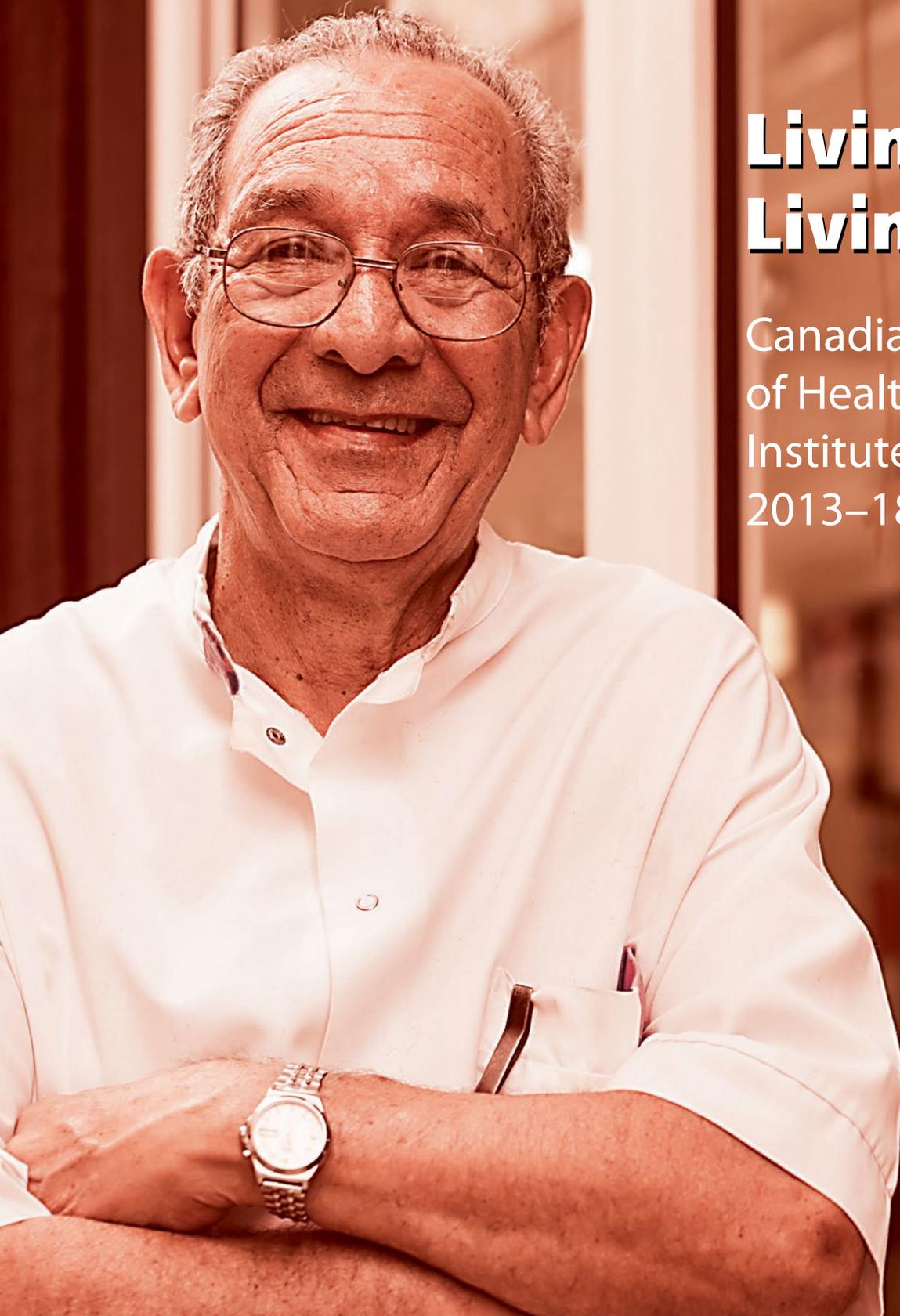




CIHR IRSC

# Living Longer, Living Better

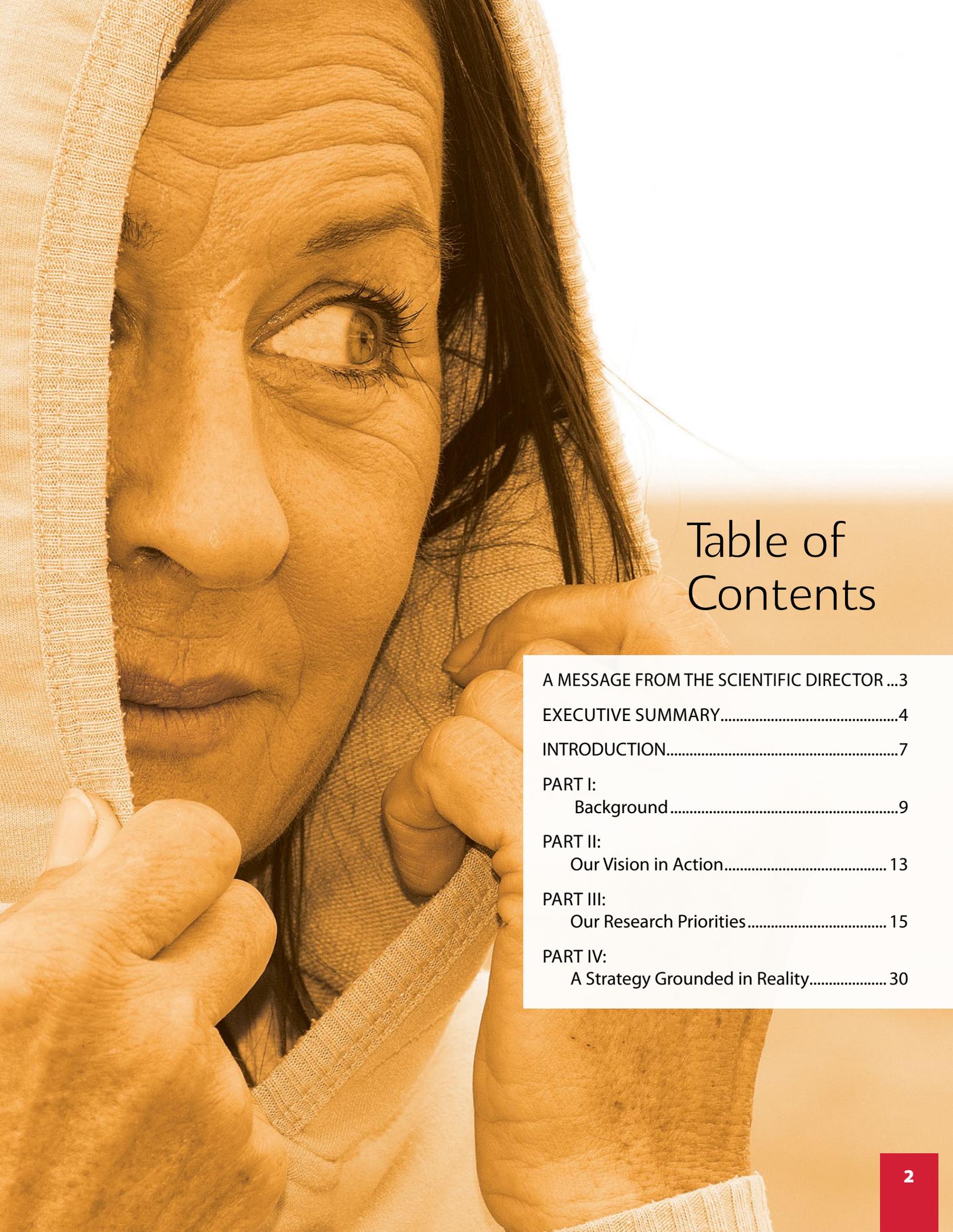
Canadian Institutes  
of Health Research  
Institute of Aging  
2013–18 Strategic Plan



Canadian Institutes  
of Health Research

Instituts de recherche  
en santé du Canada

Canada



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# A Message from the Scientific Director

The world is changing. For the first time in history, there will soon be more old people than young people in Canada. Around the world, the number of people age 65 and over who are alive today is greater than the total number who have ever reached this age in the history of humanity. In Canada as in all other countries, the aging of the population offers some unique opportunities, the first being the chance for older people to live longer and give society the benefit of their accumulated expertise and wisdom. But these additional years must also be enriching and satisfying, since aging can also be accompanied by conditions that affect people's health and wellness. If we want to understand the optimal life course trajectory and add life to these additional years, and if we want to have efficient solutions for addressing the complex health challenges faced by some older people, it is crucial for us to have relevant knowledge.

