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A Study on the Settlement Related Needs of Newly Arrived Immigrant Seniors in Ontario

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EXECUTIVE SUMMARY

PURPOSE

In 1996 about 3.4 percent of immigrants who reported Ontario as their intended destination were 60 years of age or more. In 1998, 4.1 percent of the immigrants destined for Ontario were 60 years or more. Even though the numbers of new senior immigrants to Ontario may be small, they constitute an important group as a resource to their families and to their communities. The purpose of this study was to examine the needs of newly arrived immigrant seniors to Ontario. Specifically, the objectives of the study were to identify:

- settlement resources and services available to newly arrived seniors;
- the unique difficulties encountered by newcomer seniors in the settlement process;
- how and where newcomer seniors access support and information to deal with their settlement needs;
- gaps in information and services.

METHOD

The project used a multi-method research design that combines qualitative and quantitative approaches. Three components ran simultaneously: a document review of programs and services for seniors related to their settlement; the collection of information through telephone interviews with key informants from agencies that provide services to seniors, newcomers and senior newcomers; and face-to-face interviews with newly arrived seniors. The study was carried out in three locations: the Greater Toronto Area, Hamilton and Ottawa and was conducted from October 2000 to June 2001.

FINDINGS

Profile of the Senior Newcomers

- The sample represented a diverse group of seniors from over 30 countries. There were equal proportions of men and women, the average age was seventy. Sixty-two percent of the sample was married, 32 percent were widowed, and 5 percent were separated or divorced.
- Over 85 percent of the seniors were sponsored by their children and the majority lived with their children when they came to Canada.
- Three-quarters of the seniors reported that they had poor to no English skills and 95 percent said they had no ability in French.
- Half the senior participants reported excellent to good health, which was well below the Canadian national averages for the older population.
- The group of newcomer seniors were better educated than the older national population, they previously had higher occupational levels and about one-third received retirement pensions from their country of origin.

Settlement Resources and Services

- There were no separate settlement services solely devoted to newcomer seniors in the three cities studied. There were, however, many resources and services available in mainstream and ethno-specific agencies that served the general older Canadian population. Some settlement services were identified that made special provision for older newcomers as part of their services to the general immigrant population.
- The key informants noted that services should be better coordinated with stronger links to government departments.
- The main problem with community services was the shortage of language specific staff and language specific informational materials.
- There was a need for more structured programs targeted specifically at older newcomers, more community outreach and a need to connect newcomer seniors with other seniors from their own communities.
- The key informants noted that their agencies were under-funded and not able to deliver the types of services they believed necessary to help newcomer seniors. For the smaller cities, secondary migration caused funding problems for service providers.

Special Difficulties of Newcomer Seniors

- The newcomer seniors experienced special difficulties related to their limited language skills, adaptability, and employability.
- Over-dependence on their families, financial distress, lack of reliable transportation, the inclement weather and social isolation were unique and enduring challenges for this group.
- The wish to live independently from children was a concern of some of the newcomer seniors as was the need for financial support.

Accessing Support and Information

- The majority of seniors gained their settlement information from informal sources: first from their sponsors who were family members (primarily their children), and later, from their new found friends and from their ethnic communities.
- Over 61 percent of the newcomer seniors used at least one formal settlement service. The most commonly used services included language, reception and counseling services and most seniors found the services to be helpful or very helpful.
- Over half of the newcomer seniors used at least one other type of service besides settlements services. The range of services were housing services, seniors' services, legal assistance or financial services. Over 90 percent of the seniors found these services to be helpful.

Gaps in Information and Services

- Both the seniors and key informants indicated that the seniors' lack of knowledge about services both settlement and other services was a serious problem.
- Part of the cause of this problem was the lack of language-specific information about settlement services and other services in the community.
- The solutions offered by the key informants to solve these problems were to provide information and services in the requisite languages, use the ethnic media to target this information to the seniors and to engage in more community outreach.
- Over half of the participants reported that there were services they required but could not access.

• The participants reported that the services they really needed, but were inaccessible, included financial support, housing and health services. The first two services were not available to them because of sponsorship regulations.

RECOMMENDATIONS

The following recommendations are intended to address the unique settlement needs of seniors and to identify what information and services would better help them in their initial settlement processes.

Based on the findings of this report, our recommendations concern four major areas: 1. Information, 2. Social and Community Services, 3. Coordination and Referral Services, and 4. Outreach. These recommendations are within the framework of existing settlement programming.

Recommendation 1: Information

- All prospective newcomer seniors should have access to relevant information on life in Canada through Canadian embassies and consulates around the world. The specific information should address weather, housing, mobility, income supports and community activities. The prospective newcomers should have access to sponsorship regulations so that they are aware of the restrictions on eligibility for government transfer payments.
- The federal government should use ports of entry and the media (mainstream and ethno-specific) to make senior-specific information available to immigrant seniors and their families.
- At the time of application for sponsorship, family members should be encouraged to access appropriate and relevant information on services available to seniors in Canada and their communities.
- Agencies serving seniors should encourage family members to access information about the social, emotional and health needs of older adults. Such information will increase families' knowledge and sensitivity to their senior relatives' special needs.
- Initial settlement information should be organized and prioritized in order of importance and usefulness to newcomer seniors. Information provided could include government programs for seniors, health, housing, language programs, peer support programs, and neighbourhood community programs for newcomer seniors.

- Information should be available in different languages at different access points, such as doctors' offices, ethnic food stores and settlement and community agencies serving this older newcomer population.
- To encourage a focus on seniors as newcomers, agencies in Ontario that serve newcomer seniors should form networks to share, coordinate and update information.

Recommendation 2: Social and Community Services

- Service programming should be flexible in terms of hours of service and location of service to provide maximum access to seniors who depend on their working relatives to transport them to services.
- Recreational programs, peer support programs, friendly visiting and telephone support lines geared to newcomer seniors should be sensitive to the language needs of newcomer seniors. The creation of such program in both ethno-specific and mainstream agencies would enhance senior newcomers' social adjustment and decrease their social isolation.
- All service providers responsible for delivering services to seniors should be alerted to the possibility of elder abuse and should be trained to identify abusive situations and make referrals to the appropriate agencies.
- Community-based agencies should be encouraged to involve newcomer seniors in volunteer activities in order to take advantage or their many skills, including their cultural expertise.
- Educational and support programs about aging for adult children of the newcomer seniors should be offered from agencies already offering these services to the mainstream population.
- Service providers should explore the possibilities of other creative venues for language training such as, video or audiotapes in specific languages, computer-based and/or media (television) based language training.
- Service providers in community agencies should explore ways to assist senior newcomers with their housing and financial problems.

Recommendation 3: Co-ordination and Referral

- Co-ordination of services should be improved. Given the large number of existing services available to seniors, the importance of co-ordination of services cannot be over emphasized.
- ISAP-funded settlement agencies should be encouraged to organize geographicallybased referral networks for newcomer seniors so that seniors can use the networks to

navigate the social service and health care systems. Considering the health and mobility issues unique to seniors, agencies should design a simple system of referrals that encompass the major needs of newcomer seniors.

Recommendation 4: Outreach

• Outreach is a fundamental requirement in assisting newcomer seniors to access information and services. Service provides should explore innovative methods to reach out to this largely invisible and difficult-to-reach population. Places of worship, ethnic cultural associations, ethnic shopping areas, ethnic media and health care providers' offices are possible outreach venues.

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A STUDY ON THE SETTLEMENT-RELATED NEEDS OF NEWLY ARRIVED IMMIGRANT SENIORS IN ONTARIO

1. INTRODUCTION

A substantial proportion of seniors living in Canada are immigrants. In 1996, about 27 percent of the population aged 65 and over were immigrants, although immigrants only make up 17 percent of the overall Canadian population. In fact, immigrants make up a larger segment of the senior population than they do in any other age group (Statistics Canada, 1999). Nevertheless, most immigrant seniors currently residing in Canada arrived a long time ago: according to 1996 estimates, 61 percent arrived in the country before 1961, 14 percent came in the 1960s, and 11 percent arrived between 1971 and 1980. Only 15 percent of seniors have immigrated to Canada since 1981 (National Advisory Council on Aging, 1999).

Today, seniors immigrate to Canada in small numbers each year. In 1997 about 3 percent of people (less than 6000) who immigrated to Canada were 65 years of age or older. Of the older immigrants arriving in 1997, 90 percent were family-class immigrants, 6 percent were refugees, and 4 percent were economic-class immigrants (National Advisory Council on Aging, 1999; Statistics Canada, 1999). ¹

Even though the numbers of new senior immigrants to Ontario may be small, they still are an important group as a resource to their families and communities. Under the existing immigration policies, most immigrant seniors are sponsored by their children. As many studies have shown, even without this policy, immigrant seniors are distinctly less likely to live alone or only with a spouse (Boyd, 1991; Kritz, Gurak, & Chen, 2000; Wilmoth, DeJong, & Himes, 1997). For example, 65 percent of Chinese immigrant

¹ The increased emphasis on family reunification after 1978 produced significant increases in the proportion of the elderly, especially elderly women, among immigrants (Boyd, 1989). A change in immigration policy in the latter part of the decade produced not only an increase in the number of immigrants, but also a tenfold increase in the number of economic/independent immigrants between 1985 and 1988 (Moore and Rosenberg, 1997). The wave of economic/independent immigrants served to decrease the proportion of elderly immigrants because of course they have no dependents.

seniors, compared to 18 percent of Canadian-born seniors live with relatives (Government of Canada 1996a, 1996b). Although not the first preference of Canadianborn seniors, living with one's adult children and family is culturally accepted in many ethnic groups. Also, immigrants from poorer countries often cannot afford to support their parents in separate dwellings. Because older immigrants arriving in Canada are not eligible for government transfer payments or welfare benefits for up to 10 years, seniors often live in multigenerational households with family or their sponsors (Basavarajappa, 1998; Boyd, 1991). At the same time, immigrant seniors who take care of grandchildren and engage in household labour can be and frequently are a major source of support that is crucial to family survival (Hooyman and Kiyak, 1999). There is also evidence that older immigrants can help younger family members learn about their history, language and culture (Skilton-Sylvester and Garcia, 1998/1999). However, even when controlling for need, research has found that various ethnic groups choose to live in multigenerational families, which provide both social support and instrumental assistance with finances and activities of daily living for all generations (McDaniel, 1997; Silverstein and Waite, 1993; Speare and Avery, 1993; Tennstedt, Crawford and McKinley, 1993). Assisting newly arrived seniors with the settlement process is not only important to the seniors themselves, but also has positive repercussions for both the family and the province (Wallace, 1989).

2. BACKGROUND

In 1998, Citizenship and Immigration Canada (CIC), Ontario Administration of Settlement and Integration Services (O.A.S.I.S.) held a series of community consultations with services providers and newcomers about the settlement service needs of newcomers. In these consultations, participants identified the importance of having programs that consider the needs of newly arrived immigrant and refugee seniors. Also identified was the need to examine the special difficulties that newly arrived seniors might face in the initial stages of their settlement process. In addition, it was unclear the extent to which elderly newcomers are knowledge about available information and services. In the summer of 2000, O.A.S.I.S. solicited proposals to conduct a research study to examine and analyze the needs of newly arrived immigrant seniors in Ontario. The Centre for Applied Social Research (CASR), Faculty of Social Work, University of Toronto, was awarded the contract to undertake this study. The study timeframe was from October 2000 to April 2001 and an extension was granted until June 2001 to complete the project.

3. PURPOSE AND OBJECTIVES OF THE STUDY

The purpose of this study was to identify the following:

- existing resources and services available to newly arrived seniors to resolve issues related to their initial stages of settlement;
- special difficulties encountered by newcomer seniors in the settlement process that are different from other immigrant age groups;
- how and where newcomer seniors assist themselves in accessing support and information to deal with their settlement needs; and
- any gaps in information and services, newcomer seniors identify that would better assist them in their initial settlement processes.

This study concludes with recommendations for improving the unique settlement process of newcomer seniors.

4. METHODOLOGY

This project used a multi-method research design that combines qualitative and quantitative approaches. The project had three components that ran simultaneously: reviewing programs for seniors and services related to settlement; collecting information through telephone interviews with key informants from agencies that advocate for or provide direct services to seniors, newcomers and senior newcomers; and lastly collecting information through face-to-face interviews with newly arrived seniors. The study was carried out in three locations: the Greater Toronto Area, Hamilton and Ottawa.

Program and Service Review

The services offered both to seniors in general and to newly arrived immigrant seniors were reviewed using social service directories and special directories for immigrants and seniors (for example, the Blue Book, which is a directory of community organizations in Toronto). Major health facilities, long term care institutions, community health clinics and Community Access Centres also were reviewed. If service information was not available in directories, the agencies were contacted. The questions asked were (1) What settlement services are offered? (2) Who among the seniors are accessing these services? (3) What settlement services should be offered? Additional information was collected through very brief telephone interviews with agency staff or through faxes to agencies. The information provides a comprehensive listing of settlement services available to recently arrived immigrant seniors (see Appendix 1: List of Services).

Key Informant Telephone Interviews

Telephone interviews with key informants were conducted to obtain an overview of the availability, accessibility, utilization and gaps in settlement services, as well as the unique issues facing newly arrived seniors. The research team developed a semistructured interview schedule, which covered the areas noted above. A protocol made up of a few strategic questions was developed to screen key informants for the telephone interviews. The protocol was designed to ensure that the key informants were familiar with newly arrived senior immigrants, their settlement processes and their unique issues.

Key informants had been screened into the study and were given a telephone appointment for a maximum half-hour interview at a convenient time, and the interview schedule was faxed to the respondents prior to the interview. The telephone interview was used because it is the most efficient way to collect information and has a high response rate (see Appendix 2: Key Informant Interview Schedule).

A purposive sample of key informants was used in order to gain an in-depth understanding of the issues faced by senior immigrant newcomers (Cresswell, 1998). Thirty key informants were chosen to cover the diverse service providers. The percentages of 15 (Toronto), 10 (Ottawa) and five in Hamilton roughly reflect the proportions of service providers in those areas. The key informants were specifically chosen from social and health care agencies serving seniors and from ethno-specific settlement agencies in the three identified cities.

The key informants were settlement counsellors, social workers, health care professionals, presidents of senior groups, service providers of seniors and one religious leader. Twenty-one were female and nine were male. In Ottawa researchers approached health care agencies because the centres have designated multicultural workers who have extensive knowledge of seniors from various cultural groups. Two Immigrant Settlement and Adaptation Program (ISAP) agencies were also contacted in Ottawa for key informant interviews. In Hamilton, only one ISAP agency was contacted for a key informant interview; a minister was chosen as another informant because he was a religious leader working with immigrants from Africa. In Toronto, 11 ISAP agencies working with different ethnic groups were approached for the key informant interviews. Other key informants were chosen because they were working in multicultural agencies with different seniors' programs.

