A summary of the report *The Health Status of Community-Dwelling Older Adults in Manitoba*

Imagine that you are about to enter a maze. You have never done it before. Think about how much easier it would be to navigate if you had some information about it before you enter. You can better plan your route to reach your goal. Without this information, you may not end up where you want to go. Or even know where it is you should be going.

This is a look at how seniors are using the healthcare system. Their physical, mental and social well-being provides insight on how to better navigate the maze of seniors’ well-being.

More people in Manitoba are living longer and expected to be healthy for more years. They are spending more of those years in their own homes. This study looked at the health and well-being of people over the age of 65 living in their own home. It is the first time a study has focused on older Manitobans living in a private residence.

The Manitoba Centre for Health Policy (MCHP) is well suited to do this research. MCHP is home to the Manitoba Population Research Data Repository. The Repository stores data describing nearly everyone in Manitoba. Each time a person has contact with the healthcare system, justice system, or with social services data are collected. These data are part of the Repository. Data from the Canadian Community Health Survey, which is run by Statistics Canada, are also in the Repository. This survey collects data about the health habits of Canadians.

All names and addresses are removed before data can be used for research. Names and addresses are replaced with a number. These numbers are used to link data over time. Linking data lets us use data across different health services and even beyond health, and over time to answer questions, such as the number of times in a year people who are residents of Churchill over the age of 65 visited their family doctor. Here are a few findings.

Seniors Seeing Their Family Doctors

More seniors are seeing their family doctors more often. During the study period, the average number of doctor visits by older Manitobans rose each year. This increase in doctor visits may be helping people to stay in their homes longer.

As family doctor visits go up the overall number of people who need to spend time in hospital goes down. However, although few people are spending time in hospital the need for hospital care has not decreased. When people over the age of 85 spend time in hospital, they are staying for longer.

It has been suggested that the rise in family doctor and specialist visits, may lead to a decline in emergency department visits and hospital stays. While this study cannot claim to show this relationship, planning to ensure timely access to doctors may keep the reduced strain on hospital services.

Seniors are seeing their family doctors more. Yet they are still missing an important step to preventing illness.

Shots, Shots, Shots

Staying up to date with vaccinations is your strongest line of defence against many diseases. To protect everyone from influenza, also known as the flu, all Manitobans over six months of age are able to receive a flu shot free of charge.

Vaccinations are very important for people at risk of serious illness. People who are 65 and older are a major part of this group. Yet our study found that many older adults did not get their flu shot.

From 2010 to 2015 there was a significant drop in the number of older adults getting their flu shot each year. In 2015 only about half of people age 65-74 got their flu shot.

In all areas of the province, vaccination was related to income. People who live in higher income neighbourhoods are more likely to be vaccinated. As income decreased, so did the number of people who were vaccinated. This is a sign that preventative care services are not reaching lower income people, who are often the sickest of our population.

Mental Health in the Golden Years

Mental health is a key part of overall health. Manitobans of all ages suffer from mental illness. Older adults are no exception. Substance use disorder, mood and anxiety disorders, and dementia are the most prevalent mental illnesses in this group.

About 1 in 3 people in our study had a mood and anxiety disorder. Mood and anxiety disorders include bipolar disorder and depression. The number of people diagnosed with a mood or anxiety disorder also increased during the study period. This rise may not be negative. Our study could only count people who contacted the healthcare system about their illness. This increase in mental illness could therefore be a sign that mental health stigma is decreasing. More people may be willing to get help they truly need.

A substance use disorder is when the use of drugs or alcohol gets in the way of relationships and daily life. Substance use disorders are less common among the oldest of this group. However, during the study the number of people diagnosed with these disorders grew among adults age 65-74.

Dementia is more common among the oldest population. Half of Manitobans over 85 years of age who live in the community live with dementia; this may be because people with dementia are more likely to stay in the community.
Graphic 1

Family Doctor Visits Up

Hospital Stays Down

Graphic 2

Only About 50% of People Age 65-74 Got Their Flu Shot in 2015
than they were in the past. This could be due to better community support and quality of home care provided. This increase in the number of people who live at home with dementia should be a flag for health system planners, as the baby boomer generation ages.

VICTIMS OF CRIME

Social risks, such as being a victim of a crime, can affect physical and mental health. When comparing the percentage of seniors who were victims of crimes during the study period, the findings are positive. As a whole, seniors in Manitoba are less likely to be a victim of a crime and this is getting better. During the study period, the rate of crimes committed against seniors dropped by 25%. This included crimes against a person such as assault, crimes against property, such as theft, and other criminal offences like fraud.

Preparing for the Future

Manitoba’s population is growing older. This will have an impact on the amount and types of healthcare needed. However, this does not mean the healthcare system will be overwhelmed.

Aging is inevitable. A healthcare system flooded by an aging population is not. It is possible to prepare for the future healthcare needs of Manitobans. Reports such as this one can inform healthcare system plans and evaluations, helping to guide decision-makers through the maze of providing for seniors’ physical, mental and social well-being.