Position Paper

Affordability of Services for Older Adults, Especially for Those with Low and Middle Incomes

In partnership with:
As many older adults live on fixed incomes, they are more exposed to inflation than younger adults. Affordability of services is therefore an important consideration to keep them active and enjoy quality of life.

**Preface**

The older adult population in Calgary is growing quickly as the first wave of the baby boomers reached 65 in 2011. As of the 2016 census, there were 138,405 individuals over 65 in Calgary, or 11% (Statistics Canada, 2017). Projections estimate that by 2026, there will be 206,000 individuals over 65, and by 2042, 287,000, or 15% of the population, will be over 65 (City of Calgary, 2017a; City of Calgary 2016).

Services and programs, especially for vulnerable older adults, will need to keep up with this increase in demand. Conscious of this, the Older Adult Council of Calgary created a series of position papers to look into key issues of concern to this growing population, with a focus on more vulnerable older adults. This paper focuses on the affordability of services for older adults, especially for those with low and middle incomes.

**Introduction**

Living on lower fixed incomes or in poverty has implications for older adults, such as social isolation and poor physical and mental health. It is important that older adults continue to be vibrant members of their communities for as long as is possible. To do this, community services like transit and recreation must remain affordable to them, as do services to keep older adults in their communities, such as home maintenance or home care.

There has been a concerted effort to reduce the poverty rates of older adults since the 1980s, but this trend has reversed. In 2005, 12% of Canadian older adults were living in low income, but that figure rose to 14.5% in 2015. Calgary rates show a similar growth in older adult poverty. In Calgary in 2005, this rate was 5.7%, or 5,400 individuals. By 2015, the rate had increased to 8.1%, or 11,485 individuals. The percentage is even higher for Calgarians over the age of 75, at 8.9% (Statistics Canada, 2017). This means the number of older Calgarians living on low incomes has doubled over 10 years, and this trend looks like it will continue unless action is taken. Of course, individuals only find themselves in poverty if their incomes cannot afford the services they need. The price or affordability of services therefore has an impact on poverty.

**Calgary Downturn**

Calgary has been in an economic downturn for the past three years, since the summer of 2014. During many previous recessions, costs of services decreased as a result of job losses. During this recession, there were significant job losses, with more than 90,000 Calgarians looking for work by late 2016 (Johnson, 2017). However, as a result of low interest rates and a low Canadian dollar, the downturn has been less severe than it could have been (TD Economics, 2016). Housing and restaurants sales have been particularly resilient. Rents, however, have gone down considerably, and by 2016 Calgary had the highest vacancy rates in 25 years with rents down at least 7% (Canadian Mortgage and Housing Corporation, 2016). Taxi fares also went down in 2016 between 12% and 15%, due to a new bylaw allowing taxi firms to set lower fees, and the introduction of the ride-sharing service, Uber (Southwick, 2016; Dippel, 2017). One impact of the recession has been a reduction in donations for charitable agencies, some of whom serve older adults. This can mean fewer current services are available and to fewer older adults. It can also mean that fewer new services are developed. In general, for older adults,
there have not been huge savings as a result of the recession, unless they were renting or using taxis, but there has been a slowdown in the pace of Calgary’s inflation rate.

### Canadian Elder Standard

The Canadian Elder Standard (CES) is a measure that tries to calculate the cost of basic needs for older Canadians (MacDonald et al., 2010). Not quite a poverty line, it was based on the US Elder Standard, and is defined as “a measure of income that older adults require to maintain their independence in the community and meet their daily costs of living, including affordable and appropriate housing and health care” (Russell et al., 2006). Basic needs in this case included food, shelter, medical care, transportation, miscellaneous expenses and home-based long-term care for those who need it. It is not, therefore, measuring subsistence. It is more like discussing a living wage, instead of a minimum wage.

