

Advocating for seniors in B.C.

By Lorraine Logan
President, COSCO

OVER THE SUMMER, although we do not meet, advocacy continues. I have made contact with Michelle Stillwell, the new Parliamentary Secretary for seniors and she will be attending one of our Delegate meetings.

The new opposition critic for seniors, Maurine Karagianis, has been invited to talk to our COSCO Executive on October 3rd.

We have met again with Isobel Mackenzie, the Seniors Advocate during the summer. She was updating COSCO about her "tour" of the Province meeting with copious groups and organizations dealing with seniors issues. It would appear that this office and COSCO will be doing some future collaboration.

I did various interviews on radio concerning the issue of the day. The postal home delivery is still creating lots of concern and we have been contacted often for our opinion.

As most will know, Dr. Brian Day's challenge to the B.C. Supreme Court

on the "right of people to access private clinics and medical assistance" has been postponed for SIX months as the media reported that he wanted to negotiate with the provincial government to resolve this issue.

The B.C. Health Coalition and its allies should be commended on the campaign and intervenors they developed to defend our Canadian Health Care system.

This is not over. We must pay attention and be prepared to support the Health Coalition as this event unfolds in the future.

COSCO delegates attended the National Pensioners Federation conference in Saskatoon September 17th to the 20th. The Health Accord was a common theme at this event, as was the disappearing of Aboriginal women, housing, pensions and other focal points for seniors. There is a report on the conference in this issue.

As COSCO goes forward, the concerns regarding Elder Abuse will start to develop. This is an issue that needs our attention. We do have a workshop called "Preventing Elder Abuse and



Lorraine Logan

Neglect." Perhaps more of our affiliates will ask for this workshop and start the conversation.

As I also hold the Transportation portfolio, you will see a short report on those activities in this edition.

Jane Dyson, Executive Director of the Coalition of People with Disabilities, and I had the opportunity to observe for approximately five hours, the dispatch centre for HandyDART in Cloverdale.

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Council Of Senior Citizens' Organizations Of BC (COSCO)

www.coscobc.ca

President:

Lorraine Logan (BCGREA) 604 916-5151

First Vice-President:

Gudrun Langolf (VMRRA) 604 266-7199

Second Vice-President:

Alice Edge (BCNU RNN)

General Vice-Presidents:

- Fred Coates (BCOAPO)
- Wayne Dermody (BCGREA)
- Leslie Gaudette (Federal Retirees)
- Barb Mikulec (BCRTA)
- Diane Wood (BC FORUM)

Treasurer:

Sheila Pither (VRTA)
604 684-9720 / fax: 604 594-9721

Secretary:

Annette O'Connor (BCRTA)

Membership Secretary:

Ernie Bayer (CAW) 604 576-9734

Past President:

Art Kube (SOGFM) 604 576-8000

Directors:

- Soren Bech
- Don Berg (Federation of Russian Canadians)
- Patrick Brady (NPF)
- Tom Bruncker (BCRTA)
- Bruce Ferguson (SCWR)
- Mohinder Grewal (VCCSNS)
- Al Heinrich (Federal Retirees)
- Alex Hui (CN Pensioners)
- Kathleen Jamieson
- Sylvia MacLeay (BCRTA) 604 921-7823
- Lloyd Pelton (Federal Retirees)
- Gord Sheppard (UNIFOR 111)
- Jean Sickman (BCGREA)
- Ralph Steeves (IAMR)

COSCO News welcomes your letters and contributions. Contact soren.bech@shaw.ca, or Editor, 2102 Porter Rd. Roberts Creek, B.C. V0N 2W5.



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About COSCO

COSCO is an umbrella organization that brings together 85 different seniors groups, representing 107,000 women and men, to work on common issues. COSCO is affiliated with the one million member National Pensions Federation which promotes these issues at the national level.

A major focus of COSCO's work is promoting good health. To this end, COSCO volunteers provide a series of free workshops on 42 topics ranging from falls prevention to health literacy. More than 6,000 seniors have attended these workshops.

