



**Centre de recherche
sur le vieillissement**



**Université de
Sherbrooke**

Understanding Advanced Age

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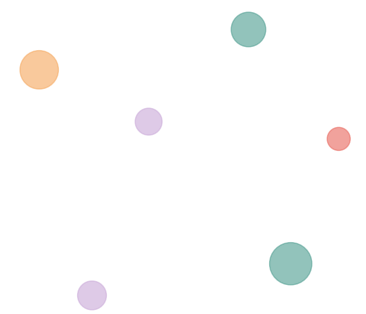
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PRESENTATION OUTLINE



1. Why focus on advanced old age?
 2. Portrait of older adults in advanced old age
 3. Issues and action pathways
 4. Global strategies and conclusion
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1 — WHY FOCUS ON ADVANCED OLD AGE?



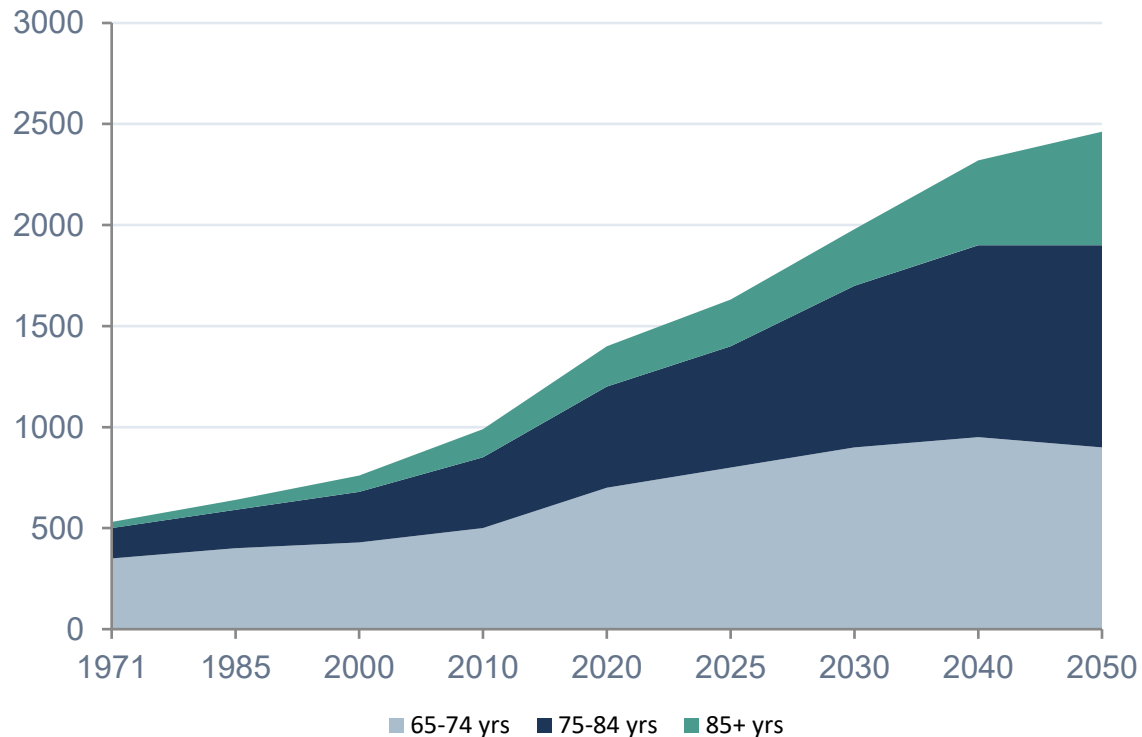
PEOPLE AGED 85+ IN QUÉBEC

85+: **11.7%** of older adults
in Québec in 2025
(230,859)

