

Election 2011

HERE WE STAND

- **Create age-friendly communities**
- **Improve income security in retirement**
- **Focus on independent living and prevention, not just treatment**
- **Stop ageism in health care**
- **Improve home care and home support**
- **Don't plan for seniors, plan with seniors**



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EDITORIAL

We need a change in attitude towards Canada's seniors

FOR MANY YEARS, the Council of Senior Citizens' Organizations of British Columbia (COSCO) has been a leading voice fighting for seniors' rights and the protection of social programs. This fight has been very challenging. At the same time, it has helped us to strengthen COSCO, and to make common cause with a good number of kindred organizations.

In the struggle for seniors' rights and a civil society we have gained a lot of knowledge which shows us the direction we should be going. We recognize that, "letting the young folks do it," is no longer appropriate, nor is the attitude towards seniors of, "Dearie, don't worry, we'll do it for you." This is not an endearment but a patronizing form of ageism.

The other thing we face in the development of public policy is the perception that seniors are an undue burden on the state and therefore a threat to universal social programs. We are determined to bring about a paradigm shift. We must celebrate our increased longevity and recognize seniors as the greatest under-utilized resource in society.

In COSCO we have exercised and applied this under-utilized resource by developing programs of "seniors helping seniors" and by insisting "don't plan for seniors – plan with seniors." There are well-meaning people who think they know what's good for seniors. When we tell them that seniors know what's good for seniors, we are sometimes looked upon as uppity and ungrateful.

We need a change in attitude towards seniors. We have made progress on many counts, but there is still a long way to go. This special edition of the COSCO News outlines some of the key issues where we need commitments and action from our candidates. Please use this information to question candidates in your riding, and ask for their commitment to plan with seniors for our future.

Working together to build a better future

By Sylvia MacLeay
President, COSCO

MODERN DAY DECISION makers – including Canada’s politicians – listen only to groups with the power of numbers and strong advocates. The future for seniors will be directly proportional to the actions taken by seniors to ensure that their personal needs are met and that Canadian society develops in ways future generations will cherish.

Accurately predicting the future is impossible, but some things seem clear.

Increased numbers of seniors will

live active lives in better health for 30 plus years in retirement.

Seniors will be a larger demographic group in the population. If we can unite to act on our needs and advice, politicians will listen and act.

Ageism must be eradicated. Seniors, like all adults, must be involved in decisions that affect them. Those with severe disabilities should have a seniors’ advocate acting for them with caregivers when they cannot represent themselves.

Changes must be made to the Canada Pension Plan, Old Age Security and the Guaranteed Income

Supplement to lift seniors out of poverty today, and to ensure our children and grandchildren can enjoy a financially secure retirement.

Many seniors will continue work either full or part time after retirement. Some will work because they need to and others because they want to. Seniors have a good work ethic, and have years of experience. The economy needs them.

The future for seniors will be good if we continue to work hard to promote our needs, and remain firm on issues that could weaken or strengthen the very fabric of Canada.

No Canadian senior should live in poverty

THERE IS, among some, a perception that seniors today are well off and faring better than they have ever been. This perception relies on statistics about assets accumulated over a life time. It does not reflect the reality faced by many Canadian seniors.

The erosion of seniors’ income comes in many forms, including inflation and actions undertaken by all levels of government.

Similarly, many of today’s seniors not only function as unpaid caregivers to their own parents, but also make expenditures from their own limited incomes to supplement shortfalls in this care.

Cost of living increases in the Guaranteed Income Supplement

(GIS) have in no way come close to matching the increases in the costs of food, energy, and housing.

COSCO believes in a civil society where the eradication of poverty must be a priority for governments at all levels.

Seniors have made positive contributions to our country that should be recognized.

COSCO calls on all governments to take action to allow all seniors to live their lives in dignity.

What must be done:

- Expand housing and health options for seniors based on their own needs and preferences, including affordability so that they may remain independent for as

long as possible.

- Address the issue of inadequate income, and the role this social determinant of health has upon one’s ability to remain socially connected.
- Vertically expand the Canada Pension Plan/Quebec Pension Plan (CPP/QPP) to address poverty issues among seniors.
- Prevent the establishment of a two-tier health system.
- Support or compensate grandparents who are raising their grandchildren or are providing them with free day care.
- Make seniors a driving force in the development of these strategies.

Creating age-friendly communities

NEIGHBOURHOODS should be elder-friendly places. This means addressing basic needs, promoting social and civic engagement, optimizing physical and mental health and well being, and maximizing independence for people who are frail and disabled.

