



FACT SHEET

End-of-Life Care: Local to Global Facts and Figures

Demand

Demand for Quality End-of-Life Care Grows in Ontario

- ✍ As Ontario's population ages, the need for quality end-of-life care escalates.
- ✍ Each year more than 248,000 Canadians dieⁱ, with an estimated 160,000 needing hospice palliative care services the Canadian Hospice Palliative Care Association projects.
- ✍ We estimate that each death will immediately affect another five people.
- ✍ If current trends continue, in 20 years, two Canadians will be diagnosed with cancer and one will die every five minutes.ⁱⁱ As the number of people with life-threatening illness continues to escalate, the number of people available to care for them continues to diminish.
- ✍ Hospice care provides much needed relief for informal caregivers, providing practical human comfort, emotional, psychological and spiritual support to patients and their loved ones – hospice integrates compassionate care in a variety of settings.
- ✍ The need for hospice volunteers continues to grow – currently 13,300 volunteers dedicate 630,000 hours of service each year in more than 450 communities throughout Ontario.
- ✍ Statistics Canada estimates one out of every two Canadians of working age will be caring for a loved one at home in the next generation.
- ✍ A recent Ipsos Reid study reported that Canadians estimate that 54 hours per week would be needed to take care of a dying loved one in their homes.ⁱⁱⁱ
- ✍ Eight in ten Canadians agree that people should start planning for end of life care when they are healthy.^{iv}

Demand for Quality End-of-Life Care Grows Globally

- ✍ Around the world, one million people die every week.^v
- ✍ It is estimated that 100 million people could benefit from basic palliative care, although the number of people that have access to it falls far below this level.^{vi}
- ✍ This number is made up of 33 million people dying and their 63 million family members, companions or caregivers.^{vii}



FACT SHEET

End-of-Life Care: Local to Global Facts and Figures

Access

Access to Hospice Palliative Care Services

- ✍ It is estimated that between five to 15% of Ontarians have access to hospice palliative care services.^{viii}
- ✍ On June 2, 2005, Senator Sharon Carstairs released “Still Not There: Quality End-of-Life Care: A Progress Report,” which also projected that only 15% of the population have access to palliative care currently and with an aging population, by 2020 we are expecting there will be 40% more deaths each year.
- ✍ A recent Ipsos Reid poll indicated that although Canadians may wish to die at home, 75% of deaths still take place in hospitals and long-term care homes.^{ix}
- ✍ 70% of informal caregivers acknowledge that providing care is stressful and 70% indicate that they need a break from this responsibility.^x Hospice palliative care provides that essential support.
- ✍ Ontarians living in remote and rural areas or those living with disabilities have severely limited access to hospice palliative care services.
- ✍ Adequate funding is an integral component in the provision of quality end-of-life care and the alleviation of the increased caregiver burden.

Provision of Essential Programs and Services

- ✍ Hospice care provides emotional, psychological, spiritual and practical human comfort to the patient living with a life-threatening illness and their loved ones. Hospice care also aims to provide much needed caregiver respite, emotional and bereavement support to families.
- ✍ Hospices provide an integrated continuum of care in homes, specialized community residential hospices, hospitals and long-term care homes across the province.
- ✍ Expert volunteers are the cornerstone of the compassionate care provided in local communities across Ontario.
- ✍ Community hospice programs and services may include the following elements of integrated compassionate care:
 - ? Emotional support – responding to the needs of the client/family
 - ? Practical physical care – providing human comfort
 - ? Respite care – providing a break for informal caregivers
 - ? Spiritual support – recognition for the search for spirituality
 - ? Bereavement support – support the family in dealing with death
 - ? Collaboration and communication with other health and social service agencies



FACT SHEET

End-of-Life Care: Local to Global Facts and Figures

Growth

Demonstrated Growth and Policy Development

- ✍ The Hospice Association of Ontario has witnessed more than 1,000% growth in membership over the past decade. Growing from nine hospices in 1989 to more than 180 hospice and allied member organizations, the escalation in membership reflects the growing demand for end-of-life care in communities across Ontario.
- ✍ The Ministry of Health and Long-Term Care has identified End-of-Life Care as a priority within the "Investing in our Community" Transformation Project.
 - ✍ In July 2004 the Ministry of Health and Long-Term Care invited HAO and other organizations with an interest in palliative care to discuss the development of a province-wide end-of-life strategy for Ontarians who wish to die at home. HAO Executive Director currently co-chairs the provincial end-of-life care advisory committee with the MOHLTC.
 - ✍ This strategy has seen the establishment of up to 16 networks throughout the Province that have been charged with developing integrated models of end-of-life care for their region.
 - ✍ In the October 2005, the Minister of Health announced a \$115 million, multi-year investment committed to enabling integrated, quality end-of-life care for Ontarians.
- ✍ Hospice volunteers have become the largest direct service providers within Ontario's voluntary health care sector reflecting the growing need for compassionate support in the home.
- ✍ In fact, 13,300 volunteers dedicate 630,000 volunteer service hours each year to assist clients and families throughout Ontario – these volunteer hours alone represent an investment of \$6 million in local communities.
- ✍ The Hospice Association of Ontario built a business case for residential hospices illustrating that over a five-year time frame, financially supporting a ten-bed community residential hospice versus supporting 10 acute care beds would result in a savings of \$8.6 million.
- ✍ The additional \$115 million MOHLTC contribution over three years, includes an unprecedented investment in Community Residential Hospices. The government will create a network of more than 34 Residential Hospices by 2008.
- ✍ Cancer Care Ontario announced palliative care as a priority in their 2005 Four-Point Strategy.
- ✍ January 2004 Human Resources Development Canada introduced the Compassionate Leave benefit which offers eight weeks leave (six paid) to eligible workers to care for gravely ill or dying parent, spouse or child.

- ✍ The final report of the “Commission on the Future of Health Care in Canada” recommends the commitment of \$89.3 million annually to the health care system to address hospice palliative care needs.

ⁱ Population Projections for Canada, Provinces and Territories – 2000 – 2026, Statistics Canada, Catalogue #91-520, p. 124

ⁱⁱ Campaign to Control Cancer, www.cancerforum.ca/eng/index.html

ⁱⁱⁱ Ipsos-Reid Survey. Hospice Palliative Care Study: Final Report, The GlaxoSmithKline Foundation and the Canadian Hospice Palliative Care Association, January 2004 p.30

^{iv} Ipsos-Reid Survey. Hospice Palliative Care Study: Final Report, The GlaxoSmithKline Foundation and the Canadian Hospice Palliative Care Association, January 2004, slide presentation

^v World Hospice Day 2006, Facts, www.worldday.org

^{vi} World Hospice Day 2006, Facts, www.worldday.org

^{vii} World Hospice Day 2006, Facts, www.worldday.org

^{viii} Website <http://www.parl.gc.ca/36/2/parlbus/commbus/senate/Com-e/upda-e/rep-e/repfinjun00-e.htm>

^{ix} Quality End-of-Life Care: The Right of Every Canadian, Subcommittee to update “Of Life and Death” of the Standing Senate Committee on Social Affairs, Science and Technology, Final Report, June 2000

^x Website: http://www.hc-sc.gc.ca/hcs-sss/pubs/care-soins/2002-caregiv-interven/sum-som_e.html