

**A NEEDS ASSESSMENT STUDY  
HEALTH PROJECT FOR SOUTH ASIAN SENIORS**

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**MARCH 1997**

**The financial support from Health Canada is gratefully acknowledged.**

## **ACKNOWLEDGEMENTS**

The author will be remiss if she did not acknowledge the generous support and guidance provided to her during the different phases of this needs assessment study including the assistance in writing and editing of the report by BALDEV MUTTA.

This needs assessment study also would not have been completed without the generous support from the following individuals, who dedicated their time, gave advice and from time to time participated in the activities of this project.

### **THANKS TO:**

Ram Jageesar  
 Hardeep Kaur  
 Kamaldeep Sangha  
 Romona Ganathan  
 Amie Parikh  
 Rupinder Singh  
 Dr. Pushpa Suri  
 Thilaka Xavier  
 Aruna Seroga  
 Pushpa Christie

### **THANKS TO THE ORGANIZATIONS:**

Region of Peel - Health  
 Davenport Perth Neighbourhood Centre  
 South Asian Senior Women's Association of Peel  
 Sunshine Senior Citizens Association - Brampton  
 AWIC Seniors Club - Don Mills  
 Indo-Canadian Seniors Club - Scarborough  
 Tamil Seniors - Toronto  
 Gujarati Seniors of Sanatan Temple

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### **EXECUTIVE SUMMARY**

This short five month project was designed to address the health needs of the South Asian seniors. The components of this project consisted of conducting a needs assessment of the health issues faced by seniors, developing awareness within the community regarding those health issues which were identified in the needs assessment, organizing nutritional classes based on adult experiential learning methods, developing culturally appropriate resources and building partnerships within the South Asian communities and its organizations.

We hope to share the findings of our needs assessment study with the South Asian communities. It is our intention to distribute this report as widely as possible so that the health needs of the seniors are addressed.

The majority of the seniors had expressed that:

- we should continue with this project. Five months is a very short time to make any significant impact and changes in the life of any community.
- their self-esteem is directly linked to financial security. They have no sources or very little sources of income. They wanted us to let the "funders" know that they are not asking for "handouts" but are asking for the development of "skill sharing" and "self-sustaining" projects.
- those projects be funded which enhance the community's consciousness on the issue of elder abuse.
- those projects be funded, which attempt to unify all South Asian seniors groups in order to build partnerships and use the existing resources better. Only by working together can we (seniors) address the issues of transportation, racism, financial insecurity, safety, language problem, active living, alternative medical treatment, inter-generational and inter-cultural gaps with in families, building a senior's home, and developing culturally appropriate resources.

We hope that this needs assessment study will become a catalyst in addressing the health needs of the South Asian seniors. As one South Asian senior said "together we can achieve and overcome almost anything". We believe we can.

## **INTRODUCTION:**

This five month project<sup>1</sup> is a joint venture of Coalition of Agencies Serving South Asians, Punjabi Community Health Centre, and South Asian Womens' Centre.

It's main purpose is to address the health needs of South Asian seniors. The objectives are:

- to undertake needs assessment which would determine the health needs of seniors;
- to raise awareness among South Asian seniors about critical health issues;
- to develop and produce resource materials such as, audio cassettes and pamphlets; and
- to diffuse information about the health issues by organizing workshops.

## **METHODOLOGY:**

Due to the short nature of this project (five months), the needs assessment was restricted to gathering quantitative and qualitative information from seniors by organizing focus groups. The quantitative data was collected through personal profile questionnaire (see appendix 2) which consisted of 8 questions and the qualitative data was gathered by asking participants 12 questions (see appendix 3). One focus group was organized for each of the following languages: Punjabi, Hindi, Urdu, Gujarati, and Tamil. One focus group consisted of "key informants" from the South Asian communities.

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<sup>1</sup> see appendix one

**FINDINGS:**

*The important findings that were identified by participating seniors are the following:*

- *would like more information on health concerns and illnesses?*
- *would like to develop and sustain “skill sharing” projects.*
- *information on how the Canadian “system” of government works and how they can obtain financial assistance.*
- *transportation a major problem.*
- *language a barrier to integration.*
- *concerned about racism and want to do something about it.*
- *interested in active living.*
- *would benefit from regular visits to the doctor's office.*
- *alternative methods of treatment are not used due to the financial reasons.*
- *would like to use alternative methods of treatment.*
- *not aware where help is available and how to seek help.*
- *interested in residing in a senior's home but want these homes to be exclusively for South Asians.*
- *identified (seniors) elder abuse as an issue to be addressed.*
- *identified culture conflict as a problem between themselves and their children and grandchildren.*

- *interested in information on all topics but in their mother tongue.*
- *have (at least half of the seniors) no sources of income.*
- *have no more than 15,000 dollars income per year.*
- *identified the need for low fat cook books in South Asian languages.*
- *interested in unifying all South Asian seniors groups.*

**RECOMMENDATIONS:**

- 1. Organize seminars to diffuse information on health related topics and concerns on a regular basis.*
- 2. Provide information to seniors regarding financial assistance from various government departments in their mother tongue.*
- 3. Alleviate transportation problems through car pools or by renting a van or bus.*
- 4. Organize ESL classes for seniors.*
- 5. Advocate on behalf of seniors about racial discrimination and generate awareness of this issue amongst all South Asian communities.*
- 6. Organize workshops on Active Living and other health concerns.*
- 7. Organize “skill sharing” long term projects.*
- 8. Organize seminars about the benefits of regular check ups, hospital visits and other preventative aspects of health care.*
- 9. Organize seminars on alternative methods of treatment.*
- 10. Develop resources about where help is available and how to seek help in their mother tongue.*
- 11. Build a senior’s home exclusively for South Asians.*
- 12. Educate the South Asian communities about (seniors) elder abuse.*
- 13. Educate the South Asian community about the family problems associated with culture conflict.*

*14. Develop audio and video cassettes, pamphlets and other means to diffuse information to seniors.*

*15. Organize income generating projects for seniors.*

*16. Unify all South Asian senior's groups.*

*17. Develop low fat cook books in South Asian languages.*

## **REPORTS ON FOCUS GROUPS**

### **I. Sunshine Senior Citizens Association**

This report summarizes the findings and recommendations from the Punjabi speaking seniors in the City of Brampton.

#### **Recommendations from focus group discussion:**

- 1. Seniors need exercise classes.*
- 2. Need understanding of family dynamics and need skills to adjust to the new environment or culture.*
- 3. Need information on the harms associated with excessive alcohol use.*
- 4. Involvement of seniors in programs that would enhance their social status.*
- 5. Set up ESL classes for seniors.*
- 6. More education on healthy diet and healthy snacks.*
- 7. Organize workshops to understand and relieve stress.*
- 8. Organize workshops on identifying healthy weight and blood pressure.*
- 9. Create awareness about Homeopathy as an alternative treatment method.*
- 10. Organize workshops to talk about home remedies and the use of western medicine.*
- 11. Organize workshops to discuss the various options available for seniors in times of distress.*
- 12. Organize workshops to provide information on settlement services, health care, and other issues for seniors.*
- 13. Organize workshops to deal with building positive relations with grandchildren.*
- 14. Build a Seniors home.*
- 15. Diffuse information through audio cassettes.*
- 16. Eye glasses, dental needs, and hearing aids are needed.*

## Findings:

### 1. What are your immediate health concerns? (Medical, Diet, Physical, and Emotional)

The immediate concerns were identified as:

- interactions within family are usually not positive - too much gap between parents and children and between grandparents and grandchildren
- loneliness and isolation - language is the main barrier followed by culture
- lack of finances leading to low self-esteem
- lack of exercise
- communication breakdown within families
- excessive use of alcohol
- arthritis, diabetes, and high blood pressure
- heart disease
- asthma (breathing)
- eye glasses, dental needs, and hearing aids

The discussion centered around communication problems within families and the lack of self-esteem seniors have because of lack of control over finances. They have lost both money and status. Old age is no longer associated with prestige. Their identity is lost. They feel helpless and powerless to change their situation. Alcohol use is the direct result of stress associated with their current lifestyle.

