in this issue...

Features

11 Surrey embraces cultural diversity in planning age-friendly communities
Leslyn V. Johnson based on interview with Dianne Watts, Mayor of Surrey

Articles and Stories

4 Chinese seniors face three common struggles in health care
Joyce Fung and Jason Huey

5 Promoting mental wellness of Punjabi seniors
Dr. Sharon Koehn

6 Seniors accessing health information through innovative web resource
Elizabeth Stacy and Dr. Helen Novak Lauscher

8 How Prince George became a hub of senior activities
Baljit Sethi

15 Introducing the Vancouver Cross Cultural Seniors Network
Anne Kloppenborg

18 Grandparenting — a key role for immigrant seniors
Daljit Gill-Badesha

19 What's wrong with our statistics on newcomer seniors?
Dr. Karen Kobayashi

20 The mutual social and health benefits of seniors helping seniors
Sharon Tong

21 Computer classes increase social opportunities for Indo-Canadian seniors
Dr. Bikkar Singh Lalli

In Every Issue

3 Message from the President
Carol Wuertzke

7 Mind Buster Quiz

16 Member Achievements

23 Answers to Mind Buster Quiz

23 Post Script: Reflections from the 2011 Youth Summit
Mary Ellen Turpel-Lafond

24 List of AMSSA members
(as at May 2012)

Cover photo courtesy City of Surrey

AMSSA
• Strengthening Diversity In BC

AMSSA is an association of Member Agencies providing immigrant settlement and multicultural services in communities throughout BC.

Our Vision
A just and equitable society in which everyone benefits from social and economic inclusion.

Our Mission
AMSSA facilitates collaborative leadership, knowledge exchange and stakeholder engagement to support member agencies that serve immigrants and build culturally inclusive communities.

Our Values
Inclusiveness • Integrity • Mutual Respect
Equity • Diversity • Collaboration

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Canadians are living longer than ever before and our seniors are willing and able to continue being active in all areas of their lives. Did you know that in British Columbia immigrant and refugee seniors account for roughly 41% of those 65 years of age and older? This number is significantly higher than the national average of 30%. Seniors are also the second largest share (65%) of the BC immigrant population.

Many immigrant seniors had great dreams of reuniting with their families in Canada, but that dream might come with a hefty price. Seniors often give up a lifetime of social network and their social status in the community. They find it hard to make new friends, especially if they don’t speak either English or French, which in turn leads to social isolation. Many recent seniors find that their work experience is not relevant here, and struggle to find meaningful work. Well-meaning children who sponsor their parents are financially responsible for them for ten years. Parents become financially vulnerable and loss of self esteem is common. The financial and emotional reality of supporting a recently arrived and aging parent with little community support, is a recipe for elder abuse, although many families may not even recognize that it’s actually taking place.

Over time, any or any combination of these circumstances can create mental health problems such as depression. And in most immigrant communities, mental health issues are still taboo so family members may not understand what to do or where to find appropriate help. Add to that, normal age-related issues plus the challenges in accessing culturally relevant health care, and you can see that this population is extremely vulnerable. In Cultures West, we explore the reality of Immigrant and Refugee Seniors in BC.

Our feature stories look at two communities that are responding to increasing numbers of immigrant seniors. Learn how the City of Surrey is becoming an age-friendly community, and how Prince George became a hub of senior activity. As a bonus, you’ll also meet two inspiring seniors who now call Prince George home.

Health care is a huge concern for our seniors so we examine mental health, culturally supportive health care and health literacy. Read about grandparenting, and find out what’s wrong with Canadian statistics on immigrant older adults. Both our stories on seniors helping seniors, and seniors embracing technology will make you smile and reaffirm the positive power of social networks.

Challenge your knowledge of immigrant and refugee seniors with the Mind Buster Quiz, and find out how AMSSA members support seniors in Member Achievements. Our closing Post Script article revisits the topic of Newcomer Children and Youth that we covered in our last Cultures West by telling us what BC youth shared at last year’s Youth Summit.

You’ll find tons of interesting information between the covers of our spring Cultures West, so go ahead and read on!

Carol Wutzke, President
Chinese seniors living in the Lower Mainland are a diverse group. They originate from different parts of Asia, have various socioeconomic backgrounds and speak different dialects. In healthcare, our interdisciplinary team strives to provide quality care for this diverse population. Our services range from providing care in the home to hospitals and to nursing homes. Here are some common struggles that Chinese families face.

Language Barriers
Overall, health services are English-based. Patients who are fluent in English may navigate services more effectively than those who are not. That being said, our healthcare system serves all Canadians. For non-fluent English speakers, it is important to request the use of a professional interpreter through Provincial Language Services when care planning with the health care team. The service is free of charge. There have been cases where family members or other colleagues serve as interpreters, however, this should be avoided since it can result in misinterpretations, personal biases or inaccurate use of medical terminology. The impact can be significant because the information gathered influences assessments and ultimately care planning outcomes.

Internal Conflict
We often see families becoming distressed when an elder needs nursing home care. Intellectually, they recognize their parent(s) require a higher level of care that only nursing homes can provide. However, emotionally, they are conflicted because of their sense of duty which stems from the Chinese concept of filial piety. It is never an easy decision, and clinicians should explore this dilemma together with the family. Families often make decisions based on duty or emotions, but we advise families to be proactive in care planning, inquiring about available services available so that they can make an informed decision, and in advocating for their parent(s) by sharing their values and beliefs openly with the team.

Self-Awareness
Just being Chinese clinicians does not guarantee that we will deliver culturally sensitive care. For example, I recall asking a Chinese patient what she wanted for her care plan. After several futile attempts, her son explained to me that they were a traditional Chinese family; therefore as the eldest son, he gets to decide about her care. This was a revelation for me. Despite being a Chinese clinician who was raised with this cultural understanding, I had unknowingly used a ‘western’ healthcare perspective when assessing my patient. Clinicians must appreciate that the western concept of patient-centred care is highly individualistic, whereas the eastern concept is commonly collectivistic.