TRANSPORTATION

Taxi drivers supplementing HandyDART need training to meet the needs of seniors

By Lorraine Logan, Chair
COSCO Transportation Committee

COSCO is endeavouring to influence Translink regarding their recent decision to fund the taxi industry with \$1 million to enhance the Para-transportation system in the Lower Mainland.

These taxi drivers need proper training to adjust to door to door service, not curb to curb, as well as learn to manage all aspects of seniors abilities or disabilities.

COSCO is extremely concerned about safe, affordable, respectful and timely trips for our seniors and seniors with a disability.

HandyDART funding has declined and at this time no committed funding plan is proposed.

This government is waiting for the Mayors to decide on a provincial referendum on transportation funding and even in that proposal, the identified increase would only be 10 percent.

This is an area where we need community involvement as well as the riders or users to speak out.

A letter (by COSCO) was written to Translink recently outlining our concerns regarding standardization, accountability and an identified training process.

Translink and COSCO have collaborated on other issues and we will try to get to a resolve on this one.

COSCO has also been collaborating with the Superintendent of Motor Vehicles Office, Sam McLeod, on our favourite topic – DriveABLE.

Sheila Pither and I have, along with the staff of OMVB, developed a new letter that will be going out to people holding a valid driver's license at or

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around their 79th year.

This letter will outline what they can expect one month before their 80th birthday – the medical form, the process and what an older driver might want to do to prepare for this

event. This should be launching shortly.

We are hoping that families will start the conversation about the future of driving, when, if necessary to retire your license or perhaps study up on current signs, road conditions and have honest conversations about the ability to continue driving.

It is our hope that when it is time, that each person “retires” their own license and that it is their decision not someone else’s.

We are still attempting to have the Superintendent’s office address the negative aspects of what is termed as the “computer test”.

COSCO would like this part of the assessment to be eliminated. Stay tuned – the DriveABLE contract is expiring soon.

Advocating for seniors in B.C. and working for a better future

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My hat goes off to those men and women who diligently attempt to schedule clients requesting rides for various kinds of trips and appointments.

By the time this issue is published and distributed, the United Nations declared “International Day of the Older Person”, October 1st will have occurred. The theme for 2014 is: “Leaving No One Behind: Promoting a Society for All.”

This concept is a huge challenge and one we must try to achieve.

Civic elections will be held through-

out B.C. on Saturday, November 15th. To assist you in assessing candidates, a helpful questionnaire from the 411 Seniors Centre appears on page 11.

The federal election planning committee will be meeting soon to develop a strategy for the upcoming Federal election being held in 2015. Prime Minister Harper must call an election no later than October 19th, 2015 – there is some suspect that he may call an early election. COSCO News will be distributing an election issue prior to the voting date.

My thanks for all the committee members and Chairs for continuing their research and advocacy on their designated portfolio.

NPF ANNUAL MEETING

Delegates adopt a host of resolutions, pressing governments to act on health care and more

By Barb Mikulec

Delegates to the annual conference of the National Pensioners Federation, meeting from Sept. 17 - 20 in Saskatoon, debated dozens of resolutions, heard from a wide range of speakers, and elected a new executive.

Results of the NPF elections were:

- President Herb John,
- Secretary Pat Brady,
- 2nd Vice President Mike Kaminsky,
- Member-at-large Zoe Kopetsky.

Pat Brady was re-elected to a further two year term and was instrumental in organizing the format of the annual general meeting. Doug Edgar was the resolution chairman and together they handled all the resolutions which were voted on by the delegates.

Resolutions

We voted on 37 resolutions including the Canada Health Accord renewal issue. The debates indicated strong unity among the delegates for what the NPF, COSCO, BCRTA, ACER-CART and other groups consider important issues including health, Medicare, housing and pensions.

Of particular interest to COSCO members is the issue of health. It was agreed that “the federal, provincial and territorial governments be urged to negotiate a new Health Accord that protects, transforms and strengthens our National Health Care System to include adequate and stable financial resources, as well as a national senior’s health care plan and a national pharmaceutical strategy that will improve health outcomes for Canadians and that this meeting of the members of the National Pensioners’ Federation ask other seniors organizations and

individuals to join us in declaring our commitment to use all democratic means before us to ensure the implementation of a new Canadian Health Accord.” This resolution had been endorsed by COSCO, BCRTA, BC Forum, BCGREA, BC Pensioners’ and Seniors Organization and Saskatchewan Retirees.