Even the best-intentioned national or international health policy initiatives may fail to have the intended impact at the local level and may even result in serious harm because of ignorance of local conditions.

That's why COSCO emphasizes the ideal of "seniors helping seniors" and stresses the importance of consulting with seniors in each neighbourhood where programs are to be developed.

That's the only way we can create communities that are truly age-friendly.

It starts with spotting, and acting on, the obvious:

- Pedestrian friendly streets.
- Smooth walking surfaces.
- Public toilets.
- Adequate signage.
- Enforcement of traffic laws that make walking and bicycling safe.
- Level entry into buildings.
- Sidewalks wide enough to accommodate wheelchairs.
- Traffic islands.
- Adequate timing at crosswalks.

The World Health Organization's



guides for Global Age-Friendly Cities provide numerous suggestions covering the human environment, transportation, housing, income, social participation, social inclusion, civic participation, communication, community supports and health services. These guides should be used as a lens in the development of new policy and legislation in Canada.

Transportation for seniors, for example, must be affordable, frequent, reliable, and take seniors to the places where they want or need to go.

Similarly, civic participation means empowering seniors to contribute to their communities by expanding volunteer opportunities, and reducing barriers for seniors who wish to continue working.

We must combat ageism in the workplace, increase flexibility to accommodate older individuals, and make it the social norm to value seniors' contributions in our communities.

COSCO emphasizes the import-

ance of seniors being involved in creating age-friendly communities, and pushing for issues to be addressed without delay.

Simply put, "spot the obvious" must be followed with "fix the obvious."

What must be done:

- Federal, provincial and territorial governments should utilize WHO's Global Age-Friendly Cities reports to guide the development of new policies for and by elders.
- Consult with seniors' in individual communities to develop appropriate strategies to enhance healthy aging.
- Develop strategies to reach out to isolated seniors and make them a part of the local community.
- Identify and address the "obvious" in our communities and take action to remedy these problem areas.

Equal access to prescription drugs

A STUDY HAS FOUND that up to 25 percent of all admissions to British Columbia's largest hospital are drug related.

One in seven of these drug related incidents were the result of misusing a medication.

In elderly populations, non-compliance rates run as high as 50-60 percent.

Failure to take a medication – for cost or other reasons – is a significant component.

In the United States, the cost of misusing or failing to take prescription drugs has been estimated to be \$100 billion. Using similar methodology, the cost may be as high as \$14 billion in Canada.

It is clear that dealing with this

issues will save lives. There are approximately 10,000 deaths per year in Canada due to adverse drug events.

It will also save dollars by reducing the use of the acute care health system.

We must implement strategies so that all individuals – including low-income seniors, and regardless of each individual's health literacy level, may safely and appropriately use prescription drugs.

What must be done:

- Establish a National Drug Formulary to provide accurate information on quality, effectiveness, and price.
- Shorten the patent protection

period in Bill C-91.

- Prohibit drug manufacturers from offering inducements to doctors, pharmacists, and other medical professionals.
- Implement a universal Pharmacare program.
- Increase collaboration and partnership between Health Canada, university researchers, doctors, pharmacists, patients, and caregivers to ensure success.
- Expand the Chronic Disease Self-Management Program.
- Increase funding for programs and research initiatives designed to enhance health literacy in Canadian seniors.

Universal Pharmacare could save \$10.7 billion

A NATIONAL PUBLIC PHARMACARE plan could provide everyone in Canada with prescription drug coverage. It could also save us \$10.7 billion a year through bulk purchasing and similar economies of scale.

A new report – The economic case for universal Pharmacare – explains how it could be done. The full study is available at www.Pharmacare-Now.ca.

“The way we pay for prescription drugs is broken,” says Joel Lexchin, MD, professor, School of Health Policy and Management, York University.

“Politicians hide behind the excuse that universal public cover-

age is too expensive. This study exposes that excuse as a fallacy. We can save money and cover everyone in the country. Medicare works and Pharmacare is no different,” says Dr. Lexchin.

The study has also been endorsed by Dr. Robert Evans, O.C., Ph.D (Economics, Harvard), whose internationally respected work includes ground-breaking comparative studies of different health care systems and funding strategies.

“Canada has an American-style system of paying for drugs, and it yields American results – inequity, waste and high costs. Marc-Andre Gagnon (author of the report) provides a comprehensive analysis of

the major benefits to Canadians from a true Pharmacare system of universal public coverage,” says Dr. Evans. “To date however, private insurers, Big Pharma, anti-tax ideologues and apathetic governments have kept this beyond our reach.”

The report finds that a national Pharmacare plan would enable all Canadians to enjoy equitable access to needed medicines, and also help to control the growing cost of prescription drugs.

