



active AGING

SYMPOSIUM 2009

aging in action

**Vancouver Conference & Exhibition Centre
Vancouver, British Columbia
Thursday June 18, 2009**

Summary of Proceedings



*Ministry of Healthy Living and Sport
Population and Public Health
Seniors' Healthy Living Secretariat
Victoria, BC*

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Background

Since 2007 the Government of British Columbia has hosted an annual Active Aging Symposium (Symposium). The Symposia have brought together seniors' organizations, care providers, administrators, community organizations, health providers and others interested in seniors' programs, to enhance knowledge, enable learning and identify actions by:

- sharing promising practices through community showcases;
- providing a forum for networking and exchanging knowledge; and
- identifying how cross-sectoral collaboration can be encouraged and supported throughout B.C.

Evaluations from participants indicate that the Symposium was a valuable resource for older adults and those working with them to:

- exchange ideas and information;
- talk about successes and areas of improvement; and
- help inspire motivation to promote change in their communities.

The Symposium is an action contained in *Seniors in British Columbia: A Healthy Living Framework* (Framework) to help promote healthy living for older people. The Framework, launched September 12, 2008, provides the Province's blueprint to support the aging population over the coming years through four cornerstones: create age-friendly communities, mobilize and support volunteerism, promote healthy living and support older workers.

Overview of the Symposium



The third Symposium was hosted by the Seniors' Healthy Living Secretariat on June 18, 2009, from 9:00 a.m. – 4:00 p.m. at the Vancouver Convention & Exhibition Centre with the theme “Aging in Action: Mobilizing and Supporting Volunteerism”.

Approximately 200 people attended the event.

(See **Appendix 1 – Agenda**)

Highlights included:

- An overview of the Framework and key initiatives for seniors in B.C.
- Keynote speaker Dr. Art Hister, who discussed how volunteerism helps shape a healthy life
- A Talk Show with panellists from seniors, voluntary and community organizations who discussed challenges and opportunities for organizations that support volunteers
- Community Showcase featuring 17 interactive exhibits for participants to learn about programs and resources supporting seniors and active aging available across the province
See Appendix 2 – Showcase participants
- An opportunity for the audience to contribute their ideas for action on six themes in small group discussions
See Appendix 3 – Aging in Action in B.C. - Dreaming Big Discussion
– details from the flip charts as recorded by participants
- Activity breaks to highlight physical activity for older adults

Welcome and Symposium Opening

Representatives from the Ministry of Healthy Living and Sport (Ministry) opened the Symposium with an overview of changes to seniors' healthy living programs and initiatives that have occurred since the 2008 Symposium.

An Overview of the Ministry of Healthy Living and Sport

Summary of Presentation by Andrew Hazlewood, ADM

Andrew Hazlewood, Assistant Deputy Minister of Population and Public Health, provided an overview of the Ministry of Healthy Living and Sport. The creation of this Ministry in 2008, separate from the Ministry of Health Services, signals a priority for government in promoting healthy living and supporting population and public health.

The Seniors' Healthy Living Secretariat is located within the Population and Public Health Division of the Ministry. The focus on seniors' healthy living within the core business areas of Population and Public Health demonstrates the high priority given by government on the importance of healthy living for older adults. The Division also works to promote the health of Aboriginal people, women and children. Recent work includes coordinating the provincial government's response to the H1N1 virus; establishing new provincial guidelines for better air quality and enforcing meat regulations to enhance food safety and security for consumers. Health promotion is accomplished by working with key partners and stakeholders to create the conditions to support healthy living, foster good health and prevent injury, disease and addictions.