These are only a few barriers we see as clinicians. As our Chinese population continues to age, we must remember to reflect upon our experiences so that we may continue to improve on providing culturally appropriate healthcare.

Joyce Fung is a Clinical Educator for Vancouver Coastal Health. She has worked extensively with the geriatric population, in the community, hospitals, and nursing homes.

Jason Huey is a Social Work Case Manager for Vancouver Coastal Health. He holds his MSW from the University of British Columbia, specializing in working with seniors in healthcare.
How do community programs in the South Fraser region support the mental health of Punjabi seniors? That's exactly what the Punjabi Seniors Wellness Coalition wanted to find out. In 2011, the coalition organized two Punjabi Seniors Wellness Forums in Abbotsford and Surrey and invited two groups: 1) community service providers delivering services to Punjabi seniors, and 2) Punjabi seniors who had migrated late in life. Three main themes emerged from the discussions:

**Social inclusion** is critical to the mental wellness of Punjabi seniors. Social time and meals; outings and celebrations; cultural exchange and integration programs; groups for mothers and grandmothers and educational classes are examples of programs that encourage inclusion. However, while the Punjabi seniors embraced facilitated integration with ‘mainstream’ seniors, we heard that their efforts were often met with discrimination. The Punjabi seniors didn’t feel welcome in seniors’ facilities and existing services do not offer culturally appropriate programming. For example Punjabi seniors do not play bingo!

**Family** is essential to Punjabi seniors’ mental health and wellbeing. This can be positive by providing support and sense of belonging, and negative through the stress which results from being dependent on other family members. Other problems are the seniors’ unmet expectations, tension between generations and families who lack awareness of and knowledge to assist elders with their mental health needs. Even within the home, language barriers and different lifestyles and cultural values cause tension and intergenerational conflict which can result in elder abuse and violence, substance abuse and/or depression. As in many cultures, these behaviours are ignored or accepted to “save face” and protect family “honour”. Older women played an important role in families by taking care of grandchildren. However, these childcare responsibilities often prevent them from attending community programs. Mental health promotion and intervention programs targeted at Punjabi seniors need to find meaningful ways of involving families and younger generations. However, seniors also need access to transportation and interpretation services independently of their family members.

**Reaching out** to Punjabi seniors by service providers and community groups is necessary to address the seniors’ mental health needs. Seniors and their family members need reliable information about mental health issues, and available programs and services. Workshop participants recommended distributing information through temples, multicultural media, newsletters and notices in appropriate languages at diverse locations (including approaching potential clients in parks or private homes). To be successful, outreach efforts must also address barriers that prevent access and meaningful participation. Offering programs at convenient locations and times and providing free of charge services and programs are examples of more inclusive practices.

**Next Steps**: We need to offer supportive and inclusive services that address the discrimination Punjabi seniors sometimes face in ‘mixed company’, remove language and health literacy barriers, provide transportation and child-care for grandparents with childcare responsibilities, and use culturally-sensitive approaches to raise awareness of programs and mental health issues. Service providers need additional training and resources, such as long-term funding to promote ongoing mental health supports.

Promoting mental wellness of Punjabi seniors

Dr. Sharon Koehn

Dr. Koehn (Gerontology, Simon Fraser University & Providence Health Care) has been conducting research with immigrant Punjabi seniors since 1990. The Punjabi Seniors Wellness Coalition is composed of Satwinder Bains (University of the Fraser Valley), Jas Cheema (Fraser Health), Madeleine Addison (Canadian Mental Health Association), and Deirdre Goudnaan (BC Healthy Communities).
It can be a real struggle to find quality information to help you manage your health. It’s even harder to find accurate information on the internet. Add language and culture barriers, and the task can be nearly impossible. Immigrant seniors face even more challenges in accessing health information.

The Inter Cultural Online Health Network or iCON makes finding health information easier by offering culturally relevant health information through live public forums and web resources in Chinese and Punjabi. iCON is a partnership of UBC's eHealth Strategy Office, local health professionals, community organizations, governments and health authorities. Since 2007 we have been developing health events and resources for Chinese and Punjabi-speaking community members in BC. Topics include managing stress, how to prevent disease, and living a healthy life with chronic conditions like diabetes, heart or liver disease.

While seniors are not iCON’s main target, we do see many immigrant seniors participating in our activities. The average age of participants is 65, and at one forum the oldest person was 97 years old! This tells us that Chinese and Punjabi-speaking seniors need accessible health information.

We use different ways to support people regardless of age, language, reading level or access to technology. People can attend live public forums hosted in Cantonese, Mandarin, or Punjabi. The events are like health fairs where people can connect with health experts from their neighborhoods and get resources from local support agencies. Community health professionals (doctors, nurses, dieticians, etc.) discuss chronic disease prevention and management information. There are exercise and fitness demonstrations, live opinion polls and opportunities for health professional students to volunteer.

Sometimes, we use skits to highlight health issues from patient, family and caregiver points of view. For example, actors demonstrate real life situations showing various ways stress can affect people and their families living with chronic disease. In a “talk show” format, health experts give health tips, and answer questions from the audience. At other events, community members lead cooking demonstrations, making healthier versions (like lower fat or sugar) of traditional recipes. For those who cannot be there in person, events are broadcast live on the web at www.iconproject.org. People can join from home and ask questions of the health panel. Webcasts are available on the website so they can be viewed after the events.

iCON participants say they try to make healthy choices but need culturally relevant resources in their own language. Through iCON, patients and families gain a better understanding of their health and symptoms while connecting with others in their community. A clear sign of iCON's success is communities' requests for more events. Community response has been very positive. Over 10,700 people have attended forums so far. Tens of thousands have visited the website.