Another resolution resolved “that the NPF urge the federal government to stop the drastic cuts and rate hikes proposed by Canada Post and instead use the Postal Service Charter review to consult with the public and key stakeholders about alternatives – such as expanding parcel post delivery and providing banking services at post offices that would generate new revenue and ensure a financially viable and service-oriented postal service for the future.”

This resolution was presented by COSCO and agreed to by the delegates.

Speakers

President Herb John spoke of his vision that Canada would have a strong education system, enough jobs and sustainable employment to supply a workforce with pensions.

He asked about our future – is there a ray of hope or will we see difficult days ahead?

We need to influence the government to distribute profits to both management and the workers, he said.

Our health care is a major concern for our future – to build a community that respects seniors and supplies adequate health care for the continuum of life, added John.

Canadian Centre for Policy Alternatives representative Lynne Fer-

nandez spoke about the need to return the OAS eligibility to age 65.

Fernandez said there is also an urgent need to provide low income housing.

Diversity Canada representative Celia Sankar mentioned that pay phones are being taken out in many areas and it is imperative, in order to provide some service for the public, to have pay phones available.

Police-Inspector Rick Penny and Sergeant Dave Kozicki spoke about seniors and crime.

They gave examples of fraud which are targeted at seniors, including scams to send money or allow someone access to your computer.

Canadian Health Coalition representative Adrienne Silnicki mentioned that drug expenditure has risen 15% in the last year and over 365% over the last 15 years.

An affordable, universal Pharmacare plan is needed.

Irene Mathysen NDP official Opposition Critic for Seniors spoke about working with Libby Davies on Aging in Canada.

They are proposing a range of services, including adequate, affordable housing, health care, home care, palliative care and culturally appropriate food and activities for seniors.

For the very latest news about COSCO activities, please visit us on the web:
www.coscobc.ca



Following elections at the National Pensioners Federations’ annual meeting, members of the executive committee took the oath of office. COSCO’s Pat Brady, second from right, was re-elected as Secretary.

Elder abuse is a concern and needs prevention programs.

Mental health needs to be complementary to policies so that no one should have to grow old in poverty, insecurity and isolation.

The GIS needs to be raised, also improvements to the CPP through discussions with the provinces.

Mathysen felt they need to build policy and programs that empower women and other marginalized groups, to create an inclusive caring environment for seniors.

Garry Neil, executive director of the Council of Canadians, spoke about his group with 100,000 members.

Their focus includes issues of the federal-provincial transfer of funds, the drug patents, effects of CETA treaty increasing pharmaceutical costs over the next 10 years which may

range from \$8-\$16 billion.

Also they are concerned with Dr. Brian Day and his “double dipping” charges for health care at his for-profit clinics.

We need to get involved by writing letters, organizing members to donate and getting the community involved with concerns which affect Canadians through the Council of Canadians ‘Lead Now’ campaign.

Sheelah McLean from Idle No More spoke of concerns about pipelines and the need to protect our land from possible spills.

There are 140 First Nation reserves without clean water.

The annual general meeting was attended by 22 delegates from B.C. We were the second largest group in attendance after Ontario, which sent 33 delegates. Thirteen attended from

Saskatchewan, while other provinces sent smaller delegations.

The National Pensioners Federation has established four new committees – Health, Housing, Outreach/Communications and Finance.

If you are interested in participating at the national level, they are seeking additional members for these committees.

This annual meeting of the National Pensioners Federation was well organized, providing an opportunity for delegates from across Canada to learn about and express their ideas about a wide range of issues that affect seniors.

Having heard from the delegates, the executives of the NPF will follow through by lobbying the federal government to take action on the approved resolutions.

Affordable housing: a critical issue throughout B.C.

By Barb Mikulec, Chair
COSCO Housing Committee

AFFORDABLE HOUSING is a serious issue throughout BC. Politicians tell us that efforts are being made to provide adequate housing for the citizens. Unfortunately the reality is that housing is a major issue with many seniors, whose income is fixed while prices escalate.

