



Guest Editorial

Men and Aging in Canada

Ancient Greece revered man's physical beauty in youth and equated old age with physical decay, worse than death itself. A 'serious' book published in 1962 also claimed that men have much difficulty leaving adolescence, as if they were afraid to age. Both these stances would cause most men's eyebrows to raise today. You see them more and more now, grey heads rollerblading or negotiating moguls on black diamond ski hills. You see them, briefcase in hand, picking their preferred perfume at department stores, delivering meals-on-wheels or helping to fix the grandson's car. **Mitchell Sharp**, at 82, is *numero uno* adviser to Canada's Prime Minister. How old is corporate mogul **Paul Desmarais** and aren't singers **Mick Jagger** and **Robert Charlebois** over 50? You bet, the country's male complement is aging. The 1.4 million men aged 65+ in Canada comprise, in fact, 43% of the country's total senior population.**1



Albénie Breau, now 96, poses with son-Ronald, his grandson Gérald and great-grandson Alexandre. Four generation families are now common in Canada.

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Are all males 65 and older, amazing greys and upbeat seniors? No, many do not fit this image. Some are very ill but they are a minority, even at the top end of the aging scale that lasts into the 80s, 90s and beyond. Some are the skid row older males, the couch potatoes watching t.v., the isolated ethnic seniors, the handicapped veterans in long-term care, the poorer Native elderly, and so on. These are the aging men who stray away from the norm,' that useful device used to draw group snapshots and composite pictures. What do we know about older men and their aging experience in Canada? Despite the earlier focus on the study of men by gerontologists and in spite of the common saying that aging is a women's experience,' fact remains that little is known on how aging characterizes a man's life. What if aging was also a men's issue?

One can safely surmise that genetic factors, as well as the experiences of youth and living certainly affect aging. What is the impact of gender, culture, education and the

host of factors that weave a person's life? Do values and learning experiences specific to men predispose them to not want to age? To age badly? Are there lessons to be learned from certain men? The differences in aging between genders perhaps come to zero. In the short run, these differences might not even matter. In the long run, however, a better understanding of the qualitative differences between men's and women's experience with aging might help all interested persons better cope with life's crises and various passages. I would like to think that British poet **Tennyson** had

the right interpretation of old age for both sexes: "One equal temper of heroic hearts, made weak by time and fate, but strong in will to strive, to seek, to find, and not to yield."

*Médard Soucy
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Québec*

Canadian Senior Males: The Experience of Aging

Men born in 1929 are 65 years old today. If they are aged 80+, they were born in or before 1914. They saw the size of neckties and lapels enlarge and shrink many times. These men experienced other changes: social and cultural revolutions, periods of great economic prosperity and of serious downturn, wars, unprecedented technological developments and so on.

These men also experienced a time when roles were more clearly defined and served as guideposts on life's road. Their life course probably includes going to school but not graduating from high school, getting married during and around the years of the Second World War, finding a lasting job and having children that the wives raised as full-time

homemakers. The prosperous 1940s and 50s made a better 'golden age' possible. In retirement, the division of labour likely remains the way it was throughout the marriage: he attends to the finances, the driving, the car and outside home maintenance while she handles the 'indoors' and the social and family relations work. If she dies, he may well remarry.

Change and continuity have thus far characterized the lives of most senior males in Canada. Will patterns change for future retirees? The lack of research on men and their role in interpersonal relationships, as well as the inability to predict how changes are integrated within society make answering this question difficult. However, this *Expression* provides a sketch of men and aging in Canada and, hopefully, some answers to common queries, as well as some insight for the future.

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All John Waynes or Beau Brummels?

The hair gets thinner, but it roots itself in the ears, nostrils and on the shoulders; hearing begins to decline about 20; smell and sight follow suit; body fat relocates itself around the abdomen when men reach 30; bones weaken after 40; muscle mass deflates. These are some of the telltale signs of men's aging although the rate of physical aging varies enormously among individuals.