The only thing that's lacking is the political will to act. Ask your candidate if he or she will support universal Pharmacare for Canadians.

We need a national policy on mental health

THE PRIMARY jurisdiction for the delivery of mental health services in Canada is the provincial and territorial governments. According to B.C. Mental Health & Addiction Services, the lifetime risk of developing a mental disorder is close to 25 percent. Further, mental health results from the interplay of external – such as housing, income, services, and mobility – and personal factors – such as social, spiritual, physical, and emotional.

It is important to develop plain language materials, and to involve consumers in all stages of the development, production, and testing of materials. COSCO emphasizes the importance of involving seniors in the process of developing mental health materials and programs that are to be directed to older individuals.

The Seniors' Mental Health and Home Care study has concluded that "in order to preserve and promote seniors' mental health there is a need to enhance the capacity of home care to identify and support seniors' mental health issues both through the type of services provided, and the way in which they are provided." Home care makes a contribution to mental health by promoting independence, providing social interaction, assisting in the recognition of mental health issues, and by providing information and support to seniors and family caregivers.

As is the case in other areas



where governments focus on treatment rather than prevention, the strategic thinking and funding needs to shift to support services to seniors.

What must be done:

- Develop a National Policy on Mental Health.
- Involve seniors in the process of developing mental health programs and materials that are to be directed toward older individuals.
- Recognize the expanded role that home care workers can provide in the domain of mental health, increase financial support, and implement a national home care program.
- Use the World Health Organization's Global Age-friendly Cities: A Guide as a template to build healthy communities.

Action to prevent unnecessary falls and injuries

FALLS IN CANADA result in 84 percent of injury-related hospitalizations among seniors. Further, 40 percent of all nursing home admissions are the result of a fall. Where a fall results in a hip fracture, 20 percent of these individuals will die within one year of the fracture. In British Columbia this translates into 852 fall-related deaths, and 10,091 hospitalizations each year.

Environmental changes that may decrease falls include modifications to one's home, and making communities more age-friendly.

Some exercise programs are effective in decreasing falls. Weight bearing aerobic activity, combined with stretching and flexibility, has been found to decrease falls by 22-40 percent. Similar results were found in seniors who participated in Tai Chi to improve fitness and balance.

We know what is required. The success found in several studies must now lead to wide scale programs to benefit seniors.

What must be done:

- Build awareness of the importance of falls and falls prevention, and let seniors drive this process.
- Increase funding to encourage seniors to participate in groups and make their own communities "age-friendly".
- Support risk assessment and prevention of falls due to osteoporosis, vision problems, and side effects of medications.

Staying connected to our communities

IN NORMAL AGING, a senior's social circle may grow smaller due to factors such as illness, disability, loss of a spouse or friend, and poverty.

It is in our best interest to combat these changes because social participation and social support are both strongly connected to good health and wellness.

The World Health Organization, in consultation with seniors, has developed a number of recommendations to prevent the social isolation of seniors.

These recommendations include:

- Accessible transportation.
- Affordable activities.
- Increased range of opportunities.
- Awareness of community activities and events.
- Encouragement to participate.
- Further integration of generations, cultures, and communities.

It is also important that we immediately address the key social determinant of health, namely income.

We must ensure that all Canadian seniors who qualify are receiving their due from the Canada Pension Plan and Guaranteed Income Supplement, and that these programs are strengthened.

We must eliminate the income based OAS clawback and reduction in Age Credit.



What must be done:

- Address the issue of inadequate income, and the role this social determinant of health has upon ones' ability to remain socially connected, by increasing the GIS and OAS.
- Phase in a gradual improvement of the Canada Pension Plan, as recommended by the Canadian Labour Congress, to ensure that the next generation of retirees will have more financial security.
- Improve transit services, including HandyDart services for people with disabilities.
- Work with seniors to develop new, affordable, and accessible social activities.

Respect for people aging with a disability

ACCORDING to Statistics Canada, about 40 percent of all Canadians aged 65 and over have difficulty in performing daily activities such as getting out of bed, walking, grooming, using the toilet and possessing control over these bodily functions, bathing, and eating. Older people report more disabilities than younger people, and older women tend to report more disabilities than older men.

COSCO embraces the concept that an “an age-friendly society would also be a disability-friendly society.”

The disabled have the right, as we all do, to participate meaningfully in our communities.

Unfortunately, research carried out by the Canadian Centre on Disabilities Studies in 2008 found that many older people with disabilities remain “socially isolated due to issues with community and housing accessibility, lack of financial resources, lack of transportation and disability supports, inadequate community policies to accommodate their needs, gender-specific issues and negative societal attitudes.”