For more information, visit www.ehealth.med.ubc.ca.
From 2005-2009, the top three source countries of new senior arrivals to BC were Mainland China, India and the Philippines. This accounts for what percentage of total new immigrant seniors over the same time period?

a) 24%   b) 47%   c) 53%   d) 61%

Between 2007 and 2027, the number of seniors in the Lower Mainland is expected to increase by what percentage?

a) 48%   b) 68%   c) 98%   d) 118%

Immigrant seniors to BC have a bachelor’s degree or above when compared with their Canadian-born counterparts.
True or False

According to a recent United Way of the Lower Mainland study, which of the following senior services are absent in most communities?

a) Advocacy
b) Education and training
d) Ethno-cultural
e) All of the above

In the 2006 census, seniors represented what percentage of all new immigrants to BC?

a) 1%   b) 3%   c) 6%   d) 9%

Most seniors who come to BC come in the Family Class. What percentage are economic principal applicants, including skilled workers, business immigrants, provincial nominees and caregivers?

a) 2%   b) 4%   d) 5%   e) 7%

Which of the following is a major issue for immigrant and refugee seniors?

a) Mental health problems
b) Social isolation
d) Abuse
e) Access to health care
f) All of the above

Most immigrant seniors in BC arrived in the Lower Mainland. Most of them live in Surrey.
True or False

See page 23 for answers
Among our many activities, the Immigrant & Multicultural Services Society of Prince George delivers special programs and services to immigrant seniors. We recognize that this particular immigrant group faces multiple barriers while trying to integrate in their new community.

At our Annual Multicultural Fair we offer workshops for seniors in different languages including Punjabi, Chinese and Spanish. Each August during the PGX, the Prince George Council of Seniors coordinates a one-day “fair within the fair.” The day features colourful and informative displays by community groups and businesses. IMSS of Prince George participates and supports the event each year.

The IMSS’ Settlement Program delivers monthly information sessions for the Multicultural Seniors. To ensure that we’re reaching seniors, we send out invitations, e-mails and posters to the local ethno-cultural groups, mosques, temples, Gurdwaras and community drop-in centres.

IMSS of Prince George also supports the Indo-Canadian Seniors Group in Prince George. IMSS participates in events and workshops for the two groups, helps them in writing proposals and provides letters of support. The groups also have free access to IMSS’ volunteers, equipment and facility.

But how did Prince George get to be such a hub of senior’s activity? Here’s how it unfolded.

From 1980 to 2000, IMSS of Prince George delivered ESL Classes for seniors. The curriculum was focused on issues relating to health, legal, social domestic, services and benefits for the seniors.

Then in 1994, the Society conducted a needs assessment study of Multicultural Seniors. The results led IMSS of Prince George to start a Multicultural Drop-in Senior Centre. New Horizon Sunset Program provided funding for the program for two years and when the contract ended, the centre was closed but we continued the program at the IMSS’ office.

IMSS of Prince George received funding from the Law Foundation of BC to deliver our Bridging the Gap cross-cultural seniors program in 2000. This program covered legal information, services and benefits for seniors. Two lawyers volunteered to offer ten sessions. The next year, we delivered Step towards Independence for seniors. These were self-help groups where seniors learned how to manage their own health, legal, social and domestic issues.

In 2002, the society joined the Prince George Council of Seniors and since then we have been working together to organize programs. In that same year, the Mayor of the City of Prince George created a special committee for seniors and our Executive Director, Baljit Sethi, served on the board.

In 2005, we worked with the Indo-Canadian Seniors and helped them to create the Indo-Canadian Punjabi Seniors Association. Today, both the Guru Darbar Sikh Temple and the Guru Gobind Singh Sikh Temple have senior’s associations and we work with both Gurdwaras.

In 2009, we received funding from the New Horizons Seniors Program. In partnership with Prince George Council of Seniors we published Journey to New Horizons. This book compiled the journey of 30 first generation immigrant seniors as they recounted their settlement experiences and the barriers they faced while settling in Canada.

Providing support to immigrant and refugee seniors is nothing new for IMSS. It’s what we do, it’s part of our culture.
Fulin Ge

Fulin and his wife, Long Fei, came to Canada in the summer of 2001 sponsored by their son who lived in Vancouver. They lived with their daughter in Edmonton for a few years until she finished her doctoral degree at the University of Alberta. Then they moved to Vancouver to live with their son and his family.

When Fulin’s daughter started teaching at the University of Northern British Columbia in 2008, Fulin moved with her to Prince George. Surviving the long, cold winters of central BC has been a challenge, but he has adapted. In fact, he walks for one hour every day regardless of the weather. He particularly enjoys wandering around the forested trails near his house where he studies wild plants, flowers and mushrooms. Fulin also attends English classes at IMSS in Prince George and looks forward to the monthly seniors’ teas. His most recent hobby is painting with ink and occasionally pencil crayons. He often presents his stunning artwork and intricate Chinese calligraphy as gifts to his friends and classmates.

Fulin is a retired teacher; he taught Chinese to high school students in the beautiful town of West Lake near Shanghai. Fulin loved his job and speaks fondly of his career and his relationships with his students. He has also forged many strong relationships with people in the community of Prince George and through his experiences at IMSS. His warm, friendly manner as well as his thoughtful, intelligent approach to life make him a well-respected, inspiration to everyone he meets.

Simon’s Story

Simon arrived in Prince George in 2007 with his wife, Josephine. His journey was a difficult one with a long wait in the Congo before coming to Canada. In his native country of Burundi, Simon was a teacher and a minister. He misses the fulfillment that he got from his work and struggles to find a job in Canada. Learning to live with the cold has also been a challenge. Although Simon and Josephine enjoy being close to their daughter and her family, Simon says that their biggest regret is not having all their children with them. They have three daughters and six sons living all across the world.

Despite the hardships he encountered in the past and the difficulties of adjusting to life in a new country, Simon is always positive and optimistic. Simon inspires everyone he meets. He is respected and loved by the students he has met while studying English at IMSS. People for whom he has worked speak highly of the thoroughness and care he takes in doing any job.

Simon embraces life and is always willing to try new things. He fills his days by studying English, volunteering at the Red Cross and doing whatever work he can find. Simon loves to learn and participates in any activities that come his way – book studies, movies, and opportunities to attend concerts or lectures. He attends church regularly and participates in the seniors’ social group at IMSS. Simon is becoming a familiar sight in his community. He can often be seen riding his bicycle even in bad weather.
Welcome!

