

What's NEWS at GSI

Spring 2007

An informational bulletin for members of the ELCIC Pension and Benefits Program

Investment News

Investment Results: Q1 2007

by John Wolff, Investment Committee Chair, GSI Board



The investment results for the first quarter of 2007 continue to show positive results. The results now reflect our new Investment Manager structure which included adding GMO to manage our global equities effective December 16, 2006.

We are now entering the fifth year of favorable market returns and while indicators continue to look positive, we must consider the possibility that the markets may level off or show a correction at some time.

The Members Accumulation Account (MAA) returned 1.9% during the quarter. This performance is ranked first quartile. The results reflect positive returns from each of the managers: Jarislowsky Fraser, Philips Hagar North and GMO.

The Retired Benefit Account (RBA) returned 2.3% during the quarter, which is also ranked first quartile performance. The results again reflect positive returns by each of the managers as noted in the MAA, and also reflect the returns for GWL mortgages and Greystone Real Estate.

We continue to monitor the long term interest rates which remain at historically low levels. The low long term rates have a negative impact on our actuarial valuation rate used for valuing the long term liabilities of the RBA. In spite of these low long term rates, our plan to eliminate our deficit funding continues to make slow and steady progress.



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NO ONE LIKES BEING A STATISTIC!

By Rev Loretta Jaunzarins, GSI Board, Pastor at Grace Lutheran Church, Hamilton, ON



No one likes being a statistic. It's so impersonal and I have to wonder, "Does it really include me?"

But there they were, the stats and recommendations of Shepell/FGI's Strategic Wellness Plan for ELCIC Group Services, Inc. and the March 31st Impact Report. The production of a Strategic Wellness Plan had been suggested by the GSI Board in 2006.

So what are the stats? The ELCIC has 635 pastors and church workers (mainly Christian educators, clerical support, office administration and custodial positions) that are enrolled as members of the group benefits plan. Around 65% of the plan members are clergy and 75% of plan members are 45 years of age and older. After a review of the counseling services used combined with our health benefits claims (no names were provided) Shepell/FGI sent back some concerning results.

In 2004, 5.6% of plan members contacted Shepell/FGI for counseling. Of that group, 46.6% were being treated/counselled for stress and depression. Last year (2006) a record 9.7% of plan members used the counseling services at Shepell/FGI and the number being treated/counseled for stress and depression had risen to 67%. The March 31, 2007 report shows that this number is still rising and is now up to 75% on a projected utilization of 16% of members using this service.

While our Long Term Disability (LTD) claims remained consistent at one per year since 1998, the reasons for LTD claims were depression, circulatory system disorders and cancer.

The top chronic health issues among pastors, church workers and their families are heart disease, digestive disorders (a lot being diabetes) and depression. 51% of our drug costs cover these conditions which, as the report states, "are for the most part controllable conditions." In fact, the report stated that: "Drug usage data and LTD claims show that ELCIC employees show chronic health issues for heart disease, cancer and gastrointestinal disorders. These diseases and hence costs associated with drug use can be reduced or controlled by employees modifying their lifestyles or changing health risk behaviors. The ELCIC absolutely needs to address this."

This report was a real eye-opener for me. I expected our group (clergy/church workers) to mirror the results of other industries in Canada. But we don't. In fact, we have more than doubled the number of stress related cases reported by other groups (i.e. industry average). Currently, we have more than double the number of cases involving depression than other groups. And, we have more than three times the number of anxiety related cases than reported by other groups. So what can we do to reverse this trend? What's the "good news" for us today that gives us an opportunity, another chance at health and wellness?

The Gospel message is that Jesus is our salvation and wants us to have health and joy in our lives as we are in relationship with him. He promises us these things. Yet, we suffer from heart disease, cancer and depression. These things may appear to be the domain of science and technology, but I don't think we can separate them from the spiritual. So what can we do?

We need to get serious about our health but we also need to get serious about the spiritual side and claim the biblical promises that are made to us. I know it's a challenge because I am one of those statistics. I have high blood pressure and I'm being treated for it. But I want my road to health to be more than just taking medication to treat the symptoms. My doctor told me that I **must** (the voice of the prophet) lose 30 lbs. and I **must** (there it is again) exercise because if I don't

do these things now, I will have increasing health issues as I age. To help me on my way, I was referred to a dietician who comes to my doctor's office one day per week. It's kind of like going to a support group (there's another idea). I get weighed, we talk about how things are going and she gives me suggestions, we set new goals, and the "good news" is that she encourages me in my journey to health and wellness. But just as important is that I have two prayer warriors who pray for me, my health, my family and my ministry.