Illness also appears, with cardiovascular disease leading and increasing sharply as a cause of death after 35. For senior males, the leading causes of death in 1986 were coronary heart disease, lung cancer, stroke, chronic bronchitis, emphysema and asthma, although the first and third causes have decreased significantly in recent years. Deaths from cancer claim men at about 1.5 times the rate of women and the difference is much greater over age 85. Prostate cancer is the second most frequent type and it is expected that its incidence may surpass lung cancer within the next decade. Other frequent sites of cancer among men are the colon, stomach and lymphoid, as well as the brain.²

Several factors put men at risk of getting these fatal diseases. One is simply age. For example, the incidence of prostate cancer-diagnosed on average around 73-climbs steadily with age. As for heart disease and lung cancer, lifestyle factors such

as poor eating and exercise habits and smoking have long been recognized as increasing the risk. Smoking is also linked with dying from emphysema, bronchitis and asthma. Another risk factor is the 'real men don't see doctors' problem: some men seek a doctor's help or go for regular check-ups only when urged by their wife, daughter or other concerned party.

Men also suffer from chronic diseases, but to a lesser extent than women.

Osteoporosis, for example, affects only one sixth of men, mostly after 75. Common chronic conditions among men are high blood pressure, hearing impairment, arthritis, chronic sinusitis and ischemic heart disease. Various disabilities are also part of their physical aging. For example, mobility and agility restrictions affect 75% of men 85+ against 7.7% for those 55 or less.³

All in all, at birth, men can expect to live to age 73.1 and if they reach their 65th birthday, to 79.9 years. Do they try to prevent aging? Do they mind aging physically? For Beau Brummel types, transition to aging may require more adjustment. Psychologists have a few answers to why some men view physical aging as a disaster and others do not. After comparing human figure drawings of institutionalized and non-institutionalized seniors, **M. Lakin**, for example, concluded that change in perception of one's life status, and not age itself, was the major differentiating factor in the alteration of body image.⁴ The word 'control' seems to be key.

Another keyword is certainly 'health;' there is evidence that men are more conscious of the role of physical exercise in protecting health: a 1988 national survey found that 50% of men 65+ engaged in regular aerobic activity for 30 minutes or more every other day and 75% spent three hours a week on physical recreation, scores unequalled by older women. Over two-thirds of these men rated their health as good or very good⁵ which correlates highly with life satisfaction.

The right philosophical approach also helps. "My health is failing," said an 82-year-old widower, "but I am not obsessed by it. You have to play with the deck that you are dealt." This man leads us to rethink ordinary notions of 'successful aging:' crippled with arthritis, he takes one and a half hour to dress himself every morning.

All Casanovas?

The myth that sexuality is nonexistent among older adults is slowing waning. Studies have shown that 99% of people 60+ would like to have sex if a willing partner was available. Researchers from San Francisco State University reported that 88% of men aged 80 to 102 still fantasize about being affectionate and intimate with a partner.⁶

False notions as well surround male menopause, a phenomenon also called viropause or andropause. Male menopause refers to a series of physical and psychological changes occurring among men as

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they grow older. It has nothing to do with fertility: a great number of men continue to sire children well into old age. It is also not due entirely to the natural process of aging, although impotence is definitely age-related. Well known author **Gail Sheehy** says: "This 'unspeakable passage' is a fully developed, multifactorial syndrome: aging, plus hormonal activity, plus general health level, together with what it means to be I 'manly' as a man's physical strength ebbs and his occupational status changes."⁷ If results from the Massachusetts Male Aging Study are exportable, viropause would be the norm for half the Canadian male population in the second half of their adulthood.

The causes of viropause still baffle doctors and the biases of specialists abound on how to cure the related ailments. For example, Sheehy writes: "'Plumbers,' with their mechanistic solutions do not address the much larger, existential issue of a man's need to alter his *expectations* of himself" as he gets older.

It seems reasonable that health and other factors, expectations included, condition sexual activity levels; this may explain why couples who engaged in sex five times a week reported the same rating of marital stability as those who had not engaged in sex for fifteen years.⁸ One must also recognize that sexuality is not intercourse.

