



# COMING of AGE

SASKATOON COUNCIL ON AGING INC.  
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## Aging society presents challenges

By Jenni Mortin

One in eight Canadians is now 65 or older, but when the first baby boomers become seniors in 2011, the percentage will jump, and 30 years later nearly one-quarter of the population will be seniors.

Their needs will have an enormous impact on social and economic policy, according to **The Challenges of An Aging Society**, a forum held in Regina this fall by Statistics Canada, Human Resources Development Canada (HRDC) and the Institute of Public Administration of Canada.

Speakers from Stats Can, HRDC, Health Canada, Co-operators Life Insurance, the University of Western Ontario, the Seniors Education Centre at the University of Regina's University Extension, and Saskatchewan Social Services explored that impact.

### Gleaned from their speeches:

The sheer numbers moving into their 60s, 70s and 80s — there will be four times as many over-85s in 2041 as in 1996 — offer vast challenges, especially at a time when the working population will be smaller.

Canada has strengths to face these challenges:

- ◆ Seniors live longer; those turning 65 can expect to reach 85
- ◆ They are healthier, though their health declines with age
- ◆ Their economic circumstances have improved dramatically
- ◆ They are avid volunteers
- ◆ After retiring, many return to paid or unpaid work
- ◆ Almost to age 74, they give more care than they receive
- ◆ Many live independently.

Because it is aging slowly,

Canada has time to prepare and learn from older countries. Governments' deficits are down, and cost pressures are falling in some areas. Individuals have many ways to save. The Canada Pension Plan has been made sustainable and good safety nets exist. Higher education and lifelong learning opportunities have made people more flexible.

Uncertainties exist, about how individuals will behave, how much they will save, whether they'll live healthily, about the effects of migration and the growing aboriginal population.

Seniors are major users of health services, so already significant health costs are expected to grow, especially after 2011. Gender and age have varying effects on health status: women get sick and men die.

(Please go to page 2)

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# In My Opinion

Most of us have had the pleasure of owning a cat or dog. They can be great pets, but they require proper housing, feeding, identification and medical care. Owners must keep them from being a nuisance through roaming, noise, defecation or urination on others' property or damaging property.

Saskatoon Animal Control By-law 5996 outlines the requirements for cat and dog owners. The pamphlets *Living with Pets in Your Community*, *Controlling Cats* and *Controlling Dangerous Dogs* are available at the City Clerk's Office at City Hall (975-

3240) and many veterinarians' offices.

All dogs over four months must wear a collar with an animal license. Except in off-leash areas, when dogs are off their home premises they must be on a leash no longer than two meters, and under a person's control. On January 1, cats will require licenses and won't be permitted to wander.

Legislation provides controls for dangerous dogs which threaten or attack people without provocation, as recently happened to me. Complaints can be made to the Saskatoon Police

Service (975-8300), charges brought and owners penalized, including quite large fines. The dog may have to be kept in an enclosure, and on a muzzled leash if outside the enclosure. Warning signs and public liability insurance may be required. In extreme cases, the dog may be destroyed. Complaints can also be laid about cats being a nuisance on your property.

More information: City Solicitor (975-3270), Saskatoon Police Services (975-8300) or Saskatoon SPCA (374-7387).

*Art Sumner*

Art Sumner sits on the publications committee.

## Challenges...

(From page 1)

A youth costs society one-third as much as a senior, and most countries spend three to five times more on health care for those over 65 than under 65.

Research has found that doubling the proportion of seniors in the population in 20-30 years will not double public service demands. A smaller youth population will require fewer public services, and total government expenditures will take less of the Gross Domestic Product. The challenge is to make shifts within budgets to accommodate the aging population.

Immigration won't fix the problem of an aging society by enlarging the labour force proportionately. Early retirement and income security plans may need change, and the retirement age may stop falling because people have to work longer to pay for living longer.

Health is more than health care. Later life is not too late for health promotion, and increased risk of disease in older people does not

reflect "normal aging." So health promotion policy and programs for seniors must be a top priority.

The goal should be to add quality of life to years of life. Public policy should encourage individual resilience and adaptation,

personal autonomy and sense of control, healthy practices and life-long health. Investment should be targeted to seniors at risk for major reductions in health status, institutionalization and dependency on others for care.