What can Group Services do for you? Anyone who is enrolled in the National ELCIC Group Benefits Plan (even if you have waived the health and dental portion); can access the Employee and Family Assistance Program (EFAP). You can access EFAP for resources on line for at www.shepellfig.com for many articles on health and wellness and the support services they offer. You can access e-counselling on-line at www.fgiworldmembers.com or call them at 1-800-268-5211. You can also access the Group Services Inc website through the ELCIC website and then on to many to health and wellness sites including EFAP. Just a reminder that as of January 2007 paramedical benefits (massage, naturopathy, counselling etc) were increased to \$500 per calendar year without additional cost being passed on to our membership. Please take advantage of your health benefits!

What can congregations do? Mutual Ministry Committees and Councils can support their pastors and church workers in being intentional about their health because in the long run, we all benefit when we are healthy.

Some other things congregations can do:

- encourage and support healthy eating at weekly coffee hours, committee meetings and social events.
- promote Heart and Stroke month and Cancer Awareness month in the congregation.
- perhaps a discounted gym membership could be part of the pastor/church workers compensation package to encourage exercise and fitness.
- negotiate days off and overtime so that they are actually taken especially by salaried staff.
- take a close look at the underlying structure of how the congregation does ministry, how we do mutual ministry and how our understandings are affecting the health of both the pastor/worker and congregation.
- explore and discern creative ministry opportunities that focus on discipleship building.
- honestly address any "elephants in the living room" as suggested by Bishop Elaine Sauer in the April/May edition of the Canada Lutheran.

What can you do? If you're not one of the 75% over the age of 45 that seem to be the hardest hit, start working on your health and wellness and be vigilant in defending it. Denial is a normal response to the bluntness of reality but it isn't helpful in the long run. Go to someone you trust (friends, spouse, mentor) for a reality check, be thankful for their honesty and then get professional advice regarding your health—physical, emotional or spiritual.

Find someone or a group who can support you in your lifestyle changes through prayer and encouragement.

Work on becoming an "integrated" person realizing that the spiritual, physical and emotional are connected. As Jesus said, "You can't put new wine into old wineskins." That means personally, in our ministry and in our congregations.

National Mental Health Week

from Shepell·fji

National Mental Health Week, coordinated by the Canadian Mental Health Association, took place from May 7 – 13, 2007. To mark the event, Shepell·fji launched an online interactive wellness site or 'microsite'.

The microsite entitled 'The Work/Life Balance Challenge' was developed around the work/life balance theme of National Mental Health Week and offers plan members support and tips in the following areas:

- **WORK BALANCE** – Setting boundaries between home and work to create a better balance

- **HEALTH BALANCE** – Understanding how a work/life imbalance and the associated stress can impact physical, emotional and mental well being.

- **LIFE BALANCE** – Taking proactive measures to control work/life balance and boost overall well being.

There is an interactive element to this site with an Online Bulletin Board, where plan members can access a professionally moderated question and answer area. www.shepellfji.com/balancechallenge

> Please take advantage of this resource.



Proxy Voting

By Bill Kuehnbaum, GSI Board

The ELCIC pension plan, administered by Group Services Inc (GSI), holds shares in a number of Canadian companies. We buy shares in companies that we believe will give us a good rate of return at a risk level we can tolerate. However, past national church conventions have directed us to vote the shares we own at company annual meetings in a socially responsible manner. Therefore when we vote our shares we are concerned not only with the economic returns to shareholders and good corporate governance, but also with the ethical behavior of corporations and the environmental, social and governance (ESG) impact of their actions.

When voting its shares GSI can be faced with resolutions involving animal welfare, charitable donations, the environment, equal employment, labour standards, health, human rights, job loss, military and security issues, political contributions, arms manufacturing and tobacco.

GSI does not have the internal resources to research and manage all the votes we have to make at shareholder meetings. So we have engaged Institutional Shareholder Services (ISS) to advise us on every proxy vote we have to make.