Interviews with Immigrant Newcomers

The research team developed a structured interview schedule comprising mostly closed-ended questions based on current research on settlement issues and gerontology. The structured format of the interview schedule was designed to collect information from a relatively large number of participants in a short period of time. Topics included were general information about the respondent, experiences prior to coming to Canada, settlement experience in Canada, current activities and social supports, use of and access to services, health status, and finally overall experience of living in Canada (see Appendix 3: Newcomer Senior Interview Schedule).

Trained interviewers who could speak the newcomers' languages administered the interviews face-to-face in locations of the seniors' choice. All sessions were offered at the most convenient time to respondents. Face-to-face interviews were used because they are considered to be more sensitive to older persons needs.

Sampling

Based on statistics on new arrivals, CIC identified six regions of origin that the immigrant senior populations should to be drawn from: South Asia, China, Europe, Latin America, the Caribbean and Africa. To provide the best opportunity for recruiting enough seniors for reliable information (Citizenship and Immigration, 1996:91), the study was to be conducted in the three Ontario cities most cited as intended destinations of newcomer seniors. In Ontario, the Greater Toronto Area, including major cities in the Peel and York regions, is the intended destination for most seniors (N=2241 in 1996), followed by Ottawa (N=110 in 1996) and Hamilton (N=103 in 1996).

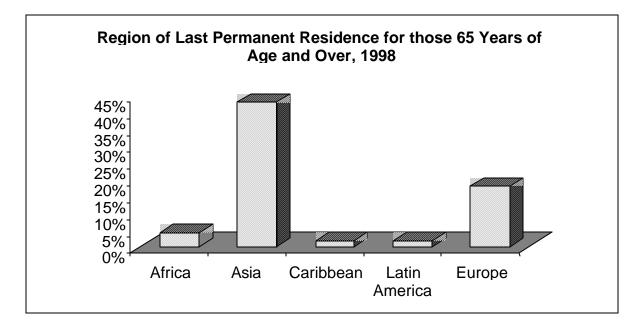
The new arrival statistics for 1998 show that 18 percent of immigrants aged 65 and over were from Europe, 4 percent from Africa, 44 percent from Asia, 2 percent from the Caribbean and 2 percent from Central America. Numbers of arrivals have been fairly stable from these areas over the last four years, with the exception of Europe and Hong Kong, which have been affected by major social and economic changes. However, because the percentage of newcomer seniors from the Filipino community is also consistently high, the study extended the investigation to this group of newcomer seniors (see Table 1).

Region	1998	1997	1996	1995
	Percent	Percent	Percent	Percent
Africa	4.11	3.02	2.60	2.27
Asia	43.06	49.08	44.57	46.31
China	8.70	7.23	18.87	21.90
Hong Kong	5.33	12.22	3.31	3.12
India	8.92	7.96	7.8	5.65
Philippines	3.92	3.81	3.79	4.69
Caribbean	1.88	1.46	2.05	2.05
Latin America	1.89	1.46	2.05	2.05
Europe	18.09	14.14	13.94	10.37

Table 1.Region of Last Permanent Residence for those 65 Years of Age and
Over, 1995-1998

Source: Citizenship and Immigration Statistics, 1995-1998

Figure 1. Region of Last Permanent Residence for those 65 Years of Age and Over, 1998



We proposed that 150 interviews be conducted with immigrant seniors. This number reflects the maximum feasible interviews for the short time frame of the project. Table 2 shows the proposed breakdown of interviews with senior immigrants by region of last permanent residence and location of the interview. This breakdown reflects the percentage of older immigrants arriving to Canada by region of last residence (see Table 2).

Region	Toronto (GTA)	Ottawa	Hamilton
Africa	7	2	1
South Asia	25	8	5
Philippines	5	2	1
China/Hong Kong	31	8	6
Caribbean	3	1	1
Latin America	3	1	1
Europe	26	8	5
Total Interviews	100	30	20

Table 2.Breakdown of Interviews with Immigrant Seniors by Region of Last
Permanent Residence and Location of Interview

The following criteria for selection of participants in the study were identified by the funders as a result of the eligibility for Federal settlement programs, ISAP/HOST/LINC and the research team. In collaboration with the funders it was decided that the seniors should reside in Canada for a least one year because of the difficulty finding representatives of seniors who were here less than a year. Also, it was decided that the seniors should reside in Canada for 5 years or less, because five years is traditionally the target of the settlement programs. Participants had to:

- be 65 years of age or over;
- have immigrated to Canada from one of the identified six regions;
- have been in Canada for a minimum of one year and maximum of five years;
- have not yet acquired Canadian Citizenship; and
- reside in the Greater Toronto Area, Ottawa, or Hamilton.

Because there was no sampling frame of newly arrived seniors in any of the three cities, a non-probability sampling technique was used.

Recruitment

Recruitment of participants was a major challenge in this project. Because seniors are usually an invisible and difficult population to reach, several approaches to recruitment were used: contacting community and social service providers; advertising in ethnic agencies, media and places of worship; and drawing on the research teams' personal and institutional networks. An honorarium of \$25 was given to each senior to attract more seniors to participate in the research project. However, there was limited snowball sampling, or seniors recommending other seniors to participate in this research.

To locate agencies that service ethnic seniors, the research team consulted directories of community services in Toronto, Hamilton and Ottawa²; federally funded ISAP agencies; the list of agencies from the Ontario Council of Agencies Serving Immigrants (OCASI) (www.ocasi.org); the Directory of Resources for Senior Citizens, compiled by Senior Citizen Council of Ottawa; the website of settlement organization (www.settlement.org/index.html); and for Hamilton, the multicultural directory in Hamilton-Wentworth (www.inform.city.hamilton.on.ca.).

Notices were placed in community and religious centres, and announced on various ethnic television stations. Leaflets in various languages were passed out at street corners in different parts of the Greater Toronto Area to recruit seniors. Churches, temples and mosques were approached, and people attending those religious services provided leads to approach their friends for interviews. One senior contacted us after reading about this project in the church bulletin. A reporter from Fairchild television station aired an interview with the research team (see Appendix 4: Recruitment Notice).

Personal contacts of the interviewers, project co-ordinator and the principal investigator helped recruit seniors for the study. The research team also used its institutional network of resources (e.g., Anti-Racism, Multiculturalism, and Native Issues Centre (AMNI); the Toronto Centre of Excellence for Research on Immigration and Settlement (CERIS)). The project co-ordinator visited Ottawa and Hamilton to talk to different agencies, ESL classes and seniors' clubs to locate ethnic seniors for interviews.

² The directories of community services in Toronto, Hamilton and Ottawa are the following: (1) RedBook Plus published by the Community Information Services in Hamilton; (2) Directory of Ottawa Community Services published by the Community Information Centre of Ottawa; (3) Directory of Community Services in Toronto published by the Community Information Toronto.

Interpreters were used in the interviews in Hamilton and Ottawa because of the lack of time for recruiting interviewers. In one interview in Ottawa, three languages were used: a trilingual interpreter talked in French to the senior, who answered her questions in Russian; the interpreter then translated the content into English for the interviewer.

We experienced many difficulties in recruiting because many newcomer seniors we approached, in particular Chinese seniors had become Canadian citizens within their first three years living in Canada. Service providers noted that many seniors emigrating from China are holders of a Certificate of Identity and are anxious to have a proper passport such as a Canadian one so they can travel. In consultation with the funder, it was agreed that the sample could include citizens who had arrived less than 5 years ago.

Because the recruitment period was very limited and took place in the winter, when seniors are generally homebound, the research team reached a sample size of only 142 participants by the end of March 2001. Table 3 shows the final sample breakdown of interviews with seniors by region of last permanent residence and location of the interview.

Region	Toronto (GTA)	Ottawa	Hamilton	Total
Africa	7	2	1	10
South Asia	25	8	1	34
Philippines	4	2		6
China/Hong Kong	31	8	4	43
Caribbean	3			3
Latin America	3		1	4
Europe	27	8	5	40
Vietnam			2	2
Total Interviews	100	28	14	142

Table 3.Final Sample Breakdown of Interviews with Immigrant Seniors by
Region of Last Permanent Residence and Location of Interview

The majority of the participants were recruited through community agencies and other service providers. Therefore, when interpreting the results we need to recognize that many of the participants were service users.

Data Analysis

Key informant interviews are presented according to themes that have a direct bearing on the objectives of the study. The open-ended answers from the key informants about the significant issues and challenges facing new immigrant seniors were transcribed into a compatible format for the use of qualitative NVivo software. The research team developed a thematic coding scheme, which the software refined. Informants' views on availability, accessibility, utilization and gaps in settlement services are also presented in descriptive tables by city.

The data from the seniors were analyzed using the statistical software SPSS. Most of the data collected are descriptive in nature and were collected in close-ended questions that could be easily summarized using descriptive statistics (e.g., measures of central tendency, variation). The responses to open-ended questions were summarized and are presented in appropriate sections.

Finally, a comprehensive listing of settlement services available to new immigrant seniors was compiled and is presented in Appendix 1.

5. ETHICAL ISSUES

The research protocol was subject to review and approval by the University of Toronto Health Sciences Review Committee. All participants provided written, informed consent to participate in the research. Consent forms were translated into the dominant languages of South Asia, China, Europe, Latin America and Africa. Participants unable to read either their first language or English were read the consent form by the interviewer in order to obtain verbal consent. All data are presented in aggregate form and summarized in such a way as to ensure the anonymity of key informant and interview participants (see Appendix 5: Information Sheet and Consent Forms).

6. FINDINGS

Key Informant Interview Introduction

In total, 30 key informant interviews were conducted with representatives of agencies that provide services to senior immigrants. Fifteen interviews were conducted in Toronto, 10 in Ottawa and 5 in Hamilton. These agencies ranged from small, ethnospecific organizations to large, multi-cultural service agencies. The number of senior newcomers served by these agencies varied widely. The Toronto key informants reported that the number of newcomer senior clients they served ranged from less than 10 to 700 per year. In Ottawa, the number of newcomer seniors served ranged from 30 to 250 per year, and in Hamilton from 10 to 200 per year. Some key informants indicated that the seniors' programs at their agencies were not designed for newcomer seniors because of the perception that most newcomer seniors arrived in Canada because of the sponsorship arrangement with children and that the children subsequently took care of them.

Description of Services Offered by the Key Informants' Agencies

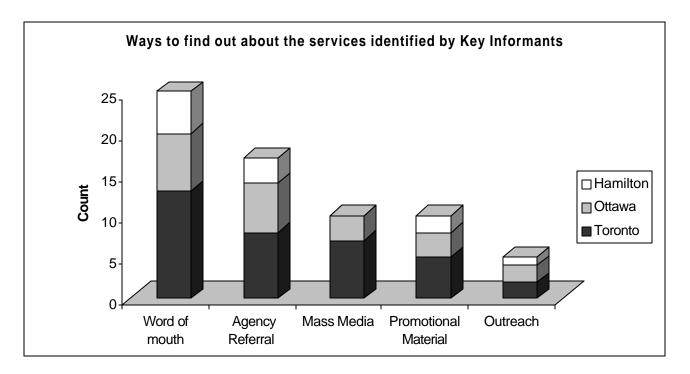
The 30 agencies offered a variety of services to immigrants and/or seniors. Six of these agencies are funded for ISAP programs. The non-ISAP funded agencies provided services that were similar to the ISAP programs, such as information and referral services, orientation service, translation, interpretation and escort services, and assistance with completing forms. Counselling services were also available for seniors to receive help with their adjustment and financial problems. Some agencies also provided social and recreational programs, such as outings, birthday parties, educational information sessions, self-help groups and drop-in centres. The key informants reported that these activities were specifically orgnanized to help seniors deal with their social isolation and to develop their own peer networks.

At least seven agencies offered language training, such as ESL and LINC programs, while four agencies HOST programs. Housing, financial, home visit and support services were available in a handful of agencies. Only one agency mentioned that they provided counselling for victims of elder abuse.

Information about and Access to Services

Figure 2 provides a summary of the methods used by senior newcomers to find out about services as identified by the key informants. Key informants were asked how newcomer seniors found out about their services. The most frequently reported method was word of mouth (n=25), which includes family, friends, relatives, neighbours as well as their own staff, who speak multiple languages. The second most frequently mentioned method of disseminating information about the agencies was through referrals (n=17) from organizations and service directories in the community, such as community access centres, religious organizations and other ethno-specific organizations. Many key informants (n=10) mentioned that the ethno-specific mass media, including newspapers, TV and radio programs, were crucial to reaching out to senior immigrants. Many agencies (n=10) have created their own promotional materials, such as flyers, pamphlets and newsletters which often are translated into multiple languages. A few key informants (n=5) indicated that outreach, particularly placing information at the port of entry, was also useful.

Figure 2. Methods of Finding Out About Services Available to Seniors by City



Newcomer Seniors' Needs and Problems

Figure 3 summarizes the key informants' perceptions of the most important needs and problems newcomer seniors faced. According to the key informants, the most serious problems confronted by newcomer seniors were related to language issues (n=21) as shown in Figure 3. The key informants reported that language barriers were commonly encountered by almost all newcomer seniors who were from non-English speaking countries. Without language skills in English or French, many newcomer seniors were unable to access services, such as consulting a doctor, and they reportedly were hesitant to explore the community by themselves. In turn, the inability to speak the main language may have contributed to their social isolation (n=19), which was identified as the second major difficulty of this group of seniors. Loneliness, stress, emotional problems, and loss of self-esteem are often related to social isolation so it comes as no surprise that the key informants also reported that many seniors faced emotional problems as well as health problems (n=11).

Newcomer seniors frequently had to depend on their children for various needs. Most of their children were also busy at work and did not have the time to attend to all their needs. Some key informants reported that family conflicts (n=11) occurred due to financial hardships in the family, in-law conflicts, and intergenerational differences. The occurrence of elder abuse was reported by at least seven of our key informants as a problem. According to the key informants, under the sponsorship system seniors cannot obtain any social assistance, which reinforces the seniors' dependence on their children. Even when abused by family or in conflict with their children, newcomer seniors may not be able to ask for help.

More than half of the key informants reported that, many newcomer seniors who wanted to be independent of their children and live on their own, may not have had the financial resources to do so, or may have faced other financial problems. To help these seniors to be independent, the key informants indicated that the problems of financial distress (n=13) and the need for independent housing (n=10) would have to be addressed. According to many key informants, transportation and mobility were also serious problems that some newcomer seniors encountered (n=8). According to the key informants, the seniors often had to rely on their children to drive them around. The Canadian climate was also reported to be a trial for some newcomer seniors (n=4).