Women: 63.5%
Men: 36.5%

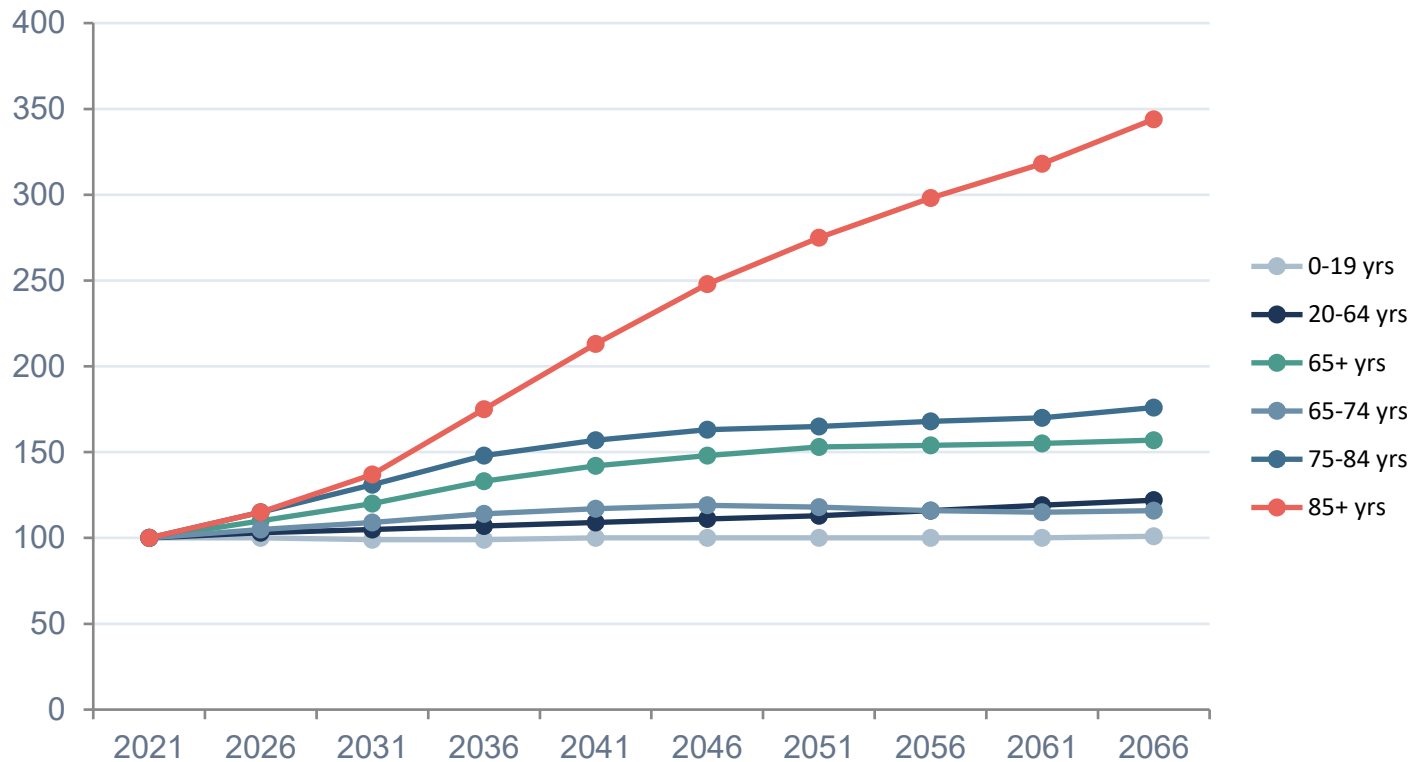
85+: **23%** of older adults
in Québec in 2050
(562,440)

Observed and projected senior population by age group, Québec, 1971–2071



PEOPLE AGED 85+ IN QUÉBEC

Relative population growth by age group, Québec, 2021–2066 (Base 100 = 2021)



85+: 244%

75-84: 76%

INCREASING LIFE EXPECTANCY

Women: 84.4 yrs
Men: 80.9 yrs
(ISQ, 2025)

