

Living environments for seniors
experiencing a loss of independence
English summary

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SUMMARY

Living environments for seniors experiencing a loss of independence

Introduction

A considerable increase in the proportion of Québec's senior population is expected by 2031. Senior population growth is generally associated with increasing needs in terms of suitable living environments. Most seniors want to age in the living environment of their choice. However, several studies indicate that the current options of living environments for seniors do not meet all their needs. In particular, housing accessibility issues have been identified, especially for those with a moderate to severe loss of independence.

The desire to meet these needs while ensuring continuity of care and services, equitable access, quality of life, and the efficient management of public resources call for a review of the current options of living environments for seniors experiencing a loss of independence.

Methodology

This state-of-knowledge report was prepared by incorporating data from a review of scientific and gray literature and from stakeholder consultations to address the following questions:

- 1) What types of living environments are available for seniors experiencing a loss of independence, both in Québec and in the other Canadian provinces, as well as abroad?
- 2) For each living environment, what are the main characteristics, the benefits, the drawbacks, and the challenges associated with their implementation, based on seniors' independence profiles, taking populational, clinical, organizational, sociocultural and economic factors into account?

Results and findings

Characteristics of seniors and housing rates

In 2025, the proportion of seniors aged 65 and over stood at 22% of Québec's total population. Across Canada and in several other OECD (Organization for Economic Cooperation and Development) countries, similar proportions, ranging from 18% to 22% of the general population, are observed. In Québec, 2% of the entire senior population have a severe loss of independence. In Canada and in certain comparable OECD countries, the figure is around 3%. Among seniors residing in long-term care facilities, the proportion of those with a moderate or severe loss of independence is higher. For example, 78% of the new admissions to residential and long-term care centres (CHSLDs) in Québec in 2022–2023 involved a moderate to severe loss of independence.

The vast majority of Québec seniors – 91% – live in private homes, while the rest live in community settings. This proportion is higher than that observed for all of Canada, mainly because of greater use of private senior residences in Québec.

The proportion of seniors in long-term care centres and the number of available beds per 1000 residents aged 65 and over vary fairly between Québec, Canada and the other the OECD countries, depending on the care delivery models and on how living environments are organized. In Québec, the long-term care bed rate is 24 per 1000, while for all of Canada, it is 29 per 1000 when considering only long-term care homes that offer 24-hour nursing care and have beds funded or subsidized by the public sector. In an international analysis that considers other types of residential care settings as well (e.g., group homes for people living with a disability or an addiction), the rate in Canada is 47 beds per 1000 seniors. Some countries have higher rates, such as the Netherlands (73 per 1000), Sweden (65 per 1000) and Belgium (65 per 1000), while others are more comparable, such as the United States (29 per 1000) and France (46 per 1000). However, these differences should be interpreted with caution, as they reflect, among other things, differences in the types of living environments considered, the breakdown between the public and private sectors, the overall offer of care and services for seniors, and the data collection methods.

Description of living environments

Several types of living environments for seniors were identified in the literature. They are grouped into four categories situated on a residential continuum: 1) non-care living environments, 2) living environments with occasional care, 3) long-term care facilities, and 4) living environments with evolving care and services. This state-of-knowledge report provides a synthesis of the characteristics, implementation considerations, as well as strengths and limitations for each type of environment.

Integrating the data from the scientific and gray literature, and from the consultations led to the following findings:

- **Few of the settings identified provide continuity of care and services that would enable seniors experiencing a loss of independence to remain in the same living environment as their needs change.**

In fact, most of the environments identified are tailored to the needs associated with specific levels of loss of independence (e.g., mild to moderate or moderate to severe), which is likely to result in a transition when those needs change.

- **Settings offering evolving care and services appear to be best suited to meet needs while minimizing transitions and promoting organizational and relational continuity.**

These settings offer a full range of care and services at a single location. They make it possible to meet the needs of both independent seniors and those with a mild to severe loss of independence, and to reduce the number of moves or limit them to a single geographic location.

- **As an alternative to living environments with evolving care and services, the integration of care and services and the geographical proximity between different living environments could help reduce transitions and promote continuity of care and services and enable seniors to remain in the same community.**

Partnerships between private seniors' residences (RPAs) at different levels or the grouping of multiple settings offering different levels of care, such as an RPA and an intermediate resource in the same building or geographic area, could further promote continuity of care and services and bring us closer to the concept of living environments with evolving care and services.

- **A diverse range of living environments appears to be key to meeting seniors' needs and preferences.**

With the goal of providing a diverse range of housing options, various living environments could help meet seniors' needs in terms of both independence and quality of life.

Non-care living environments offer options for seniors who are independent or who experience a mild to moderate loss of independence. Living environments with occasional care constitute an attractive residential option for seniors with a moderate to severe loss of independence. Long-term care facilities, meanwhile, are essential for seniors with a severe loss of independence. Some of these long-term care facilities are innovative settings characterized by a cultural change.

In addition, most seniors want to stay in their own homes for as long as possible or live in settings with a similar atmosphere. Several of the living environments identified align with this preference, e.g., natural occurring retirement communities (NORCs), villages, cooperative housing, small private seniors' residences, intermediate and family-type resources (RI-RTFs), and small-scale long-term care settings.

- **All of these environments present challenges that may limit their implementation, sustainability and accessibility.**

Coordination, particularly with home support services and other community partners, can be complex. Even within the same type of setting, the range of care and services offered can vary. This heterogeneity is particularly evident in settings providing high levels of care and is likely to affect the continuity of trajectories. Staff shortages also affect the continuity of care and services, as well as accessibility. Lastly, issues related to costs, for both the user and the health care system, and to funding can limit the sustainability of the living environments and access to them, particularly for people from disadvantaged socioeconomic backgrounds.

- **The data highlight the importance of home care, informal support provided by family caregivers or obtained through community, and of different technologies in most of the living environments identified.**

These forms of support could serve as potential solutions to explore in order to better meet the needs of seniors in different living environments.

Conclusion

This report has documented a variety of living environments for seniors experiencing a loss of independence, and it reminds us that meeting their needs goes beyond this single framework and is part of a complex reality of the insurance of the provision, coordination and continuity of care and services. Meeting seniors' needs also depends on multidimensional issues involving various stakeholders, this within the broader context of public policies related to aging. The findings from the literature should be interpreted with nuance, given the diversity that exists, particularly among government agencies. This report therefore contributes to the discussion on providing living environments tailored to the needs of Québec seniors.

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