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THE NATIONAL SENIORS COUNCIL



LE CONSEIL NATIONAL DES AÎNÉS

Report of the National Seniors Council on Low Income Among Seniors

February 2009

**Submitted to the Minister of Human Resources and Skills Development,
the Minister of Health, and the Minister of State (Seniors)**

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Message from the National Seniors Council

At the inaugural meeting of the National Seniors Council in May 2007, the Minister of State (Seniors) identified two initial priorities: to develop ways to raise awareness and address the problem of elder abuse; and to better understand the issue of low income among seniors, particularly unattached women.

The Council submitted its report on elder abuse to Ministers in November 2007, which included advice to consider developing a national awareness campaign on the issue. The Council is pleased that the 2008 federal budget committed \$13 million that includes such a campaign as well as the development of information and resource tools for those who help and serve seniors.

The Council began work on the issue of low income among seniors by examining the income, wealth and expenditure patterns of seniors, and reviewing the public pension system. While this work provided a broad overview, it did not capture the daily realities faced by many low-income seniors. To address this gap, the National Seniors Council convened 11 Roundtables on Seniors' Well-Being between February and May 2008. At the roundtables, the Council met with individuals and organizations that work with seniors to discuss the experiences and challenges faced by low-income seniors in their communities. These sessions were invaluable to understanding the issue, and we would like to thank participants for sharing their time, views and expertise.

The Council's review of the research, along with discussions with participants, revealed the complexity of the issue, the need for all levels of government and sectors of society to work together, and the importance of working to improve the well-being and quality of life of Canada's financially vulnerable seniors.

The report provides Ministers with a description of the challenges faced by low-income seniors and the major factors that negatively affect the quality of their lives. The Council has identified the following five areas where the federal government could consider action to improve the situation of many low-income seniors:

1. address the impact of the cost of living and – more specifically – the cost of energy and food, on low-income seniors;
2. provide more accessible and affordable housing;





3. ensure that more seniors maintain their independence;
4. ensure that low-income seniors have all the necessary access to needed health services and supplies without a negative impact on their income; and
5. ensure that seniors are aware of the services available to them.

Respectfully submitted,

A handwritten signature in blue ink, reading "Jean-Guy Soulière", is placed below the text "Respectfully submitted,".

Jean-Guy Soulière
Chair, National Seniors Council





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Mandate of the National Seniors Council

The National Seniors Council shall advise the Government of Canada, through the Minister of Human Resources and Skills Development, the Minister of Health and the Minister of State (Seniors) on all matters related to the well-being and quality of life of seniors, including the opportunities and challenges arising from a rapidly growing and increasingly diverse aging population. As directed by the Minister of State (Seniors), the Minister of Human Resources and Skills Development and the Minister of Health, the National Seniors Council shall:

- a) advise on current and emerging issues and opportunities related to the quality of life and well-being of seniors, both now and in the future;
- b) as needed, undertake activities such as commissioning research, convening expert panels and roundtables, and holding consultative meetings;
- c) deliver well-balanced advice, taking into account the views of experts, seniors, organizations and groups that provide seniors' programs and services, provincial/territorial advisory bodies on seniors, and other relevant stakeholders and interested parties; and
- d) ensure a comprehensive and collaborative approach in its examination of the policies, programs and services that impact the lives of seniors by consulting with other federal departments, other levels of government and advisory bodies involved in seniors-related efforts.







Introduction

The National Seniors Council is pleased that the federal government recognizes low income among seniors as an important issue. The Council is particularly encouraged by recent government action, including the increase to the Guaranteed Income Supplement (GIS) and the GIS earnings exemption, the Age Credit and the Pension Income Amount. While these measures will benefit many seniors with low or modest incomes, some seniors still need further support.

The report is divided into three parts and presents:

1. an overview of the financial situation of seniors, with a focus on low-income seniors;
2. a synopsis of 11 roundtable discussions held in 2008, organized into five themes, with a focus on key challenges faced by low-income seniors and Council suggestions for federal government action; and
3. a summary of Council suggestions for federal government action.

Why Low Income Among Seniors is a Priority

Individuals with low incomes may not have enough money for basics. Nutritious food may be unaffordable. These individuals may struggle to pay the rent or mortgage and utilities, or live in homes that need repairs. For many, it is difficult to access necessary services, transportation and non-insured health services and supplies.

But the problem goes deeper still. Lack of money prevents people from participating as full members of communities. Individuals with low incomes are more likely to experience social isolation, loneliness and depression, as well as ill health and a shorter lifespan. Indeed, income has been identified as one of the most important determinants of overall health and well-being.

While the low-income rate among seniors has declined significantly in recent years, some seniors still have incomes below Statistics Canada's after-tax low income cut-off (LICO).¹ Many more seniors live on fixed and limited incomes, slightly above the LICO. While these seniors may not be "officially" living in low income, they may be only one major expense or cost-of-living increase away from the threshold. Consequently, they face many of the same challenges.

As the population continues to age, the economic security of seniors will become even more essential in ensuring that seniors are safe, valued and active members of their communities.

¹ The measure of low income used throughout the report is the after-tax low income cut-off (LICO). The LICO is one of three measures of low income in Canada. The other two measures are the Low Income Measure (LIM) and the Market Basket Measure (MBM). These measures are described in greater detail in Annex E.



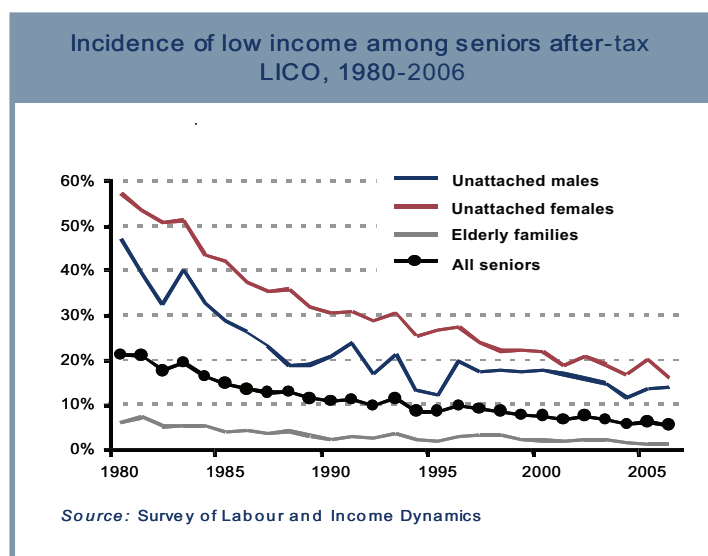


Overview of the Financial Situation of Canadian Seniors

In the fall of 2007, the Council examined the income, wealth and expenditure patterns of seniors, and reviewed the public pension system. This work provided members with a better understanding of the complexity of the issue of low income among seniors, identifying seniors most at risk as well as the financial pressures they face.

Overall, today's seniors, while not affluent, are financially secure. The median after-tax income of senior couples was \$41,400 in 2006, an increase of 18 percent since 1996. During the same period, median incomes for unattached seniors² increased by 14 percent to \$20,800.³

Between 1980 and 2006, the incidence of low income among seniors decreased from 21.3 percent to 5.4 percent—a lower rate than most other industrialized countries. This dramatic decline is largely attributed to the effectiveness and sustainability of Canada's retirement income system.⁴



Public pensions play a critical role in the income security of seniors, particularly women. Taken together, the Old Age Security (OAS) program and Canada Pension Plan (CPP) made up roughly 44 percent of seniors' total incomes in 2005. The OAS and the GIS alone comprised 32 percent⁵ of the total incomes of senior women, with an additional 20

² Statistics Canada defines an unattached individual as a person who either lives alone or shares a home with someone who is not a relative, spouse or common-law partner (2007). This may include individuals who are widowed, separated or divorced, as well as those who are part of a couple but are living apart for reasons such as institutionalization.

³ The median is the middle point in a range of values. For example, the incomes of the first half of individuals are below the median, while those of the second half are above the median. All values are presented in 2005 constant dollars.

