

AARP International Conference on Livable Communities

Premier Gordon Campbell

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Check Against Delivery

Thank you all for asking me to be with you today. You know it's always interesting for me when I come to these events because I think sometimes we talk about these issues in the third person. For me at least the challenge we face as we look out ten years is to determine where we want to go, what we want to do and recognize that at the end of the day all of those goals and objectives are not in somebody else's hands, they're in our hands.

When I ran for office the first time it was over 21 years ago. I became mayor of Vancouver. Do you know one way that I can get a laugh from any crowd? I put a picture of myself when I was first sworn in as mayor of Vancouver twenty years ago up on the screen and people go "ohhh" and they laugh. What's that about? I had color in my hair, I was thinner, I was arguably fitter, and I was still incredibly good looking.

But life changes when you get older. Twenty years ago I went for my annual checkup. And they'd say: you're thirty-seven, you're fine, go away. Now I go for my annual checkup they say You're fifty-seven, you better have this test. And then they say, the test is fine, go away.

One of the challenges when we look at the world that we live in is actually to see it. You've probably heard of Sherlock Holmes and Dr Watson. Sherlock and Dr. Watson went camping in Yosemite National Park. In the middle of the night Sherlock nudges Watson. "Watson" he says, "Watson wake up." Watson wakes up. "Yes, yes Sherlock." "Look, look around you. What do you see, how do you feel?" "Well, its incredible." "The stars are... I feel so small. I feel so insignificant." "Oh for god's sake Watson! Someone's stolen our tent!"

We have to figure out what's important in aging societies. And we should all remember this: aging is good. We shouldn't think of aging as something that is "these" problems. We've just come through a campaign in British Columbia and at one of my campaign meetings there was a 104-year-old woman there. And I said to her, what's it like being one hundred and four? She said, "well it's a quite a bit different." I said "well what do you mean?" She said "there's really no peer pressure at all."

Well, we're actually going to create some peer pressure for that age group. And we're going to be able to do it because of what's happening in health care and we're going to be able to do it because of what's happening in the way we live.

But we have to look at the world we live in and recognize this one fundamental, incontrovertible fact: it's going to be different. Our families are going to be different, our

neighborhoods are going to have to be different, our cities and the programs are going to have to be different. They are going to change and change is going to be a part of all of our lives.

We know from statistics in British Columbia that the number of British Columbians over sixty years of age will increase. In fact, that demographic will increase two times as fast as the general population in the next twenty-five years. It will increase twenty times faster than the population under 25 years of age.

That's a big change. And as we look at the programs that we depend on and try and create for people, we have to know that the support for those programs is going to change as well.

Today in British Columbia, in the age group between 15 and 24, the number of young people entering the work force is actually smaller than those who are getting ready to leave the workforce. And it's going to continue to get small: there are twenty percent more 15 – 24 year olds today than there will be in twenty years. There will be twenty five percent more people over 60 in twenty years in British Columbia than there are today.

So we have to change the way we think. The first thing I think that we all have to do is to stop thinking about this group called seniors and think about what we all need, what our families need, what our communities need so they can be whole.

The status quo in our province is what we call "single family neighborhoods". Single-family neighborhoods were designed in the fifties and sixties, usually around a mother who stayed at home, a father who went to work and three plus kids. Today those families are dramatically different. Most parents in B.C. are at work and there are usually two or fewer than two kids in the family.

Families are also aging. They don't have their kids anymore. My wife Nancy and I, our kids have left. They're two young men out doing what they're doing and we didn't need the size of the accommodations that we had.

My mom was another perfect example of that. I've lived in the same basic neighborhood for a long time. My dad died when I was relatively young. My mom raised four of us kids in a relatively small, single-family neighborhood. But she got older and she said you know I actually don't want to keep doing the things that I have to do when I own these single-family homes. I want to move to a different kind of housing.

But my mom had to move out of her neighborhood because there were no options. There wasn't an option for maybe a smaller senior ground-oriented unit, maybe a congregated care kind of unit that provides a continuum of housing options for seniors as they go through their life cycles in that neighborhood.

In fact, if I went to that neighborhood today and said we want to have a more medium density housing project here totally accessible to seniors it would take a lot of effort to push that through because people would say that it was threatening the single family neighborhood. So I think one of the things we have to say to ourselves is How do we build complete family neighborhoods that include my mom, my kids, my wife and I? How do we create that continuum of support and housing options within a neighborhood?

We talk about walking, we talk about cycling, we talk about mobility. But we don't build neighborhoods to encourage walking, at least in most places in North America. We build neighborhoods that encourage driving.