We can be proud of what the CIHR Institute of Aging has achieved since it was established, under the leadership of Drs. Réjean Hébert and Anne Martin-Matthews, and with the support of the Institute Advisory Board and staff. Thanks to their efforts, Canada's capacity and achievements in regard to research on health and aging are now recognized internationally. In developing its 2013–18 strategic plan, the Institute knew that it had to build on these achievements. But it also knew that it had to meet the current needs of the population and of all the stakeholders. To this end, the Institute conducted

wide-ranging consultations in 2012 both across Canada and internationally. The high point of these consultations was unquestionably the Speaking of Aging tour of 16 Canadian cities, where the Institute met with over 600 people representing not only researchers and trainees from all fields, but also with partners, policy makers and the general public. Through these meetings, the Institute validated the strategic directions for meeting the needs expressed and identified through a web survey which had nearly 850 respondents from all backgrounds. The 2013–18 strategic plan is the product of all of these efforts and is intended as an active response to these needs.

This plan would not have been possible without the contribution of all members of the Institute Advisory Board and its staff in both Montreal and Ottawa. I also wish to thank everyone who participated in the various consultations and whose enlightening comments have helped to make this strategic plan more relevant. For in the end, that is exactly what this plan is intended to do: enable the actions that will be required so that we can all benefit.



Yves Joannette, PhD, FCAHS  
Scientific Director, CIHR Institute of Aging  
Montreal, December 2012





*Vivre, c'est vieillir, rien de plus.*  
Simone de Beauvoir

## Executive Summary

This 2013–18 strategic plan marks a new phase, in which the Institute of Aging will place the emphasis squarely on the health and wellness as well as the challenges of older Canadians. Thus, the Institute's activities in the coming years will focus on finding tangible solutions that will make a real difference for Canada's aging population.

The impact of an aging population is being felt in Canadian society and is giving it a new face. Since 2006, the 60 to 64 age group has grown faster than any other. A similar trend is underway for the oldest age groups, including centenarians.<sup>1</sup> Living longer poses challenges, including living with chronic diseases, isolation and cognitive losses. It is, however, possible to live longer with a good quality of life by optimizing health and wellness through an approach based both on the life course and on a comprehensive perspective incorporating physical, psychological, social and environmental factors.

<sup>1</sup> Statistics Canada, The Canadian Population in 2011: Age and Sex. Online: [www12.statcan.gc.ca/census-recensement/2011/as-sa/98-311-x/98-311-x2011001-eng.cfm](http://www12.statcan.gc.ca/census-recensement/2011/as-sa/98-311-x/98-311-x2011001-eng.cfm)

In concrete terms, the Institute's desire to have a real impact on research and on the quality of older people's lives has been translated into numerous initiatives. Examples include the Mobility in Aging and Cognitive Impairment in Aging strategic initiatives, the initiative on adapted health care and other major initiatives such as the Canadian Longitudinal Study on Aging (CLSA), a unique broad-based research platform, and the International Collaborative Research Strategy for Alzheimer's Disease, for which the Institute of Aging serves as the leader within CIHR, with the support of the Institute of Neurosciences, Mental Health and Addiction. Also in alignment with the strategic directions set out by CIHR, the Institute of Aging has successfully expanded the pool of researchers in the field of aging, increased the number of its international partnerships, accelerated the advancement of research on aging and spurred CIHR investments in research on aging, which have quadrupled since 2001. Both in terms of developing knowledge and in terms of translating it into better care and services, the Institute's innovations have been numerous.

Because the factors that determine optimal aging are rooted in the life course, the Institute regards aging as an evolving process that continues throughout every individual's lifetime. Life is a whole, and aging is not an illness. The study of aging requires a holistic, interdisciplinary approach and a comprehensive perspective, in which prevention is just

as important as intervention and excellence is the guiding principle for all activities at all times.

With this strategic plan, the Institute has established five research priorities that underlie the following four major goals:

- to make researchers more aware of the challenges posed by older people's health and wellness;
- to ensure that knowledge users and the general public participate in the research process from the very outset;
- to incorporate all aspects of the individual and society that contribute to health and wellness; and
- to draw inspiration from the traditional values of Aboriginal peoples that foster positive attitudes toward elders.

To determine the Institute's research priorities, the Institute and its Advisory Board conducted wide-ranging consultations on the opportunities and challenges that Canadian society faces with respect to population aging, followed by a series of town hall meetings where citizens had the opportunity to discuss the directions chosen and the actions to be taken. Across Canada, nearly 1500 researchers, health professionals, policy makers and representatives of seniors' associations shared their perceptions of needs regarding research that have contributed to this document and proposed some innovative avenues for action. The Institute thanks them.

The present 2013–18 strategic plan is based on five research priorities. The first two priorities involve the factors that enable people to live longer and to maintain an active, and satisfying life while aging. The next two priorities encompass the solutions that can be applied to older people's complex health problems. The fifth priority concerns the conditions needed for research results to have a real impact on the health and wellness of the aging population.

The Institute will develop a five-year Action Plan that will be updated on a yearly basis that will

define the concrete steps to be taken to implement these priorities. These plans will be based on the fundamental elements that the Institute promotes: providing support to develop required research capacity, decompartmentalizing research to include all research communities, forming partnerships with users at all levels, ensuring convergence with CIHR's signature initiatives and with those of other institutes, and making an optimal contribution to the major initiatives in which the Institute plays a leading role, as well as in mutually beneficial international collaborations.





## Introduction

Founded in 2001, the Institute of Aging (IA) now plays its full role within the Canadian Institutes of Health Research (CIHR). Over the years, the Institute has successfully built a vibrant community of researchers in a field that is, paradoxically, young, and has successfully taken the necessary steps to ensure the expansion of research on aging in order to enhance the health and wellness of the Canadian public. Over this period, the Institute's strategic activities have had major impacts, while the proportion of CIHR's total investment that is devoted to research on aging has nearly doubled, to 13% from 7%.

In 2011, the Institute of Aging underwent a review by an international team of experts<sup>1</sup>. This review underscored the relevance of the initiatives that the Institute had undertaken and congratulated the Institute on successfully galvanizing a community of researchers on aging, on introducing new collaborations and new initiatives, including internationally, and, lastly, on launching the Canadian Longitudinal Study on Aging.

The 2013–18 strategic plan offers the IA an unequalled opportunity to continue the initiatives that it has already begun and to enhance them by drawing inspiration from the following guiding principles:

## **CONSULT**

everyone who has a direct or indirect interest in aging, including older people themselves;

## **BUILD TIES**

with all stakeholders, as well as with other research-funding agencies, research programs and research platforms, in Canada and internationally, to ensure that aging becomes a concern for all fields of research;

## **ASSUME LEADERSHIP**

for the IA's own initiatives and for CIHR Signature Initiatives for which the IA serves as scientific lead;

## **ENSURE THAT THE IA'S ACTIONS CONVERGE**

with those of the other CIHR Institutes in support of CIHR's current and future directions; and

## **ENSURE THAT THE IA'S ACTIONS HAVE A REAL IMPACT**

on the health and wellness of Canada's aging population and on the quality of the care and services that it receives.