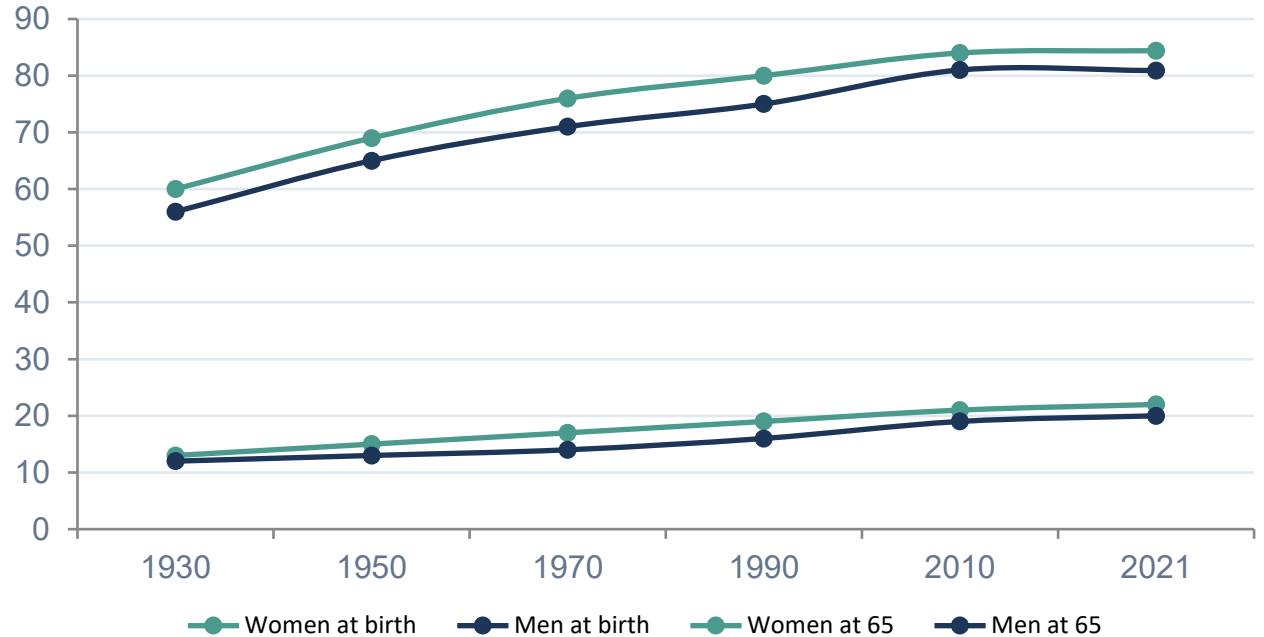
% of 85+ who are women:

2021: 64%

2041: 57%

2061: 54%

Life expectancy at birth and at age 65 by sex, Québec, 1930–2021

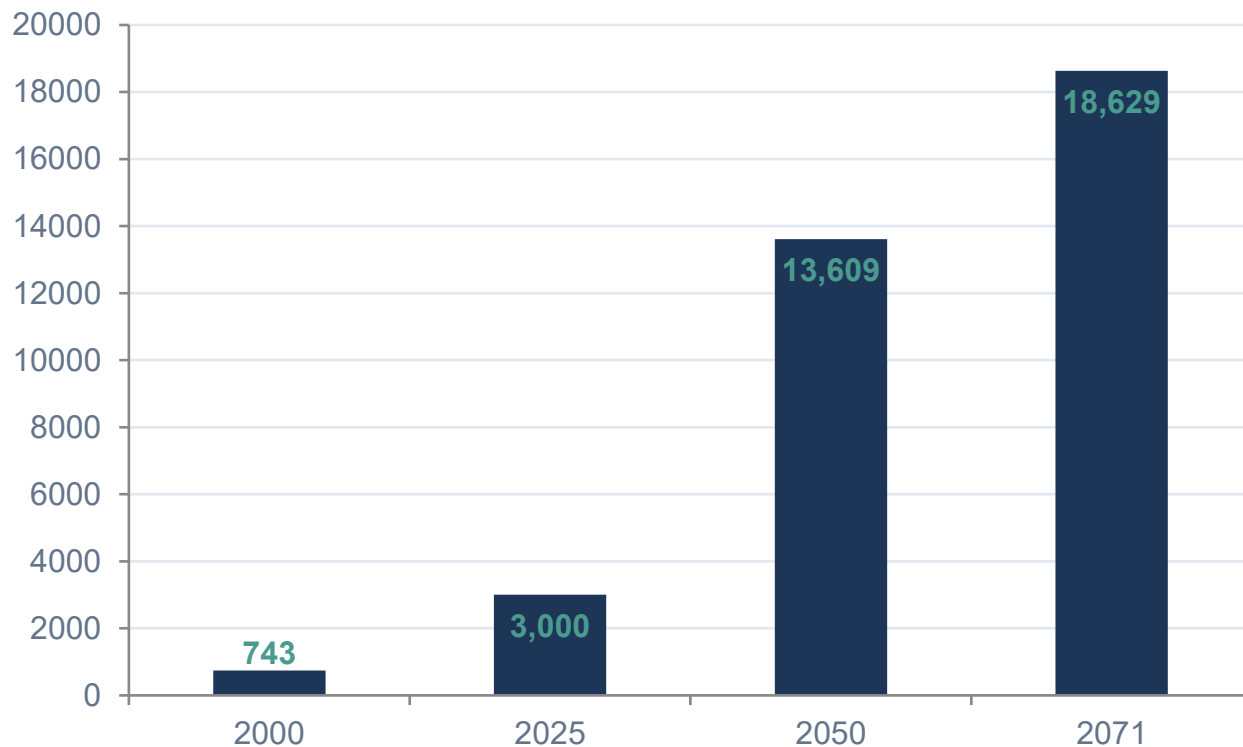


RISING NUMBER OF CENTENARIANS

4× more
centenarians in 2025
than in 2000

4.5× more
centenarians
expected in
next 25 years

Observed and projected population aged 100+, Québec, 2000–2071



ADVANCED OLD AGE: A GROUP TO BETTER UNDERSTAND

1. A tendency to perceive older adults as a homogeneous group and to hold a stereotyped vision of advanced old age.
2. A lack of data on people over 85:
 - a) Often included in broader age categories (65+, 75+)
3. Frailties and needs increase with age, but there is little written about the capacities at advanced old age.

TOWARD A MORE POSITIVE VISION OF ADVANCED OLD AGE

Disability Rates by Age, Québec, 2010–2011

Deficit-focused Reading	Strengths-focused Reading
Memory (27%)	Memory (73%)
Hearing (40%)	Hearing (60%)
Mobility (65%)	Mobility (35%)
Vision (22%)	Vision (78%)
Dexterity (62%)	Dexterity (38%)
Speech (7%)	Speech (93%)



2 — PORTRAIT OF ADVANCED OLD AGE



HOUSING

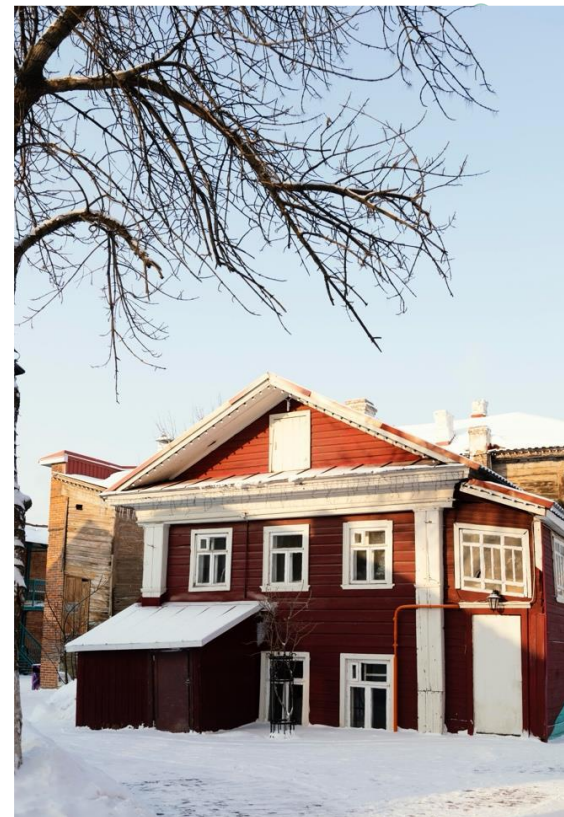
In Québec, 91% of people aged 65+ live at home, in their community (ISQ, 2021)

People aged 85+ primarily live:

- In private households (62%)
In houses (29%) or apartments (33%)
In urban (50%) or rural (12%)
- In urban settings (82%)

Due to their longer life expectancy, women aged 85+ are more likely to have to move to access care:

42% live in collective housing (vs. 29% of men)
(ISQ 2023)



HEALTH STATUS

People aged 85+ are more likely to have chronic health conditions.