Some seniors also suggested that they need exercise but do not feel comfortable doing it at home or at places where (Whites) Canadians are present. The seniors also need eye glasses, and hearing aids. Their offspring cannot afford to buy these for them. The seniors also need dental care. They felt that it is very expensive to have teeth "fixed".

## Recommendations:

1. *seniors need exercise classes (exclusively for South Asians)*
2. *need understanding of family dynamics and need skills to adjust to change*

3. *need information on the harm associated with excessive alcohol use*
  4. *involvement of seniors in programs that would enhance their social status.*
- 2. How do you adjust to the different environment of Canadian society?**

Winters are hard for the seniors. They have to walk carefully. They feel confined and restrained by the Canadian weather.

Another difficulty adjusting to the Canadian environment is the lack of proficiency in English language. Most of the time, the seniors are depended on their children for travel. Even going to Gurudwaras (place of worship) is dependent on whether their offspring can take them or not.

They miss their friends, relatives and substitutes are difficult to find. They come to this community centre and socialize and meet with friends.

They wish, they could learn a bit more English language.

**Recommendations:**

1. *Set up ESL classes for seniors.*

- 3. What steps do you take to prevent illness? (mental and physical)**
- They follow the saying "prevention is better than cure". They tend to watch what they eat. Sometimes old habits die hard but still they try to eat healthy. For example, they have been advised by their children not to eat sweets and fried foods but most were of the opinion that most often than not they would end up eating these "forbidden" foods. They all agreed that they worry too much. Stress was also related to worrying. They did not know how to deal with stress.

**Recommendations:**

1. *More education on healthy diet and healthy snacks.*
2. *Organize workshops to understand and relieve stress.*

- 4. Do you visit your doctor regularly or only when the illness occurs?**

30% of the participants were visiting their doctors for annual checkup. The majority of the participants had doctors who understood their language. Most knew about blood pressure and how much they weighed. Many were overweight and despite the doctors suggestions could not lower their weight.

**Recommendations:**

***1. Organize workshops on identifying healthy weight and blood pressure.***

**4a) What barriers do you face while visiting your doctor?  
Language, Transportation  
Cultural/Religious, Other**

The majority of seniors had to rely on their children to take them to visit their doctors. Most felt that transportation is the issue.

**4b) Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

Most were not comfortable using Homeopathic treatment. Some were of the opinion that these doctors don't know much about this method of treatment. Therefore, the seniors were reluctant to go to them. They often use home remedies. But, sometimes their children are not supportive of this type of intervention. They prefer western medicine but again the problem is that some seniors' families cannot afford to purchase the medicines. Some have drug plans but not all. Some only seek medicine when the illness becomes severe.

**Recommendations:**

- 1. Create awareness about Homeopathy as an alternative treatment method.***
- 2. Organize workshops to talk about home remedies and the use of western medicine.***

**6. Whom do you access for your emotional support?**

The seniors accessed their wives, children and friends for emotional support. The friend is classified as someone whom will not "gossip" and would not divulge personal information to others.

**Recommendations:**

*1. Organize a workshop to discuss the use of professionals in times of distress.*

**7. Are you aware of the resources available to seniors?**

The majority were not aware.

**Recommendations:**

*1. Organize workshops to provide information on settlement services, health care, and other issues for seniors.*

**8. Would you like more information about the resources that are available to South Asian seniors?**

see question 7.

**9. Would you consider living in a Seniors Home or do you prefer living with your family?**

The seniors were divided on this issue. While some wanted to stay with their families other preferred to move to stay in a seniors home. The decision would depend on the degree of strained relations with their children. The majority preferred to have a seniors home.

**Recommendations;**

*1. Build a seniors home.*

**10. What are the major concerns or issues that you encounter on a daily basis within your home environment? And in society in general?**

The majority were concerned about being depressed in the winter. They were also concerned with lack of positive relations with their grandchildren.

In this materialistic society, they felt that people have not enough faith in the almighty. The struggle is to acquire more "commodities" rather than spiritual satisfaction.

**Recommendations:**

1. *Organize workshops to deal with building positive relations with grandchildren.*

**11. Do you have any other concerns or questions that you would like us**

**to try to address in follow-up workshops? or is there something that we have not covered that you would like to address that is related to health issues?**

- welfare
- diet, diabetes, heart disease
- arthritis
- exercise in Indian atmosphere
- hearing aids
- dental hygiene
- eyesight and prescription glasses (some seniors have no money)

**Recommendations:**

1. *Organize workshops to provide information on welfare, pensions, disability pensions etc..*
2. *Organize workshops on health related topics.*
3. *Organize workshops on settlement issues.*
4. *Seek community support to provide prescription glasses to those seniors who cannot afford.*
5. *Seek community support to provide hearing aid to seniors who cannot afford it.*

**12. In what form do you like to get information?**

The majority of the participants wanted to get information through audio cassettes.

**Recommendation:**

1. *Diffuse information through audio cassettes*

**II. Focus Group Report of AWIC Seniors Club**

This report summarizes the findings and recommendations from the AWIC Seniors Club. The focus group was conducted at the community centre where this group meets every week.

There were eleven seniors (both men and women), who actively participated in the focus group. This focus group was conducted on January 30, 1997.

**Recommendations:**

1. *Organize workshops to address concerns around arthritis, diabetes, heart disease, cholesterol, blood pressure, digestion and constipation.*
2. *Organize workshops to understand stress, isolation and loneliness and insomnia.*
3. *Organize workshops on health promotion and illness prevention.*
4. *Set up ESL classes for seniors.*
5. *Inform them of various services and programs that might be offered by the government departments.*
6. *Organize workshops to address interpersonal communication problems.*
7. *Organize workshops on active living to enhance the quality of life for the entire South Asian community.*
8. *Sensitize health care professionals about South Asian culture.*
9. *Sensitize doctors about the needs of South Asian seniors in making a choice about seeing specialists and going for tests at medical laboratories.*
10. *Create awareness about Homeopathy and Ayurvedic as an alternative treatment method.*
11. *Organize workshops to enhance the skills of seniors to deal with physical, mental and social problems.*

- 12. Organize workshops to provide information on programs and services offered by various government departments.*
- 13. Build a seniors home for South Asian seniors.*
- 14. Build a seniors day care facility - exclusively for South Asian seniors.*
- 15. Organize workshops to deal with building positive relations with grandchildren.*
- 16. Help seniors set up cooperative stores.*
- 17. Inform seniors about homemakers.*
- 18. Diffuse information through pamphlets, video and audio cassettes.*

### **Summary Findings:**

#### **1. What are your immediate health concerns? (Medical, Diet, Physical, and Emotional)**

The immediate concerns were identified as:

- Physical
  - arthritis
  - diabetes
  - heart disease
  - cholesterol
  - blood pressure
  - digestion
  - constipation
- Mental
  - stress
  - isolation and loneliness
  - insomnia
- Social Issues
  - senior women have language difficulties - men can get by
  - communication with doctors, especially specialists
  - lack of awareness of medications (how they interact with food and other drugs)
  - lack of dental, vision and hearing care
  - winter brings its own set of challenges
  - lack of exercise

The discussion centered around three topics - 1. physical ailments, 2. mental health concerns, and 3. general social issues.