The ultimate goal of the Institute of Aging is to optimize the health and wellness of the population. Achieving this goal requires, in particular:

- a better understanding of the trajectory of aging; and
- an improvement in older people's quality of life.

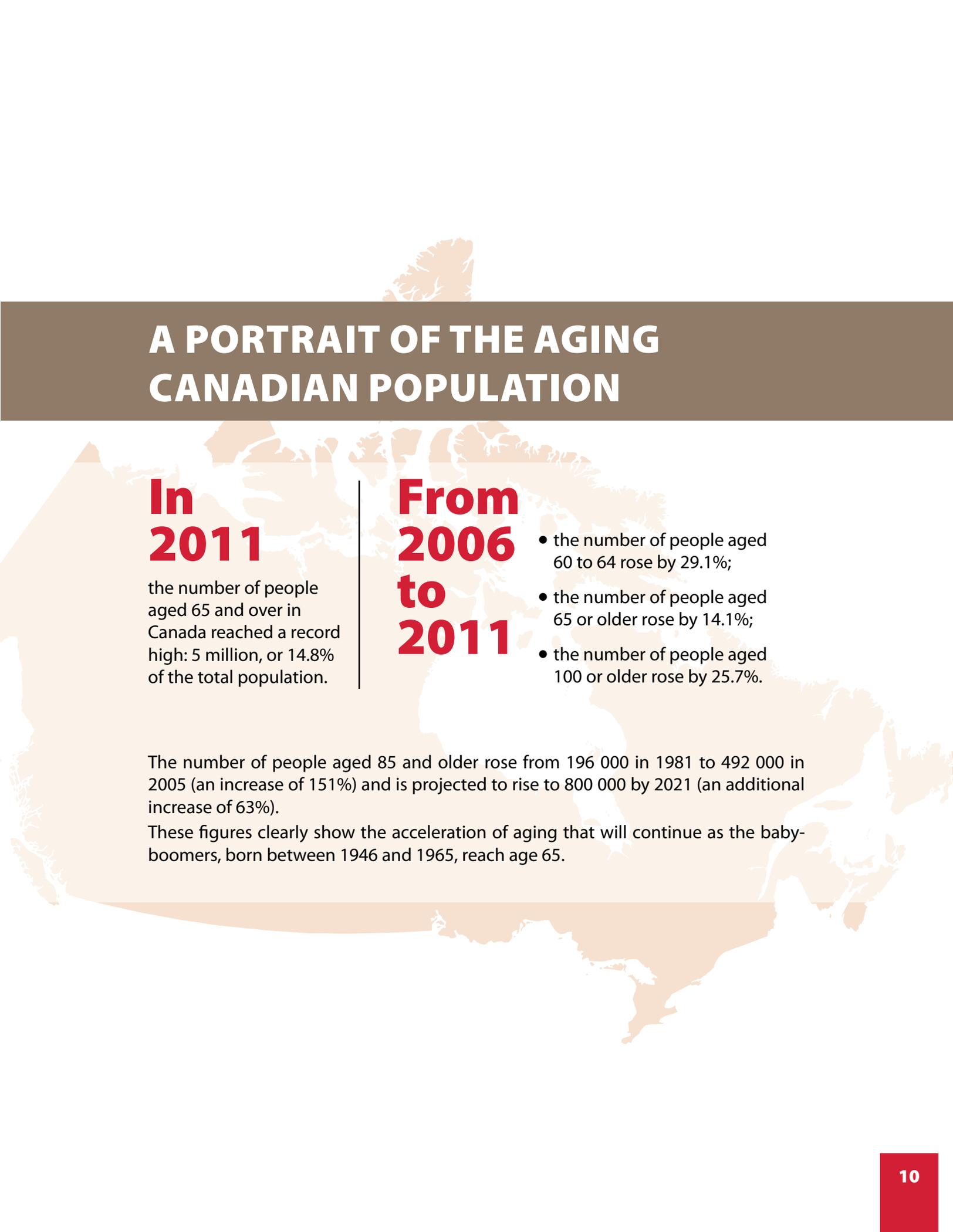
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<sup>1</sup> Expert Review Team Report for Institute of Aging.  
Online: <http://www.cihr-irsc.gc.ca/e/43580.html>



## Part I: Background

Unquestionably, the Canadian population is aging and living longer than past generations. Indeed, improving the quality of life of the current and future generations of older people is becoming a priority for the research community, both in its directions and in its choice of targets.



## A PORTRAIT OF THE AGING CANADIAN POPULATION

### In 2011

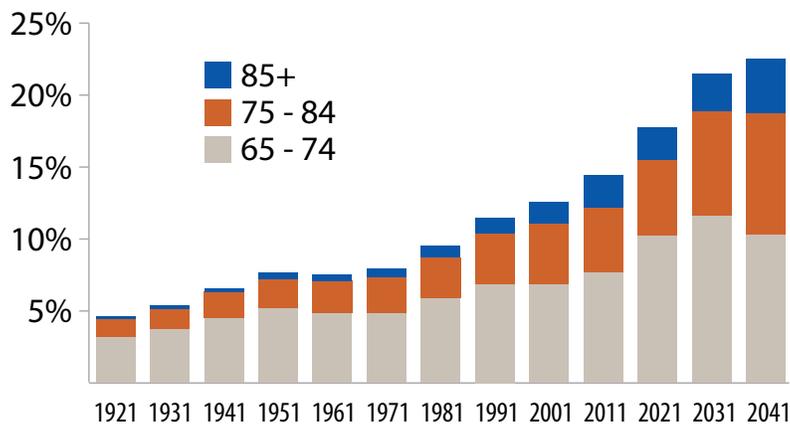
the number of people aged 65 and over in Canada reached a record high: 5 million, or 14.8% of the total population.

### From 2006 to 2011

- the number of people aged 60 to 64 rose by 29.1%;
- the number of people aged 65 or older rose by 14.1%;
- the number of people aged 100 or older rose by 25.7%.

The number of people aged 85 and older rose from 196 000 in 1981 to 492 000 in 2005 (an increase of 151%) and is projected to rise to 800 000 by 2021 (an additional increase of 63%).

These figures clearly show the acceleration of aging that will continue as the baby-boomers, born between 1946 and 1965, reach age 65.



SENIORS BY AGE SUB-GROUPS,  
AS % OF THE TOTAL POPULATION, CANADA, 1921-2041

Although the Canadian population is aging faster than others, the trend is similar in other countries, especially those in Europe (FUTURAGE project document). According to the World Health Organization, the world population of people aged 60 and over will be more than 2 billion by 2050, with the same trend of substantial growth in the oldest age groups ([who.int/ageing/en/index.html](http://who.int/ageing/en/index.html)). It is of great importance to seize the opportunities and face the challenges that these demographic changes present.

## LONGEVITY, HEALTH AND REALITY

Canadians can now expect to live longer. But can they expect to do so in good health and without disabilities?

The reality is that as people grow older, a variety of factors can diminish their quality of life. These factors include combinations of multiple chronic or acute diseases (co-morbidity), various disabilities, cognitive losses, mobility losses, psychological problems and social isolation, together with the aging of the body's various biological systems.

Co-morbidity has equally significant effects on the health care system, and quite understandably. According to the Canadian Institute for Health Information (2008):

- People who are aged 85 or older and have no chronic diseases use half as many health services as people aged 65 to 74 who have three or more chronic diseases (for example, diabetes, hypertension and heart disease).
- 24% of seniors with at least three chronic diseases account for 40% of all health care use among seniors.