## SASKATCHEWAN SENIORS

- 14.6% of population now, 17.2% in 2016
- 58% live in cities
- Used almost half of 1997 provincial health expenditures
- 31,000 will be 85 or over in 2016; highest health care service needs

### In Saskatchewan Housing projects for seniors, 1997:

- Typical tenant 80.2 years
- 76% female, 92% single
- Average stay 7.7 years
- More help will be needed for aging seniors in social housing projects; projected housing demand in many smaller communities

### Learning for a long life, lifelong learning:

- 1,400 registrants age 55-96 at University of Regina's Seniors Education Centre this fall, learning for the love of it
- Many seniors don't have the literacy skills needed in this society.

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# "Give Me a Bid to Go!" Auctioneer Roth Urged

BY TERESA HARLEY

**F**or 50 years, auctioneer Ed Roth has presided over every kind of sale, from farm auctions to charity fund-raisers to livestock sales. Although he and his wife Mary now live in a condo in downtown Saskatoon, each week he drives to their hometown, Rosthern, to help their son Glen, who now runs the auction centre there.

Father and son are continuing a tradition started by Mr. Roth's grandfather, who took out an auctioneer's licence in 1900 in Regina, North West Territories.

Mr. Roth learned his trade by listening to other auctioneers and through experience, starting with box socials. He credits his years as a Canadian Army drill sergeant with developing the vocal chords necessary at farm sales before public address systems were available. Being 6'4" and wearing a stetson also helped get a crowd's attention.

"There are no tricks of the trade," he asserts. "You learn the trade. I listen to people and I watch their eyes." His integrity is on the line at every sale. "Knowing the goods that are to be sold is crucial ... Above all else, be honest; do not feed the crowd half-truths."

In many years he had 130 sales and he believes he was the first auctioneer in Saskatchewan to give buyers number, or bidding, cards.

Mr. Roth was a founder and first president of the Saskatchewan Auctioneers Association. He published a book about his experiences, *"Give Me A Bid To Go": An Auctioneer's Story*, in 1990.

A well-respected judge of cattle and hogs, he

has been a devoted 4-H supporter since boyhood and was inducted into the Saskatchewan 4-H Hall of Fame in 1994. He is an honorary life member of the Saskatchewan Agricultural Society Association and was awarded the Saskatchewan Livestock Association's Honour Scroll.

Two years as mayor of Rosthern represent just a small part of his dedication to his home community. He was president of both the Saskatchewan Dairy Pool and the Saskatchewan Dairy Association. How did he find time to run a successful family grain and livestock farm, and be an auctioneer?

He gives his wife credit for working as hard as he did, raising six children whilst helping with farm chores, including dairy cattle, hogs, chickens and turkeys, driving the combine and growing a large garden. She wonders now how they had time to do so much, including "just being neighbourly." He is immensely proud of her quilting abilities, and loves her to show visitors her beautiful creations.

Nowadays, the couple are still being neighbourly. He chairs their condominium board and she is a member of the social committee. He is working on a second book, which will tell the story of his family's 100 years of auctioneering.

"I'm not retired. I just wanted to get away from the pressure. Retirement? No, no, no!"

*Teresa Harley is a freelance writer.*



Lorne Paul enjoys  
life at McClure  
Place

# TO MOVE OR NOT TO MOVE?

By Lorne Paul

**P**ossibly the most difficult decision senior citizens must make is whether and when to move from their long-time home to a senior complex of some sort — and it is a decision that many put off.

I am a senior senior, and for eight years have lived in the senior high rise chosen by my wife and myself. But too often I have seen what happens to people who wanted to move — some day — but delayed and delayed.

They applied to the place of their choice and, after a time, were accepted. But they were not ready yet, they decided, so their names dropped to the bottom of the waiting list, and often did not rise to the top again. They lost the opportunity to move into the place of their choice — and had to search elsewhere. Meanwhile, they were getting older.

Their reasons for not moving when their first choice becomes available vary. They are just not ready. They are reluctant to leave their comfortable home with so many treasured memories and things. They lack the cash to buy into their chosen place. (Some friends mortgaged their house to raise the cash to buy into the desired apartment; the house was soon sold and the mortgage paid off.) Too often, far too often, couples or individuals turn down their first choice and never get another chance at it. Disappointed, they have to look elsewhere, and we seniors "ain't as young as we used to be."

Eight years ago my wife and I, both seniors, moved from our cherished home into the apartment building that was our first choice, and with this experience, I view the situation in a new light.