Vancouver Island
IMMIGRANT WELCOME CENTRES
Providing immigrants with the information, support, and tools they need to reach their goals.

Inter-Cultural Association of Greater Victoria
www.icavictoria.org
930 Balmoral Road, Victoria, BC V8T 1A8
phone: 250-388-4728 email: info@icavictoria.org

Central Vancouver Island Multicultural Society
www.cvims.org
101-309 Selby Street, Nanaimo, BC V9R 2R4
phone: 250-753-6911 email: admin@cvims.org

Immigrant Welcome Centre of the Comox Valley & Campbell River
www.immigrantwelcome.ca
Unit C-1001 Lewis Avenue, Courtenay, BC V9N 5R4
phone: 250-338-6359 email: admin@immigrantwelcome.ca
A114–740 Robron Road, Campbell River, BC V9W 6J7
phone: 250-830-0171 email: info@immigrantwelcome.ca

Cowichan Intercultural Society
www.cls-iwc.org
205-394 Duncan Street, Duncan, BC V9L 3W4
phone: 250-748-3112 email: office@cls-iwc.org
The City of Surrey has grown significantly over the past 20 years largely through immigration from different parts of the world, predominantly China and South Asia. Surrey attracts thousands of new immigrants annually and is now Canada’s number one destination for Government Assisted Refugees. The last available census numbers (2006) show that 46% of Surrey’s population is a visible minority, making it the Lower Mainland’s most diverse community after Vancouver.

Another segment of Surrey’s population is also growing rapidly – its seniors. In fact, according to Mayor Dianne Watts, the senior population is expected to grow by 179% over the next 10–15 years. And so the city has been busy making plans for that reality; plans that have already earned them two awards for being an age-friendly community.
An age-friendly community supports older people to live active, socially engaged and independent lives. The government of British Columbia actively encourages cities to become age-friendly and lists eight key features of such communities.

1. **Outdoor Spaces & Buildings**
   Does the natural and built environment help older persons get around easily and safely in the community and encourage active community participation?

2. **Transportation**
   Can older persons travel wherever they want to go in the community, conveniently and safely?

3. **Housing**
   Do older persons have housing that is safe and affordable and which allows them to stay independent as their needs change?

4. **Social Participation**
   Do seniors have opportunities for developing and maintaining meaningful social networks in their neighbourhoods? Are the needs and preferences of seniors considered in planning by a diverse range of agencies and institutions?

5. **Respect & Social Inclusion**
   Are public services, media, commercial services, faith communities and civil society respectful of the diversity of needs among seniors and willing to accommodate seniors in all aspects of society?

6. **Civic Participation & Employment**
   Do older persons have opportunities to participate in community decision making? Do older persons have opportunities to contribute their experience and skills to the community in paid or unpaid work?

7. **Communication & Information**
   Are seniors aware of programs and services available within their community? Is information readily available, appropriately designed and delivered to meet the needs of seniors?

8. **Community Support & Health Services**
   Do older persons have access to social and health services they need to stay healthy and independent?
An age-friendly community supports older people to live active, socially engaged and independent lives.

Mayor Watts says Surrey is already ahead of the game on all fronts. “While I appreciate the province laying it all out and looking at those pieces, we have seniors in our community so there are some things that we’ve been doing for a little while now.”

Surrey’s planned approach is good news for the immigrant and refugee seniors who live there. Understanding that these seniors often have needs beyond those of the mainstream population, the City has made it a priority to make that part of its strategy.

“We’ve had 14 Focus on Seniors Forums in multiple languages,” explains Mayor Watts. Four of those were presented entirely in Punjabi and one in Korean. One goal of the forums is to connect seniors with community resources. However, other topics of discussion include informing them about “fraud, isolation, seniors’ abuse, what legal resources are available, safety issues, transportation and housing.”

Community outreach is a big part of ensuring newcomer seniors feel at home in Surrey. “One of the things that we’ve done in terms of our community outreach is our libraries. We have books in 17 different languages.” This service is popular with the seniors as it allows them to continue reading in their mother tongue.

On staff is a Multicultural Librarian who connects with various community groups, including seniors groups, to let people know about library services and to get ideas from them on how the city could improve services. In addition, the library offers basic computer training in languages other than English, primarily for seniors. Currently seniors can access services in Somali, Vietnamese and Spanish through a partnership between the city and OPTIONS Community Services Society, a local non-profit agency.

... continued next page
The City regularly partners with other local immigrant and settlement agencies. For example, with DIVERSEcity Community Resources Society, the city offers the following programs:

- **South Asian Seniors Program** provides information, educational workshops, and culturally appropriate, relevant and innovative programs at senior centres to assist newcomer seniors in becoming self-sufficient and active.

- **New Immigrant – Seniors Support Services** provides outreach and support services to immigrant/newcomer seniors to enhance their independence and speed up their integration into Canada.

- **Community Action for Seniors Independence** facilitates affordable access to non-medical home support to allow seniors to age in place. Support includes shopping, as well as small home repairs and maintenance.

And, while not specifically serving immigrants and refugees, there’s also a Seniors’ Advisory and Accessibility Committee which is linked directly to city council, and a new Seniors’ Accessibility Strategy to address the lack of transportation options. Transportation is a significant issue in Surrey. Those who need public transportation the most are the seniors, and city council wants to ensure that it is advocating on their behalf as well when it comes to this issue.

Having won two age-friendly awards, and with a recent grant from the province’s Age-friendly BC program, is a third award on the horizon for Surrey? “We just continue to do what we do, although it’s nice being recognized for the work we’re doing,” admits the Mayor. “Even though it’s a provincial mandate, there are people who live in our community and so we want to make sure that they have every opportunity to really engage in the community, and ensure that there are services there.”
Twenty years ago, the results of a City of Vancouver’s Seniors Advisory Committee showed that seniors in the city’s diverse cultural communities were unfamiliar with even our most visible community social and health resources. Another small survey found that Chinese seniors who had lived in north-east Vancouver for ten years didn’t know there was a community centre they could use because they couldn’t read the sign “Hastings Community Centre.”

