

A Shared Concern

Newsletter of the B.C. Coalition to Eliminate Abuse of Seniors
Volume 11, No. 2 Spring 2003

CHINESE SENIORS IN CANADA

Would Our Cultural Sensitivity Improve Their Health?

This article is based upon a research project involving a random sample of 2,272 older Chinese in seven cities: Victoria, Greater Vancouver, Calgary, Edmonton, Winnipeg, Greater Toronto and Greater Montreal. The research was funded by the Social Sciences and Humanities Research Council and led by Dr Daniel Lai, Faculty of Social Work, University of Calgary. Other researchers on the team included Dr. Ka Tat Tsang and Shirley Chau, both of the University of Toronto; Dr. Neena Chappell and Dr David Lai of the University of Victoria. It was released late in 2002.-Ed's note)

"Fit" for S.U.C.C.E.S.S. – senior dancers



of ages between 55 and 101. Most (51.1%) migrated from Hong Kong. More than one out of four (27.1%) emigrated from Mainland China. Vietnamese immigrants make up 7.9% of the total, followed by 4.4% from Taiwan.

Only 1.6% of those surveyed were Canadian born. The average length of residency in Canada was 18.22 years.

When compared with older adults in the general population, **the older Chinese are less healthy** – 92.8% of these as opposed to 81.7% in the general population reported at least one health condition. The older Chinese have more chronic illnesses (3.3%) than older adults in the general population (2.23%).

The mental health status of the older Chinese was worse and **their depression level was higher**. Among those 65 and older, about one in five reported at least mild depressive symptoms (23.9% versus 10 to 12% in the general population).

Use of Mental Health Services

Yet the level of use of mental health services by the older Chinese was very minimal.

Only 0.4 % reported seeing a psychologist, while 0.6% saw a psychiatrist. The rate is 1% for each category in the general population.

Research Methods

The researchers contacted a random selection of people with Chinese surnames in the telephone book of the seven cities listed above. They identified respondents of 55 years old or older and set up face-to-face interviews to complete a questionnaire. Questions covered demographic information, Chinese cultural beliefs, Chinese health beliefs, physical and mental health status and well-being, issues on service use, service preferences and service barriers. Interviews were conducted in the native dialects of the Chinese respondents.

Demographics

Among the respondents who completed the survey, 44.2% are men and 55.8% are women. The average age is 69.8 years old, with a range

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PRESIDENT'S MESSAGE

“Life is a continuing journey with never-ending opportunities to learn, give, and grow.” (Andrus Foundation)

Seniors are as diverse as any other group in society. We are not necessarily limited in our physical and mental capabilities; indeed, there is as wide a range of abilities among those over 65 as can be found with those who are younger.

Our capacity to learn is not necessarily diminished by old age, though learning patterns may change and the speed of our learning may slow down. The numbers of older adults in Canada who “surf the net” shows that learning is restricted not by age but by opportunity.

The reality is that each one of us ages in a unique way. We are learning that much of our

health and wellbeing in later life develops out of our life experiences and patterns in the various transitions throughout our lives.

However, a critical factor that continues to be of prime importance in our lives is our independence. This means being in control of our own lives. A major element of this independence is having the overall freedom to make decisions on where and how to live our lives for as long as we are mentally competent to do this.

Privacy, control, security, freedom of choice, and self-sufficiency are tied into our independence and are important to all of us. We are full members of our society, and neither wish nor

deserve to be excluded from the mainstream of social and community activity; so where we live is critical to ensuring our continued involvement with our communities.

What we do know is that there is a need for seniors' housing and immediate physical environments that are affordable, accessible, comfortable, safe and secure. Other questions that need to be addressed by housing providers and seniors alike when developing housing that fits our needs as we age include issues such as intergenerational housing or separate seniors' housing, location, and transportation.

These are the factors that have led us to focus on the housing needs of seniors in our conference this fall. The conference planning committee is fully engaged in developing what is shaping up to be an informative and stimulating program.

We look forward to seeing you all at the conference on September 11 to 13, 2003.

Jill Hightower

President, BC CEAS



A Shared Concern

A SHARED CONCERN, sponsored by **Scotiabank**, is published quarterly by **B.C. CEAS**, The British Columbia Coalition to Eliminate Abuse of Seniors.

Your comments and enquiries are welcome. While BC CEAS welcomes contributions to the newsletter, the views expressed by contributors do not necessarily represent the views of the Board of Directors or the staff of the society.

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**The next deadline for submissions is:
June 15, 2003**

FROM THE EXECUTIVE DIRECTOR'S DESK

As I write this column, Baghdad is being attacked and war has begun. Everyone I speak to is worrying about the effect this will have on people in Iraq. During the last few years, BC CEAS has undertaken several projects with seniors who have come from Iran. The knowledge that I have gained from them about their history and culture and particularly in having the opportunity to come to know them, has made this war even more personal for me. Iran is 'next door' to Iraq and when I watch the images on TV of the war and the people in Iraq, it makes me very sad. We have advanced in many things over the last one hundred years, but world leaders do not seem able to settle things without the use of war.

A Shared Concern: On a happier note, we recently heard from Scotiabank. They are willing to continue funding our newsletter, *A Shared Concern*, for another year! This funding means that we are able to continue producing a quality newsletter for our members, to mail it around the province, to hand out copies at our workshops and presentations, and, most importantly, to use it as a tool to raise awareness on the issue of prevention of abuse of seniors. This will be the fourth year that Scotiabank has been the funder for our newsletter. **Thank you, Scotiabank;** we value our partnership with you.

BC CEAS' Annual Conference/AGM

The Roof Over My Head: Housing for Seniors – Making a Wise Choice.

We are hard at work planning our annual conference. This year we will be holding it in Burnaby at the **Vancouver-Metrotown Hilton Hotel, on September 11 to 13.** Our goal is to focus on providing education, information and knowledge that is useful for seniors to assist them in making housing and care decisions.