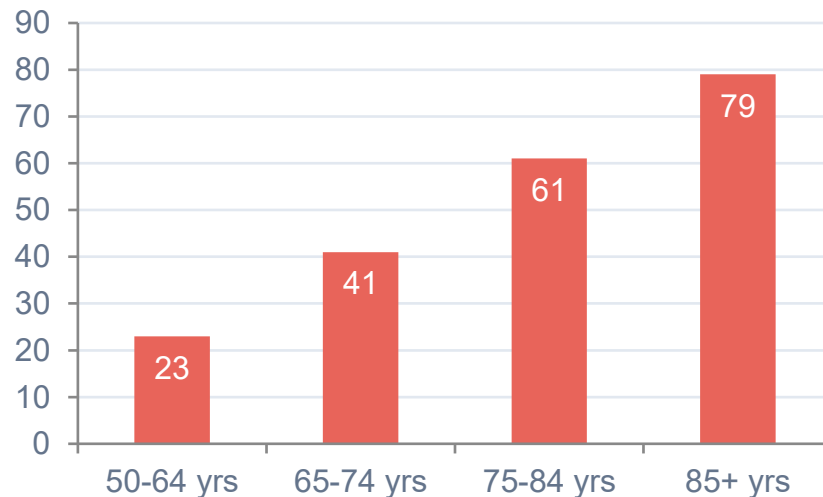
On average:

- 79% of 85+ have multimorbidity (MSSS, 2024).
- 33% of people 80+ live with Alzheimer's disease or a neurocognitive disorder (MSSS, 2025).

People aged 85+ face an elevated risk of hospitalization and mortality from falls (INSPQ, 2025).

The majority of 85+ rate their health as good (42.4%), very good or excellent (24.7%) (ISQ, 2023)

% with multimorbidity* by age group (2021-2022)



MOBILITY & TRANSPORTATION

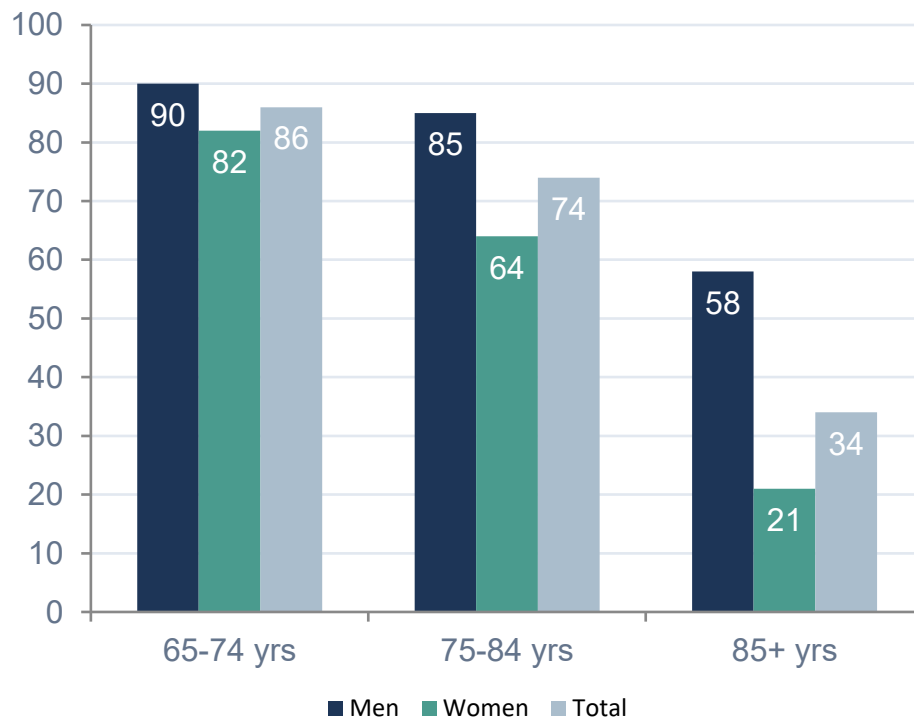
The proportion of older adults **holding a driver's licence** decreases with age.

34% of persons aged 85+ hold a driver's licence.

Women aged 85+ must rely more heavily on **transportation services or family** for their mobility.

