



**Written Submission for the Pre-Budget Consultations in  
Advance of the Upcoming Federal Budget**

**By Organizations for Health Action (HEAL)**

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## **SUMMARY: 2021 Federal Budget Recommendations**

**RECOMMENDATION 1:** That the federal government, working with provinces and territories, increase investments in community, home and residential care to meet the needs of our aging population, to ensure that all individuals receive the necessary care and services, in the appropriate setting, at the right time and by the right provider.

**RECOMMENDATION 2:** That the federal government implement a demographic top-up transfer that would be allocated based on the increased provincial-territorial health care costs due to population aging, with the federal contribution set to the current share of the CHT as a percentage of provincial-territorial health spending.

**RECOMMENDATION 3:** That the federal government, working in partnership with the provinces, territories and others, fund sustainable, evidence-based mental health services to meet the growing demand for timely access to care, and formally recognize Mental Health Parity in legislation.

**RECOMMENDATION 4:** That the federal government increase its initial investment of \$50 million over five years in the national dementia strategy to \$150 million to ensure measurable and timely progress on the strategy's vision and national objectives.

**RECOMMENDATION 5:** That the federal government provide greater financial assistance through benefits, tax credits, and job protection for caregivers to ensure they are not penalized financially for stepping into a caregiver role, including those caregivers in long-term care.

**RECOMMENDATION 6:** That the federal government provide support for seniors and marginalized vulnerable populations to maximize their use of digital technologies such as virtual care and wellness programs.

## Introduction

### Organizations for Health Action (HEAL)

Organizations for Health Action, known as HEAL, is a coalition of 40 national health organizations dedicated to improving the health of Canadians and the quality of care they receive. Our members are professional associations of regulated health care providers and organizations of health charities that provide a range of health care services across Canada.

Created in 1991, HEAL now represents more than 650,000 providers (and consumers) of health care. A complete list of HEAL members is available [here](#).

### Healthcare needs in the context of COVID-19 and Canada's economic recovery

Over the past two years, HEAL members have come together to focus their efforts on advocating around two major areas of concern related to Canadian healthcare: seniors care and mental health. Although our 40 coalition members represent a wide range of health sectors across Canada, all agree that these areas continue to be of particular concern for our healthcare systems, and impacts their respective professions and their patients on some significant level.

Since then, the COVID-19 pandemic has only increased HEAL's concerns related to seniors care and mental health, as recent events have exacerbated existing gaps and limitations related to these areas.

Unfortunately, HEAL believes that as the pandemic progresses, the impact on Canadians' mental health will become more evident and pose even more of a strain on our current system. As well, further studies and investigations related to what happened in long term care homes during the first wave are sure to continue to identify critical systemic issues.

Our society's ability to care for seniors in a dignified and adequate manner, in addition to the availability of proper mental health supports, arguably affect almost all Canadians personally and profoundly. It has a direct impact on our country's productivity and economic prosperity.

**HEAL firmly believes that failure to significantly and urgently improve our healthcare systems when it comes to mental health and seniors care will unquestionably hinder our ability to see through any sort of economic recovery across Canada.**

## **HEAL's COVID-19 Task Force**

As soon as the pandemic hit Canada, HEAL quickly mobilized to survey its members on current and emerging issues related to the impact of COVID-19 on frontline care, and shared this insight immediately with government officials.

HEAL has also set up a COVID-19 Task Force which has been meeting weekly or bi-weekly since late March of 2020. Its mandate is to facilitate coherent and timely information exchange and action by healthcare workers, administrators, and FPT authorities, to help contain and mitigate the crisis. The information is then conveyed directly to the Minister of Health's office.

We were pleased to see how this efficient collaboration with various officials led to important, real time changes to the frontlines of healthcare during the pandemic.

HEAL looks forward to continuing to leverage its wide range of healthcare expertise to assist the federal government and its partners with its ongoing pandemic response.

# HEAL's Federal Budget Recommendations

## **1. Investing in care for seniors**

The pandemic has tragically exposed the weaknesses and inadequate health supports available to Canada's aging population, particularly for residents of long-term care facilities. Canada's National Institute on Ageing (NIA) reports that almost 80% of all the deaths in Canada since the beginning of the outbreak have been in long-term care settings.<sup>1</sup>

Moreover, COVID-19 reinforced the challenge of maintaining infection control procedures in close congregate care settings such as nursing homes; and the impact to both workers and the seniors who resided there. Isolation, neglect, dehydration, malnutrition, and potentially preventable deaths were some of the negative impacts of unmanaged COVID-19 outbreaks in long-term care settings.

The pandemic highlighted that home and community care and services are essential for the safety of Canadian seniors. It also underscored the need to ensure all health care professionals are properly trained to provide earlier, more effective and more compassionate care. Allowing seniors to remain longer safely at home would enable hospitals to discharge clinically stable patients to a safer care setting. It would provide alternatives to long-term care facilities for frail seniors and vulnerable populations who are especially impacted by COVID-19.

**RECOMMENDATION 1:** That the federal government, working with provinces and territories, **increase investments in community, home and residential care to meet the needs of our aging population**, to ensure that all individuals receive the necessary care and services, in the appropriate setting, at the right time and by the right provider.

