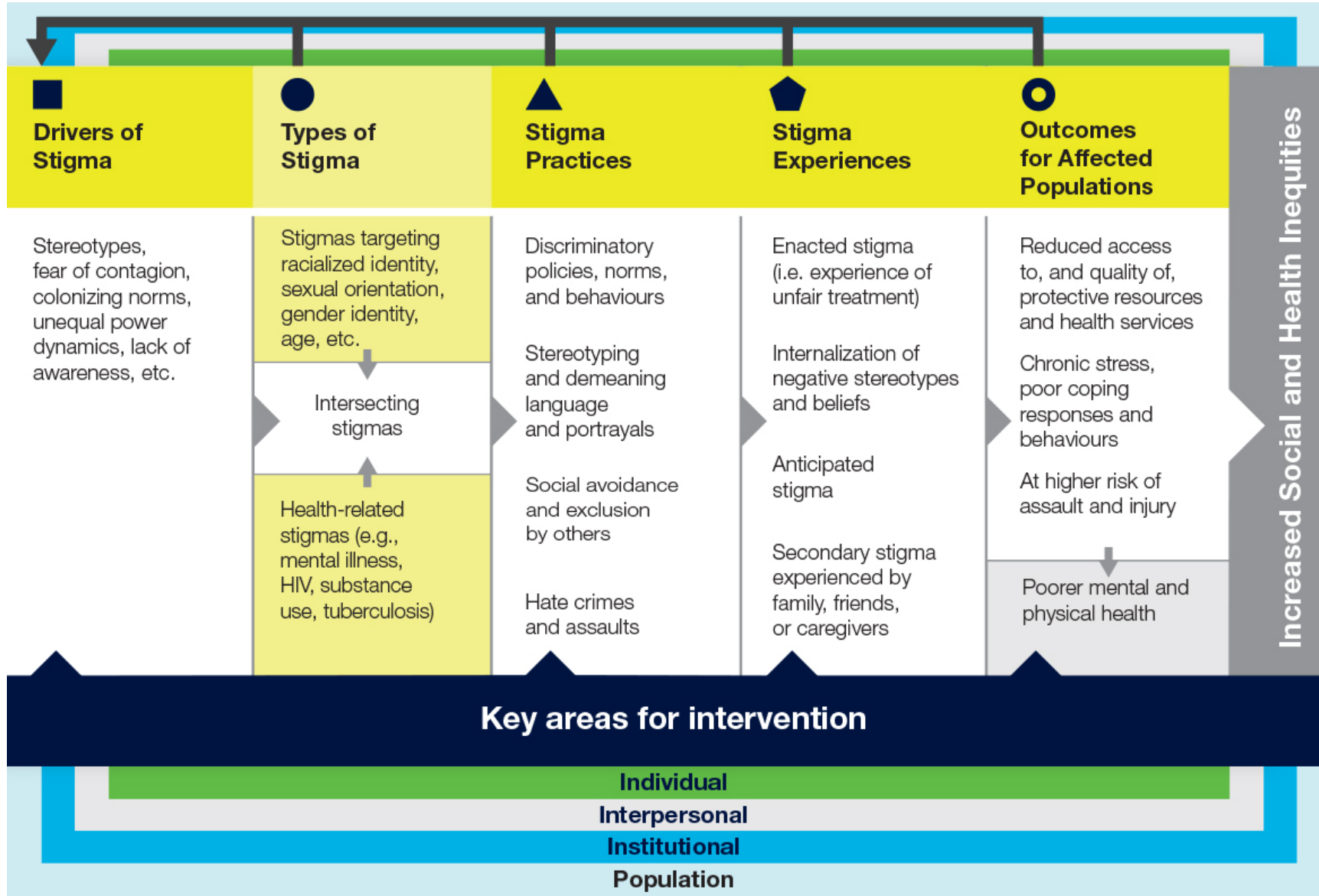
The health system contributes to negative health outcomes through **stigma that is ingrained** in policies and institutional and individual practices