A transition that would benefit from **earlier planning.**

% of seniors holding a driver's licence by sex and age, Québec, 2022



INCOME

Median Income – 75+ years

	Men	Women
75+	\$32,200	\$27,900

Living in unaffordable housing

	Total	Owners	Renters
85+	30%	12%	50%

Living in unaffordable housing

	Men	Women
85+	19%	30%

Growing vulnerability among some social groups forced to dedicate a large portion of their income to housing.

A household is considered to be in unaffordable housing if 30% or more of its total average income is spent on housing costs (ISQ, 2023).

SOCIAL NETWORK

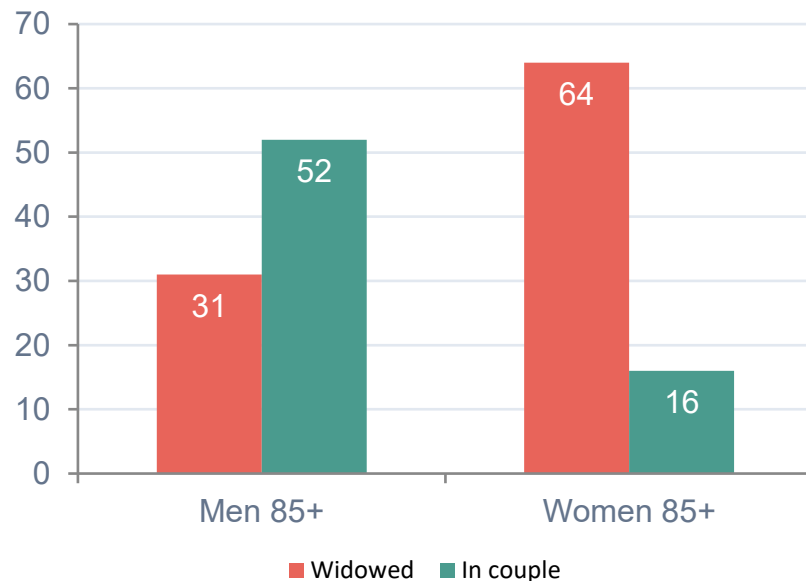
The majority of people aged 85+ are widowed (52.2%) or in a couple (29%).

Due to their longer life expectancy, women aged 85+ are more often widowed (64% of women vs. 31% of men)

Men aged 85+ are more often in a couple (52% of men vs. 16% of women)

People aged 85+ are at risk of seeing their social networks shrink as they age (e.g. death of spouse, siblings, friends) (ISQ 2023)

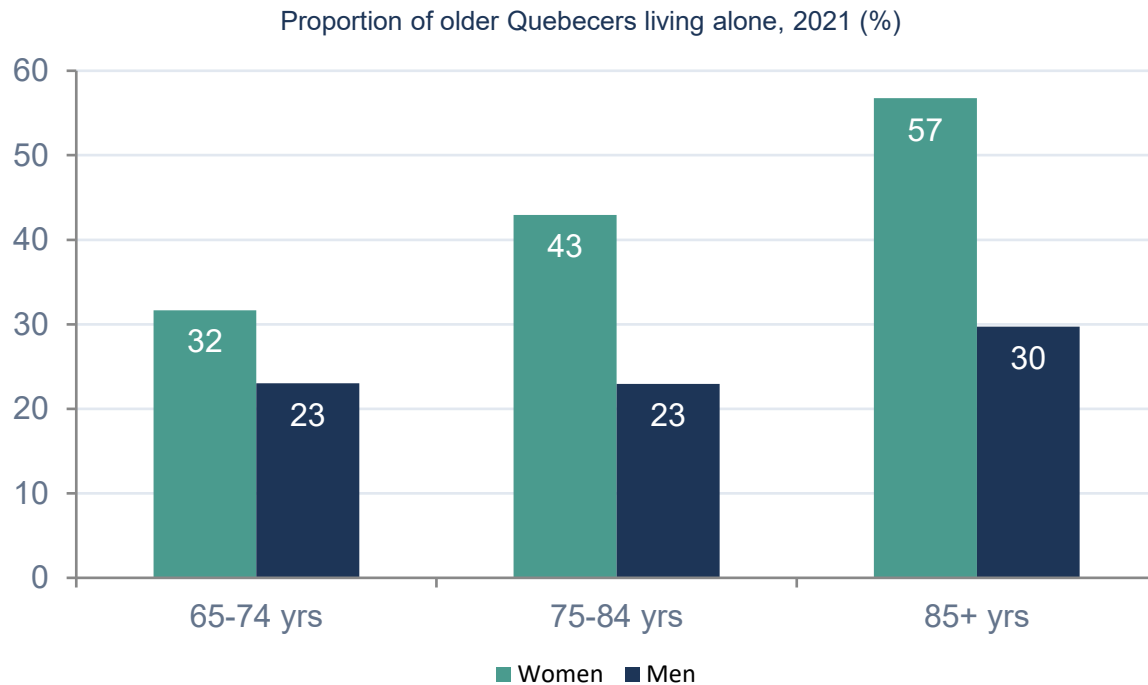
Marital status of 85+ by gender (%)



