



COSCO News

Council of Senior Citizens' Organizations of B.C.

Number 126



www.coscobc.org

December 2023

<https://www.facebook.com/COSCOBC/>

From the COSCO President



As we move from celebrating the many seasonal holidays that light up the darkness of our world at the time of the Winter Solstice, to ringing in the New Year of 2024, it seems time to reflect on some of the successes achieved this year, the many gifts we have received and some gifts we would like to make. A key gift this year was the opportunity to meet in person once again, and at the same time use hybrid means to bring in participants from across the province. What we are looking for from Santa this year, is a glitch-free hybrid experience!

We are grateful for the gifts from collaborating with partner organizations. In September we sent five delegates to the first in-person biennial convention held by National Pensioners' Federation (NPF) since 2019. After working hard to pass a number of resolutions, we met with MPs on our lobby day to support the theme *Ageing With Rights*. We celebrated with the Canadian Coalition Against Ageism during the week of the Older Person, starting with the International Day of the Older Person on October 1 and ending with Ageism Awareness Day on October 7. As a key community member of the BC Health Coalition, COSCO contributed to a panel discussion at the November 20 Town Hall, *Sticking Up for Public Health Care*. At the local level, we work in coalition to advocate for insourcing HandyDART workers with the aim to improve working conditions along with the service to seniors and persons with disabilities – several Mayors and Councils are now signed on to this campaign. Serving on the Public Awareness Committee of the Canadian Medication Appropriateness and Deprescribing Network we promote Safe Medication Use and welcome several new provincial level reps from seniors' groups from Alberta, Saskatchewan, Nova Scotia and Newfoundland

& Labrador. We collaborate with the SFU Gerontology Centre find ways to collaborate with seniors centres to support social connectedness of older persons.

This year brought important wins: Bill C228, the Pension Protection Act was enacted into law. We are just learning the details of the Dental Plan which will cover seniors with low and moderate incomes. Minister of Social Development and Poverty Reduction, Sheila Malcolmson assured us in June that the Poverty Reduction Strategy update slated for release in March 2024 would include measures aimed at the growing economic plight of low-income seniors, particularly those who rent. We trust that Santa will bring much needed changes to SAFER (Shelter Assistance for Elderly Renters) so that rents truly are affordable. We participated in proclaiming October 30 as "Non-profit Recognition Day" in Victoria on October 30, where funding was announced to provide sustainable core funding for non-profits across the province. We are thankful for the ongoing negotiations federally on the Pharmacare program which we hope will bear fruit soon, as well as for the signing of the Canada-BC Health Care Agreement, the first in the country.

Finally, we thank our generous members as you renew your memberships this year using our new on-line membership system! I've really appreciated meeting with some affiliate groups over the past year. Your advocacy, support and commitment are critically important as we work together to improve the lives of seniors and retirees. And we couldn't do all this without the support of COSCO's hardworking executive and committee members, along with the many volunteers with the COSCO Health and Wellness Institute. Happy New Year to you all!

Leslie Gaudette, President COSCO

Council of Senior Citizens' Organizations of BC (COSCO)

Visit us at www.coscobc.org &
<https://www.facebook.com/COSCOBC/>

President:

- Leslie Gaudette (LSA)
pres@coscobc.org

First Vice-President:

- Barb Mikulec (BCRTA/VRTA)

Second Vice-President:

- Annette O'Connor (LRTA)

Secretary:

- Albert Lemonnier - (ILWU)

Treasurer:

- Stephane Lapierre (Carrefour 50+)

Membership Secretary

- Linda Forsythe (VOBSS)
membership@coscobc.org

General Vice-Presidents:

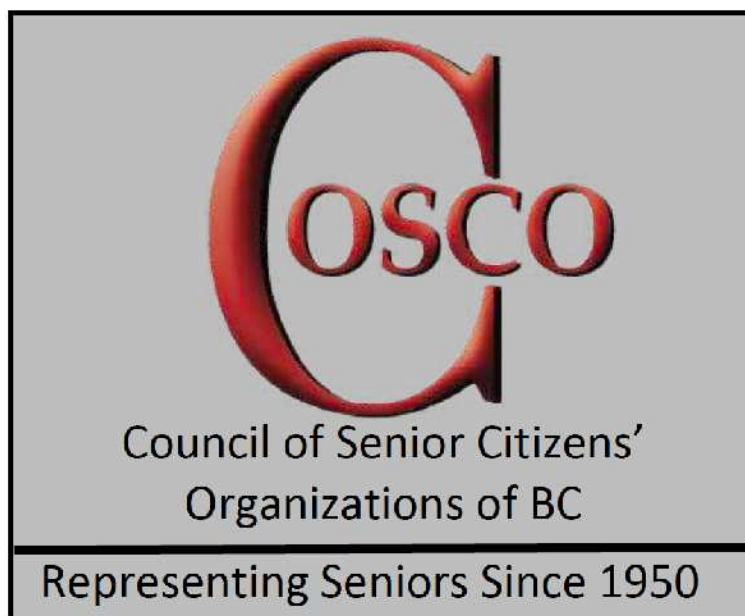
- Wilf Brodrick - (BCGREA)
- Don Bayne - (BCOAPO)
- Barb Mikulec (BCRTA)
- Diane Wood - (BC FORUM)