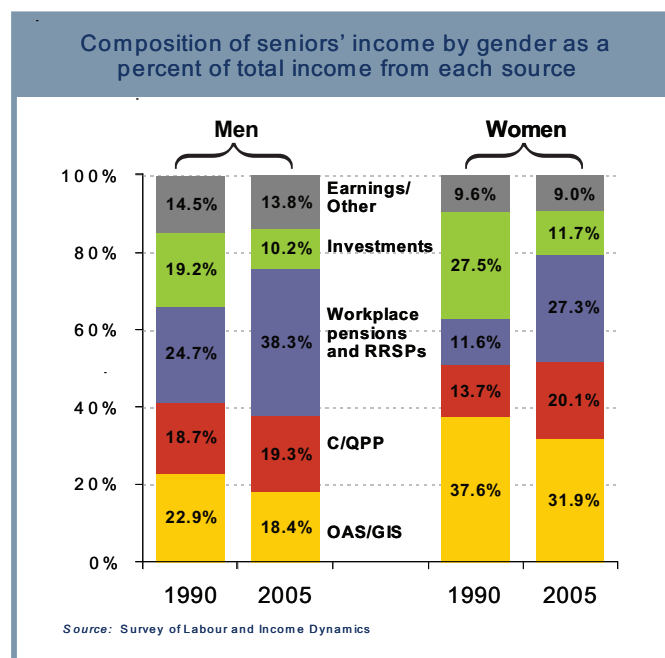
⁴ See Annex D for more information on the retirement income system.

⁵ This statistic does not capture the impact of the recent 2006 and 2007 increases in the GIS. For an unattached senior, this increase represents \$432 per year.





percent earned through CPP benefits. Between 1980 and 2005, the share of senior women receiving income from the CPP rose from 34.8 percent to 82.7 percent due to their increased participation in the labour force.



The importance of private pensions and Registered Retirement Savings Plans (RRSPs) as sources of income, especially for women, has grown significantly between 1990 and 2005—by 135 percent for women and 55 percent for men. Private retirement savings now represent about 38 percent of men's and 27 percent of women's incomes.

Seniors and Low Income

Since most seniors live in urban areas, it is not surprising that most low-income seniors also live in cities. While low income among seniors is not limited to any one group, the following groups are most at risk: the unattached, those who have worked less than 10 years, recent immigrants⁶, and Aboriginal peoples.

The unattached

The unattached have the highest incidence of low income of any group, with 15.5 percent of unattached seniors living below LICO in 2006, a rate 11 times higher than that of senior couples (1.4 percent). Given their greater longevity, women are far more likely to be unattached in later life and at greater risk of experiencing low income. Indeed, women represented about three-quarters of the 179,000 unattached low-income seniors in 2006. The low-income rate for unattached senior men was 14.0 percent, compared to 16.1 percent for unattached senior women.

⁶ For our analysis, "recent immigrant" included individuals who had lived in Canada for less than 10 years.





Work experience and gender

Generally, most people do not experience dramatic declines in income when they turn 65. Rather, low income as a senior is often the result of the inability to accumulate assets over time. More than 40 percent of seniors living in low income in 2005 had less than 10 years of work experience.

Many among the current cohort of senior women worked primarily in the home. As a result, they had less opportunity to accrue retirement savings and assets in their own right. Women's participation in the paid labour force has increased dramatically over the past several decades. Nevertheless, women are still more likely to work part time or interrupt employment for reasons related to caregiving responsibilities than their male counterparts, which places them at greater risk of low income in later life.⁷

Recent immigrants

Research has shown the greatest risk factor for recent immigrants (if they are not also part of a visible minority group) is the number of years they have lived and worked in Canada. Generally, recent arrivals have fewer years to prepare for retirement by accumulating wealth in the form of home ownership and savings; they may also be ineligible for or receive reduced public pension benefits.

Aboriginal Peoples

Although research on the financial situation of Aboriginal seniors has been limited, findings from the 2001 Census indicate that more than 13 percent of Aboriginal seniors were living in households with incomes below LICO, and that among Aboriginal seniors, women were at greatest risk of living in low income.⁸

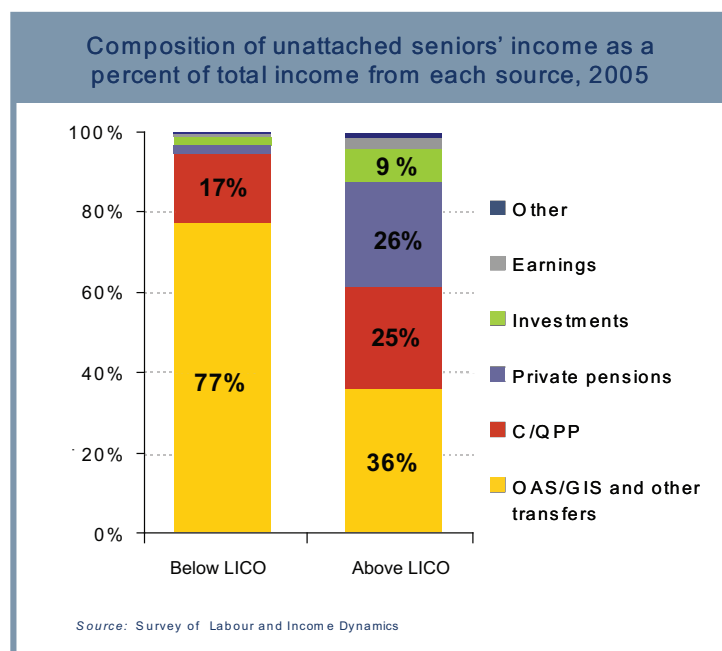
Income, Wealth and Expenditures of Low-Income Seniors

Greater access to CPP/QPP retirement income and private pension plans and investments has improved seniors' finances, and reduced their reliance on OAS benefits. Still, unattached low-income seniors continue to rely on public pensions as their major income source. In 2005, public transfers (mainly OAS and GIS) constituted 77 percent of the total income of unattached low-income seniors, compared to only 36 percent among those above the after-tax low income cut-off. The GIS has been particularly important in raising the incomes of GIS recipients to levels above the LICO.

⁷ The CPP does contain features that provide a measure of income protection to women, such as the general drop-out provision to compensate for times of unemployment, illness and schooling, as well as the child-rearing drop-out provision.

⁸ The Census on Aboriginal Seniors includes individuals who identified themselves as being an Aboriginal person, and those who reported having registered Indian Status and/or band membership.





Income, wealth and cost-of-living all help determine an individual's standard of living. Low-income seniors tend to be not only "income poor" but also "asset poor." In 1999, only 9 percent of those below the after-tax LICO had workplace pensions and only 17 percent had RRSPs. Income from other sources, including earnings, is negligible among unattached low-income seniors and comparatively few low-income seniors have home equity. Given the fixed nature of their earnings, seniors living below LICO are more likely than working age individuals (under age 65) to remain in low income.

Housing

Among seniors, home ownership is the single most important non-financial asset. Some 70 percent of all seniors are homeowners who live in housing that meets or exceeds standards of adequacy, suitability and affordability. Conversely, most low-income seniors (two of every three households) are renters, and only a minority have subsidized rent.

Although home ownership increases net worth, it does not appear to reduce housing costs. Shelter represents the largest expense for low-income seniors, particularly the unattached.⁹ Unattached low-income seniors spend more than 40 percent of total annual expenditures on housing. Moreover, in 2004, 62 percent of unattached low-income seniors and 40 percent of low-income senior couples lived in unaffordable housing.

Both low-income homeowners and renters spent, on average, just over \$5,000 annually on housing, which shows the significance of property tax, maintenance and fuel costs for senior homeowners. The situation appears to be most acute for those living in urban areas where housing costs are higher.

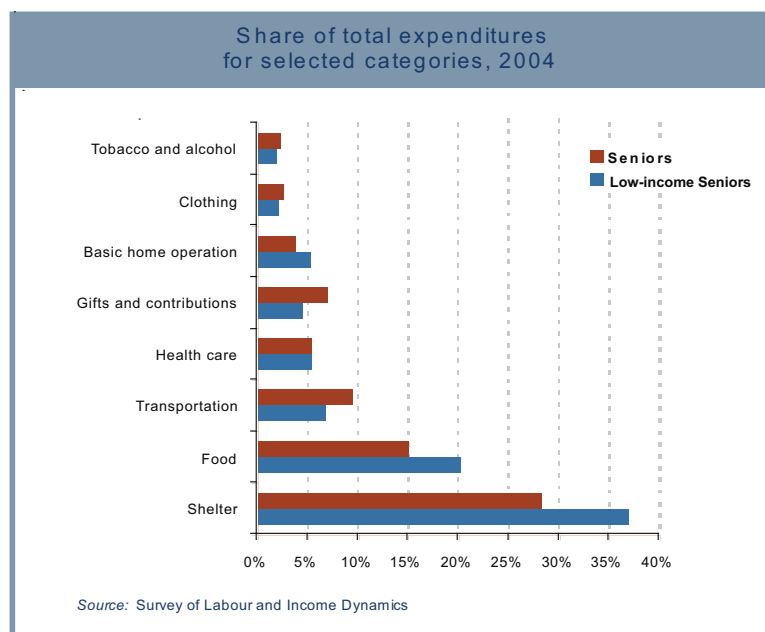
⁹ According to the definition developed by Statistics Canada for the Canada Mortgage and Housing Corporation, housing is considered unaffordable when the cost of rent, mortgage payments, condo fees, property taxes, water, heat and electricity represents 30 percent or more of before-tax household income.