A few key informants felt that the lack of peer networks or supports and recreational activities were critical issues for many newcomer seniors who were home bound (n=4). In the view of a few key informants (n=4), the lack of settlement services and information (n=3) may deter the newcomer seniors from asking for help in the community.

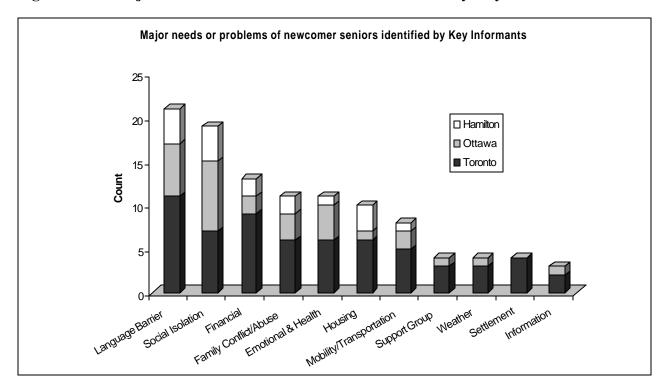


Figure 3. Major Needs and Problems of Newcomer Seniors by City

Unique Needs of Newcomer Seniors

Figure 4 illustrates the unique difficulties newcomer seniors may face according to the key informants. The three most important special needs of newcomer seniors were language problems (n=13), financial dependence (n=13) and difficulties adapting to the culture of Canada (n=13). As indicated by the key informants, language barriers restricted the seniors' access to services and discouraged them from going out. Some key informants reported that the seniors found it extremely difficult to learn a new language and therefore, they required language specific social supports.

Financial distress was unique to the seniors because their chances of employment were low; reciprocal pensions from countries of origin were not always available and social assistance was not a choice. The end result was that the senior had to turn to their family for financial support. As stated by the key informants, financial dependence, together with language barriers, contributed to a higher psychological vulnerability of the seniors. Many of our key informants (n=11) hypothesized that the newcomer seniors

may have felt that they had lost their independence and social status, previously enjoyed in their home countries. These feelings of loss were seen to affect the seniors' self-esteem and to lead to feelings of hopelessness and helplessness. There was some suggestion that several newcomer seniors may even have felt unwanted.

The cultural and natural environmental elements of their new country, particularly the cold weather, were reportedly unique factors that many newcomers found difficult to overcome in their adjustment to Canada. The key informants (n=10) also mentioned that the process of aging and the presence of long term health conditions posed unique problems for newcomer seniors because these health conditions could influence their employment opportunities, while, simultaneously, the sponsorship system restricted their access to social assistance.

The key informants in Hamilton and Ottawa saw some differences in the unique difficulties of newcomers to their cities when compared to Toronto. Some of the key informants in Ottawa and Hamilton (n=8) indicated that newcomer seniors were less mobile because many could not drive or did not know how to use the public transportation system. The cold weather in winter also limited their mobility and made their adjustment to Canada all the more difficult. Social isolation, as some key informants reported (n=7), was a common situation for many newcomer seniors as was the greater need for peer support, particularly from people of the same ethnic background. One of our key informants suggested that newcomer seniors had a great need for social affiliation, which supported their fast disappearing social identity.

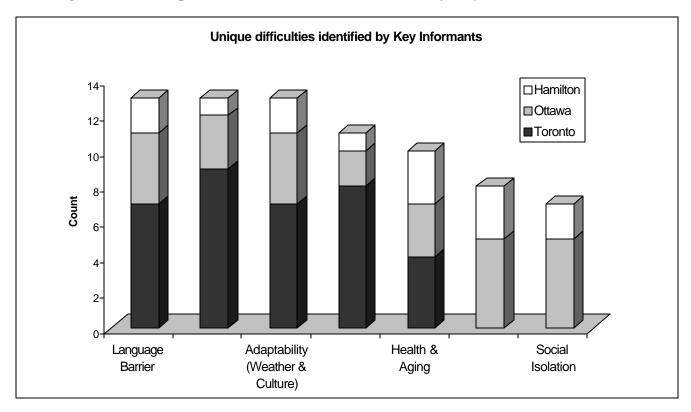


Figure 4. Unique Difficulties of Newcomer Seniors by City

Barriers to Providing Services to Senior Newcomers

Figure 5 summarizes the observations made by the key informants about major barriers to providing services to newcomer seniors. Most key informants (n=19) reported that the language problem was the major barrier to serving this population for several reasons. Many agencies reported that they did not have language specific staff to serve ethnic minority seniors and the services provided by the key informants' agencies were in fixed locations. Seniors, who lived in different parts of the cities, had problems reaching the agencies because of the already mentioned transportation problems, particularly in the winter (n=10). As stated by the key informants, culture presented another barrier to service usage. Key informants (n=9) commented that many newcomer seniors were not "open enough" to adjust to and to accept the culture found in existing services, mainly because many of the existing services were not culturally sensitive. For instance, the example they gave was that most meals-on-wheels services did not provide ethnic food. A few of the key informants (n=8) mentioned a lack of funding, which prevented them from delivering culturally appropriate services to newcomer seniors. Social isolation, as reported by a few key informants (n=5) made these seniors unreachable, while the weather also prevented them from accessing services (n=5). Because all services are not free, a few key informants (n=4) suggested that newcomer seniors may not have been able to afford to pay for these services.

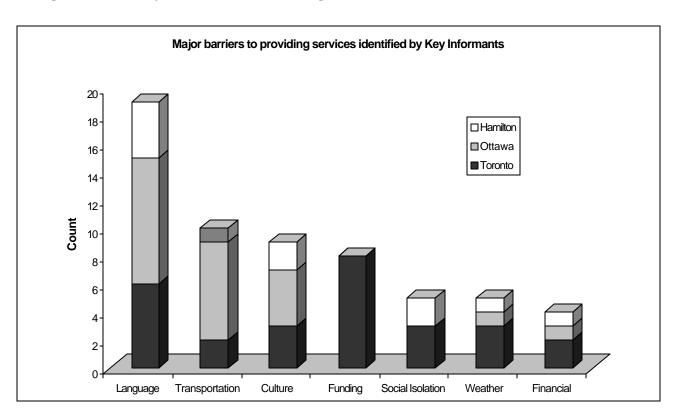


Figure 5. Major Barriers to Providing Services to Newcomer Seniors

Gaps in Information and Services for Newcomer Seniors

Figure 6 summarizes the gaps in information and services for newcomer seniors as identified by the key informants. Most of the key informants noted major deficiencies in the information and services available to newcomer seniors. In terms of information, many key informants (n=10) attributed insufficient information to a lack of language specific information. Dissemination of information was also seen to be part of the

problem by some key informants (n=7). According to the informants, the port of entry is a strategic location to disseminate service information in different languages. Some key informants pointed out, however, that there is little communication and/or co-ordination between the immigration department and the service agencies about the arrival of the newcomer seniors and as a consequence many newcomers feel lost in the community without proper supports. The key informants suggested that if appropriate information could reach the seniors before they came to Canada, it could create a better understanding of life in Canada for them and might help the potential newcomer make a more informed immigration decision.

Information that could help newcomer seniors settle was seen to be inadequate, and out-of-date by five key informants, and too decentralized by two key informants. The key informants suggested that information given to seniors should cover all aspects of the services that would be useful in their settlement, particularly information about financial support (n=2). In contrast, one key informant indicated that it was confusing to give all information to seniors at one time and suggested that information should be offered according to when the senior would require the information in the settlement process. Many newcomer seniors and their families reportedly did not access services because they did not know of their existence, so a few key informants (n=4) suggested that it was important for agencies to do outreach, sending multi-lingual staff into the community and even to the homes of seniors and their families.

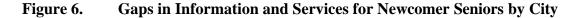
As would be anticipated, the key informants (n=9) made the point that more resources were needed for more structured social and recreational programs, retirement home services, transportation services, financial assistance and interpretation services. Family counselling and educational programs were also identified as needed to help both the family and the seniors adjust to their new environment. A few key informants mentioned that although there were some services and resources available to help these seniors, there was no co-ordination among agencies and between government departments and service agencies. In addition, informal supports for the seniors, such as

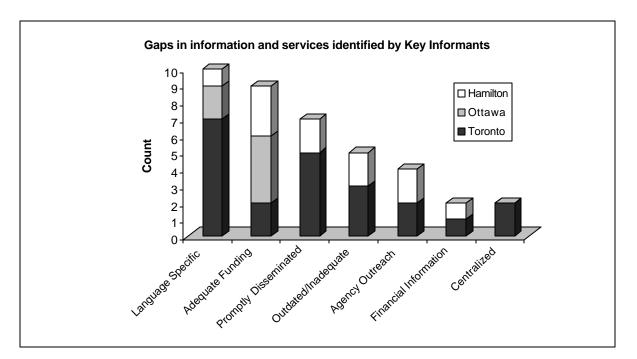
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senior support networks, community supports, and cultural and religious activities were also in short supply.

The key informants in Hamilton also observed that the issue of internal secondary migration of newcomer seniors created a funding problem for service providers. One key informant reported that 50 percent of the clients in her agency were from other parts of Canada, while funding granted to cities for newcomers is based on where immigrants first landed.

Among the many comments, an important observation was made that the expertise of the seniors was not being taken advantage of by the community, to the detriment of the community. The key informants believed that the newcomer seniors could be strong resources for the community, particularly in educating and supporting the younger generation that shared the same cultural heritage as the senior.





Responding to Newcomer Seniors' Needs

Figure 7 illustrates the suggestions made by the key informants about the most effective ways of assisting newcomer seniors to settle in Canada. According to the majority of the key informants, peer supports (n=14) and culturally/language sensitive services (n=9) would be the best and most effective ways of assisting newcomer seniors to settle in Canada. Meeting with seniors from their own ethnic background would provide emotional support through the sharing of collective memories of their home countries and possibly would reduce feelings of homesickness. Also, some key informants commented that newcomer seniors need to become more integrated into the life of their new country and suggested that more community-based programs and social groups targeted at groups of newcomer seniors would be helpful in achieving this goal. Some informants proposed that newcomer seniors be formally connected with their own ethnic groups as a first step towards integration before they could be expected to meet with seniors from other ethnic groups.

Key informants reported that newcomer seniors had a greater need for culturally sensitive and language-specific programs. In their perspective, workers should be knowledgeable about seniors' countries of origin and have the language skills to serve them. Literature should also be language specific. A few key informants (n=2) also mentioned that it was important to work with sponsoring families and to educate adult children about their parents' needs. In terms of senior-specific services, the key informants mentioned the need for financial assistance (n=8), English training (n=5), transportation services (n=5), housing and shelter services (n=4), and free health services (n=2).

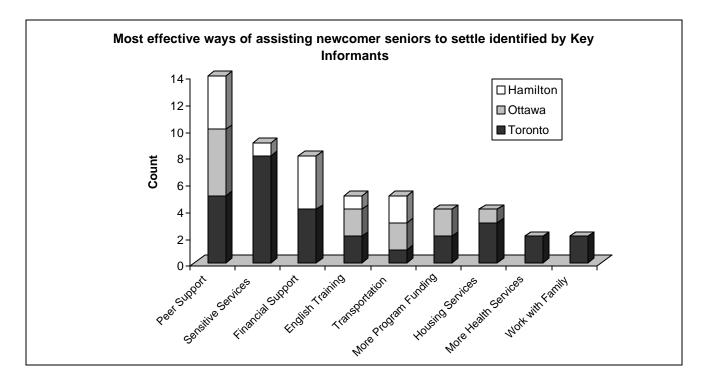


Figure 7. Most Effective Ways of Assisting Newcomer Seniors to Settle by City

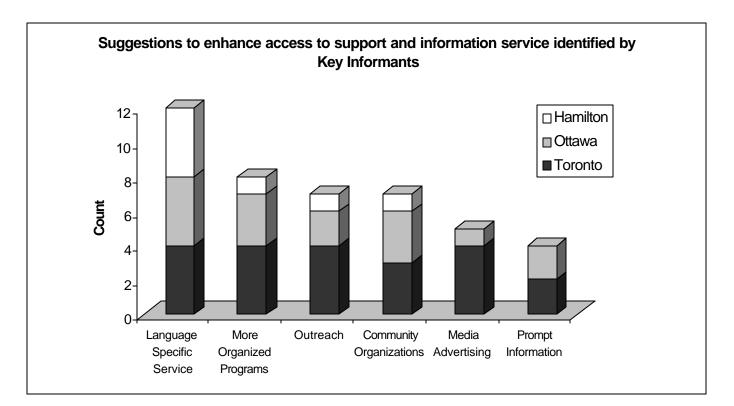
Accessing Services when the Services are Unknown to Newcomer Seniors

Figure 8 summarizes the suggestions for improving newcomer seniors' access to support and information services. The key informants made a number of specific suggestions about how to assist newcomer seniors who want to access support and information services but do not know how. First, to overcome the language barrier (n=12), language-specific, printed information should be made readily available to the newcomers. Several key informants also commented on the importance of having more language-specific staff available to serve newcomer seniors. One key informant suggested that the introduction of telephone services to seniors could help alleviate the social isolation problem experienced by some newcomer seniors. There was also the thought that seniors could connect with other seniors in their own community in this way.

Some key informants (n=8) suggested that more structured services be provided that are expressly targeted at newcomer seniors. The targeted services mentioned

included groups, workshops, recreational programs and language training. Another important suggestion from the key informants (n=7) was to increase outreach efforts to seniors. Community organizations, as suggested by some key informants (n=7), could be instrumental in enhancing the access to services. The mass media was seen to be a unique medium to enhance the access to services by at least five key informants. Transportation supports and interpretation services were also seen as important mechanisms for encouraging the seniors to participate in their communities.

Figure 8. Enhancing Access to Support and Information Services



Summary

According to the key informants, the most significant challenges facing newcomer seniors included cultural and language barriers, financial dependence, adaptability to the harsh winter weather, loss of status and identity, problem with health and aging immobility due to transportation difficulties, and isolation from the community. These difficulties were thought to influence seniors in a number of harmful ways. Seniors could experience low self-esteem because of the loss of status, independence and financial control and they could experience increased loneliness because of social isolation. It was reported that some seniors also suffered from family conflicts and abuse. Meanwhile, agencies that provided services to seniors were experiencing their own difficulties. Many key informants reported that service information might not reach newcomer seniors and their families because insufficient agency resources limited the service providers' ability to do outreach and provide structured programs in a linguistically and cultural sensitive manner.