MacDonald et al. (2010) looked at these expenses for a variety of Canadian cities, including Calgary, using 2001 data. They also looked at types of older adults: a “Typical” older adult and a “No Assets” older adult, as well as for singles and couples. Using an inflation calculator for Alberta (Inflation Calculator, 2017) to adjust 2001 dollars for 2017 dollars, current CES measures for Calgary are as follows:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typical Single</td>
<td>$18,236</td>
</tr>
<tr>
<td>Typical Couple</td>
<td>$23,426</td>
</tr>
<tr>
<td>No Assets Single</td>
<td>$19,775</td>
</tr>
<tr>
<td>No Assets Couple</td>
<td>$25,423</td>
</tr>
</tbody>
</table>

If individuals require a high degree of homecare support—which includes personal care and in-home support for housekeeping, laundry, etc.—these costs can almost double for singles and increase by almost two-thirds for a couple, if both individuals require home care. The researchers found that the CES was quite similar to other Canadian low-income measures that do not take age into account such as the Low Income Cut-Off (LICO), Low Income Measure (LIM) and Market Basket Measure (MBM). This suggested that it was personal circumstances, rather than age, that helped determine the cost of basic needs for the older Canadian (MacDonald et al., 2010).

### Transportation

Transportation is an important issue to older adults, especially those with lower incomes. It is often a barrier for those who cannot get to the services or appointments they require. This is especially true for lower income older adults or for those with middle incomes who have given up driving and need to find alternate transportation. Not all older adults drive, and more give up driving as they age. In Calgary in 2009, 85% of older men and 73% of older women had driver’s licences. However, 76% of older men and only 50% of older women reported that driving was their main form of transportation (Turcotte, 2012). This gender difference may close in the future, as female baby boomers are more accustomed to driving. Affordable transit is not the only solution for this. Only 7% of older adults in cities between 1 and 2 million in population use public transit as their main form of transportation, and travelling in private vehicles becomes their main form of transportation as they age (Turcotte, 2012).

---

<table>
<thead>
<tr>
<th>“Typical” Older Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Owns a car</td>
</tr>
<tr>
<td>• Own a house without a mortgage</td>
</tr>
<tr>
<td>• Receives occasional assistance in daily tasks (housekeeping, meals, personal care)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>“No Assets” Older Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Rents housing</td>
</tr>
<tr>
<td>• Does not own a car</td>
</tr>
<tr>
<td>• Receives occasional assistance in daily tasks (housekeeping, meals, personal care)</td>
</tr>
</tbody>
</table>

*Source: MacDonald et al., 2010.*
As people age further, their habits change again. They go out less often. Women give up driving before men, with only 26% of older women over 85 continuing to drive (Turcotte, 2012). Taxis and accessible transit are often not a cost-effective option, and only a very small percentage of older adults use them before the age of 85. After 85, 9% of women use accessible transit or taxis. In Calgary in 2016, there were 1,105,015 shared-ride trips made using Calgary Transit Access, although not all of those were for older adults (Calgary Transit Access, 2017). For older adults, Calgary Transit offers a regular seniors’ pass ($95/year) and a low-income seniors’ pass ($15/year) which does make transit an affordable option. For the first six months of 2017, 7,251 older adults were approved for the low-income seniors’ pass.¹

**Home Maintenance**

Older adults can often stay in their homes longer when they receive a little extra support around their homes, such as with home repair or maintenance, snow removal, or a reduction or deferral of property tax. There are programs offered by government or community agencies that can help with this through the Special Needs Assistance for Seniors benefit.

The City of Calgary provides assistance to all low-income individuals through the **Fair Entry program**. There were 7,487 older adults approved for this program between January and June of 2017.² This program includes access to subsidies in transit, recreation and household programs.

For older adults who still own and live in their own home, there is the provincial **Special Needs Assistance for Seniors** program provides up to $5,000 annually for mainly appliances, and sometimes, personal supports. There is also a **Seniors Home Adaptation and Repair (SHARP)** program, that provides low-interest loans of up to $40,000 for eligible households that need renovations or accessibility adaptations. Home adaptation grants of $7,500 (up to $15,000 over a 10-year period) are also available through the **Residential Access Modification Program (RAMP)** for older adults who use a wheelchair or four-wheel walker.

The City of Calgary offers the **Seniors Services Home Maintenance** program through the Fair Entry program, which provides house cleaning, yard work and snow removal to eligible older adults. Some **community and neighbourhood associations** also offer snow removal programs. There is also the **Snow Angels** program, where people can volunteer to clear sidewalks for older adults.