Possible areas for consideration for individual presentations, panel discussions and workshops may include safe choices, options and resources for housing in later years; issues of affordability and consumer protections/rights. We will also focus on challenges and options for housing and support which may face seniors from culturally diverse communities – including immigration issues and pension eligibility. We will examine the challenges involved in making the transition from living independently to considering other options or having to go into care, seniors' rights, concerns and prevention of abuse.

We hope to examine available services and resources in communities; poverty and access to housing, and the factors that place older adults at risk of homelessness. We will be dealing with security issues (like home invasions, fraud, etc) and Seniors and the Law/Legal Advocacy issues. We will send more information once we have finalized our plans.

So mark your calendars and plan to join us. If you love shopping, Metrotown is the place for you. It has a huge shopping mall with excellent stores and movie theatres and is only a few subway stations away from downtown Vancouver, where you can enjoy the water, the mountains, etc!

Understanding and Responding to Abuse and Neglect of Seniors – **Training Workshops for the Regional Health Authorities:** On March 27th, we presented the first of our training workshops for the Regional Health Authorities. It was held in Campbell River for the Vancouver Island Health Authority. Pearl McKenzie, board member Joyce Schmalz and myself delivered the one day workshop.

The next one will be for the Northern Health Authority on June 5th in Prince George, and

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Executive Director's Report (cont'd from p. 3)

we will be part of a three day workshop they have planned for their region.

Report on Abuse of Seniors in British Columbia: This report is being researched and written for BC CEAS with recommendations to be submitted to the Ministry of Health Planning. Charmaine Spencer, our consultant, will be providing a summary of the report. In our next issue we will share information from the report with you.

The new Fair PharmaCare Program: Jill Hightower, our President, and myself attended recent meetings put on by the Ministry of Health Planning to inform seniors and seniors' organizations about the new PharmaCare program which comes into effect on May 1st. You will find information on the new program on page 15. We are including a brochure with the newsletter. It is important that as many seniors as possible know about changes to the PharmaCare program.

Seniors as Role Models: BC CEAS as an organization uses the knowledge and expertise of seniors in everything we do. We are very fortunate to have exceptional seniors as members of our Board. We have highlighted Prue Cunningham. At the age of 88, Prue is our oldest board member. Prue achieves remarkable things. It has been my privilege to work with Prue and to learn from

her during my time with BC CEAS. You will find our tribute to Prue on page 12.

Organizational Review: We are currently undertaking an organizational review. We received money to assist us with this from the United Way of the Lower Mainland, under their grant *Partners in Organizational Development*. Our organization has grown and expanded and the organizational review will help us to chart our course for the next few years.

In step with the times, we now have our own website, which you can access for information on abuse of seniors and projects of BC CEAS, and to view or order previous newsletters and publications. It is still under construction and we are adding information on an ongoing basis.

Look for our website at: www.bcceas.ca

Carol Ward-Hall,
Executive Director, BC CEAS



JOIN BC CEAS

Senior	\$20.00
Individual	\$40.00
Non Profit/ Senior Group	\$50.00
Corporate	\$75.00

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NEW MEMBERS BC CEAS

Gulf Islands Women's
Resource Network . . .Ganges, B.C.

DONATIONS

Charmaine Spencer	\$125
Phyllis Bentley	100
Liu Kin Chi	400
Capilano Lions Club	375

GRANTS

City of Burnaby	\$500
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Chinese seniors in Canada (cont'd from p. 1)

Age and Health

Older respondents are less healthy than younger ones. They have more illnesses and a higher dependency for personal care and other activities of daily living. Their general and mental health is poorer. They suffer from a higher level of depression.

Gender and Health

Although most women live longer than men, they are less healthy than their male counterparts. Women of 65 or older reported more illnesses, more limitations in functioning capacity, poorer physical and mental health, and a higher level of depression than men. About one in four older Chinese have not had annual physical examinations and the majority of this group are men. Reasons given for not doing so have to do with lack of time and not having a need.

Poverty and Health

Those with lower income and a lower level of financial adequacy indicated having more illnesses, lower functioning capacity, poorer general physical and mental health, and a higher level of depression than those with higher income. The poor tend to have a lower level of social support, which contributes to poorer mental and physical health.

Use of Traditional and Western Medicine

Although most (97.5%) of the older Chinese have used Western health care, 66.2% of them had also used at least one type of traditional Chinese medicine. Two out of five reported their preference for Western medicine. A significant 44.4% of older Chinese would use Chinese medicine if it were covered by a health care plan. Taking traditional Chinese food supplements was reported by close to two-

thirds of respondents. Over-the-counter Chinese herbs and herbal formulas were used by half of respondents.



Health Talk in the Hall of Decorum and Harmony

Use of Community Support Services

Only about **one in five** older Chinese have used one or more types of community support services, with seniors centres most commonly used. **Use of home support services** for personal and home care were much lower for the

older Chinese than for older adults in the general population—7.3% versus 36.7% respectively. Nearly half of the older Chinese would consider using long term care facilities; but a majority of them would prefer a care facility geared to Chinese residents and staffed mainly by Chinese employees.

Service Barriers

Health professionals who do not speak their languages is the most common service barrier identified by the older Chinese (46.1%). Other cultural barriers reported were:

1. waiting lists are too long (37.9%);
2. potential users lack knowledge of existing health services (34.1%);
3. programs are not specialized for Chinese users (30.8%); and
4. professionals do not understand the users' culture(s) (30.4%) .
5. The challenging process of settlement, the lack of culturally appropriate health services and other personal vulnerability factors may be the reasons that older Chinese immigrants are less healthy than their counterparts in the general population.

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Recommendations:

1. Address The Vulnerability of Older Women

Policies and services have to seriously address the health problems of women. Service providers need to expand health support and prevention programs to women as a group, taking into consideration their greater financial vulnerability as well. Poor financial status is significantly related to being less healthy.

2. Fund Senior Centres

The report suggests that funding from the government for local senior groups has to be increased since these groups form the fundamental social support structure to help older adults live in the community as long as possible.

3. Assist Families

Family members need financial assistance or incentives to help with the care of frail elders.