The seniors were aware of the physical ailments and wanted more information around the prevention of these illnesses.

They also wanted more knowledge regarding dealing with stress associated with settlement in Canada. Finally, they wanted to know what help is available to them for dental care, vision and hearing.

### **Recommendations:**

1. *Organize workshops to address concerns around arthritis, diabetes, heart disease, cholesterol, blood pressure, digestion and constipation.*
2. *Organize workshops to understand stress, isolation and loneliness and insomnia.*
3. *Organize workshops on health promotion and illness prevention.*
4. *Organize workshops on active living.*

## **2. How do you adjust to the different environment of Canadian society?**

- transportation system
- language
- lack of employment opportunities
- financial problems
- living arrangements and accommodations
- dependent on their children

Most of the seniors are confined to their homes in the winter time. Another difficulty adjusting to the Canadian environment is the lack of transportation available to seniors - they rely on their children or the public transit system.

English language is a problem and also the interpersonal communication is a problem. They feel they can no longer communicate as effectively on an emotional level as they could in India. This difference is very pronounced within the grand children.

They miss their friends, relatives and substitutes are difficult to find. They come to this group “religiously” to satisfy themselves and socialize and meet with friends.

**Recommendations:**

1. *Set up ESL classes for seniors.*
2. *Inform them of various services and programs that might be offered by the government departments.*
3. *Organize workshops to address interpersonal communication problems.*

**3. What steps do you take to prevent illness? (mental and physical)**

- exercise
- herbal remedies
- eat healthy diet (watch what we eat)
- keep ourselves busy
- relaxation and meditation
- meeting friends
- talk to friends
- going to religious places
- going to seniors clubs
- seek some gainful employment
- volunteer work

The seniors felt they can take certain precautions which are in their control, for example using relaxation and meditation techniques, keeping themselves busy with hobbies, and meeting and talking to other seniors and friends. But on some the issues they have no control. For example, eating healthy food - most seniors rely on the daughters-in-law to cook and what she prepares they have to eat. So the suggestion was that awareness workshops be conducted not just with seniors but with the entire populations.

**Recommendations:**

1. *Organize workshops on active living to enhance the quality of life for the entire South Asian community.*

**4. Do you visit your doctor regularly or only when the illness occurs?**

- they visit their doctors regularly
- can't see the doctor even in sickness - due to transportation, lack of time and other commitments
- waiting time for specialists
- cost of medication
- private insurance for drug plan is unaffordable

Most of the participants were visiting their doctors for annual checkup. The majority of the participants had doctors who understood their language. Many could not visit their doctors due to lack of time, transportation and cost of medicine.

**4a) What barriers do you face while visiting your doctor?**

**Language**

**Transportation**

**Cultural/Religious**

**Other**

- many doctors do not accept new patients
- language
- transportation
- cultural issues (dietary practices)
- choice of selection of specialist (most family doctors send them to a doctor with whom they have connections.)
- choice of selection of medical laboratories (Labs) for tests (most doctors send patients to the Labs with whom they are affiliated.)

The majority of seniors had to rely on their children to take them to visit their doctors. Most felt that transportation need be somehow addressed. Some felt that specialists are often from another culture and do not necessarily understand their language. Some doctors are not sensitive to religious and dietary practices. Some felt that some doctors were not sympathetic to the needs of the South Asian women. Some doctors refer patients to the specialist with which they have connections and seniors felt that they should have a choice in determining which specialist they wanted to go to.

**Recommendations:**

1. *Sensitize health care professionals about South Asian culture.*
2. *Sensitize doctors about the needs of South Asian seniors in making a choice about seeing specialists and going for tests at labs.*

**4b) Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

Because of the expensive nature of this treatment, \$50.00 per visits, they felt they are unable to use Homeopathy as a method of treatment. They would however use it if the costs were lowered. The seniors also felt that Ayurvedic medicine be practiced here as well. The western professionals need to recognize that alternative treatment approaches are also worth looking at. Some felt that for relaxation purposes Yoga exercises are the best.

**Recommendations:**

1. *Create awareness about Homeopathy and Ayurvedic as an alternative treatment method.*

**6. Whom do you access for your emotional support?**

The seniors accessed their spouses, relatives, children and friends for emotional support. They also accessed religious places. The seniors felt that they preferred to look inwards and seek solutions to their problems. They would also like to seek professional help. They valued peer counselling. They also meditated, watched educational programs on television, go to religious places and meet with other seniors.

**Recommendations:**

1. *Organize workshops to enhance the skills of seniors to deal with physical, mental and social problems.*

**7. Are you aware of the resources available to seniors?**

The majority were not aware. All they know is that many seniors clubs exist and through their clubs some assistance can be provided.

**Recommendations:**

1. *Organize workshops to provide information on settlement services, health care, and other issues for seniors.*
8. **Would you like more information about the resources that are available to South Asian seniors?**

They definitely want more information on programs and services that that various government departments have to offer.

**Recommendation:**

1. *Organize workshops to provide information on programs, services and resources offered by various government departments.*
9. **Would you consider living in a Seniors Home or do you prefer living with your family?**  
The seniors wanted the South Asian community to build a seniors home for them. This facility will provide a social setting for seniors to live and socialize amongst themselves.

**Recommendations:**

1. *Build a seniors home for South Asian seniors.*
2. *Build a seniors day care facility - exclusively for South Asian seniors.*
10. **What are the major concerns or issues that you encounter on a daily basis within your home environment? And in society in general?**

The majority were concerned about being depressed in the winter. They were also concerned with lack of positive relations with their grandchildren. They felt that they had to look after their children even in sickness. They have low self-esteem because they have no financial status.

**Recommendations:**

1. *Organize workshops to deal with building positive relationship with grandchildren.*

**11. Do you have any other concerns or questions that you would like us**

**to try to address in follow-up workshops? or is there something that we have not covered that you would like to address that is related to health issues?**

- welfare or social assistance
- set up cooperative stores
- homemakers needed

**Recommendations:**

1. *Organize workshops to provide information on social assistance and other government programs and services;*
2. *Help seniors set up cooperative stores; and*
3. *Inform seniors about homemakers.*

**12. In what form do you like to get information?**

The majority of the participants wanted to get information through pamphlets, video and audio cassettes.

**Recommendation:**

1. *Diffuse information through pamphlets, video and audio cassettes.*

### **III. Focus Group report of Indo-Canadian Seniors Club - Scarborough**

This report summarizes the findings and recommendations from the Hindi speaking seniors in the City of Scarborough. The focus group was conducted in the Hindu Mandir where the seniors meet every week after religious services.

There were twenty five seniors (both men and women), who actively participated in the focus group. This focus group was conducted on January 26, 1997.