Clearly there is a great deal of work ahead if we are to improve the lives of those individuals who are living with a disability.

One key priority is home support. In British Columbia, we’re going the wrong way.

Home support services were cut by 50 percent between 1993 and 2005, and this trend continues.



It forces women, as society’s traditional caregivers, to provide unpaid care for individuals in need.

To improve the lives of those aging with a disability, we must halt and reverse the deterioration of care.

What must be done:

- Establish a national home care program.
- Increase dialogue between the disability and aging sectors with governments, non-profit agencies, and consumers.
- Eliminate the trend towards casual employment in the home care sector and increase the continuity to those currently under care.
- Increase quality and quantity of care for people with disabilities.

Adequate housing for seniors

OVER 90 PERCENT of Canadian seniors spend the majority of their lives living in a private household, either owned or rented.

The remaining 10 percent of seniors live in a number of conditions ranging from homelessness, to supportive housing and institutional settings.

COSCO believes that no senior should be spending more than 30 percent of his/her income on housing. In the B.C. rental market, vacancy rates are low, and landlords have been accused of using loopholes in the BC Residential Tenancy Act to raise rents by up to 15 percent in a single year. It’s a huge burden on older people on fixed incomes. There are more than a quarter million Canadian seniors living in poverty.

Additionally, the stock of senior rental housing is shrinking. COSCO supports immediate action to build non-profit rental housing, designated for seniors only. The current practice of placing hard-to-house adults in seniors’ housing is woefully inappropriate.

What must be done:

- Construction of non-profit rental housing for seniors.
- Approach seniors’ housing issues with the goal of keeping housing costs below 30 percent of one’s income.
- Adjust government income programs so that no Canadian seniors are living in poverty as defined by the after tax low-income cut-off or LICO.

Living, and dying, in dignity

WE ALL DIE. We also hope to die with dignity, free from pain, connected with our loved ones, and with a chance to share our final thoughts.

Remaining at home in our final days is a desired option for many elderly people.

The benefits include familiar surroundings, and ideally family or friends nearby who can provide some or all of the care.

Other options include residential or long-term care, hospice and palliative care.

Hospices provide accommodation in comfortable surroundings. The individual must be close to the end of life.

No special treatments or interventions are done, other than pain management. Loved ones are encouraged to spend as much time with the patient as possible, and religious and ethnic traditions are encouraged and respected.

Hospital palliative wards provide medical care to prolong life, as well as pain management.

Patients may be allowed to go home if their condition improves and will be re-admitted when necessary.

Good quality care is given, but it is expected the patient will be there only a matter of days.

One of the major difficulties with care provided in the home is the question of who pays for medication, supplies, care workers, and equip-



ment outside of the hospital setting.

COSCO believes pain management must be provided to individuals in a timely fashion regardless of the setting in which they choose to spend their final days.

The rooms in residential care often house more than one patient, so privacy is an issue.

Finally, very little is offered to caregivers who experience grief, and stress. In addition, caregivers often take time off work and therefore suffer a financial loss.

Of the 27,000 persons who died in BC in 2007, the British Columbia Hospice Palliative Care Association estimates only 22 percent had access to hospice palliative care.

COSCO supports the BCHPCA in

stating that hospice palliative care must become a core funded service in our province.

What must be done:

- Ensure that all individuals in the province have access to care while remaining in the home, long-term care, hospice, or palliative care.
- Respect the choice of the individual in regards to where care is to be provided.
- Ensure that all individuals have timely access to pain management regardless of where they choose to spend their final days of life.
- Ensure that religious and ethnic traditions are respected.
- Make hospice palliative care a core funded service.

Supporting seniors to live independently

REMAINING INDEPENDENT in one's home, and aging in place, is a goal held by the vast majority of Canadians. It contributes to one's sense of dignity, self-worth, happiness and well-being.

COSCO supports all public policies and programs that enhance the ability of seniors to age in place. These include a universal home-care and home-support program, an accessible public transportation system, an affordable safe home maintenance design and construction program, preventive and curative health services delivered free of ageism, and programs that help one cope with chronic conditions

This goal of aging in place is in harmony with efficient health care because it is less expensive to care for individuals in their homes than in institutional settings. COSCO applauds the Danish model where a seven days per week, twenty-four hours per day universal home care and home support program has improved seniors' quality of life and independence, and reduced costs.

Now is the time to incorporate principles of universal design into the building code. A home built according to these principles can easily and inexpensively be adapted to meet the needs of Canadians from young family to empty-nester to senior citizen.

