SENIORS FOR SOCIAL ACTION ONTARIO

UPDATE TO DISTRIBUTION LIST

SUBMISSION TO THE ONTARIO HUMAN RIGHTS COMMISSION

March 30, 2021

This is to advise our distribution list that yesterday Seniors For Social Action Ontario submitted a request to the Ontario Human Rights Commission for a Section 31 Inquiry into the unnecessary and unjustifiable institutionalization of thousands of older and disabled adults in this province, their exploitation for the profit and enrichment of individuals and multi-national corporations, and the failure of the Ontario government to institute effective oversight of this sector or to enforce its own legislation. Section 31 of the Ontario Human Rights Code states:

“31 (1) The Commission may conduct an inquiry under this section for the purpose of carrying out its functions under this Act if the Commission believes it is in the public interest to do so. 2006, c. 30, s. 4.”

We believe that an inquiry is in the public interest.

There were 84 co-signatories to this submission from across the province.

Our submission includes the following points:

- The forced and unjustifiable institutionalization of older and disabled adults, by its nature, has placed residents at increased risk - not only of infection and death, but also of maltreatment and harm. Long term care facilities have been shown, over a period of decades, to have failed to provide safe or adequate care, or to meet legislated requirements;
- No other group besides prisoners continues to be subjected to this level of institutionalization, but frail older adults have committed no crime except that of becoming old and requiring assistance;
- The voices of older adults saying they do not want to be institutionalized have been drowned out by louder voices representing vested interests in this sector wishing to maintain the institutions, and simply throw more funding at them. We assert that ignoring elders’ voices and/or believing that others know better than those directly affected is, in itself, patronizing and a form of ageism;
- History has shown that government-operated facilities (Schedule 1 and 2 that were non-profit) with full-time staff earning government wages, are proof that it was institutionalization itself that resulted in the maltreatment and suffering of thousands of individuals with developmental disabilities. The same is true of psychiatric survivors and individuals with physical disabilities. This resulted in closure of most of these institutions for every other age group because of the recognition that they were no place to house vulnerable people and that they deserved to receive services in the least restrictive alternative. The harm done to residents of those institutions resulted in a public apology by the Premier of Ontario after survivors launched a class action lawsuit;
• Many other groups have historically been subjected to labeling, medicalization, segregation, and institutionalization similar to what is happening to older adults today and this treatment is discriminatory;

• Women are at special risk of battering and rape in LTCF’s and crimes against older adults are seldom investigated by police or the perpetrators charged. This ageist approach to policing has resulted in differential treatment of residents. Allowing attacks on elders with little to no police response is discrimination, and a human rights issue;

• SSAO’s members represent “living history” since many of us were there to rescue over 500 starving children with developmental disabilities from “nursing homes” in the 1980’s; advocate for, and get a Residents’ Bill of Rights and mandatory reporting of abuse and neglect as well as many other reforms in the Act; and to assist in the de-institutionalization of thousands of individuals with highly complex needs to the community, where many still flourish today;

• Ageism has had a direct and broad impact on the policies of the Ontario government and on the attitudes of professionals in the field, as well as the larger society. This has resulted in a kind of tunnel vision where the belief is that all that is required is to improve the institutions, rather than downsize and eliminate them, as has been done for other age groups, and in more progressive jurisdictions;

• This has created a socially constructed barrier to older adults’ continued ability to be included in their communities, to receive services in their own homes or community residences, and has resulted in their exclusion and segregation in institutions. The imbalance in funding for institutions versus community care causes people to follow the money rather than money being tied to the needs of the people;

• Forcible confinement of older adults during the pandemic and during other infectious disease outbreaks in these facilities, separating them from their social support systems, constitutes a violation of their human and Constitutional rights;

• Allowing the exploitation of older adults for profit in the absence of any other available alternatives for them – alternatives afforded every other age group, constitutes differential treatment, and is a violation of their human rights;

• Failure to provide adequate medical and nursing care afforded everyone else in society, including transport to hospital for life-saving treatment, constitutes differential treatment, and is a violation of their human rights;

• The undue and long-time influence of individuals from the corporate sector on long term care policies, and the absence of representation of older adults and their advocates on government planning and policy bodies that decide on matters that directly affect them, constitutes discriminatory treatment.

This submission documents the widespread differential and discriminatory treatment of older adults in the broader society, especially their exclusion and segregation in what amount to human warehouses. SSAO believes that it is long overdue that the Ontario Human Rights Commission takes a position on this widespread, systemic ageism, and that it assists in recommending necessary changes to long term care priorities, policies, and programs.