#### **Recommendations:**

- 1. Develop programs that would address the loneliness and enhance the social status of seniors.*
- 2. Organize workshops to educate seniors about patient's right to information and government assistance to various drug and other benefits.*
- 3. Set up ESL classes for seniors.*
- 4. Organize workshops to understand and address:*
  - interpersonal communication problems.*
  - stress.*
  - intergenerational and intercultural conflicts.*
  - positive relations with grand-children.*
  - conflicts within families.*
  - settlement issues.*
  - regular check ups, healthy weight and blood pressure.*
  - death and dying with dignity.*

5. *Sensitize health care professionals about South Asian culture.*
6. *Create awareness about Homeopathy as an alternative treatment method.*
7. *Organize a workshop to discuss the use of professional help in times of distress.*
8. *Build a Seniors home.*
9. *Diffuse information through pamphlets, video and audio cassettes.*
10. *There is a desperate need for eye glasses, dental care, and hearing aids.*

### **Summary Findings:**

#### **1. What are your immediate health concerns? (Medical, Diet, Physical, and Emotional)**

The immediate concerns were identified as:

- doctors only prescribe medication after tests. Sometimes the patient is in pain but the doctors still wait for the test results. The waiting list for the specialists is very long and requires at least a two month delay before he/she can see the senior. By that time, sometimes the illness becomes worse or sometimes the illness becomes better. The doctors should prescribe some medication.
  - the doctors do not inform us of the ailment but prescribe us the medication.
  - certain tests are not forwarded by the specialists to the family physicians.
  - physiotherapy - although, we don't have to pay but we don't understand the language and the rationale behind physiotherapy.
  - we have dental problems, but dentists are very expensive.
  - we need vision care but glasses are expensive.
  - some of us are hard of hearing but cannot afford "hearing aids".
- weather restricts our mobility, especially winter. The seniors become more stressed in winter than in summer.
- we face two types of stresses
  - related to finances (they have no sources of income)

- related to winter (they feel very isolated)
- loneliness and isolation - language is the main barrier followed by culture
- transportation

The discussion centered around medical problems both physical and mental. They feel that they have inadequate knowledge about the health care system and their inability to go to health care professionals on their own. They have to rely on their children to drive them to see their doctors and other professionals. The medicine is also very costly. The seniors also need eye glasses, and hearing aids. Their offspring cannot afford to buy these for them. The seniors also need dental care and felt that it is very expensive to have preventative dental care.

**Recommendations:**

1. *involvement of seniors in programs that would address their loneliness and enhance their social status.*
2. *organize workshops to inform them about patient rights to information, government assistance to various drug and other benefits.*

**2. How do you adjust to the different environment of Canadian society?**

90% of the seniors are confined to their homes in the winter time. Another difficulty adjusting to the Canadian environment is the lack of transportation available to seniors - they rely on their children or public transit system.

English language is a problem and also the interpersonal communication is a problem. They feel they can no longer communicate as effectively on an emotional level as they could in India. This difference is very pronounced within the grandchildren.

They miss their friends, relatives and substitutes are difficult to find. They come to the Mandir to religiously satisfy themselves and socialize and meet with friends.

**Recommendations:**

1. *Set up ESL classes for seniors.*
  2. *Inform them of various services that might be offered by the government departments.*
  3. *Organize workshops to address interpersonal communication problems.*
3. **What steps do you take to prevent illness? (mental and physical)**  
 The seniors felt that they became sick due to stress. Stress was identified as being related to finances and adjusting to the different social setting in Canada.  
 The discussion also centered on children living in a different environment and acquiring values contrary to their values. The suggestion was that they should learn to compromise with their grandchildren and adjust with their children.

**Recommendations:**

1. *Organize workshops to understand and relieve stress.*
  2. *Organize workshops to understand the intergenerational and intercultural conflicts.*
  3. *Organize workshops to learn conflict mediation skills.*
4. **Do you visit your doctor regularly or only when the illness occurs?**  
 20% of the participants were visiting their doctors for annual checkup. The majority of the participants had doctors who understood their language. Most knew about blood pressure and body weight. Many were overweight and despite the doctors suggestions could not lower their weight.

**Recommendations:**

1. *Organize workshops on identifying healthy weight and blood pressure.*
2. *Organize workshops and inform seniors about the importance of regular checkups.*

4a) **What barriers do you face while visiting your doctor?**

Language  
 Transportation  
 Cultural/Religious

## Other

The majority of seniors had to rely on their children to take them to visit their doctors. Most felt that transportation need be somehow addressed. Some felt that specialists are often from another culture and do not necessarily understand their language. Some doctors are not sensitive to religious and dietary practices. Some felt that some doctors were not sympathetic to the needs of the South Asian women.

### **Recommendations:**

*1. Sensitize health care professionals about South Asian culture.*

**4b) Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

Because of the expensive nature of this treatment, \$50.00 per visit, they felt they are unable to use Homeopathy as a method of treatment. However, they would use it if the costs were lowered.

### **Recommendations:**

*1. Create awareness about Homeopathy as an alternative treatment method.*

**6. Whom do you access for your emotional support?**

The seniors accessed their spouses, children and friends for emotional support. The friend is classified as someone whom will not "gossip" and would not divulge personal information to others. They also meditated, watched educational programs on television, go to religious places and meet with other seniors.

### **Recommendations:**

*1. Organize a workshop to discuss the use of professionals in times of distress.*

**7. Are you aware of the resources available to seniors?**

The majority were not aware. All they know is that many seniors club exist and through those clubs some assistance can be provided.

### **Recommendations:**

*1. Organize workshops to provide information on settlement services, health care, and other issues for seniors.*

- 8. Would you like more information about the resources that are available to South Asian seniors?**

They definitely want more information on programs and services that various government departments have to offer.

**Recommendation:**

*1. Organize workshops to provide information on programs, services and resources offered by various government departments.*

- 9. Would you consider living in a Seniors Home or do you prefer living with your family?**

The seniors wanted their community to build a South Asian Seniors Home. This facility will provide a social setting for seniors to live and socialize amongst themselves.

**Recommendations;**

*1. Build a seniors home for South Asian seniors.*

- 10. What are the major concerns or issues that you encounter on a daily basis within your home environment? And in society in general?**

The majority were concerned about being depressed in the winter. They were also concerned with lack of positive relations with their grandchildren. They felt that they had to look after their children even in sickness. They have low self-esteem because they have no financial status.

**Recommendations:**

*1. Organize workshops to deal with building positive relations with grandchildren.*

**11. Do you have any other concerns or questions that you would like us to try to address in follow-up workshops? or is there something that we have not covered that you would like to address that is related to health issues?**

- heart disease
- arthritis
- blood pressure
- asthma, arthritis
- over weight
- funeral expense

**Recommendations:**

1. *Organize workshops on health related topics and funeral issues.*

**12. In what form do you like to get information?**

The majority of the participants wanted to get information through pamphlets, video and audio cassettes.

**Recommendation:**

1. *Diffuse information through pamphlets, video and audio cassettes.*

#### **IV. Report of the Focus Group SASWA-Peel**

This report summarizes the findings and recommendations from senior women in the City of Mississauga. The focus group was conducted at Malton Community Centre on January 27, 1997. Nine women were present at the focus group.