Members-at-Large:

- Navin Goburdhun - (BCGREA)
- Patrick Harkness - (BCGREA)
- Marion Hartley - (SVSHC)
- Agnes Jackman - (BC FORUM)
- Barry Jones - (CNPA)
- Rod McIvor - (CNPA)
- Jean Sickman - (BCGREA)

Committee Chairs:

- **Income Security** - Terri van Steinburg
- **Communications** - Linda Forsythe
- **Finance** - Wilf Brodrick
- **Health** - Louise Holland
- **Housing** - Barb Mikulec
- **Membership & Fundraising** - Agnes Jackman
- **Strategic Planning & Policies** - Leslie Gaudette
- **Transportation** - Jerry Gosling



IN THIS EDITION

| | |
|---|-------|
| From the COSCO President | 1 |
| MP Don Davies Speaks on Dental Care | 3 |
| Sticking Up For Public Health Care | 4-5 |
| Pharmacare | 5 |
| Note on Vaccines | 5 |
| From the Office of the Seniors Advocate | 6 |
| Snapshot of BC Seniors | 7-8 |
| SFU Seniors Leadership Awards | 9 |
| Deprescribing Medications | 10-11 |
| Seniors Health and Wellness -- Free Online Theme-based Series | 11 |
| Hearing Loss -- Access to Help | 12 |
| Housing | 12 |
| National Pensioners Federation | 13 |
| In Case of Emergency -- Free Cell Phones for Seniors | 13 |
| Let BC Seniors Ride Transit Free | 14 |
| Home Insurance Through 'belairdirect' | 15 |
| 'Stay On The Road' Workshop Is Full! | 16 |
| COSCO Associate Membership Form | 16 |

About COSCO

COSCO is an umbrella organization that brings together 74 different seniors groups, representing approximately 80,000 older adults to work on common issues.

COSCO is affiliated with the 1,000,000-member National Pensioners Federation (NPF) which promotes these issues at the national level.

COSCO is a registered non-profit organization.

Send your letters to the editor or other contributions to:

cosconews.editor@coscobc.org

Disclaimer: Unless otherwise noted, opinions, viewpoints, accuracy of facts submitted by the member is the sole responsibility of the writer, and not necessarily the opinion of the Editor, Executive, or Membership of COSCO.

MP Don Davies Speaks on Dental Care

Don Davies, the NDP MP from Vancouver Kingsway joined the COSCO Delegates' meeting in November to provide an update on the Dental Care program that will likely be implemented by April 2024. It is based on the premise that oral health is part of primary health. The NDP has driven this issue forward and wants to see it as universal, like primary health care in Canada. However, what we will have in 2024 is dental care for those under 18, those over 65 and the disabled. By the end of 2024, all these groups should be covered. This plan is based on income, so that people who earn less than \$70,000 a year will be covered. People earning between \$70-90,000 will have a co-pay system. The plan will cover everything except cosmetic

dentistry. The plan will pay 85-90% of the dentistry fee schedule. Sun Life has been awarded the contract to manage the program and process the claims. As with all new national programs there will be glitches and bumps, but people who haven't seen a dentist in years, are hopeful that they will get some relief soon.



Don Davies with Leslie Gaudette, Barb Mikulec & Diane Woods

Update: The federal government announced December 11th that the program will be expanded and every one of the groups noted above will have dental coverage by the end of 2024. Congratulations to the NDP for their dogged determination to bring this plan forward. Well done!

The Vancouver Sun noted the following services to be covered under the Canadian dental care plan:

- Preventive services, including scaling (cleaning), polishing, sealants and fluoride
- Diagnostic services, including examinations and x-rays
- Restorative services, including fillings
- Endodontic services, including root canal treatments
- Prosthodontic services, including complete and partial removable dentures
- Periodontal services, including deep scaling
- Oral surgery services, including extractions.

Citizens' Services Minister Terry Beech said Canadians do not need to do anything at this stage — the federal government will reach out to eligible people by mail to invite them to apply for the benefit when it's their turn. The first letters will go out to invite seniors 70 and up to apply for the plan — those seniors will apply over the phone.

Here's when seniors can expect to receive those letters:

- Seniors aged 87 and above starting in December 2023
- Seniors aged 77 to 86 starting in January 2024
- Seniors aged 72 to 76 starting in February 2024
- Seniors aged 70 to 71 starting in March 2024

Then, in May 2024, the application process will switch from the telephone to online as people aged 65 and older become eligible to apply.