What if we start to think of neighborhoods as a kind of village centre? I want to go back to my mom. My mom in her single family home could go to the local baker. And he'd say to her, "Hi, Mrs. Campbell would you like a cookie with your bread." And she would say "Oh no, no, no I couldn't have a cookie with my bread," and the baker would know that she actually did want a cookie with her bread and he'd pop it into the bag with her bread anyway.

In the new neighborhood she went to, the baker didn't ask her, didn't even know her. She went from her single family home to what we call a condominium or cooperative apartment and she got more and more isolated. And she felt less and less connected to her friends, not just to her family, her friends.

So we moved her again and it was tough. Because we were asking her to move into a senior's assisted living accommodation. And you know what she heard when she heard senior's assisted living? "This may be the last place that I live. I can't take care of myself." That's not what we were saying, but I believe that's what she heard. So it's a big effort for her to say "Okay, I'll do that."

It was the best thing to ever happen to her. She's busy, she's active, she's social. "Hi mom, how you doing?" "You should have seen my bridge hand the other night." She's back, she's in the game again.

If we really want to have societies and communities that embrace us as individuals and as families, and reward those people who have supported us throughout our lives, we have to start making these kinds of changes. It will take some leadership and dedication and it will take meetings like the one you're having today.

You have to recognize this: that ideas are worth nothing without the actions behind it. So here is an idea that the AARP has been proposing and I want to explain some of our experiences with it in British Columbia.

It's suggested that you could perhaps defer property tax on housing to make housing affordable for people to keep them in their communities and their neighborhoods. It is a great idea on a piece of paper. But if those whom we call seniors, those 65 plus, don't take advantage of it, it is just a piece of paper.

In BC we've had that program since 1983 and the people it's available to don't like it. They don't take advantage of it and I think there is a reason why. It is because that particular age group says to themselves, "I want to leave something for my kids and the last thing I want to do is encumber them with any kind of mortgage order."

In Vancouver the smartest thing they could have done was to take advantage of it. The cost of housing, not just in Vancouver and British Columbia, has gone up significantly over the last couple of years. But it doesn't matter if it makes financial sense. It matters whether someone understands how it benefits them and if their families understand and are encouraged to take advantage of it.

That's something that an organization like AARP can do in spades. Because when politicians tells you what's good for you it doesn't normally work that well. You've got to decide what's good for you. And we have to try to create a series of choices for people that reflect the fact that whether you're getting older or not there's a whole different array of choices that individuals will make in their lives for their particular circumstance. And we should be explaining to folks, explain to the whole cohort why they should be thinking about it and why it will be advantageous to them. Because then they'll take advantage of it and use it.

Does anyone think it's an accident that the three fastest growing public recreational pastimes in North America are gardening, golf, and bird watching? Now if you told me forty years ago that I would be working in my garden on the weekends I would say Are you nuts? I'd say I was going to play wide receiver for the football team. But football is not one of the great activities for the aging. I don't hear a lot of 62-year old people come home and say, "did you see my run the other day." The whole recreational front is changing.

We set five great goals in our election. The second one was that we wanted to be the healthiest, most physically fit jurisdiction in North America within ten years. We also set the ten-year goal because too often we think we can do something in ten weeks. We should be relentless in our pursuit of that over ten years and have milestones that measure it over the ten years, but we must commit ourselves to doing it and set a path for it.

So we want to be physically fit and healthy. The prescription for that is relatively simple. You should have five courses of fruits and vegetables every single day. Can everyone repeat that? Five servings of fruit and vegetables every day. There's not a lot of enthusiasm in this room for the fruits and vegetables. Did you all eat your salad? Well, that's a start.

We should be physically active thirty minutes a day. Just thirty minutes. That could be a walk to the store or around the block. It could be cleaning the house, it could be gardening for thirty minutes a day. So let's at least try that, because physical exercise is important. Being healthy is important.

Recognizing the challenges that we face in regards to the drug regimes is important. In British Columbia we have what we call a PharmaCare program. It provides people with their drugs and their medications. It is a huge challenge, because we spend forty four cents out of every dollar that we take in provincial taxes for health care and the fastest growing component of our healthcare system is pharmaceutical costs. It's up a hundred and forty seven percent in the last decade and is forecast to go up four hundred and eighty percent in the next twenty years.