##### **Recommendations:**

##### ***1. Organize workshops on***

- *stress and mental health.*
- *heart disease.*
- *arthritis.*
- *senior abuse.*
- *healthy eating.*
- *active living.*
- *conflict resolution.*
- *child-rearing, baby-sitting concerns and to teach skills to build positive relations with children and grandchildren.*
- *the importance of health promotion and illness prevention.*
- *the importance of using professionals in times of distress.*
- *the importance of regular checkups.*
- *settlement issues, social assistance and other programs and services offered by the government.*

2. *Establish contact with professionals from the alternative medicine and meet with government bodies to arrange for OHIP to cover the expenses.*
3. *Build a South Asian senior's home.*
4. *Build a Funeral home.*
5. *Diffuse information through pamphlets, video and audio cassettes and through radio and television.*

### **Summary Findings:**

#### **1. What are your immediate health concerns? (Medical, Diet, Physical, and Emotional)**

The immediate concerns were identified as:

- mental tension => no one to talk to  
=> need social circle  
=> mental tension is also the root of most of the problems
- heart problems have increased. Many of their friends or relatives are affected in one way or another.
- arthritis - The perception was that this problem seems to effect senior women more in Canada than in India.
- no independence - can't go for a walk to get fresh air  
weather condition prohibit mobility
- finances are taken away by children (pensions and benefits). They felt strongly that children are abusing them. Some of them did not even have two dollars in their pocket although they are receiving six or seven hundred dollars from their pension plan.
- no communication pertaining to what is being organized in the community and neighbourhoods. Confined to home and feelings of being "left out".

- diet - fresh versus frozen food. In India they were used to eating fresh foods while in Canada, they have to eat food which is sometimes two or three days old. Even the fresh vegetables didn't taste as good as in India. The women compared the taste of "saag" and complained that it doesn't taste the same.
- lack of physical exercise. There isn't a facility for these senior women to participate in exercise. They were looking for "cultural appropriate" facility.

### **Recommendations:**

1. ***Organize workshops on***
  - *stress and mental health.*
  - *heart disease.*
  - *arthritis and senior abuse.*
  - *healthy eating.*
  - *active living.*
2. **How do you adjust to the different environment of Canadian society?**
  - The women felt that they have better healthcare in Canada than India. Back home, they had to pay for their visits to the doctor but here their visits are free. They felt good about it.
  - The Canadian home environment isn't conducive to living in an extended family system. The basement apartments are too scary, and are damp. The homes are built by taking into consideration the needs of a nuclear family. Too much crowding results in lack of privacy which in turn results in social problems within the families.
  - parenting
    - first their own children and
    - now their grand children
  - difficult to adjust here due to conflicts at home. Seniors take the brunt of insults.

### **Recommendations:**

1. ***Organize workshops to understand conflict mediation.***
2. ***Organize workshops to understand the legal responsibilities around baby-sitting.***

**3. What steps do you take to prevent illness? (mental and physical)**

- Silence. They keep quiet as they don't have the power to do much.
- Reading religious books
- watch television
- home remedies first and then doctor if necessary
- did not have knowledge about annual medical check up. They only went to see the doctor in case of sickness.
- language barrier with specialists
- transportation problems

**Recommendations:**

- 1. Organize workshops to inform seniors about the importance of health promotion and illness prevention.*

**4. Do you visit your doctor regularly or only when the illness occurs?**

None of the participants were visiting their doctors for annual checkup. The majority of the participants had doctors who understood their language.

**Recommendations:**

- 1. Organize workshops and inform seniors about the importance of regular annual checkups.*

**4a) What barriers do you face while visiting your doctor?**

**Language**

**Transportation**

**Cultural/Religious**

**Other**

The majority of seniors had to rely on their children to take them to visit their doctors. Most felt that transportation need be somehow addressed. Some felt that specialists are often from another culture and do not necessarily understand their language.

**4b) Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

The senior could not take advantage of the homeopathic medicine due to its costly nature. They were, however, aware that this alternative medicine is available.

**Recommendation:**

- 1. Establish contact with professionals from the alternative medicine and meet with government bodies to arrange for OHIP to cover the expenses.*

**6. Whom do you access for your emotional support?**

- God take me away
- talk to friends

The senior women accessed their husbands, children and friends for emotional support. Some women were frustrated and wished God to take them away.

**Recommendations:**

- 1. Organize a workshop to discuss the use of professional help in times of distress.*

**7. Are you aware of the resources available to seniors?**

No, they were not aware of any resources.

**Recommendations:**

- 1. Organize workshops to provide information on settlement, health, and other issues for senior women.*

**8. Would you like more information about the resources that are available to South Asian seniors?**

They definitely want more information on programs and services that that various government departments have to offer.

**Recommendation:**

*1. Organize workshops to provide information on programs, services and resources offered by various government departments.*

**9. Would you consider living in a Seniors Home or do you prefer living with your family?**

They wanted a seniors home. In fact, they wanted a South Asian seniors home, where they could "function" in their cultural environment. They also wanted the religious institutions to build Funeral homes.

**Recommendation:**

- 1. Build a South Asian senior's home.*
- 2. Build a Funeral home.*

**10. What are the major concerns or issues that you encounter on a daily basis within your home environment? And in society in general?**

- intergenerational conflict
- intercultural conflict
- lack of respect
- no finances (children take away money)
- cook food, baby sitting,

**Recommendations:**

- 1. Organize workshops to deal with building positive relations with children and grandchildren.*

**11. Do you have any other concerns or questions that you would like us**

**to try to address in follow-up workshops? or is there something that we have not covered that you would like to address that is related to health issues?**

- heart disease
- arthritis
- blood pressure
- asthma

- arthritis, osteoporosis
- over weight
- mental health

**Recommendations:**

1. *Organize workshops on health related topics.*

**12. In what form do you like to get information?**

The majority of the participants wanted to get information through pamphlets, video and audio cassettes. They also wanted this information printed in news papers and on radio and television in their mother tongue.

**Recommendation:**

1. *Diffuse information through pamphlets, video and audio cassettes and through radio and television.*

**V. Focus Group Report - Gujarati Seniors**

This Report summarizes the findings and recommendations from Gujarati seniors. The focus group was conducted at Sanatan Mandir on February 8, 1997. 22 seniors participated at this focus group.

**Recommendations:**

1. *Provide more information on various ailments experienced by Gujarati seniors and suggestions on how to improve their health. In addition, provide some proactive measures to take care of themselves.*
2. *Conducting a workshop on the federal, provincial and municipal systems of governments, in addition to integrating information on provincial matters and financial matters.*
3. *Provide ESL classes specially for South Asian seniors.*
4. *Create a car pool system for Gujarati seniors to attend more social events.*
5. *Lobby for more extensive bus (transit) system.*
6. *Raise money to buy a bus to transport the seniors to and from the Mandir.*

- 7. Create a car pool system for the seniors to attend social and exercises events during the week and weekend.*
- 8. Provide more information on healthy snacks and foods.*
- 9. Organize workshops on relieving stress and relaxation methods that could be done at home.*
- 10. Conduct educational workshops on identifying healthy living.*
- 11. Provide information on other resources that the seniors can access for emotional and mental support.*
- 12. Organize a workshop and/or produce an extensive resource guide for South Asian seniors on resources that are available in the community.*
- 13. Build a Senior's Home next to the Mandir (place of worship).*
- 14. Provide information where the seniors could find emotional support for their problems within the family environments.*

**1. What are your immediate health concerns? (medical, diet, physical, and emotional)**

The immediate concerns were identified as:

- diabetes
- high blood pressure
- family and general stress
- arthritis
- back pains
- heart disease
- breast cancer and prostate cancer
- asthma
- digestive problems, including acidity
- eyes, dental, hearing problems
- knee problems
- loss of memory
- isolation and depression
- financial needs

The discussion centered around immediate health concerns by the seniors naming off their medical problems. There was really no discussion, the seniors went around the circle and expressed their concerns. Many of them did express their concerns about depending on their children too much and losing control over their lives.