Be patient as this program rolls out. And DON'T cancel your extended health/dental plan if you have one. Wait and see. More information from the federal government:

<https://www.canada.ca/en/health-canada/news/2023/12/the-canadian-dental-care-plan.html>

Private/Public Debate: Sticking Up for Public Health Care



The crisis in our public health care system has led some to think that more privately provided care would reduce wait times and improve access to care.

We are now seeing private companies offering, for a price, membership in a program that gives us the whole range of services we either can't get under public health or have to wait a long time to get. Yet the evidence shows that adding private care to the mix usually lengthens wait times.

The Canadian Medical Association partnered with Globe and Mail newspaper on a Forum entitled *Public-Private Healthcare – Finding the Right Balance* held in Vancouver on November 23 to discuss and debate this issue. The BC Health Coalition, worked with partners including Canadian Centre for Policy Alternatives, the Council of Canadians and Canadian Doctors for Medicare with their own event entitled *Stick up of Public Health Care*. With an all-star panel, including COSCO's own president Leslie Gaudette, we heard about the cost of profit driven care.

As reported by the BCHC, the cost of profit-driven care panel explored the impacts on population health due to the rise of corporate profits as seen in the predominantly private pharmaceutical market, the publicly contracted private long-term care sector, and in primary care. Each of these sectors are strong cautionary tales of what we risk when profit-driven health care is involved.

We have written about the lack of a national pharmacare program in earlier issues. The debate rests on who gets access to drugs and the exorbitant profits that the pharmaceutical industry makes. It is little wonder that they have a powerful lobby in Ottawa, and elsewhere.

For seniors specifically living in Long Term Care facilities, Gaudette talked about the fact that for-profit private providers give less care to the residents, yet listed record profits (113% increase in the last 5 years). These for-profits also get government money for

building costs yet get to keep (and sometimes sell) those buildings.

Large investor-driven companies such as Telus Health, Walmart (Jack Nathan clinics), and Loblaw (Primacy Management), among other large private corporations, have acquired a growing number of primary care clinics and virtual care platforms. According to one speaker, these companies are quickly becoming more entrenched in our health care system. They are making themselves indispensable and developing formal partnerships with provincial governments. But their objective is profit, not the health of our citizens.

With a health care system under pressure often comes calls to turn to the private sector to "fill-the-gaps". This false narrative both ignores the evidence that shows how privatization deepens the gaps in the system by putting additional strain on the public system providers. It also distracts from having conversations about evidence-based solutions that can make a real difference within the public system. Solutions to our health care crisis are often found in the problem itself.

According to another speaker, the real issue isn't a lack of family doctors but a lack of publicly funded primary care infrastructure. Research has shown that almost half of family doctors surveyed within Vancouver Coastal Health region said they would prefer to be an employee of a clinic rather than a small business owner. This would allow them to work in teams, have a stable income, be able to take vacation, and go on parental leave. However, the way that primary care delivery is currently organized does not provide these options for family practice.

An alternative model would be to structure primary health care delivery in a similar way to the public education system. With this approach, residents would fall under a catchment area and have access to their local publicly funded community health centre. In a community health centre, family doctors would be salaried employees that benefit from working with an interdisciplinary team of allied health professionals, an approach that has been shown to improve work satisfaction and reduce burnout.

You deserve a team: engaging the full team of allied-health professionals. This means that housed in one

office along with a doctors might be nurse practitioners, physiotherapists, mental health workers, pharmacists, and technicians. It would allow better diagnosis, and more immediate intervention to solve a problem before resorting to a hospital and drastic intervention.

The quality of work is the quality of care. We need to see that the people who work in our health care system are properly paid and have workloads that are manageable. The shift by our previous Liberal provincial government to contract out the cleaning and kitchen staff had devastating results on those who actually do the work. Now that those workers are back

in-house, with proper wages and working conditions, these problems should decrease.

The work the provincial government did during the pandemic also shone a light on the working conditions of the care aides especially in Long Term Care facilities. We need to stop subsidizing the private providers and pour our resources into providing service by a workforce that is interdisciplinary, with a manageable workload and properly paid. It's a good start.

For the full report see:

https://www.bchealthcoalition.ca/report_back_on_our_town

Pharmacare



Even though the NDP and Liberals signed a Confidence and Supply agreement that meant the Liberals would continue to get NDP support for their government, only 1 of the 2 major programs will pass in parliament this year. And it's the Dental Program. Pharmacare is still waiting. The decision now rests with the NDP on whether to continue supporting the Liberal government. And it looks like the NDP will continue with their support as they believe that they are

making progress on the Pharmacare program. Don Davies (NDP MP) did say that even though they are in heated discussions with the government representatives, things are moving forward. If we get a universal, public pharmacare program it will be a huge win for the people. To go up against the power of the pharmaceuticals is a daunting task. Let's hope we win.