When we were accepted into our apartment,

our children rallied round and helped us decide what we wished to take, what we could take and where each item would be placed in our new home. They measured our furniture and the available space. They made the move and we walked into our new home with our familiar furniture and pictures in place.

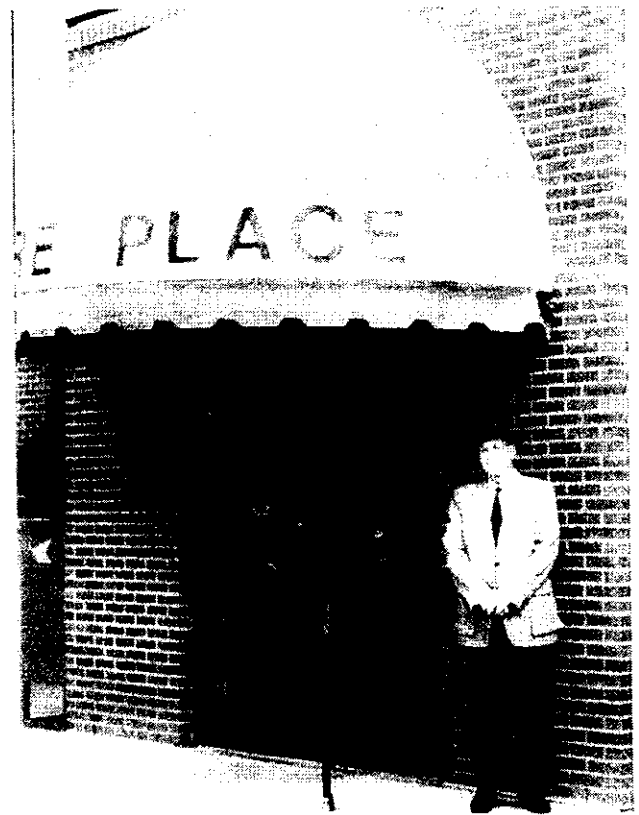
If we had not moved then, we would have been left with various complicating situations, starting with a new search. It is always possible that with delay, one of a couple may not be able to help make the necessary decisions. A few months after we moved, it was necessary for my wife to move to a special care home. Had we delayed, I would have been alone trying to find a new home.

Seniors who wish to move should recognize the consequences of delay. If you want more problems, hang on to your home.

*"There is a tide in the affairs of men,  
Which, taken at the flood, leads on to fortune..."*

Just so.

Lorne Paul is a member of the publications committee.



# Keeping Those Dentures Looking Good

Everybody has a funny story about dentures — like the true story of the hospital aide who gathered all the dentures from one section of the hospital to wash them in one big batch, and then spent days trying to match dentures to mouths. But in reality, dentures are serious business, part of maintaining our health and appearance and our ability to eat properly when the teeth we were born with can't do the job any more.

*Coming of Age* asked Dennis Berner D.D. of Norland Denture Clinic in Saskatoon, a member of the Denturist Society of Saskatchewan, for advice on caring for dentures.

**By Dennis Berner**

**D**entures are made from acrylics (plastics) that actually require very little care -- but care given daily -- to maintain a clean, healthy mouth. Some denture wearers get bad breath or tender spots if the dentures are not cleaned properly.

They should be left out for the night or at sometime during the day to give the blood circulation an opportunity to rebuild the tissues, which need rest the same as the tissues of your feet. This is a perfect opportunity to soak your dentures in a good denture cleaner. If your cleaner doesn't work, your denturist will recommend a good inexpensive one that will.

Your dentures and your mouth should be examined at

least every two years by your denturist. We see our medical doctor for a physical once a year but after we become denture wearers, we have a tendency to neglect our mouths. If you have any other concerns, such as tender areas or spots in the mouth or throat, pain in or by your ears or frequent headaches, please call your denturist for an examination.

If you wear partial dentures, the same rules apply. Remove them after each meal and rinse them and your mouth thoroughly. It is important to soak the partial denture daily and clean carefully around the clasps with a soft toothbrush. This is a particularly vulnerable area for cavities so it must be kept clean.

It is a mistake to think that once you get your dentures, they will remain permanently satisfactory. Under the influence of saliva and other fluids, the materials deteriorate.

The supporting bone and tissues undergo constant change throughout life, although the greatest change takes place in the first six months after the natural teeth are lost. To maintain full use and appearance, dentures should be altered by relining them or replacing them when necessary.