Food

Food is the second greatest expense for low-income seniors; it makes up 20 percent of their total costs. While low-income seniors spend close to 60 percent of their expenditures on food and housing, transportation and health-related costs also pose a challenge.



Transportation

Seniors spend a lot of money on getting around. Those living in rural areas pay even more for transportation, possibly due to limited public transit, and increased car maintenance and fuel costs associated with the need to travel greater distances.

Healthcare

While all Canadians have access to medically necessary healthcare, the *Canada Health Act* (1984) does not cover all health products and services. Non-insured services may include prescription and non-prescription medications, assistive devices, personal health supplies, professional services such as dental and eye care, continuing or long-term care services, physiotherapy, chiropractic and private duty nurses.

While most of seniors' health-related spending is on medicine, low-income seniors spend significantly less on dental and eye care than seniors in higher-income groups. This does not necessarily mean that they receive dental and eye care at no cost. They may not be able to afford the services, or they may use their limited resources to meet other needs.





Summary

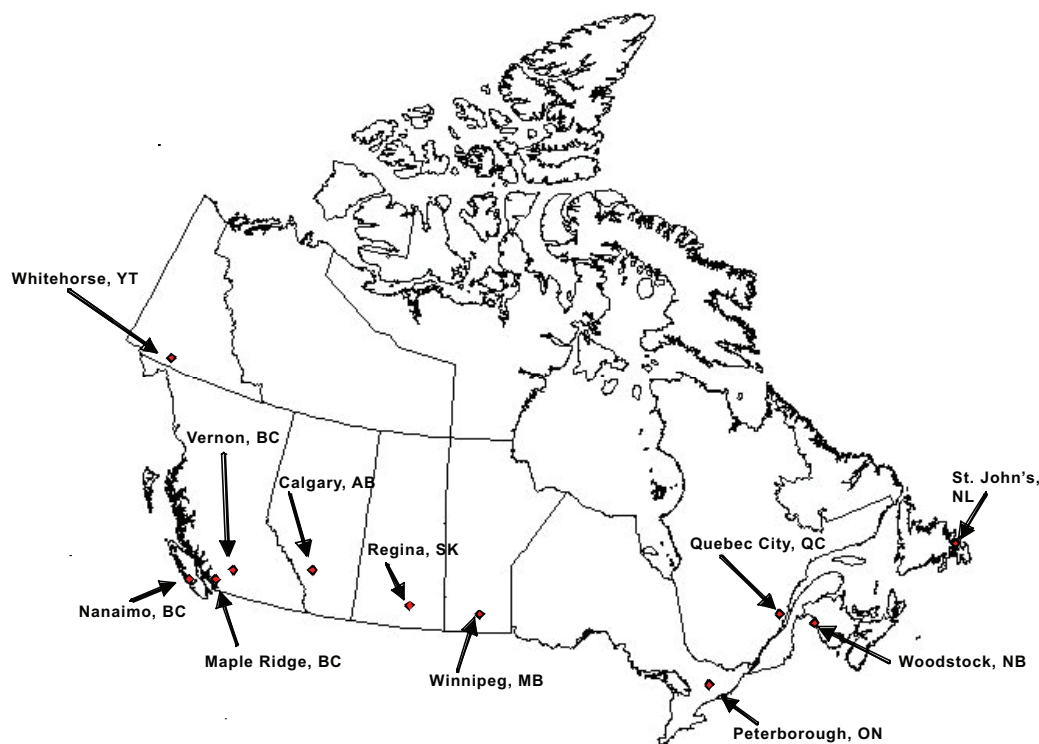
Canada's retirement income system (OAS, CPP/QPP and private pension savings and investments) has helped reduce the incidence of low income among seniors and helped increase overall living standards. The OAS and GIS programs play a critical role in ensuring that seniors have a modest base of income. Still, a core group of seniors remains vulnerable: the unattached, recent immigrants, those with fewer than ten years in the labour force, and Aboriginal seniors. Low-income seniors spend most of their money on housing, food, transportation and health-related costs.





Roundtables on Seniors' Well-Being

Between February and May 2008, the National Seniors Council held 11 roundtables with 100 local and regional service providers, voluntary and non-governmental organizations and seniors' groups in communities across the country:¹⁰



The roundtables had three objectives:

1. to enable the National Seniors Council to learn more about the experiences of seniors living on low incomes and understand the challenges they face;
2. to gauge the level of awareness among seniors about federal benefits and other programs and services available to them; and
3. to identify issues of importance to seniors in their communities to help the National Seniors Council stay abreast of current and emerging issues.

For the purposes of the discussions, “low-income” seniors were considered to be individuals with income levels below Statistics Canada’s after-tax LICO. The discussions surrounding “emerging issues” are not included in this report, but will help the Council determine future priorities.

¹⁰ Annex B provides the locations, dates and list of co-chairs for each meeting, and Annex C provides a list of roundtable participants.





What participants told us

Each location had a unique perspective of the challenges facing low-income seniors in their communities. However, the following five themes consistently emerged:

1. Income
2. Housing
3. Transportation
4. Health
5. Awareness and Delivery of Services and Benefits

While participants recognized that the unattached, women, recent immigrants and Aboriginal peoples were among those more vulnerable to living in low income, they focused discussions on the challenges facing low-income seniors in their communities generally.

Participants also noted that these challenges are interrelated. For example, a low-income senior who cannot afford transportation may also become socially isolated, which may in turn jeopardize personal health.

Many of the challenges identified by participants fall under provincial, territorial or municipal jurisdiction. For instance, although the federal government provides funding for housing, the provinces and territories are responsible for the administration and delivery of housing programs. Participants emphasized that all levels of government, as well as the private and non-profit sectors, must work together in order to address these challenges successfully.

The following section highlights the key challenges noted by participants and presents the Council's suggestions for federal government action on each theme.





Income

Key challenges

Rising cost of living: Despite public pension benefits, many low-income seniors find it hard to make ends meet. Some seniors on fixed incomes believe they are “one catastrophe away” from low income.

Trade-offs: The rising cost of food and energy force some low-income seniors to cut back on basic necessities. Some rely on Meals on Wheels, community centres or food banks for nourishing meals. Others find it too expensive to heat their homes properly in the winter. Seniors in some communities spend the day in local malls to stay warm. Food and fuel costs seem most acute in isolated areas where prices are typically higher.

Lack of coordination of services and benefits: Services and benefits that assist low-income seniors are not well coordinated between levels of government. Eligibility criteria for these benefits are often based on income and, consequently, some program benefits are reduced for each dollar earned over a prescribed amount. For instance, when the federal government increases its financial support to seniors, the income eligibility thresholds for provincial and territorial programs may not always be adjusted. The end result is that seniors in some jurisdictions may not see real increases in their incomes or they may lose benefits for which they were once eligible.

Pre-retirement planning: Pre-retirement planning is essential to promote financial security in old age. A Peterborough participant, for example, relied on a pre-retirement course provided by his employer to become aware of potential benefits and to plan adequately for his retirement. A newly retired woman in Regina had no idea what retirement would be like and was concerned about her future. Another participant, in his late 50s, is only now thinking about life on a pension.

Promising Practices

Through a joint initiative, the Financial Consumer Agency of Canada and the British Columbia Securities Commission (BCSC), have developed a comprehensive, Web-based tool to help young Canadians acquire strong financial life skills. This new tool is modelled on the BCSC’s teaching resource *The City: Financial Life Skills for Planning 10*, currently used in high schools throughout British Columbia. Since introducing the resource in November 2004, BCSC has delivered copies to more than 1,400 teachers in all 60 British Columbia school districts.

The benefits of early planning: Financial planning and understanding the importance of future financial security must start before people enter the workforce. The Council is encouraged by projects to educate young people about retirement planning. A school project in Newfoundland and Labrador called *The Canada Pension Plan: What’s it got to do with me?* informs high school students about CPP benefits, retirement planning,





public pensions and social responsibility. The project was so successful it will be part of a compulsory province-wide Grade 11 financial management class during 2008–09. These types of initiatives will help prepare future generations of seniors for retirement.