A Focus on Aging in Action: BC Seniors' Healthy Living Framework

Summary of Presentation by Silas Brownsey, Executive Director

Silas Brownsey, Executive Director of the Seniors' Healthy Living Secretariat, provided an overview of [*Seniors in British Columbia: A Healthy Living Framework*](#) and its focus on action through four cornerstones – create age-friendly communities, mobilize and support volunteerism, promote healthy living, and support older workers. Key activities of the Secretariat include:

Seniors' Healthy Living Advisory Network (Network)

The Network was established in 2009 and held its first meeting on March 27th in Vancouver. The Network provides a vehicle for advice to government on policy and program development and implementation of the Framework by engaging older adults and stakeholders. There are 13 members of the Network who are representative of the various geographical areas in the province, the private sector, non-profit and seniors' organizations, and the research community.

BC Seniors' Guide

The ninth edition of the *BC Seniors' Guide* was released on March 16, 2009. The Guide is a one-stop resource that connects seniors with services and information. Call the *Health and Seniors Information Line* for a copy - 1-800-465-4911.

ActNow BC Seniors' Community Parks

ActNow BC Seniors' Community Parks have been built in 18 communities around the province. The Ministry provided funding of \$1.8 million in total to 18 municipalities to build parks featuring outdoor recreation equipment for older adults, and provide a place that inspires social connection as well as physical activity.

Community Action for Seniors' Independence (CASI)

In April 2009, the Secretariat signed a partnership agreement with the United Way of the Lower Mainland to develop and implement Community Action for Seniors' Independence (CASI) pilot projects in up to five B.C. communities. The province contributed \$700,000, with the United Way of the Lower Mainland contributing \$250,000.

ActNow BC Seniors' Ambassador Program

Silas Brownsey introduced Katherine Wylie to speak about the new ActNow BC Seniors' Ambassadors Program. The program will reach older adults in communities across B.C. by:

- a) supporting the recruitment of adults 55 and providing training of the recruits to become healthy living ambassadors for ActNow BC and the Province of British Columbia; and
- b) assisting in promoting active living to seniors and communities throughout B.C.

Following the presentations by the Ministry, discussion from the audience included a comment about supporting seniors for the BC Senior Games and BC Games, questions about retirement benefits and private pension plans, and how the Ministry supports volunteer organizations and diversity. Silas Brownsey responded that the Secretariat would consider these topics in its planning.

Healthy Living and Volunteerism: “You Can’t Have One Without the Other”

Summary of Presentation by Dr. Art Hister

Dr. Art Hister is a daily health analyst on Global TV (BC) and a daily contributor to CKNW Radio’s Morning News. He is the author of two best-sellers, A Midlife Man and A Guide to a Longer and Healthier Life, as well as numerous magazine and newspaper articles.



Dr. Hister stated that people are living longer now, but are more likely to suffer from physical, neurological or emotional ailments. One of the major risk factors is lifestyle choices. He explained that individuals can achieve healthy aging through diet, exercise, community connection, stress control, and getting good quality sleep. He suggested people could get a better sleep by changing behaviours, such as avoiding television before bedtime.

Dr. Hister provided a statistic that individuals who volunteered at least 40 hours per year, as well as those who volunteered with just one organization, or group, had the lowest risk of mortality.¹ He also explained the benefits of volunteering, such as lower mortality rates, greater functional ability and lower rates of depression later in life.

In discussion, the audience raised a number of questions and comments about health concerns. Dr. Hister responded that environmental toxins can be a health concern, but lifestyle factors have a much bigger impact on health.



In a discussion about stress, Dr. Hister suggested that people maintain stress at appropriate levels and know their limits. Being tired and gaining weight are symptoms of too much stress. Challenging one’s self occasionally, but not all the time, is an example of good stress.

¹ Musick M, et al., *The Journals of Gerontology: Series B: Psychological Sciences and Social Sciences*, 54(3):S173-S180

Talk Show: Challenges and Opportunities for Organizations Supporting Seniors

Facilitator Don Maunders hosted a Talk Show on supporting seniors, voluntary organizations that provide services for seniors, and partnerships. Perspectives on these topics were provided by:

- Alice Choi - United Chinese Community Enhancement Services Society (S.U.C.C.E.S.S.)
- Deborah Irvine - United Way of the Lower Mainland
- Christien Kaaij - Sechelt Age-Friendly Communities
- Sylvia MacLeay - Council of Seniors Citizens Organizations (COSCO)

In a discussion on how to engage seniors who live in remote, hard to reach, or smaller communities, Sylvia MacLeay said in turn that COSCO sends a quarterly newsletter to 72 organizations to forward to their communities. COSCO also has a website to communicate with members and the public, and has a “train-the-trainer” program to teach other older adults about healthy living topics.