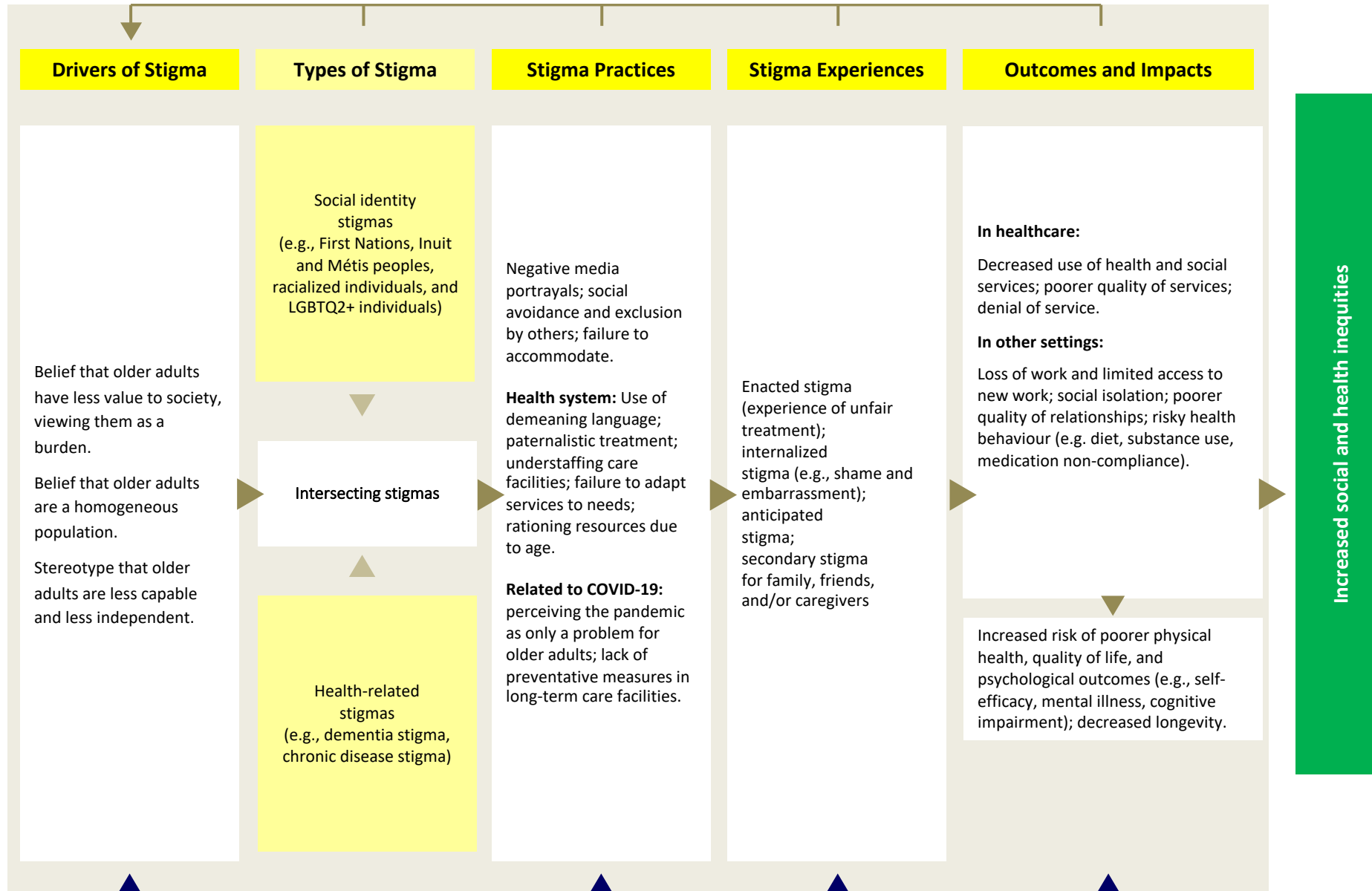
This report offers a **new approach to understanding stigma** and a way forward