Under the **Seniors Property Tax Deferral** program, the province will pay property taxes on behalf of any older adult who owns a home with 25% equity. This then becomes a low-income loan, which can be paid off when the home is sold, or earlier. The City of Calgary also has the **Calgary Property Tax Assistance** program through the Fair Entry program, which is open to all low-income Calgarian homeowners and provides a grant that covers the year-to-year increase to their property tax. In 2016, 983 households with a senior qualified for this program.³

**Food and Nutrition**

Food is another large expense in a household, and its affordability can vary, often depending on how nutritious it is. Those living on fixed incomes may have less money available for food, let alone nutritious

---

¹ Data correct as of 25 September 2017.
² Data correct as of 25 September 2017
³ Data correct as of 25 September 2017.
food. Among older adults, those living alone have the hardest time affording food. In Calgary in 2015, 6.6% of men (4,370) over 65 were considered low income, while 9.5% of women (7,100) were (Statistics Canada, 2017b).

Food banks are one way to fill the gap. In Alberta, there has been a staggering 136% increase in people accessing food banks between 2008 and 2016, and yet in 2016, only 3.4% of those assisted by food banks were over 65 (Food Banks Canada, 2016). Older adults may find visiting food banks physically or mentally difficult. At the Surrey Food Bank, they try to resolve this by holding a dedicated distribution time for older adults to collect their food with appropriate nutrition choices. They also invite senior-sector partner agencies to come and provide further information on available services (Surrey Food Bank, 2017). Although the recession caused food prices to decline, they are now beginning to rise again, increasing 2.2% from October 2016 to October 2017 (City of Calgary, 2017b).

Accessing food in grocery stores can be another challenge for some older adults, which reflects back to transportation problems or even land use or community planning challenges. More grocery stores and independent businesses have implemented delivery services, which may help, but many of these need people to order online, which some older adults may not be comfortable doing.

Recreation/Active Aging
Quality of life as an individual ages is often connected to how active and mobile a person remains. Many seniors’ housing providers now have a staff member responsible for active aging as an additional support for residents. For older adults still living in the wider community, Calgary Recreation introduced an Active Aging Strategy in 2015. According the Alberta Centre for Active Living, 42% of Albertans over age 65 are considered physically active and this percentage declines steadily throughout life stages as a person ages (Macridis et al., 2017). It also declines for lower income individuals, so lower income older adults can be expected to have lower levels of physical activity than 42%. Research also shows that participation in arts activities has health benefits for older adults, such as using less medication, fewer doctor visits, and less depression, loneliness and higher morale in general (Annear et al., 2014). Through Calgary’s Fair Entry program, 2,881 older adults were approved for subsidized recreation passes during the first six months of 2017.

Calgary Recreation (2015) identified a number of issues regarding older adults and physical activity:

- Older adult caregivers are at risk of being social isolated and therefore decreased physical activity.
- Not all activities are affordable for all older adults.
- Access to transportation can be a barrier to participation.
- Calgary has a high proportion of older immigrants, who may have language and cultural barriers accessing activities.
- Should all older adults have access to seniors’ discount or should it be based on ability to pay?

Homecare and Personal Support Services
As mentioned, homecare costs can significantly increase an individual’s ability to afford a safe and independent lifestyle. Homecare also is a more cost-effective system for government than keeping older adults in hospitals (Hollander and Chappell, 2002). There are two levels of homecare: that which is paid

---

4 Data correct as of 25 September 2017.
for by provincial healthcare systems (Alberta Health Services) and that which is privately paid for by older adults themselves. Homecare provided by AHS is offered when needed and individuals need to be assessed and meet set criteria before they can access the services. These services can be either medical care and offered by nursing staff (wound care, medication provision, etc.) or personal care and offered by home care aides (light housekeeping, meal preparation, hygiene, etc.)

Older adults also want to remain in their own homes for as long as possible. A 2013 RBC report found that 91% of Baby Boomers want to age in a home of their own, although not necessarily their current home. They are willing to pay for this convenience, as 88% said they would pay for homecare as needed. This concept is often referred to as aging-in-place, or better, aging-in-community. Aging-in-place can lead to social isolation and loneliness, as an older adult, due to mobility or other issues, does not leave that home nor engage socially with others that often. Aging-in-community assumes friends and neighbours support each other as they age and the older adult has many opportunities for meaningful social interactions (Blanchard, 2014).

Many governments see the benefits of homecare, and are beginning to invest more into the service. The federal Liberal government in its 2017 Budget (Ministry of Finance, 2017) has committed $6 billion in homecare support over 10 years to the provinces and territories. But not all older adults are eligible for government-provided homecare at no direct cost to the individual. If individuals need bit more support, non-profit community agencies can also provide this. Kerby Centre also publishes two directories annually—one for older adult housing and one for services.