Sylvia MacLeay, Christien Kaaij, Deborah Irvine, Alice Choi

Alice Choi discussed some of the obstacles older people from ethnocultural communities face (e.g., language, culture, values and beliefs) that can hinder their ability to be involved in the community. For example, she noted that when Chinese women move to Canada, many take care of the home and the children and they rely on their circle of trusted friends and family, so they may not get out into the

community. Ms. Choi indicated that direct face-to-face interaction is the most powerful way to reach people, as long as there is trust. Building these relationships is key in reaching people and providing information.

Christien Kaaij discussed her experiences working in Holland developing integrated, supportive communities. She found that successful partnerships and age-friendly communities depend on leadership, diversity, involved community organizations and engagement of marginalized individuals. Health care providers and organizations should also be involved by providing information and outreach programs and connecting people with the right service. Being unable to ask for

help can be a barrier for individuals to gain access to needed services. Regular health care visits may provide a mechanism to triage abuse or financial issues.

Deborah Irvine discussed the new partnership between the United Way of the Lower Mainland and the provincial government for a three-year initiative that will establish up to five pilot projects supporting seniors' independence. The new initiative will help seniors remain in their home and have a connection with their community through independence supports. Ms. Irvine noted that the government's partnership with the United Way shows recognition of the fact that different communities require different programs and services. A community-based organization, like the United Way, can help convene and mobilize support, while government can help leverage funds and garner ideas from a wider scope of communities.

Aging in Action in B.C. – Dreaming Big!

The audience was asked to participate in small group discussions by providing input and ideas on questions around six key themes. The themes were determined based on the Secretariat's current areas of focus, as well as emerging or ongoing issues.

1. Service Info/Health Literacy

Participants were asked how to ensure older adults understand health and other information available to them, and how to ensure older people, in particular those who may not speak English as a first language, are aware of available services. Suggestions included promoting the new 8-1-1 HealthLink BC line to seniors and ethno-cultural communities.

2. Social Connections

On this theme, participants were asked for ideas on how to connect with socially-isolated older adults and how to support older adults to be more socially connected.

Suggestions included age-friendly neighbourhood programs and other ways of attracting seniors, such as providing food at events, and accessible transportation to services, facilities and programs. Trained volunteers who provide one-to-one contact could also assist with reaching out to isolated individuals. Many felt that some people isolate themselves by choice and their boundaries need to be respected.

3. Active Aging/Independence

Participants were asked for their ideas on supports and activities to promote active and independent aging for older adults.

Participants had many suggestions, including workshops on active aging, a toolkit to help plan for aging, and accessible transportation. When asked about what works well in their communities, participants cited intergenerational activities, the Fit Fellas program in West Vancouver, and fall prevention activities. They suggested addressing gaps in information, providing more accessible buildings and community design as ways to continue supporting active aging.

4. Volunteerism

Participants were asked what organizations should do to better support volunteers. Ideas included: volunteer recognition programs, job descriptions, training and tools, liability insurance, paid volunteer coordinators and reimbursement for out-of-pocket expenses. When asked about a provincial volunteer recognition program, participants said recognition awards should be high profile and meaningful. Other ideas were provided such as collaborating with organizations (e.g., passes to recreation centres) as a volunteer recognition gesture, or requiring that a portion of grants received by non-profit organizations be designated for supporting and/or recognizing volunteers.