We can build on our **Canadian values** and diversity to become the **most inclusive** health system in the **world**

Stigma Pathways to Health Outcomes Model



Example - Ageism

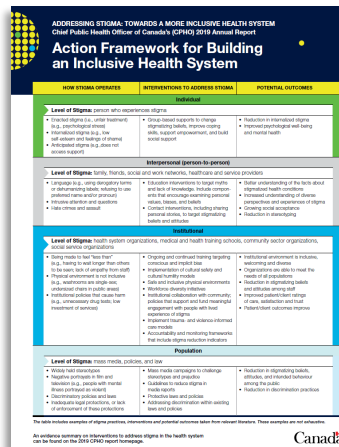


Increased social and health inequities

Key Areas for Intervention
(at Individual, Interpersonal, Institutional, Population Levels)

BUILDING AN INCLUSIVE HEALTH SYSTEM

Action Framework for Building an Inclusive Health System



For more information, view the *Action Framework for Building an Inclusive Health System* poster



- ✓ Implement inclusive policies and programs, such as cultural safety and trauma- and violence-informed care
- ✓ Engage people with lived experience
- ✓ Build a diverse workforce
- ✓ Measure and monitor progress



- ✓ Address gaps in national data
- ✓ Facilitate collaborative research
- ✓ Strengthen intervention and implementation research



- ✓ Examine your assumptions and challenge your filters
- ✓ Stop using dehumanizing language
- ✓ Bring stigma awareness to your organization
- ✓ Commit to ongoing learning
- ✓ Seek help if you are experiencing adverse impacts from stigma and discrimination

For More Information

For access to both the 2019 and 2020 CPHO reports, please visit Canada.ca/CPHOreport

Supplementary products for the 2019 report available for download*:

- What We Heard Report*
- Voices for Inclusion video*
- Health of Canadians 2019 video*
- Evidence Summary: Interventions to Address Stigma in the Health System*
- Reference List: Examples of Stigmas Related to Social Identities and Health Conditions*
- Action Framework for Building an Inclusive Health System poster*

**All products are available in English and French*

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COVID-19 & Vulnerable Older Adults Project

Interim Report for the PHAC Western Region: OLDER ADULTS SELF- ISOLATING DURING COVID-19

Sandeep Dhillon & Shreemouna Gurung



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Scope of the
Project



Background &
Rationale



Methodology



Findings



Conclusion



OVERVIEW



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Purpose of the Project

To gather information on COVID-19 initiatives available in British Columbia and Alberta supporting older adults

Phase I, II, III

Interim Report, Infographic, Long-term Report

Objective

Phase I - Interim Report Findings

SCOPE OF THE PROJECT



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Older adults face significant risk of developing severe illnesses from COVID-19

Strict measures have been implemented (i.e., social distancing, quarantine, and self-isolation)

Adverse effects on the health and well-being of older adults

Increased risk for mental health illnesses such as depression, anxiety, loneliness, and death

Examine the emerging needs, programs and services, and gaps

BACKGROUND & RATIONALE



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Step 1

- A standard template for the environmental scan was developed to include initiatives happening across Canada
- Question of who, what, when, where, and how in the context of emerging COVID-19 programs and services for older adults

Step 2

Consultation with multiple stakeholders including the Public Health Agency of Canada Regions and Headquarters, New Horizons for Seniors Program (ESDC), First Nations Health Authority, and Indigenous Services Canada took place