It is possible to live longer while optimizing one's health and wellness by taking steps based on the life course and a comprehensive approach. In this way, one can optimize one's health while living longer.

# MULTIPLYING THE BENEFICIAL IMPACTS

The Institute of Aging constitutes a cornerstone and a unifying force for research in the field of aging in Canada. The Institute's vision, values and priorities are fully aligned with the CIHR's strategic directions. The Institute's strategic plan, including its own priorities, reflects a living application of CIHR's directions and priorities in the field of aging. In line with the Institute's many significant achievements since being founded in 2001, our strategic plan is to continue to have a real impact on research and on older people's quality of life, as well as on the quality of life of their caregivers, who are aging themselves and experiencing substantial affective, social and economic impacts:

- The Canadian Longitudinal Study on Aging (CLSA) is an ambitious study and national platform of adult development and aging individuals, each with unique experiences of their environments, communities, and health and social systems. The CLSA follows 50,000 Canadians between the ages of 45 and 85 years over a 20-year period. It serves as a research platform that will accelerate understanding of the complex interplay among the vast array of determinants of health, from gene-environment interactions, to lifestyles, social networks and transitions in retirement and wealth.
- In a period of less than 10 years, the number of researchers affiliated with the Institute rose from 79 in 2000–01 to 987 in 2009–10. And this is through a large breadth of disciplines underlining the integrative approach which is a key element in research in aging.
- CIHR's investments in research in aging have quadrupled, to \$120 million.
- Canadian research on cognitive impairment in aging has made major progress, among others through the building of strong international partnerships. This will continue with the Institute's ongoing co-leadership in the International Collaborative Research Strategy for Alzheimer's Disease.
- The Mobility in Aging initiative has yielded many innovations. For example, it has enabled researchers to understand how and why older people experience falls, so that ways can be found to prevent them; it has led to the creation of biomaterials to replace aging human joints; and it has developed methods of transforming the built environment to improve senior's mobility. This strategic area is important in the 2013-2018 Institute of Aging Plan.
- Research on health services and systems for an aging population will continue to be a major driver moving forward, and align with the Community-Based Primary Health Care Signature Initiative.



## Part II: Our Vision in Action

The mandate of the Institute of Aging focuses on a central goal: to optimize health and wellness over the entire trajectory of aging, for both individuals and society.

The trajectory of aging is a dynamic phenomenon that everyone experiences throughout his or her life. The Institute intends to take all possible steps to ensure that adequate solutions are found to the health and wellness challenges throughout the aging trajectory, and faced by older people in the final stage of this trajectory.

Canadian researchers have conducted indispensable, highly diversified, leading-edge research on older people's wellness for many years – for example, on health determinants and neurodegenerative diseases. These various research endeavours have received significant support from CIHR. CIHR has also supported two major initiatives related to aging: the Canadian Longitudinal Study on Aging (CLSA) for which the Institute of Aging is the lead Institute and the International Collaborative Research Strategy for Alzheimer's Disease, for which the Institute of Aging is the co-lead Institute. The IA will continue to build on those important initiatives.

Nevertheless, there are still many gaps in our knowledge. There is a need to have all of relevant stakeholders participate in the research process. Research must provide conclusive facts and evidence that can serve as the basis for all activities undertaken in the field of health.

There is also a need to continue to explore the ethical, legal and social (ELS) dimensions of aging by applying an ELS frame, as appropriate, to Institute-supported activities in four broad areas: 1) ELS research (e.g., on the social dimensions and environments of healthy aging; equity in access to health services; and respect for persons at end-of-life and in the context of research on the cognitively impaired); 2) ELS advisory and governance functions (e.g., for large scale initiatives as they explore new frontiers in science and technology); 3) knowledge translation and training on ELS issues (e.g. for researchers, health professionals and the public); and 4) engagement and empowerment of individuals and communities throughout the trajectory of aging and in conditions of vulnerability.

Over the coming five years, the Institute of Aging will strive to further expand the pool of scientific knowledge in response to the needs of the population and of the main stakeholders. The Institute also intends to disseminate this knowledge broadly to government policy makers, health professionals and all other interested parties, including older people themselves, as well as industry, because steps must be taken to ensure that this new knowledge has a real impact on the interventions, services and products that can promote older people's health and wellness.



## Part III: Our Research Priorities

### **CO-ORDINATED OBJECTIVES**

In 2012, to identify the gaps where new knowledge is needed, the Institute of Aging conducted wide-ranging consultations with researchers, health professionals, policy makers, industry representatives and representatives of seniors' associations. When asked about the opportunities and challenges facing Canadian society with respect to aging, these stakeholders identified a number of research needs. These needs were then analyzed by the Institute Advisory Board, validated through a series of town hall meetings across Canada, and grouped into two broad themes:

- Optimizing population health and wellness over the trajectory of aging; and
- Addressing the complex health challenges of older adults.

## CONSULTATION

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### **Environmental Scan**

- Canadian
- International

### **Web Survey 840 Respondents**

- Researchers 43%
- Trainees 11%
- Clinicians 22%
- Knowledge Providers/Users 43%/38%
- Over 65 7%
- Men/Women 37%/63%

### **Interviews 26 Individuals (Canadian and International)**

- Knowledge Users (12)  
Health and Social Service  
Providers,  
Policy makers  
Community members
  - Knowledge Providers (14)
- 

## **Institute of Aging Advisory Board**

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### **Speaking of Aging Tour**

5 Weeks, 9 Provinces, 16 Cities, over 600 attendees  
(Knowledge Providers and Users )

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After completing this consultation process, the Institute defined the five research priorities that constitute the foundation of its 2013–18 strategic plan. The Institute is committed to promoting activities to support these priorities and ensure real impacts on the health and wellness of the aging population.