Note: BC has a pharmacare program for lower income residents. It will pay drug costs after you have met the criteria.

Note on Vaccines

The latest COVID vaccine is now available and so is the annual flu vaccine. You will likely need an appointment with a pharmacy to get these vaccines. However, you can call 1-833-838-2323 to find out where to get a vaccine (or two). They will also book it for you. The call number is answered seven days a week from 7 AM to 7 PM.



From the Office of the Seniors Advocate

Every Voice Counts: Survey of residents in Long Term Care and their families



BC Seniors Advocate
Isobel Mackenzie

The following survey covered 297 publicly subsidized care facilities in B.C. and received responses from over 10,000 residents and almost 8,000 family members and close friends. Just over 500 British Columbians volunteered to assist residents to complete

the survey. The questions and design parallel the 2016/17 survey allowing reliable comparison to previous results.

Survey results show little improvement in areas such as frequency of bathing, help at mealtimes, meaningful activities, engagement with staff and other residents and the overall ratings of quality remain relatively unchanged. Despite these shortcomings, residents continue to give high marks to long-term care home staff for their skill, compassion, and ability to treat residents with respect.

Highlights from the survey include:

- 54% rated the overall quality of the care and services received in the home as 'excellent' or 'very good'
- Almost 80% of residents felt they could express their opinions 'always' or 'most of the time'
- 81% of residents decide how to spend their time
- 85% of residents felt their privacy was respected during care 'always' or 'most of the time'
- 95% of residents reported they have never been treated unfairly by staff due to their race or cultural background, and 97% reported they have never been treated unfairly due to their sexual orientation
- 88% of residents feel safe when they are alone 'almost' or 'most of the time'
- 87% of residents reported they trust staff to take good care of them and staff treat them like a whole person 'always' or 'most of the time'
- 48% of residents feel their care home 'sometimes', 'rarely' or 'never' feels like home
- 51% of residents said staff only 'sometimes', 'rarely' or 'never' make time for a friendly conversation or ask how to meet their needs

- 50% of residents reported they 'sometimes', 'rarely' or 'never' had the same care aide most weekdays
- 33% of residents report that they only 'sometimes', 'rarely' or 'never' get help to eat when needed
- One-third of residents only 'sometimes', 'rarely' or 'never' get to decide when to get up
- 29% of residents only 'sometimes', 'rarely' or 'never' get help right away if needed although 79% report they could get the services they need 'always' or 'most of the time'
- Almost two-thirds of residents only 'sometimes', 'rarely' or 'never' find enjoyable things to do on evenings and weekends or find opportunities to explore new skills or interests.

The report includes the following 8 recommendations:

1. Increase staffing levels in all care facilities to the nationally recommended 4.1 hours of direct care per resident per day
2. Increase flexibility of scheduling
3. Increase social connections for residents by creating more meaningful activities to improve resident engagement
4. Improve food and mealtime experience to meet residents' preferences, including nutritional and culturally-specific dietary needs
5. Implement compulsory professional education for all care home staff in cultural safety and emotional health and well-being of residents
6. Allow all residents (or substitute decision maker, if appropriate) to name their "essential visitor"
7. Work closely with the Independent Long-Term Care Councils Association of BC to raise awareness and increase the function of resident and family councils at all long-term care facilities in B.C.
8. Improve community-based services, in particular home support, to ensure seniors are not required to seek long-term care unless their care needs cannot be met in the community.

For more information click on this link: <https://tinyurl.com/4b9hmuz2>

or call the office to get a copy of the report 1-877-952-3181

Snapshot of BC Seniors

The Seniors' Advocate, Isobel Mackenzie met with COSCO Delegates on December 8th and gave the following summary of the situation of seniors in the province.

General

- Population: in 2023 there were 1,016,365 seniors in BC. This is 20% of the total population of 5,000,880.
- 95% aged 65+ live independently and 77% aged 85+.
 - 9% aged 85+ live in assisted living.
 - 13% aged 85+ live in long-term care.
 - 80% aged 65+ are homeowners.
- 14% are employed and 41% are volunteers.
- 88% have driver's license at age 65 while 58% have one at age 85 and 40% aged 85+.
- 6% of people aged 65+ diagnosed with dementia. 3% of seniors with dementia are aged 65-84 while 20% are aged 85+



Financial picture

- Median seniors income is approximately \$3400 (\$48,000 avg.)
 - 25% of seniors live on less than \$22,000
 - Median income of people aged 35-54 is \$54,560 (\$69,161 avg.), which is 65% higher than that of seniors
 - 45% of seniors live on less than minimum wage
 - * 6% of the labour force earns minimum wage



Retirement Savings

- 38% of workers have Registered Pension Plans
- \$50,000 median net savings of seniors
- 40% of seniors do not have RRSP/RIFs
- 21% of B.C. tax filers contributed to RRSPs (2019)
- \$404K – \$1.3M value of house in B.C. Senior renters are in a much more precarious position.