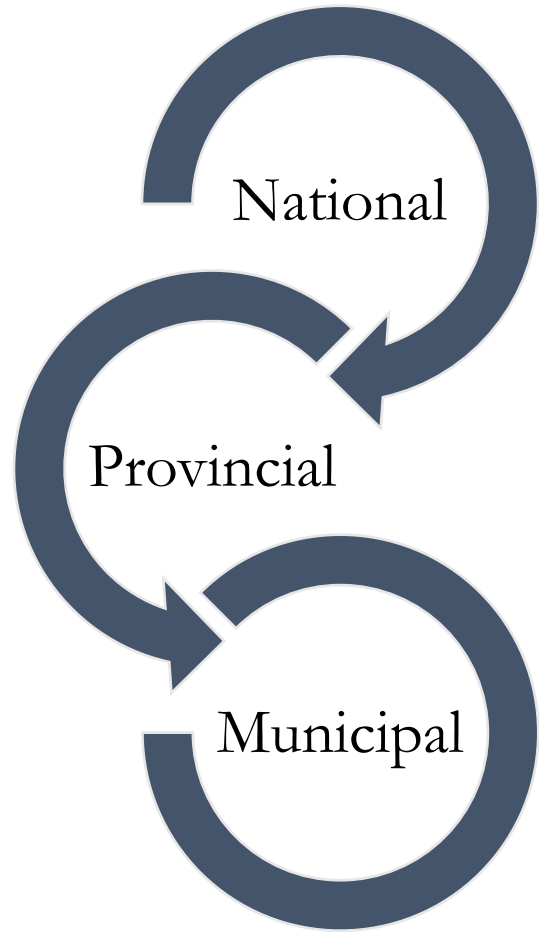
Step 3

- A search strategy was created to collect and compile an inventory of COVID-19 initiative resources in the environmental scan
- Collaboration with stakeholders allowed for an exchange of information on funding

Step 4

- Analysis was conducted on older adults who are self-isolating and quarantining in their homes
- A particular focus on those who are returning to Canada after international travels

METHODS



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Economic

Social

Emerging
Programs &
Services

FINDINGS

Promising Practices & Innovative Approaches



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National

- Addresses economic factors within the broader determinants of health
- Federal funding initiatives that are specifically targeted towards the development of programs for seniors
- New Horizons Seniors Program and TELUS Communications Inc.

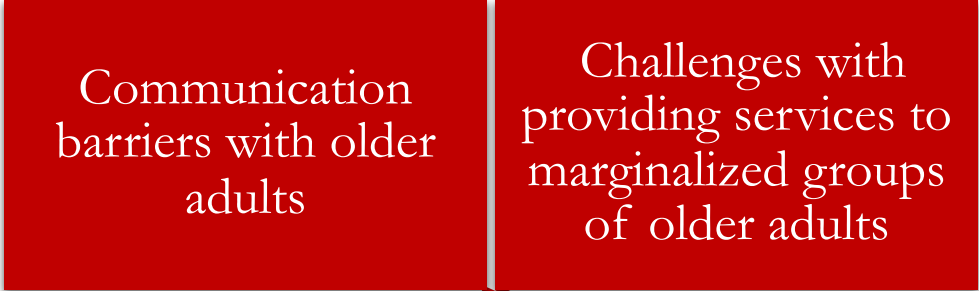
Provincial

- Addresses social factors within the broader determinants of health
- Provincial help lines, mental health supports, and non-medical essential needs
- Service BC and Share Family & Community Services

Municipal

- Community-based approaches that partner with young adults, students and community members
- Leverage on local and community resources
- Helpful Neighbours and Okanagan Chinese-Canadian Association

FINDINGS



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Gaps	Areas of Improvement
<ul style="list-style-type: none"> a. Marginalized groups b. Social stigma and ageism in the COVID-19 crisis c. Safety from fraud, crime, and violence d. Older adults who do not have access to technology 	<ul style="list-style-type: none"> a. Indigenous seniors and older adults with disabilities b. Innovative use of technology c. Transportation needs d. Older adults who live in rural and remote areas

Gaps & Areas of Improvement

FINDINGS

Recommendations



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- i. Template for a **user-friendly guide on technology use** for older adults who are self-isolating and quarantining in their homes
- ii. Template for a **COVID-19 infographic** highlighting resources on key initiatives that help older adults with navigating their daily activities during the pandemic