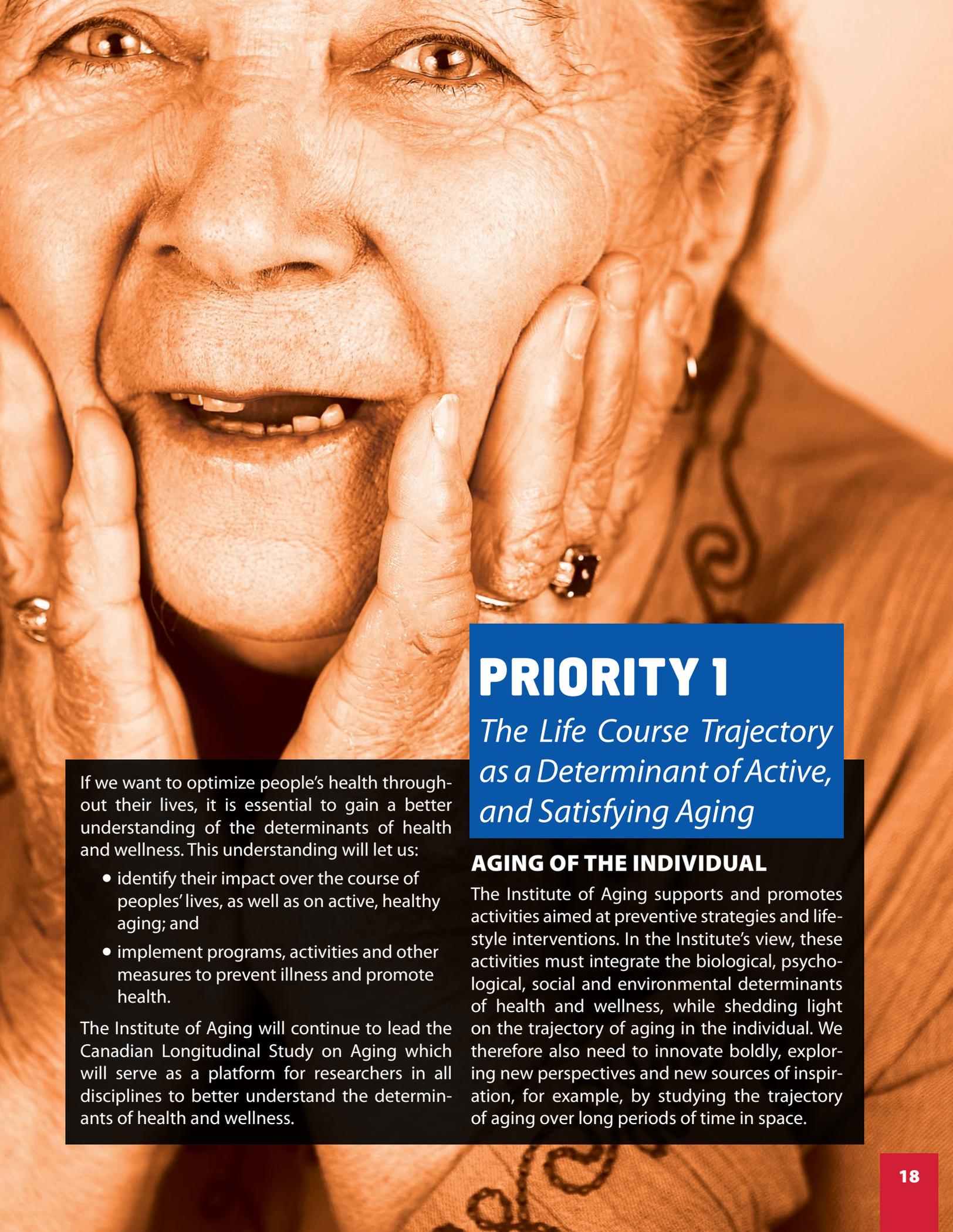
The Institute's first two priorities relate to the first strategic direction, which seeks to promote the factors that enable people to live longer and remain active while aging. The next two priorities relate to the second strategic direction, which is to find concrete solutions to older adults' complex health problems. The fifth research priority is intended to support the two strategic directions and concerns the conditions that will enable real impacts on health and wellness.

## FIRST STRATEGIC DIRECTION

*Optimizing population  
health and wellness  
over the trajectory  
of aging*

Over the course of people's lives, there are many factors, including some that can be modified, which interact and influence the trajectory of aging. They include not only those factors that let people live longer, but also the conditions that let them "add life" to these additional years – in other words, to live better while living longer.

*The 2011 Expert Review Team Report for the Institute of Aging underlined the importance of considering both life course and holistic approaches in the trajectory of aging; these are the guiding principles for this strategic direction.*



## PRIORITY 1

### *The Life Course Trajectory as a Determinant of Active, and Satisfying Aging*

If we want to optimize people's health throughout their lives, it is essential to gain a better understanding of the determinants of health and wellness. This understanding will let us:

- identify their impact over the course of peoples' lives, as well as on active, healthy aging; and
- implement programs, activities and other measures to prevent illness and promote health.

The Institute of Aging will continue to lead the Canadian Longitudinal Study on Aging which will serve as a platform for researchers in all disciplines to better understand the determinants of health and wellness.

#### **AGING OF THE INDIVIDUAL**

The Institute of Aging supports and promotes activities aimed at preventive strategies and lifestyle interventions. In the Institute's view, these activities must integrate the biological, psychological, social and environmental determinants of health and wellness, while shedding light on the trajectory of aging in the individual. We therefore also need to innovate boldly, exploring new perspectives and new sources of inspiration, for example, by studying the trajectory of aging over long periods of time in space.

**BIOLOGICAL DIMENSIONS:**

A great deal remains to be learned about the biological dimensions of aging, especially as it relates to the individual's trajectory of aging. More specifically, to obtain a comprehensive understanding of the biological trajectory of aging, we need to enhance our understanding of the complex interactions that take place among the body's various systems, from the beginning to the end of life.

**PSYCHOLOGICAL DIMENSIONS:**

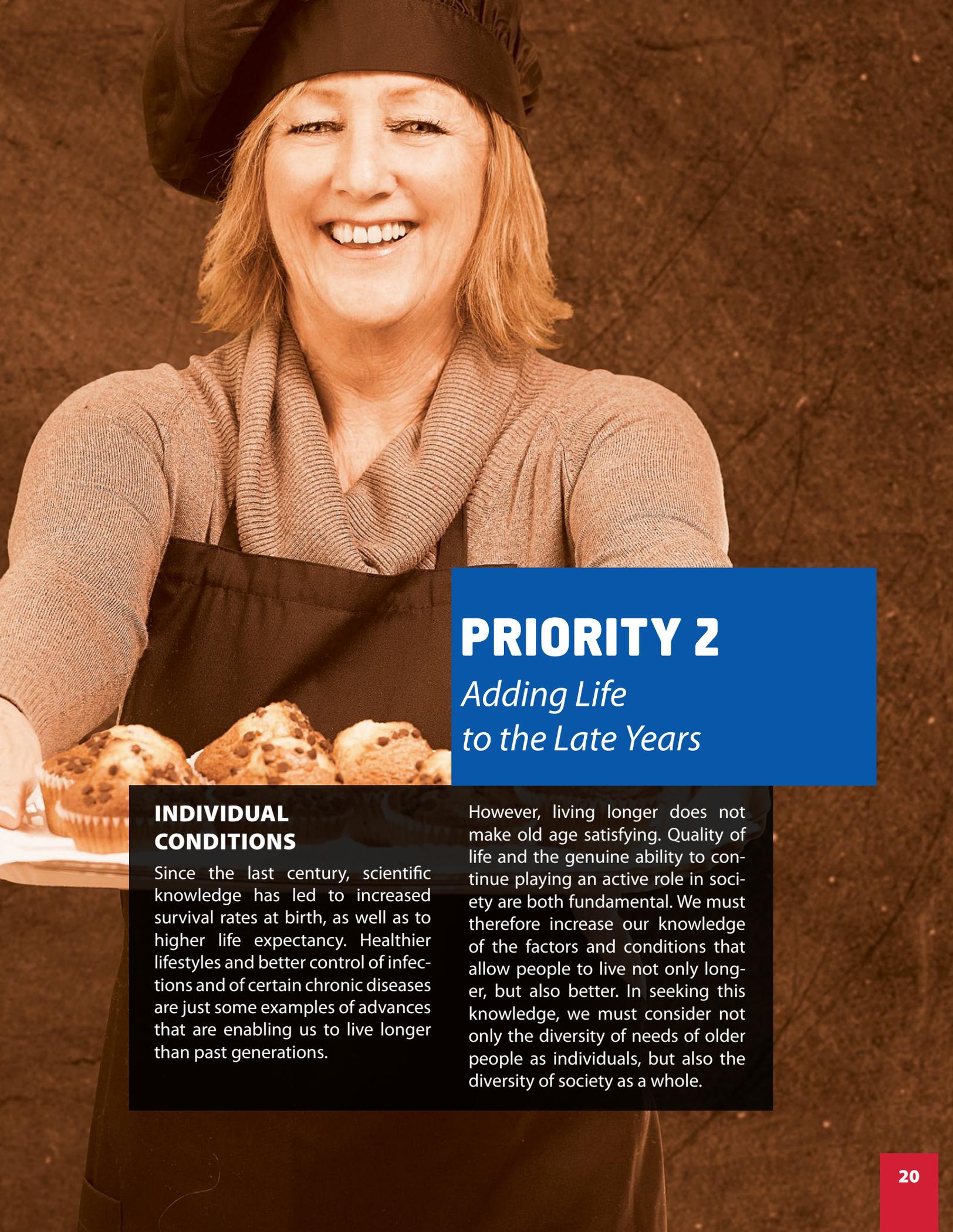
The psychological dimensions of aging have their own trajectory, but they must also be studied in light of the biological and social dimensions. Particular attention must be paid not only to the ways in which people's psychological faculties may diminish or disappear as they grow older, but also to the ways in which they may be enhanced as the result of accumulated experience.

