

Barriers to Health

HIGHLIGHTS

- In Peel in 2003, female seniors (57%) were more likely than male seniors (46%) to report that they sometimes or often experienced any activity limitation. In addition, Peel seniors aged 65 to 74 years were less likely to report having any activity limitation compared to those aged 75 years and older.
- Forty-eight per cent of female seniors in Peel reported that they needed some type of assistance with daily tasks compared to 25% of male seniors. Twenty-seven per cent of 65- to 74-year-olds needed some help with daily activities compared to 52% of those aged 75 years and older in Peel.
- Abuse of seniors does occur, although it can be a hidden problem for which data in Peel is not available. In most cases, the abuse is perpetrated by someone the senior knows. In cases of family violence against Canadian seniors, adult children and spouses accounted for two-thirds (66%) of abusers in 2003.
- Some seniors are at higher risk of abuse than others such as older seniors; women; those socially isolated; those with reduced cognitive capacity; those with disabilities who are dependent; or seniors cared by someone with an alcohol or drug problem. Isolation and risk of abuse can also be the result of poverty, illiteracy, not speaking French or English or coming from a culture with different notions of abuse and neglect. Given the large proportion of seniors in Peel who belong to different cultures or who cannot speak English or French, abuse may be a problem which needs to be addressed.



INTRODUCTION

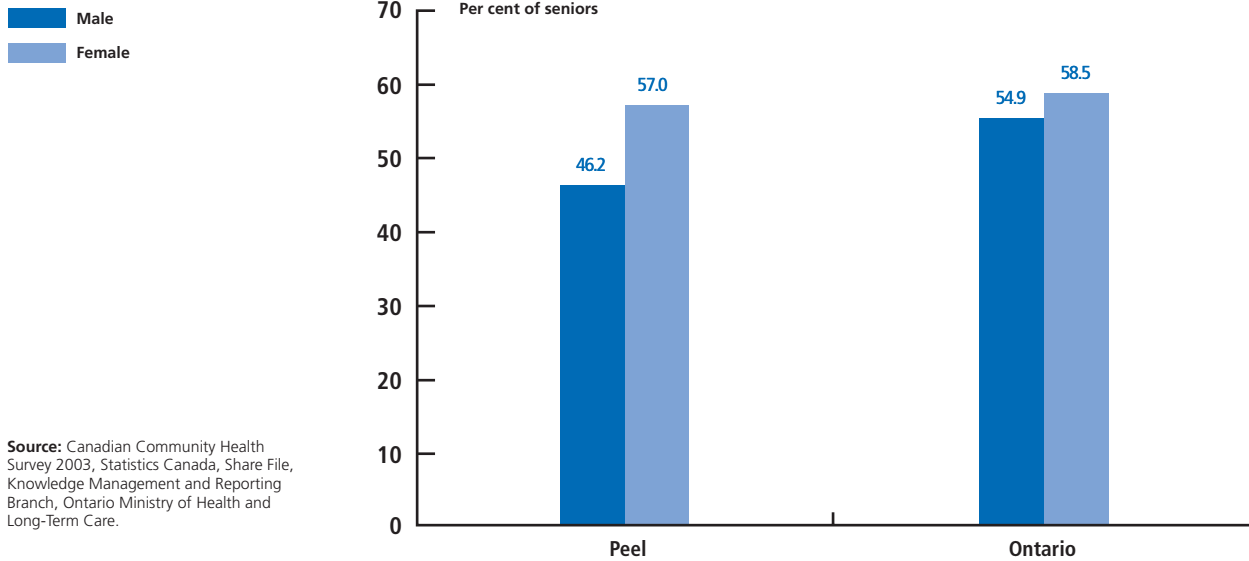
Older adults are more likely than younger individuals to suffer from chronic conditions, to have activity limitations and to be dependent on others for assistance with common activities of daily living (ADL) such as housework, heavy chores, shopping, meal preparation, personal care, paying bills and moving about inside their home. Information about these activity limitations, disability, and ADL were collected from the 2003 Canadian Community Health Survey (CCHS). Please note that data for Peel were not always available due to small numbers.

ACTIVITY LIMITATIONS

An activity limitation is defined as a reduction in the ability to perform certain functions either at home, school, work or in other activities because of a physical condition, mental condition or health problem which is expected to last or has already lasted six months or longer.¹²

In 2003, data from the CCHS showed that more than half (52%) of seniors in Peel reported that they sometimes or often experienced any activity limitation. This is similar to the proportion in Ontario (57%). The proportion of seniors who reported any activity limitation differed by sex and age group. In Peel, females (57%) were more likely than males (46%) to report that they sometimes or often experienced any activity limitation (see *Figure 4.1 on following page*). The difference between males and females in Ontario was less pronounced (59% and 55% respectively).