Identified challenges to care providers were a lack of:

- resources for cross-cultural geriatric mental health programs;
- understanding by mental health professionals of mental health issues of visible minority older adults; and
- mental health counselling and psychological services in non-official languages.

Health promotion, prevention and education are essential strategies for aiming at visible minorities and must be conducted in a culturally and linguistically appropriate way. A lack of linguistic and cultural matching between users and service providers exacerbates underutilization of health services.

Vancouver Seniors Least Healthy?

In Vancouver, 514 older Chinese completed the survey. Although they reported the highest proportion of respondents with post-secondary and above education, compared with other cities, they are less healthy than older Chinese in other cities.

The percentage of older Chinese in Vancouver that reported having at least one chronic illness (96.1%) was higher than the percentage reported by all the respondents combined (92.8%) as well as the one for older adults in the general population (81.7%).

On average, the older Chinese in Vancouver reported having about four (4.03) health problems whereas the average for all the respondents was 3.3 and the average for older adults in the general population was 2.23.

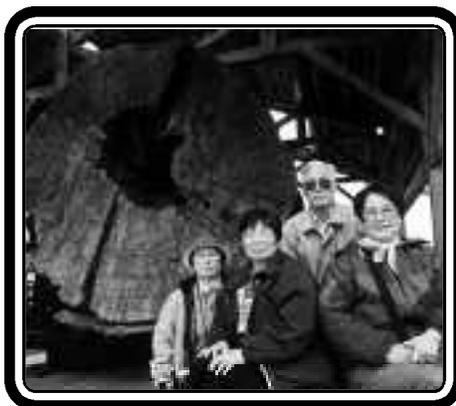
Close to one in three (30.3%) of the older Chinese in Vancouver reported having depressive symptoms indicating that they are either mildly or moderately to severely depressed. This prevalence rate was much higher than the one reported by all the respondents combined (22.4%).

Why might Vancouver seniors be less healthy or more depressed than those in other Canadian cities studied? The researchers tag the challenging process of settlement, the lack of culturally appropriate health services and personal vulnerability—surely factors shared by other Canadian cities with a diverse immigrant base.

The survey may spur other research aimed at answering some of the questions raised by the conclusions of this report.

For further enquiries about this research, please contact Dr. Daniel Lai, Faculty of Social Work, University of Calgary at (403) 220-2208 or email dlai@ucalgary.ca

Edited by Gillean Chase



A tour group in Chemainus.

MEMBER NEWS

A Community Responds to Home Invasion

by **Phyllis Bentley**

Elder Abuse Committee, Community Response Network (CRN), Penticton area

It was not only victims and their family members who were shocked by the brutality of intruders into their home in the early hours of January 14, 2003. The Penticton community reeled at the sight, on television and in the newspaper, of the bloodied face of 82 year old Elmer Pfahl, with his wife Erna at his bedside.

The couple had been bound and gagged but in a feat of sheer resourcefulness, 78 year old Erna was able to free herself and call for help. Her speedy intervention led to three culprits being taken into custody before they fled the province. Their court appearance in Penticton was scheduled for March 17.

The CRN has been formed, in most communities in British Columbia, to assist designated agencies and police working collaboratively to implement new legislation related to support and assistance for abused, neglected and self-neglected adults who cannot get help on their own.

Responding to widespread feelings of anxiety in the community, the Penticton CRN, with support from our Mayor and City Council, presented an information and awareness event at the Trade and Convention Centre on March 17.



Phyllis Bentley



Joyce Schmalz

Seeking Safe Solutions was an opportunity for residents to learn how to stay safe in the community and in their homes.

A live play performed by health care workers introduced the morning session, followed by a video and discussion from a multicultural perspective.

In the afternoon of March 17, the RCMP and members of Victims' Assistance presented risk situations and safe alternatives to behaviors in the community and the home.

BC CEAS' video, *Money Matters for Seniors*, was shown as part of this awareness day to sensitize seniors and others to possible financial fraud involving attempts to misappropriate the funds of seniors by family members or other "caregivers/friends".

The play used was based upon a script written by Joyce Schmalz, a board member at BC CEAS.

There was no charge for admission.

Kudos to the Mayor and City Council of Penticton for their support of this community-wide event!

To purchase *Money Matters for Seniors*, call BC CEAS at (604) 437-1940, or email ceas@telus.net – Ed's note.



Trail's Mercy Response Network

by **Margaret Malcolm**

"Mercy Response Network" has been active in Trail since October 2002. The community-centred program is sponsored by the Trail Pentecostal Church, and Margaret Malcolm and Joyce Dawson between them indicate that they have dealt with 2,100 calls, which amounts to about 18 calls a day. The Church forwards requests for counselling/support to these unpaid volunteers, but does not provide funding for the "Mercy Network".

Malcolm put in some money she inherited to set up telephones, pagers and to print business cards about the "Mercy Network". She is the former administrator of Kiro Manor in Trail, an 86 bed care facility which is scheduled to close in about one year. She now ministers to the homeless and intervenes with people living on the street.

The "Network" received \$18,000 in funding from the Lions Clubs in Trail and Rossland. Here are two sample situations with which "Mercy Response" has dealt. – Editor's Note.

In my position helping people in the community, I was called by a woman whose common-law partner is suffering from Alzheimer's disease. He is confused and incontinent of bladder and bowel. In addition, he suffers from an acute eating disorder which means that he continually demands food and becomes aggressive if food is denied.

This man is eligible for a Special Care Unit, but for three months has been on a long waiting list for a respite bed, which will give his spouse a short break, even though permanent admission is far away.

His spouse, with assistance from Home Support, is maintaining him in their home. They are both too young for pensions and existing on Social Assistance. To maintain his cleanliness, she is using a minimum of 7 adult diapers a day. Due to the eating disorder, he has continual diarrhea. The cheapest diapers amount to about \$250 a month. This, along with other additional expenses, means that she does not have enough money for rent or food. A suggestion from her financial aid officer was that she make cloth diapers and wash them to save money.