Immigrant and refugee seniors still face barriers to contributing their talents and in accessing community and health services, but much has improved since then. In 1992 one group held a community forum to discuss these issues. They believed that seniors from all cultures can learn from each other and work together to inform community and government services about seniors’ concerns and priorities. Later the group became the Vancouver Cross Cultural Seniors Network Society (VCCSN).

VCCSN stays true to its vision, developing cross-cultural links and advocating for cultural competency in all our services and systems. Their initiatives include the forum “Building and Maintaining a Caring Community” where seniors from all backgrounds shared issues and ideas; participating in both Seniors Summits; and contributing to the 2006 provincial report “Aging Well in British Columbia.”

VCCSN meets monthly and welcomes seniors from different communities; staff and volunteers from neighbourhood houses, cultural groups and seniors’ organizations; researchers; and members of various provincial seniors’ groups. Members take information from each meeting back to their own groups, so topics are likely to be translated and appear in a Vietnamese newsletter, or reported in Cantonese and Mandarin to seniors at Killarney community centre.

In March, VCCSN helped sponsor a community forum to respond to the BC Ombudsman’s second report on Seniors Care in BC. Members also met with the BC Ombudsman and her staff to contribute their ideas to her report.

Vancouver Cross Cultural Seniors Network Society welcomes new members to help link seniors in Vancouver and the lower mainland, and to strengthen seniors’ voices and participation in issues that affect them. Contact: Clemencia Gomez, 604.732.0812 or cgomez@southgranvilleseniors.ca.

Anne Kloppenborg is a retired Social Planner with the City of Vancouver.
South Vancouver Neighbourhood House, Seniors Outreach Program

The Seniors Outreach Program has been at South Vancouver for the past 35 years.

Last year the program trained prospective volunteers in an effort to reach out to newcomer seniors in the area who do not access services and support.

Ability to speak English and a second language were prerequisites for the volunteers. Seniors Peer Counselling BC delivered the training, encouraging volunteers to participate in the sessions, so they could learn the tools to become ambassadors in their community.

The Volunteer Coordinator has been important in helping the volunteers learn by showing them how to communicate and interact with seniors. Together they do outreach to social service agencies, faith organizations, BC housing tenants, medical offices and public libraries providing key information about resources for transportation, housing and health care.

The Outreach Ambassadors are very enthusiastic about this opportunity and they want to continue volunteering. They are an inspiration to everyone at SNVH. SNVH is committed to continue improving its outreach program in order to offer the best service to isolated seniors, especially new immigrants and refugees.

Contact: Joan Wright, Seniors Hub Coordinator, 604-324-6212.

North Shore Multicultural Society, Iranian Seniors English Class

The Iranian Seniors English Class had been studying the public transit system and was keen to improve their language skills for getting through the airport. So in March 2011 the group of Farsi speaking seniors took their English lessons on the road, or, more precisely, on public transit. They walked from John Braithwaite Centre in North Vancouver to the Lonsdale Quay Seabus Terminal. After validating their Faresaver tickets, they took the Seabus to Waterfront Station, transferred to the Canada Line and headed for Vancouver International Airport.

For many, this was their first time on the Canada Line and they were impressed with the convenience, speed and value, compared to driving or taking a taxi. With escalators and elevators at each transfer everyone felt able to fully experience public transit. With the station announcements on the Canada Line students were able to practice their listening skills.

On arriving at the airport, the students were excited to practice their new words and phrases. International arrivals and departures, the domestic terminal, security areas, check-in counters, baggage carousels and flight information monitors all became talking points.

Immigrant seniors face many challenges as they settle in this new country they call home. By taking their English studies outside of the classroom, these studious and enthusiastic seniors brought their lessons to life. Who knows? Maybe the next time they are heading out to Vancouver International Airport, members of the Iranian Seniors English class will have the confidence and knowledge to take public transit.

Contact: Jinny Rodrigo at jinnyr@nsms.ca or 604-988-2931, ext. 377
MOSAIC, MOSAIC Seniors Club
MOSAIC Seniors Club supports the healthy aging and meaningful community participation of immigrant and refugee seniors aged 55 and above by offering free programs and services that address their integration and wellbeing in a holistic manner. Over 700 of immigrant and refugee seniors have joined MOSAIC Seniors Club in the past 3½ years in the following activities:

- English programs: Language is a significant barrier to community participation. The Club provides English classes, conversation groups and chatting circles.
- Social & recreational activities: Group activities such as arts & crafts, computer classes, yoga, sing-along and field trips break social isolation and increase general wellbeing. There are also workshops on health and current topics responsive to the seniors’ needs.
- Settlement Counselling: Seniors Settlement Workers specialize in issues relating to immigrant and refugee seniors. They provide one-on-one support tailored to the needs of each individual client.

MOSAIC Seniors Club is offered in Burnaby and Vancouver and is funded by United Way of the Lower Mainland and the federal and provincial governments. It has a strong community building component by engaging over 50 volunteers who lend a vital human aspect to the program. By offering spending time with seniors, the volunteers can show the seniors that they are not alone, and that there is a supportive community for them.

Kudos
MOSAIC
On behalf of the immigrant and refugee seniors who participate in the MOSAIC Seniors Club, MOSAIC would like to say a big “thank you!” to the 50+ volunteers who generously share their skills, enthusiasm and warm hearts. MOSAIC Seniors Club offers free programs and services designed to address the unique needs of immigrant and refugee seniors aged 55 and above. Participants enjoy EAL (English as an Additional Language) classes, English conversation groups, chatting circles, computer classes, arts & crafts, workshops and the ever popular community field trips. In all these activities, volunteers offer their support and expertise. They are computer tutors, English conversation buddies, interpreters, facilitators and friends who share laughter with the seniors. MOSAIC greatly appreciates those exceptional volunteers for their dedication, enthusiasm, kindness and outstanding generosity.