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<sup>1</sup> National Institute on Ageing. (2020). NIA Long Term Care COVID-19 Tracker: Canadian Summary. Retrieved from <https://ltc-covid19-tracker.ca/>

## **2. Investing in equitable and adaptable seniors' care**

As we move through the pandemic and focus on the future, it is important to note by 2036, more than 25% of Canada's population will be over the age of 65. Because health care costs increase with age, the demands of this demographic shift on the Canadian health care system will be further compounded.<sup>2</sup>

Although health care plans have developed their offerings on community-based health services such as home care and expanded to a broader variety of regulated health care professions and services, they have developed unevenly across the country due to provincial/territorial fiscal and political decisions. While the federal government committed to invest \$6 billion over ten years in home care in 2017, more is needed to improve access to home, community and palliative care services to support Canadians as they age.

Canada's Premiers have previously called for the federal government to increase the CHT (Canada Health Transfer) to 25% of provincial and territorial health care costs to address the needs of an aging population. Rather than change the current CHT formula, HEAL recommends that an additional demographic top-up be transferred to provinces and territories based on the projected increase in health care spending associated with an aging population.

**RECOMMENDATION 2:** That the federal government Implement a demographic top-up transfer that would be allocated based on the increased provincial-territorial health care costs due to population aging, with the federal contribution set to the current share of the CHT as a percentage of provincial-territorial health spending.

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<sup>2</sup> Canadian Institute for Health Information. Health care cost drivers: The facts. Ottawa: CIHI; 2011 [cited 2020 July 30]. Available from: [health\\_care\\_cost\\_drivers\\_the\\_facts\\_en.pdf\(cihi.ca\)](https://www.cihi.ca/en/health-care-cost-drivers-the-facts-en)

### **3. Investing in a mental health parity approach**

While we continue to stay at home and practice physical distancing, we recognize that isolation, job loss and security, and worry for ourselves and loved ones are taking a significant toll on Canadians.

Prolonged isolation and physical distancing can lead to increased depression, anxiety, suicidal crises, domestic crises, and violence. HEAL is concerned about the long-term mental health impact of the pandemic on the general population, as well as on Canadians with severe physical, mental, intellectual, cognitive or sensory impairments who have been disproportionately affected.

We have also seen the profound impact that COVID-19 has had on youth mental health. A study conducted by Toronto's Hospital for Sick Kids found that 70% of children have experienced a deterioration of their mental health. There has been an overall increase in depression, anxiety and irritability, with eating disorders and emergency room visits significantly on the rise. This pandemic and its associated isolation have harmed Canadian youth to the point where 40% of children with no previous mental health issues have begun to see their mental health deteriorate during the pandemic.<sup>3</sup>

A recent survey of Canadian employees by the Conference Board of Canada and the Mental Health Commission of Canada detail these concerns underlying the decline in our collective mental health.<sup>4</sup> Moreover, a study by Deloitte estimates a 54% to 163% increase in the number of visits to a doctor for mental health issues.<sup>5</sup>

Even before the pandemic, Canadians were overwhelmingly in favour of increased mental health supports; 94% of Canadians believe that provincial and territorial governments' health plans should cover mental health care (2019).<sup>6</sup> In fact, 89% of Canadians support increasing funding for mental health care professionals such as psychologists, occupational therapists, social workers, dietitians, nurses and counsellors.<sup>7</sup>

Furthermore, 55% of Canadians reported being dissatisfied with wait times for publicly-funded mental health practitioners, and 20% said they had to seek and pay for private mental health services due to long wait times or lack of publicly-funded mental health services.<sup>8</sup>

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<sup>3</sup> Preliminary findings shared from COVID-19 child mental health research study. The Hospital for Sick Children, Toronto. <https://www.sickkids.ca/en/news/archive/2020/covid19-mental-health-study-findings/>

<sup>4</sup> COVID-19 Impact on Mental Health and How Employees are Coping. Conference Board of Canada, the Mental Health Commission of Canada. June 23, 2020. Page 17.

<sup>5</sup> Canadian Press. Potential explosion in mental illness could last years after pandemic: study. Deloitte Canada. August 5, 2020.

<sup>6</sup> Abacus survey. June, 2019. The question asked was "should mental health care be covered by provincial or territorial health insurance plans?"

<sup>7</sup> Nanos Public Opinion Poll. How Important is Mental Health for People in Canada? Highlights of a Nanos Research Survey for the Mental Health Commission of Canada. January 2020.

<sup>8</sup> Eight in Ten (82%) Canadians Believe that Prescription Drugs Should be Covered for Everyone, Regardless of their Insurance Coverage. May 16, 2019. Page 2.





Currently, Canadians do not have parity in the mental and physical health services they receive from governments. To meet the mental health needs of Canadians now and into the future, governments must move from provider-based to patient and service-based health systems. Governments need to fund evidence-based care that is delivered by the health-care provider or a team trained and licensed to deliver it.

Although a lack of accessibility to adequate mental health supports existed before the pandemic, COVID-19 has demonstrated the structural nature of the problem and the necessity to address it moving forward.

