

UNDERSTANDING THE HEALTH OF SENIORS IN YORK REGION

HEALTHY AGING IN OUR COMMUNITY
2026



Understanding the Health of Seniors in York Region: Healthy Aging in Our Community

Why This Story Matters

The health of older adults is an important health priority in York Region. The population in York Region is aging and becoming increasingly diverse. As people age, they face unique health challenges, such as chronic diseases, risk of falls and injuries, mental health needs, and staying socially connected. These issues affect not only individuals but also communities at large.

This report looks at the health of York Region residents aged 65 and above (hereafter referred to as “older adults” or “seniors”), by summarizing key health trends, contributing factors, challenges, and opportunities. It provides decision-makers with evidence-based insights to inform planning and actions in areas such as housing, built environment, health care, home care, social services, and others. By examining the intersections of social determinants of health, health behaviours, and health outcomes, this report builds a clearer understanding of how to promote healthy aging and improve quality of life for older adults across the Region.

Key Messages

- **Population:** York Region is experiencing rapid population aging—with the number of older adults set to more than double by 2051, driven especially by sharp growth among those aged 75 and older. While residents have a longer life expectancy than the provincial average, longer life does not necessarily mean better health, underscoring the need for a life-course approach to prevention and healthy aging.
- **Diseases & injuries:** Diseases and injuries place a growing burden on York Region’s older adults and health system, with falls driving the majority of emergency department visits, cardiovascular disease accounting for the largest share of hospitalizations, respiratory illnesses—especially in congregate living

settings—causing often preventable outbreaks, and cancer remaining the leading cause of death.

- **Mental health:** While most older adults in York Region report strong social support and sense of belonging, self-rated mental health has declined slightly. Alcohol-related harms continue to pose risks. Mental health promotion remains important, and additional data can help paint a fuller picture.
- **Oral health:** Access to dental care remains a significant barrier for many. Oral health inequities are most severe among older adults living with low income and those who are uninsured.
- **Lifestyle factors:** Although older adults in York Region generally report healthier behaviours than the average Ontario population, there remains room for improvement in areas such as healthy eating and physical activity. Lifestyle factors are shaped by social determinants of health, which must be addressed to improve overall health and reduce health inequities.
- **Housing & age-friendly communities:** Most older adults want to stay in their own homes as they age, but housing costs, especially among renters, pose growing challenges to health and equity as the population ages. Affordable and accessible homes along with age-friendly communities allow people to optimize independence, well-being, and social connection.
- **Income:** While Old Age Security increases have helped to reduce low income rates among older adults, many still struggle to meet basic needs. Many older adults still face financial strain, rising food insecurity, and limited resources to meet basic needs, underscoring the importance of continued policy and community actions to support healthy aging and reduce income-related inequities.
- **Care for older adults:** Due to an aging population, caregiving needs continue to increase, resulting in projected long-term care gaps and growing reliance on informal caregivers. Caregivers may face health and financial challenges, and many are older adults themselves. There is a growing need for expanded formal care capacity and stronger caregiver supports.
- **Climate-related health risks:** Older adults are at higher risk of experiencing climate-related health outcomes from extreme heat and vector-borne diseases, highlighting the importance of supports tailored to this age group.

The definition of older adulthood varies across contexts. For the purposes of this report, the terms *older adults* and *seniors* refer to people aged 65 years and older. These individuals have diverse circumstances, abilities, and health needs.¹

A Growing Population with Growing Needs

By 2051, the number of seniors in York Region is expected to more than double, resulting in nearly one in four (23%) residents being over the age of 65. The most significant growth is expected among those aged 75 and older, whose population is expected to triple over the next 30 years.^{2,3}

