

January 12, 2006 – Victoria, British Columbia Summary of Presentations

The following information was received with great interest by the Council. This information will be integrated with input from the public, presentations at subsequent meetings, and background readings and research on the various topics, as the Council begins to develop recommendations for its final report.

The information presented here does not necessarily reflect the position of the Government of British Columbia or the Premier's Council on Aging and Seniors' Issues.

During their January 12 session in Victoria, Council members heard briefings on four topics – all tied together by the broader theme of **healthy aging**:

- Nutrition and aging
- Healthy living and healthy aging
- Physical activity and healthy aging
- Lifelong learning and healthy aging

Keynote presentation: “How are we aging?”

Dr. Andrew Wister, Chair of the [Department of Gerontology at Simon Fraser University](#), set the tone for the day by surveying trends and other statistics describing the overall health of the current population of seniors as well as pre-senior baby-boomers. He noted that although there was much good news – declines in smoking, heavy drinking and inactivity – there was also bad news – in particular about obesity which has doubled in the past 15 years.

What Dr. Wister described as “overall functional disability” has declined over the past few years – which means relatively fewer people are unable to care for themselves because of disease or infirmity during old age.

He pointed out that many risk factors (poor diet, lack of activity, smoking etc.) depend on individual decisions, but these turn are shaped by social forces such as advertising, income and relevant attitudes. He noted that governments have far less to spend on promoting healthy living than the fast food industry has to spend on promoting its products.

Dr. Wister said British Columbia is well-positioned to be a leader in healthy living. It is important that this effort get focussed political leadership – such as that demonstrated in the 2005 Throne Speech setting provincial targets. In addition to leadership, more resources are also necessary if the shift to healthy living is to be successful.

He also suggested the medical profession promote the “expert patient” model to encourage individuals to take greater control of their overall health, and that “healthy living” needed to get higher up on the municipal agenda across BC.

Nutrition and healthy aging

The Council next heard from Susan Crawford, Ph.D. – Assistant Director, the Canadian Institute of Health Research's [Institute of Aging](#), located at UBC. Dr. Crawford echoed the concerns Dr. Wister had raised about fitness – pointing out that almost two-thirds of BC seniors are overweight or obese, and fewer than one in ten eats a recommended balanced diet. Many boomers and seniors do not receive enough calcium, vitamin D or fibre.

It is widely known that obesity and poor diet are linked to a number of disorders that not only shorten life, but also interfere with the ability to live a full and satisfying life: some types of arthritis,

diabetes, hypertension, cardiovascular disease, breathing problems, loss of mobility, and a reduction in mental alertness, memory and the ability to reason.

Dr. Crawford suggested a range of potentially helpful responses to this situation, including education/marketing, community-based programs and mobilising primary-care professionals to challenge patients and clients to change their eating habits. One innovative idea was to educate schoolchildren to take new information and new attitudes back home to parents and grandparents.

She also suggested more research and a greater exchange of information between various kinds of specialists working on this problem.

Healthy living and healthy aging

The next briefing came from Dr. Penny Ballem – a physician and current Deputy Minister of [Health](#) in British Columbia. Dr. Ballem pointed out that the negative consequences of unhealthy aging affect both individuals and the health system – and that investments in healthy living pay off through improved quality of life for people. They also lessen the rapidly growing burden on the health system.

She described the BC Government initiative *ActNow BC*, which involves 70 partners promoting healthy living by reducing tobacco use, improving eating habits, encouraging physical activity and – for women during childbearing years – eliminating alcohol during pregnancy. Dr. Ballem explained the program is considering additional themes specifically for seniors – including injury prevention (falls) and social connectedness.

Physical activity and healthy aging

The Council heard three presentations on the relationship between healthy aging and physical activity. Each presentation was delivered by a different team or resource person. The speakers included:

- Marion Lay, President, [2010 Legacies Now](#) and Dr. Karim Khan, Assistant Professor with the UBC Bone Health Research Group, [UBC Medical School](#)
- Sharon Meredith, Program Manager, [BC Recreation and Parks Association](#)
- Colin Milner, CEO, [International Council on Active Aging](#)

All four speakers agreed that public policy needs to encourage older adults to live an active lifestyle, and to support programs that make this happen. Each speaker is currently engaged in an effort to bring this about:

- **2010 Legacies Now** is the physical-activity partner to ActNow BC – and is currently developing a seniors' program based on the view that “the only magic bullet against aging is physical activity.”
- The **BC Recreation and Parks Association** is currently developing an Older Adult Strategy as part of a province-wide effort to increase physical activity amongst all age groups.
- The **International Association on Active Aging** is a professional association that advocates for a more active lifestyle for seniors, and seeks out “best practices” and public-policy ideas to bring this about.

Some of the highlights of the panel discussion include:

- As little as four exercise sessions a week for 30 minutes by seniors each is enough to make a difference between healthy aging and deteriorating health.
- Public education, communications and marketing are critical elements of successful fitness programs for seniors – it's not enough simply to hire a fitness instructor and open the door.

- Much more needs to be done to encourage physicians and other health care workers (and health care institutions) to become front-line promoters and facilitators of seniors' fitness activities.
- Governments need to understand that fitness programs for seniors are an investment that will improve health and so reduce health care costs – someone in the discussion made the point “You either pay now or you pay later...”.

Lifelong learning and healthy aging

The Council heard three presentations on lifelong learning as an element of healthy aging. Each presentation was delivered by a different resource person. The speakers included:

- Gary Dickinson, President of Kelowna's [Society for Learning in Retirement](#)
- Don Black, Director of Community Programs, [UBC Continuing Studies](#)
- Linda Mitchell, Executive Director, [Literacy British Columbia](#)

Some of the highlights of the panel discussion include:

- Currently about five percent of seniors are enrolled in continuing education – with a prediction from UBC that this will triple over the next 25 years.
- Prediction: baby-boomer seniors “will not view themselves as old,” and this will affect attitudes towards continuing education – marketing of courses will need to take this into account.
- An expected change in the role of employment during “retirement” – prompted by skills shortages and the boomers' lifestyle expectations – will create an increasing demand for lifelong education amongst seniors in the upcoming decades.
- Currently almost 70 per cent of BC seniors have low literacy skills – in the lowest two levels out of five. This score is expected to improve as the wave baby-boomers gets older and joins the ranks of seniors.
- Kelowna's Society for Learning in Retirement is one of 50 non-profit groups across Canada that organize community-based, low-cost peer learning taught by volunteer peer teachers.