The cost of a tear-down in Metro Vancouver is now absurdly high and apartments are being upgraded with 'renovictions' of tenants, so rental rates are adjusted higher, out of reach of former tenants.

In northwestern BC the residents of Kitimat are struggling with the housing shortage due to incoming workers, and older buildings which need repairs.

'Renovictions' are happening at the same time as a building boom of new accommodation is trying to keep up with housing demand.

Rising rents and a lack of affordable housing are squeezing out citizens with low incomes.

Similarly northeast BC had an influx of workers in 2011 resulting in jumps in rental housing costs.

A study in the Cowichan Valley on Vancouver Island counted people needing housing help, and the demographics included many seniors.

The study found people living in precarious, unaffordable, overcrowded or inadequate housing.

This study estimated that at least 2000 people were in 'Core Housing Need' of suitable housing.

Some needs were noted: affordable housing, less discrimination, an outreach worker, higher income, and funds for the damage deposit.

Rental housing and social housing need to be available to those with a range of incomes. Social housing is below market rates, if you can fit the criteria.

In 2014 Canada Mortgage and Housing Corporation CMHC projects a 1.9% housing vacancy rate for Vancouver rentals, which is one of the tightest rentals markets in Canada as a balanced vacancy rate is between 3-5%.

Although many units of housing are being built, affordability is still a challenge.

Typical prices for detached properties in Vancouver increased 6.5% last year so buying a single-family detached home on the west side needs \$2,200,000, up 58% in the past 5 years, and on the east side over \$900,000, up 48% in the last 5 years.

Condos are nearly \$500,000 on the west side and over \$300,000 on the east side; newly built units are even higher.

An 'affordability index' shows that only one in three buyers in Vancouver can afford a new concrete or wood frame condo unit at current prices.

Although units are being built, there is difficulty in buying or renting them in this housing market.

New 'relatively affordable' rentals in Vancouver are doing little to ease the vacancy rate in Metro Vancouver. Rental availability is particularly crucial because ownership costs are so high. Waiting lists for seniors' social housing are long.

The city has created a Vancouver Affordable Housing Agency, geared to increasing rental options for middle-income families. The agency will oversee provision of 2,500 rental units



As homelessness among seniors continues to grow, more needs to be done to make housing affordable. A variety of options is required to create age-friendly housing communities.

by 2021, some as small as 320 square feet. City planners state that with a growing population, limited increases in income and limited new purpose-built rental housing in recent decades the need for suitable housing choices for low and moderate-income households has grown dramatically.

More than half of Vancouverites are renters, higher than many Canadian cities.

They earn median incomes of \$34,000 compared to homeowner incomes of \$66,000.

Yearly rent increases are limited to 2% plus inflation. Average rent in Vancouver is over \$1,000 and high-

er in older apartment buildings, and condo rental rates are higher still.

Renters are so numerous because renting is cheaper than buying. Newcomers initially prefer renting, and many renters are saving for a down-payment.

New rental units may not significantly ease the vacancy rate but are affecting the rental market.

The new supply is leaving some units empty in the newer buildings, because rents are lower in buildings constructed before 2000 even though they don't offer the amenities of the newer buildings like in-suite laundry facilities.

The city's incentives for new rental development are still not quite adequate says realtor Mark Goodman, criticizing Vancouver's seven year old policy of effectively barring demolition of apartment buildings.

Affordable housing is a major concern, the top issue from a polling of Vancouver voters as reported by Michael Geller, an architect and real estate consultant.

For empty nesters hoping to downsize and sock away money for retirement, the high housing prices are a great concern.

Vancouver has implemented the Short Term Incentive Rental (STIR) program offering density bonuses, relief from development cost charges and speedier approvals to those willing to build new rental housing.

However many neighbourhoods claim the resulting developments are often out of scale with their surroundings and the high rents do not justify the concessions offered.

Rezoning has also allowed for higher density condominiums such as along the Cambie corridor, while giving community amenity contributions averaging \$55 per square foot of building areas, resulting in more housing, but not necessarily affordable housing.