SIETAR BC
Congratulations to SIETAR BC for their recent win at the 17th Annual Cultural DIVERSeCity Awards! The awards recognize the commitment of businesses and organizations to successfully implementing culturally diverse initiatives into their workplaces.

SIETAR BC was recognized in the not-for-profit category for its commitment to promoting cooperative interactions and effective communication among peoples of diverse cultures, races and ethnic groups for the past 20 years.

With 51% of Vancouver’s total population coming from a visible minority background, the need for intercultural education, training and research is more relevant than ever.
Grandparenting — a key role for immigrant seniors

Most of us believe that we will relax and enjoy life when we become seniors. Yet, that is not necessarily true for many South Asian seniors who are “grandparenting”?

“Grandparenting” is a key role for many grandparents of today and is fairly common in the South Asian community. South Asian grandparents enjoy many privileges. They often live within multigenerational families so they have family members for social interaction and support. They are respected and revered in many homes, and in some cases, Canada provides a life they never imagined was possible. On the other hand, many grandparents have a lot of responsibilities in their households, most of which are outside their ability. Research shows that parents raising young children today have a time, service and resource squeeze (Paul Kershaw at HELP-UBC) that does not fully allow them to meet their parenting responsibilities. Parents experience many stressors — 1) BC does not have affordable and universally accessible child care, 2) many newcomers are working at survival jobs to make ends meet as they settle and integrate in a new society, and 3) the price of housing and cost of living means that most households need more than one income earner, which places more women in the workforce today than ever before. So what often happens in South Asian homes is that grandparents take on the role of “grandparenting” their grandchildren for most days of the week. In addition, these grandparents often lack basic English skills, knowledge of child development, and knowledge about and access to community resources. As a result many of them stay home with their grandchildren or visit neighbors or parks, where they feel comfortable enough to socialize with other South Asians. This can be really hard on these grandparents, who have limited physical abilities due to their age, possibly depression or other mental health issues due to migration/settlement and isolation, and limited ability to fully meet the needs of the young children that they are raising in a new country where they are foreigners.

We’ve all heard “it takes a community to raise a child.” While it is important to understand that South Asians value a multi-generational child-rearing approach, we must keep in mind that in traditional terms and times, grandparents would have done the “grandparenting” in their own country, family home and community, using local knowledge, skills, language and supports.

Research shows that while early childhood development is critical and paves a lifelong path for a child’s successful development, we must balance this path with the needs of all household members, including seniors. Otherwise we risk supporting one generation at the expense of another.

Families seeking information, resources and supports on child development, parenting and grandparenting, can call their local public health unit, family place, family doctor, community recreation centre or community agency. It does take a community to raise a child — let’s all do our part and do it together!
A number of key limitations emerge when using population health data from Statistics Canada to examine the health of immigrant and refugee seniors. First, although surveys like the National Population Health Survey (NPHS) and the Canadian Community Health Survey (CCHS) provide information on the health status and health care needs of immigrant older adults, they do not collect information on immigrant status or why immigrants come to Canada. Therefore it is not possible to examine important variations in health status among naturalized citizens, landed immigrants, refugees, and non-permanent men and women.

Second, NPHS and CCHS respondents who cannot understand English or French are interviewed in their first language. However, new immigrants may still face language and cultural barriers that prevent them from consulting health-care professionals, resulting in an under-diagnosis of health problems. Cultural factors like sticking to traditional values and beliefs, together with different basic concepts of health and illness may also influence their willingness to report health problems. Subjective measures of health, like self-rated health, may be affected by the different “thresholds” individuals or groups use to assess their health status. Therefore, it is reasonable to assume that the meaning, interpretation, and reporting of self-rated health may change across age groups, cultures, and ethnicities.

Third, we need longitudinal data to verify a true convergence in health status between immigrants and Canadian-born persons over time. With the available cross-sectional data from the NPHS and CCHS we cannot rule out the possibility that differences in men’s and women’s health among immigrant groups are partly due to their country of birth. Longer-term immigrants are more likely to be from European regions than recent immigrants, and both regions vary in terms of general population health – today’s immigrants may be healthier than those who immigrated earlier – and in the type and quality of health care systems. Health requirements for entry into Canada (as well as the US, UK and Australia) have also become more stringent over time. Since we cannot get standardized health status and utilization data pre-immigration from all source countries, it calls into question the validity of findings on the Healthy Immigrant Effect if we use longitudinal data that is collected post-immigration.

Finally, NPHS and CCHS data have two additional limits. First, age is defined in five-year groups (e.g. 45-49 years) rather than respondents’ actual age. This means that if there are variations between immigrants and non-immigrants, some may be attributed to small differences in the average age of respondents within each of their age cohort groups. Second, these data do not allow us to consider key variables such as country of birth as both a control and independent variable when examining the health of immigrant older adults.

Dr. Karen Kobayashi is Chair of the CIHR’s Social Dimensions of Aging Committee and is Co-leader of the Ethnicity and Aging theme team of the National Initiative for Care of the Elderly (NICE).

What’s wrong with our statistics on newcomer seniors?

Dr. Kobayashi

Mainland China; 23%

Philippines; 18%

US; 7%

India; 22%

Iran; 6%

Other; 34%

Where did BC immigrant seniors come from? (2002-2006)

Citizen and Immigration Canada
In 1996 Ramesh Kalia came to Canada with her husband and younger daughter. Initially they settled in Port Coquitlam but were unable to find decent jobs based on their previous work experience. Like many immigrants, the Kalas experienced many challenges and hardships during their integration journey.

A life-time member of the Red Cross in her home country of India, Ramesh was always passionate about serving and caring for those in her community. Retired, and living close to the South Vancouver Neighborhood House, she became involved in community services by attending a weekly South Asian mutual support group. Soon Ramesh was invited to volunteer as a program assistant providing social and peer support to fellow South Asians. Each day Ramesh learns something new. Volunteering in the community widens her horizons and is essential for her personal growth. She takes computer classes and shares her new knowledge of local resources in groups, meetings and workshops. She feels empowered to reach out to other older adults and assists them in rebuilding social networks.