When your dentures feel too loose or you get too much food under them, have them examined. The final decision on doing something, or not doing anything, will be yours.

# Falls Can Lead to Brain Injury

## Most Falls by Seniors Occur in their Homes

*By Ginnie Hartley*

Lily, an 82-year-old widow who lived by herself, had just come home from hospital after back surgery. Her daughter had promised to drop in to see her. Lily wasn't feeling very steady on her feet as she'd just taken her pain medication and her back still hurt, but she badly wanted a cup of tea.

After waiting a long time for her daughter to come — it was almost dark! — she decided she could maybe manage by herself. She had never had any difficulty doing this simple thing before her operation. She wondered where her glasses were, but decided she could manage without them.

She struggled out of her chair and started across the living room toward the kitchen. Her foot caught in the throw rug by the TV and before she could steady herself on the TV table, she fell, banging her head against the corner of the TV.

Lily's story is common among the elderly. Most of their falls (60 percent) occur in their homes, often due to causes like Lily's — difficulty with balance whether because of medications, physical or visual difficulties; poor lighting or tripping hazards such as rugs and little tables.

Every year in the U.S. (no statistics available for Canada), one

of every three people over 65 falls. For those over 85, falls are the leading cause of injury-related death, and they are the second leading cause for those 65 to 84. Falls can lead to fractures of the hip, leg, ankle, arm or wrist, or injury to the spinal cord or brain.

Injury to the brain may be a result of concussion which can

may be difficult to identify if the elderly person suffered from confusion before the fall.

If the person becomes increasingly sleepy, he or she should be taken immediately to the emergency room of the nearest hospital. Concentration difficulties, dizziness, apathy, depression and anxiety may be present for weeks after a fall, and should be reported to the family doctor.

How can falls be prevented?

- Regular physical activity to improve strength, mobility and flexibility.

- Adequate medical supervision to maximize control of medical conditions and minimize use of medications.

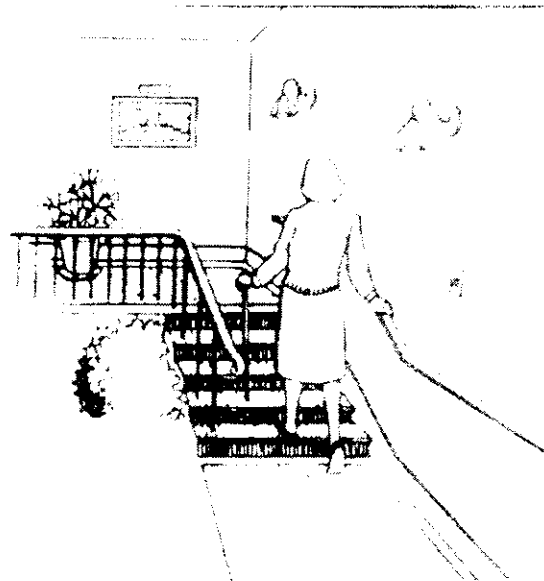
- Make sure your home is free of hazards such as slippery or uneven floors, loose rugs,

unstable furniture and unnecessary objects on the floor.

- Install grab bars and ensure that lighting is good.

*Ginnie Hartley is a speech-language pathologist with the Acquired Brain Injury Outreach Program in Saskatoon. For more information on acquired brain injury, call 655-8448.*

*Information on safety equipment is available at the Council's Resource Centre.*



*Good lighting, secure railings help prevent falls.*

involve a brief loss of consciousness. Headache, confusion, dizziness, lightheadedness, nausea and vomiting and/or blurred vision may occur after a severe fall. It is important to seek prompt medical treatment after any accident as there is potential for bleeding in the brain with head trauma. Some of the symptoms

# Plan for Death as You Did for Life

By Margaret Mack

**R**ecently I've been involved in or observed the legalities around three deaths, and saw how much easier it is when a person has made the necessary arrangements and has a will — and how difficult otherwise.

The experience confirmed the need to plan one's funeral beforehand, and to act to preserve the wealth created through planning, expert advice and proper investing. We can contribute to our family's future by what we do today, by:

- ◆ Consulting a lawyer and an accountant
- ◆ Gifting assets and reducing our estate
- ◆ Contributing up to 75 percent of net income to registered charities and claiming tax credit

People who die without a will are silent about who they want to look after their estate and where the assets will go, and that silence triggers provincial legislation. If you die intestate:

- ◆ No executor is in place to act immediately
- ◆ Your children will get their shares only when they reach majority
- ◆ All beneficiaries must agree to the appointment of an administrator, and delay may result if a beneficiary is too young, or incompetent
- ◆ Your spouse will not inherit your entire estate
- ◆ Those who inherit are predetermined by provincial statute
- ◆ After debts are paid, your estate will be divided 50-50 between your spouse and child. If you have two or more children, your spouse gets one-third and the children two-thirds.