ISS has developed proxy voting guidelines that are consistent with the dual objectives of socially responsible shareholders. On matters of social and environment import, the guidelines seek to reflect a broad consensus of the socially responsible investing community. The guidelines are developed with reference to the policies of leading church shareholders and interfaith groups and socially responsible mutual fund companies as well as other well recognized organizations and academics working in the socially responsible investment field. On matters of corporate governance, executive compensation, and corporate structure the guidelines are based on a commitment to create and preserve economic value and to advance principles of good corporate governance, consistent with responsibilities to society as a whole.

The recommendations made by ISS are accompanied by exhaustive research and by substantial documentation but they are advisory only. GSI maintains the authority to cast our vote in what we judge to be the best interests of pension plan members. This new proxy voting regime also gives us the option of aligning our votes with other church groups in Canada if we decide to band together on an issue.

Eyewear Discount for Plan Members

Plan members can receive a discount of up to 20% towards expenses related to the purchase of new eyewear through Preferred Vision Services Inc (PVS). The PVS network of optical outlets replaces the eyewear discount previously offered to the Manulife plan members through Lenscrafters. The savings through PVS can be put towards the cost of prescription eyewear products such as lenses, frames and contact lenses. For more information on this program, plan members can access the Manulife's website at www.Manulife.ca/groupbenefits (upon login click on Shopping for eyewear?)

New Telephone Numbers for Out of Country Coverage

Please file this with your other benefits information!

There are three new telephone numbers that can be used to contact World Access (Manulife Financial's emergency travel assistance provider) during medical or other emergencies, depending on where you are traveling outside the country.

<i>While traveling, you can call</i>	<i>World Access #s</i>
<i>Toll-free from Mexico</i>	<i>00-1-800-514-3702</i>
<i>Toll-free from the Dominican Republic</i>	<i>1-888-751-4403</i>
<i>Toll-free from other countries that participate in Universal International Toll-Free (UITF)</i>	<i>800-9221-9221</i>

Toll-free calls from Mexico: In Mexico, the prefix numbers (00) are regionally determined. Therefore, depending on what region of Mexico you are calling from, the prefix may only include one zero. In case of an emergency, you should confirm the regional code when you arrive at your destination in Mexico.

Toll-free calls from other countries: When calling from other countries that participate in UITF the country code prefix # should be added to the actual telephone number: country code prefix # + 800-9221-9221 (Note that the middle four digits (9221) are indeed correct, and the entire number, without the country code prefix # is 11 digits).

The country code: This refers to the country **from** which you are calling and not the country **to** which you are calling. Please confirm the country code upon arrival to your destination.

The existing telephone numbers for Manulife have not changed and are as follows:

<i>Customer Service Centre – questions about your benefits plan or regarding a claim</i>	<i>1-800-268-6195</i>
<i>Pre-trip planning and travel emergencies In Canada or USA</i>	<i>1-800-265-9977</i>
<i>Travel emergencies outside of Canada or USA Use operator to call collect</i>	<i>519-741-8450</i>

Reminders for Travelers

> Pre-trip reminders:

- Familiarize yourself with your benefits plan and its specific coverage details before you go, including potential lifetime maximums that certain emergency expenses may be subject to.
- In order to anticipate any potential risk of complications, you should visit your family physician before traveling out-of-country to discuss any pre-diagnosed medical condition(s), as well as any active treatments you are receiving. Please ensure you have ample supply of all necessary medications and that each is carried in its original packaging.
- Before you travel, have a look at some information travelers' websites, including the Department of Foreign Affairs and International Trade (www.voyage.gc.ca), Transport Canada (www.tc.gc.ca), and the Canadian Automobile Association (www.caa.ca).
- And remember: Take note of the toll-free numbers mentioned above and pack these along with your passport, your provincial health insurance card, and your Manulife benefits card.

> In case of an out-of-country emergency:

1. Call the 24-hour emergency phone numbers, located on the back of your Manulife benefits card. If you can't call yourself, your traveling companion or family member must contact World Access as soon as possible.
2. When you speak to a representative of World Access (if you need service in a language other than English, just ask) you'll be asked to give the details of the emergency and the type of assistance you need.
3. Provide as many details as possible. The Medical Assistance Coordinator will also ask for the particulars on the plan member (i.e. as indicated on the benefits card), including:
 - Emergency travel assistance ID number
 - Group/plan number
 - Plan member's full name and plan member certificate number
 - Caller's name (if not the plan member) and patient's name (if not the plan member)
 - Provincial health insurance number, and
 - The location and contact specifics as to where the patient is being treated.

Bony Voyage!