Interviews with Newcomer Seniors

Sample

One-hundred-and-forty-two newcomer seniors completed face-to-face interviews, which included 100 in Toronto, 28 in Ottawa and 14 in Hamilton. In total, 22 trained interviewers conducted the 142 interviews in 24 languages with senior participants. Bilingual interviewers translated the questions into the language of the participant. For the most part, open-ended responses and comments were written in the language of the participant and translated by the interviewer for data entry and analysis. Table 4 shows the languages represented in the sample. An interpreter was used for only eight interviews. The length of the interviews averaged two hours.

Table 4.Language	ge of Interview
Language of Interview	Number of Interviews
AKAN/TWI	7
Albanian	4
Bosnian	2
Cantonese	17
Dari	12
English	7
French	1
Gujarati	4
Hindi	1
Katchi	2
Mandarin	25
Polish	9

Language of Interview	Number of Interviews
Punjabi	4
Romanian	1
Russian	19
Serbian	4
Somali	3
Spanish	4
Tagalog	4
Tamil	4
Urdu	6
Vietnamese	2
Total	142

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Background Characteristics of the Senior Newcomers

Demographic Profile

The sample was evenly distributed between men (44%, n=63) and women (56%, n=79), and closely matched the Canadian population 65 years of age and older (57 % women, 43 % men, 1996) (see Figure 9).

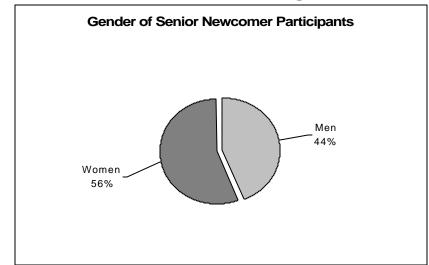


Figure 9. Gender of Senior Newcomer Participants

The age of the participants ranged from 65 to 88 years old, with an average age of 70 (median=70.42, std.dev=4.79). When divided into age groups, 49 percent were aged 65 to 69; 43 percent were aged 70-74; 11 percent were aged 75 to 79; 6 percent were aged 80 to 84 and 1.5 percent fell in the 85 to 89 age group. Overall, the age distribution of the sample was more heavily tipped toward the younger age categories when compared to the Canadian population over age sixty-five. The comparable national percentages are 31 percent for those 65-69; 27 percent for those aged 70-74; 21 percent for those aged 75 to 79; 13 percent for those aged 80-84 and 7.5 percent for those in the 85 to 89 age category.

In terms of their family status, sixty-two percent (n=88) were married, a slightly higher proportion than the 55.6 percent for the national population over age sixty-five. Thirty-two percent (n=46) were widowed, 5% (n=7) were separated or divorced, and one participant was single/never married. One-hundred-and-forty-one (99%) of the

participants had children. The number of children ranged from 1 child to 12, with an average family composition of 3.6 children (median=3.0, std.dev=1.42).

Thirty-one percent (n=44) of the seniors reported that all their children lived in Canada, while 67% (n=94) had some children living in Canada and some living in other countries. Only 1% (n=2) had no children living in Canada.

As was anticipated, the majority (93%, n=131) of the participants lived with at least one other person. Only 10 seniors reported living alone. The average number of people living in a senior's household was 2.8 (median=2.0, std.dev=2.08). Primarily, the household composition included immediate family members such as a spouse, children and grandchildren.

Table 5 shows that the majority (85%, n=120) of seniors were family-sponsored, landed immigrants. Because study eligibility criteria stipulated that participants were eligible for inclusion only if they had been in Canada for a minimum of one year and a maximum of five years, the length participants had been in Canada fell within this range. The average length that participants had resided in Canada was 3.1 years (median=3.0, std.dev=1.42). There was no difference in the length of time in Canada between participants living in Toronto, Ottawa and Hamilton.

What is your current immigration status?	Percent	n
Landed Immigrant (Family)	84.5	120
Landed Immigrant (Economic)	0.7	1
Landed Immigrant (Government sponsored)	4.2	6
Landed Immigrant formerly a Convention Refugee	1.4	2
Citizen less than 5 years	9.2	13
Total	100.0	142

Table 5.Current Immigration Status

We asked the seniors about their ability to speak, read or write English or French. Figure 10 illustrates that very few of the seniors reported good or excellent skills in English. Most rated their ability to speak, read or write English as poor or non-existent. Over 95 percent of the seniors reported no proficiency in French.

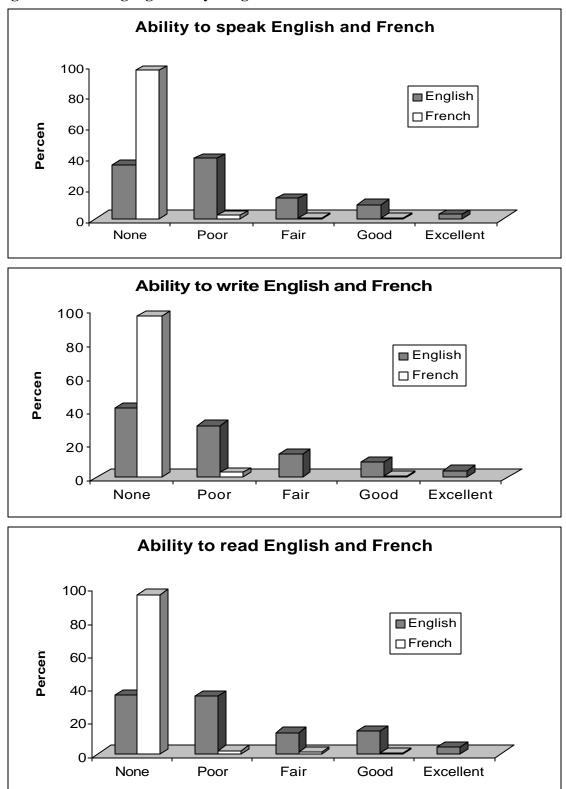


Figure 10. Language Ability: English and French

Health Status

Health status is an important factor in adjusting to a new environment, particularly for an older person. Poor health can affect one's social interactions, one's ability to communicate, one's mobility and overall sense of satisfaction with life. Although Canadian research has consistently shown that immigrants are at least as healthy or healthier than the general Canadian population, the data in Table 6 suggest otherwise. Table 6 shows seniors' responses when asked to describe their health. About 7 percent of the sample reported their health as excellent; 18 percent perceived their health to be very good, while 30 percent of the seniors rated their health as good. Close to 35 percent rated their health as fair while a rather large proportion of seniors – 11 percent -- rated their health as poor. In the Statistics Canada National Population Health Survey, 1996-1997, Canadians 65 and over rated their health as follows: excellent, 12 percent; very good, 28 percent; good, 38 percent; fair, 16 percent and poor, 6 percent. Almost half the newcomer seniors rated their health fair to poor compared to about 22 percent of older persons in the Canadian population. This finding is surprising in light of the higher educational levels of these newcomers and the fact that the literature suggested that older immigrants were, by and large, healthier. Moreover, all new immigrants have to undergo extensive medical exams before they immigrate to Canada.

How would you describe your state of health? Compared to other persons your age, would you say it		
was	Percent	n
Excellent	7.1	10
Very good	17.7	25
Good	29.8	42
Fair	34.8	49
Poor	10.6	15
Total	100.0	141
Don't know		1

Table 6.Self-Reported Health of the Senior Participants

In addition to self-reported health status, we inquired about the number of visits to health care professionals in the past year and about a series of long term health conditions. The number of visits to health care professionals were consistent with the seniors' lower evaluation of their health status but the number of chronic conditions reported were the same as the Canadian population. The participants reported a higher number of visits to a family doctor than the national averages for older Canadians (mean =8.19, median=5.00, std.dev.=7.76 versus mean =5.15, median = 3.00, std.dev. 5.79). Also, these participants reported slightly higher rates of visiting dentists, eye specialists and other medical specialists than older Canadians overall. However, when we asked about long term health conditions, the senior newcomers reported very similar rates of incidence of these conditions to that of the older Canadian population. The most frequently cited conditions were arthritis/rheumatism (44%, n=63 vs. 42% national average), high blood pressure (34%, n=48 vs. 33% national average), heart disease (21%, n=30 vs. 16% national average), and stomach problems (19%, n=27, vs. 11% national average) mental health disorders (2.8, n=4, vs. 3% national average).

There could be any number of explanations for these findings. Possible methodological factors may have influenced the findings such as the sample was not random, short term illnesses like the flu were not captured in the questionnaire; the seniors may have been "doctor shopping"; or, they may have been combining traditional and western specialists in their counts of health care worker contacts. The larger number of visits could also represent their need for attention and social support, especially if their doctor was from the same ethnic group. There was also the possibility that the newcomers had culturally based differences in perceptions of their health (Wallace, 2000).

Whatever the explanation, the poorer self-rating of health is an important finding that has serious implications for service access and use, and all the more so, since the age distribution of the sample was weighted in favour of a younger group of seniors. Even when we compared the self-rating of health status by age groups against younger ages in national data, the newcomer seniors group still rated their health lower, on all but one item. The national population of older Canadians between the ages of 65 to 74 years rated their health as follows compared to our sample: 13% compared to 8 % percent excellent;

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29 % very good vs. 21 %; 38 % good vs. 41 %; 15 % fair vs. 34 %, 5 % poor vs. 13 % poor.

Educational, Employment and Financial Background

Table 7 shows the highest level of education attained by the senior participants. Half of the participants (51%, n=72) reported that they had completed high school or had less education, 20 percent (n=25) had some post secondary school education, and 28.9 percent (n=41) reported completing university. Thirty-eight of the participants who reported completing university were from either Europe or China. The high number of university graduates in our sample when compared to national averages for the older Canadian population (28.9 percent vs. 8.1 percent, 1996) indicated that the seniors in this study were well above the national averages for education.

What is the highest level of education that you have completed?	Percent	n
No formal schooling	16.2	23
Some elementary	11.3	16
Completed elementary	6.3	9
Some high school	8.5	12
Completed high school	8.5	12
Some vocational	3.5	5
Completed vocational	7.0	10
Special diploma	6.3	9
Some university	3.5	5
Completed university	28.9	41
Total	100.0	142

Table 7.	Highest l	Level	of Education

As indicated above, we asked the participants about their current employment status and the employment status of their spouse. Table 8 shows that over three-quarters of seniors reported being retired. Seven percent (n=11) of the participants and 9 percent (n=8) of the spouses had never worked in the paid labour force. Approximately 10 percent of participants (n=13) and spouses (n=6) were working or looking for paid employment – a higher proportion than the 6 percent of older Canadians who work past age sixty-five (National Labor Force Survey, 2000). Seniors working full or part-time

most frequently reported that their jobs were positions such as caregivers/babysitters, factory workers, dishwashers or hotdog stand vendors. Looking at Table 9, which reports occupation prior to coming to Canada, there is some suggestion that the older workers were unable to match their skills and their new jobs, indicating some downward mobility in job status.

	Participant's employment status		Spouse's employment status	
What is your present employment	Percent	n	Percent	n
status?				
Retired	76.1	108	78.4	69
Working full-time	4.2	6	3.4	3
Working part-time	3.5	5	2.3	2
Looking for a job	1.4	2	1.1	1
Not working but would like to	4.2	6	2.3	2
Never worked (e.g., homemaker)	7.7	11	9.1	8
Other	2.8	4	3.4	3
Total	100.0	142	100.0	88
N/A (not married/widowed)				54
Total				142

 Table 8.
 Present Employment Status of the Participants and Their Spouses

To further explore the socio-economic characteristics of the participants, we asked about their own and their spouse's major occupation before coming to Canada. Table 9 shows that a large proportion of the seniors and their spouses worked in professional and skilled occupations, a finding consistent with their high level of education reported in Table 7. Examples of the professional occupations included: teachers (n=19), doctors (n=7), professors (n=6), engineers (n=4), and pharmacists (n=2).

	Participant's employment status		Spouse's employment status		
Major occupational category before coming to Canada?	Percent	n	Percent	n	
Professional	37.9	53	45.3	58	
Business/Managerial	5.7	8	14.1	18	
Skilled worker	14.3	20	11.7	15	
Semi-skilled worker	13.6	19	5.5	17	
Unskilled worker	9.3	13	7.0	29	
Homemaker	19.3	27	16.4	21	
Total	100.0	140	100.0	128	
Missing- N/A -not married/widowed		2		14	
Total				142	

Table 9.Main Occupational Category of the Senior Participant Before Coming
to Canada

When we asked about total family household income, very few participants were able to or wanted to disclose this information. Only 50 percent (n=71) of the participants could identify their total household income category for the past year. We defined household income as income from all members of the household. Over two-thirds (70%, n=50) of the participants who could identify their household income reported a household income less than \$20,000. This finding is highly suspect, since over half the seniors could not answer this question, and those who answered may have been just guessing at a response. The low response rate is not uncommon in most national surveys. In the survey on *Ageing and Independence, 1991* the response rate for household income was 65 percent and 75 percent for personal income. In the *General Social Survey, 1996*, the response rate for family income was 63 percent and for personal income 78 percent. It is also likely that the seniors in this group would be less privy to information about household income since they were living primarily with children and depending on their children's income rather than living independently with a spouse as in the case of the older population in Canada.

To further explore their financial situation, we asked participants whether they had a personal source of income. Approximately one-third (n=51) of the seniors reported having a personal source of income. Receiving a government pension from their home

country (n=18) was the most frequently mentioned source of income, followed by wages and salaries (n=10), savings (n=8), income from self-employment (n=3), company/private pension (n=3) and other sources such as inheritance, estate, alimony, etc. (n=1).

Some participants (11%, n=16) reported that they contributed financially to their family or extended family. Those who had financially contributed to their families most frequently reported that the funds were used for daily or monthly expenses (see Table 10).

Table 10.Financial Contributions to Family

Do you make (or have you made) any financial contributions to your family or extended family?		
	Percent	n
No	88.7	125
Yes	11.3	16
Total	100.0	141
Refused to answer		1
What types of contributions have you made?	Percent Yes	n=16
Loans	6.3	1
Down payment for house	12.5	2
Daily/monthly expenses	75.0	12
Other	6.3	1

* Participants had the opportunity to choose more than one category; therefore, the table represents the percent of yes responses to each category listed.