This woman does a fantastic job of keeping her spouse clean and active, but at the time I met her after several months of this pace, she was exhausted and at the point of collapse. No one, not even the most committed Home Care nurses, seem able to change the situation even when they feel that it is too much for the woman. They referred her to our community service for assistance. We were able to provide money for diapers and to counsel her about budgeting so that she can avoid being in financial straits every month.

In another situation, a couple who are both over 65 are looking after an adult son who has chronic diabetes. Over the past few months, his kidneys have been deteriorating, and he has high blood pressure and uncontrollable blood sugar. He became extremely ill with influenza-like symptoms—nausea and vomiting, dizziness and syncope. Concerned

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Member News: (cont'd from p. 8)

about his condition, the parents took him to Emergency and left him to have some tests. They too were suffering from the flu and very run down.

When they returned in the early evening to visit, they were told he was to go home and to get medication. He was in no better shape than when he was admitted and his results were not positive. They questioned the doctor who said there was no room so he could not stay, and who eventually gave them enough medication for the evening.

When they returned home he was unable to walk and his parents could not carry him so he had to lie on the kitchen floor. The ambulance was called and he was taken to the hospital and admitted.

This couple received emotional support and counselling from the *Mercy Network*. Their son now needs dialysis and it is sometimes difficult to refer people to community services that may have been cut back or eliminated.

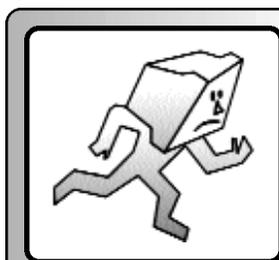
There is now only one handi-dart to pick up and deliver people and a soup kitchen run by the Salvation Army has closed. The *Mercy Network* is sometimes able to offer food vouchers to those who need help and takes over milk and cereal or refers people to food banks. The Ministry of Social Services now refers some people to the *Mercy Response Network* and transition houses call for help dealing with the drug problems of clients.

Joyce Dawson tells *A Shared Concern* that volunteers with counselling skills who are able

to work for free are hard to come by. Since the Senior Citizen Counsellors program was cancelled last year, and seniors are no longer reimbursed for their expenses, it is hard to pick up and deliver seniors or to provide them with services that mean being out of pocket.

She is worried that the aged population of Trail is 6% higher than the provincial average and that plans are underway to close the care facilities in Trail and replace the three facilities which now exist with a 30 bed facility. She believes that the absence of care beds may force seniors into assisted living facilities at \$1,200 to \$1,500 a month and that they may cease to be able to afford assisted care long before they no longer need such care.

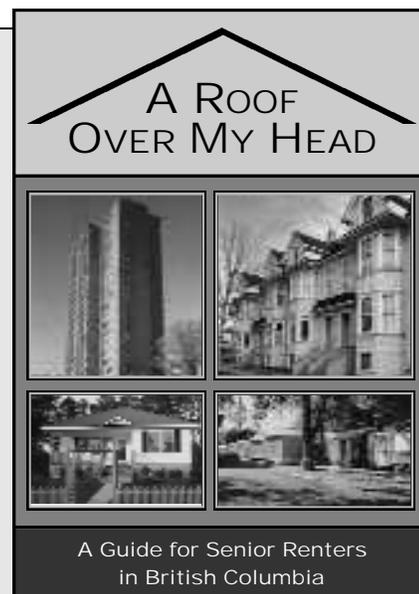
"*Mercy Response Network*" can be contacted at mercy_response_net@hotmail.com or telephone: (250) 364-9336 for Marg Malcolm. For Joyce Dawson, contact: joyce_dawson@telus.net or telephone: (250) 364-3155.



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ceas@telus.net

Our website is:
www.bcceas.ca



Available from BC CEAS

\$5.00 a copy includes
shipping and handling costs

LEGAL ADVOCACY PROJECT

Written by **Dr. Nasser Amiri**, Legal Advocate, **BC CEAS**

This is the second year of funding by the **Law Foundation of British Columbia** for the Legal Advocacy Project. The goal of the project is to provide legal information, referral, and legal advocacy to seniors, community agencies, government departments, Community Response Networks, and others throughout the province.

The cutbacks to Legal Services and other service providers, and to the Senior Citizen Counsellors program, have increased the demand for legal information and advocacy.

Seniors who are in abusive situations, their relatives, friends, neighbours, social workers, hospital attendants, police, multicultural organizations, government agencies, and others call for legal information, summary advice, and referrals. Calls are coming from all over B.C.

We have had an increase in our provincial calls since our Toll Free number was installed. We also received calls from other provinces and from the U.S.A.

Seniors call regarding many different issues: financial abuse (usually associated with emotional abuse), human rights abuse, physical and sexual abuse, benefits, housing, immigration issues and grandparents' rights. They ask about issues concerning care homes, caregivers, consumer law, adult guardianship, motor vehicle licensing, powers of attorney, matters of estate, debts, marriage, divorce, common law, Small Claims Court, shoplifting, and welfare fraud.

In the Lower Mainland, if a senior is able to travel we may ask them to come to our office. We ask clients to come to the office if written Authorization for Release of Confidential Information is required or they need advocacy for minor criminal cases such as shoplifting and welfare fraud. In shoplifting cases, we can accompany clients to Crown Council offices.

Requests for Public Legal Education presentations have increased after the cutbacks to legal aid and the cultural minority programs of the People's Law School. The Legal Information Counsellor, the Supervising Lawyer, and the Executive Director have given many presentations on changes to legislations and programs that affect seniors, protection of seniors' rights, and abuse prevention.

In addition, the Legal Information Counsellor, the Supervising Lawyer and other staff attended community meetings to discuss lack of adequate services for seniors, to find solutions and to raise public awareness about senior abuse.