**SOCIAL DIMENSIONS:**

Social dimensions are an essential factor in wellness, which goes far beyond remaining healthy and active. To grasp the social dimensions of aging, we must clearly understand how the body and mind evolve within their immediate and more extended social environment, and we must fill the especially glaring gaps in our knowledge of the micro-, meso- and macro-social dimensions of the trajectory of aging.

**AN INTEGRATIVE APPROACH**

The Institute will encourage an integrative approach in the aging trajectory including the biological, psychological and social dimensions. The Institute will also take into consideration other dimensions including, but not restricted to, the environment. An integrative approach is crucial in order to truly comprehend, not only each of these dimensions individually, but also to understand the dynamics and synergies between them.



## PRIORITY 2

### *Adding Life to the Late Years*

#### **INDIVIDUAL CONDITIONS**

Since the last century, scientific knowledge has led to increased survival rates at birth, as well as to higher life expectancy. Healthier lifestyles and better control of infections and of certain chronic diseases are just some examples of advances that are enabling us to live longer than past generations.

However, living longer does not make old age satisfying. Quality of life and the genuine ability to continue playing an active role in society are both fundamental. We must therefore increase our knowledge of the factors and conditions that allow people to live not only longer, but also better. In seeking this knowledge, we must consider not only the diversity of needs of older people as individuals, but also the diversity of society as a whole.

## **SOCIAL AND ENVIRONMENTAL CONDITIONS**

Improving older people's quality of life also means giving them the opportunity to choose their home environment and to have a built environment that is designed to meet their needs.

### **HOME ENVIRONMENT:**

Older people's home environment is more than just their immediate surroundings; it is also where they choose to live. Hence, it is essential for all of the Institute's activities in this area to focus on ways of making it easier for older people to choose a home environment that meets their physical, social and psychological needs.

### **BUILT ENVIRONMENT:**

Broader still, the built environment completely encompasses the home environment. In both major urban centres and rural areas, we must ensure that current conditions do not harm older people's health and wellness; ultimately, we must establish conditions that enable older people to thrive. With this in mind, we need to study the conditions that help to keep seniors healthy and enable them to continue making an active contribution to society, giving priority to issues of personal and public transportation, which received particular emphasis in the consultations.

### **WORK ENVIRONMENT:**

Because of personal choice, economic constraints or the changing rules regarding retirement, it is becoming increasingly important for older people to continue contributing to society by continuing to work. That is why it is essential to develop our knowledge of the factors that make work environments healthy. This research must examine organizational as well as physical factors in order to take the characteristics of older people into account.

### **SOCIAL ENVIRONMENT:**

The consultations showed that if older people's need for respect, tolerance and inclusion are to be met, a better understanding of the various facets of their social environment will be required. The Institute will be sensitive to and highlight issues related to ageism (individual, institutional and legislative), as well as all forms of elder abuse, be they physical, psychological or financial, and whatever their sources, be they individuals, organizations, institutions, regulations or a body of laws.

## SECOND STRATEGIC DIRECTION

*Addressing  
the complex  
health challenges  
of older adults*

As people grow old, their health status is often marked by the presence of several interrelated chronic diseases and acute health problems. Combined with the vulnerability of older people's biological, psychological and social systems, these complex problems contribute to the frailty seen in many older people. Taken as a whole, these factors require multi-faceted solutions.

The Institute believes that the complexity of older people's state of health requires a holistic approach. Such an approach must both deliver and ensure the continuity of care and services that meet the needs of frail older people.

*The 2011 Expert Review Team Report for the Institute of Aging made recommendations that are perfectly aligned with this strategic direction. They emphasized that addressing issues related to the complexity of older people's state of health, and in particular comorbidity and health services research as well as end-of-life care, could be developed further.*



## PRIORITY 3

### *Interventions Appropriate to the Complexity of Older People's State of Health*

All of the stakeholders who participated in the consultations agreed on the overall direction of the main steps to be taken:

- Ensure that interventions take a holistic, integrated approach to understand the conditions specific to older adults and the impact these conditions have on older adults' physical and mental health, and hence on their wellness.
- Find solutions to one of the most feared health problems of older adults: neurodegenerative diseases that have an impact on cognition and lead to dementia.

The Institute of Aging will continue to co-lead the CIHR Signature Initiative International Collaborative Research Strategy for Alzheimer's Disease in order

to ultimately improve the quality of life and services for those living with the effects of neurodegenerative diseases affecting cognition and their caregivers.

- Establish a continuum of integrated services, from preventive support to medical care, considered as a whole.
- Allow for the diversity of caregivers and their needs, and innovate in terms of support and intervention.

Given the complexity of older people's state of health, there is a need for patient-oriented research and for research on suitable clinical measures, assessment and management tools. Along these lines, the Institute of Aging plans to support research projects that specifically address major challenges such as Alzheimer's disease and other neurodegenerative diseases that have an impact on cognition. Given the importance of research on Alzheimer's disease and related neurodegenerative diseases, the Institute will give priority to activities that are carried out in synergy with one another, both nationally and internationally. In this context, CIHR is a member of the European Union "Joint Programme – Neurodegenerative Disease Research" and is also closely involved with the United States' initiative "National Plan to Address Alzheimer's Disease". These important international partnerships will ensure that Canadian researchers are at the forefront of new global research endeavours.

## **THE COMPLEXITY OF OLDER PEOPLE'S STATE OF HEALTH**

Older adults often face multiple health challenges that interact with one another and with the very processes of aging. That is why the actions that will be undertaken will always include an integrative approach:

### **IN TERMS OF BASIC BIOMEDICAL RESEARCH:**

In order to identify solutions to the challenges that characterize the mechanisms underlying chronic and acute diseases, biomedical research is essential. This research must encourage integrative approaches, such as one that uses a systemic biological framework that is better suited to the aging person.

### **IN TERMS OF THE PSYCHOLOGICAL AND SOCIAL MECHANISMS UNDERLYING OLDER PEOPLE'S HEALTH PROBLEMS:**

These mechanisms must be studied in light of their connections with the biological and societal aspects of old age, in a holistic approach centered on the individual.

### **IN TERMS OF THE TRANSLATION OF KNOWLEDGE INTO CONCRETE MEASURES:**

It is crucial to optimize the sharing of new knowledge derived from holistic approaches integrating acute and chronic diseases, mental health and wellness. These actions must be translated into innovative solutions that can be applied to diagnosis, preventive strategies and interventions.

## **COGNITIVE IMPAIRMENT**

Neurodegenerative diseases that cause cognitive impairment are among the most feared health conditions. The biological, psychological and social aspects, the optimal interventions, the care and services and the continuity of care in particular are dimensions that affect older people. The generation of new knowledge and its translation into real impacts must be the goal of activities taking a holistic approach.

## **CAREGIVERS' HEALTH AND WELLNESS**

The well-being of many older people who are dealing with chronic health conditions, including cognitive impairments, depends on the caregivers who support them. The health and wellness of older people's caregivers are of capital importance. Whether these caregivers are professionals, health workers, or family/friends, their support is indispensable to older people's wellness. That is why maintaining and improving the health and wellness of these caregivers, in harmony with their distinctive personal and cultural characteristics, is a priority commitment for the Institute's activities.