Experiences Prior to Coming to Canada

Having some knowledge about the experiences of the newcomer seniors prior to coming to Canada, and the circumstances under which they arrived, is important in understanding their needs and the amount of control they had in their decision to come to Canada. Table 11 shows the country of birth reported by the senior participants.

n what country were you born?	Percent	n
Afghanistan	8.5	12
Belarus	0.7	1
Bosnia	1.4	2
Chile	0.7	1
China	28.2	40
Ghana	4.9	7
Hong Kong	0.7	1
India	7.7	11
Jamaica	0.7	1
Kenya	0.7	1
Kosova	2.8	4
Latvia	0.7	1
Moldavia	1.4	2
Pakistan	2.1	3
Peru	0.7	1
Philippines	4.2	6
Poland	6.3	9
Romania	1.4	2
Russia	2.8	4
Singapore	0.7	1
Somalia	2.1	3
Sri Lanka	3.5	5
St. Kitts	0.7	1
Tanzania	0.7	1
Trinidad and Tobago	0.7	1
Ukraine	7.7	11
Venezuela	1.4	2
Vietnam	2.1	3
Yugoslavia	2.8	4
Zanzibar	0.7	1
Total	100.0	142

Table 11.Country of Birth

We asked participants if they had moved to Canada directly from their country of birth. Table 12 shows that over two-thirds of the participants moved to Canada from their home country. Approximately one-third of the seniors moved to Canada from a variety of other countries listed in Table 12. The length of time participants lived in those other country ranged from less than one year to 63 years; the median length of time was 9 years (mean=18.00, std.dev=19.36).

Did you move to Canada directly from the country of your birth?	Percent	n
No	35.9	51
Yes	64.1	91
Total	100.0	142
n which country were you living just before moving to Canada?	Percent	n=51
Albania	3.9	2
Azerbaijan	3.9	2
Bahrain	2.0	1
Central Africa	2.0	1
China	2.0	1
Dubai	2.0	1
Germany	2.0	1
Hong Kong	19.6	10
India	2.0	1
Israel	21.6	11
Kenya	3.9	2
London	2.0	1
Macedonia	2.0	1
Pakistan	21.6	11
Russia	2.0	1
Slovia	2.0	1
South Africa	2.0	1
Tsraee	2.0	1
United States	2.0	1
Total	100.0	51
N/A Country of Birth		91
Total		142

Table 12.Moved to Canada Directly from Country of Birth

* Participants had the opportunity to choose more than one category; therefore, the table represents the percent of yes responses to each category listed.

The majority (90%, n=128) of the seniors lived with family just prior to coming to Canada. Only 10 percent (n=14) stated they lived alone. The average number of people living in the household was 2.8 (median=2, std.dev=2.5, range 0 to 10 persons). Eightyone percent (n=115) of the participants stated they lived in a city prior to coming to Canada. On one level, the seniors did not change their housing arrangements dramatically when they immigrated to Canada since the majority came from a situation where they lived in a complex household with approximately the same number of family members.

To gain an understanding of the number of participants who used services before coming to Canada, we asked seniors if they received any help from agencies before coming here. Table 13 shows that one-quarter of the seniors had used some types of services. Financial assistance (e.g., welfare, social assistance, etc.), followed by social services (e.g., seniors' groups/programs, church groups, etc.) were the most frequently reported services used.

Did you receive any help from agencies before coming to Canada?	Percent	n
No	74.6	106
Yes	25.4	36
Total	100.0	142
What agencies before coming to Canada?	Percent Yes	n=36
Health service	11.1	4
Social service	47.2	17
Financial assistance	52.8	19
Other	38.9	14

* Participants had the opportunity to choose more than one category; therefore, the table represents the percent of yes responses to each category listed.

We asked participants to explain their main reason for immigrating to Canada. Table 14 shows that the majority of seniors came here to be with their children.

 Table 14.
 Main Reason for Coming to Canada

Thinking back, what would you say was your main reason for coming to Canada?	Percent	n
Refugee	1.4	2
Be with children	71.1	101
Be with relatives	1.4	2
Better way of life	2.8	4
Take care of family	3.5	5
Be taken care of	0.7	1
Closer to family	4.9	7
Better health care	0.7	1
War-related	9.2	13
Political reasons	3.5	5
Multicultural/peaceful country	0.7	1
Total	100.0	142

Table 15 shows that 87 percent (n=124) of the participants reported being sponsored by their children to come to Canada.

Who sponsored you to come to Canada?	Percent	n
No one	4.2	6
Child	87.3	124
Spouse	0.7	1
Other relative	0.7	1
Friend	0.7	1
Canadian government sponsor	3.5	5
Convention refugee	2.8	4
Total	100.0	142

Table 15.Sponsor of the Senior Newcomers

Only one-quarter (25%, n=35) of the seniors knew anyone else in Canada when they arrived, other than their sponsor or their sponsor's family. Of those who knew others in Canada, 29 percent (n=10) had siblings here, 34 percent (n=12) knew other relatives, and 31 percent (n=11) knew friends in Canada.

We also asked participants directly if they wanted to come to Canada. Table 16 shows that the majority of seniors wanted to come here.

	Semeral recommendation of the second	come to cunuuu	
Did you want	to come to Canada?	Percent	n
No		11.3	16
Yes		80.1	113
Don't l	know/can't say	8.5	12
Total		100.0	141
Missin	g		1

Table 16.Senior Newcomers' Wish to Come to Canada

When asked to explain their answer, the majority who stated they wanted to come to Canada, commented that they wanted to live with children who had already settled here. Many mentioned the importance of a better way of life in Canada, including better social services for seniors, a democratic political environment, a beautiful country, and friendly people. Others mentioned that, compared to the undesirable conditions in their home countries which, sometimes included wars and poor economies, Canada offered a better place to live. Some of the respondents stated:

"Yes, I want to be with my children. Better welfare services are provided for the seniors. The country is beautiful and clean." "Yes, both of my children live in Canada. Practically, I have no family in Poland, except for my wife's relatives."

"Yes, due to the war situation in my country, my family and I lived in Pakistan with no safety and a great deal of social and economical problems."

The senior participants who indicated that they did not want to come to Canada gave three main reasons: 1) they were asked to come help their family, particularly their children; 2) they had no other choice, either because they were alone in their home country, or they had to come with their spouses; and 3) they did not like the cold weather in Canada. The following statements capture the flavour of their responses:

"No, I did it for my husband, he was more enthusiastic and decided to do it. I followed him, like I always have."

"No, I had no choice because my youngest son was also migrating to Canada too."

"No, because I know Canada was cold and I could not extend my visa in Africa."

Table 17 shows, that over half of the participants felt they had complete control over their decision to come to Canada, however, approximately 22 percent of the participants had little or no control over their decision to immigrate. This smaller group of newcomers may be more vulnerable throughout the adjustment process and may have special needs that should be addressed in light of their reluctance to come to Canada.

In your opinion, how much of a "choice" did you have over the decision to come to Canada?	Percent	n
Complete control	61.0	86
Great deal	15.6	22
Some	11.3	16
Not much	5.0	7
No control	5.7	8
Don't know	1.4	2
Total	100.0	141
Missing		1

Table 17.Degree of "Choice" Over Decision to Come to Canada

Social Activities and Social Integration

We examined the social activities and social integration of the senior participants. Good health, financial security and social integration are important indicators of wellbeing and independence. For newly arrived immigrants, social isolation would be an increased risk, especially for seniors.

To explore senior participants' activities and social supports, we asked a general question about their daily activities or routine on a typical day . Among all the major daily activities, watching TV (n=80) (either ethnic-specific channels or videos) was the most popular activity. Although a direct comparison cannot be made to the national population due to measurement differences, television viewing accounts for the largest share of the free time of all older Canadians. The second most frequently mentioned activity was exercise (n=55), also an important activity for over 50 percent of older Canadians. Next was reading newspapers and books, and listening to radio (n=21). Thirty-eight participants mentioned studying English as part of their daily routine, and 31 mentioned attending religious activities, such as going to church or to a mosque. Twenty-three mentioned visiting friends and family or going to a community centre.

Many participants also mentioned that they had certain household duties, such as housekeeping work (n=78), caring for grandchildren (n=49), cooking (n=45) and shopping. Only seven participants indicated that they were working (see Figure 11). It is possible that these activities might have served to inhibit their participation in community activities since they appeared to occupy a significant component of their time as seen in the next table.

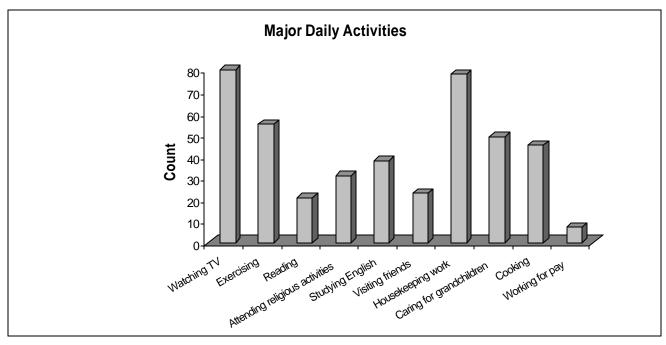


Figure 11. Daily Activities or Routines on a Typical Day

* Participants had the opportunity to choose more than one category; therefore, the figure represents yes responses to each category listed.

Table 18 illustrates the amount of time participants spent on various activities and tasks in a typical week. The most frequently mentioned activity was housework, followed by shopping, listening to or watching mainstream radio/TV, reading ethno-specific literature, listening to or watching ethno-specific radio/TV, visiting relatives or friends, and providing child care to grandchildren. The most time-intensive activities reported by the seniors were housework and childcare, both tasks that would tie the newcomers to their homes.

We also were interested in exploring seniors' participation in activities outside the home, whether ethno-specific or mainstream. Table 19 lists ethno-specific and mainstream organizations that participants reported attending. Participants were asked how often they attended any of these groups or activities. Very few reported attending any mainstream or Canadian organizations in the past year, although twenty-five percent (n=33) reported attending mainstream ESL classes.

Only a minority of the seniors reported participation in any ethno-specific organizations. Approximately one-third of the seniors stated they attended community centre activities, seniors centre groups and social or religious gatherings in people's homes. Recreational groups, ESL classes and cultural groups were mentioned by approximately 25 percent of the participants. The only organization that the majority (65%, n=92) of seniors reported attending was an ethno-specific religious or church group. Forty-four percent (n=62) reported attending religious activities at least once a week compared to 37 percent of seniors in the older Canadian population.

When asked about contact with family and friends most participants reported frequent contact with family living in Canada, but not with their immediate family living outside Canada. Approximately three-quarters of the participants reported contacts with friends in Canada, and half reported contacts with neighbours. Only half of the participants indicated contact with friends outside Canada. When asked about the quality of their social network, 38 percent (n=52) stated they had a strong network, 35 percent (n=48) said they had an average network, 24 percent (n=32) reported a weak network, and 3 percent (n=4) reported they had no social network (see Table 20). Even though social isolation was identified as a problem by the key informants, it is encouraging to note that over 70 percent of the seniors thought they had strong to average social networks indicating at minimum, that there was potential to build social relationships amongst the newcomers.

Table 18.	Time Spent Doing Activities in a Typical Week
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Thinking about a typical week, how much time do you usually spend doing any of the following activities?	None	< 1 hour	1-5 hours	6-10 hours	11-20 hours	> 20 hours	Total
	Percent	Percent	Percent	Percent	Percent	Percent	Percent
	n	n	n	n	n	n	n
Reading (ethno-specific) newspapers or magazines	24.6	8.5	22.5	21.1	16.9	6.3	100.0
	35	12	32	30	24	9	142
Reading (mainstream/Canadian) newspapers or Magazines	62.0	11.3	14.8	10.6	1.4		100.0
	88	16	21	15	2		142
Watching TV/listening to radio (ethno-specific)	26.2	7.1	16.3	23.4	19.9	7.1	100.0
	37	10	23	33	28	10	141
Watching TV/listening to radio (mainstream/Canadian)	19.0	9.2	26.1	23.9	14.8	7.0	100.0
	27	13	37	34	21	10	142
Doing housework	13.6	3.6	21.4	21.4	20.0	20.0	100.0
	19	5	30	30	28	28	140
Doing yard work	76.3	4.3	8.6	8.6	0.7	1.4	100.0
	106	6	12	12	1	2	139
Providing child care to your grandchildren	47.5	3.5	12.8	8.5	15.6	12.1	100.0
	67	5	18	12	22	17	141
Providing child care to other children	92.2	2.1	2.1		0.7	2.8	100.0
	130	3	3		1	4	141
Visiting relatives or friends	48.2	15.8	20.9	10.8	3.6	0.7	100.0
	67	22	29	15	5	1	139
Going out shopping for groceries, clothes or other things you need	16.3	13.5	45.4	17.7	4.3	2.8	100.0
	23	19	64	25	6	4	141
Doing volunteer work for a group or organization	85.2	5.6	5.6	2.1	1.4		100.0
	121	8	8	3	2		142
Working for pay	90.8	0.7	2.8	1.4	0.7	3.5	100.0
	129	1	4	2	1	5	142
Sports/recreation/hobbies	95.8	1.4	0.7	1.4	0.7		100.0
	136	2	1	2	1		142
Doing other activities	97.2		1.4	0.7		0.7	100.0
	137		2	1		1	141

How often do you attend any of the following?	Ethno-specific organizations in the past 12 months Mainstream or Canadian organizat months							ns in the _l	past 12			
	Not at all	Once a year	3-4 times year	Once a month	Once a week	Total	Not at all	Once a year	3-4 times year	Once a month	Once a week	Total
	Percent n	Percent n	Percent n	Percent	Percent	Percent	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n
Religious or church groups	35.2		10.6	n 5.6	n 43.7	n 100.0	84.5	4.9		0.7	5.6	100.0
	50	7	15		62		120	7	6	1	8	142
Recreational groups	79.6	2.1	9.9		4.9		95.1	0.7	2.1		2.1	100.0
3	113	3	14	5	7	142	135	1	3		3	142
Cultural groups, such as literary or film clubs	78.2	5.6	7.0	4.9	4.2	100.0	92.3	2.1	3.5	0.7	1.4	100.0
,	111	8	10	7	6	142	131	3	5	1	2	142
Community centre activities	64.1	7.0	7.0	7.0	14.8	100.0	95.1	1.4	2.8		0.7	100.0
	91	10	10	10	21	142	135	2	4		1	142
Seniors groups or centre activities	64.8	2.8	8.5	9.2	14.8	100.0	96.5	0.7	0.7	2.1		100.0
	92	4	12	13	21	142	137	1	1	3		142
Social/religious gathering in people's home	64.1	7.7	14.1	5.6	8.5	100.0	94.4	0.7	2.8	1.4	0.7	100.0
	91	11	20	8	12	142	134	1	4	2	1	142
Political groups	98.6		1.4			100.0	99.3		0.7			100.0
	140		2			142	141		1			142
ESL classes	75.9			0.7	23.4	100.0	76.6		0.7		22.7	100.0
	107			1	33		108		1		32	141
Bingo, card games, casino trips	83.1	4.9	2.8	5.6	3.5	100.0	93.0	1.4	3.5	0.7	1.4	100.0
	118		4	8	5		132	2	5	1	2	142
Other	94.4	3.5			2.1	100.0	97.2	1.4	0.7		0.7	100.0
	134	5			3	142	138	2	1		1	142