*The Legal Information and Advocacy line operates Monday through Thursday from 8:30 a.m. to 3:30 p.m. For **advocacy information**, call: (604) 437-1940. Our toll-free number is 1-866-437-1940.*

Locations of B.C. calls:

100 Mile House	Lumby
Abbotsford	Merritt
Ashcroft	Nanose Bay
Black Creek	Union Bay
Bella Bella	Oyster Bay
Chemainus	Parksville
Chilliwack	Penticton
Comox	Prince George
Courtenay	Port Mellin
Cranbrook	Powell River
Creston	Qualicum
Enderby	Saanich
Gibsons	Salmon Arm
Kamloops	Sardis
Kelowna	Sechelt
Ladysmith	Tappen, etc.

PROFILE OF A LEGAL ADVOCATE

BC CEAS is privileged to focus on **Dr. Nasser Amiri**, a counsellor providing seniors with legal information and support. His bi-linguality in English and Persian/Farsi has been of use to Vancouver Community College where he still teaches Court, Community and Medical Interpreting programs, and to various community organizations like Surrey-Delta Immigrant Services Society where he interprets for law firms, government and NGO organizations and health institutions.

He is a former legal information counsellor for the North Shore Community Law Office (Legal Aid), and interviewed clients to determine their legal problems and needs. He represented clients at BC Benefits Tribunals, Residential/Tenancy Arbitration and at the Human Rights Commission. He has also done public education presentations on these issues as well as on housing and employment standards.

Dr Amiri did intake interviews and referrals for MOSAIC Vancouver for the Paralegal Project and represented clients with regard to Employment Insurance, Immigration, Citizenship, theft and debt issues. He provided legal advice and information to MOSAIC staff and workers from immigrant serving agencies, and did public legal education to Refugee and Citizenship groups. He was also a Settlement Services Counsellor at MOSAIC.

As a Persian Settlement Worker, he provided information, orientation and counselling to individuals and gave group sessions to Iranian and Afghani immigrants and refugees. He dealt with issues affecting settlement, education, housing, employment, health and social services to immigrants and new citizens. He is versed in poverty law.

Dr. Amiri is experienced in cross-cultural family and peer counselling, suicide prevention, mediation and conflict resolution. He was appointed by the Convention Refugee Determination Division of the Immigration and Refugee Board to represent minor and incompetent Iranian and Afghani refugee claimants. His understanding of Iranian/Afghani settlement needs and of Iranian culture and laws made him a popular panelist and speaker on Iranian issues to law firms, school boards, Canada Employment Centres, municipalities and districts, recreation centres, church councils, and social/cultural associations. He was an accredited translator for the Translation Bureau of the Department of the Secretary of State of Canada.

He initiated the establishment of the Afghan Women's Group of Vancouver in 1996. Two years prior to that, he hosted and participated in needs assessment sessions which resulted in the formation of the Iranian Independent Women's Group in Vancouver.

Dr. Amiri is a published Persian poet who is also a translator of various books, anthologies, poems and articles in Persian and contributed translations to the *Encyclopedia Iranica*.

Before immigrating to Canada in 1985, he taught Persian literature at universities in Iran and Afghanistan.

At a time when there is such accelerated fear and anxiety towards emigrants from the Middle East, Dr. Amiri's achievements remind us that most Canadians are immigrants. Furthermore, all immigrants add to the cultural mosaic that makes Canada unique.

Based on material provided by Dr. Amiri and edited by Gilleen Chase



Dr. Nasser Amiri

SENIOR ROLE MODELS: A TRIBUTE TO PRUE CUNNINGHAM

Pernille (Prue) Cunningham, at 88 years old, is the most senior member of the board of directors of BC CEAS. Yet she is often gone from early morning until late at night, coordinating over 400 volunteers, who assist seniors all over Vancouver Island and the Lower Mainland. She is a former Senior Citizens' Counsellor, and still deals with seniors abuse issues since the demise of the SCC program. Prue has been honoured with several awards, including one for Senior Citizen of the Year, presented by the Brock House Society in 1999. Then Lieutenant-Governor of British Columbia, the Honourable Garde Gardom walked her down the aisle to receive it.

The "Sendial" Program

Prue is not one to trumpet her own achievements, but she is the driving force behind the Thrifty Foods volunteer program, which has volunteers take orders over the telephone for seniors who cannot get out, place the items ordered into buggies, take them through food checkouts, and arrange to have these groceries delivered by Thrifty Foods. She started this service 16 years ago, with five stores and 30 volunteers, and built the volunteer base to over 400 in 18 stores, located "up and down" Vancouver Island. The service is now available in one of the Thrifty Foods locations in Tsawwassen, and two more such service locations are coming to Coquitlam and Surrey in the Lower Mainland.

Honouring the Danish

In 1994, Thrifty Foods acknowledged Prue's contribution to their senior client base by putting on what Prue calls "a festive and

grand celebration" of her 80th birthday at the Crystal Gardens in Victoria. Friends and relatives came from everywhere, and Prue remembers the flowers and wonderful decorations, including the Danish flags of her home country, and refreshments and goodies "as only Thrifty's can do it".

What makes someone go from retirement to other full time duties? An examination of the life experiences Prue reveals in her modest way does not tell us why she became such a dedicated advocate of seniors in need.

She was born October 5, 1914, in Roskilde, Denmark, which is now part of greater Copenhagen. Prue is proud of the history of Danish kings and queens and of the beautiful cathedral where these monarchs were buried and she was baptized. She is pleased to have an older brother, John Schierbeck, who is still alive, and a younger sister, Barbara Andersen.



Prue Cunningham,
Citizen of the Year for 1999

Pandemics and War

Her parents and brother went to Canada, leaving Prue and her sister with relatives in order to establish some security for the young children before coming for them. In 1919, Prue's mother returned to Denmark, surviving a deadly influenza pandemic at the time; which Prue says killed more people than did the First World War. Aboard a small ocean liner called the *King Oscar*, Prue witnessed lookouts scouring the foggy North Sea for mines which were the detritus of the First World War, and remembers that the ship "hove to" when it was too dark to see the danger around them.

Cont'd on page 13

Prue Cunningham: (cont'd from p. 12)

They landed in New York and came to Kenogami in Quebec by rail.