Older adults in Calgary can also call 403-SENIORS (403-736-4677) to find out about services available to them. The information line is a program of The Way-In Network, a collaboration of four Calgary agencies serving older adults: Calgary Seniors Resource Society, Jewish Family Services, Calgary Chinese Elderly Citizens Association and Carya.

There are also businesses that offer these services. Median private homecare costs for Calgary have been detailed in a report by Sun Life Canada (Sykes Assistance Services, 2016):

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meal delivery</td>
<td>$9/meal (provincial median)</td>
</tr>
<tr>
<td>In-home meal preparation</td>
<td>$28/hour</td>
</tr>
<tr>
<td>Laundry/housekeeping</td>
<td>$28/hour</td>
</tr>
<tr>
<td>Personal care (bathing, dressing, etc.)</td>
<td>$28/hour</td>
</tr>
<tr>
<td>Companionship</td>
<td>$28/hour</td>
</tr>
<tr>
<td>Skilled Nursing</td>
<td>$50/hour</td>
</tr>
<tr>
<td>In-home relief</td>
<td>$28/hour</td>
</tr>
<tr>
<td>Palliative care</td>
<td>$45/hour</td>
</tr>
<tr>
<td>24-hour live-in care</td>
<td>$29/hour (provincial median)</td>
</tr>
</tbody>
</table>

**Medications**

Older adults in Alberta are eligible for the premium-free Alberta Blue Cross Coverage for Seniors that will cover prescriptions that are on the Alberta Drug Benefit List. Individuals are responsible for 30% of the cost of each prescription, up to at $25 maximum (Clement et al., 2016). This program has led to significantly less out-of-pocket medication costs for all older Albertans than in the rest of the country. Still, given that two-thirds of older Alberta are on more than five medications, even the co-payments on these drugs can become an economic burden (Canadian Institute for Health Information, 2014). The
subsidized supportive living program in Alberta requires that any resident must be left with a minimum of $315 monthly, much of which could be eaten up by prescription co-payments alone (Alberta Government, 2014).

POSSIBLE SOLUTIONS

National Pharmacare Program

Canadian medicare is delivered by the provinces, and such, each province currently has its own drug coverage program. A 2015 report by the Pharmaceutical Policy Research Collaboration at the University of British Columbia stated national pharmacare could provide many benefits to Canadians, including universal access to necessary medicines, fair distribution of prescription drug costs, safe and appropriate prescribing, and value for money (Morgan et al.). If a national pharmacare program was established, the Parliamentary Budget Officer estimates it could save Canadians $4.2 billion annually (Parliamentary Budget Officer, 2017). This could save out-of-pocket prescription costs for lower income older adults.

Adequate Incomes

The most obvious solution to affordability concerns is to ensure older adults have access to adequate incomes. There have been some recent changes that will increase the federal Guaranteed Income Supplement payments for the most vulnerable. The Liberal government recently increased the GIS amounts by 10% starting July 1, 2016. This is expected to help 750,000 single older adults, remove about 18% of single seniors from poverty (85,000 out of 469,000 cost) and cost $720 million (Shillington, 2016; Canadian Medical Association, 2017). This increase is designed to help the most vulnerable older adults with an income (other than OAS and GIS) of $4,600 annually, the majority of whom are women. The increase will be phased out completely when incomes reach $8,400 annually (Benefits Canada, 2016). There has also been a resurgence of interest in offering guaranteed minimum incomes, and Ontario has started a pilot project in select communities as of November 2017. For more complete information, see OACC’s position paper on Older Adults, Pensions, and Income Support.

Seniors Price Index

The Seniors Price Index (SPI) is a policy initiative that was to provide a specialized Consumers Price Index (CPI), or a way to measure inflation, for older adults. The rationale behind this index is that older adults have different expenses than non-senior families, and these expenses rise in cost faster. As Old Age Security (OAS) and the Guaranteed Income Supplement (GIS) increases are currently tied to CPI, the idea was to replace it with the SPI instead. This was a policy put forward by the Liberals in the 2016 election, with the proviso that if CPI rose faster than the SPI, that older adults would enjoy the higher of the two increases (Maclean’s, 2016).

The Liberals have since quietly dropped this initiative. There is evidence from a 1998 Statistics Canada report that showed inflation impacted older adults, low-income older adults and low-income adults under 65 at the same rate as the general population (Brown, 2006). Instead of adopting the SPI, other financial experts report that the bigger issue is that many older adults are on fixed incomes and cannot handle inflation increases at all, regardless of how it is measured, and that where older adults live actually has a greater impact on inflation.