Suggestions for action

The Council identified the following suggestions for federal government consideration based on participants' comments:

- ***Rising cost of living***
 - Examine all elements of federal pension benefits, such as the GIS earnings exemption, to ensure that they are fully indexed to inflation. The earnings exemption allows GIS recipients who choose to work to keep the first \$3,500 without having their benefits reduced. The amount of the exemption is fixed, however, and will lose value over time as wages and prices rise.
- ***Trade-offs***
 - Implement an energy cost benefit for low-income seniors, modeled on the federal Energy Cost Benefit of 2006, to help offset increasing energy costs.
- ***Lack of coordination of services and benefits***
 - Conduct an analysis of existing federal, provincial and territorial programs and services available to seniors to better understand how changes in an individual's income may have an impact on the receipt of benefits and services; and work with provinces and territories to better coordinate programs and services.
- ***Pre-retirement planning***
 - Continue to help increase the financial literacy of Canadians by promoting existing information and educational tools, such as the 2001 Human Resources Development Canada publication *Canada's Retirement Income System: What's In It For You?* and the Financial Consumer Agency of Canada's online resource <http://themoneybelt.gc.ca>; and work with the public and private sectors to develop new materials tailored to seniors.
- ***The benefits of early planning***
 - Develop partnerships to incorporate initiatives such as the Financial Consumer Agency of Canada's *The City*¹¹ and *The Canada Pension Plan: What's it got to do with me?* program into high schools, to help educate young Canadians about responsible money management, financial planning, pensions and retirement.

¹¹ www.themoneybelt.ca/theCity-laZone/eng/login-eng.aspx





Housing

Key challenges

Tax relief: Rising home values and increasing property taxes have placed a growing strain on senior homeowners. While some provinces, territories and municipalities provide property tax relief to low-income seniors, the eligibility requirements and availability of these programs varies across the country.

Safe, affordable and appropriate housing: High demand for housing has also resulted in significant rental increases in some communities. The demand for subsidized housing options outweighs the current supply. In some communities, newly built affordable housing units were fully occupied before construction had even finished. Meanwhile, it can take years to be placed in subsidized housing. Even then, some seniors turn down placements due to safety concerns in some neighbourhoods. As a result, some are at “risk of “couch surfing”—moving from the home of one family member to another for short periods.

Home adaptations and supportive living: Most seniors prefer to stay in their homes and communities as long as possible. However, this “aging in place” is jeopardized when seniors cannot afford to renovate or adapt their houses to meet changing health needs. In one case, an individual living in a mobile home had to crawl into the bedroom because his wheelchair would not pass through the door. His mental and physical health deteriorated until a local organization obtained funding for alterations to his home through the Home Adaptations for Seniors’ Independence program of the Canada Mortgage and Housing Corporation (CMHC). This small renovation allowed him easier access to his bedroom and improved his health and quality of life.

Effective Programming

Funded by the federal government, the Canada Mortgage and Housing Corporation’s Home Adaptations for Seniors Independence (HASI) program helps low-income seniors pay for minor home modifications such as handrails, grab bars and lever handles on doors. These adaptations extend the time seniors can live independently in their homes. Over the past 10 years, more than 25,000 senior households have been assisted through the HASI program.

Home maintenance: Many seniors struggle to take care of their homes and need to pay for help with basic chores that are too physically demanding. Community-based organizations that provide help with home maintenance often have long wait lists. With timely and affordable help around the house, seniors would be better able to retain their independence and reduce the chances of accidents and falls, thus also reducing healthcare system costs.





Suggestions for action

The Council identified the following suggestions for federal government consideration based on participants' comments:

- ***Safe, affordable and appropriate housing***
 - Continue to invest in supplying affordable housing through the federal Affordable Housing Initiative.
 - Build on the work of the Public Health Agency of Canada's (PHAC) Age Friendly Communities Initiative to ensure that policies, programs and services meet the evolving needs of seniors. PHAC could work in collaboration with other government departments to examine how existing programs and initiatives could be used to assist communities in becoming more age friendly.
- ***Home adaptations and supportive living***
 - Continue to fund and promote awareness of CMHC's Home Adaptations for Seniors Independence program and the Residential Rehabilitation Assistance program.
- ***Home maintenance***
 - Examine the implementation of a seniors independence program that would provide low-income seniors with an annual supplement to assist them in accessing grounds maintenance, housekeeping and transportation services.

Transportation

Key challenges

Costs: While some seniors stop driving for health reasons, others do so because they can no longer afford to insure or maintain their automobiles. Participants noted that few programs exist to help with these costs. The lack of affordable and accessible public transportation and the costs of taxi services, insurance and gasoline hinder low-income seniors from accessing services, attending appointments, socializing or participating in their communities.

Access to transportation programs: Winter weather conditions prevent many seniors from using local public transit, buses do not operate regularly outside of peak hours, and posted bus schedules are often hard to read. Local transit for seniors with disabilities is valuable, but the routes and hours of operation are often limited and seniors must book the service a day in advance to use it.





Innovative Approaches

The Transportation Project, organized by the Seniors Transportation Working Group in Manitoba, has developed a network of stakeholders to create an inventory of transportation resources available to seniors; integrate and coordinate local transportation options; identify a province-wide approach to deliver a transportation program for individuals with mobility limitations; and support efforts to provide seniors in rural Manitoba communities with affordable transportation options. In the United States, the ITNAmerica program provides low-cost rides in private cars to seniors through a combination of paid and volunteer drivers, organized through a centralized network.

Rural and isolated communities: The problems associated with the limited availability of transportation are especially acute in rural areas. Seniors in some rural and remote areas travel outside of their communities to receive specialized medical care.

Lack of volunteer drivers: Lack of access to reliable and affordable transportation affects overall quality of life. Given few transportation options, some seniors remain isolated for long periods; this has a negative effect on their physical and mental health. Several community groups provide seniors with rides to appointments or social outings. While these types of programs are invaluable, many drivers are becoming reluctant to volunteer this service due to rising fuel prices and concerns related to insurance and liability.

Suggestions for action

The Council identified the following suggestions for federal government consideration based on participants' comments:

- ***Costs and access to transportation programs***
 - Conduct an analysis of existing transportation programs and resources available for seniors to identify barriers to service use and gaps in service delivery, increase awareness of services and identify promising best practices.
 - Conduct a review of innovative transportation programs for seniors and people with reduced mobility, such as the Transportation Project and the ITNAmerica program, and consider their applicability for pilot projects in other jurisdictions.
- ***Lack of volunteer drivers***
 - Examine options to provide financial support to individuals or community groups that provide seniors with rides to appointments, to help offset some of the costs of fuel and insurance.





Health

Key challenges

Access to information: Greater information and support would help to ensure that seniors could age in good health.

Drug coverage and health supplies: Some seniors are rationing their medications to make prescriptions last longer. Many seniors are unaware of their entitlements and the range of drugs covered in provincial/territorial drug programs, which do not cover all medication. Without coverage for supplementary health supplies and services, many low-income seniors cannot afford to pay for services such as eye care, dentistry or physiotherapy. Lack of access to these vital services diminishes the quality of life of many seniors.

Home and unpaid care: Provincial/territorial home care programs are essential in allowing seniors to “age in place,” since many low-income seniors cannot afford private care. Although home care provides a valuable service, family members provide most of the help to seniors at home with health-related care needs. In addition, many caregivers are seniors themselves who provide care to friends, spouses and sometimes grandchildren. Respite care, when available, is not always affordable. These types of services are important for family caregivers, allowing them to care for themselves so they can continue to care for their loved ones.

Reaching Out

The Victorian Order of Nurses Functional Fitness Continuum Project, supported by the Public Health Agency of Canada, the Guelph–Wellington Seniors Association and the Canadian Centre for Activity and Aging, provides volunteers with training to teach seniors specially designed exercises that they can do in their own homes. By providing in-home, age-appropriate exercises, it is hoped that the obstacles to remaining physically active that are faced by frail or socially isolated seniors will be reduced, and overall health and well-being will be improved. At the completion of this project there will be Functional Fitness Continuum programs established in six communities across Canada.

Physical activity: It is never too late to get exercise. At age 65, one roundtable participant decided he needed to improve his health, so he changed his lifestyle and went on to complete a half marathon. Good health, however, is only achieved when people can make informed choices. More promotion of healthy eating and physical activity among seniors is needed.

User fees: Even nominal user fees can prohibit seniors from taking part in activities that promote health. In one community, eliminating a seniors’ rate for an exercise facility led to a drop in seniors’ participation. Some organizations have subsidies, but cannot afford to waive all fees without affecting other programs and services.