## **PRIORITY 4**

### *Health Care and Services that Combine and Integrate Continuity, Innovation and Efficiency*

If the specific needs of older adults are to be properly met, then creative, efficient solutions for delivering the required care and services are imperative. Therefore, every effort must be made to develop innovative solutions that will:

- Make appropriate and efficient health services available, including primary care and acute care as well as rehabilitative care, long term care and end of life care.
- Adapt the health care system to older people's needs, so that it is oriented toward managing chronic diseases with services available in their communities.
- Support families, caregivers, professionals and policy makers with regard to treatment decisions and end-of-life issues.

A health care system that is appropriate to meet the needs of older people must be able to support them in their home environment of choice, ensure continuity in their care and encourage each of them to participate in their own care.

## **DELIVERING INNOVATIVE, EFFECTIVE, EFFICIENT HEALTH SERVICES AND TRUE CONTINUITY OF CARE**

### **THE MOST EFFECTIVE AND EFFICIENT HEALTH SERVICES AND SYSTEMS ARE A TOP RESEARCH PRIORITY.**

They must cover the entire range of care and services provided to older Canadians, from acute care to long-term care, with a focus on true continuity of care.

### **THE MOST CREATIVE PREVENTIVE AND THERAPEUTIC INTERVENTIONS,**

as well as the most appropriate technological solutions, must be applied, in accordance with personal, social and cultural needs.

### **THE ENTIRE CONTINUUM OF SERVICES,**

from prevention to care, must be delivered in the context of an integrated, holistic approach.

### **THE PARTICIPATION OF KNOWLEDGE USERS,**

in particular health-service professionals and managers, but also the older individuals themselves – must be encouraged. Involving knowledge users from the very start of the research process greatly increases the applicability of the potential solutions that researchers propose.

## **SUPPORTING END OF LIFE**

The importance of providing older people with quality palliative and end-of-life care makes it imperative to take concrete steps in this area. Palliative care includes the care and management of patients nearing the end of life, the reduction of suffering throughout the illness and, in the case of family, the period of mourning. It is therefore essential to consider:

- Actions for better approaches (models and programs) for supporting families and caregivers that take end-of-life issues into consideration in an inclusive environment facilitating informed decisions. These issues involve the various care and treatment options as well as the ethical and legal aspects of these decisions.
- Actions for approaches that make it possible not only to deal with the final stages of the trajectory of aging, but also to prepare for these stages throughout life.



## **PRIORITY 5**

*Ensuring the Conditions  
for a Positive Impact on  
Older People's Health  
and Wellness*

**THE INSTITUTE'S LAST RESEARCH PRIORITY** differs from the others in that it emphasizes the importance of having favourable conditions so that the programs, solutions and models developed through research will have real, sustainable effects on health and wellness. The Institute will therefore carry out actions in four key areas:

## **A COMMUNITY OF RESEARCHERS WHO CAN MEET THE CHALLENGES**

Over the first ten years of its existence, the Institute devoted considerable effort to developing a community of researchers in the field of aging. In some areas, the number of researchers is barely adequate; in others, there are quite simply no researchers at all. It is essential to have a large enough pool of researchers to carry out research in all of the areas relevant to older people's health and wellness. The Institute of Aging must therefore continuously monitor those areas where the need for researchers is greatest. Steps will be taken to support researchers in related fields in their contributions to the challenges of aging. Lastly, it is also important to recognize the excellence of those individuals who constitute our research capacity, at all levels of their education and career.

## **EMPOWERMENT**

The availability of new knowledge cannot have a positive impact on quality of life without the personal, proactive commitment of us all. The scarcity of programs and models for empowering people to secure the conditions they need to maintain better health and wellness in the course of aging highlights the need to produce new knowledge on this approach. This is why the Institute will give priority to activities promoting health literacy and empowerment throughout the trajectory of aging. These activities will enable older people to access accurate information, take ownership of it and use it to manage their health on a preventive as well as curative basis.

## **TRAINING FOR HEALTH WORKERS AND HEALTH PROFESSIONALS**

Population aging has altered the work environment in the health sector. Training programs for future health workers and professionals, as well as continuing education programs, must adjust to these changes. The Institute will therefore take steps to ensure that the best knowledge on the most relevant and effective training programs is available. The Institute will also ensure that all health workers and professionals who contribute to older adults' health and wellness are involved in this undertaking.

## **KNOWLEDGE SHARING**

It is crucial to translate scientific knowledge into concrete programs, interventions and services that have a real impact on the quality of life of the aging population. Too often, however, these programs do not adequately address the realities and characteristics of the target population. For example, Aboriginal communities, in which elders enjoy a unique status, have needs that must be taken into account. That is why the Institute will take steps to ensure that the models, strategies and programs that are the most suitable from this standpoint are available.

## **MORE THAN 1500 CANADIANS**

expressed or validated the need for research on the various issues raised by the aging of Canada's population.

## **COMPARABLE NEEDS**

have been expressed in similar consultations conducted abroad, such as FUTURAGE: A Road Map for European Ageing Research (in the United Kingdom) and "More years, better lives" (in the European Union).

## **THERE IS NOW A BROAD CONSENSUS**

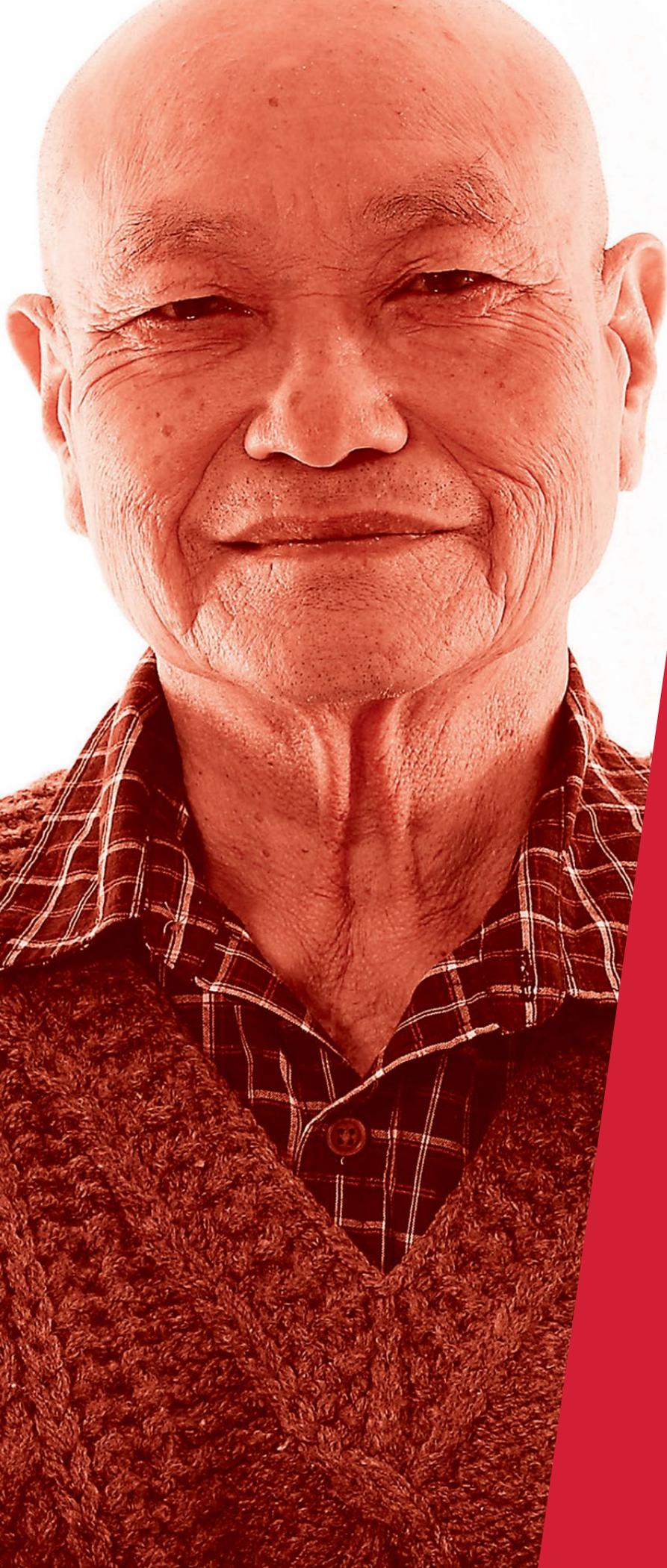
on the concerns regarding research on aging. It is now up to the Institute of Aging to carry out its strategic activities to meet the needs that have been expressed.