Costs of Ageing

1) The costs of Extended health include:

- Eyeglasses
- Hearing aids
- Mobility aids
- Dental care
- Supplies



2) Help at home

- assistance with household (cleaning, groceries, banking, etc.)
- personal care (home support)
- home maintenance



3) Assisted living



4) Long-term care



Patrick Harkness, Isobel Mackenzie, Leslie Gaudette and Al Lemonnier



Isobel Mackenzie receiving her lifetime membership in COSCO from President Leslie Gaudette

Supports for Renters

Of the 150,000 senior renters

- 95% live alone
- 81% have incomes between \$15,000 - \$25,000
 - 24,000 Shelter Aid for Elderly Renters recipients
 - 23,000 Seniors Supportive Housing clients
 - 2 out of 3 seniors who rent receive no government support for housing



1) *Shelter Aid for Elderly Renters (SAFER)*

- Average rent \$1,434 (VANCOUVER)
- SAFER maximum \$803
- Difference -\$631

2) *BC Housing Seniors Subsidized Housing (SSH)*

- 67% have an income between \$15,000 and \$25,000
- Nearly 3-year avg. wait time
- 17% (1,600) seniors waiting 5+ years



Cost of Home Support

Scenario of Estimated Cost to Health Authority of Fully Subsidized Home Support (1HR) vs. Long-Term Care (LTC) for a Single Senior per Year

This scenario is for a single senior with an income of \$29,000. For 1 hour of home support daily, the cost is \$14,100. The client pays \$8,900 and the Health Authority pays 5,200. The same person getting 1 hour of home support but not having to pay the regulated fee, the Health Authority would pay the whole \$14,100. The cost of the same person living in Long Term Care is \$82,100. The client pays \$22,200 and the Health Authority would pay \$59,900.

Those recently discharged from hospital should get free home support and drugs for a few weeks. Also, those in palliative care should get both for free.

Presentation by Isobel Mackenzie, Seniors Advocate (December 2023)

SFU Seniors Leadership Awards

In 2001, the Simon Fraser University Gerontology Research Centre (GRC) established the Seniors Leadership Award to recognize the contributions that British Columbian seniors make as volunteers. This year's recipients are more than just volunteers, their dedication to advocacy and improving the lives of seniors is

unwavering and does not go unnoticed. The GRC is honoured to recognize the incredible work of this year's 2023 Seniors Leadership Award recipients: Sandra Gebhardt, Audrey Hatch, Kathleen Jamieson, Penny MacCourt, and Marion Leslie Pollack.

COSCO is pleased to see two active members have been recognized. Congratulations Kathleen and Marion.

Kathleen Jamieson, a dedicated advocate for public health care, served on the Council of Senior Citizens' Organizations of BC (COSCO BC) Board of Directors and as Chair of COSCO's Health Committee. Her extensive involvement includes leadership roles in the National Pensioners' Federation, the BC Health Coalition, and the Action for Reform of Residential Care (ARRC) Steering Committee.



Marion Leslie Pollack is the Past-President of the 411 Seniors Centre Society. Pollack has been a volunteer with the 411 Seniors Centre Society for many years and has dedicated her time and expertise in system navigation to connect older adults with the programs, services, and resources they require. As an advocate for affordable housing for seniors, Pollack has addressed issues such as accessibility, affordability, and suitability for aging in place. She is also a member of COSCO's health committee.

Information taken from SFU Gerontology

Deprescribing Medications

Plant the Seeds for Deprescribing was the apt theme of the National Meeting of the Canadian Medication Appropriateness and Deprescribing Network (CADeN) held in Montreal last month. This meeting aimed to reduce inappropriate medication use and promote access to safer alternatives by bringing together patient partners, community leaders, healthcare professionals, researchers, representatives of healthcare organizations, students, and decision-makers. The meeting was also an opportunity to network and learn more

about what others were doing across Canada that could inform our approaches here in British Columbia and contribute to planning for future work. We also learned more about the proposed Canada Drug Agency. In addition to 18 reps from national organizations out of 90 participants, there were 11 from BC and every province was represented. COSCO was invited due to our long-standing representation on the Public Awareness Committee. Here are some highlights from this meeting.



CADeN's Committee Meetings: After introductory remarks and a brief update from Executive Director Jim Silvius and Scientific Director Emily McDonald, the committees reviewed initiatives to date and started planning for the next year.

CADeN's Public Awareness Committee: Bill Berryman, Nova Scotia; Jim Silvius Chair; Leslie Gaudette, BC; Connie Newman, Manitoba (in profile).