Figure 1: Population growth

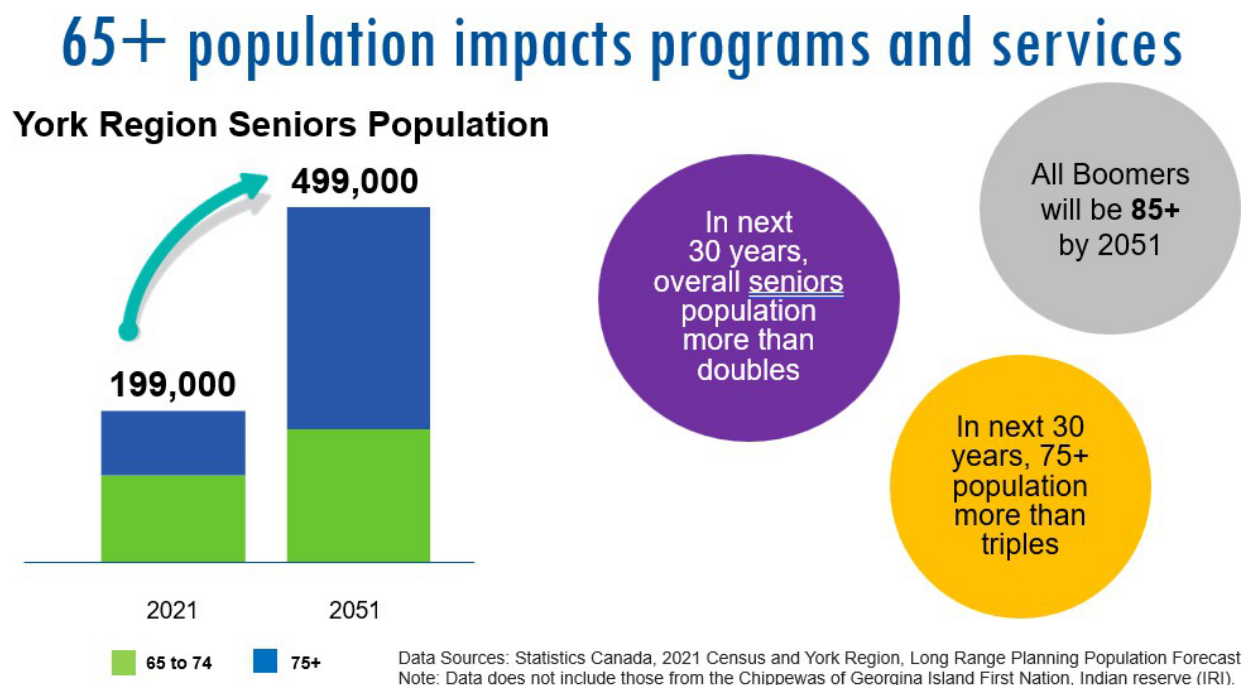


Image source: York Region Plan to Support Seniors Presentation to the YRAAC, Nov. 26 2025. Available from: <https://yorkpublishing.escribemeetings.com/filestream.ashx?DocumentId=48308>

Life expectancy has increased over time because of advances in medicine and socioeconomic conditions such as income, education and living conditions. In York Region, people live an average of 85.7 years, which is three years higher than the provincial average of 82.6 years. However, living longer does not always mean living in good health. In 2023, 73% of people aged 65 and above rated their health as good, very good or excellent.⁴ While this figure has stayed fairly steady over time, it is lower than that of other age groups. This is expected, as quality of life tends to decline with older age.

Health in older age is shaped by experiences and opportunities across the lifespan, from early childhood to mid-life and beyond. Building capacity at every stage of life

contributes to better health in older age. Early life interventions that prevent illness and promote well-being play an important role in helping older adults stay healthy and live well longer.

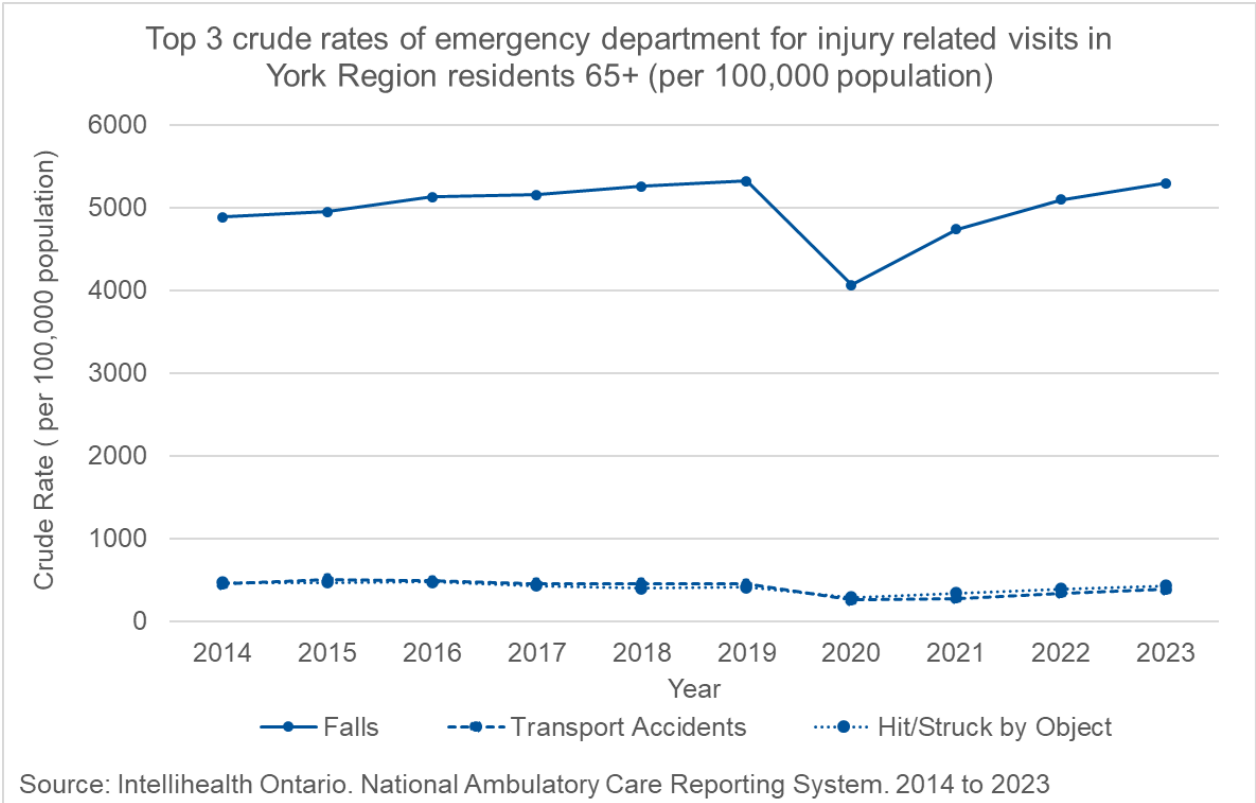
Diseases and Injuries

Diseases and injuries are major health issues for older adults in York Region and have significant impacts on health-related planning. Among older adults in York Region, the biggest health concerns are:

1. **Fall-related injuries**, which make up the highest number of emergency department (ED) visits
2. **Cardiovascular diseases**, which account for the largest proportion of hospitalizations
3. **Respiratory diseases**, including Chronic Obstructive Pulmonary Disease (COPD) and vaccine-preventable illnesses such as influenza and Respiratory Syncytial Virus (RSV), and
4. **Cancer**, as the top cause of death