## **THE INSTITUTE WILL TAKE THE NECESSARY ACTIONS,**

including strategic support for the production of the necessary scientific knowledge.

## **THE INSTITUTE WILL ENSURE THAT THIS KNOWLEDGE**

is widely disseminated so that it results in best practices, optimal interventions, improved care and services, and respectful attitudes toward older people.



## Part IV: A Strategy Grounded in Reality

To implement the Institute of Aging's five-year strategic plan, its Advisory Board will adopt a yearly action plan. The actions defined in the action plans will enable the Institute to achieve the objectives of each of the two strategic directions (Priorities 1 to 4) and the implementation conditions (Priority 5), by seeking to have a real impact on the health and wellness of the aging Canadian population and the efficiency of its health systems. In addition, these actions will be planned in a spirit of convergence and synergy with the other CIHR Institutes and in support of the CIHR strategic plan. The Institute of Aging is therefore committed to acting to ground this strategy in reality.

### **ACTING IN PARTNERSHIP TO DEVELOP CONCRETE SOLUTIONS TO THE NEEDS EXPRESSED**

The Institute's actions will respond to the needs expressed by stakeholders, policy makers and the public. To ensure that the Institute's actions are as efficient as possible, the most pressing needs of society will be prioritized by the various stakeholders and partners while seeking to maximize impact on the health and wellness of the aging population and on the improvement of the health system. In addition, in advance of any research undertaking, the Institute will involve its knowledge-user partners so that the research findings result in social and commercial innovation. The Institute will enhance partnerships in its activities and programs, firstly with seniors themselves, but also with policy makers, whose contributions are indisputable. Lastly, the Institute will underscore the importance of preventive measures, on an equal footing with interventions, for older people's quality of life.

### **ACTING TO ENCOURAGE INTEGRATIVE RESEARCH**

Aging is the ultimate integrative research field. Probably more than any other research field, aging poses challenges and raises issues that require an integrative approach encompassing all aspects of the individual and society that affect health and wellness over the life course. The Institute's actions will partner with the other CIHR Institutes, paying particular attention to opportunities for convergence afforded by CIHR Signature Initiatives. In addition, the Institute will encourage the implementation of initiatives in partnership with other organizations in areas of priority and convergent interest.

### **ACTING TO DECOMPARTMENTALIZE RESEARCH**

Because research on aging is so closely related to research in other fields and has so many different dimensions, interdisciplinarity is a necessity. Moreover, given the importance of the biological, psychological, social and environmental dimensions in the study of aging, the need for a holistic approach is clear. The Institute is therefore committed to promoting a decompartmentalized approach to research on aging so that all stakeholders can contribute together, beyond the various traditional funding fields and sectors. Consequently, the Institute is committed to providing the necessary support to other sectors in response to the collective issues of older people's health and wellness, and to raise the awareness of all other research communities in this regard.

### **ACTING TO OPTIMIZE PAST INVESTMENTS**

The Institute will take steps to promote the optimal use of the investments that CIHR has already made. Foremost among these is the Canadian Longitudinal Study on Aging, which offers the entire research community, both in Canada and internationally, unique opportunities to help identify the health determinants of satisfying aging. The Institute will therefore take the lead role in planning and implementing actions that will potentially involve as many other institutes as possible.

## **ACTING RESPONSIBLY WITHIN CIHR**

Working together with the Institute of Neurosciences, Mental Health and Addiction, the Institute of Aging will continue to assume a scientific leadership role within CIHR for the Signature Initiative on Alzheimer's disease. The Institute will also continue to play its leadership role in the Canadian Longitudinal Study on Aging and will promote this unique platform to all communities. In short, the Institute will contribute responsibly within CIHR to help advance any major initiative in which the question of aging might be included.

## **ACTING WITH A GLOBAL PERSPECTIVE**

The Institute will take actions to promote the involvement and leadership of eminent Canadian researchers in major international initiatives in order to achieve real impacts more rapidly for the people of Canada. These actions will focus on the partnerships established with the European Union, China, and the US, but will also explore new, mutually advantageous international partnerships. These may include developing mutually beneficial research opportunities with emerging countries on issues related to aging.

## **ACTING TO ENHANCE THE EXCELLENCE OF CANADA'S CAPACITY FOR RESEARCH ON AGING**

The Institute will maintain the excellence of Canada's capacity for research on health and aging while taking the necessary steps to fill the gaps in accordance with identified needs. In all cases, excellence must remain the primary reason for the Institute's actions.

## **ACTING WITH RESPECT FOR DIVERSITY**

Research on aging must recognize and serve the diversity of Canada's aging society, including not only its cultural diversity but also the diversity reflected in the aging of new populations (such as people living with HIV/AIDS). The Institute will draw inspiration from the attitudes and respect toward elders that characterize Aboriginal cultures.

# A FIVE-YEAR ACTION PLAN TO ACHIEVE MAXIMUM IMPACT

A yearly revised action plan will be developed and will focus on:

- Aligning and leveraging on CIHR's Signature and Strategic Initiatives to benefit older adults, among which
  - the *Strategy for Patient-Oriented Research (SPOR)* for impactful interventions, seamless health systems, and adapted professional training;
  - the *Community-Based Primary Healthcare* strategy;
  - the *Personalized Medicine* strategy;
  - the *Inflammation in Chronic Disease* strategy; and
  - the *Pathways to Health Equity for Aboriginal Peoples* strategy.
- Making an optimal contribution to all initiatives in which the Institute plays a leading role among which the *Canadian Longitudinal Study on Aging*, as well as the *International Collaborative Research Strategy for Alzheimer's Disease*.
- Capitalizing on new opportunities that could emerge.
- Engaging and mobilizing partners and stakeholders around these actions.
- Incorporating CIHR's Performance and Outcome Measurement Framework into measuring outcomes and impacts of our actions.



Understanding  
today  
to prepare  
for tomorrow

## **THE FACE OF CANADIAN SOCIETY HAS ALREADY CHANGED.**

The 21st century will be characterized by active aging. That is why the health and wellness of older people are and must remain a priority.

Building on its past achievements, the Institute of Aging will continue to support and promote the excellence and relevance of research on health and aging in order to respond to expressed needs and to achieve tangible impacts. In both the areas of prevention and of care and services, the Institute will continue to support and assist research and the scientific community in the development of creative, effective solutions, emphasizing impacts that can have a positive influence on the life course and the trajectory of aging.

Through its vision, its values and its research priorities, the Institute will make a difference by ensuring that scientific knowledge is translated into innovations that enable policy makers to make informed decisions. Canadian society has everything to gain from this, from the youngest to the oldest along the life course trajectory.

# Living Longer, Living Better

Canadian Institutes  
of Health Research  
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2013–18 Strategic Plan

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