Despite viropause, older men generally have a distinct advantage over women in expressing their sexuality: there are usually more

women than men in older age groups; social norms allow men to court much younger women, whereas the opposite is still frowned upon; and men usually have more money to entertain a sexual partner.

All Needing a Freud?

Risk factors related to mental disorders include the deterioration of physical health, poverty, social isolation, bereavement and depression brought on by multiple losses. Although these conditions are known to many older men, they fare better than younger people in terms of mental health. They also fare better than older women in some aspects of mental health. For example, about 5% of senior men compared to 10% of older women have a serious anxiety disorder, a condition caused by various fears, the fear of dependency, senility, institutionalization, etc. However, alcoholism is more common among older men than women. Suicide is also more prevalent among older men, in particular the 75+. A 1989 Québec study showed in fact that suicide among men 75+ was 10 times that of women in the same age group.⁹

In their quest to explain mental health, researchers study different factors, including its relationship with marital status. "One consistent finding," reports **Barbara Payne** from the University of Manitoba, "is the low incidence of mental health problems in married populations."¹⁰ However, two types of marriage seem to exist: that of men and

that of women. "For instance," adds Payne, "it has been reported that married women and divorced men are generally at greatest risk for mental distress." Her own study of seniors' feelings of loneliness and depression reveals that the majority of seniors in all marital groups are in good mental health. Widowed men scored highest on feeling lonely and remote, followed by widowed women and separated/divorced women and men. Married persons scored lowest. For feelings of depression, the differences among marital groups were not substantial.

Other research suggests that men's early education to express themselves in an aggressive manner has a ripple effect on their mental health. **The Québec Mental Health Committee**, for example, showed that men adopt more risky behaviours and tend to self-destruct when faced with emotional turmoil—whereas women become more depressed.¹¹

The importance of education is also currently surfacing in relation to Alzheimer's disease (AD), the most common form of dementia.

Dr. Joan Lindsay from Health Canada explains: "Earlier studies of AD showed women as being twice as likely to have the disease than men, but when we control for education the difference goes away." While age and heredity remain the primary risk factors associated with AD, this new finding suggests that education or keeping one's mind active is the best known deterrent to AD. This illness affects 5.1 % of the 65+ population in Canada, all dementia affecting 8%.

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Bound by Friends and Family?

Even today, over 92% of Canadians marry at least once. Of men 65+, 75% are married and live in a private household- most often their own home-with their wives. Another 14% live alone and a small proportion live in institutions or have other living arrangements. Relationships in marriage are therefore central to many men's life.

Results of studies on the quality of long-term marriages, however, are inconsistent: some find a steady decline over time, a decline often precipitated when men do not adjust well to retirement. Some show an improvement, particularly after the children have left home.¹²

Other studies focus on the practical and emotional relationships in and out of marriage. Older married men typically receive help with everyday activities primarily from their spouse. (Exceptions occur, such as in the rural Lower St. Lawrence area of Québec where non-married people, 80% of whom are males, care for older parents and are the basis of the natural support system.)¹³ Men also tend to rely primarily on their wives for social and emotional support. For these reasons, widowerhood is often seen as particularly hard on men, a stance open to debate according to Joan Norris from Guelph University. The argument made is that widowers may 'need' fewer social network relationships, and "fulfil their emotional

needs instead through comradeship and sharing interests." Widowers being rarer widows make up about 50% of the senior population and widowers, about 20%-and perceived to be "somewhat domestically incompetent" may also have the [practical] support come to them, adds Norris.¹⁴ The higher incidence of remarriage among widowers, i.e. 15% versus 6% for widows, points to remarriage as a more popular coping strategy for men after bereavement than for women. All in all, the need for supportive relationships in men's widowhood is not negated, but the required quantity and quality of these may be an individual matter. In this connection, a finding from the Ageing and Independence Survey is that 75% of seniors are quite satisfied with their family and friendship ties, regardless of gender or marital status. However, **Barbara Payne** adds that separated/divorced men aged 65+ were considerably less likely to report being very satisfied with life when quizzed about their general satisfaction with life. Are the small social networks, limited family ties and scant reciprocal relationships of divorced men their possible missing anchor?