ED visit and hospitalization rates increase sharply as people age. This creates challenges not only for older adults themselves but also for the health system that supports them. **As older adults age, the rate of fall-related ED visits increases significantly.** In 2023, there were 5,298 fall-related ED visits for every 100,000 York Region residents aged 65 and older. This rate has experienced little change since 2014 and is similar to the trend across Ontario. There was a noticeable drop in visits during 2020; however, this was largely due to changes in how people sought medical care during the COVID-19 pandemic, rather than an actual decrease in fall-related injuries.⁵ Fall-related ED visits drastically exceed visits for other common injuries experienced by older adults (Figure 2). The rate of fall-related ED visits among people aged 75 years and older was three times higher than that of the overall population.⁵

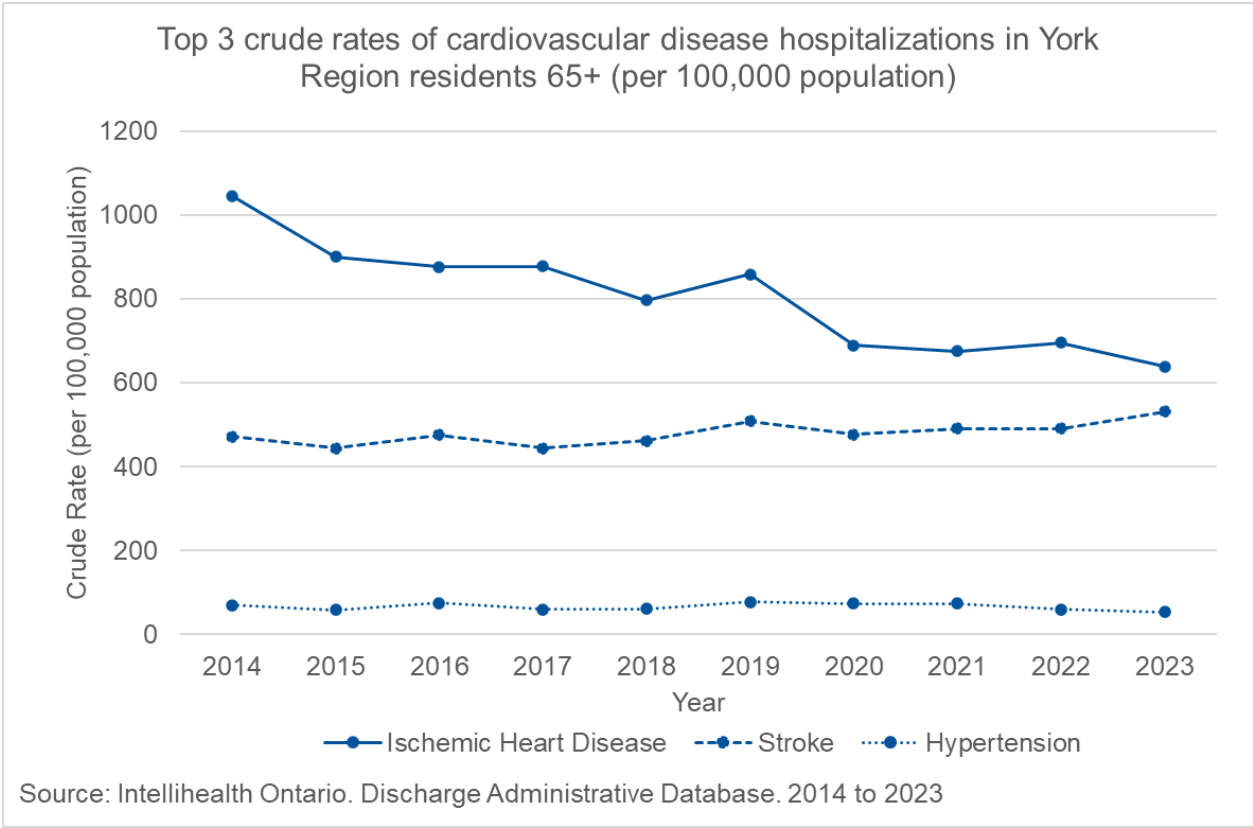
Figure 2: Top 3 rates of emergency department injury visits^{5,6}



Cardiovascular diseases account for the largest proportion of hospitalizations.

Cardiovascular diseases include conditions such as ischemic heart disease and stroke. In 2023, there were 3,130 cardiovascular disease hospitalizations per 100,000 older adults in York Region. This rate has slightly decreased since 2014 similar to the Ontario trend, likely due to improved treatment and preventive care (Figure 3). Ischemic heart disease, the leading cause of hospitalizations related to cardiovascular diseases, has decreased over time, while the rate of stroke hospitalizations has increased slightly. Compared to the rate of cardiovascular disease related hospitalizations in the general population, rates in those aged 65 years and older and in those aged 75 years and older were two times and seven times higher respectively.^{5,6}