FINDINGS



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QUESTIONS/COMMENTS



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CONCLUSION



Mental Health & Aging

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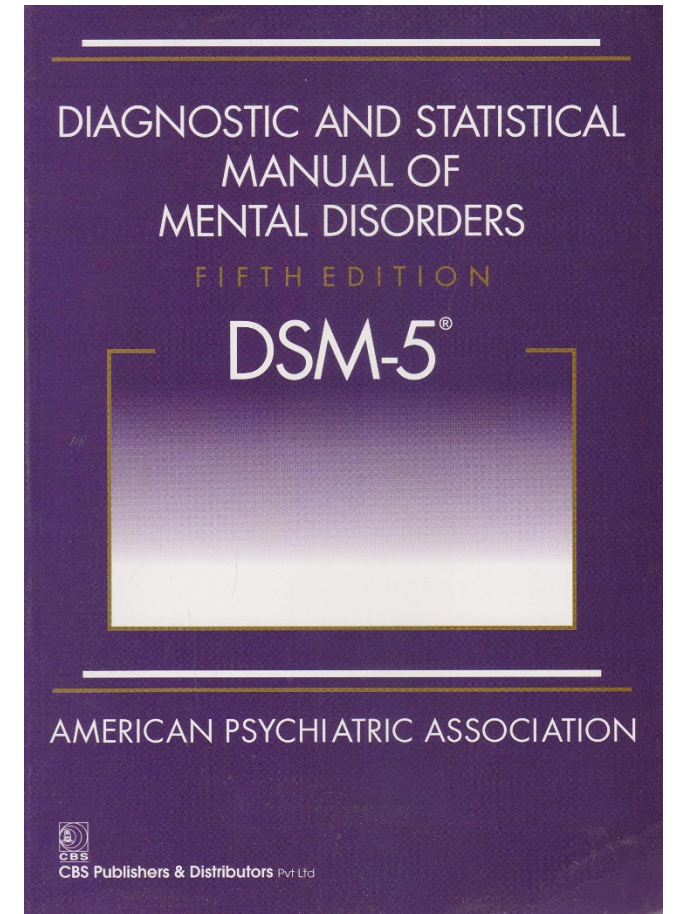
DEPARTMENT
OF GERONTOLOGY

Overview

1. What is mental health?
2. Prevalence
3. Impact
4. Social isolation & loneliness
5. Stigma

What is mental health?

- Mental disorders
 - For example:
 - Anxiety
 - Depression
 - Schizophrenia
 - Post-traumatic Stress Disorder (PTSD)



What is mental health?

“Mental health is more than the absence of mental disorders.”

“Mental health is an integral part of health; indeed, there is no health without mental health.”