What must be done:

- Immediate design and implementation of a universal 24-hour per day, seven days a week home care



and home-support program.

- Engage seniors in the dialogue that is necessary to design an appropriate universal home care program.
- Address the issues of income that

threaten one's ability to age in place.

- Incorporate principles of universal design into the building code so that our stock of senior-friendly homes continues to grow.

Preventing abuse and neglect

ABOUT 4 TO 10 PERCENT of seniors will report some form of abuse during their lives. This includes neglect, physical, sexual, emotional, psychological, medical, financial, and legal abuse – often committed by family members. Many cases go unreported due to fear of reprisal.

In addition, too many seniors are victims of fraud involving credit cards, bank accounts, mortgage schemes, and unneeded home repairs sold by mail, e-mail, telemarketers, and door-to-door salespeople.

Social isolation is a contributing

factor in both financial and physical abuse.

What must be done:

- Increase awareness of elder abuse and develop support programs to prevent it.
- Increase funding of home care, as this service reduces social isolation.
- Involve seniors in the process of building healthy communities, and in identifying opportunities to increase social participation among their peers.

The need for quality, affordable long term care

LONG-TERM NURSING HOMES and residential facilities that provide 24-hour care, like other health facilities, are administered by the provincial government. It's time for a larger federal presence in this field of care.

Seniors have been promised, many times, that new residential care beds will be created.

Some have been built. Many more have been closed.

At a time when the requirement for long term care is growing, the number of beds is declining.

It is penny wise and dollar foolish.

If neither home care nor residential care are available, seniors have no option but to add to the crowding of emergency rooms and acute care hospitals.

COSCO emphasizes that a moratorium on the construction of long-term care beds in Denmark was accompanied by a significant increase in home care and home support funding.

In B.C., both have declined.

Our key recommendation in the realm of long-term care is increased funding towards home care and home support.

This will enable older BC seniors to age in place and ultimately decrease the demand for long-term care beds in our province.



Similarly, we emphasize that seniors who are currently in need of long-term care must have access to beds.

What must be done:

- Increase funding for home care and home support for B.C. seniors, and establish a 24-hours per day, seven days per week program.
- Ensure that seniors with dementia are housed separately from other seniors and that they receive the specialized care they deserve.
- Address the need to provide culturally sensitive services to seniors from various ethnic origins.
- Ensure that language, culture, sexual orientation, and religion are not barriers to senior care.
- Involve B.C. seniors in the process of developing and expanding home care and home support programs.

Assisted living

IF SENIORS ARE no longer able to live independently – even with home care and home support services – the next option is supportive housing or assisted living.

COSCO believes that care, in every setting, must be guided by the principles of dignity, independence, fairness, participation, and security. Each individual is a valued member of our society.

Assisted living should be available in all neighbourhoods so older people will not be forced to leave the neighbourhood they have lived for most of their lives. This will allow older people to age comfortably in surroundings that are familiar to them, maintain connections to family and friends, and live their lives with a sense of psychological safety that contributes to good health and well-being.

What must be done:

- Ensure assisted living environments are available to seniors in their own neighbourhoods regardless of income level and net worth.
- Promote public or non-profit facilities over private and for-profit facilities.
- Legislate that all assisted living facilities and long-term care facilities be required to have a tenants' council.
- Increase funding to inter-generational programs geared at maintaining one's connection to the broader community.

Together, we are strong

THE COUNCIL OF Senior Citizens' of British Columbia (COSCO) is an umbrella organization representing over 75 senior organizations in B.C.

We encourage all seniors who are not yet involved with COSCO to join us in providing a common voice for seniors in our province.

"Canada's history has taught us that frequently our dreams are best shaped through community action," said Roy Romanow at a COSCO conference.

That thought guides our actions.

We believe that building age-friendly communities is a core issue



that must be addressed by governments at all levels. It drives the health and well-being of not only seniors but all Canadians.

Whether you are reading this as an individual or as a member of a seniors' organization, we encourage you to join us in speaking out.

Membership Application

Please mail to the address below

- I wish to join COSCO as an Associate Member. I enclose my \$25 membership fee.
- I wish to make a donation to COSCO. Please find enclosed a cheque for \$_____.

Name: _____
(PLEASE PRINT)

Address: _____

Postal Code: _____ Phone: _____ Fax: _____

E-mail: _____

Date: _____ Signature: _____

- Please make cheques payable to COSCO.
- Mail your application to Ernie Bayer, Membership Secretary, 6079 - 184 A Street, Surrey, BC V3S 7P7 604 576-9734.
- Seniors groups or organizations wishing information about joining COSCO should write or phone Ernie Bayer and request a membership package.