City planners claim added costs are not being passed onto buyers; most housing experts believe otherwise.

A total of 371 seniors 55 and older were identified in the Homeless count in Metro Vancouver in 2014.

By contrast there were 258 seniors who were homeless in 2011.

Seniors were more likely to have been homeless more than one year, compared to other populations.

At the same time, 14% were newly homeless, and had been homeless less than one month.

Some of the senior respondents reported having a medical condition or physical disability, or mental illness.

However seniors were less likely to report an addiction compared to the total homeless population.

The main sources of income reported by senior respondents were income assistance 32%, CPP or other pension 25%, and disability benefits 25%.

Other sources of income included bottle collecting 16% and OAS/GIS 12%. The study was conducted by the Greater Vancouver Regional Steering Committee on Homelessness.

Is affordable housing a myth or are there ways to help seniors?

I think it would be prudent to have a variety of housing options, with consideration of the needs of seniors, including co-op housing, and age friendly housing communities where intergenerational housing models encourage seniors to be part of a community and feel less isolated.

Resources you might need:

- Shelter Aid for Elderly Renters SAFER at 604 433-2218 or 1 800 257-7756.
- Vancouver Rent Bank gives temporary interest-free loans to Vancouverites at risk of eviction at 604 566-9685.
- The Housing Counselling and Homeless Outreach programs of the Seniors Services Society will help to discuss housing problems at 604 520-6621.
- Also Hollyburn Society helps prevent seniors from becoming homeless. Contact 604 987-8211.

How can Scotland provide health care services that B.C. residents can only dream about?

By Kathleen Jamieson, Chair
COSCO Health Committee

I REGULARLY VISIT older relatives and friends in Scotland. Each time I am impressed by the level and the quality of the publicly funded and administered social and health services that they and all senior residents of Scotland can access – services that we seniors can only dream about here in B.C.

In Scotland, to ensure quality services, value for money, and accountability to the community, health services are regularly audited and publicly reported on in plain language through public agencies such as Audit Scotland (AS).

The AS auditors have a high degree of independence and report directly to the people through the Scottish parliament.

Here in B.C., there is no regular independent public reporting on health care quality or on value for the public dollar spent. Public accountability at the regional or provincial level seems mired in political posturing and stifled by a lack of access to information.

The Scottish government, like the B.C. government, receives its budget for social and health services from the central government.

However, Scotland has maintained, so far at least, its generous publicly administered social and health services despite the 2012 UK government “welfare reforms,” cutbacks that increasingly apply across the UK.

One of these reforms is the infamous “bedroom tax” affecting occupants of social housing which is part of the Thatcher-like Welfare Reform Act 2012 enacted by the Conservative-led

A comparison of public health services

UK / Scotland

Free prescriptions

Free health insurance

Free Dental Checkup

- Charges are set by government, some costs may be paid in full

Unlimited Free Eye exams

Free physiotherapy

Free Hearing test and hearing aid

Chiropody if referred by health professional

B.C.

Some subsidization depending on income

No

No

Partial payment and limited to once per year

No except after hospitalization

No

No

U.K. Parliament. The bedroom tax is an “under-occupancy penalty” that requires local authorities throughout the UK to reduce income assistance payments to welfare recipients if they are deemed to have too much living space.

It’s surely indicative of the different moral and social values that most Scots hold that Scotland sent only one Conservative MP to the current UK parliament in Westminster.

That said, seniors in the whole of the UK appear to have access to more and better health and social services than here in B.C.

In the UK, delays in targets for access to medically necessary surgery are closely monitored. When necessary, private hospital services are used to ensure goals for timely access to the public system are met.

It would undoubtedly make more sense to channel this spending on private care into strengthening the NHS

but the UK has always had a parallel private system for the privileged with means.

Nevertheless, a 2013 Organization for Economic Cooperation and Development (OECD) report says private payment (private insurance and out-of-pocket) for health services is much higher in Canada at 29 percent. In the UK it is just 10 percent.

In Canada, \$4,522 was spent per capita on health care in 2011 but only just over \$3,000 is publicly funded and delivered. Clearly, we are not as egalitarian as we may think in access to health care.