### **Recommendations:**

- 1. Provide more information on various ailments experienced by Gujarati seniors and suggestions on how to improve their health. In addition, provide some proactive measures to take care of themselves.*
- 2. Conducting a workshop on the federal, provincial and municipal systems of governments, in addition to integrating information on provincial matters and financial matters.*
- 3. ESL classes specially for South Asian seniors.*

### **2. How do you adjust to the different environment of Canadian society?**

The discussion centered around encountering language and transportation barriers. The Gujarati seniors also experienced many financial barriers, because of their dependency on their children. They participate in all Gujarati functions, cultural and religious. However, they do not participate in any (white) Canadian activities because they do not feel comfortable, in addition to experiencing language barriers and transportation problems.

### **Recommendations:**

- 1. Provide ESL classes for South Asian seniors*
- 2. Create a car pool system for Gujarati seniors to attend more social events*
- 3. Lobby for more extensive bus (transit) system*
- 4. Raise money to buy a bus to transport the seniors to and from the Mandir.*

### **3. What steps do you take to prevent illness? (mental and physical)**

Many of the seniors responded by expressing that they do try to exercise, but it does become difficult during the winter. They watch what they eat. The seniors practice a water treatment, where they drink four to five glasses of water in the morning before they brush their teeth and have their tea. During the evening, they drink 4-5 glasses of water before they go to bed. Many of the seniors go for walks, some of the male seniors continue this form of exercise during the winter months. However, during the winter months some of the seniors go to a near by mall for their walks. These walks usually take place during the evenings when their children are able to drive them to the mall.

#### **Recommendations:**

- 1. Create a car pool system for the seniors to attend social and exercises events during the week and weekend.*
  - 2. Provide more information on healthy snacks and foods.*
  - 3. Organize workshops on relieving stress and relaxation methods that could be done at home.*
- 4. Do you visit your doctor regularly or only when an illness occurs?**

The majority of the participants, close to 50% visit their doctor regularly, which was defined as once per year. Almost 40% visit the doctor only when an illness occurs. Close to 10% do not go to the doctor at all.

#### **Recommendation:**

- 1. Conduct educational workshops on identifying healthy living.*

### **5a. What barriers do you face while visiting your doctor?**

The major barriers that Gujarati seniors encounter are language and transportation. When the seniors visit their family doctor, they expressed that it was easy finding a South Asian doctor, more specifically Gujarati. However problems occur when they have to go to specialists. They have to rely on their children for transportation and translation. Then their feelings of dependency also occurs.

**5b. Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

Only one participant used homeopathy treatment. One uses Ayurvedic treatment. All other participants use only western treatment of medicine. Homeopathy is not covered through OHIP. Anyway medication that they are to buy accrues expenses. Most do not have drug plans, therefore some of the medication they have to pay out of their pockets.

**6. Whom do you access for emotional support?**

The participants responded with; God, going to the temple, religious books, movies, talking to oneself, in addition to spouses, children and extremely close friends.

**Recommendation:**

*1. Provide information on other resources that the seniors can access for emotional and mental support.*

**7. Are you aware of the resources available to seniors?**

All the participants responded in not knowing any of the sources that are available for South Asian seniors.

**Recommendation:**

*1. Organize workshops and/or produce extensive resource guides for South Asian seniors on resources that are available in the community.*

**8. Would you like more information about the resources that are available to South Asian seniors?**

The seniors wanted more information on pension plans and other income related sources.

**9. Would you consider living in a senior's home or do you prefer living with your family?**

All of the participants would like to live in South Asian seniors home. They would never consider living in senior's home catered for (white) Canadians.

**Recommendation:**

*1. Build a senior's home next to the Mandir.*

**10. What are the major concerns or issues that you encounter on a daily basis within you home environment? And in society in general?**

All of the participants would not answer the first part of the question at all. The second part of the question participants mentioned language and transportation problems.

**Recommendation:**

*1. Provide information where the seniors could find emotional support for their problems within the family environments.*

**11. Do you have any other concerns or questions that you like us to try to address in follow-up workshops? Or is there something that we have not covered that you would like us to address that is related to health issues?**

They wanted information on pension plans, in other words financial assistance.

## **12. In what form do you like to get the information?**

Any form would be fine with them, the information just needs to be in Gujarati.

## **VI. Focus Group Report - Tamil Seniors**

This Report summarizes the findings and recommendations from Tamil seniors. The focus group was conducted at South Asian Women's Centre in February, 1997. 8 seniors participated at this focus group.

### **Recommendations from the focus group discussion:**

- 1. Seniors need exercise classes, where they feel comfortable in the environment*
- 2. Need more information on nutritional diet that will not drastically alter their own 'cultural' diet*
- 3. Conduct workshops on "getting to know the system better". For example, information on financial assistance.*
- 4. Provide ESL classes for South Asian seniors*
- 5. More information on eligibility for financial assistance*
- 6. Information on getting active in fighting racial discrimination*
- 7. Provide more education on healthy snacks and foods.*
- 8. Provide methods on ways of keeping active, especially during the colder months.*

9. *Organize educational workshops on relieving stress and relaxation methods, especially for South Asian seniors.*
10. *Provide information on referral medical services for South Asian seniors*
11. *Conduct educational workshops on identifying healthy living.*
12. *Organize workshops where Tamil seniors can start using the more inexpensive alternative methods of treatment at home, especially tips on active living.*
13. *Organize workshops on how to obtain medical cards and use the medical system more efficiently.*
14. *Provide information on other resources that the seniors can access for emotional and mental support.*
15. *Organize a workshop that is specifically related to providing information on resources that are available to seniors, more specifically South Asian seniors.*
16. *Build a Senior's Home specifically for South Asian Seniors.*
17. *Organize workshops to understand and address racism.*
18. *Organize workshops to understand seniors abuse and work to find solutions to this problem.*
19. *Diffuse information on how to access financial assistance and who is eligible, either by pamphlets and/or workshops, especially for those who do not have health cards*
20. *Diffuse information on weight loss methods*
21. *Suggestion on maintaining discipline with their diets.*
22. *Diffuse the information in Tamil.*

### **Findings:**

1. **What are your immediate health concerns? (medical, diet, physical, and emotional)**

The immediate concerns were identified as:

- loneliness and isolation
- language
- different culture
- diabetes
- lack of exercises
- high blood pressure and hyper-tension
- allergic reactions

- high cholesterol
- nutritional concerns
- arthritis
- back pains
- heart disease
- asthma
- digestive problems, including acidity
- eyes, dental, hearing problems
- isolation and depression
- dealing with weather, especially the cold
- family and general stress
- financial needs- uneasy feelings of dependency upon children

The discussion centered around immediate health concerns providing, in some detail, personal medical histories. Some of the seniors stressed the need for more information on exercising in the Canadian environment. Others expressed the lack of control over their lives because of the increasing dependency upon their children and lack of financial independence. The discussion ended on certain medical problems that they are currently experiencing.