Ramesh is happy to belong to her neighborhood, “[At first] everybody called me Mrs. Kalia. I felt I was a stranger to them. Now they call me Ramesh. And I am happy that I can call people’s names too.”

She says that her volunteer works is a tribute to her late husband who looked out for his family and immediate community. “I am so blessed to be able to meet with all these wonderful people” says Ramesh. “They teach me what life is really all about.”

Ramesh loves physical activity and is an active member of the walking club. She also accompanies older adults for walks, and enjoys the social interaction and chit chat. Ramesh also cooks for some of her peers and gets kudos for her authentic home cooking. “Here’s our big chef,” says one. “It smells nice! You always make us hungry!”

“I am thankful to God for giving me this opportunity to give and care for others. I always love being able to do whatever I can in the community,” says Ramesh. “I want to spend the rest of my life giving back to the community.”

Ramesh is a wonderful example of the mutual benefits and health impact of seniors having peer support within their social networks. And she makes impossible things happen in other people’s lives.
It frustrates me to see Indo-Canadian seniors, mostly of rural background, playing cards for hours and hours at a stretch, where is the pragmatic, far-sighted and innovative leadership, in the Indian community, which can suggest some health related activities for these seniors? Most of the seniors, sitting in airtight boxes in some centres enjoy only discussion, mostly irrelevant and related only to events in Punjab in India. There is hardly any dialogue regarding healthy diet, exercise or emotional/social support for their fellow seniors who suffer from isolation.

In 1999, I applied for and received a grant from Health Canada to study the health problems of Indo-Canadian seniors under the project entitled “Wellness Model for Indo-Canadian Seniors.” The findings of the study were quite revealing. I discovered that the difficulties that the seniors face in adapting result from a lack of economic resources, language problems, racism in society, inadequate health services and lack of recreational facilities.

Ethnic seniors are often marginalized both within their own ethnic group as well as by “mainstream” cultures. Some of the Indo-Canadian seniors are often relegated to second-class status by the very families that encouraged them to immigrate to Canada.

There is a serious problem of emotional, physical as well financial abuse experienced by some. Thus, a lot of help, emotional as well as financial, is needed, to relieve the pain and the drudgery of isolation of such individuals.

With a grant from Industry Canada, the Surrey/Delta Indo-Canadian Seniors’ Society was able to create a CAP (Community Access Program) Site. In 2002, Hon. Allan Rock, the Federal Industry Minister opened the CAP site for Indo-Canadian Seniors. Since then, the federal government is providing funding to bridge the gap between the people who have access to information technology and people who don’t.

In my opinion, our biggest achievement as a result of the CAP Site, is that we are successful in changing seniors’ attitude towards technology, and in making them aware of how it can make a difference in their lives. They can read ethnic news papers; send and receive e-mail message from their friends and relatives; and apply for their PR cards through the internet. During the last 11 years, several seniors, both men and women, have used this facility to get information about various issues, especially healthy aging. We hope that the federal government keeps funding this project for the benefit of seniors.

“There is tremendous happiness in making others happy, despite our own situations.”

Dr. Bikkar Singh Lalli is retired professor of Mathematics, University of British Columbia. He is a respected elder in the South Asian community and, as a strong advocate for education and health, serves on many boards and committees.
ASSOCIATION OF NEIGHBOURHOOD HOUSES BC

What is a Neighbourhood House?
A warm and friendly place where people of all ages, nationalities, orientations and abilities come together to attend, participate, belong, lead and learn, in a welcoming, supportive environment.

ALEXANDRA NEIGHBOURHOOD HOUSE
www.alexhouse.net  Tel: (604) 539-0015
Programs and Service Highlights:
Kensington Prairie Childcare Centre, Vine Child, Youth and Family Centre, Alexandra Family Place, School-Age and Parenting Programs, Social and Independent Programs for Seniors and Supported Adults, Community Events.

CEDAR COTTAGE NEIGHBOURHOOD HOUSE
www.cedarcottage.org  Tel: (604) 874-4231
Programs and Service Highlights:
Adult Day Program, Out of School Care, Early Childhood Development Program, Aboriginal Program, Intergenerational Program, Cedar Cottage Carnival.

CENTRAL SERVICES
www.anhbc.org  Tel: (604) 875-911
Programs and Service Highlights:
Financial, Human Resources and Development Policies, NH Movement and ANHBC Branding, Strategic Planning, NH Toolkits and Innovative NH Systems, Administration Support and Fundraising.

FROG HOLLOW NEIGHBOURHOOD HOUSE
www.froghollow.bc.ca  Tel: (604) 251-1225
Programs and Service Highlights:
Reggio Emilia-Inspired Child Care Programs, Building a Safer Environment (BASE) Youth Program, Families-Bringing Out-Family Support Program, Youth Spot Employment Centre, Pumpkin Patch in the City.

GORDON NEIGHBOURHOOD HOUSE
www.gordonhouse.org  Tel: (604) 683-2354
Programs and Service Highlights:
Summer Camp, Baby Drop-In, Weekend Family Place, Single Mom's Support Group, Creative Playtime.

KITSILANO NEIGHBOURHOOD HOUSE
www.kitsilano.bc.ca  Tel: (604) 736-3588
Programs and Service Highlights:
Seniors Drop-In, Childcare Kits/Dunbar, Parents/Caregivers & Tots Drop-In, Community Potlucks, Youth Volunteer Skills Program, Neighbourhood House Re-Development.

MOUNT PLEASANT NEIGHBOURHOOD HOUSE
www.mpnh.org  Tel: (604) 879-8208
Programs and Service Highlights:
MP Preschool and Daycare, Citizens in Transition Youth Community Development, Building Welcoming and Inclusive Neighbourhoods, Seniors Wellness and Immigrant Seniors Programs, Cultural Buddy Program.