Table 19.Attending Ethno-specific and Mainstream Organizations in the Past Year

In the past 12 months, how often did you have contact with	Not at all	Once a year	Few times a year	2-3 times a month	Once a week	Every day	Total
	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n
Immediate family living in Canada, but not living with you	28.2	1.4	6.3	7.0	21.1	35.9	100.0
o ,	40	2	9	10	30	51	142
Immediate family living outside Canada	21.8	2.1	28.2	29.6	15.5	2.8	100.0
	31	3	40	42	22	4	142
Other relatives in Canada	66.0	5.0	12.1	7.1	7.8	2.1	100.0
	93	7	17	10	11	3	141
Other relatives not in Canada	44.7	12.8	26.2	11.3	4.3	0.7	100.0
	63	18	37	16	6	1	141
Friends in Canada	28.2	5.6	19.0	14.8	20.4	12.0	100.0
	40	8	27	21	29	17	142
Friends not in Canada	49.6	8.5	27.0	11.3	3.5		100.0
	70	12	38	16	5		141
Neighbours	49.3	2.1	5.6	7.7	18.3	16.9	100.0
-	70	3	8	11	26	24	142
Others	92.9	0.7	2.1	1.4	1.4	1.4	100.0
	131	1	3	2	2	2	141

Table 20.Contact with Family and Friends in the Past Year

Settlement Experiences and Access to Services in Canada

Settlement Experiences in Canada

In general, when newcomers know about the country and its lifestyle prior to immigration, it is possible they may experience fewer problems adjusting to the new environment. We asked the participants, what, in general, they knew about Canada prior to their arrival. Most of the newcomers had a positive, and to some extent, an idealized view of life in Canada prior to immigrating. They saw Canada as a developed country, with a democratic system in which people had freedom to choose. Some also commented on the good social welfare and medical systems, the stable economy and the better living standards for seniors. The majority of seniors believed, prior to immigrating, that Canada was a clean and beautiful country but extremely cold. They mentioned that the people in Canada are known to be friendly, nice and diverse. As some of the participants noted:

"I knew Canada was a beautiful country, not polluted and living standard was higher than that of China, welfare was good. People have more freedom and more choices in Canada."

"Canada is a big country in North American. Canada is a democratic country which gives people freedom. Canada respects seniors and has good welfare system."

"Canada is a peaceful country, people are friendly and polite. It's a diversity society, people all get along well no matter where they came from."

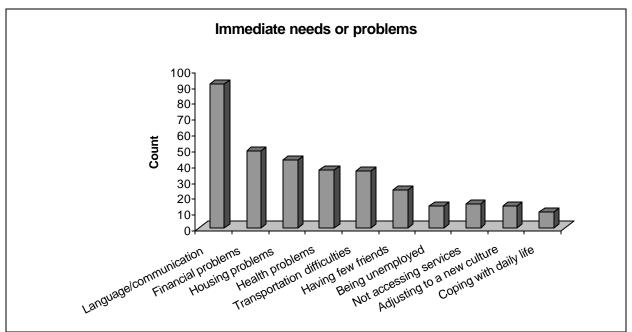
We inquired about where participants received most of their information about Canada prior to immigrating. The overwhelming majority of the seniors received their information from their children and friends who live here. Others mentioned they received information about Canada through the media, books, and their own experience during previous visits here:

"I remembered some information from school years. But mostly I was getting information from my son, who came here five years earlier."

"I remember when I was just a little boy, my mother used to sing a song about Canada or a "golden country." I also got information from the newspapers, T.V., books, later from relatives who've immigrated here and were occasionally visiting us, telling us stories."

Senior participants were asked to list three immediate needs or problems they faced when they started living in Canada (see Figure 12). The majority (64%, n=91) reported language and communication problems. Language was a challenge when they tried to get around, take public transit, see a doctor, or read notices in their condominiums or apartments. Some also mentioned financial problems (35%, n=49) and housing problems (30%, n=43). In light of their poorer self-rated health, it is not surprising that health problems were a concern to 37 seniors (26%). A similar number of seniors (25%, n=36) indicated that transportation was a major difficulty, due to language difficulties, disorientation and the weather. Other issues included initially having few friends (17%, n=24), being unemployed (10%, n=14), not being able to access services (11%, n=15), adjusting to a new culture (10%, n=14) and coping with daily life (7%, n=10).

Figure 12. Major Needs or Problems Senior Newcomers Faced When Arriving in Canada



* Participants had the opportunity to choose more than one category; therefore, the figure represents yes responses to each category listed.

Most of the participants (69% n=98) received other types of help besides information for their initial settlement needs. The sources of help are listed in Figure 13. Sources of help for 54 percent (n=53) of these participants were their children, followed by community agencies (18%, n=18) and government agencies (10%, n=10). In most cases, the help rendered was providing transportation; arranging for language and English training; providing advice; applying for SIN and health cards, and housing; offering money, furniture, clothes and food; and providing housing.

After their arrival in Canada, 57 percent (n=81) of the participants sought more information, and 75 percent of these individuals found the specific information they wanted. The information sought related mainly to financial and housing supports, nursing homes, and other needs, such as buying a car or furniture.

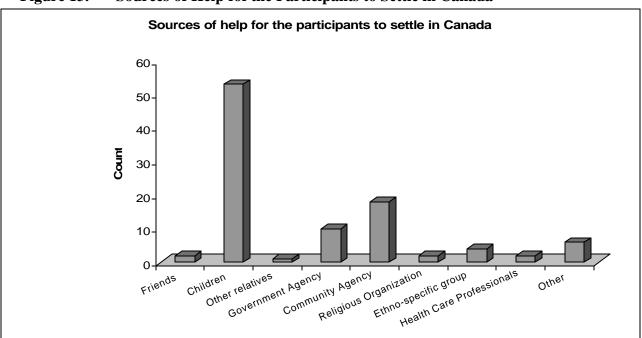


Figure 13. Sources of Help for the Participants to Settle in Canada

* Participants had the opportunity to choose more than one category; therefore, the figure represents yes responses to each category listed.

In spite of the sources of help, only 29 percent (n=40) of the participants reported that they did not have difficulties in meeting their immediate needs upon arrival in Canada. While 49 percent (n=67) reported some difficulties, almost a quarter (n=33) of

the participants reported having "many difficulties". Language (n=31) was the major difficulty, as illustrated by the following case:

"I worked for an employer about one month and a half. When I finished the job he wrote me that he couldn't pay me. I want to argue with him, but my English is limited. I went to a community centre, they couldn't do something for me. They recommended me hiring a lawyer but I didn't have enough money. It is not fair, I worked but didn't get the pay."

Another senior described a similar helplessness:

"Language is a major barrier. Since I came, I'm like a child, whatever I do, I need my daughter to come and help me."

Financial constraints prevented many seniors from meeting their immediate needs. One participant reported the following situation:

"We have retired and have no income. We came here only two years ago and so we could not enjoy pension. Our daughter lost her job so she couldn't help us. My son-in-law also lost his job last year and he went back to China to do business."

We asked the participants if they had basic items such as health cards, SIN cards and bank accounts, as well as how they managed to get around. Almost all participants had health cards (99%, n=140) and SIN cards (98%, n=137) at the time of the interview. Almost 80 percent had their own bank accounts, while only 8 percent (n=11) had valid driver's licenses which was consistent with their dependence on the public transit system. Children were the most instrumental in helping obtain these items although a small number of the participants (n=5) reported that community agencies assisted them with obtaining these documents.

Table 21 illustrates that most of the seniors used the bus/subway (47%, n=67) as their most frequently used method of transportation, followed by walking (44%, n=62) and being driven (41%, n=58). Most (59%, n=83) of the seniors reported no trouble or not much trouble in getting around to appointments, shopping or visiting. One-quarter (n=35) mentioned that they had trouble from time to time, and 16 percent (n=22) reported they had a great deal of trouble getting around. About two-thirds (n=92) of the seniors

said that the weather affected their activities reaffirming the perceptions of the key informants. It is likely that, although the seniors reported an ability to get around, the methods they used were somewhat tenuous given inclement weather and a dependence on the good graces of others for transportation.

What method of transportation do you usually use?	Percent Yes	n=142
Walk	43.7	62
Bus/subway	47.2	67
Taxi	2.1	3
Drive myself	3.5	5
Someone drives me	40.8	58
Handicap van/bus	0.7	1

* Participants had the opportunity to choose more than one category; therefore, the table represents the percent of yes responses to each category listed.

These findings were fairly consistent with the unique needs (Figure 4) identified by the key informants who identified the same top three needs to include assistance with language, financial help and the need to circumvent the effects of the harsh weather. The major problem added to the key informants list by the seniors was problems with housing, something the key informants did not mention.

Use of and Access to Services Settlement Services Used

To examine how and where newcomer seniors accessed support and information for their settlement needs, we asked a series of questions about the participants use of settlement and other types of services. Participants were also asked to indicate the degree of helpfulness of and their satisfaction with these services.

Of the 142 participants in the study, 86 (61%) reported using at least one settlement service and 56 (39%) reported not having used any settlement service. The main reasons for not using the service, in order of importance, were the lack of information about existing services, followed by language barriers and the lack of transportation. Figure 14 illustrates other reasons for not using services.

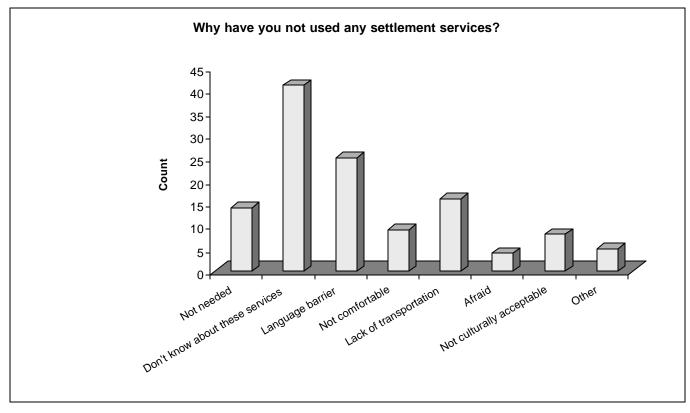


Figure 14. Reasons for Not Using Settlement Services

* Participants had the opportunity to choose more than one category; therefore, the figure represents the yes responses to each category listed.

Figure 15 illustrates the sources that helped connect the participants to settlement services for the 86 participants who used one or more service. The sources identified in order of importance were family (57% n=49), friends (33% n=28); the ethnic community (31%,n=27); mainstream communities (22.1% n=19); the ethnic media (19% n=16) and government agencies (14% n=12). The profile of the sources of help changed somewhat from the initial contacts of the seniors. Later in the settlement process they added friends as sources of help and became more involved with ethno-specific communities including agencies and the media.

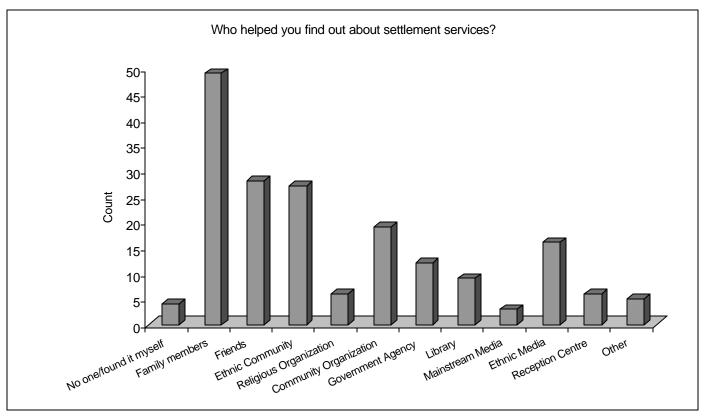


Figure 15. Who Helped Find Out About Settlement Services

*Participants had the opportunity to choose more than one category; therefore, the figure represents the percent of yes responses to each category listed.

Table 22 presents the types of settlement services used and the frequency of their use by the participants since their arrival in Canada. The settlement services used most frequently were LINC language training, reception services and settlement counselling services. About one-third of those who had used orientation, translation, referral and settlement counselling services had used them more than five times.

Since you arrived in Canada have you used any				If yes, how often have you used this service?					
	No	Yes	Total	Once	1-2 times	3-4 times	5 times or more	Total	
	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n	Percent n	
Reception Services (services at the airport) when you arrived in Canada	66.2	33.8	100.0	87.5	12.5			100.0	
	94	48	142	42	6			48	
Orientation services that gave general information about living in Canada	66.2	33.8	100.0	31.3	20.8	14.6	33.3	100.0	
, , , , , , , , , , , , , , , , , , ,	94	48	142	15	10	7	16	48	
Translation services	85.2	14.8	100.0	33.3	28.6	4.8	33.3	100.0	
	121	21	142	7	6	1	7	21	
Interpretation/escort services	87.3	12.7	100.0	5.6	22.2	11.1	61.1	100.0	
	124	18	142	1	4	2	11	18	
Referral services to access community services	82.4	17.6	100.0	36.0	24.0	8.0	32.0	100.0	
	117	25	142	9	6	2	8	25	
Settlement counseling services	76.8	23.2	100.0	27.3	21.2	15.2	36.4	100.0	
	109	33	142	9	7	5	12	33	
HOST program services that match newcomers with volunteers	94.4	5.6	100.0	12.5	25.0		62.5	100.0	
	134	8	142	1	2		5	8	
LINC language training services	64.8	35.2	100.0	10.0		1	44	50	
	92	50	142						
Other settlement services	89.4	10.6	100.0	80.0	6.7		13.3	100.0	
	127	15	142	12	1		2	15	

Table 22. Use of Settlement Services Since Arrival in Canada

To determine if there were any differences between the participants' use of settlement services and location, gender, and ethnic group, we conducted a series of comparisons. We compared the use of settlement services between participants living in Toronto and Ottawa/Hamilton (Ottawa and Hamilton were combined so that statistical tests could be carried out). Table 23 shows that the participants in Ottawa/Hamilton were more likely to use reception services and interpretation/escort services than participants living in Toronto. However, seniors living in Toronto were more likely to use LINC language training services than participants in Ottawa/Hamilton. There were no differences in the use of orientation services, translation services, referral services, settlement counselling services, HOST program services and other settlement services between participants living in Toronto and Ottawa/Hamilton.