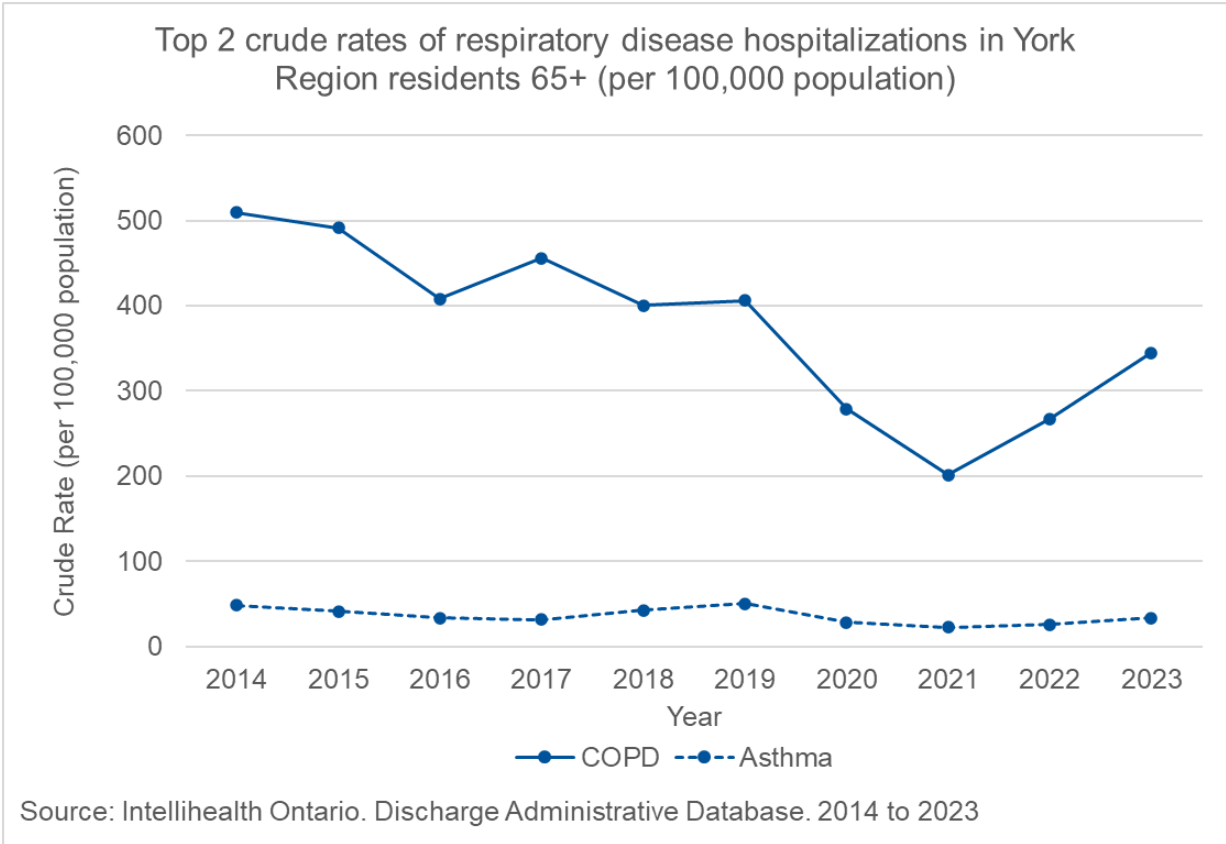
Figure 3: Rates of Cardiovascular disease hospitalizations^{5,6}



Respiratory diseases represent the third largest disease burden among older adults in York Region. Respiratory diseases include pneumonia and bronchitis caused by viruses or bacteria, COPD, and asthma, some of which are preventable. For instance, influenza, RSV and some bacterial infections can be prevented by vaccination, and COPD is most commonly caused by smoking.

In 2023, York Region recorded 1,517 hospitalizations related to respiratory diseases per 100,000 older adults, a decrease from 2014. Among respiratory diseases, COPD was the top cause of hospitalization. This is followed by asthma at a much lower rate. Hospitalization rates for COPD decreased from 2014 to 2023 and is lower than the Ontario average (Figure 4). The rate of respiratory disease hospitalization in those aged 65 years and older was 1.5 times higher than that of the general population, and in those aged 75 years and older the rate was 7 times higher.^{5,6}

Figure 4: Rates of Respiratory Disease hospitalizations^{5,6}



Older adults who are in congregate living settings, such as long-term care homes (LTC) and Retirement Homes (RH), face health risks from vaccine preventable respiratory diseases like influenza and COVID-19.

Since the pandemic, several outbreak-related measures in York Region’s LTC and RH have worsened. First, there was a two-fold increase in respiratory outbreaks in LTC and RH during the 2024-2025 respiratory season compared to 2018-2019, driven by COVID-19 being designated as a disease of public health significance. Second, there has been an increase in multi-pathogen outbreaks, which lasted nine days longer on average compared to single-pathogen outbreaks.⁷ Longer outbreaks result in extended isolation requirements and restrictions on visitors, communal dining and social activities, which significantly affect the mental and physical well-being of older adults.

During the 2024-2025 respiratory season, there were 137 outbreaks in LTC and RH settings, with an average of 17 ill residents per outbreak.⁷ These illnesses could be prevented through increased vaccination for COVID-19, RSV and influenza, which are available to all eligible residents.

Despite the benefits of vaccination, institutions are experiencing declining seasonal respiratory virus vaccination rates. In 2024, about 80% of LTC and RH residents were vaccinated against influenza while only 50% of these residents received a COVID-19 vaccine, which may have contributed to larger, longer and more severe outbreaks than in previous years.⁷ LTC and RH staff vaccination coverage for influenza and COVID-19 also declined since the pandemic.

Beginning in the 2023–2024 respiratory season, Ontario introduced a publicly funded RSV vaccination program targeting high-risk adults, including residents aged 60 years and older living in long-term care homes, retirement homes, and Elder Care Lodges. In the 2024-2025 season, eligibility expanded to include all adults aged 75 years and older living in the community, and the program became year-round as of April 2026. RSV vaccination in adults 60 years and

older has been shown to reduce the risk of RSV-related hospitalizations by nearly 75% in real world settings, with additional protection provided against critical illness and death.⁸ By increasing the number of residents and staff who are vaccinated against respiratory viruses, illnesses and deaths from respiratory outbreaks can be reduced and LTC and RH residents’ quality of life can be maintained. During the 2023-2024 respiratory season, about 60% of LTC and RH residents were immunized against RSV in York Region.