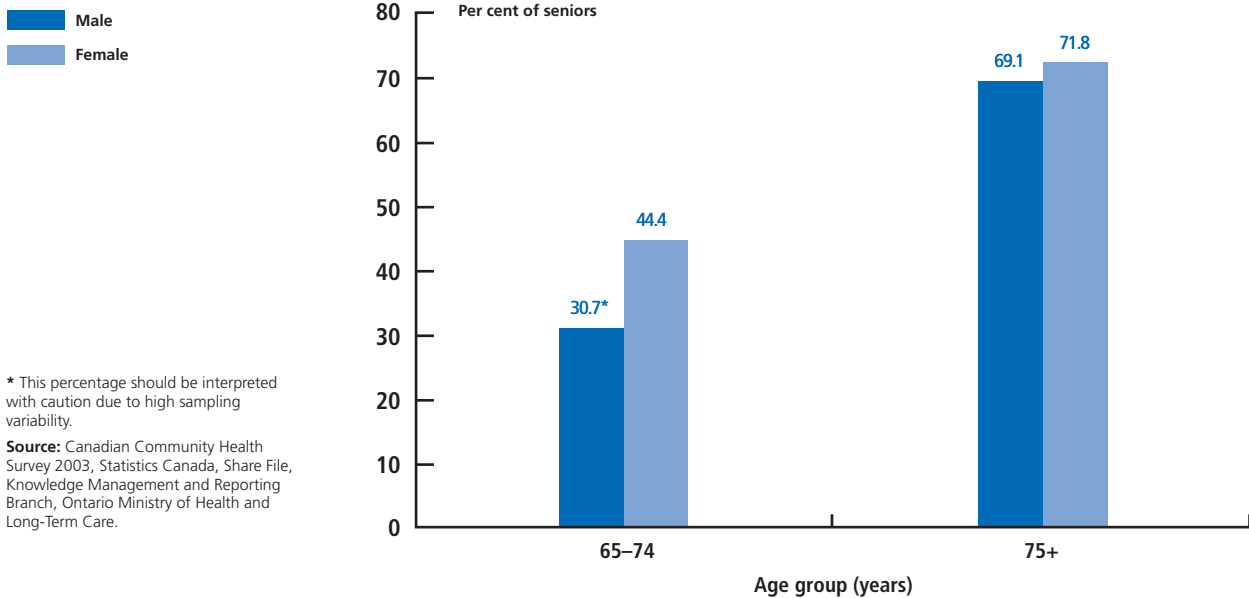
Figure 4.1: Proportion of Seniors with an Activity Limitation by Sex, Region of Peel and Ontario, 2003



Source: Canadian Community Health Survey 2003, Statistics Canada, Share File, Knowledge Management and Reporting Branch, Ontario Ministry of Health and Long-Term Care.

In addition, Peel seniors aged 65 to 74 years were less likely to report they sometimes or often experienced an activity limitation compared to those aged 75 years and older. Females were more likely to report having any activity limitation compared to males among both age groups of seniors in Peel (see Figure 4.2).

Figure 4.2: Proportion of Seniors with an Activity Limitation by Age Group and Sex, Region of Peel, 2003



* This percentage should be interpreted with caution due to high sampling variability.

Source: Canadian Community Health Survey 2003, Statistics Canada, Share File, Knowledge Management and Reporting Branch, Ontario Ministry of Health and Long-Term Care.

ASSISTANCE WITH ACTIVITIES OF DAILY LIVING

Assistance with activities of daily living involves a person's need for help (for health reasons) with instrumental activities of daily living such as preparing meals, shopping for groceries or other necessities, doing everyday housework, doing heavy household chores and personal care such as washing, dressing or eating, moving about inside one's house or paying bills.

According to the 2003 Canadian Community Health Survey, approximately 38% of seniors in Peel reported some need for assistance with one or more activities of daily living in the home. This is consistent with the reported need for assistance among Ontario seniors (39%). Similar to reporting an activity limitation, there was a difference between male and female seniors. Forty-eight per cent of females in Peel and Ontario reported that they needed some type of assistance with daily tasks compared to 25% of males in Peel and 26% of males in Ontario.