5. Older Workers

On this theme, participants were asked how older adults who wish to remain in, or return to, the workforce could be supported. Ideas included active recruitment programs and access to benefits, such as longer vacation allotments. Participants suggested that families should not make assumptions that older family members (e.g. grandparents) will provide free childcare.

6. Diversity

Participants were asked what strategies would make seniors' organizations and activity centres more culturally diverse. Participants suggested ensuring diversity on the Boards of seniors' organizations and providing peer mentoring and bridging programs. Ways to support more participation by people with different backgrounds include developing materials in a variety of languages, using language that is inclusive and does not make assumptions, and encouraging leadership by people from diverse backgrounds.

*A detailed outline of all comments recorded by participants on the flip charts and during discussion on each of the themes is included in **Appendix 3 - Aging in Action – Dreaming Big Discussion***

Aging in Action Community Showcase

The Community Showcase was an opportunity for 17 organizations to share information and promote their activities in interactive displays around the room. Participants were encouraged to visit and learn more from each showcase through a Passport which could be stamped at each display. At the end of the day, completed Passports were dropped in a box for a draw to win donated prizes.

Please see Appendix 2 – Showcase participants



The Playground Guys demonstrated equipment found in ActNow BC Seniors' Community Parks in six communities.



Council of Senior Citizens' Organizations – COSCO shared information regarding workshops they hold around the province.



BC Recreation and Parks Association supplied information about active living for seniors.



The Health and Seniors Information Line promoted their toll-free number for seniors to call about programs and services.

Evaluation Feedback

Almost half of the participants submitted an evaluation and the feedback was highly supportive. The vast majority said they found it to be a valuable experience.

In response to questions about the registration process, usefulness of materials, and quality of the facilitation, venue and food, more than 90 per cent stated it was excellent, very good or good.



Participants enjoyed the fitness breaks.



Sharon Meredith, from BC Recreation and Parks Association, and Gloria Gutman, BC Network for Aging Research, enjoy networking.

Most respondents (more than 80 per cent overall) felt that the presentations were useful and the Symposium encouraged information sharing and networking.

More than 80 per cent said they made new contacts and had adequate opportunity for their suggestions and opinions to be heard.

More than 70 per cent found it to be a valuable development experience and more than 90 per cent enjoyed the fitness breaks.

Overall, most respondents found the Symposium to be a successful event. Participants were highly engaged throughout the day and felt the event was helpful in bringing stakeholder groups together to develop collaborative actions on supporting volunteerism.

Thank you to everyone for participating in the 2009 Active Aging Symposium.

Appendices

Appendix 1 – Agenda

9:00am	Welcome and Opening Andrew Hazlewood Assistant Deputy Minister Population and Public Health Ministry of Healthy Living and Sport
9:15am	A Focus on Aging in Action: B.C. Seniors' Healthy Living Framework Silas Brownsey Executive Director Seniors' Healthy Living Secretariat
10:15am	Don't Just Sit There: Get Moving! Blanche Black
10:20am	Health Break
10:45am	Healthy Living and Volunteerism: You Can't Have One Without the Other Dr. Art Hister – Keynote Speaker
11:45am	Networking Lunch
1:00pm	Get Invigorated – Brain Gym Movement Blanche Black
1:05pm	Talk Show: Challenges and Opportunities for Organizations Supporting Seniors Alice Choi – S.U.C.C.E.S.S Christien Kaaij – Sechelt Age-friendly Community Deborah Irvine – United Way of the Lower Mainland Sylvia MacLeay – COSCO
2:10pm	Aging in Action in B.C. – Dreaming Big! Audience small group discussions
3:15pm	Aging in Action Community Showcase
4:00pm	It's a Wrap!