SOCIAL NETWORK – LIVING ALONE

The majority of older adults aged 85+ live alone

Living alone in private household	
85+	
Total	28.7%
Women	32.8%
Men	21.1%



SOCIAL NETWORK – SUPPORT SYSTEMS

Needs are substantial and support largely depends on informal networks:

Informal Network

Family, friends
Neighbours
Local merchants

Formal Network

Health & social services
Community organizations
Municipal services

Received help for daily activities (housekeeping, meals, medication, errands) due to a health issue

	Total	From family/friend	From health professional
65+	83.1%	74.3%	31.2%

ACTIVITIES & LEISURE

↑ Increase in passive leisure with age

Among 75+:

- 4.3 hrs/day watching TV or videos
 - 2.0 hrs/day reading, radio or music
- (Statistics Canada, 2022)

Physical activity level (leisure & transport)

85+

Sedentary (52.0%) or slightly active (24.2%)	76.2%
Active (18.2%) or moderately active (5.6%)	23.8%

Online Communications

	65+	85+
Sent and received emails	84.8%	83.1%
Made voice or video calls online	49.3%	45.3%
Used social media	50.8%	40.5%



3 — ISSUES AND ACTION PATHWAYS



1. HOUSING & LIVING ENVIRONMENT – KEY ISSUES

The importance of 'home'

Daily life becomes increasingly home-centred with age

A desire to stay in one's community

Stronger attachment to one's living environment the longer one ages in place
Importance of proximity networks at advanced old age

Declining autonomy

Difficulty performing daily tasks
Greater reliance on social network
Possible risk-taking

69.9% of 75+ older adults living in the community report a strong or very strong sense of belonging to their community (ISQ, 2023).

Most serious falls among 65+ occur:

- In or around the home (62%)
 - In a public place (16%)
 - Outdoors (13.3%)
- (Camirand et al. 2023)

1. HOUSING & LIVING ENVIRONMENT – KEY ISSUES (CONT'D)

Greater need for support

Need to adapt the home (e.g. grab bars)

Need for home support services (maintenance, minor repairs, meals, health care, etc.)

Challenges related to the living environment

Lack of nearby services

Distance from family and friends

**When needs and challenges become too great,
relocation should be considered.**



1. HOUSING & LIVING ENVIRONMENT

Relocation that needs to be anticipated

- Possible effects on physical and psychological health, especially at advanced old age.
- Decision-making that is anticipated, informed, and controlled by the older adult facilitates adaptation to a new living environment.

Lack of alternatives in some areas

- Shortage of small, affordable private seniors' residences (RPAs)
- High costs for large RPAs in urban areas
- Alternative housing options (housing co-ops, non-profit housing) are rare in many regions.



1. HOUSING & LIVING ENVIRONMENT – ACTION PATHWAYS

Support home-based living

- Develop minor home repair services
- Ensure meal delivery services (and other deliveries) across all territories
- Partner with community organizations to support aging in place

Promote mutual aid and proximity networks

- Service exchange initiatives (e.g. Accorderies)
- Building neighbourhood connections (e.g. Voisins solidaires approach)
- Support family caregivers (e.g. promote Info-aidant service from L'Appui)

1. HOUSING & LIVING ENVIRONMENT – ACTION PATHWAYS (CONT'D)

Anticipate & support relocation decisions

- EMilia Tool: For older adults and their families — to reflect on and make informed decisions about living arrangements based on individual preferences and needs as they age.
- Website: www.outilemilia.ca