Susan Fitzpatrick, head of the Canadian Drug Agency Transition Office (CDATO), provided an update on efforts to create a Canadian Drug Agency (CDA) and shared next steps towards the implementation of a national strategy for the appropriate use of medications in Canada. Meeting participants then worked in small groups to share perspectives on priority activities for the CDA's appropriate use program and discussed ways to evaluate these activities and then communicate results to the public.

We heard about several successful Canadian initiatives to improve the way we use medications, with each presentation including a community partner along with the academic researcher. Projects showcased include:

- *Get better sleep with Sleepwell:* Sleepwell helps patients get better sleep through Cognitive Behavioural Therapy for Insomnia (CBTi).
- *MedSafer: an IT tool to support deprescribing:* MedSafer, an IT tool, helps prescribers initiate and complete the deprescribing process for different patient populations.

- *A Provincial Deprescribing Program: SaferMedsNL:* a program set up a reimbursement program for community pharmacists' deprescribing activities, raised public awareness, and educated health-care professionals. This multi-stakeholder approach is known as collective impact.
- *Preventing re-exposures to previously harmful medications:* ActionADE enables healthcare professionals to document patient-reported adverse events and share this information across care settings to reduce the risk of re-exposure to the drugs involved, an all-too-common phenomenon.

One workshop, ***Towards Reconciliation: Partnering in Indigenous-led Research***, addressed oppression and racism Indigenous community members continue to face when it comes to receiving care, including pharmaceutical care. Verna Arcand, Member of the Alexander First Nations, and Rhona Schooner, member of Nuxalk First Nation shared personal experiences with pharmacist and medications along with the importance of traditional medicines in their cultures.

The importance of increasing the decision making and involvement of Indigenous community members in health education and research by describing their efforts in this direction, including the co-development of a model for culturally safe pharmacy services.

Many other stimulating presentations were made along with group activities aimed at finding ways to reduce the harmful effects of medication overload. This culminated in voting, resulting in the participants' top three ideas for reducing the harmful effects of medication overload as:

- Produce a "Canadian Heritage Commercial"-style educational video on medication appropriateness and deprescribing. Blending humor and emotion, this short video would encourage patient empowerment and be broadcast across the country.
- Encourage each province and territory to adopt a collective impact approach, a "SaferMedsNL 2.0". This would include support to implement evidence-based initiatives,

improved collaboration between healthcare professionals and patients, the integration of deprescribing curriculum in healthcare professional education, and public awareness campaigns.

- Create a "National Spring Cleaning Your Medications Day", to encourage patients to re-evaluate their medications with a healthcare professional in an effort to avoid medication overload.

In summary, all agreed that prioritizing public awareness and education on the deprescribing, as well as greater government involvement, are necessary to create change on a systemic level! Now the question is: what can we do in British Columbia? The first thing each of us can do is talk with our doctor or pharmacist to have a complete drug review. And there'll be more.

This article is a precis of the full report of the meeting available at <https://tinyurl.com/44j5494c>.

Submitted by Leslie Gaudette



Seniors Health and Wellness Institute Society, COSCO OFFERS FREE ONLINE THEME-BASED SERIES in 2024

Check our website for details: <https://seniorshelpingseniors.ca/>

Seniors' Health and Wellness Institute Society, COSCO, has big plans for our very popular Zoom hosted sessions in 2024.

January begins with a selection of four workshops that have been translated into Cantonese, thanks to the efforts of our bilingual presenter, Margaret Ng.

The series begins January 10, 2024. To learn more, go to our website at: <https://seniorshelpingseniors.ca/>

February and March will feature the Safety Series, running Wednesday mornings and set to begin February 7, 2024. To date it will include at least six topics related to personal safety: Falls Prevention, Safety in the Home, Pedestrian Safety, Life without Driving, Emergency Preparedness and Frauds and Scams.

Details and registration of the Safety Series will be online at our website link [above] in early January of 2024.

The ever-popular Personal Planning Series of seven sessions was presented in October/November of 2023 to capacity crowds. Therefore, we are working on a timeline to present the series in 2024 but details are yet to be finalized. Keep checking our website to see when it might be offered.

Further questions to Barb Mikulec at: president@seniorshelpingseniors.ca

Hearing Loss – Access to Help



COSCO health committee members met with two audiologists, Heather Ritchie and Danielle LaFleur from HelpBCHearBetter.ca to discuss their work. This non-profit organization wants the BC government to set up a program for hearing health, much like ones already provided in Manitoba, Ontario, Alberta and Quebec. And ultimately, they want the program to take place across Canada.

Helpbchearterbetter.ca states the following: “A large and growing proportion of British Columbians have hearing loss... Over three-quarters of seniors have hearing loss in both ears. Left untreated, hearing loss can also adversely impact the health and quality of life of our population, especially seniors. Research has shown a link between hearing loss and cognitive decline. Treatment with hearing aids and counselling may help to mitigate this risk for those at greater risk for cognitive decline. Hearing loss also contributes to social isolation among seniors, which contributes to poorer health. A significant factor contributing to lack of hearing aid usage is the high cost of hearing aids. British Columbia lags behind

other provinces and territories when it comes to consistent hearing health coverage.