**RECOMMENDATION 3:** That the federal government, working in partnership with the provinces, territories and others, fund sustainable, evidence-based mental health services to meet the growing demand for timely access to care, and formally recognize **Mental Health Parity** in legislation.

#### **4. Investing in the national dementia strategy**

Canada has taken historic and positive steps towards improving dementia care and support with the launch of its first national dementia strategy and committed funding in Budget 2019.

With more than two-thirds of residents in long-term care homes living with dementia and the number of Canadians with dementia expected to double by the end of the decade, the national dementia strategy will require further and sustainable funding to achieve its vision. The initial federal investment of \$50 million over five years will not be sufficient to meet the future needs of the more than half a million Canadians living with dementia today.

The Alzheimer Society has been calling for an investment of \$150 million over five years in the national dementia strategy.<sup>9</sup> HEAL believes that the COVID-19 pandemic has underlined the urgency of fully funding and implementing the national dementia strategy and supports greater investment from the federal government.

**RECOMMENDATION 4:** That the federal government increase initial its investment of \$50 million over five years in the national dementia strategy to \$150 million to ensure measurable and timely progress on the strategy's vision and national objectives.

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<sup>9</sup> The Alzheimer Society of Canada (ASC). Pre-Budget Submission to House of Commons Standing Committee on Finance: Canada's First National Dementia Strategy Delivering on a Bold Vision, August 2, 2019.

## 5. Investing in caregiver supports

Nearly half (46%) of Canadians aged 15 and older, or 13 million Canadians, have provided care to a family member or friend with a long-term health condition, disability, or aging needs.<sup>10</sup> Age-related needs are the single most common problem requiring help from caregivers (28%).<sup>11</sup> Caregivers contribute more than \$25 billion in unpaid labour to our health care system.<sup>12</sup>

To better support Canadians and their caregivers, we need to create a pan-Canadian Caregiver Strategy that is backed by national caregiver legislation that defines and strengthens the rights and recognition of caregivers in the health and social care system.

For example, the expansion of the family caregiving benefit for adults from 15 to 35 weeks and making the benefit refundable would help address the needs of low-income caregivers. Other suggested measures include the adoption of career-friendly workplace standards through corporate tax incentives and the creation of direct caregiver support organizations, such as those that exist in some provinces.

**RECOMMENDATION 5:** That the federal government **provide greater financial assistance through benefits, tax credits, and job protection for caregivers** to ensure they are not penalized financially for stepping into a caregiver role, including those caregivers in long-term care.

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<sup>10</sup> Statistics Canada. (2012). Portrait of Caregivers, 2011: Highlights. Retrieved from; (<https://www150.statcan.gc.ca/n1/pub/89-652-x/2013001/hl-fs-eng.htm>)

<sup>11</sup> Ibid.

<sup>12</sup> Hollander M, et al. (2009) *Who Cares and How Much? The imputed economic contribution to the Canadian healthcare system of middle-aged and older unpaid caregivers providing care to the elderly.*

## **6. Investing in technological tool access and education**

Some segments of our population, like older adults and marginalized populations, have failed to reap the benefits of the full promise of new technologies. As all levels of governments transition towards a digital delivery of their services, there will continue to be new applications of technology that many Canadians will have difficulty accessing and utilizing.

Advancements in technological tools have many benefits for Canada's aging population. For example, seniors will benefit from a greater opportunity for access to primary care through virtual health consultations. Digital applications tailored to specific health needs also have the potential of improving their wellbeing, including such tools as the new COVID-19 Alert app available in Ontario, apps that can sensor data to track falls, or apps that provide reminders for tasks to manage chronic conditions.

Without access to affordable and/or reliable Internet, and the provision of learning opportunities on how to transition to digital tools, important services and programs will not be accessible to all older adults and marginalized vulnerable populations. It should be noted that seniors and Indigenous people make up a large percentage of rural and remote communities and face the largest barriers to accessing these vital tools.

**RECOMMENDATION 6:** HEAL recommends that the federal government **provide support for seniors and marginalized vulnerable populations to maximize their use of digital technologies** such as virtual care and wellness programs.

## Conclusion

COVID-19 has proven to not only be an unprecedented global health crisis, but also a major economic and social crisis. There were already significant concerns around mental health supports and seniors care across Canada before the pandemic, and these issues have only been compounded. In order to ensure we are made stronger after this crisis, we must recognize and address the fault lines it has exposed.

As Canada plans to “restart” its economy, it is imperative that substantial investments related to seniors care and mental health be made in parallel with economic stimulus projects.

On November 17<sup>th</sup>, 2020, HEAL released *Beyond COVID-19: HEAL’s recommendations for a healthier nation*, which expands on this budget submission and includes additional recommendations for the federal government’s consideration.<sup>13</sup> We urge decision makers to consult this document.

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<sup>13</sup> Organizations for Health Action (HEAL), *Beyond COVID-19: HEAL’s recommendations for a healthier nation*. <https://healthaction.ca/heal-reports-blog/beyond-covid-19-heals-recommendations-for-a-healthier-nation>. November 17<sup>th</sup>, 2020.