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# BULLETIN

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The following reports were presented at the CURAC/ARUCC Conference in Victoria in April, 2012. We circulate them now for the information of your members.

## On Wellness

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The session devoted to health and wellness among older adults reminded us about what we *should* be doing to stay healthy as we age: Exercise!! **David Docherty (UVic)** pointed out that inactivity is as bad for health as smoking is. Thirty minutes of moderate activity five times a week is advisable, but busy people can get their exercise by doing ten minutes of activity when time permits during the day, as long as the total exercise time adds up to 30 minutes five times a week. This provides enough exercise to reach an acceptable goal of burning 900-1000 calories per week.

## Summary of “In Defense of Medicare”

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After alluding to the deep and abiding interest retirees have in Medicare, I showed how those who say Medicare is unsustainable are wrong; that the health costs that the Cassandras parade endlessly are going up mostly because of the increase in costs of those services not covered by Medicare, like dentist, chiropractor, physiotherapy services, and drugs. However, health care cost increases are a worldwide phenomenon, and something must be done to decrease the rate of increase. To keep Medicare costs in line, there are three initiatives that could be adopted: introduce a program of pharmacare; improve the state of long-term care to take pressure off the hospitals; and make better use of Community Health Centres, which economize on health dollars in several ways, not the least of which is diverting people from the Emergency Room. However, nothing will be done unless Ottawa leads. The federal government needs to use conditional grants to bring these changes about for two reasons: the innovations must be nationwide so as to make the services portable across provinces; and because the provinces simply do not have the money to bring them about on their own. The current federal government is determined to keep out of policy affecting Medicare, so, short of a miracle, the future looks dark. If we can hold the line on Medicare for three more years, we may be able to count on federal help to put Medicare on a firm foundation.

**Jack Boan (University of Regina)**