**World Health
Organization**

Prevalence

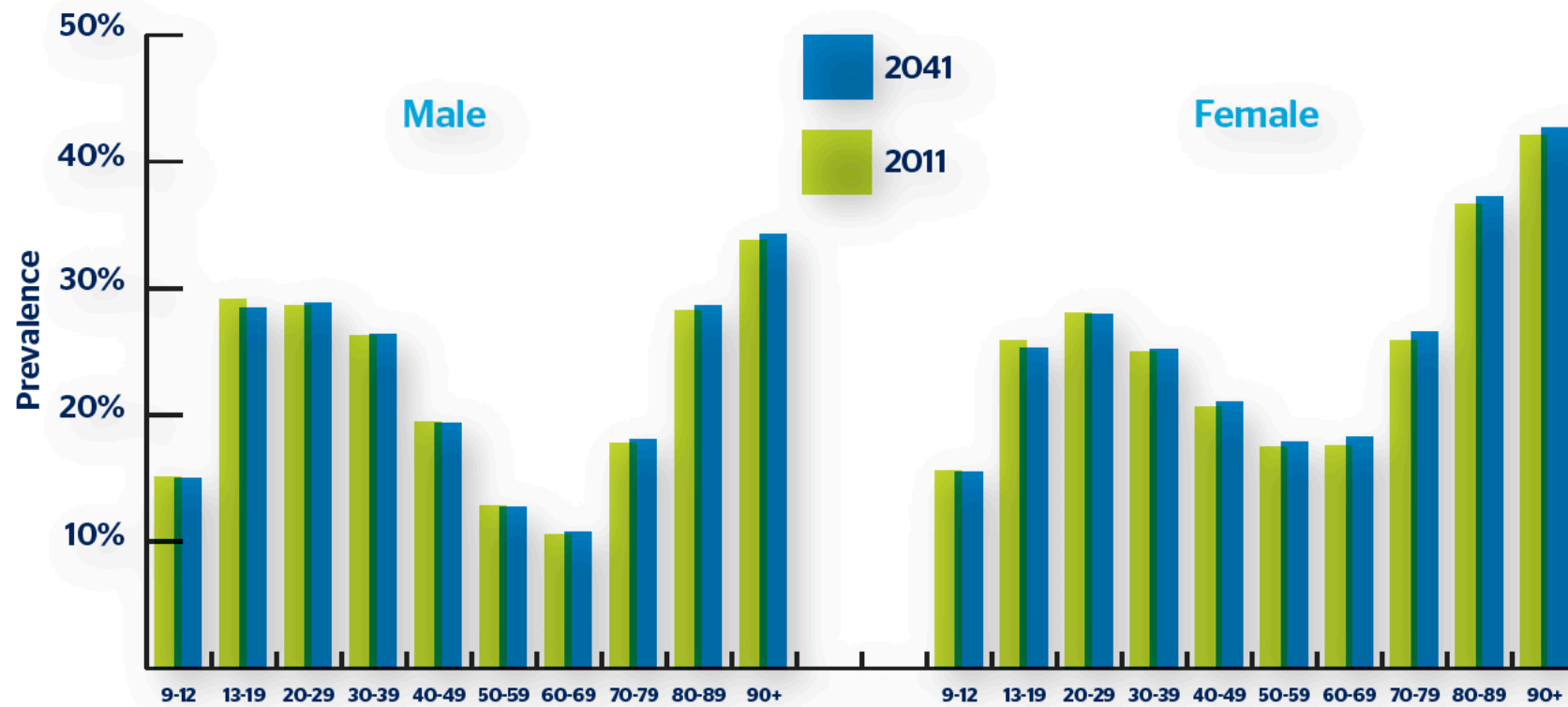
1 in 5 people in Canada lives with a mental illness each year