Suggestions for action

The Council identified the following suggestions for federal government consideration based on participants' comments:

- ***Access to information***
 - Ensure that health-related brochures, pamphlets and other informational tools are readable and accessible for seniors and care providers, including recent immigrants and seniors with low literacy skills.
 - Consider funding a conference to examine best practices on health literacy and enhance partnerships with service provider organizations to distribute health information to seniors.
- ***Drug coverage and health supplies***
 - Continue to collaborate with provincial and territorial governments on improving the affordability of needed drug therapies and access to these therapies under the National Pharmaceuticals Strategy¹², which has led to significant improvements in public drug coverage in a number of jurisdictions.
 - Continue its leadership role in providing health-related services and supplies, such as dental and vision services, eyeglasses and hearing aids and physiotherapy services, to populations for which the federal government has primary responsibility, such as First Nations living on reserves, Inuit and eligible veterans.
- ***Home and unpaid care***
 - Implement a targeted seniors volunteerism initiative component under the New Horizons for Seniors Program to enable organizations that offer community-based services and activities for seniors, such as meals, home maintenance or transportation services, to increase their volunteer base.
 - Enhance existing measures that provide financial assistance to caregivers. The federal government could also collect expert advice on new initiatives that could be implemented to assist low-income caregivers.
 - Ensure that organizations that provide support to caregivers are aware of and eligible for existing federal programs and initiatives designed to meet the needs of vulnerable populations.

¹² Recognizing the growing importance of pharmaceuticals in health care, First Ministers directed Health Ministers to establish a Ministerial Task Force to develop and implement a National Pharmaceuticals Strategy. The purpose of the National Pharmaceuticals Strategy is to address the challenges and opportunities using an integrated and collaborative approach to pharmaceuticals within the health care system. The task force issued a progress report in 2006 and federal, provincial and territorial governments continue to work in this area.





- **Physical activity**

- Promote awareness of the benefits of physical activity for seniors through a national awareness campaign, building on existing materials such as PHAC's publication *Canada's Physical Activity Guide to Healthy Active Living for Older Adults*.
- Work in partnership with experts in the area to develop a healthy eating guide to provide seniors with information, tips and tools to promote healthy eating and nutrition.
- Examine different incentives that promote healthy aging to assist seniors in remaining physically active, independent and involved in their communities.

Awareness and Delivery of Services and Benefits

Key challenges

- **Outreach and communication:** Service Canada makes a significant effort to improve seniors' knowledge of federal services and benefits, but seniors may not be aware of services and benefits for a variety of reasons:
 - electronic communications are problematic. Online information only works for computer-literate people with access to a computer. Automated telephone systems can be impersonal, confusing and frustrating;
 - many flyers and mail-outs are not in plain language, or they may be misplaced or thrown away; and
 - personal contact is the preferred and most effective approach.

Reaching those at risk: Low awareness of services and benefits is especially prevalent among seniors living in rural communities who may lack access to personalized assistance, and among recent arrivals to Canada, who may not know either official language or understand the Canadian system of taxation and benefits.

Application process: Even when seniors know about available programs and services, the application process can discourage them. Some seniors may be too proud to ask for help with an application form even if they are eligible for a program. In addition, many current seniors did not finish high school. Seniors with literacy problems need information provided to them verbally, either by a person (in person or by phone) or by advertisements on radio or television. They also need help filling out application forms.





Working with community: The support offered through the voluntary sector is essential to improving the situations of low-income seniors or those at risk. Community-based organizations are often best positioned to identify seniors at risk. While many seniors turn first to these organizations for help, one Regina participant noted that many socially isolated seniors are too ashamed and embarrassed about being poor to ask for help. In Calgary, a participant highlighted the value of the Community Volunteer Income Tax Program, sponsored by the Canada Revenue Agency, which helps low-income seniors complete their income tax returns, and can also help identify those who may not be receiving benefits for which they are eligible.

Partnerships with governments: Relationships between service providers and governments need to be strengthened to ensure that community organizations and volunteers are getting accurate and up-to-date information to pass on to seniors.

Financial resources: Many organizations struggle to secure enough funding to meet demand. Government funding is often too short term to provide continuous services. The New Horizons for Seniors Program, for example, garnered positive reviews as an important source of funds, but the one-year grant does not allow a number of organizations enough time to secure other sources of funds. Consequently, just as a promising project is up and running, it risks being eliminated.

Success at the Community Level

The New Horizons for Seniors Program (NHSP) helps to ensure that seniors are able to benefit from and contribute to the quality of life in their communities through social participation and active living. Since 2004, NHSP has funded more than 3,400 community-based projects and touched the lives of thousands of seniors across Canada.

Human resources: Voluntary organizations rarely have enough money to hire more than a handful of staff. Since many cannot compete with other sectors for wages and benefits, it is also hard for them to find and retain employees. However, full-time staff members are essential since they can accumulate experience and expertise often unavailable to part-time employees and volunteers.

Volunteers: Organizations are not sustainable without volunteers. In the near future, organizations fear they will lose their reliable long-term volunteers who are aging. Baby boomers may want active retirements, but have different demands and expectations about their volunteer experiences than previous generations of senior volunteers. Among this “new breed” of volunteers, many seek opportunities that are engaging and rewarding, but they also want autonomy over their work and flexible time commitments. New approaches to attract volunteers may be needed to retain essential programs and services for seniors in communities.





Suggestions for action

The Council identified the following suggestions for federal government consideration based on participants' comments:

- ***Outreach and communication***

- Build on existing efforts to increase knowledge and awareness of federal services and benefits available to seniors through a national awareness campaign using print, radio and television advertising. This campaign could target seniors with low literacy levels and newcomers to Canada to ensure that vulnerable populations are aware of benefits for which they may be eligible.
- Promote and further develop the Web site www.seniors.gc.ca and the federal *Services for Seniors Guide*, to support seniors and their families in accessing information on federal supports for unpaid caregivers, housing programs, volunteer opportunities and healthy living, and to increase their awareness of these initiatives.

- ***Reaching those at risk***

- Continue to support and expand initiatives such as the Government of Canada's Working Together Workshop, designed to increase awareness and take-up of OAS and CPP benefits in remote Aboriginal communities. This initiative was successfully piloted in 2006–07 and will be rolled out across Canada in 2008–09.

- ***Application process***

- Continue to streamline and simplify application processes and forms for federal services and benefits. Information packages could be sent more than once before applicants turn 65; these packages could include a step-by-step instruction sheet with contact telephone numbers to make it easier for seniors to understand how to fill out the application forms and how to get help if they need it.

- ***Working with community***

- Ensure that local service providers, especially those in rural and remote communities, and those working with hard-to-reach populations (e.g., individuals who face literacy challenges or homeless individuals) have access to up-to-date information on federal programs and services by providing them with informational sessions and resources on the programs and services available to seniors. Materials from pilot projects such as the *Guide to Information for Service Providers/Professionals* developed by the then Human Resources and Social Development Canada, the City of Ottawa and COSTI (an organization that supports immigrants, based in Toronto), could be used to train service providers in other regions.





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- Work to develop a formalized assessment process that could be used by Service Canada information officers and other service providers across the country to determine which benefits seniors may be in need of and eligible for.
 - ***Partnerships with governments***
 - Work in partnership with provincial and territorial governments and service providers to develop an inventory of existing services for seniors across the country. This would increase awareness and consistency of information about resources available to low-income seniors among service providers.
 - ***Volunteers***
 - Examine options for providing compensation to individuals who volunteer and/or to organizations that rely on volunteers to deliver services or programs, and study ways to recruit and retain future generations of volunteers.
 - Consider implementing a Canada-wide campaign that encourages and promotes volunteerism across the life course.





Conclusions

While the decline in the low-income rate among seniors is a great accomplishment, there are still seniors with low incomes who are not able to live life to the fullest.

Most people do not experience dramatic declines in income when they turn 65. More often, low income in old age results from economic standing experienced over a lifetime. As such, efforts need to focus on the economic vulnerability of individuals before they become seniors.

Improving the quality of life for low-income seniors is not simply a matter of additional income. Low income can result from many factors and can have many consequences. Interventions for low-income seniors should be part of a broader public policy initiative aimed at improving well-being.

The federal, provincial and territorial governments all have policies and programs within their jurisdictions that influence the well-being of low-income seniors. The federal government provides income support for seniors through the public pension system, primarily through OAS and the GIS. The federal government administers the CPP under the joint stewardship of the provincial and territorial governments. Many provinces also provide income assistance to low-income seniors through supplements such as a top-up to the federal GIS.

While the federal government contributes financially to programs and services for seniors in the areas of health, housing and transportation, provincial and territorial governments have primary responsibility for the funding and delivery of these programs. The voluntary and not-for-profit sectors also provide services to seniors. As the issue of low income is a national concern, it will require many players working in partnership to address the issue successfully.

The National Seniors Council recognizes the complexity of the low-income issue and realizes that there are no simple solutions. However, the Council believes this report provides the federal government with some practical and achievable ideas for consideration and possible action.