York Region works to prevent and reduce impacts from respiratory disease in congregate living settings. Preparedness audits, timely infection prevention and control resources are provided to retirement homes and congregate living settings, helping partners better prepare for and address outbreaks.

Cancer remains the top cause of death among older adults in York Region and Ontario. People aged 60-79 years account for the greatest number of cancer deaths in Ontario.⁹ The number of cancer related deaths among older adults in York Region has increased over time, from 1,082 cancer deaths in 2014 to 1,557 deaths in 2023.¹⁰ This increased number of deaths is likely reflective of population aging and survival into older ages. Other top causes of death among older adults in York Region were cardiovascular diseases and mental and behavioural disorders.¹⁰

Mental Health and Substance Use

While older adults in York Region generally report high levels of mental well-being, better than those in the younger age groups, chronic illnesses and life transitions such as bereavement and loss of independence can present significant challenges.¹¹ Monitoring mental well-being and mental health outcomes provides a more complete picture of their health.

In 2023, **88% of older adults in York Region reported either good, very good or excellent mental health**, higher compared to those aged 45 to 64 years. However, this represents a slight decrease from 2021.⁴ In 2023, there were over 350 mental health related ED visits per 100,000 older adults and 36 ED visits per 100,000 related to self-harm, both of which were lower than the other age groups.⁵ The suicide rate for older adults in 2023 was 12 per 100,000, which was similar to rates for middle-aged adults but higher than those for other age groups. These outcomes are similar or better off compared to Ontario but they reflect that there continues to be mental health care needs for older adults.

In 2023, 17% of older adults in York Region reported alcohol use patterns associated with moderate to high risk of alcohol related harm.⁴ Older adults, particularly those aged 65–74, experienced the highest rates of alcohol related hospitalizations consistently over the 10 year period from 2014-2023, likely reflecting long-term harms of alcohol use and highlighting opportunities for early intervention and safer alcohol use supports. In 2023, the rate of alcohol related hospitalization was 160 per 100,000 for this age group in York Region. Opioid-related harms persist among older adults; there were 14 ED visits and 7 hospitalizations per 100,000 people due to opioid poisonings, slightly higher than rates among those aged 45-64 years but lower than those 25-44 years old.^{5,6} In 2023, there were 138 per 100,000 older adults prescribed opioids for pain management, which was higher than the rate of opioid prescriptions in other age groups and represents a decrease since 2013.¹² These findings underscore the need to continue advancing health promotion, harm reduction, and provider engagement strategies that address substance related harms among older adults.

Social isolation among older adults impacts mental health in addition to physical health and quality of life.^{13,14} In 2023, among York Region residents **82% reported high levels of social support, and 64% reported a strong sense of community belonging.**⁴ These rates are similar to those in other age groups and have remained stable over time. However, these data do not include people living in long-term care homes and in some retirement homes. It also doesn't capture people in the community who cannot complete surveys due to cognitive or sensory challenges, language barriers, and unstable housing. Social isolation among older adults is linked to factors such as low income, health and mobility issues, limited transportation, weak family connections, and living alone. Monitoring these and other indicators over time will help better understand community needs in York Region.^{13,14}

Oral Health

Oral health is a vital part of healthy aging. Evidence supports that poor oral health in older adults can lead to adverse health outcomes, including the risk of respiratory infections, cardiovascular diseases, worsened diabetes, malnutrition and reduced social well-being.^{15,16} **Older adults experience the highest burden of oral disease** compared to other age groups. They are at greater risk of developing tooth decay, gum disease, dry mouth, and oral cancer.¹⁷ In 2024, York Region residents made over 3,000 emergency dental visits for non-traumatic dental concerns.⁵ One in five of these visits involved older adults, with an estimated cost of \$467,000 in 2024.^{18,19} In Ontario, between 2023 and 2024, 27% of people over the age of 65 noted they often or sometimes avoided eating foods because of “mouth problems”, and 30% report persistent or on-going mouth pain. Only 39% perceived oral health as very good or excellent, which was lower than the national average of 43%.²⁰

Older adults living with low income are a particularly vulnerable group with unique oral health needs. Financial barriers limit access to dental care and increase healthcare burden through unnecessary trips to the hospital. Many older adults in Ontario have limited or no dental insurance and higher dental care needs. These low-income older adults are more likely to have poor self-rated oral health, and experience oral health complications such as mouth pain, missing teeth, and issues with dentures.^{23,24} Sixty per cent of older adults in Ontario reported having no dental insurance in 2023/2024 and 26% reported that they avoided going to an oral health professional due to cost.²⁰ Programs such as the Ontario Senior’s Dental Care Program supports older adults without insurance who live with low income.

What is York Region doing to support Seniors dental care needs?