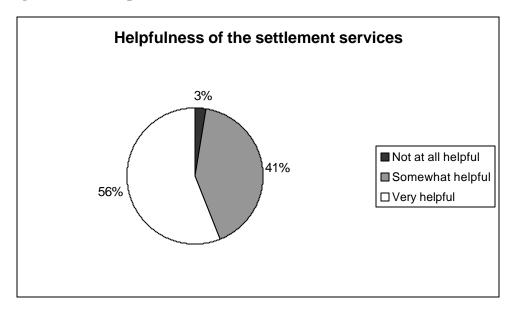
Since you have arrived in Canada have	Toronto	Ottawa/Hamilton
you used any		
	Percent YES	Percent YES
	n	n
Reception services(services at the airport) when you arrived in Canada	24.0	57.1
$(\mathbf{c}^2 = 14.5, df = 1, p \mathbf{\pounds} 000)$	24	24
Orientation services that gave general information about living in Canada	31.0	40.5
J J J J J J J J J J J J J J J J J J J	31	17
Translation services	14.0	16.7
	14	7
*Interpretation/escort services	7.0	26.2
$(c^2=9.8, df=1, p \pounds 002)$	7	11
Referral services to access community services	15.0	23.8
	15	10
Settlement counseling services	22.0	26.2
	22	11
HOST program services that match newcomers with volunteers	6.0	4.8
	6	2
LINC language training services	42.0	19.0
$(c^2=6.8, df=1, p \pounds 009)$	42	8
Other settlement services	9.0	14.3
	9	6

* Participants had the opportunity to choose more than one category; therefore, the table represents the percent of yes responses to each category listed.

In order to determine if differences existed between the various ethnic groups, we categorized the participants into four major ethnic groups: South Asian, Chinese, European and Other. No differences were found in the use of settlement services between the men and women or between the four ethnic groups.

The majority of those who used settlement services (n=86) found them to be very helpful or somewhat helpful (75%, n=78), while a slightly larger percentage (79%, n= 68) were satisfied or very satisfied with the services they received (see Figure 16).

Figure 16. Helpfulness of the Settlement Services



Participants in Toronto were more likely to be satisfied with settlement services than participants living in Ottawa or Hamilton (91%, n=50 versus 72%, n=18: $p \pounds 03$). Participants' satisfaction with settlement services did not differ by gender or ethnic group.

Not surprisingly, the majority (n=28) of the participants reported that English classes were the most helpful service. Other services indicated as helpful were community centres (n=16), health services (n=11), information services (n=10),

translation services (n=9), referral services (n=8), reception services (n=8) and orientation services (n=7).

No one settlement service was singled out by the seniors as least helpful. Most complained about the lack of language-specific services. Six participants commented that reception services were the least helpful, and four identified housing services in this category. The majority of the seniors who were satisfied with the settlement services, felt that the services (n=22) and the workers (n=15) were helpful. Some comments included the following:

"All the services I used are helpful. They do whatever they can."

"Social workers at community centre are kind and warm to us, but they have limited capacity to solve our problems."

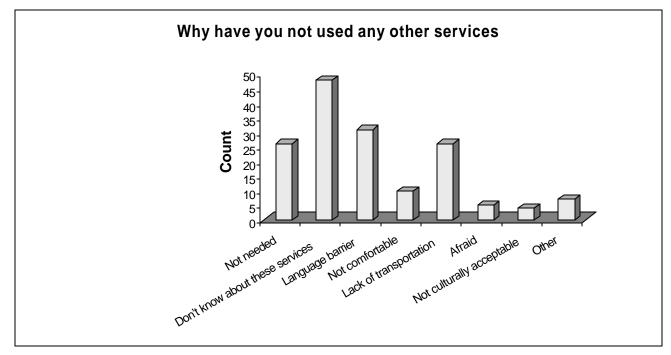
A few participants responded that they felt there was no need for services and that they were not useful. One participant commented:

"I don't see any help. But since I'm sponsored by my daughter, I don't expect anything else."

Other Services Used

Of the 142 participants in the study, 73 (51%) reported using at least one of the other services listed on the interview schedule, which touched on housing services, seniors' services, legal assistance and/or financial assistance services. Sixty-nine (49%) of the seniors reported not having used any of these services. Figure 17 presents the reasons participants gave for not accessing these services. That almost 70 percent of the senior newcomers reported a lack of knowledge about these services is most telling.





* Participants had the opportunity to choose more than one category; therefore, the figure represents the percent of yes responses to each category listed.

Table 24 illustrates the type of other services and the frequency of their use by the participants since their arrival in Canada. There were wide variations in the frequency of accessing these services, which may have depended on the whether a separate, one-time service was rendered or the senior was part of a program of service. For example, 51 participants (36%) accessed housing services; but slightly more than half of them (53%, n=27) did so only once. By contrast, of the 32 participants who accessed seniors' services or programs, 26 (81%) accessed these more than five times, probably because the services were ongoing such as counselling or support programs. Similar activity was reported for the use of financial services where 59 percent of the seniors accessed the services five times or more.

Since you arrived in Canada have you used any		If yes, how often have you used this servi							
	No	Yes	Total	Once	1-2 times	3-4 times	5 times or more	Don't know	Total
	Percent	Percent	Percent	Percent	Percent	Percent	Percent	Percent	Percent
	n	n	n	n	n	n	n	n	n
Housing services (e.g. information,	64.1	35.9	100.0						
assistance)				52.9	19.6	15.7	7.8	3.9	100.0
	91	51	142	27	10	8	4	2	51
Senior services or programs	77.5	22.5	100.0	3.1	3.1	6.3	81.3	6.3	100.0
	110	32	142	1	1	2	26	2	32
Legal assistance services	95.1	4.9	100.0	28.6	42.9	14.3	14.3		100.0
	135	7	142	2	3	1	1		7
Financial assistance services	84.5	15.5	100.0	22.7	9.1	4.5	59.1	4.5	100.0
	120	22	142	5	2	1	13	1	22
Other services	93.0	7.0	100.0	10.0	10.0	60.0	10.0		100.0
	132	10	142	1	1	6	1		10

Table 24.Use of Other Services Since Arrival in Canada

We again compared the use of other services between participants living in Toronto and Ottawa/Hamilton, but found no differences. Figure 18 presents the participants sources of information for locating other services. The sources indicated are very similar to the ones for accessing settlement services, as presented in Figure 15, underscoring the importance of informal resources such as family and friends followed by the importance of their own ethnic community as a source.

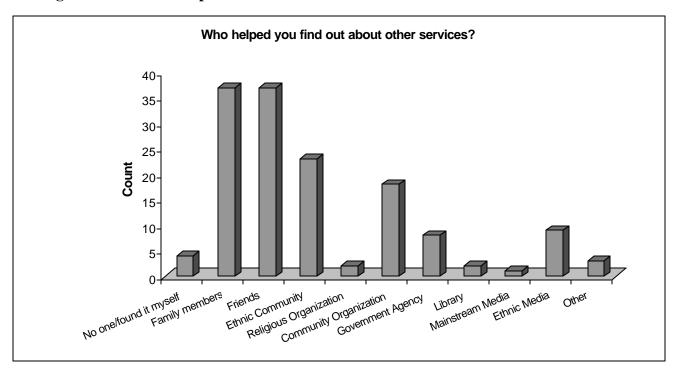


Figure 18. Who Helped Find Out About Other Services

* Participants had the opportunity to choose more than one category; therefore, the figure represents the percent of yes responses to each category listed.

Most of those who used the services (92%, n= 77) found them to be somewhat helpful or very helpful. Housing services (n=20), mainly in the form of providing seniors' apartments, were the most frequently mentioned helpful services, followed by senior support programs (n=19) and financial services (n=17). Although many participants reported that housing services were the most useful, nine seniors felt otherwise, and were annoyed by the long waiting lists. A few seniors (n=3) mentioned that the lack of services in their own language weakened the helpfulness of the services available. Most of the seniors reported that they were satisfied with other services, although a minority (8%, n=6) were dissatisfied with these services. At least 16 participants commented that, in general, they were satisfied with the service. Some (n=7) were particularly satisfied with the workers and commented that they were "kind, warm, helpful, polite and responsible."

Sixteen seniors mentioned that they were satisfied with the financial support that they received. Here is one senior's comment:

"I could not have supported myself if I did not have the family benefit service which started a year after my arrival to Canada."

Five participants reported satisfaction with English language training classes.

Participants were also asked to rate their level of satisfaction with the health services they received in Canada. Twenty four (17%) of the participants had never used health services, and of those who had (n=114), the majority (83%, n=95) reported being "satisfied" or "very satisfied". Many of the satisfied respondents (n=32) again mentioned the helpfulness and kindness of the medical staff. Seventeen seniors mentioned their appreciation of the free services, and some noted the improvement in services compared to their home countries. However, many seniors satisfied with services mentioned that it was important for them to have some medical staff who spoke their own language.

About 11 percent of participants (n=13) reported being dissatisfied with the health services they received. Some were disappointed with the cost of dental services and medication. Long waiting lists were also a concern to at least four participants, and some mentioned scheduling problems and chart mix-ups as the source of their dissatisfaction.

There were no differences found in satisfaction with other services between participants living in Toronto and Ottawa/Hamilton, or between genders or ethnic groups.

Services Needed, But Cannot Be Accessed

When asked, "Are there any services you feel that you need, but cannot access?" half of the seniors responded affirmatively (51%, n=72). Financial support (n=15) services were the most frequently mentioned as needed, followed by housing (n=12) and health (n=12) services. Smaller numbers of seniors listed English classes, language-specific services, translation and interpretation services, and transportation for seniors. Many seniors reported wanting affordable housing so they could live alone, as well as free dental and drug services. English classes, transportation, language-specific services and translation/interpretation services were each noted by six or more seniors as posing accessibility problems. A few participants (n=8) suggested they needed employment and a chance to contribute their skills and knowledge to society.

The main reason offered for not being able to access needed services was the lack of information, the same reason as reported in Figure 17 for not accessing other services and an important problem flagged by the key informants (Figure 3). Twenty-four seniors mentioned that they did not know about the services, and nine indicated that they thought these services did not exist or were not available to them. Ten participants stated that the sponsorship system denied them access to obtaining financial support. The seniors' other reasons for not being able to access services included problems with transportation (n=10), language barriers (n=7), and cost, such as for dental services. A few seniors mentioned family responsibilities, eligibility problems and long waiting lists as barriers. Many of the participants expressed that they faced multiple obstacles in accessing services. Here are two seniors' comments:

"I am sponsored by my daughter and can't apply for welfare, no time to socialize at the moment, I work all day and invest a lot of time into studying English."

"Language barrier as well as sponsorship conditions which makes me not eligible to services for 10 years of undertaking."

Women were more likely than men to report that they needed services, but could not access them ($p \pounds 01$). No differences where found between the participants' geographical location or ethnic group and problems with accessing needed services.

Gaps in Information and Services

To examine ways to improve services to senior newcomers, we asked the participants if they could identify any gaps in both the information and services they received during the settlement process.

The overwhelming response was the absence of language-specific information. At least 52 participants mentioned that most of the information they received was not in their language. Seniors noted that they needed information about where to buy food, how to apply for documents, such as SIN and health cards and how to get around the city. They suggested that information, including maps, should be in their own language and available in different locations, such as airports, community centres, churches/mosques, and in the mass media. Here are two seniors' comments:

"In general, I feel we're ill-informed. We knew little about some services for seniors. We need information in our language."

"Information packages to be available at different locations in airports/ churches/ mosques, etc. in different languages."

Other information that the seniors would have found helpful in their settlement was more information on financial assistance/support (n=10), general settlement and social services (n=9), housing services (n=5), health services (n=4) and employment (n=4).

Fourteen participants commented that they could not identify any gaps in information, and eight seniors reported that their family would get anything they needed.

When we asked about gaps in services, language barriers were again most frequently mentioned. Without English skills, many participants reported that they could not make use of services or communicate with others. Needed services noted by the seniors included language-specific information (n=8), bilingual services (n=18), translation/interpretation services (n=10) and cultural events and programs (n=4).

"Language barriers/gap, services should be in my language. Immigrant's lack of knowledge of their lawful right to settlement services."

"I wish there was a drop-in centre in different areas for seniors to meet and exchange ideas. There should be more agencies serving seniors in their language."

"Translation services should be provided in all settlement services centres, various application forms should be translated into different minority language."

Financial assistance or support was mentioned as a service gap by at least 20 respondents. Again some seniors noted that the sponsorship system contributed to the dependency of the senior newcomer:

"The gaps or problems reside in how the legal "rules" are concerned. It is a problem that because of the fact that we are sponsored by a family member. We need to absolutely depend on them, we cannot have an independent life, financial assistance, housing assistance so we can be independent."

Sixteen participants mentioned that the main gap in health services was the lack of free dental services. In addition, 12 participants felt that transportation services were inadequate, and eight suggested that more community centres/community-based agencies were needed. Lack of affordable housing was a concern for at least eight participants. Approximately 26 (n=18%) participants could not identify any gaps in services.

Overall Experience Living in Canada

Finally, we asked the senior newcomers about their general experiences living in Canada. We inquired about their plans to stay, about issues of loneliness, and their adjustment to life here. We also asked about useful or helpful information that could be given to other older newcomers.

Over three-quarters (n=108) of the participants planned to stay in Canada permanently. Twelve percent planned to go to another country (n=17) or return to their homeland (n=17). Eighty-two percent (n=115) planned to seek Canadian citizenship, while 12 percent (n=17) did not know if they would, and 6 percent (n=8) said they would not seek citizenship.

At least 48 participants mentioned being with their family as the main reason for their decision to stay in Canada. Favorable living conditions (n=19) and the social/health care service system (n=15) were also reported as other reasons for staying. Some seniors said they had no other choice but to stay, either because their homeland was not favorable for their return, or because their loved ones had decided to stay. Sometimes the decision was complicated. One senior expressed her reasons for staying the following way:

"I do not think I would have the courage to go back to Chile. After all, it is more peaceful here. I cannot leave my husband and he made the decision to come, now we stick to it. I want to be close to my daughter here. We have suffered and struggled quite much these two years and we are not going to make that effort be in vain and surrender and go back and start there again, anew. I have no desire to do that. But I do miss people there, the community, speaking in my language."