Appendix 2 – Showcase Participants

1. ActNow BC – Alison Schnaiberg – Alison.Schnaiberg@gov.bc.ca
2. BC Network for Aging Research – Bobbi Symes – bsymes@bcnar.ca
3. Boomers Bootcamp: BCRPA – Misty Thomas – mthomas@bcrrpa.bc.ca
4. Brain Gym: Vital Living for Healthy Aging Outreach Program – Lori Wall – LWall@nsnh.bc.ca
5. British Columbia Automobile Association (BCAA) Traffic Safety Foundation – David Dunne – david.dunne@bcaa.com
6. Council of Senior Citizens' Organizations of BC – Alan Peterson – <http://www.coscobc.ca/contact.php>
7. Driving Miss Daisy – Tara Youngson – tara@drivingmissdaisy.net
8. HealthLink BC – Linda Lemke and Kate Jobling – HealthLinkBC@HealthLinkBC.ca
9. Health and Seniors Information Line – Bohdan Jarisz and Deborah McLaren – bohdan.jarisz@gov.bc.ca
10. i2i Intergenerational Society: Meadows School Project – Sharon MacKenzie – sharon.mackenzie@shaw.ca
11. New Horizons – Janice Nelson – janice.nelson@servicecanada.gc.ca
12. Nurse Next Door Burnaby/New Westminster – Denise Kelly – denise@nursenextdoorburnaby.com
13. Physical Activity Line – Laura Loudon – laura.loudon@gmail.com
14. The Playground Guys – Alana Taylor – alanat_playgrounds@telus.net
15. University of Victoria Centre on Aging – Karen Hannah – khannah@dccnet.com
16. Seniors Services Society – Lynda Brind-Dickson – lyndad@seniorsservicesociety.ca
17. VolWeb.ca – 2010 Legacies Now – Lorelynn Hart – lhart@2010legaciesnow.com

Appendix 3 - Aging in Action in B.C. – Dreaming Big Discussion

Small group discussion on six themes – Input from Symposium participants recorded on flipcharts

1. Service Information/Health Literacy

How do you ensure older adults understand the health and other information available to them?

Service Information

- Recognize we need different ways to educate seniors
 - Forums – establish channels
 - Sessions – information
- Better communication process of the information to seniors
- Work more with doctors and hospitals
- Seniors Directories for each area
- Workshops within the community
- Clearer language for all generations
- Creating environments for seniors wanting to come to learn

How do you ensure older people, especially those who speak English as a second language, are aware of the service information available to them?

Health Literacy

- 8-1-1 Line – cater more to senior's needs (i.e., automated system is difficult for seniors to navigate). Introduction of this new line was and still is confusing (e.g. what lines does it cover? Who are you talking to? Transfer to another line?)
- Streamline this service so seniors and others know what it is and how to use it
- Make more effort to introduce a new line and how to use it (e.g., clarify 8-1-1 as a new service). Make an extra effort to introduce the line to seniors, culturally diverse and low-income populations
- Introduce line through delivery of information door to door, presentations to groups, magnets, resource booklet (in multiple languages) - include messages on how seniors can use it
- Look at ways seniors receive any information. Health care navigators for seniors in their own language provided by 8-1-1 line or by health care providers free of charge
- Provide more training opportunities for seniors to learn to provide peer support in navigating systems (e.g., disability, pension, tax, forms)
- Introduce health information at entry points for immigrants

2. Promoting Social Connections

How do you identify and connect with socially isolated older adults in your community?

- Who are they? Sick? Widowed? ESL? How do we reach them?
- Some people would not describe themselves as isolated, but we might.
- Women more social – less isolated?
- Health Case Managers – public can refer people perceived as isolated to health dept.
 - Case managers could get “ball rolling”
- When programs and parks are being planned – need to consider transportation and communication
- People should have access and option to participate
- Have a seniors’ voice on planning committees
- Advertising
- Go to senior areas – housing a tea and talk, door-knocking or BBQs
- Food is good! Bring to drop-in programs.
- Build trust
- Reach a few people will help connect with others
- Word of mouth
- Build relationship with landlords
- Privacy Act can be an obstacle
- Safety
- Respect – What can they do?
- Offer opportunities for them to help
- Attend high school concert / tea
- Intergenerational community clean-up
- How do you approach someone who is isolated? Leave information (written) and return another time?
- Seniors Link – seniors to seniors visitors, read and talk
- Friendly Neighbours Program
- Bring your neighbour to community centre for lunch
- Bylaw officer – acting on unkempt properties – send outreach worker
- Adopt a grandparent
- Communications between organizations
- Build a better mousetrap - What attracts?
- Respectful inclusion
- Isolation not a wrong choice; respecting boundaries
- How to identify isolated people? Use of volunteer connections and existing relationships
- Importance of hospitality/neighbourliness
- Educating others about isolation / public consciousness