Consider diversified housing models

- Municipal regulations to facilitate intergenerational housing or accessory dwelling units
- Collaborate with non-profit (OSBL-H) and co-op housing (COOP-H) organizations to support their development
- Website: <https://munitoit.org/>

2. SOCIAL ISOLATION & SOCIAL CONNECTION – KEY ISSUES

Risk of isolation and loneliness increases for people aged 85+:

- A social world that tends to shrink
- Many live alone
- Sedentary (52%) or minimally active (24%)
- Spend much of their time at home
- Limited digital use

Certain groups are particularly at risk:

- Women who age longer (and more alone)
- Those with multiple vulnerability factors

Importance of 'weak ties'

As people age, neighbourhood connections — shop owners, passing acquaintances, postal workers — become increasingly important as part of their social fabric.

2. SOCIAL ISOLATION & SOCIAL CONNECTION – ACTION PATHWAYS

Identify older adults (proactive approaches)

- Mapping and profiling seniors in the community
- ITMAV Program, social geriatrics sentinel training (merchants, volunteers, etc.)

Reach people in advanced old age

- Printed newsletters, radio or TV segments, referrals
- Learn about accessibility standards (readability, plain language, etc.)

Encourage the development of proximity connections

- Friendship calls offered by volunteers
- Voisins solidaires (Supportive Neighbours) approach
- Intergenerational activities

2. SOCIAL ISOLATION & SOCIAL CONNECTION – ACTION PATHWAYS (CONT'D)

Adapt leisure activities for 85+

- Activity selection (gentler/shorter activities, physical, artistic, intergenerational)
- Activity logistics (transportation, accompaniment, reduced activity time, breaks, lighter equipment, assistive devices)

Provide socialization spaces

- Varied, close to home (parks, libraries, community centres, shops)
- Accessible and adapted (step-free access, shaded areas, restrooms nearby, benches)

3. MOBILITY & TRANSPORTATION – KEY ISSUES

Declining mobility with age

- Walking and balance difficulties
- Use of mobility aids
- Loss of driver's licence

Environmental barriers to mobility

- Infrastructure issues (sidewalks, benches)
- Heightened risks in winter
- Public transit is not always manageable

Lack of transport alternatives

- Few collective transport options in some areas
- Shortage of volunteers
- Services and infrastructure insufficiently adapted (access, schedules, costs, accompaniment, destinations)



3. MOBILITY & TRANSPORTATION – ACTION PATHWAYS

Facilitate short-distance travel

- Encourage seating in shops
- Install benches at regular intervals
- Adapt pedestrian crossings
- Improve sidewalk conditions and snow removal
- Create obstacle-free routes for motorized mobility aids

Prioritize door-to-door transportation

- Accompanied or shared transport for 85+
- Prioritize flexible schedules
- Expand destination options (e.g. social activities)

4. HEIGHTENED VULNERABILITIES – KEY ISSUES

- People in advanced old age may accumulate inequalities, particularly those with multiple vulnerability factors (e.g. living alone, low income, low literacy, mobility challenges, etc.)
- Certain contexts place people 85+ at greater risk of seeing these vulnerabilities worsen (e.g. climate change, aging in rural areas, digital transition, ageism)
- They may be reluctant to ask for help or may not know where to turn.



4 — GLOBAL STRATEGIES



GLOBAL STRATEGIES

1. Better understand people 85+ and their specific needs

Document them more thoroughly
Work with the stakeholders and partners who know them

2. Integrate their needs into MADA processes

Consult older adults aged 85+ (provide accessible spaces for expression), prioritize actions

3. Meet their specific needs

Adapt existing projects to be more inclusive
Develop projects specifically to address these needs
Work in partnership to achieve this

4. Anticipate the challenges of advanced old age

Issues: Housing, isolation, transportation
Contexts: Climate change, rural environments, ageism

CONCLUSION

Much research remains to be done to fully understand the specific realities and needs of older adults in advanced old age who are aging at home.

Particular attention must be paid to people in advanced old age, particularly:

- Women who age longer and more alone
- Those with multiple vulnerability factors
- To distinguish their needs in rural versus urban settings

Adapt services to make older adults in advanced old age more visible

An opportunity for MADA municipalities to innovate!



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Thank you!

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