Summary of Suggestions for Action

The Council offers the following suggestions for the federal government's consideration:

Income

- Examine all elements of federal pension benefits, such as the GIS earnings exemption, to ensure that they are fully indexed to inflation. The earnings exemption allows GIS recipients who choose to work to keep the first \$3,500 without having their benefits reduced. The amount of the exemption is fixed, however, and will lose value over time as wages and prices rise.
- Implement an energy cost benefit for low-income seniors, modeled on the federal Energy Cost Benefit of 2006, to help offset increasing energy costs.
- Conduct an analysis of existing federal, provincial and territorial programs and services available to seniors to better understand how changes in an individual's income may have an impact on the receipt of benefits and services; and work with provinces and territories to better coordinate programs and services.
- Continue to help increase the financial literacy of Canadians by promoting existing information and educational tools, such as the 2001 Human Resources Development Canada publication *Canada's Retirement Income System: What's In It For You?* and the Financial Consumer Agency of Canada's online resource <http://themoneybelt.gc.ca>; and work with the public and private sectors to develop new materials tailored to seniors.
- Develop partnerships to incorporate initiatives such as the Financial Consumer Agency of Canada's *The City*¹³ and *The Canada Pension Plan: What's it got to do with me?* program into high schools, to help educate young Canadians about responsible money management, financial planning, pensions and retirement.

Housing

- Continue to invest in supplying affordable housing through the federal Affordable Housing Initiative.
- Build on the work of PHAC's Age Friendly Communities Initiative to ensure that policies, programs and services meet the evolving needs of seniors. PHAC could work in collaboration with other government departments to examine how existing programs and initiatives could be used to assist communities in becoming more age friendly.
- Continue to fund and promote awareness of the CMHC's Home Adaptations for Seniors Independence program and the Residential Rehabilitation Assistance program.

¹³ www.themoneybelt.ca/theCity-laZone/eng/login-eng.aspx





- Examine the implementation of a seniors independence program that would provide low-income seniors with an annual supplement to assist them in accessing grounds maintenance, housekeeping and transportation services.

Transportation

- Conduct an analysis of existing transportation programs and resources available to seniors to identify barriers to service use and gaps in service delivery, increase awareness of services and identify promising best practices.
- Conduct a review of innovative transportation programs for seniors and people with reduced mobility, such as the Transportation Project and the ITN*America* program, and consider their applicability for pilot projects in other jurisdictions.
- Examine the option of providing financial support to individuals or community groups that provide seniors with rides to appointments, to help offset some of the costs of fuel and insurance.

Health

- Ensure that health-related brochures, pamphlets and other informational tools are readable and accessible to seniors and care providers, including recent immigrants and seniors with low literacy skills.
- Consider funding a conference to examine best practices on health literacy and enhance partnerships with service provider organizations to distribute health information to seniors.
- Continue to collaborate with provincial and territorial governments on improving the affordability of needed drug therapies and access to these therapies under the National Pharmaceuticals Strategy, which has led to significant improvements in public drug coverage in a number of jurisdictions.
- Continue its leadership role in providing health-related services and supplies, such as dental and vision services, eyeglasses and hearing aids and physiotherapy services, to populations for which the federal government has primary responsibility, such as First Nations living on reserves, Inuit and eligible veterans.
- Implement a targeted seniors volunteerism initiative component under the New Horizons for Seniors Program to enable organizations that offer community-based services and activities for seniors, such as meals, home maintenance or transportation services, to increase their volunteer base.





- Enhance existing measures that provide financial assistance to caregivers. The federal government could also collect expert advice on new initiatives that could be implemented to assist low-income caregivers.
- Ensure that organizations that provide support to caregivers are aware of and eligible for existing federal programs and initiatives designed to meet the needs of vulnerable populations.
- Promote awareness of the benefits of physical activity for seniors through a national awareness campaign, building on existing materials such as PHAC's publication *Canada's Physical Activity Guide to Healthy Active Living for Older Adults*.
- Work in partnership with experts in the area to develop a healthy eating guide to provide seniors with information, tips and tools to promote healthy eating and nutrition.
- Examine different incentives that promote healthy aging to assist seniors in remaining physically active, independent and involved in their communities.

Awareness and Delivery of Services and Benefits

- Build on existing efforts to increase knowledge and awareness of federal services and benefits available to seniors through a national awareness campaign using print, radio and television advertising. This campaign could target seniors with low literacy levels and newcomers to Canada, to ensure that vulnerable populations are aware of benefits for which they may be eligible.
- Promote and further develop the Web site www.seniors.gc.ca and the federal *Services for Seniors Guide*, to support seniors and their families in accessing information on federal supports for unpaid caregivers, housing programs, volunteer opportunities and healthy living, and to increase their awareness of these initiatives.
- Continue to support and expand initiatives such as the Government of Canada's Working Together Workshop, designed to increase awareness and take up of OAS and CPP benefits in remote Aboriginal communities. This initiative was successfully piloted in 2006–07 and will be rolled out across Canada in 2008–09.
- Continue to streamline and simplify application processes and forms for federal services and benefits. Information packages could be sent more than once before people turn 65; these packages could include a step-by-step instruction sheet with contact telephone numbers, to make it easier for seniors to understand how to fill out the application forms and how to get help if they need it.
- Ensure that local service providers, especially those in rural and remote communities, and those working with hard-to-reach populations (e.g., individuals who face literacy challenges or homeless individuals) have access to up-to-date information on federal





programs and services by providing them with informational sessions and resources on the programs and services available to seniors. Materials from pilot projects such as the *Guide to Information for Service Providers/Professionals* developed by the then Human Resources and Social Development Canada, the City of Ottawa and COSTI (an organization that supports immigrants, based in Toronto), could be used to train service providers in other regions.

- Work to develop a formalized assessment process that could be used by Service Canada information officers and other service providers across the country to determine which benefits seniors may be in need of and eligible for.
- Work in partnership with provincial and territorial governments and service providers to develop an inventory of existing services for seniors across the country. This would increase awareness and consistency of information about resources available to low-income seniors among service providers.
- Examine options for providing compensation to offset the costs faced by individuals who volunteer and/or to organizations that rely on volunteers to deliver services or programs, and study ways to recruit and retain future generations of volunteers.
- Consider implementing a Canada-wide campaign that encourages and promotes volunteerism across the life course.







ANNEX A

Members of the National Seniors Council

Jean-Guy Soulière, Chair of the Council



After a successful career with the federal public service, Jean-Guy Soulière was the Executive Director of the Federal Superannuates National Association for over 12 years. He has served as the Chair and Spokesperson for the Congress of National Seniors' Organizations since 2002 and is a member of the Public Service Pension Advisory Committee. He holds a degree from the University of Ottawa and is fluently bilingual.

Dr. Sandra Hirst



Dr. Sandra Hirst, PhD, of Calgary, Alberta, is the President of the Canadian Association on Gerontology. A gerontological nurse by training, she is also an associate professor in the Faculty of Nursing at the University of Calgary. Dr. Hirst has published numerous articles on a variety of topics related to seniors. She has served and currently sits on many boards and advisory councils, including the Seniors Advisory Council for Alberta, the Canadian Gerontological Nursing Association and the National Initiative for the Care of the Elderly Project. Dr. Hirst is the recipient of numerous awards, including the Mary Morrison Davis Award (Alberta Association on Gerontology, 2006) and an Honourary Life Membership (2001) with the Alberta Gerontological Nurses Association.

Patricia Humenny



Patricia Humenny of Clavet, Saskatchewan, has had a very rich and diverse career with positions in both small business, government, social services and the private sector. She has also served in executive positions for a number of community and service organizations, such as the Canadian Association of the Mentally Handicapped. Ms. Humenny's educational background includes nursing, accounting, sociology, economics and business law. Her nursing training and various other positions have given Ms. Humenny the opportunity to be involved with seniors on many levels throughout her career. In 2005, she was awarded the Saskatchewan Centennial Medal in recognition of her contributions to her community and the province of Saskatchewan.





Marilyn Loveless



Marilyn Loveless of Victoria, British Columbia, has recently retired as Director of the national award winning Shoal Centre (S.H.O.A.L – Sidney Healthy Options for Active Living) a centre that addresses the needs of seniors in the community. Her work experience in the past two decades has been dedicated to enhancing and promoting the overall well-being of seniors. Ms. Loveless has experience as a teacher, a school trustee and a municipal councillor. She is a long-time volunteer and has served on many boards and committees. She was awarded the 125th Anniversary of the Confederation of Canada Medal for Community Service.