We believe that a provincial Hearing Health Program is a strategic investment in health, as untreated hearing loss can lead to increased health care costs. A Hearing Health Program will keep the people of BC safer, healthier and more connected with their communities.”

Issues of present-day hearing aids include

- costs and profit margins
- technology including rechargeable devices
- ability of people to manage these very small devices especially if they have poor eyesight or arthritic fingers

The Breaking Barriers research team from the UBC School of Audiology and Speech Sciences is inviting participants to an online focus group in order to improve the hearing health care journey for British Columbians. If you are an adult 50 years and older who has personal experience expressing a hearing concern to a primary care provider in the last 5 years or an informal caregiver who has supported others and would like to take part in the focus group, contact Craig at craig.stevenson@audiospeech.ubc.ca

Check out the website to find out more about the petition on this issue: <https://www.helpbchearterbetter.ca/>

Housing

Property Taxes

For those who own their home, be sure to look into the Property Tax deferral program. You can go to gov.bc.ca and type in property tax deferral to get the application. It’s a bit complicated (at least it was for me), so you can take your notice of Property Taxes to City Hall and ask them to help you join the program. What it means is that you can defer your taxes until your property is sold.

<https://www2.gov.bc.ca/gov/content/taxes/property-taxes/annual-property-tax/defer-taxes>



Housing as a Human Right

In 2019 Canada passed the National Housing Strategy Act making housing a Human Right. It is based on the UN Human Rights declaration. This strategy is a win for renters as it brings international law and principles into the discussion. The federal government also created a position of Federal Housing Advocate. It moves the housing model from one of charity to one of rights. <https://laws-lois.justice.gc.ca/eng/acts/n-11.2/>



National Pensioners Federation

On behalf of the NPF executive and our collective membership across Canada I share **Season's Greetings and Best Wishes** for the coming year.

In reflecting upon this past year's accomplishments I wish to express our gratitude to the many organizations and individual members that helped us to do some very heavy lifting. This has been an exceptional year for successful networking and collective action.

The decades long struggle to achieve Pension Protection with the Royal Assent of Bill C-228 taught us to 'never give up'. We marked this celebration at our 2023 Convention but reminded all that our work is never done and we will continue to stand on guard as the government rolls out the regulations.

Today, as this COSCO publication is finalized we are welcoming the second phase to the National Dental Care Plan that covers seniors. Another long-time goal achieved by supportive political parties understanding that Canadians demand results and this is their ultimate job. Financial security and optimal health are key drivers in living a life of dignity for all Canadians. Next up, National PharmaCare to support a new generation of Health Care delivery that invests in people. Isn't that what we expect from government? Protecting and expanding our public services and programs continue to be our priority.

Submitted by Trish McAuliffe, NPF President

NPF 2023 Convention

Thank you to COSCO for sending your full delegation to Ottawa this year and for contributing to the successful engagement. Visit our NPF website Convention Tab for a full summary and photo collection.

www.nationalpensionersfederation.ca



2023 NPF Convention "Age With Rights"
Trish McAuliffe with Minister of Labour and Seniors, Seamus O'Regan and NPF Executive members Barb Mikulec, Barry Thorsteinson, and Bernie Larusic

In Case of Emergency

Cell phones are distributed free by Vancouver Police to low-income seniors to ensure they can call 911 in an emergency. The free phones do not have data, texting, or internet capabilities and are to be used only to call 911. These phones can be picked up at the public information counter of the police station at 2120 Cambie Street, Vancouver. For vulnerable seniors this may help during an emergency. The phones include a 14-day standby time which means they do not need to be charged every day, and have large, easy to read keys. There is no set age to qualify, but people who believe they meet the criteria should come and speak with the Vancouver Police Department staff member.



Let BC Seniors Ride Transit Free

The Council of Senior Citizens' Organization of BC (COSCO) is considering advocating for transit service in BC to be provided at no cost to seniors. The ever-increasing cost of transportation is making it difficult for many seniors to travel within their communities. To address this issue, many transit systems around the world including some in Canada are moving to provide free transit services to seniors. Our province should be emulating this.

In Ottawa seniors ride free on Wednesdays and Sundays. Those days were probably chosen as they usually carry lighter passenger loads and offering seniors free rides will help balance demand with capacity. In our province, BC Ferries has a similar practice offering seniors free passenger fares from Monday to Thursday.

In Brampton Ontario, seniors ride free all the time. As of July 1st, transit became free for Quebec seniors in Montreal. In making the announcement the Montreal mayor stated, "Seniors have helped build Montreal. Their contribution is still immense today. With free public transit, seniors can continue to participate fully in life in society and they have more money in their pockets. A great way to combat inflation!"