Per capita public health care spending in the UK and Canada are roughly similar (\$3,400 in 2011 in the UK and just over \$3,000 in Canada).

If we look at spending as a percent of GDP, Canada spends 11.2 percent and the UK 9.4 percent. It looks like the UK does a much better job of using available resources.

In August 2014, the new leader of the Canadian Medical Association, Dr. Chris Simpson, said in his inaugural address, “Our system doesn’t deliver the quality of care that it should. It doesn’t deliver the timeliness that it should. And it doesn’t deliver the value for money that it should. Canadian patients deserve better. We all deserve better.”

Dr. Simpson noted that our health care system still reflects the priorities of the 1950s. It is designed to meet the acute care needs of a young population, while the priorities we now must address are the chronic care needs of an aging population.

He calls for the creation of a comprehensive health care seniors’ strategy as a starting point for health care reform.

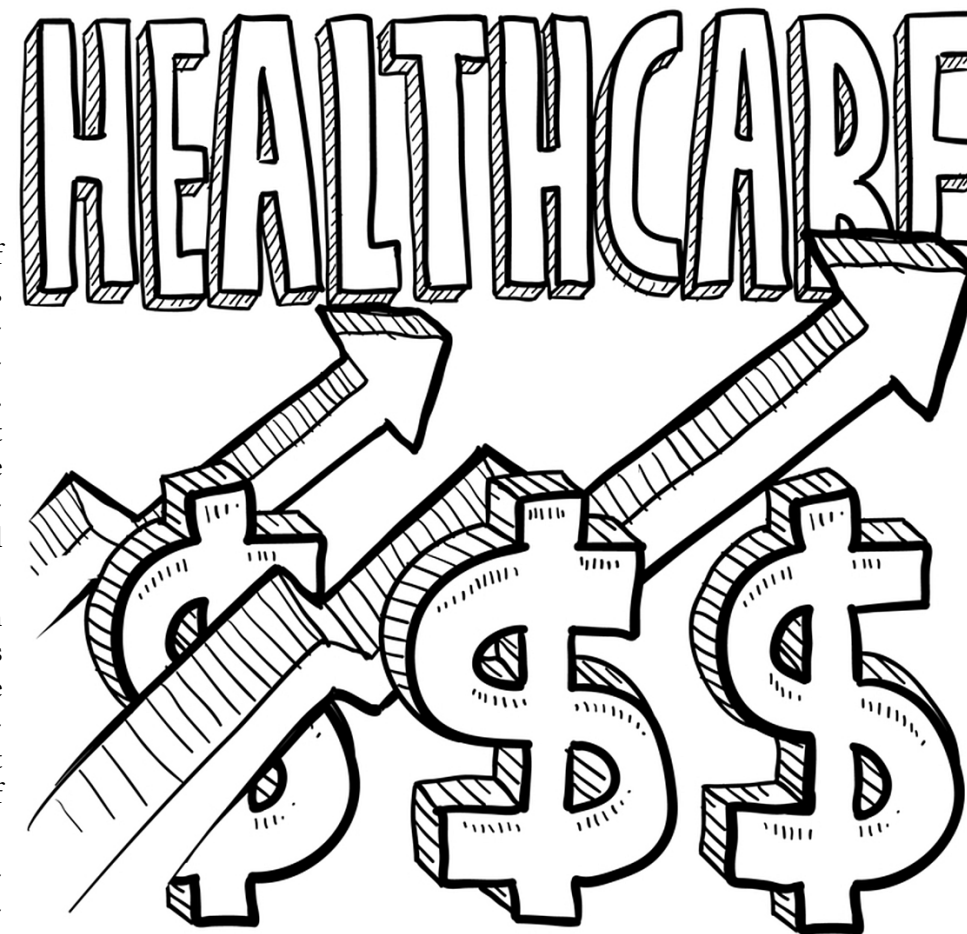
He also notes that the Commonwealth Fund recently rated Canada’s health care system next to last after the US on virtually every measure of quality and access.