**Y**ou should choose an executor (and an alternate, if necessary) and share the location and date of your will. List insurance policies, banks and account numbers, safety de-

posit boxes, pension plans and RRSPs, real estate holdings, credit card numbers, memberships, major assets and liabilities.

Any power of attorney you have given terminates at your death and the executor named in your will has authority to act.

The executor will get the statement of death, and will immediately need your social insurance number, date/place of birth, occupation, family and key contact numbers, citizenship, parents' names and birthplaces.

Cremation or burial, cemetery, funeral home, casket, urn, vault and details of funeral or memorial service must be quickly arranged. The executor will need will, birth certificate, marriage license, insurance details, property deeds, auto ownership, income tax returns. He/she will arrange payment for the funeral and burial, medical and health care expenses, and review the adequacy of property insurance coverage and alter if necessary.

Immediate attention must be given to mortgage payments and future financial obligations. Any T1 income tax returns for previous years must be filed within six months. The family's cash needs must be determined, and Old Age Security, health insurance and driver's license cancelled. Debits and legacies must be paid, bequeathed personal effects delivered and receipts obtained.

An executor can relieve a grieving family of responsibilities for these heavy demands. Planning for death is as important as planning for life.

*Margaret Mack, a retired teacher, is a former member of the Publications Committee.*

## **Useful reading:**

Will P.G. Allen and Thomas F.W. Allen. *Estate Planning Handbook*  
Sandra E. Foster. *You Can't Take It With You*  
Local funeral homes, hospitals. Checklist and information

# International Year of Older Persons Put Seniors in the World Spotlight

By Glenda Hanson  
Provincial Co-ordinator, IYOP

The International Year of Older Persons is almost over, but it was filled with activities which spotlighted seniors, and hopefully its recognition of their important and beneficial role in society and the intergenerational harmony it built will continue and grow in the new millennium.

Saskatchewan celebrants of IYOP participated in many national, provincial and local events ranging from planting gardens and trees to walks and the collection of older people's memories and stories as a legacy for future generations.

The launch of the provincial "Building a Lasting Legacy" project of inter-generational tree-planting at Wanuskewin Heritage Park on May 21 was the first big event in Saskatoon. Ten communities participated in this project.

Wanuskewin was also the scene of a PowWow Honouring Our Elders on May 26, at which Don Harron, co-chair of the Canada Co-ordinating Committee for IYOP was our guest.

In October, 67 Saskatonians joined in the Global Embrace worldwide walk sponsored by the World Health Organization. National co-chair Flora MacDonald was guest speaker October 17 at an Ecumenical Inner City Church Service at which provincial chair Wes Ashwin gave the IYOP sermon.

On November 1, the Saskatoon Council on Aging hosted Spotlight on Seniors, an education and trade show that attracted more than 30 tables



of businesses and organizations and included entertainment, recreation and education.

The provincial advisory committee for IYOP distributed more than 3,000 community kits to organizations throughout the province, and 10,000 pamphlets to make people aware of the year. It promoted participation in the Seniors

Travel Program (discounts with VIA Rail, Greyhound and Air Canada), "Walk the World 99" walking promotion by Bata Shoes and Canadian Seniors Help Seniors in Kosovo.

It granted \$25,000 to 50 Saskatchewan communities to help them plan IYOP events, and made presentations to various groups and communities.

In Regina, three trees were planted in partnership with TREE Canada on the Legislative Grounds in front of the Wascana Rehabilitation Centre on October 1 -- International Day of Older Persons -- to recognize the IYOP work done by the national co-chairs and provincial chair. Another tree was planted at the Lintlaw, Saskatchewan Seniors' Centre to recognize its tremendous IYOP spirit.

Thirty-three Saskatchewan applicants, including one in Saskatoon, received funding from the Canadian Wildlife Federation for wildlife gardening programs in the Golden Gardens project. Four registered their projects but did not ask for funding. Applications will be received until March 2000.