Low-income seniors with annual incomes under \$27,514 ride free in Calgary. The best BC can do for its Seniors in BC is an annual bus pass for \$45 for those who are receiving the Guaranteed Income Supplement.

Nowhere in BC do seniors ride transit at no charge. That should change now and across the province for many reasons.

Seniors on the Move is a project led by Better Environmentally Sound Transportation (BEST), funded by the Vancouver Foundation. The group produced a report in 2021 on senior's transportation in BC entitled "Life Without Driving." This is the transition faced by seniors when "hanging up the car keys," is forced on them, for health or economic reasons.

Once we hit the age of 80, we are subject to evaluations of our ability to drive. In some cases, seniors lose their licence. The average male driver will outlive his driver's licence by 7 years while the average for females is 10 years. Many who stop driving have no experience using transit. They should be encouraged to start to use transit before they hang up the keys.

Offering free rides removes "fare box resistance" and would be a key strategy to encourage the transition to transit.

In rural areas, many seniors really should be hanging up the keys. In some cases, they are driving vehicles in need of major repairs. In others they no longer have the ability to drive safely. Yet they continue to drive as transit options are limited or non-existent.

Many seniors, especially those renting and depending on only CPP and OAS support simply can not afford a car. According to the CAA, the annual cost of operating a 5 year old Toyota Corolla could now be over \$11,000. So, after paying the rent, buying groceries, and covering the cost of utilities and other household expenses, there may be no money left for a car.



Free transit would facilitate activities such as shopping, going to medical appointments, recreational activities and maintaining social connections. Seniors might also find that they become part of a "bus family" of regular riders.

Many seniors are concerned about the overheated world they are leaving their grandchildren. Free transit could make the move to transit more attractive as they would also be helping to address climate change. Every person making the choice to trade in their car for transit is helping address this issue. According to the CAA, getting that old Toyota off the road will remove a source of over 3 metric tons of greenhouse gas per year. As a bonus, the "active transportation" aspect of walking to and from the bus stop provides an opportunity to get regular exercise.

Transit is operated by just two service providers in BC. Greater Vancouver is served by Translink while the rest of the province has BC Transit systems. It should therefore be a straight forward process to remove transit fares for seniors in short order. It would be a timely change.

Submitted by Tim Larsen (Powell River)

Say Hello to Exclusive Savings on Home Insurance Through 'belairdirect'

This Fall, Johnson Insurance began an exciting rebranding transformation, evolving into belairdirect while preserving all the ingredients and history that made this brand so well-respected. Under the belairdirect brand, you will continue to have access to exclusive offers and coverage, ensuring that insurance is one less thing for you and your family to worry about.

We understand that you require coverage that makes your life easier. Fortunately, belairdirect has you covered. As a member of COSCO, our tailored insurance deals are designed to simplify the insurance process for you, providing convenience and peace of mind.

You'll also enjoy enhanced home coverage plus a suite of helpful digital tools that make managing your insurance a breeze!

Visit <http://belairdirect.com/savings> or call 1-833-887-4626.

Lisa Hansen, BA, CAIB, CEBS, FLMI Manager, Group Benefit Travel - Affinity Strategy



Peace On Earth





- Are you nearing 80?
- Wondering about driver assessment?

You should attend our virtual workshop.

This practical guide for senior drivers will help you learn more about the driver assessment process. It will be of particular interest to drivers who are approaching 80. However, drivers of any age are welcome to attend and learn more about the assessment process. Participants will learn about the ICBC driver assessment which determines whether they can continue to drive.

The workshop is a joint presentation of the Insurance Council of British Columbia and the Insurance Council of Ontario.

This free workshop is held via Zoom on:
Wednesday, October 23, 2024 from 10:00 am – 12:00 pm

To register, click the link below. If the link doesn't work for you, copy and paste it in your browser.



COSCO Associate Membership



Name: _____

Address: _____ Town: _____

Postal Code: _____ Phone: _____ E-mail: _____

Date: _____ Signature: _____

COSCO does not share mailing lists with third parties unless we are required by law to do so.

Associate Membership is \$25 a year. Join on the COSCO website: <https://coscobc.org>

or make cheques payable to **COSCO** and mail with this application form to:

Linda Forsythe, Membership Secretary, Box 81131 Stn S. Burnaby, Burnaby, BC V5H 4K2

Telephone: (604) 444-4300

For information about **Affiliate (organizational) Membership**, please contact the Membership Secretary at membership@coscobc.org

We have started our 2024 renewal which will be a real test of our new online membership system. This year the letter and information will be sent out through our website. If you did not receive your letter, you may be able to find it in the SPAM/JUNK folder. If it's not there, please contact Linda Forsythe at membership@coscobc.org Please put COSCO in the subject line.