SASAMAT OUTDOOR CENTRE
www.sasamatorch.com  Tel: (604) 939-2268
Programs and Service Highlights:
Summer Day Camp, Wilderness Canoe Trips, Summer Family Camp Weekends, Leadership Training, Women's Weekend.

SOUTH VANCOUVER NEIGHBOURHOOD HOUSE
www.southvan.org  Tel: (604) 324-6212
Programs and Service Highlights:

The South Okanagan Immigrant and Community Services Welcomes you!!

Services Offered
English Language Services for Adults
Settlement and Integration Services
Community Connections Services
Early Childhood, Youth and Senior Services

Employment Services
Labour Market Mentorship
Skills Connect for Immigrants
Learning Centre

Award Winning Programs & Staff
Services available in French

This project is made possible through funding from the Government of Canada and the Province of British Columbia.

1 250 492 6299
www.soics.ca
From 2005-2009, the top three source countries of new senior arrivals to BC were Mainland China, India and the Philippines. This accounts for what percentage of total new immigrant seniors over the same time period? c) 53%

Between 2007 and 2027, the number of seniors in the Lower Mainland is expected to increase by what percentage? d) 118%

Immigrant seniors to BC have a bachelor’s degree or above when compared with their Canadian-born counterparts. True

According to a recent United Way of the Lower Mainland study, which of the following senior services are absent in most communities? d) All of the above

Over the course of the two-day Summit, the youth put forward many ideas and recommendations for consideration. Much of this was relevant not only to the work of my Office, but also to many other government organizations. Reflecting the voices of these youth, my office has committed to working on the following action items, in partnership with the Vancouver Foundation:

- Working with the Youth Advisory Team to continue the discussion around ideas coming from the Summit and to take action to help improve the lives of immigrant and refugee youth in BC.
- Supporting youths’ continued working relationship with the Ministry of Education to support improvements and enhancements to English Language Learning and social inclusion programs.
- Working with youth to encourage federal policy and decision-makers to consider the impact on refugee and immigrant youth when considering policies and practices specific to immigration issues.
- Holding several regional meetings across BC with immigrant youth to hear their unique concerns and the recommendations they may put forward.

As adults, it is our responsibility to provide young people with the courage, support and space they need to speak out freely. Youth at the 2011 Summit gave us a rare opportunity to listen to what they were saying. It is an honour to join with them in building a better British Columbia.
PROVINCIAL
Association of BC TEAL (Teachers of English as an Additional Language)
BC Human Rights Coalition (BCHRC)
BC Teachers Federation – Social Justice Program (BCTF - SJP)
Canadian Cancer Society – BC & Yukon Division
Canadian Mental Health Association (CMHA) - BC Division
Canadian Red Cross Lower Mainland Region – Abuse Prevention Services
ELSA Net
Legal Services Society of BC (LSS)
SCOUTS Canada - Provincial
Social Planning & Research Council of BC (SPARC)
Society for Intercultural Education, Training & Research (SIETAR)
Tenant’s Resource & Advisory Council of BC (TRAC)
West Coast Legal Education and Action Fund
Westcoast Child Care Resource Centre

NORTH
Immigrant & Multicultural Services Society (IMSS)
Kitimat Multicultural Society
Multicultural Heritage Society (MHS) - Prince George
Skeena Diversity Society
Terrace & District Multicultural Association (TDMA)

VANCOUVER ISLAND
Central Vancouver Island Multicultural Society (CVIMS)
Comox Valley Community Adult Literacy and Learning Society (CALLS)
Cowichan Intercultural Society (CIS)
Inter-Cultural Association of Greater Victoria (ICA)
Multicultural & Immigrant Services Association of North Vancouver Island (MISA)
South Island Dispute Resolution Centre
Victoria Immigrant and Refugee Centre Society (VIRCS)

FRASER VALLEY
Abbotsford Community Services (ACS)
Chilliwack Community Services
DIVERSEcity Community Resources Society (DCRS)
Langley Community Services Society
Mission Community Services Society (MCSS)
Progressive Inter-Cultural Community Services Society (PICS)

INTERIOR
Community Connections Society of Southeast BC
Kamloops Cariboo Regional Immigrant Society (KIS)
Kamloops Multicultural Society
Kelowna Community Resources Society
Nelson Community Services Centre
Shuswap Settlement Services Society
South Okanagan Immigrant and Community Services (SOICS)
Vernon & District Immigrant Services Society (VDISS)

LOWER MAINLAND
Association of Neighbourhood Houses British Columbia (ANHBC)
Burnaby Family Life Institute
CHIMO Crisis Services - Richmond
Collingwood Neighbourhood House (CNH)
Community Legal Assistance Society (CLAS)
Family Education and Support Centre
Family Services of Greater Vancouver (FSGV)
Family Services of the North Shore (FSNS)
Immigrant Services Society of BC (ISS)
Inland Refugee Society of BC (IRS)
Jewish Family Service Agency (JFSA)
Kiwassa Neighbourhood Services Association
Little Mountain Neighbourhood House Society (LMNHS)
MOSAIC
Multicultural Family Centre (REACH)
Multicultural Helping House Society (MHHS)
Multifaith Action Society (MAS)
North Shore Multicultural Society (NSMS)
OPTIONS: Surrey Community Services Society
Pacific Community Resources Society
Pacific Immigrant Resources Society (PIRS)
Richmond Multicultural Concerns Society (RMCS)
Settlement Orientation Services (SOS)
South Vancouver Neighbourhood House SUCCESS (United Chinese Community Enrichment Services)
Supporting Women’s Alternative Network (SWAN)
Vancouver & Lower Mainland
Multicultural Family Support Services (VLMMFSS)
Vancouver Association for Survivors of Torture (VAST)
Vancouver Multicultural Society (VMS)
Westcoast Family Centres Society
Women Against Violence Against Women/Rape Crisis Centre
YMCA – Connections
YMCA of Great Vancouver
YWCA Vancouver International

MEMBERS
May 2012