### **Recommendations:**

- 1. Seniors need exercise classes, where they feel comfortable in the environment*
  - 2. ESL classes specially for South Asian seniors.*
  - 3. Need more information on nutritional diet that will not drastically alter their own 'cultural' diet*
  - 4. Conduct workshops on "getting to know the system better". For example, information on financial assistance.*
- 2. How do you adjust to the different environment of Canadian society?**

Winters are hard for seniors. The seniors not only feel physically confined but also mentally frustrated because they feel confined in the home and become more dependent on their children for transportation. Another adjustment for the seniors is language. They

also have difficulty in the Canadian environment due to lack of proficiency of the English language. One other major adjustment is becoming more and more dependent upon their children. One last adjustment that was mentioned, if it could be referred to as an adjustment, is the racial discrimination that Tamil seniors encounter in various (white) Canadian environments.

### **Recommendations:**

- 1. Provide ESL classes for South Asian seniors*
- 2. More information on eligibility for financial assistance*
- 3. Information on getting active in fighting racial discrimination*

### **3. What steps do you take to prevent illness? (mental and physical)**

Many of the seniors responded saying that they are careful with their diets, however it is difficult to always maintain such strict diets. They also try to maintain active, even during the winter, but it is very difficult and sometimes they do not even leave their house/apartment. They also mentioned that they try to keep warm during the colder months.

### **Recommendations:**

- 1. Provide more education on healthy snacks and foods.*
- 2. Provide methods on ways of keeping active, especially during the colder months.*
- 3. Organize educational workshops on relieving stress and relaxation methods, especially for South Asian seniors.*

### **4. Do you visit your doctor regularly or only when an illness occurs?**

The majority of the participants visit their doctor only when illness occurs. A few of the participants visit their doctor regularly. A few of the participants had (white) Canadian doctors and felt uncomfortable most of the times and their children had to act as translators for them at every visit. This in turn, increase the feeling of dependency upon their children and loss of control over their lives. Some of the participants had doctors where the doctor was South Asian, not

necessarily Tamil speaking. However, those who had a South Asian doctor were comfortable with their doctor.

**Recommendation:**

1. *Provide information on referral medical services for South Asian seniors*
2. *Conduct educational workshops on identifying healthy living.*

**5a. What barriers do you face while visiting your doctor?**

- Language
- Transportation
- Cultural/Religious
- Other

The majority of seniors encountered language and transportation barriers while using medical facilities. They have to rely on their children for transportation and translation.

**5b. Do you use Homeopathy as a method of treatment? Do you use only western medicine or do you use both methods of treatment interchangeably?**

All the participants responded as using only western method of medicine. However, later in the discussion the participants expressed that the reason they did not use homeopathy medicine is because OHIP did not cover the cost of using such treatments. Because of the need to buy prescriptions, they could not afford the additional costs of using alternative methods of treatment. Some have drug plans, but not all. Moreover, some do not even own a medical health card.

**Recommendations:**

1. *Organize workshops where Tamil seniors can start using the more inexpensive alternative methods of treatment at home, especially tips on active living.*
2. *Organize workshops on how to obtain medical cards and use the medical system more efficiently.*

**6. Whom do you access for emotional support?**

The seniors turn to their spouses, close friends and children. Some of the seniors responded that they turn to prayers and other religious rituals.

**Recommendation:**

- 1. Provide information on other resources that the seniors can access for emotional and mental support.*

**7. Are you aware of the resources available to seniors?**

The majority of the participants responded to having some information on resources available to seniors, such as the South Asian Women's Center and a program, Sistering in Parkdale.

**Recommendation:**

- 1. Organize a workshop that is specifically related to providing information on resources that are available to seniors, more specifically South Asian seniors.*

**8. Would you like more information about the resources that are available to South Asian seniors?**

see question # 7

**9. Would you consider living in a senior's home or do you prefer living with your family?**

The majority of the seniors that they would like to live independently as long as they would be able to. Some of the seniors also liked staying with their families and would continue to live with their families. Some of the seniors experienced living in a Senior's Home for a short while but felt very alienated because it was a different ethno-specific Senior's Home. Therefore, they were not able to

communicate and socialize with anyone in the Senior's Home and felt very isolated.

**Recommendation:**

*1. Build a Senior's Home specifically for South Asian Seniors.*

**10. What are the major concerns or issues that you encounter on a daily basis within your home environment? And in society in general?**

The majority of the seniors expressed that they encountered language barriers within (white) Canadian society. The Tamil seniors also expressed that they encounter racial discrimination. Within the family environment they encounter usual family problems and stress. Others also expressed that there is a certain amount of elder abuse within the Tamil communities, for example lack of respect towards elders and issues of "taken for granted". In other words, there is conflict within the family environment. Finally, there is a general feeling of wanting to go back to their home country, because of the depression and isolation experienced in the (white) Canadian society.

**Recommendation:**

- 1. Provide information where the seniors could find emotional support for their problems within the family environments.*
- 2. Organize workshops to understand and address racism.*
- 3. Organize workshops to understand seniors' abuse and work to find solutions to this problem.*

**11. Do you have any other concerns or questions that you like us to try to address in follow-up workshops? Or is there something that we have not covered that you would like us to address that is related to health issues?**

1. Information on obtaining health cards
2. Financial assistance information
3. Maintaining a healthy diet
4. Methods on remaining independent

## 5. Weight loss methods

### **Recommendations:**

1. *Diffuse information on how to access financial assistance and who is eligible, either by pamphlets and/or workshops, especially for those who do not have health cards*
2. *Diffuse information on weight loss methods*
3. *Suggestion on maintaining discipline with their diets.*

## 12. In what form do you like to get the information?

All of the participants did not have a preference of any form, but would like the information in Tamil.

### **Recommendation:**

1. *Diffuse the information in Tamil.*

## VII. Seniors Consultation Meeting

### **Recommendations:**

- *Build a community centre for South Asian seniors.*
- *Develop “skill sharing” projects.*
- *Teaching English is very important to seniors. In addition to ESL classes, Mentors be developed to teach seniors English.*
- *The South Asian community needs to be educated regarding the problems faced by the seniors.*
  - Workshops on:*
    - *How to motivate to learn new concepts?*
    - *How does the Canadian system works?*
    - *Government and its resources*
    - *Welfare, Pension plan, and other benefits*
    - *Legal rights*
    - *Recognizing elder abuse*

- *Self sustaining projects that develop economic independence.*

*Education be provided on the following health concerns:*

- *diabetes*
  - *heart disease*
  - *arthritis*
  - *diet*
  - *active living*
  - *mental health*
  - *medication (proper use)*
  - *alternative treatment*
  - *menopause and its effects*
  - *vision care, dental and hearing*
  - *Alzheimer's disease*
- *The inter-action between seniors and their children and grandchildren need to be enhanced.*
  - *Unify all South Asian senior's groups.*
  - *Address the problem of transportation for seniors.*
  - *Develop a long term project on healthy and active living.*
  - *Develop low fat cook books in South Asian languages.*

## **Discussion**

As part of the needs assessment study, a senior's consultation meeting was organized. The seniors were invited representing the five language groups. In total, 8 seniors actively participated in the discussion. These seniors can be classified as "key informants" in the research terminology. They have been in Canada for a number of years and have intimate knowledge about the health concerns of the South Asian seniors.