So when we talk about the age wave, when we talk about the tsunami of aging that is going to come across our lives and our social infrastructure we should recognize that right behind that wave is the pharmaceutical wave. And we should look at ways to deal with that. Because if we close our eyes and pretend that it's not going to be there, we're going to be run over by the wave.

Any of you bodysurfed in this room? I started bodysurfing twenty years ago and I know this: if you look back and wait for the wave and get in front of it and the wave breaks on top of you it doesn't matter what you're doing, you're tumbling all over the place, right? But if you catch it and you ride it in it's actually quite a bit of fun.

We should look at these waves and we should ride them in. And that's going to mean that we have to jump at the right time, we're going to have to reach at the right time, we're going to have to be willing to try something different. Because pharmaceutical costs are going to be huge, health care costs are going to be big, and that's why we have to start today.

For those of us who are my age, it's not too late to start being physically active, eating properly and doing those things not because government says we should do it, but because we want to do it.

That's how we can actually protect ourselves in the long term. Not just to be healthier, but also to relieve some of the pressure on the societal system that we support. We do that in British Columbia. For example, we just changed our PharmaCare program so 84% of the people in British Columbia actually pay less or the same for PharmaCare over the long-term. It's going to be sustainable now because some of those who can afford it are paying a little bit more.

My favorite story was a fellow comes down to Whistler. We're hosting the 2010 Winter Olympic Games at Whistler Mountain, Vancouver, British Columbia. And you're all invited. Anyway, I was at the base of Whistler and a fellow skied down the base and he said to me, "I'm not very happy with you Mr. Campbell."

Of course you're not anxious to hear those words from people and I say, "Well why's that." Now, this is a person who is probably paying seventy five dollars for his ski tickets and he says, "Well you've raised the price of my drugs a little bit." And I said, "I'm sorry, but I have to do that so everyone can have the advantage of this. As a result, low

income seniors can get their drugs effectively for free and palliative care drugs are effectively for free in British Columbia."

It's one of those things that we think are important and we're actually pushing. We're pushing for a national PharmaCare program in Canada with thirty two, thirty three million people. We think it's going to have a huge benefit in terms of providing people with the pharmaceuticals that they need to improve their quality of life, increase their independence and, in the long-term, reduce their health care costs.

We've created a program called Act Now. It's in every school in the province. We're eliminating junk food from schools. We've got a fruit and vegetable program in schools that actually works and we've got a chronic disease management program that requires people to think about how they're going to manage their own health as they get older.

We're also trying to encourage people to work with their doctors and set their own health care plan for the long term. It won't be perfect and some of us will fall short, but it will create an environment where we do better and that's what we should be striving to do.

Here's a great example of how difficult it is to get people to actually look at themselves and see their future. I was mayor of Vancouver from 1986 to 1993, and in the 1990s we created a program called Ready or Not. Guess what it was about? Aging. Guess what ended up happening as a result of it? Not a whole lot, because an idea is only powerful if it creates action.

Another thing that I think is really important as we age is this: our first great goal in British Columbia for the next ten years is to be the best educated and the most literate jurisdiction in North America. But too often we don't think of education as being something people will pick up when they retire. Education opportunities when you retire should expand, we should be encouraging people to go out and explore those things that they are interested in, to keep their minds active, to suggest new ideas to improve our lives and the communities we live in.

We should start respecting those who are aging for what they bring to the table, not for the problems they may create, not for the changes that we're going to have to pursue for ourselves, but for what they contribute to all of us. We have to ask, we have to encourage, we have to entice, we have to engage, and when we do that we'll start to have communities and provinces and countries that take all of the talent of all of the people regardless of their age and say, "Share with us as we build an even better future for the places that we live."

You are doing that by being here today. You are doing that by thinking, by talking, by learning from one another about what are the best practices to pursue. And as we pursue those practices, let's remember this underlying fact: that for people to live full, complete, and healthy lives, they have to feel safe, they have to feel secure, they have to know that they can walk down the street and not feel threatened in any way.

One of the cornerstones in our quality of life is a sense of community and a sense of community is by definition a sense of safety, a sense that other people are looking out for you as your needs change and as the services you may require change.

What's best for you? What would you like your community, your town, your city, your state, your province, your country to be like? What are the values that will help you live the healthiest, the fullest, and the most complete life possible as you go through the third half of your life? Because this is a time when opportunities should open up, this is a time when things should not be closing down.

By being here today and sharing your ideas, by learning from one another you are reaching out. Let's keep reaching out. Let's build better communities for everyone who lives in those communities and let's celebrate the fact that we're aging, that we're getting stronger, and we're getting smarter. Thank you very much.