Dr. Daphne Nahmiash



Dr. Daphne Nahmiash, PhD, of Montréal, Quebec, is an active member of and former Chair of the McGill Centre for Studies in Aging Education Committee. She is presently the chairperson of the Notre-Dame-de-Grâce (NDG) Community Committee on Elder Abuse. She was an Adjunct Professor in Gerontology and Social Services at Université Laval and McGill University. She has recently retired from her position as Director of Professional Services of CLSC NDG and as Commissioner of Complaints and Quality of Services at the Centre de santé et de services sociaux Cavendish in Montréal. Dr. Nahmiash has been working in the field of seniors' health and social services for the past 45 years. She has been part of many committees, including at the Quebec Health and Social Services Ministry where she produced government reports on senior abuse, neglect and services to seniors. Some of her awards include Woman of the Year 2005–2006, awarded by the Montreal Council of Women for initiatives to improve the quality of life of seniors.

Cécile Plourde



Cécile Plourde of Montréal, Quebec, has been the president of the Fédération de l'âge d'or du Québec (FADOQ)-Mouvement des aînés du Québec for the Montréal region since 2000. The FADOQ is the largest seniors' group in Quebec and is made up of 280,000 members. Ms. Plourde, a graduate of Université Laval, worked in the health profession for 40 years as a registered nurse. Ms. Plourde has been active in her community for many years and has served on many committees, including the Table de concertation des aînés de l'Île de Montréal and the regional selection committees for the Engagés dans l'action pour les aînés du Québec and New Horizons grant programs. Ms. Plourde has also been a member of the family committee at the Conférence régionale des élus de Montréal since 2005.





Rémi Plourde



Rémi Plourde of Chicoutimi, Quebec, is a senior and a retired academic administrator. At present, he sits on the board of directors (Conseil d'administration) that organized and carried out the merger of two private schools in Chicoutimi and supervised the expansion made necessary by the merger. The board of directors is now developing a strategic development plan in order to ensure the new school's long term survival. Mr. Plourde also worked as a director of the Lac Saint Jean musical camp for 12 years. As well, he chaired the board of directors of the Séminaire de Chicoutimi, and simultaneously assumed the responsibilities of executive director, director of student affairs and director of human, financial and material resources. Mr. Plourde is well aware of the challenges facing seniors.

The Reverend Canon Derwyn Shea



The Reverend Canon Derwyn Shea of Toronto, Ontario, is the Rector of St. Hilda's Anglican Church and Chairman and CEO of St. Hilda's Towers, one of the largest single stand alone residential care facilities in Ontario. He was Priest-in-Charge for 28 years at St. Clement (Riverdale) Parish. He established a number of local initiatives geared towards youth and low-income seniors. Reverend Shea was appointed Canon for the Diocese of Toronto by the Anglican Church in 2002. He is a former Toronto City and Metro Councillor, as well as a former Ontario Member of Provincial Parliament. He has served on numerous boards, chairs, and commissions, including the Children's Aid Society, the Mayor's Committee on Race Relations and the Police Commission. He was the former Chairman of the O'Keefe Centre for the Performing Arts in Toronto and President of the Canadian National Exhibition. He was awarded the 125th Anniversary of the Confederation of Canada Medal for Community Service as a result of his work and advocacy.

Dr. Doo Ho Shin



Dr. Doo Ho Shin of Vancouver, British Columbia, an active partner in BC Bio Medical Laboratory for over 30 years, is presently practicing as a general pathologist in Fraser Health (largely at Surrey Memorial Hospital). Fraser Health serves a population of 1.46 million people, approximately 1/3 of the total population of British Columbia. Dr. Shin has served on various hospital committees, including Infection Control and Physician Credentials. He has been actively involved in community work including arts, education and seniors issues in the metro Vancouver area.





Joan Tufts



Joan Tufts of Saulnierville, Nova Scotia, is a retired nurse who is currently an Addiction Services Counsellor with a special emphasis on nicotine addiction. Ms. Tufts has served in a variety of roles involving seniors and home care. She is currently a voluntary Director on the Mental Health Foundation Board of Nova Scotia and sits on that board and the Clare Community Health Board. Ms. Tufts won the 2005 Inspiring Lives Award from the Mental Health Foundation Board of Nova Scotia.

Edward Wade



Edward Wade was a teacher in Newfoundland for 30 years. He has a Master's Degree in Educational Administration. Since his retirement, Mr. Wade has worked in the fields of community development and literacy. As a Literacy Coordinator, he developed a *Strategic Literacy Plan: Many Hearts-One Voice* for community centres in St. John's. Since 2005, Mr. Wade has worked on contract with the Seniors Resource Centre in St. John's, where he is currently coordinating the replication of a pilot project, "Health Care and Nutrition for Older Adults and Seniors," in seven rural Newfoundland communities. In addition to his volunteer work on numerous Boards, he is an elected member of Literacy Newfoundland and Labrador, the vice-chair of the Open Book Literacy Council and Brighter Futures Coalition, and a member of the St. John's Crime Prevention Committee.

Bev Weeks



Bev Weeks of Harvey, New Brunswick, is the founder of Harvey Outreach for Seniors, an organization developed to meet the needs of seniors. She is also a founding and lifetime member of the New Brunswick Home Support Association. Ms. Weeks has served on many committees and has conducted research projects in the field of seniors' issues. She is a founding and continuing member of the Third Age Centre housed at St. Thomas University, Fredericton, New Brunswick. She was the New Brunswick representative on the Board of the Canadian Association for Community Care. Some of her awards include the Marion Stevenson Award for outstanding contribution to Community Care and the Queen's Golden Jubilee Medal for her work on seniors' issues.





ANNEX B

Dates and Locations of Roundtables

The 11 meetings took place in:

Québec City, QC	February 18, 2008
St. John's, N.L.	February 20, 2008
Woodstock, NB	February 22, 2008
Peterborough, ON	March 17, 2008
Winnipeg, MB	March 20, 2008
Nanaimo, BC	March 26, 2008
Maple Ridge, BC	March 27, 2008
Vernon, BC	April 22, 2008
Whitehorse, YT	April 24, 2008
Regina, SK	May 22, 2008
Calgary, AB	May 23, 2008







ANNEX C

List of Participants at Roundtables

Québec City, Quebec

- René Andrews, Federal Superannuates National Association
- Jean-Marie Fréchette, *Fédération de l'Âge d'or du Québec*
- Claude Gendreau, United Way *Québec et Chaudière-Appalaches*
- Gérald Lavoie, *Centre d'aide et d'action bénévole de Charlesbourg*
- Louise Thibault, Member of Parliament (Independent)

St. John's, Newfoundland and Labrador

- Geoff Chaulk, Canadian Mental Health Association
- Gerry Leahy, Federal Superannuates National Association – Avalon-Burin Chapter
- Rosemary Lester, Seniors Resource Centre Association of Newfoundland and Labrador
- Jackie McDonald, Atlantic Seniors Housing Research Alliance
- Alfred Sullivan, Goulds Seniors Group
- Sheila Sullivan, Alzheimer's Society of Newfoundland and Labrador
- Egbert Walters, Canadian Association of Food Banks/Community Food Sharing Association
- Edgar Williams, Canadian Association of Retired Persons – Newfoundland Chapter

Woodstock, New Brunswick

- Jean-Luc Bélanger, *Association acadienne et francophone des aînées et aînés du Nouveau-Brunswick*
- Pat Burgess, Canadian Red Cross - New Brunswick
- Jean-Claude Cormier, Go Ahead Seniors
- Louise Gilbert, Canadian Association of Retired Persons – New Brunswick
- Alban Landry, NB Seniors Citizens Federation
- Willie Lirette, Canadian Federation of Francophone Seniors
- Wayne McCallum, Senior Goodwill Ambassador for the Province of New Brunswick
- Joan McKell, Alzheimer's Society
- Kay Simonds, Carleton Manor
- Bob Smalley, Federation Research Committee – The Provincial Transportation Committee





Peterborough, Ontario

- Doreen Anderson-Roy, Victorian Order of Nurses
- Martha Butler, Older Women's Network
- Ralph de Groot
- Art Field, National Pensioners and Senior Citizens Federation
- Robert Geddes, Canadian Association of Retired Persons
- Cheryl Gorman, Ontario Community Support Association
- Len Lifchus, United Way of Peterborough and District
- Janice MacGregor, Alzheimer's Society of Peterborough
- Shirley Shaw, the Activity Haven Senior Centre
- John Turner
- William Woodbeck, Ontario Coalition of Senior Citizens Organizations

Winnipeg, Manitoba

- Susan Alder, Downtown Seniors Resource Council
- Jack Atchison, Creative Retirement Manitoba
- Louis Bernardin, *Fédération des aînés franco-manitobains*
- Marlene Bertrand, Manitoba Women's Advisory Council
- Anita Cox, Federal Superannuates National Association
- Joanne Grusko, Charleswood Seniors Centre
- Gerri Hewitt, St. James-Assiniboia Senior Centre
- Ethel Hook
- Jane Kilpatrick, Age and Opportunity
- Gail Lepine, Aboriginal Health and Wellness Centre of Winnipeg
- Trish MacDonald, University of Manitoba Centre on Aging
- Mary Richards, Aboriginal Centre of Winnipeg