What of Retirement?

The labour force participation in Canada decreased 4.3% between 1981 and 1991 for men age 65- 69 and 1.4% for those 70+. Whatever the reasons for this decrease -better planning or pensions, fewer

jobs or ageism- Canadian men now typically retire around 62. A few men, including farmers, never really retire; a few others, mostly professionals, accept temporary paid assignments while 'officially' retired. For some, retirement is a crisis involving the loss of a central role, while for others it barely ranks as a critical life event.¹⁵ Do men prepare for it?

A recent study found that over 75% of men 65+ prepared for retirement financially. They built up savings, paid off mortgages and avoided debts. Fewer prepared in other ways: for example, only 34% developed hobbies, 24% started new physical activities and 10% took retirement planning courses.¹⁶ Confided one senior: "The day after I retired, I stood in the living room and I cried like a big baby. I had money in the bank, but how to fill those empty hours?!" Fear of the unknown, lack of familiarity in planning the non-work activities of life and fear of death are some of the reasons given for not preparing psychologically.

Through personal conviction or planning or because of circumstances, some men replace lost occupational or family roles in later life by volunteer activities. Volunteerism benefits Canada to the tune of some \$12 billion worth of work annually! Older men, especially the 55-69, typically volunteer for organizations, provide

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transportation for friends or neighbours, and help their children with yard work and home maintenance. Many older men ascribe benefits to volunteering: it decreases their sense of role loss, provides social interaction, allows them to use and increase their skills, and permits them to express their political interests.

Older men do not spend all their time at volunteer work however: one in two Canadians 45+ reported in 1991 that they prefer to spend their leisure time reading, walking, watching television and socializing with friends or family.¹⁷ These results are in line with new data on 'work of economic value' by **Leroy Stone** of Statistics Canada. He found for example that married men aged 65-74 with no child under 19 at home spent about 4.9 hours per day, on average, performing work of economic value. (Work of economic value exists if "the work has an identifiable output whose consumption may be said to have utility for the consumer and the output can be purchased in the marketplace." It includes volunteer activity.) Stone suggests that men are trained early to believe that only paid work is of value.¹⁸

A Key to Time Passages

Many authors point to education and its multiple facets as a discriminating

factor in men's life. Psychologist **David Gutmann** from Northwestern University explains, for example, that younger men must 'control' the resources on which the physical security of themselves and their families depends¹⁹ and are obliged to repress their own need for nurturing in the service of husbandry. Men would be educated to play their role starting in early childhood. Similarly, young wives would surrender their own claims to aggression in the service of parenting. As parenthood passes, both parties reclaim the repressed aspects of their nature. Older males-age 55-95- become supportive of human relationships and more dependent, sensual and sensitive, while older women can be more domineering, more intrusive and less sentimental; each sex then is "ushered in the normal unisex of later life." Gutmann goes on to show how these transformations in the developmental pathways of fathers, sons and mothers mesh or fail to mesh.

Is this sex-role reversal in old age? According to **John Cavanaugh** from Bowling Green State University, this acceptance of both male and female personality characteristics is more descriptive of older adults than sex-role reversal.²⁰

Many have tried to find the key to eternal youth, but to no avail. One key to time passages though, for both men and women, may just

be education taken in its broadest sense: the capacity to get on with various developmental tasks. Life may offer fewer guideposts than before, aging may also be an uncharted terrain for men, but tips are available and there are more success' examples:²¹

- **Nil Hoas**, 66, retired railway worker from White Rock, B.C., plays ball, golfs, curls and does not give up on life
- **Hume Cronyn**, 82, actor, mad about his aching back, but wants real involvement with life
- **Robertson Davies**, 80, writer, perpetually looking into the future
- **Ahab Spence**, 82, Cree teacher recovering from open-heart surgery and eager to go back teaching
- **Phil Latulipe**, 73, former marathon runner from Québec City, now running long distance 24 and 48-hour events for charities
- **Grandad**, 82, the crippled-with- arthritis-that-dresses-himself.