The chart accompanying this article provides a short list of some of the core health services that all seniors can receive in Scotland compared with the services available to all seniors in B.C.

Access to these services has long been advocated by COSCO as a necessary extension of the current Medicare system and as one that is aimed at prevention and based on need for the services and not ability to pay.

Primary care is omitted here because it is largely provided through a comprehensive system of community clinics and not comparable to the B.C. mostly fee-for-service system.

The information in the chart is drawn from the web pages of the large



British Columbians are paying more and more, out-of-pocket rather than through progressive taxes, for health care. The Canadian Medical Association reports that British Columbians are least likely to fill prescriptions due to their cost.

nonprofit, AGE UK. and its affiliate, AGE SCOTLAND.

In addition to the services listed in the chart, home care by publicly funded fully qualified community-based nurses is available free when medically necessary.

Other prevention-oriented services are also available. For example, bus travel is free and unlimited in Scotland for Scottish residents who are seniors over 60 or disabled. The objective is to promote more active lifestyles and better health by improving access to services and social networks.

Scotland and B.C. have populations of a fairly similar size. B.C.’s population was 4.58 million in 2013. Scotland’s 5.3 million in 2012.

Scotland has a higher percent of seniors over 65 than B.C. (17 percent

in Scotland in 2013, and 15.7 percent in B.C. in 2013).

Yet the constant refrain from governments and others in Canada is that (even) the current low level of social and health services for seniors is not sustainable.

In fact, the proportion of the Canadian population which is over 65 is 14 percent. That’s below the UK, where it is 16 percent and the OECD average of 15 percent.

Here in Canada, it looks like our current governments don’t seem to believe in prevention or improving the health or quality of life of seniors.

We have to question why health care for seniors in Canada is so poor compared with other jurisdictions and take concerted action to bring about change.

Advocacy and the National Association of Federal Retirees

By Leslie Gaudette

THE NATIONAL Association of Federal Retirees (formerly known as FSNA) is the largest national advocacy organization representing active and retired members of the federal public service, Canadian Armed Forces, Royal Canadian Mounted Police (RCMP), and retired federally-appointed judges, as well as their partners and survivors.

With 185,000 members including more than 50,000 veterans and their families, and 83 branches across Canada, the Association has a 50-year history of providing independent advocacy on issues affecting the financial security, health and well-being of its members and Canadians.

The Association is political, yet non-partisan.

In British Columbia, membership totals more than 30,000 people across 18 branches.

At its Annual General Meeting held in Montreal at the end of June 2014, advocacy was a key agenda item.

Delegates recognized that through legislation, policy, budgets and other means, the current federal government has demonstrated that its priorities are inimical to the mission and vision and to strategic advocacy priorities of the Association.

The National Association of Federal Retirees, through a resolution at the Annual General Meeting, identified a range of critical areas of importance and concern to its members, namely in the areas of health care, veterans, pensions and seniors issues.

For example, changes to provincial health transfer payments may result in \$31 billion in cuts to health care be-

tween 2017 and 2024, as estimated by the Parliamentary Budget Officer, and the Health Accord, which was due in 2014, was not renegotiated or renewed with the provinces.

Veterans Affairs offices have been closed and the financial deficiencies of the New Veterans Charter have not yet been resolved.

Seniors are affected by the lack of leadership on a national homecare strategy, which would provide them with the resources they need to remain in their homes, and by the elimination of door-to-door postal delivery in urban centres.

In the coming years, seniors will also be impacted by the increase in the eligibility age for Old Age Security (OAS).

And finally, on the pension front, we have seen an overall lack of leadership and solutions to help Canadians achieve retirement income security, including meaningful improvements to the Canada Pension Plan (CPP).

The National Association of Federal Retirees is committed to active involvement in the upcoming federal election.

While remaining non-partisan, the Association will mobilize, inform and educate members of the negative impacts of current legislation and policies, and of the election platforms of all national political parties and not only of the track record of the current government.

This will enable Federal Retirees members to make informed choices in the 2015 federal election.

Work is also in progress by the Association's National Office staff to consult further with veterans and veterans organizations on veterans' issues, and with a broad range of organizations including COSCO that are concerned with the current trend toward target benefit pension plans.