Prue lived in Quebec for three years and learned French before moving to Nova Scotia by way of a merchant ship on the Sageunay River. Of that trip, Prue remembers that the family cat became seasick under the captain's table.

Love and War

Prue met her husband to be while she was selling *Chatelaine* magazine with five other women. Bob Cunningham was an engineer in a coal mine they visited and Prue married him in July of 1937. She does not dwell upon how it felt to have him enlist in the Second World War and spend the next six years away from her. She remained in Sydney, Nova Scotia, working for and boarding with the Navy as part of their Communications personnel, then called Signals staff.

Bob was discharged to Vancouver and Prue joined him there, ending up in Victoria in 1952. He worked for the City of Victoria as an electrical inspector and she continued in the DND (Department of National Defence), in Communications, until her retirement. In Prue's own words, "when you work for Communications, it is a 24 hour a day, 7 days a week, 365 days a year job, and you work shifts, so your free time varies continually".

Perhaps this is where Prue developed her habit of total dedication to a cause.

A Seniors' Advocate

Subsequent to losing her "Bobby" in 1979 after several years of ill health, and retiring a short time later, Prue totally shifted focus and became a seniors' advocate. In 1982, she took courses through Camosun College, given by the late Isabel Dawson, who has a building named after her on the Lansdowne campus of Camosun.

As a Senior Citizen Counsellor (SCC), she went into senior's homes and frequently found bare cupboards as seniors were not able to get out. Hence began the *Sendial* programme now in place at all of the Thrifty Stores on Vancouver Island. The SCC programme has unfortunately lost its funding but Prue still advocates for seniors in need, and makes various trips to the Mainland to take part in BC CEAS board activities/commitments.



Prue Cunningham, Confirmation at age 5

Significant Achievements

Prue expressed delight at receiving a medal for significant volunteerism, presented to her in the House of Commons in 1990, she believes. She received dinner at the Chateau Laurier in Ottawa after the award. She is also an "honorary citizen" of Victoria, and the Mayor presented that certificate to her at City Hall.

In Prue's own words, "All in all, I must say that the so called 'golden years' have in many ways been that, especially when you sweep the not so golden moments under the carpet".

Perhaps BC CEAS should spring for a broom to help Prue Cunningham keep her memories golden.



Edited by Gilleen Chase, from material provided by Prue Cunningham.

Prue Cunningham: (cont'd from p. 13)

Flowers for Prue

I First met Prue in 1989 when I became coordinator of the Senior Citizen Counsellor Program of the Ministry of Social Services seniors. Prue immediately impressed me. She was so generous of her time, knowledge and ideas. As time went by, it became clear that Prue's intelligence and creativity are remarkable. She is that rare combination of an "idea" person and an "I doer". When she saw a need for some service or resource, she worked, often with others, until a solution was found. Seniors of Victoria and around



the province are the beneficiaries of her industry and creativity. Two examples are SWAP (a program sponsored by Silver Threads and the UVic Student Employment Center, which matches students willing to do tasks for a minimal fee with seniors needing assistance) and *Sendial* (a grocery shopping and delivery program manned by volunteers and sponsored by Thrifty Foods).

I am very grateful to Prue for her support, assistance and encouragement. She is a wonderful mentor, and a spectacular model of healthy aging.

Written by **Barbara Makepeace Wilson**

WAS GOVERNMENT LISTENING?

Katherine Whittred, Minister of State for Intermediate, Long Term and Home Care, forwarded a letter dated March 24, 2003 to BC CEAS, in regard to developing an Office of the Assisted Living Registrar.

Such an office is provided for in the *Community Care and Assisted Living Act* (Bill 73).

"*The Act* establishes a mandatory registration system for assisted living residences in British Columbia. A Registrar will be appointed to oversee regulations, health and safety standards and complaints investigations for assisted living residences", says Ms Whittred.

She indicates that the Ministry of Health Services received valuable input on assisted living residences from consumers and other "stakeholders" during the 2002 consultation on the *Community Care Facilities Act*. Over the next six months, Ministry staff will "work with the industry to develop health and safety standards and a

complaints process for assisted living residences." These draft recommendations will utilize both input from the 2002 consultation and will elicit additional feedback from stakeholders such as BC CEAS, to participate in critiquing the draft recommendations.

The initiative will be led by Mr Andrew Hazlewood, Provincial Director General of Population Health and Wellness. The Ministry apparently has begun to recruit a Registrar in March 2003.

For additional information about the establishment of this process, Mr Hazlewood can be contacted at (250) 952-1731.



Katherine Whittred

Ministry of Health Services, Minister of State for Intermediate, Long Term and Home Care
PO Box 9067 Stn Prov Govt .,
Victoria, B.C. V8W 9E2
(Parliament Buildings Victoria).

" FAIR PHARMACARE "

Changes in Provincial Prescriptions Plan

Before May 1, 2003, seniors and the poor in British Columbia will need to have registered for the PharmaCare program in order to receive financial assistance to the beginning of 2003 with the costs of prescription drugs. In order to register, seniors and others will have to provide their consent for the province to access net income information based on the 2001 tax assessment. Those who do not provide their net income figures from 2001 will not receive assistance in covering their prescription drug costs. In addition, you must have resided in B.C. for three months, be registered for the Medical Services Plan of B.C. and have been a resident in Canada for the last 12 months. The plan is available to Canadian citizens or permanent residents only. To qualify for senior PharmaCare financial assistance, you or your spouse must be at least 65 years old.

What You Need to Register

- You will need your BC Care Card number and that of your spouse if you have one; or of dependent children if applicable.
- You will need your Social Insurance Number and that of your spouse.
- You will need to provide your birthdate, that of your spouse, and those of dependent children if applicable.

Net income information from your 2001 income tax return is to be obtained via your signing a consent form through your pharmacy that allows Canada Customs and Revenue Agency to release this information about you to PharmaCare.

If your income has changed radically since 2001, there is an appeal process built in to the PharmCare program. Should you experience a significant decrease in your income, you may apply for a lower deductible.