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Fact File

- The ratio of men to women is 1: 1.4 in the 65+ age group, and 1:2 among the 85+.
- Veterans make up about 25% of the Canadian male population over 50. Some 88% of them are 65+. Rathbone-McCuan, E. and B. Havens (eds.). *North american elders - United States and Canadian perspectives*. New York: Greenwood Press, 1988. p. 184.
- The numerical prevalence of one sex in old age is influenced by many factors, including ethnicity. For example, half of 18 main ethnic groups in Ontario were predominantly male in 1971. Santerre, R. "Vieillesse, monde de femmes: un mythe?" *Canadian Journal on Aging*, 6, 4, (Winter 1987): 304-317.
- In 1991, 74% of men 65+ were married; 13%,

widowed; 6%, separated or divorced; and 7%, never-married.

- Men 60+ are 3.5 times as likely to marry or re-marry than females.

- In 1984, families headed by a senior were twice as likely (80%) to own their own home as unattached seniors (41%).

- Men comprise 28% of all seniors living in institutions.

- In 1991, \$20,259 was the average annual income of unattached men 65+, compared with \$17,304 for unattached women 65+ and \$40,036 for a family headed by a senior.

Statistics Canada. *Income after tax. Distributions by size in Canada*. Cat. No. 13-2 10. Ottawa: 199 1. Text Table 11.

- Between 1980 and 1990, the percent of unattached male seniors classified as

having low incomes dropped from 53% to 26%. In 1990, 33% of all men 65+ received some Guaranteed Income Supplement, an indicator of poverty.

- Retired men derive 16% of their income from the Canada Pension Plan and 20% from employer sponsored pensions (whereas the ratios for women are 11% in both cases).

- 63% of unattached senior men owned a car in 1987, compared with 33% for women.

- About 44% of men 65+ have some sort of physical or mental disability.

- Coronary heart disease declined 30% for senior males between 1971 and 1986.

(* The data are from NACA's *Aging Vignettes*, unless otherwise stated.)

Tips List

To Older Men About Retirement

- Take up a brand new hobby or cause, something that is completely different from your previous occupation. Expand your perspective on the world.
- Do volunteer work. You will be contributing to society, meeting new people and giving your life structure. You will also be awarded respect and recognition.
- Go back to school, college or university. There are special rates for seniors. Teachers and professors are always glad to see older faces in their classes.
- Take responsibility for the daily household chores, rather than just the infrequent outside maintenance work. You will find that this releases more time for your spouse or

companion to be your buddy!

- If male menopause worries you, read about it and discuss it. Remember that viropause is not only physical.

To Older Men About Physical Health

- Do whatever physical exercise you enjoy most. Just do it! Consult your doctor about the amount of physical exercise your health will allow. Try to spend a total time of at least two hours a day on your feet. It strengthens both muscle and bone.

- Eat a low fat, low calorie, high fibre diet and drink alcohol in moderation.

- Take your medication in the way you have been instructed to take it. In doubt, ask your doctor, pharmacist or health specialist.

- Try to keep your meal schedule as regular as

possible-it's easier on the body.

- If you can't sleep once in awhile, just get up, read, watch television and make yourself a warm drink. Don't worry about insomnia unless it happens frequently, in which case you should consult your doctor.

To Older Men About Mental Health

- Try to make new acquaintances or revive old friendships. Isolation increases vulnerability to depression.

- Get out of your home for a meal or to run an errand; include the outside world in your life.

- Participate in activities that you enjoy and that are meaningful to you, especially if these activities will put you in contact with other people.

- Do not be afraid to ask for help. Asking for help is a sign of being in control.

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Notes

** All data used in this issue are from NACA's publications, unless otherwise stated.

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For Further Reading...

Please refer to your library for a copy of these publications.

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