Source: Mental Health Commission of Canada

Prevalence

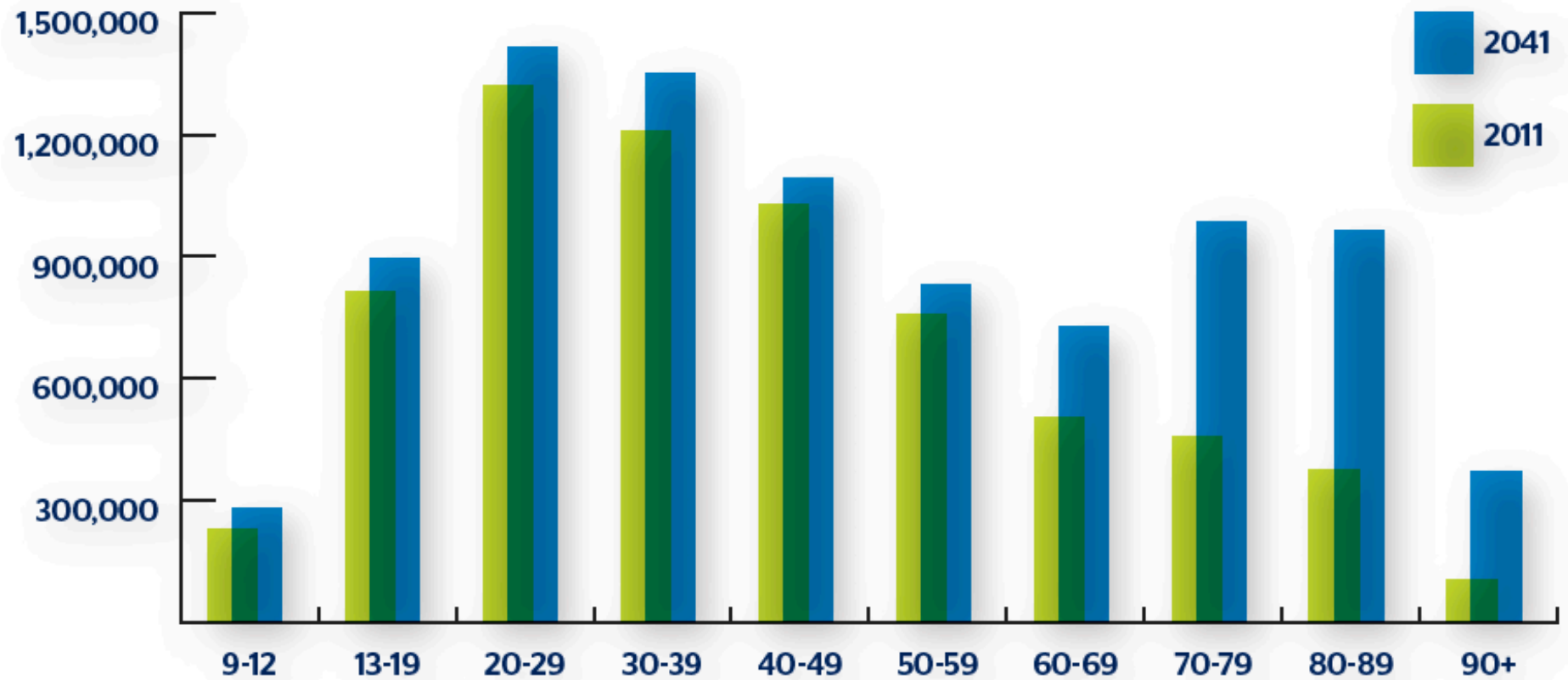
FIGURE 1 - ESTIMATED 12 MONTH PREVALENCE OF ANY* MENTAL ILLNESS IN CANADA FOR SELECT YEARS 2011 TO 2041