In York Region, Ontario Senior’s Dental Care Program (OSDCP) services are provided across five public health clinics and through partnerships with **34 private dental offices**, offering preventive care, restorative treatment, dentures, emergency care and specialist referrals for adults aged 65 years and older with incomes below **\$25,000 (individual) or \$41,500 (couples)** and no dental benefits. Appointments are available five to six days per week, supported by phone based navigation for eligible older adults.²¹

Since the program began in 2019, 20,093 older adults in York Region have enrolled in OSDCP, and 7,399 have received comprehensive dental services from York Region Public Health.²²

Lifestyle Factors are Shaped by Social Determinants of Health

Lifestyle factors are personal behaviours and habits that influence health and well-being. These include healthy eating and physical activity.²⁵ **Regular exercise and a balanced diet are protective behaviours that benefit people of all ages.**²⁶

Data indicate that older adults in York Region generally report healthier behaviours compared to the rest of Ontario. However, there remains significant room for improvement. In 2023, only 29% of older adults reported eating fruits and vegetables five times or more per day.⁴ In 2021, less than half (43%) of older adults reported meeting recommended physical activity guidelines, which was similar to the proportion

among 45 to 64 year olds but lower than that among 18 to 44 year olds.⁴

Supportive environments are essential for healthy aging. Creating safe, accessible and inclusive physical and social spaces helps older adults stay independent, reduce fall risk and improve quality of life. Public health supports this through Age-Friendly Community work, fall-prevention programs, built-environment advocacy, social-connection initiatives and using local data for planning—all contributing to communities where older adults can live safely, independently, and thrive.

Lifestyle factors are shaped by underlying social determinants of health, including income, housing stability, access to affordable and nutritious food, and walkable neighbourhoods.

Although the prevalence of most chronic conditions increases with age, many can be prevented, delayed or mitigated through the reduction in inequities and application of effective health promotion activities.²⁶ Health

promotion improves health behaviours by improving personal skills, strengthening community action, advancing healthy public policy, and creating supportive environments.

Housing and Age-Friendly Communities

Age-friendly communities have policies, services, and environments, both physical and social, that help older adults live safely, stay involved, and enjoy good health.²⁷ As York Region’s senior population grows, so does demand for accessible and affordable housing options and transportation, inclusive amenities and outdoor spaces, and opportunities for social participation.

A core goal of age-friendly community is **aging in the right place**, which allows older adults to maintain independence in familiar surroundings as they age based on needs, circumstances and preferences while staying connected to their communities.²

An Ontario survey showed that 91% of people aged 55 years and older hoped to stay in their own home as long as possible.²⁸

Affordable and accessible housing is one of the eight core domains of an age-friendly community.²⁹ Spending 30% or more of household income on housing is a key indicator of unaffordability. For older adults living on fixed incomes, high housing costs can limit spending on basic needs and contribute to financial stress, poorer health, and reduced quality of life.

Housing is a key social determinant of health; when it is unaffordable or poorly designed, the risk of chronic disease, mental health challenges, injuries, and other harmful outcomes increase.

Housing trends in York Region show a clear divide. While 89% of older adults live in owned homes,

11% rent. Nearly half of these renter households (47%) spend 30% or more of their income on housing³¹ This gap highlights where support is most needed.

York Region was formally recognized as an Age-Friendly Community through its 2024 to 2027 Plan to Support Seniors in January 2026 by the Government of Ontario, acknowledging the Region's strong commitment to support seniors. These efforts have strengthened programs, services and policies that promote inclusion, accessibility and well-being for older adults across the Region. The 2024 to 2027 York Region Plan to Support Seniors: Navigating Forward Together² (Plan) provides a framework that aligns closely with public health priorities for healthy aging. Recognizing that seniors represent a rapidly growing and increasingly diverse segment of the population, the Plan emphasizes prevention, health promotion, and system integration to better support seniors to "age in the right place" based on their needs, preferences, and circumstances. Key priority areas include keeping older adults healthier longer by promoting physical activity, social connectedness, and chronic disease prevention; supporting seniors to live in age-friendly, complete communities that reduce isolation and barriers to services; improving navigation so seniors and caregivers can access the right programs and services at the right time; and strengthening coordination and planning of services for seniors across health and social care systems. Together, these priorities and actions reinforce a population health approach that aligns with the social determinants of health, works to reduce avoidable health system use, and supports equity, independence, and well-being among York Region seniors.³⁰

Homelessness in Older Adults

The Point-in-Time Count provides a snapshot of the number of people experiencing homelessness. It is a count of people experiencing homelessness over a 24-hour period. Data from York Region's Point-in-Time Count showed that **the average age of people experiencing homelessness increased from 36 years in 2021 to 41 years in 2024.**³³ The proportion of individuals aged 65 and above experiencing homelessness doubled from 4% in 2018 to 8% in 2021 before decreasing to 5% in 2024.³³ This same rise and dip was seen in the aggregate federal government 2024 Point-in-Time Count,

York Region has seen strong demand for subsidized housing options from older adults. The Region maintains a subsidized housing wait list to match applicants requiring a rent subsidy to available units in community housing, rent supplements, and portable benefits. In 2025, approximately 33% of applicants on the subsidized housing wait list (7,314 out of 22,074 applicant households) were age 60 or older. There is not enough supply of community housing to meet demand, leading to long wait times. Older adults who applied and accepted a subsidized housing unit in 2025 waited an average of 9.6 years before being offered a unit.³²

which showed a decrease in respondents aged 65 years and older experiencing homelessness from 23% in 2020-2022 to 21% in 2024.³⁴

As homelessness can increase the biological aging process, people experiencing homelessness are considered older adults at age 50 years and older. These individuals also have health concerns more often than housed counterparts.³⁵ Homelessness is associated with longer hospital stays, higher fall risk, multiple chronic conditions and early death. Those aged 50 years and older experiencing homelessness are 3.5 times more likely³⁶ to report chronic physical and mental health conditions than those who are not. Addressing unstable housing and homelessness in York Region supports people with the greatest health needs and strengthens community well-being.