Submitted by Leslie Gaudette based on material provided and edited by Ian Blake and Sayward Montague.

Thoughts about advocacy...

“I don't believe in charity. I believe in solidarity. Charity is vertical, so it's humiliating. It goes from the top to the bottom. Solidarity is horizontal. It respects the other and learns from the other. I have a lot to learn from other people.”

– Eduardo Galeano

“Washing ones hands of the conflict between the powerful and the powerless means to side with the powerful, not to be neutral.”

– Paulo Freire

“If you ever think you're too small to be effective, you've never been in bed with a mosquito!”

– Wendy Lesko

411 Seniors Questions to Municipal Candidates

The following are examples of questions that seniors could ask of candidates for municipal government. Please feel free to use them and/or add any that are important to your community/ neighbourhood.

Housing

As well as lobbying the federal and provincial governments to engage in a public housing program, what commitment are you prepared to make as a City government to use City resources and municipal lands to increase the number of affordable housing units for seniors?

Transportation

How do you plan to address comprehensive transportation services for the City/municipality?

What commitment of resources are you prepared to put towards addressing public transit?

Do you agree it is time to make major investments in special transit for handicapped and frail seniors? How would this be done?

Do you support the mayor's modest proposal to include a HandyDART service increase of 10% over five years in a Provincial Government referendum package?

Seniors don't feel safe on public transit. How would you address the issue of safety for seniors?

Health

Will you commit to providing active support to federal and provincial governments to develop a national strategy for seniors' care, including prevention and home care services, as

recommended by the 2014 Report of the Canadian Medical Association? If yes what would your action plan look like?

How would you support programming to end social isolation of seniors?

Non-profit seniors serving organizations play an important role in ensuring the health of older people. Would you initiate/support a council motion to call on the governments to include core funding in their health care budgets for non-profit senior serving organizations?

Parks and Recreation

Research clearly states exercise and social interaction are keys to the health and well being of seniors. Are you prepared to recognize seniors often do best in senior dedicated activity areas and if you do, would you establish designated times for seniors to use in community centres (e.g. gym)? How do you see this happening?

Emergency Services

New provincial regulations for ambulances have increased the waiting time of arrival in many cases. The Fire Department shows up first and has to attend while they wait for ambulance to arrive.

What is your view regarding the downloading of ambulance services to the Fire department?

Street safety

Seniors often can't cross a street during the time the walk sign is on. This time problem also applies to crossings where there are no lights. How would you address this potential safety problem?

Sidewalks

Would you make buckling sidewalks a priority and allocate more money from your Engineering Budget to address this High Risk concern?

How would you ensure timely repairs/improvement to sidewalks when needed?

Multi-cultural

Given that many immigrant older people find it difficult to learn English, what steps would you take to increase their current access to information?

In 2013 the Federal Government changed the Old Age Security System Law and changes will mean many more immigrant seniors in Canada will have to live 10 more years in poverty and will have to rely on local services for help.

How would you respond to the Federal Government doubling the time some sponsored parents and grandparents live without OAS? Do you consider it important that a council officially respond to the Federal Government about these changes; why and how?

Downloading of funding

Would you lobby the federal/provincial governments for help in solving issues that seniors face? Give us a brief description of what you see as issues facing seniors in your municipality. If you are elected, what are the key issues you would focus on to deal with these challenges?

Municipal governments are asked by their residents to provide an ever expanding range of services, example affordable housing. Do you think council should try to satisfy these demands? If so, do you have concerns about the present tax sharing system between the three levels of government? What changes do you think would improve the division to make it economically possible for local government to respond to local needs?

Privatization

More and more senior governments are promoting privatization of the delivery of public services and implementing public private partnerships for new contracts.

Do you think this will improve or be detrimental to the purposes of social services? Explain why.



British Columbia sent a large delegation to the annual meeting of the National Pensioners Federation in Saskatoon. The

meeting marked the 70th anniversary of the NPF, which advocates on seniors' issues at the federal level.

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 and organizations wishing more information about joining COSCO should write or phone Ernie Bayer and request a membership package.