According to the Honourable Minister of Health, Colin Hansen, 280,000 BC families and seniors will pay less for their PharmaCare costs than they do now, and 84% of all British Columbia families will end up paying less once the system is based on need/income factors. PharmaCare will pay 75% of eligible prescription costs for seniors after the deductible is met, and 70% of eligible drug costs for non-seniors to the maximum to be paid per family, at which point 100% of drug costs will be covered.

A Needs Response

A needs response to the PharmaCare program is necessitated by \$700M a year in PharmaCare costs, and a 147% increase in PharmaCare costs in B.C. over the last decade.

According to the Honourable Mr Hansen, over the next two decades, PharmaCare costs will accelerate by 487% to an estimated \$8.7M a day by 2021.

Government is concerned about the cost per prescription drug having increased along with the number of prescriptions; for example, a drug like Remicade, used to treat severe rheumatoid arthritis, costs \$19,000 per patient per year. This is a 63% increase in the cost of this drug alone.

Cont'd on page 16

Fair Pharmacare (cont'd from p. 15)

“Fair PharmaCare”, starting May 1, 2003, combines the universal plan and the seniors’ plan into one new program. Until now, PharmaCare has offered the same level of financial assistance to most British Columbians without considering ability to pay factors. Now, if a senior’s net annual family income is less than \$33,000, there is no deductible before the government will reimburse the senior for 75% of prescription drug costs. After the senior’s drug costs equal 1.25% of his/her net income, the government will pay for 100% of prescription costs.

When a senior’s net annual family income is between \$33,000 and \$50,000, the family deductible is 1% of his/her net income before the government pays 75% of prescription costs. When these costs rise to 2% of net income, 100% of prescription costs will be covered.

If the senior’s net annual family income is over \$50,000 a year, the family deductible will be equal to 2% of that net income before 75% of prescription drug costs are paid. One hundred per cent of drug costs are covered when the prescription drug cost is 3% of the family net income.

For non-seniors whose net annual family income is less than \$15,000, there is no deductible to be met before Government covers 70% of prescription drug costs. At an amount equal to 2% of net income for this group, drug costs are covered at 100%. Between \$15,000 and \$30,000, the family deductible is 2% of net income before Government covers 70% of such

costs, and 100% of prescription costs will be covered for this group when 3% of net family income is spent on drugs.

If family income is over \$30,000 for non-seniors, the family deductible is 3% of net income before 70% of prescription drug costs are covered, and 100% is covered when such costs reach 4% of net income.



Unchanged Programs

Some of the present PharmaCare programs remain unchanged, such as those offering special assistance for British Columbians who need palliative drugs, those on income assistance, in long-term care facilities or coping with cystic fibrosis; and clients with disabilities registered with the home program of the Ministry of Children and Family Development.

Drug coverage already in place for cancer, transplant and renal patients, as well as those with HIV/AIDS remain unchanged.

For details about the new Fair PharmaCare program

and to register for financial assistance, visit the website at www.gov.bc.ca or call toll-free in B.C. 1-800-387-4977 before May 1, 2003.

Edited by Gilleen Chase from material provided at this website

It is a concern that those who may not have social insurance cards, birth certificates, or health care coverage may not be able to receive assistance with the purchase of prescription drugs. Those who for reasons of infirmity may not file a tax return will also be excluded. -Ed's note.

SELFCARE / TELECARE UPDATE



Health Concerns?
Call the
BC NurseLine
24 HOURS A DAY, 7 DAYS A WEEK
Toll Free 1 866 215-4700
In Greater Vancouver 604 215-4700
Deaf/hearing-impaired toll-free 1 866 889-4700
www.bchealthguide.org

BRITISH COLUMBIA
Ministry of Health Planning

Health care providers in BC operate a health information project to help British Columbians make better health care decisions at home and in partnership with their health care providers to improve health care quality and to reduce health costs. The underlying assumption is that emergency and other medical services are not used appropriately and that people do not need the medical care they are using and should simply be educated away from making extraneous visits to their health care providers.

BC Health Guide

BC households received a 400 page publication called *BC HealthGuide* and were informed about a telephone based "Health Support Line" service staffed by registered nurses to provide ongoing information and education on selfcare. Forty five nurses were hired to provide information about home treatment options or to determine when it would be appropriate for the patient to consult a health professional.

Without doubt, it is an advantage to receive free, confidential telephone health information, advice and triage service 24 hours a day, 7 days a week, and assistance from specially trained registered nurses. Education and communication about health care options strengthen the relationships between patients and health care providers. Information about other resources and the ability to direct callers to provincial resources/centres of expertise such as

the Cancer Information Line or Dial-a-Dietician help. Computer-based health information is easily accessed through a home computer or community internet connections such as libraries, recreation and seniors' centres, etc.

It cannot hurt to provide information to clients about managing chronic conditions or to offer lifestyle counselling and health risk management suggestions. Certainly the cost pressures on BC's health care system could be alleviated if emergency room services are utilized only by those at high risk, or if fewer visits to a general practitioner result from educated decision-making.

The **selfcare/telecare project** came about as a result of a project conducted by the Ministry of Health and Ministry Responsible for Seniors, Medical Services Plan, in collaboration with the Capital Health Region launched in November 1997. The interim evaluation report indicated that the project expanded individuals' health care knowledge, and enhanced individuals' confidence and ability to make health decisions. Those who conducted the project believe that individuals became more proactive in discussing and deciding on health care options and that valuable health care resources were more appropriately used.

The project is endorsed by provincial nursing, physician and pharmacy associations at this time. It is being touted as a "demand management" strategy and as a way to decrease the demand for non-urgent and after-hours calls, and to "manage" patient access to medical information and advice.

Visit www.bchealthguide.org for details about the **Selfcare/Telecare Program**. It is loaded with health information for ordinary users, and, topically, is advising people of the symptoms of SARS (Severe Acute Respiratory Syndrome). -Ed's note

NATIONAL VOLUNTEER WEEK APRIL 27 – MAY 3, 2003

National Volunteer Week is intended to honour 6.5 million volunteers in more than 180,000 non-profit and charitable organizations across Canada.