The proportion of seniors who required some type of assistance with activities of daily living in 2003 increased by age group in Peel. Twenty-seven per cent of 65- to 74-year-olds needed some help with daily activities compared to 52% of those aged 75 years and older in Peel (data not shown). A similar increase by age group occurred among Ontario seniors.

DISABILITY

Disability days indicate the number of days in the previous two weeks that a person stayed in bed or cut down their activities because of illness or injury. In the 2003 Canadian Community Health Survey, 14% of seniors in Peel reported having one or more disability days in the previous two week period. This proportion was similar to Ontario (15%). In Ontario, women were more likely than men to report one or more disability days (18% and 12% respectively). Data by sex for Peel were not releasable due to small numbers. There was no difference in reported disability days between Ontario seniors 65 to 74 years of age and those 75 years of age and older (data not shown).

ABUSE OF SENIORS

Elder abuse is any harm done to an older person caused by a relative, friend, caregiver or person on whom the older person relies for their basic needs. Abuse can take one or many forms such as physical abuse, neglect, financial abuse or psychological abuse.³⁶

In most cases, the abuse is perpetrated by someone the senior knows. In cases of family violence against Canadian seniors, adult children and spouses accounted for two-thirds (66%) of abusers in 2003.³⁷

In 2003, Canadian seniors were by far the least likely of all age groups to be victims of violent crime reported to police. In 2003, male seniors were victimized at a rate of 184 per 100,000 population compared to 119 per 100,000 female seniors.³⁷ These rates were significantly lower among seniors than among males and females 18 to 24 years of age (2,053 per 100,000 males and 2,254 per 100,000 females).³⁷

Some seniors are more at risk of abuse than others such as: older seniors; women; those socially isolated; those with reduced cognitive capacity; those with disabilities who are dependent; or seniors cared by someone with an alcohol or drug problem. Isolation and risk of abuse can also be the result of poverty, illiteracy, not speaking French or English or coming from a culture with different notions of abuse and neglect.³⁸ Given the large proportion of seniors in Peel who belong to different cultures or who cannot speak English or French, abuse may be a problem which needs to be addressed.

As with most forms of family violence, abuse and neglect of older adults is largely a hidden problem. Abuse and neglect are thought to be seriously under-reported, since surveys capture only what abuse victims are willing to reveal and police data reveal only the abuse that comes to their attention. Low public awareness and the fact that many service providers may not be trained to recognize this form of abuse add to the problem.^{37,38}

Abuse in institutions such as long-term care facilities has received less attention, perhaps because a low proportion of Canadians lived there (7%) in 2001. However, anecdotal evidence reveals theft, physical and psychological abuse does occur.^{37,38}

This problem will be compounded by the aging population as a larger number of seniors will be living with family members, receiving home care or possibly be living in a long-term care facility.

SUMMARY

According to 2003 data from the Canadian Community Health Survey (CCHS) more than half (53%) of seniors in Peel reported that they sometimes or often experience an activity limitation. In Peel, males (46%) were less likely than females (57%) to report that they sometimes or often experienced any activity limitation. In Peel, 65- to 74-year-olds were less likely to report having any activity limitation (38%) compared to those aged 75 years and older (71%).

Forty-eight per cent of females in Peel and Ontario reported that they needed some type of assistance with daily tasks compared to 25% of males in Peel and 26% of males in Ontario. The proportion of seniors who required some type of assistance with activities of daily living in 2003 increased by age in Peel. Twenty-seven per cent of 65- to 74-year-olds needed some help with daily activities compared to 52% of those aged 75 years and older in Peel.

In the 2003 Canadian Community Health Survey, 14% of seniors in Peel reported one or more disability days in the previous two week period. This proportion was similar to Ontario (15%). In Ontario, women were more likely than men to report one or more disability days (18% and 12% respectively). Data by sex for Peel were not releasable due to small numbers. There was no difference in reported disability days between Ontario seniors 65 to 74 years of age and those 75 years of age and older.

In most cases, elder abuse is perpetrated by someone the seniors know. In cases of family violence against Canadian seniors, adult children and spouses accounted for almost 70% of abusers in 2002.

In 2003, Canadian seniors were by far the least likely of all age groups to be victims of violent crime reported to police. In 2003, male seniors were victimized at a rate of 184 per 100,000 population compared to 119 per 100,000 female seniors. These rates were significantly lower among seniors than among males and females 18 to 24 years of age (2,053 per 100,000 males and 2,254 per 100,000 females).

Abuse in institutions such as long-term care facilities has received less attention, perhaps because a low proportion of Canadian lived there (7%) in 2001. However, anecdotal evidence reveals theft, physical and psychological abuse does occur.