Source: Mental Health Commission of Canada

Prevalence

FIGURE 2 - NUMBER OF PEOPLE IN CANADA WITH MENTAL ILLNESS BY AGE GROUP



Source: Mental Health Commission of Canada

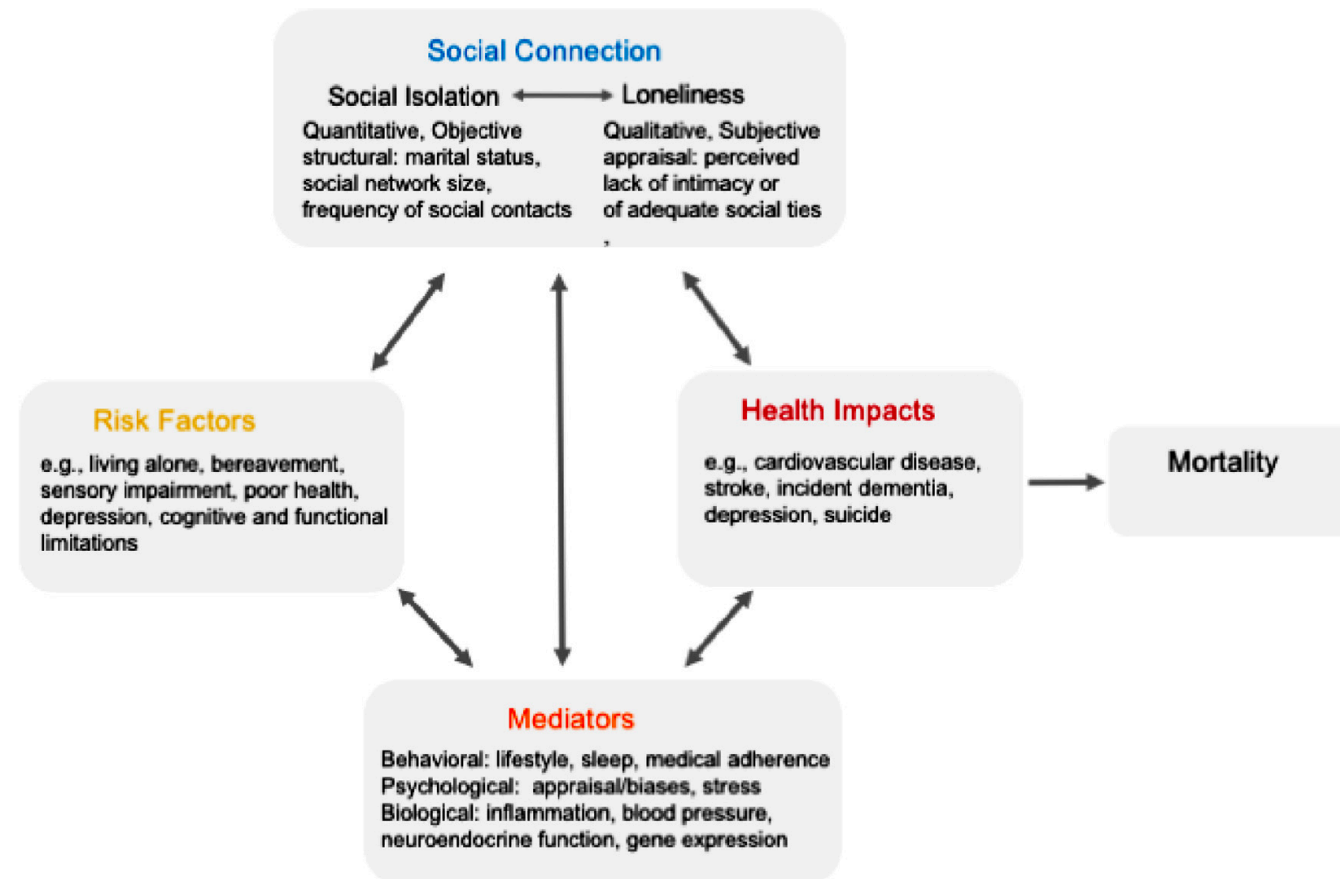
Impact

- Cost
 - Quality of life
 - Individuals
 - Caregivers
 - Family
 - Economic
 - Healthcare, social services, income support
 - \$50 billion per year

Social Isolation & Loneliness

- 1 in 4 report being socially isolated
- 2 in 5 report feelings of loneliness
- Associated increased risk of:
 - Depression
 - Anxiety
 - Schizophrenia
 - Suicide
 - Dementia
 - Mortality

Social Isolation & Loneliness



Social Isolation & Loneliness

- 1 in 4 report being socially isolated
- 2 in 5 report feelings of loneliness
- Associated increased risk of:
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Social Isolation & Loneliness

- During a pandemic:
 - Negative implications from virus
 - Physical distancing
 - Increased social isolation
 - Increased loneliness
- Negative mental health implications

Stigma

- Host of negative implications
 - Poor mental health
- Exacerbated by
 - Social isolation and loneliness

Source: Mental Health Commission of Canada

Summary

- Mental health
 - Not just the absence of illness
 - Common
 - Damaging
- Social isolation and loneliness
 - Common
 - Exacerbated by the pandemic
 - Negative mental health outcomes
- Stigma
 - Associated with negative mental health outcomes
 - Associated with social isolation and loneliness