- Provide senior peer counselling
- Friendly visitor
- Support in beginning stages
- Use of networks/resources
- Education about dementia for families – comfortable environment
- Access to Alzheimer Adult Day Care
- Alzheimer caregiver support group
- Respite programs
- Multi-language resources
- Some choose to decline participation - I'm not a joiner, I like to be alone
- Barriers – transportation, fear of the unknown, illness (anxiety/depression, physical limitation, dementia)
- Feelings of obligation
- Building trust – purposeful
- North Shore Seniors Go Bus - Supportive transportation – “Flexible, door to door”
- Transportation is addressed as a major BARRIER. Contributes to isolation/cutting off from community
- Connecting children and youth through the school (e.g., intergenerational programs). Normalized, encourages empathetic connections with youth.

What would support socially isolated older adults to be more connected in their community?

- Accessible transportation, support (reminder phone call)
- 1 – 1 personal connection with time and resources for 1-1 trained volunteers
- Individualized creative solutions
- Specific outreach/culturally sensitive/language and customs sensitivity

3. Active Aging/Independence

What supports do older people need in order to age actively and remain independent?

- Support in the home – support system, better home support, help to get to programs, healthy environment in/out of home
- Resource information – methods to learn about programs
- Programs – age appropriate exercise programs, community/local programs and specialized programs
- Access to good, convenient transportation, access to affordable house and cleaning services (affordable, convenient, minimal effort to use/access).
- Accessible support program – health expert, medical services

- Suitable housing – supportive housing, proper independent housing, support to live safely/comfortably at home
- Better pension income
- Social community
- Specific ministry for seniors
- Integration of programs
- House cleaning and laundry
- City planning with seniors in mind
- Affordable door to door transportation for all seniors who need it.
- Support for programs for isolated seniors
- Accessible healthcare – reduced waitlists, proactive screening (mail reminders)
- Advanced Planning – supports for a “plan” for aging (workshops), education, lifelong learning, retirement planning toolkit, continuum approach
- Informal networks of support
 - Support for unpaid caregivers
 - Effective coordination of volunteer services
- Rethinking Community Living
- Independence
- Home sharing
- Intergenerational concepts
- Financial
- Transportation
- Building outside environment – accessibility
- Outreach programs – re: physical activity – available close to home
- Identify the barriers
- Use different language for “programs”
- Friendly phone call that can develop into getting seniors out and connected
- Ask them what they want and what works well.

Ideas for Action:

- Plan for Aging Toolkit
- Active aging workshops
- Accessibility to services (e.g., transportation, fitness)
- Innovative transportation ideas

What are you aware of that works well to help people age actively?

- Fit fellas – senior men – West Vancouver
- Local senior centers
- Networking of stakeholders
- Focus on health promotion

- Falls Prevention
- Community Education
- Intergenerational Activities
- Pets
- Promote 8-1-1
- Outreach to seniors – bring them to lunch – use volunteer drivers/HandyDart
- Group of friends grow from the programs
- Feel more comfortable in a group

Ideas for Action:

- Innovative transportation
- In-home help
- Affordable assisted living equipment
- Diversify our programs
- Marketing – promoting Independence (language)
- Support – funding
- Community-based
- Senior specific
- Younger vs. older senior needs and attitudes
- Provincial government support ongoing
- Preventative medicine priority
- Independent / good health
- Support for Senior Activity centres
- Gaps in information – access – more info sharing to seniors and between organizations
- Home support access – quick response
- Integrated communities and social attitude towards seniors
- More gerontologists needed
- Need to keep up with changing needs of seniors (boomers vs. older seniors)
- Monitor to ensure it is working well
- Seniors Activity Centres (Boomer) – existing need more communication
- Diet – exercise – volunteering ensure housing suited to needs (e.g. close to services)
- Accessibility (buildings)
- Infrastructure (community design)
- Transportation options (senior specific)
- Parks – Safe outdoor spaces
- Good Volunteers (Seniors)
- Sharing successes with others
- Volunteer recognition and support

4. Volunteerism

What should organizations do to support, train, recognize and retain older adult volunteers? If there were a provincial volunteer recognition program, what would it look like? What award categories would be meaningful?

- Treat volunteers with respect
- Provide recognition showing that volunteers have worth
- Provide training for volunteers (possibilities for updating skills)
- Provide job descriptions for volunteers
- Provide tools and facilities
- Create inclusive environments – camaraderie
- Reimburse out-of-pocket expenses
- Ensure good communications within organizations to facilitate sharing of information, feedback and support
- Provide liability insurance – WCB, Directors
- Provincial recognition program via financial and other supports to the organizations (as opposed to the volunteers themselves)
- For individual volunteers – recognize longevity, hours, contributions
- Volunteering is its own reward
- Recruit via sign-on sheets, mass mail outs/advertising, word of mouth
- Voluntary organizations need a clear mission
- Volunteers need similar values to the organization
- Volunteering has to be a clear part of the business plan
- Need volunteers on the Board (this is required) and other opportunities (e.g., steering committee, identifying needs)
- Recognition – individuals want different benefits
 - Many may not want recognition
 - Many younger volunteers just want the experience
 - Jackets/t-shirt (spirit wear) – some want, some don't need
 - Award for first time volunteers
- Share resources – need a volunteer registry – through marketing of resources
- Matching skill needs to volunteers
- Need more support and awareness of existing services
- Need a lump sum of money from the government with the volunteers and organizations deciding how it would be spent. But should have guidelines. Like grants requiring that a certain percentage be spent on volunteer recognition
- Recognition award should be high profile
- Honoraria
- Institute a Smart Card system (volunteer log) – accumulate hours of service and get benefits (award)

- Recognition should be meaningful – awards, prize draws, service recognition, honouring expertise, opportunities to learn (attend seminars). Recreation centres provide passes to volunteers; why not create partnerships with other organizations to offer other things to volunteers (such as “health benefits”)
 - Is there an event we could send volunteers to?
 - Recognition should be close to home – not endorsed by everyone at the table. Some at table believe that a higher level of recognition (provincial) would have a more positive impact
 - “Citation Rose” example on the radio – verbal recognition
 - Information should be disseminated on provincial and federal awards that already exist – are there any?
- Fit – make sure the position is relevant to the volunteer. Set volunteers up for success
- A good volunteer model lets people know the organization is flexible and people don’t have to commit for life
- Be prepared for change
- Find out as much as possible about the individual; you never know what skills you will find
- Volunteers benefit from volunteering – mental and physical health, well-being
- There should be a tax benefit/incentive for volunteers, but who would monitor?
- Other supports for volunteers:
 - Transportation to volunteer sites
 - Help for senior volunteers to cover costs related to volunteering
 - Mileage costs
- Should be based on the “reality” costs
- Need to address turnover rate
- Need a paid volunteer coordinator to keep volunteers engaged

5. Supporting Older Workers

How can we best support older adults who wish to remain or return to the workforce?