They are students, workers and retirees essential to the organizations and to the Canadians whose needs they serve. Their combined efforts are a force for change in our society. The value of one. The power of many.

BC CEAS wishes to thank its valuable volunteers, who serve as **board members** and as our *ABCs of Fraud* volunteers, as well as staff members like **Tricia Alford**, who put in many additional volunteer hours.

Our BC CEAS board members are:

Jill Hightower, President
Honorine Loader, Vice President
Rae Dixon (2nd V.P.)
John Oostenbrink, Treasurer
B.A. (Tony) Angel, Secretary
Prue Cunningham
Barbara Der
Ravinder Dhir
David Gibbs
Henry Hightower
Kelly Ip
Mark Perry
Joyce Schmalz
Bill Summersgill
Moiria Tait
Michael Vanderbeck
Barbara Makepeace Wilson

In celebration of National Volunteer Week – Apr 27 to May 3/03, 2003 – I would like to recognise and thank the '*ABCs of Fraud*' Senior Volunteer Speakers Team, who give so freely and willingly of their time and expertise to make the program possible.

Four Year Volunteers

Ted Calder
Grace Joe
Bikkar Singh Lalli
Charles O'Donnell

Three Year Volunteers

James Band
Frances Blake
Ethel Freer
G. Stan Lenko
Francine Panet-Raymond
John Reid
Paul Sansom

One Year Volunteers

Ronald Bennett
Tilda Bootsman
Lawrence Hipson
Leonard Kay
Brian Kirkbride
Dean Lundy
Geraldine McMullan
Carol Szekely

Welcome to the Speakers who joined the Team in March 2003:

Michael Anthony
Hugo Chan
Chantal Hudspeth
Gemma Sacre
Donna Sambolec
Michael Taylor

Thank you also to Michael Kane, Columnist, Vancouver Sun who helps me find new volunteers by giving '*ABCs of Fraud*' space in the *Business BC* section of the newspaper.

Mary Martin Sharma,
Co-ordinator – **Scotiabank ABCs of Fraud**

**For more information or to book a presentation,
please call BC CEAS at (604) 437-1940**

THE SCOTIABANK FRAUD AWARENESS PROGRAM: ABCs OF FRAUD, BRITISH COLUMBIA UPDATE

Written by **Mary Martin Sharma**, Co-ordinator – **Scotiabank ABCs of Fraud**

Breaking News!

Fifteen senior volunteer speakers from the Vancouver site will attend the **ABCs of Fraud “I’s on Fraud”** Conference in Ottawa, May 8 – 11, 2003.

The conference will focus on the three “I’s” – Internet Theft, Investment Fraud and Identity Theft.

The Vancouver Speakers Team will be taking an active part in the conference. Co-ordinator Mary Martin Sharma and Speaker Paul Sansom will co-facilitate the workshop “Managing Audiences”. Speaker John (Jack) Reid will assist participants in the Internet Training Lab to be set up at the conference site. Watch this space for a report on the conference – and the tulips!

Identity Theft – the stealing of another person’s identity to commit a crime – is the fastest growing ‘white collar’ crime in Canada with a loss of \$173 million for the year 2000 (statistics from *Phonebusters*).

A special **ABCs of Fraud** presentation on Identity Theft was held recently at West Vancouver Seniors’ Activity Centre, prompted by

incidents of theft of credit card applications from mailboxes in West Vancouver high rises.

The thieves completed the application forms to obtain and use fraudulent credit cards.

Card counterfeiters use the latest computer technology to read, modify and implant magnetic strip information on counterfeit cards – often victims can be unaware of the Identity Theft for several months. The **ABCs of Fraud Speakers** suggested to the audience that they protect their personal information at all times – and shred or destroy any information no longer needed. Thieves go through garbage to obtain information. Seniors should know with whom they are dealing in any transaction.

By taking precautions seniors can make themselves ‘Tough Targets’ for Identity Theft.

Site Co-ordinators Meeting

Co-ordinators from the ten **ABCs of Fraud** sites across Canada (including the new Montreal site) held their annual meeting in Toronto in March 2003 and met with the new national

Cont’d on page 20



Mary Martin Sharma



B.C. CEAS wishes to thank **Scotiabank** for their continued funding of *A Shared Concern* in 2003.

Scotiabank Fraud Awareness Program: “ABCs of Fraud”

To book presentations to senior groups, call BC CEAS at (604) 437-1940
“Make seniors a tough target to fraud”

Scotiabank: (cont'd from p. 19)

director Barbara Carter, who comes to the program with a background in marketing and working at Senior Friendly.

Our guest at the opening breakfast meeting was Daryl Marks, Scotiabank public and Corporate Affairs – who expressed the bank's appreciation for the work being done by the sites in presenting the program.

The two-day session included a marketing workshop with trainer Karen Jones (from The Writing Circle Communications Services). The coordinators looked at strategies for updating the marketing of the ABCs of Fraud Program both nationally and locally.

Topics included:

- **ABCs** Target Market, who are they? where are they?
- Nationally – what is working?
- Locally – what is working? – site reports
- Action Plan – what's next?

Everyone will report back in May to finalize an advertising strategy.

In an excerpt from his book '**Successful Marketing to the 50+ Consumer**', Jeff Ostroff states:

- Advertising to these smarties must be straight forward and benefit-oriented, not "hard sell".
- Seniors don't like being treated as if they are 'all the same'. Older people have different backgrounds and like to be treated as individuals. Our individuality actually increases with age as more life experiences are enjoyed.
- Seniors feel between 10 and 15 years younger than their actual age.
- Seniors actively seek new experiences, continuing to learn from life and pursue new interests – all the more reason to have a vibrant, interesting approach to advertising aimed at seniors.

For more information, please call:

Mary Martin Sharma,
Co-ordinator – **Scotiabank ABCs of Fraud**



ABCs of Fraud Volunteers