Nanaimo, British Columbia

- Cecilia Chong, Central Vancouver Island Multicultural Society
- Marjorie Driscoll, Nanaimo Volunteer and Information Centre Society
- Karen Kryzanowski, Seniors Resource and Support Society – Cowichan
- Merry-Jo Levers, Vancouver Island Health Authority – Nanaimo Home and Community Care
- Jacqueline Spies, Nanaimo Family Life Association – Seniors Programs and Services
- Françoise Wagstaff, Nanaimo Telephone Visiting Society





Maple Ridge, British Columbia

- Silvia Fassler, Langley Seniors Resource Centre
- Joyce Jones, the 411 Seniors Centre Society and Seniors Outreach Counsellor Program
- Ray Koob, Ridge Meadows Seniors Society
- Art Kube, Council of Senior Citizens Organizations of BC
- Val MacDonald, BC Seniors Services and Seniors Housing Information
- Ed Queijsen, Maple Ridge Seniors Housing for the Elderly
- Susan Tatoosh, Vancouver Aboriginal Friendship Centre
- Sandy Wagner, Maple Ridge/Pitt Meadows Community Services – Seniors Services
- Jan Westlund, Women Elders in Action

Vernon, British Columbia

- Diann Bastian, Whitevalley Community Resource Centre
- Kelly Denis, People in Need Crisis Intervention Society
- Dayle Dury, Seniors Information and Resource Bureau
- Elaine Gallacher, Vernon Community Response Network
- Elsie Gerdes, BC Old Age Pensioners Society
- Donna Lommer, Interior Health – Home and Community Care
- Mavis McGuire, Abbeyfield Houses Society of Canada – Vernon
- Doris Parker, First Nations Friendship Centre – Elders, Sharing Our Knowledge
- Jan Schulz, Family Resource Centre Society for the North Okanagan
- Linda Yule, United Way of North Okanagan Columbia Shuswap

Whitehorse, Yukon

- Michael Brauer, Elder Active Recreation Association
- Kelly Cooper, Adult Community Services– Government of Yukon
- Dorothy Drummond, Golden Age Society
- Joan Graham, Council of Yukon First Nations
- Elaine Kimball, Home Care – Services for Seniors
- Michelle Kolla, Skookum Jim Friendship Centre
- Cynthia Onions, Community Day Program - Government of Yukon
- Ken Snider, Yukon Council on Aging/Dawson Seniors Group
- Dwayne Wheeler, Seniors Social Housing





Regina, Saskatchewan

- Carole Brouwers, Regina Home Economics for Living Project Inc.
- Brian Gieg, Seniors Healthy Living Program – Regina Qu'Appelle Health Region
- Joyce Glen
- Fern Haight, National Pensioners and Senior Citizens Federation
- Les Lye, Saskatchewan Seniors Mechanism
- Beverly MacLeod, Saskatchewan Seniors Mechanism
- John McFadyen, Mobile Crisis Services
- Bill McRae
- Pierre Schweda, Regina Senior Citizens Centre
- Ian Shields
- Marj Thiessen, Seniors Education Centre, University of Regina

Calgary, Alberta

- Patricia Allen, Kerby Centre for the 60 Plus
- Corina Cole, Special Needs Assistance for Seniors/Alberta Seniors and Community Supports – Government of Alberta
- Laurie Lyckman, Seniors Advisory Council for Alberta
- Kim Savard, Bowmont Seniors' Assistance Association
- Salim Sindhu, Calgary Immigrant Educational Society
- Anna Sommer, Calgary Seniors' Resource Society
- Lawrence Tymko, Alberta Seniors Citizen's Housing Association
- Robert Wiles, Seniors Social Development Unit, City of Calgary; Community and Neighborhood Services
- Kevin Zeh, Diversity Resources Unit - Seniors Liaison Program, Calgary Police Service





ANNEX D

Overview of the Retirement Income System

Canada's Retirement Income System (RIS) is intended to fulfill two different but related objectives: to reduce the incidence of low income in old age; and to enable seniors to maintain a reasonable living standard in retirement. The system is comprised of three separate but related tiers designed to work together.

The first tier is made up of the Old Age Security (OAS) program, a non-contributory, residence-based program which provides a basic pension to virtually all seniors, and the Guaranteed Income Supplement (GIS) to seniors who have little or no income other than the OAS. The Allowance and the Allowance for Survivors also provide benefits to low-income persons aged 60 to 64 who are spouses or common-law partners of GIS recipients or survivors.

The second tier of the system is the Canada Pension Plan (CPP) and the Quebec Pension Plan (QPP). The CPP is a jointly managed federal-provincial plan that is financed through contributions from employees, employers, the self-employed, and from investment income. The QPP applies in Quebec. Almost everyone who participates in the paid labour force in Canada contributes to the CPP or QPP and will benefit from their retirement and other provisions.

The third tier of the retirement income system consists of private retirement savings. This includes both private workplace pension plans, known as Registered Pension Plans (RPPs), Registered Retirement Savings Plans, private investments and other income or assets.





Canada's Retirement Income System

	Resource	Number of Beneficiaries/ Contributors	Maximum Monthly Benefit	Total Amount Paid
PILLAR 1 Public Non-Contributory	Old Age Security (1952)	4.5 million (2008 monthly average)	\$516.96 (October-December 2008)	\$26 billion (2008)
	Guaranteed Income Supplement (1967)	1.6 million (2008 monthly average)	\$652.51 (single person) (October-December 2008)	\$7.5 billion (2008)
PILLAR 2 Public Contributory	Canada Pension Plan (1966)	- 12.2 million contributors (2006) - 3.5 million retirement beneficiaries (2008 monthly average)	\$884.58 (2008 maximum monthly retirement benefit)	\$21 billion (2008 retirement benefit)
	Quebec Pension Plan (1966)	- 3.7 million contributors (2006) - 1.3 million retirement beneficiaries (2008 monthly average)	\$884.58 (2008 maximum monthly retirement benefit)	\$6.1 billion (2008 retirement benefit)
PILLAR 3 Private Contributory	Registered Pension Plans (RPPs) (workplace pensions) (1917)	5.7 million Canadians enrolled (2005)		
	Registered Retirement Savings Plans (RRSPs) (1957)	6.2 million contributors (2006)	\$2,730 (median contribution) (2006)	
	Other Assets and Income	- Housing assets - Business assets - Earnings: median earnings of seniors in the labour force: \$10,000 (Census 2001)		





ANNEX E

Overview of Measures of Low Income

The most commonly used measure of low income in Canada is the Low Income Cut-Off or LICO. However, it is important to note that the LICO is not a measure of poverty, but rather, as the name suggests, a measure of low income.

The LICO is based on how much a family spends on the basic categories of expenditure (food, clothing and shelter) relative to what the average family spends. A family is considered below the LICO if it spends a share of its post income tax income on food, shelter, and clothing that is 20 percentage points higher than the average family. The income levels where this occurs are then calculated for various family and community sizes to produce a range of LICOs (see table below). Generally speaking, the larger the community, the higher the LICO. There are both before-tax and after-tax LICOs, with the latter being the more common measure as it better represents the income one has available to spend.

Low Income Cut-Offs, After-Tax, According to Family and Community Size, 2006

	Rural areas	Urban areas			
Size of Family Unit		Less than 30,000	30,000 -99,999	100,000-499,999	500,000 +
1 person	11,492	13,152	14,671	14,857	17,568
2 persons	13,987	16,008	17,857	18,082	21,381
3 persons	17,417	19,932	22,236	22,516	26,624
4 persons	21,728	24,867	27,741	28,091	33,216
5 persons	24,742	28,317	31,590	31,987	37,823
6 persons	27,440	31,404	35,034	35,474	41,946
7 persons or more	30,138	34,491	38,477	38,962	46,070

Source: Statistics Canada. 2008. Income in Canada (Catalogue no. 75-202-X). Ottawa: Minister of Industry.





Statistics Canada also produces an alternative relative measure of low income called the Low Income Measure (LIM). The LIM is defined as 50 percent of median family income adjusted for family size. The advantage of the LIM is that it allows for international comparisons. However, the major disadvantage of LIM is that it does not take any account of differences in living costs and in communities across the country.

An alternative to these two relative measures of low income is the Market Basket Measure (MBM). The MBM assesses whether households can afford to purchase essential goods and services including food, clothing, shelter, transportation and other essentials of life. Unlike the LICO, MBM is based on the goods and services in the basket rather than the share of income spent on food, clothing and shelter. MBMs vary by family and community size and are calculated for 48 geographic regions across the country.