Income Has a Profound Impact on the Health of Older Adults

Income is a core social determinant of health. Social determinants of health are the conditions in which people are born, grow, live, work, and age, shaped by access to power, money and resources. Older adults now make up nearly one-quarter (23%) of all York Region tax filers.³⁷ In 2023, they had an average income of \$58,278, a 6.4% increase from the previous year. This was driven by higher pensions, government

assistance and investment earnings. While low-income rates increased across all other age groups in York Region between 2022 and 2023, older adults were the notable exception. The low-income rate among older adults dropped to 19% (or 43,770 people) in 2023, the lowest level recorded since 2014. This decline may be linked to the recent 10% increase in Old Age Security (OAS) benefits for those aged 75 and older.³⁷ There may also be a link to the ability to access Pandemic income supports such as the Canada Emergency Response Benefit and Canada Recovery Benefit, which continued until 2022. Both of these income supports may have had a significant impact on older adults' incomes and poverty levels during that period.

While the dip in low-income rate is a positive trend for older adults, there is evidence that this is still not enough to ensure health and well-being. Food insecurity—limited or inconsistent access to nutritious foods due to financial constraints—is a growing concern. According to Canadian Income Survey data, **the percentage of York Region households who reported experiencing food insecurity doubled from 11% to 22% between 2019 and 2024.**³⁸ A low-income senior receiving OAS, the Guaranteed Income Supplement and the Ontario Guaranteed Annual Income System would need to spend 77% of their income on rent and food, leaving only \$627 for all other expenses such as utilities, transportation and clothing.³⁸ Although this represents the strongest financial position among households relying on social programs, it still provides very limited capacity to cover other essential costs that support health and well-being.

Addressing income-related disparities through policy, including enhanced income supports, affordable housing, nutrition programs, and community interventions is essential for promoting healthy aging, reducing inequities and preventing illnesses. Income disparities are addressed through the varied responsibilities of different levels of government. York Region continues to support and advocate for policies that address social determinants of health.

Care for Older Adults

Older adults have varying levels of functional abilities. Those with reduced functional abilities may require care or support to maintain health and independence. Caregiving can be provided by care providers who are paid (also called “formal caregivers”) and informal caregivers who are family members, friends, partners, or others who provide support because of their relationship with the individual.³⁹

Caregiving needs have increased due to an aging population and higher rates of chronic disease, disability and dementia. **The rapid growth of population aged 75 and older is projected to result in an unmet need of 14,954 long-term care beds by 2041 for York Region,**⁴⁰ which represents a need for thousands of new personal support workers, nurses and other allied health providers.

The reliance on informal caregivers is growing, which significantly impacts family well-being and workforce participation—particularly for women, who provide a disproportionate amount of care. One in five caregivers of older Canadians are over 65 years, and 5% of caregivers are over 75.³⁹

Without adequate institutional support, these caregivers face declining mental, physical and financial health. There is a need for expanded respite care, adult day programs, community supports, and better navigation tools to help families sustain caregiving and support aging at home.

Community care supports such as respite care and adult day programs are essential to preserve the health of caregivers. York Region Seniors Services provides Adult day programs that offer caregiver support and respite. The Region offers other important services and supports that benefit seniors and caregivers that can be found at york.ca/Seniors.⁴¹

Climate-Related Health Risks

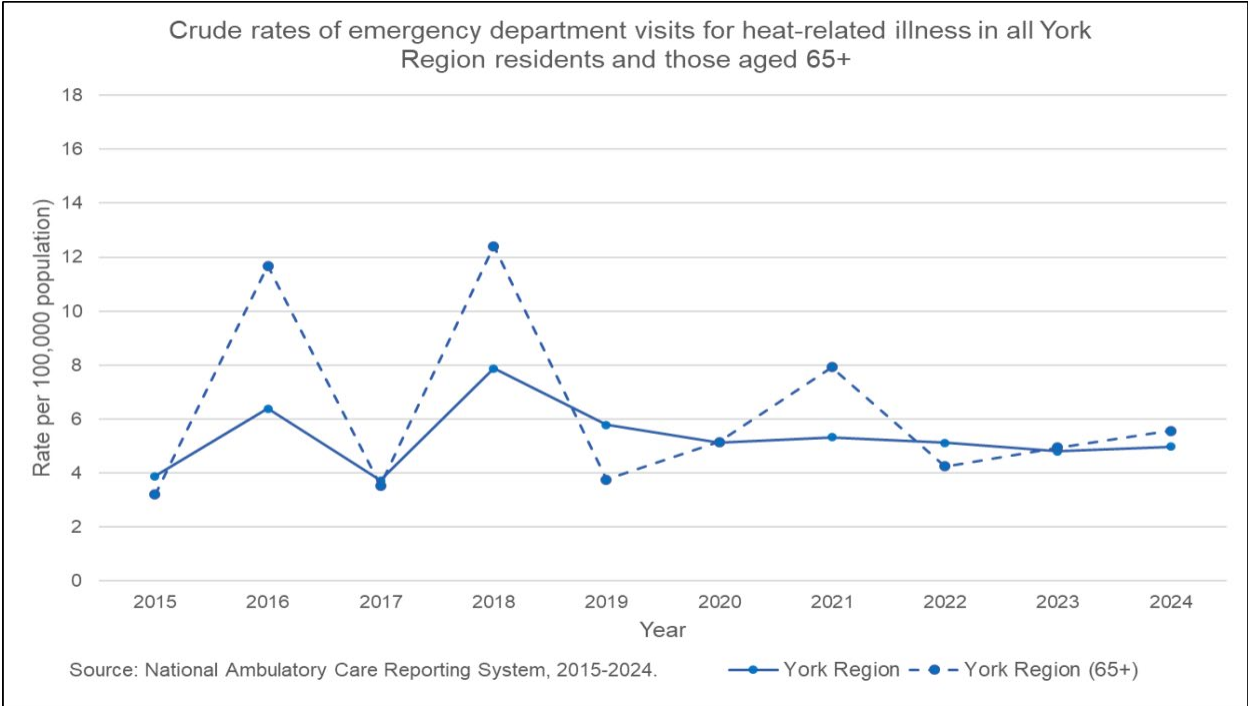
Climate change continues to impact the health and well-being of York Region's communities. **Older adults are at higher risk of experiencing climate-related health outcomes** from extreme heat and vector-borne diseases due to age-related physiological changes and chronic health conditions.