The following comments summarize the gist of the discussion:

- There is no cultural centre for the South Asian community, where the social needs of the seniors can be met. The inter-generational and inter-cultural gaps need to be bridged. But how? Without long term projects it is difficult to “modify” behaviours to sustain interest beyond “gossip” and “card playing”. Suggestions were put forward to develop “skill sharing projects”. These projects would generate some income for the seniors and also enhance positive interaction between youth and seniors.
- Learning English language is very important. Efforts should be made to encourage seniors to participate in the ESL programs. In an event there is no ESL class available for the seniors, all efforts should be made by the educated seniors to teach English to other seniors.
- The South Asian community needs to be educated regarding the problems faced by seniors. The media can play a positive role in the development of the awareness of taking care of seniors in Canada. Some examples were cited: elder abuse, some seniors were very old and are in no position to take care of their grandchildren, the safety of seniors in and outside the home in winter, and giving some spending money to seniors.
- There is a notion that “the State” is responsible to look after the “old”. While there is some truth to this but it is our responsibility to not abandon our parents. Of the various forms of abuse that seniors face, the most feared by seniors is abandonment. In the South Asian culture, it is expected that children will look after their parents in old age. But, this is no longer true in Canada. The question is why? Perhaps, the children expect them to live in senior’s homes or by themselves. Perhaps, the “individuality” of the “western culture” has also affected them. It was suggested that our cultural value that we are responsible for our parents be strengthened by holding seminars and using media effectively.
- Throughout Greater Toronto Area, there are many South Asian seniors groups. It was suggested that efforts be made to unify them in order to have a stronger voice in order to influence change.

- The discussion also centered on the transportation problems. The South Asian community should look into initiating a bus service for seniors. This can only happen if most of the seniors can work together and pool their resources and become creative to address this problem.
- The project that teaches “healthy diet and healthy living” should be a long term project. It takes a long time for a new behaviour to be accepted by an individual, especially at old age.
- Healthy diet books be printed in South Asian languages. The seniors need hands on experience to learn new ways of cooking. More “nutritional classes” be organized.
  
- How to deal with technology?
  - Banking with cards
  - computers
  - voice mail system
  - internet
  - writing cheques
  
- Education be provided on the following health concerns:
  - diabetes
  - heart disease
  - arthritis
  - diet
  - active living
  - mental health
  - medication (proper use)
  - alternative treatment
  - menopause and its effects
  - vision care, dental and hearing
  - Alzheimer’s disease

- Workshops on:
  - How to motivate to learn new concepts?
  - How does the Canadian system works?
  - Government and its resources
  - Welfare, Pension plan, and other benefits
  - Legal rights
  - Recognizing elder abuse
  - Self sustaining projects that develop economic independence.

**QUANTITATIVE DATA ANALYSIS**

## Personal Profile Questionnaires

<b>TABLE ONE</b>
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**Q. 1            sex**

Value Label	Value	Frequency	Percent
Male	1.00	28	52.8
Female	2.00	25	47.2
		-----	-----
	Total	53	100.0

Valid cases            53            Missing cases            0

**From the 53 respondents who completed the questionnaires, 28 were male and 25 were female respondents.**

TABLE TWO

## Q. 2 Age (in years)

Value Label	Value	Frequency	Percent
50-55	3.00	3	5.7
55-60	4.00	3	5.7
60-65	5.00	17	32.1
65 and above	6.00	30	56.6
		-----	-----
	Total	53	100.0
Valid cases	53	Missing cases	0

The majority of respondents (30) were 65 and above years of age, followed by 17 respondents who were between the ages of 60 to 65. 3 respondents each were in the ages of 50 to 55 and 55 to 60 respectively.

TABLE THREE

## Q. 3 How many years have you been in Canada?

Value Label	Value	Frequency	Percent
Under 2 years	7.00	3	5.7
2-4 years	8.00	6	11.3
4-6 years	9.00	8	15.1
6-8 years	10.00	10	18.9
8-10 years	11.00	11	20.8
10-15 years	12.00	7	13.2
15-20 years	13.00	3	5.7
Over 20 years	14.00	4	7.5
	.	1	1.9
		-----	-----
	Total	53	100.0
Valid cases	52	Missing cases	1

11 respondents were in Canada between 8 to 10 years, 10 respondents were between 6 to 8 years followed by 8 between 4 to 6 years, 7 between 10 to 15 years, 6 between 2 to 4 years, 4 over 20 years and 3 under two years.

TABLE FOUR

## Q. 4 In which area do you live?

Value Label	Value	Frequency	Percent
Malton	15.00	5	9.4
Brampton	16.00	12	22.6
Scarborough	17.00	9	17.0
North York	18.00	9	17.0
Ajax	19.00	2	3.8
Markham	20.00	1	1.9
Toronto	21.00	11	20.8
Mississauga	22.00	1	1.9
Unionville	23.00	1	1.9
.	.	2	3.8
		-----	-----
Total		53	100.0

Valid cases            51            Missing cases            2

**The geographic areas of the respondents were as follows:  
 18 from the Region of Peel  
 9 from Scarborough  
 9 from North York  
 11 from Toronto, and  
 2 from Ajax, 1 from Markham, 1 from Unionville.**

<b>TABLE FIVE</b>
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**Q. 5            Do you live in a house or apartment?**

Value Label	Value	Frequency	Percent
House	26.00	23	43.4
Basement	27.00	4	7.5
Apartment	28.00	21	39.6
Condominium	29.00	2	3.8
Seniors Apartments	30.00	2	3.8
Townhouse	31.00	1	1.9
		-----	-----
Total		53	100.0

Valid cases            53            Missing cases            0

**The respondents were almost equally divided in living between houses and apartments. 23 resided in houses while 21 in apartments. 4 lived in basements, 2 in condominiums, 2 in seniors apartments and 1 in townhouse.**

<b>TABLE SIX</b>
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**Q.6    Do you receive any kind of income?**

	Count
Yes	26
No	27

**Half of the respondents had no sources of income.**

**TABLE SEVEN**

**Q. 7 If yes, what is your source of income?**

Category label	Code	Count	Pct of Responses	Pct of Cases
Support from your children	32	7	17.1	23.3
Old age pension	33	10	24.4	33.3
Work	34	9	22.0	30.0
Other	35	10	24.4	33.3
Investment interest	37	1	2.4	3.3
Family benefit	38	4	9.8	13.3
		-----	-----	-----
	Total	41	100.0	136.7

23 missing cases; 30 valid cases

**23 respondents chose not to answer this question. The minority of the respondents (26), who answered, had some form of income. 14 respondents had income from Government, 9 from work, 1 had investment interest income, 10 received support from children, and 10 had other income.**

**TABLE EIGHT**

**Q. 8 What is your income range?**

Value Label	Value	Frequency	Percent
0-10,000	40.00	17	32.1
10,000-15,000	41.00	7	13.2
15,000-20,000	42.00	3	5.7
20,000-25,000	43.00	1	1.9
Above	44.00	1	1.9
	.	24	45.3
		-----	-----
	Total	53	100.0

Valid cases 29 Missing cases 24

**24 respondents chose not to answer this question. 24 respondents, who answered, had income of less than 15 thousand per year.**

**TABLE NINE**

**Q. 9 What is your marital status?**

Value Label	Value	Frequency	Percent
Married	46.00	47	88.7

Divorced	47.00	2	3.8
Widow(er)	48.00	3	5.7
.		1	1.9
		-----	-----
Total		53	100.0
Valid cases	52	Missing cases	1

**The majority of the respondents (47) were married.**