- Phased Pension
- Flexibility (e.g. - Job sharing – hours)
- Capabilities – physical / mental
- Modifying job description
- Consultant – new position?
- Switch in job – office to retail or physical – socializing
- Learning new skills
- Education / counselling

Obstacles

- Modify opportunities

- Ageism – attitude of other
- Workers employers “myths”
- Provision of transportation – bus passes / car pooling
- Cultural issues – older people assumed to provide daycare for family – slave labour
- Expectations are different
- Isolation of adults
- History of 65 retirement age – new mind frame
- Choice to work/or not
 - Financial need?
 - Have pensions/or not
- Retaining – appropriate!
- Available to older workers
- Information as to training available to meet needs of labour market
- Financial aid for those who need it
- Lump of labour force

How do we eliminate obstacles that may make it difficult for older workers to continue or remain at work if they wish to?

- Meet with employers who are short of workers (supply / demand labour market)
- Employment agencies – needs, wants, outcomes!
- Actively recruit older workers
- Benefits – longer holidays and medical/dental
- Equal pay for equal work
- Talk to local government
- Counselling on entitlement

6. Promoting diversity

What strategies can be used to make seniors organizations and activity centres more culturally diverse?

- Let them in
- Go to where they are diverse (e.g., staff, language)
- Diverse board
- Hire project people who are culturally sensitive
- Develop a cultural group for seniors
- Cultural supports awareness
- Bridging with cultural awareness
- Peer mentoring
- Supporting cultural leaders

- Find something they can do – such as speaking a language, art, dance
- Finding skills that the senior has, such as cooking, art
- Develop program based on cultures beliefs, values, group dynamics
- Emotional support
- Involve seniors in the planning
- Diverse groups need to be involved in planning and implementation
- Remember seniors volunteer and come to programs for fun
- Build success into programs
- Common interests find commonalities of group
- Build in features to recognize values of diverse groups

How do you support more participation from people with various backgrounds (age, ethnocultural, sexual orientation, income etc.)?

- Print materials in other languages
- Multi-cultural liaison work beyond language, includes cultural aspects
- Educate staff re: cultural groups, their general beliefs, traditions, values, etc.
- Staff to evaluate their own beliefs; examine place of privilege
- Identify who/what has worked in the past
- Conscious of language used on forms, as well as staff interaction with seniors – use inclusive language rather than language that defines a group, gender, etc.
- Acknowledge and address age/mobility/access barriers at physical space, outreach to community
- Include representation from diverse groups in a Board of Directors of seniors' organizations
- Encourage people from diverse backgrounds to take leadership (not just participate)
- Invite people personally – include activities that are chosen by people from many groups and backgrounds
- Be aware/sensitive to protocol/language that is needed to be truly inclusive (e.g. Aboriginal culture); how to invite people
- Target group for inclusion / benefit needs to be at the planning table
- Collect and transmit data respectfully and with sensitivity to context. Collect with permission and collaboration
- Must be done with interpretation from the subject population
- When including Aboriginal populations, the age bracket must be lower due to difference in life expectancy
- Be sensitive and aware of family structure and responsibility in groups of different backgrounds
- Be aware and sensitive to cultural differences in the way people view society and issues. Streamlining and isolating issues does not translate successfully in cultures who have a more holistic view.

- Be conscious that when you talk about “Canadians”, Aboriginal people may not feel included - this has legal meaning and historical meaning that is very important
- Chinese “Canadians” is not a welcome descriptor to Canadians of Chinese descent
- Diversity is valued in our society - this is strength
- We still have a long way to go toward this ideal
- We are still learning how to do it
- The more diversity we include the stronger we are: more knowledge, experience, points of view - better decisions
- Unintentional exclusion: when people are well meaning but do things that exclude or injure others
- Dialogue, sharing, understanding, forgiveness - a long process

For more information

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Hard copies of *Seniors in British Columbia: A Healthy Living Framework* and the *BC Seniors' Guide* are available upon request through the Health and Seniors Information Line.

In Victoria:
250 952-1742

Toll free:
1 800 465-4911

To speak to a registered nurse, dietitian or pharmacist:

Telephone: 8-1-1

Visit: www.healthlinkbc.ca

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