Extreme heat events are happening more often and becoming more intense. Older adults are at increased risk for heat-related illnesses such as heat exhaustion and heat stroke due to a reduced ability to regulate body temperature.⁴² Certain medications can also make it harder to stay cool and can increase the risk of dehydration. Mobility limitations and social isolation can further increase risks for older adults by making it more difficult to access cooler environments.⁴³

In 2025, York Region Public Health initiated a 3-year project funded by Health Canada called **'Keeping it Cool: Increasing Resiliency of York Region Seniors to Extreme Heat'**. The project aims to highlight knowledge, attitudes and behaviours of adults aged 55 years and older and their caregivers with respect to extreme heat. This will inform resources and services to ensure older adults, their caregivers and communities can prevent heat-related health impacts.

From 2015 to 2024, rates of ED visits related to heat-related illness in York Region varied year to year, with the highest rates occurring in years with more extreme heat days. In 2016 and 2018, the rate of ED visits for heat-related illnesses in older adults was 12 per 100,000 people (Figure 5).⁵ This was more than double the rate in the general population in those same years, showing that extreme heat affects older adults disproportionately. The risk of heat-related illness also appears to increase as older adults age.⁵

Figure 5: Rates of Heat Related Emergency Department visits⁵



Vector-borne diseases are spread to people through organisms like mosquitoes or ticks. As climate change expands the geographical range of mosquitoes and ticks, older adults face increased risk of exposure to vectors and potential illnesses such as Lyme Disease and West Nile virus (WNV) disease. Older adults are also more likely to experience severe outcomes from vector-borne diseases.

In York Region between 2023 and 2025, older adults had the second highest rate of Lyme Disease among age groups, following that for those aged 50 to 65 years. During the same period, WNV rates were highest among people aged 65 and older. Older adults also experienced the highest rate of hospitalizations related to WNV, including the more serious neuroinvasive form of the disease that affects the brain and spinal cord.⁴⁴

Lastly, the health impacts from extreme heat and vector-borne diseases are likely underreported, meaning the true burden may be higher than observed in these data. Overall, these findings highlight the ongoing need for targeted heat and vector-borne disease interventions for older adults in York Region.

What This Means and What's Next

The rapid growth of York Region's older adult population is reshaping the community's health and social needs. While the data show that older adults are resilient, it also highlights critical areas requiring urgent attention.

Although many older adults in York Region report good physical and mental health, many still continue to face inequities. Low or fixed incomes continue to limit access to nutritious food, safe and appropriate housing and preventive care. Falls remain the leading cause of ED visits, and cardiovascular and respiratory conditions place substantial pressure on families and the health system. Older adults in congregate settings face higher risks of respiratory outbreaks which may be reduced by vaccination. Social and environmental pressures, such as extreme heat, rising food insecurity, and the growing complexity of caregiving, are creating new vulnerabilities that should be addressed.

What's Next

As York Region's population continues to age, there will be increased demands for housing, caregiving, health care, public health programs and community supports. The trends in this report highlight several areas requiring ongoing attention and forward looking planning. Staying responsive will require collaboration, continuous monitoring and planning that anticipate future needs.

Tracking key health and social indicators, such as food insecurity, housing affordability, chronic disease trends, fall-related injuries, and climate-related health impacts, will be essential for identifying emerging risks and areas where capacity must grow. Increasing vulnerability to extreme heat, vector-borne diseases and respiratory outbreaks highlights the importance of preparedness and response planning.

Consideration should be given to how neighbourhoods, transportation, community spaces and service systems can continue to evolve to support an older population. Rising caregiving needs and more complex care requirements of multiple chronic conditions associated with advanced age will place additional pressure on informal caregivers, the healthcare system, and social supports and services.

Overall, the findings reinforce the need for a proactive population health approach. Supporting healthy aging in York Region in the years ahead requires coordinated planning, and consideration of older adults' needs across key systems.

Call to Action: Working Together for Healthy Aging

Healthy aging is a shared responsibility. No single organization or sector can address the complex factors that influence older adults' health on its own. Meaningful progress will require collaboration across public health, health care, housing, social services, municipalities, community organizations, and other partners.

Key areas for collective action include:

- **Improving the social and economic conditions that shape health**, including income security, access to nutritious food, affordable and appropriate housing, and access to oral health and preventive services
- **Designing and sustaining age-friendly communities** that support mobility, transportation access, safety, social connection, recreation, and inclusion
- **Reducing preventable health burdens**, including falls, chronic disease and respiratory infections, through evidence-informed health promotion programs, supportive built environments, and strengthened infection prevention and vaccination efforts
- **Supporting caregivers** by improving access to respite, navigation supports, community programs and resources that protect caregiver well-being, especially as caregiving needs and complexity increase
- **Preparing for climate-related health risks** by enhancing community resilience to extreme heat, and addressing growing risks from vector-borne diseases

By working together across sectors and using local data to guide planning, York Region, local municipalities and community partners, including seniors groups, can help ensure that older adults in York Region are supported to live well, remain connected and age with dignity in the years ahead.

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