Provide Supports to Older Adults Where They Live

There is general agreement that the way forward is to provide supports and services to older adults where they live, and keep them in their own homes as long as possible and it is safe to do so. Homecare
can save healthcare systems money, but it is often inefficient and relies substantially on informal, unpaid supports provided by family and friends. By increasing efficiencies, especially with regard to routing, scheduling and operations, costs could be decreased. Homecare Intel (HCI) has produced a white paper for Ontario’s homecare system that explains how using advanced logistics software and technologies can be used for homecare delivery and management (Homecare Intelligence Canada, 2017).

**EMERGING TRENDS**

**The Sharing Economy**

As a new type of economy emerges, there can be benefits for older adults. As shared transportation services (Uber, Lyft, etc.) become more common and more older adults feel comfortable with smartphones, this type of transportation may become more affordable than taxis. As older adults prefer to travel in private vehicles, this could become a viable alternative. There are also other services developing, such as TaskRabbit, where local and vetted people offer to do household tasks, like yard work or general maintenance. Meal delivery services are also becoming more common (DoorDash, SkipTheDishes, etc.) while more grocery delivery services are also appearing (Save-on-Foods, Safeway, etc.) There are even clothing sharing sites developing (ThredUp) (Mehra, 2017).

The flipside to saving money with the sharing economy is to supplement income with it. Older adults with a spare room can rent it out on a homesharing service like AirBnB, or become a ridesharing driver if they have a car. In fact, older adults are considered an underutilized group for ridesharing companies, as most have drivers’ licences and own their own cars (Grabar, 2015; Miller, 2015). Older adults can also offer services in the so-called “gig economy” where tasks instead of jobs are the preferred form of work (Fiverr, etc.).

**Technology**

Technology advances can also offer benefits to older adults. As healthcare systems become more complex and inter-related, how to manage information and keep it current and accessible to all medical personnel who need it is a challenge. This is a particular challenge when older adults transition to different sites. Information management technology solutions are difficult to create and must include collaboration between geriatricians, family doctors, informatics specialists, and health services researchers and ideally include computer-generated reminders to physicians on conditions that require actions (Weiner et al., 2003).

Robots provide another interesting innovation in the care of older adults. While some robots are being created to help with physical mobility challenges, social interaction and therapeutic robots are also emerging as interesting options to help older adults with dementia, or even mental health issues (Kyung-Hoon, 2017). Socially assistive robots like the robot Canadian harp seal, *Paro*, is already being used around the world and has been shown to provide modest but significant comfort to dementia patients (Moyle et al., 2017). Costing about $8,000, it is being marketed as a medical device. There are concerns that this technology can infantilize individuals instead of helping them maintain or develop skills. Technology also runs the risk of becoming too intrusive or used as a replacement for human interaction (Kyung-Hoon, 2017).
**Recommendations**

- Advocate for adequate inflation-adjusted increases for income support programs such as Old Age Security and Guaranteed Income Supplement at the federal level and Alberta Seniors Benefit at the provincial level.
- Join/align with advocacy efforts for strategies that result in sufficient income for people of all ages, including Universal Basic Income and Living Wage.
- Ensure older Calgarians are aware of the provincial and municipal subsidized programs for transit, recreation, home maintenance and property tax assistance that are available to them through use of the 403-SENIORS information line.
- Ensure application processes for these programs are easy and accessible for older Calgarians.
- Ensure coordinated cost effective social participation opportunities for older adults are well promoted and accessible so barriers to access—including language and culture—are limited.
- Use technology in to improve the lives of older adults, but not as a replacement for human interaction.
- Conduct research into barriers for older adults participating in recreation and creative arts programs.

**References**


RBC. (2013). *A place to call home - Canada's retiring boomers hope to stay put, despite potential health issues: RBC Poll*. Toronto.


TD Economics. (2016). *Alberta’s recession not quite like the others*. Toronto.


---

This position paper is a part of a series of papers by OACC on older adults with respect to mental health and housing issues and poverty and affordability issues.

© OACC 2018
Prepared for the Older Adult Council of Calgary by Lee Tunstall, PhD, with advice and support of Raynell McDonough (City of Calgary) and Sarah Price (Silvera for Seniors). OACC brings together service providers, housing providers, health sector representatives and government representatives that work with the older adult population in Calgary.