Many of the seniors expressed mixed feelings about staying in Canada. Some respondents were facing financial problems (n=5) and family conflicts (n=3), which influenced their decision to not stay in Canada. Other participants had decided that they would leave Canada because of their living conditions (n=10), the language barriers (n=4), and missing their homeland, particularly their family (n=3):

"I have been in Canada for the last 1 1/2 years and it is very difficult for me to adjust. All these years I have been very active and the stresses of settlement has a severe impact on my health."

"We came only two years. Many things we don't know. We feel isolated and can't integrate into mainstream society because of language barrier."

"I would like to be with my immediate and extended family back in Ghana."

Table 25 shows that many of the senior participants had experienced feeling lonely while living in Canada.

Table 25. Feeling of Lonenness Living in Canada		
To what extent do you feel "lonely" living here? Would	_	
you say that you feel	Percent	n
Not at all lonely	35.9	51
A little lonely	25.4	36
Somewhat lonely	23.9	34
Very lonely	10.6	15
Completely lonely	4.2	6
Total	100.0	142

Table 25.Feeling of Loneliness Living in Canada

When asked "In your view, what would be the best way to address the problem of senior newcomers' feeling "lonely" living here?" the major suggestions were "Go out", "Don't stay home", and "Keep busy" (n=32). Participants also mentioned keeping active, making friends (n=22) and getting connected with the outside world (n=21). Others suggested that more social programs are needed (n=35) such as social clubs, recreational programs, outdoor activities and drop-in centres. Participants noted that services for seniors needed to be supported by some kind of transportation service (n=12) and financial supports (n=10). Thirteen participants reported that learning English was a way of combating loneliness. However, only a few (n=6) suggested that living with family could reduce loneliness.

Approximately two-thirds (n=91) of the seniors agreed or strongly agreed with the statement "I think I have adjusted well to life in Canada." Table 26 shows the distribution of responses.

Tuble 20. Augustilient to Life in Cultudu		
In general, would you "strongly agree", "agree", "disagree", or "strongly disagree" with following statement: "I think I have		
adjusted well to life in Canada"	Percent	n
Strongly disagree	4.2	6
Disagree	26.1	37
Agree	47.2	67
Strongly agree	16.9	24
Don't know	5.6	8
Total	100.0	142

 Table 26.
 Adjustment to Life in Canada

The two most frequently reported reasons for being well-adjusted to life in Canada were feeling comfortable living here (n=15) and being with family (n=14). Other reasons for adjusting well included having government supports (n=8) and improving English abilities (n=7). Here are some examples of the positive responses of the seniors:

"I feel our life is comfortable, we go out into the community and have some friends. I know where I should go for help and know where to go to buy Chinese food."

"I consider myself a lucky person with lots of privileges in Canada. I enjoy living in this country with my family."

"Yes, with the financial help and housing and human rights, transportation, medical services, free medicines and telephone."

"I feel more independent and assured as I learn English. It gives me hope that I will become a member of this society and be able to participate a bit in it. It also gives me a sense of security."

However, 30 percent (n=43) of the respondents did not agree that they had adjusted well to Canada. Language barriers (n=19) were the most frequently noted reason for not adjusting well. The cold winter was another factor deterring adjustment (n=7). Eleven seniors expressed that they were not adjusting to life in Canada because of loneliness and isolation, while at least nine indicated financial problems as the reason. Negative feelings about adjusting to life in Canada included these comments:

"I still feel I have not get into the society, I am not used to the weather here, too cold for us. Language is still a major barrier to adjust to life in Canada."

"I do feel lonely and bored. We have not made friends with other seniors. We feel we are isolated."

"I like Canada, especially nature here, it's very beautiful. The only major problem for me here is the lack of money."

Despite some feelings of loneliness and poor adjustment, 75 percent (n=98) of the seniors were satisfied or very satisfied with their decision to come to Canada. Participants located in Toronto were more likely to express satisfaction with life in Canada than those living in Ottawa/Hamilton (20%, n=26 versus 8%, n=3: p£005). However, we found no

differences between the location, ethnic group or gender of the participants and either feelings of loneliness or sense of adjustment to life in Canada.

At the end of the interview, we asked the senior participants to indicate the three most helpful hints or advice they could have received for adjusting to this new country. The majority of the participants mentioned learning English (n=55) prior to coming to Canada. The second most frequently mentioned advice was related to financial issues (n=29). Suggestions included saving money before coming to Canada, knowing how to apply for financial support, being realistic about the sponsorship rules and not underestimating the cost of living in Canada. Information about the weather (n= 26) was the third most frequently mentioned advice participants wished they had received.

Other helpful advice the seniors suggested was information about access to social services (n=20) and health services (n=16), using public transportation (n=12) and shopping for ethnic foods (n=12). Nineteen seniors suggested that being educated or more knowledgeable about Canada's lifestyle and culture would have been helpful. A few also mentioned having a clear expectation of their new life (n=2) before deciding to come and making some preparations for the social isolation (n=4).

A number of the seniors suggested that participating in social activities, such as community centre programs (n=20), or making more friends (n=20) was important in adjusting to a new life in Canada.

When we asked what would be useful to tell other seniors about coming to live in Canada, 22 participants said that they would tell them that Canada is a good place to live and, in particular, that Canada has a good health care system. However, many of the participants mentioned that newcomers needed to prepare before coming to Canada. Twenty-three, and 22 seniors, respectively, said that learning English and making preparations for a bitter winter were crucial. Eighteen participants indicated the importance of financial preparations. One senior effectively summarized this issue:

"If they don't have enough financial resource to support themselves, I would tell them not to come. Many seniors I know are not satisfied with their lives here. The main reason is that they have to live on their children. If they were in China, they had their pensions, and they could live well. In Canada they couldn't make any contribution to the family, their children see them as a burden. I knew some seniors who came and stayed with their children a few years, they sadly went back to China."

"If seniors have no strong financial resources, don't come."

Seven seniors said they would warn other seniors about the possibility of feeling lonely and isolated and they suggested that the newcomer seniors should ensure that family supports are available before deciding to come. Learning to drive (n=2), making friends (n=3), going to religious activities (n=2) and taking the initiative to participate in social activities (n=2) were other suggestions for adjusting well.

A few seniors recommended that seniors should not to come to live in Canada or should not have too high an expectation about life here:

"I wouldn't advise. It is not a good place for seniors whose language is different."

"Don't expect to get everything on a silver platter. Canada has problems too. You are basically on your own."

Summary

This sample represented a diverse group of seniors from over 30 countries. The sample consisted of approximately equal numbers of men and women. The average age of senior participants was 70 and their ages ranged from 65 to 88. Married seniors represented 62 percent of the sample, while 32 percent were widowed, and 5 percent were separated or divorced. Only one participant reported being single/never married. The participants all had been in Canada for at least one year, but not more than five, with three years being their average length of time here. Over 85 percent of the seniors were sponsored by their children. The majority of the participants were living with an average of three other members of their family, most frequently their children.

Half the senior participants reported excellent to good health, which was well below the Canadian national averages for the older population. Three-quarters of the seniors reported that they had poor to no English skills and 95 percent said they had no ability in French. Overall, this group of newcomer seniors were well-educated: about 29 percent had completed university, and 20 percent had completed some post-secondary schooling. Many of the seniors reported having had professional occupations during their working careers. Currently, the majority of the seniors were retired from the labour force. If they worked they were likely to be found in low-paying jobs.

Two-thirds of the participants had moved to Canada from their country of birth. Most had lived with family members before immigrating, and one-quarter reported that they had received help from health, social and/or financial services prior to coming to Canada. To be with family was the primary reason for coming to Canada. Over 80% said they had wanted to come to Canada; their reasons included a better way of life, a higher standard of living and being with family. Few seniors knew anyone else but family in Canada when they first arrived.

Over 90 percent of the newcomer seniors had health and SIN cards, and 80 percent had their own bank accounts. The most common methods of transportation the participants used was the subway/bus, walking, or being driven. Many seniors reported difficulties arranging transportation.

In-home activities, such as watching TV, reading and doing housework, were the most frequently reported weekly activities. Over 50 percent of the seniors said they were providing childcare to their grandchildren. Few seniors reported participating in outside-the-home activities, such as visiting relatives or friends, going shopping, doing volunteer work or working for pay. A minority of the seniors reported attending ethno-specific or mainstream organizations in the past year. The only social activity the majority of the seniors participated in was attending a church/mosque or some other religious activity.

When asked what they knew about Canada and how they obtained the information before coming, most participants reported receiving information from their children or books. Many had had a very idealistic view of Canada prior to their arrival and reported that most of their information was about general things, such as friendly people and a high standard of living. The immediate problems participants experienced upon arrival to Canada concerned language barriers, then finances, housing, health, transportation, and the weather. Over half of the seniors reported that their children helped solve these problems, yet a little over half the participants still sought additional help with their settlement. While three-quarters received help from their children, one-quarter reported friends as a source of help, and one-third went to an ethnic community organization for help. Three-quarters of seniors also reported that they had some or many difficulties meeting their initial settlement needs. Language issues, the lack of social supports and financial difficulties were the most frequently mentioned challenges.

Two-thirds of the senior participants reported that they had used a settlement service, and that family or friends had helped them find out about these services. Participants most frequently used LINC language training, reception and settlement counselling services. The majority of the seniors felt that the settlement services were helpful and satisfactory. Of the one-third of seniors who had not used settlement services, most reported that they did not know about these services.

Half of the seniors reported that they had used other services besides settlement services, such as housing services, seniors' services, legal assistance or financial assistance. Again, the majority found out about these services from family or friends; although, one-third discovered these services through ethnic or mainstream community organizations. Housing services, followed by seniors' services/programs and financial assistance services, were the most frequently mentioned services used by the seniors. Again, most participants thought the services were helpful and reported that they were satisfied with the services they received. Participants who had not used any other services reported most frequently that they did not know about other services, they had language problems, lacked transportation or did not require these services. Approximately half the participants reported needing services they could not access. The most frequently mentioned were financial services, followed by housing and health services. The main reason participants gave for their inability to access these services was because they did not have information about the services: 24 said they did not know about the services and 9 thought the services did not exist or were not available to them. Less cited reasons were transportation, language barriers, and the costs of services.

When asked about gaps in information, the majority of the seniors indicated the need for language-specific information. They felt ill-informed and isolated, and suggested that information be available in a variety of languages.

Most of the seniors planned to stay in Canada, but some had mixed feelings due to financial problems, family conflicts and living conditions that they had not anticipated. Approximately two-thirds reported that they felt lonely in Canada and suggested that keeping active, making friends and having more social activities, such as social clubs, recreational programs and outdoor activities, would be helpful. Many participants noted the importance of having transportation services for activities, since language barriers and weather were the most likely reasons for seniors to remain isolated. However, most of the seniors felt they had adjusted well in Canada, despite having problems with the language barrier and loneliness.

When asked to provide helpful hints that they would have liked to have had, or to give to seniors thinking of coming to Canada in the future, the participants' main suggestions were to learn English, have enough savings, be realistic about the sponsorship rules, be realistic about the cost of living and be informed about the weather

7. CONCLUSIONS

While making the following detailed conclusions we need to be aware of the limitations in the sample. In this study the senior newcomers we interviewed were a group with many strengths. On one level they shared some similarities with the older Canadian population but were also different on a number of traits. Compared to Canadian seniors, the most outstanding differences were their higher levels of education and occupations, the higher likelihood that they worked and their poorer self-rated health. The senior newcomers were less likely to receive a pension from their country of origin but they were more likely to live with children and to participate in religious groups. As would be expected, very few of the senior newcomers had strong skills in speaking English or French. All of these factors influenced the services the seniors used and the services they required for their initial settlement process.

Settlement Resources and Services

According to our review of the services and resources available to newcomer seniors, there currently are no separate settlement services solely devoted to newcomer seniors in the three cities studied. Some settlement services were found that made special provision for older newcomers as part of their services to the general immigrant population. Many resources and services are available for seniors, however they are found in mainstream and ethno-specific agencies that serve the general older Canadian population. Key informants noted that the services needed to be better coordinated and there needed to be stronger links with government departments. Another major issue the key informants identified was the shortage of language specific staff and educational materials in community services. Informants called for more structured programs targeted specifically at older newcomers and more community outreach which could include use of the telephone to connect newcomer seniors with other seniors from their own communities. For the smaller cities, secondary migration caused funding problems for service providers. Agencies also noted that they were under-funded and not able to deliver the types of services they believed necessary to help the newcomer seniors.

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Special Difficulties of Newcomer Seniors

We found a great deal of coherence between the needs and special difficulties of the newcomer seniors as identified by themselves and by the key informants. These newcomer seniors experienced special difficulties related to their language skills, adaptability, and employability. Over-dependence on their families, financial distress, lack of reliable transportation, the inclement weather and social isolation were unique and enduring challenges for this group. Housing was an additional problem the seniors added to the unique challenges initially identified by the key informants. Wishing to live in independent housing also surfaced as an important concern of the newcomer seniors, an unexpected finding in light of the current research literature. The repeated remarks about financial difficulties by both the seniors and the key informants suggested that this may be a critical problem.

Accessing Support and Information

The majority of the seniors gained most of their settlement information from informal sources: first their sponsors who were family members (primarily their children), and later, from their friends and their ethnic communities. With help the seniors were able to access settlement services and community supports. The formal settlement services used by the newcomers pertained to language, reception and counselling and the other services used were financial, housing and health services, testifying to the importance of these needs that they reported in their interviews. In addition, the participants reported that the services they really needed, but were inaccessible, included financial support, housing and health services. The first two services were actually services not available to the seniors because of sponsorship regulations.

Gaps in Information and Services

Both the seniors and key informants indicated that the seniors' lack of knowledge about services - both settlement and other services - was a serious problem. The main cause of the problem was the lack of language-specific information about settlement services, other services and services needed that could not be currently accessed. The solutions to these problems suggested by the key informants were to provide information and services in the requisite languages, introduce more organized programs and engage in more community outreach. The key informants felt that the most effective ways to assist senior newcomers was peer support, the provision of culturally sensitive services, financial support, language training and better transportation.

8. **RECOMMENDATIONS**

The following recommendations are intended to address the unique settlement needs of seniors and to identify what information and services would better help them in their initial settlement processes.

Based on the findings of this report, our recommendations concern four major areas: 1. Information, 2. Social and Community Services, 3. Coordination and Referral Services, and 4. Outreach. These recommendations are within the framework of existing settlement programming.

Recommendation 1: Information

• All prospective newcomer seniors should have access to relevant information on life in Canada through Canadian embassies and consulates around the world. The specific information should address weather, housing, mobility, income supports and community activities. The prospective newcomers should have access to sponsorship regulations so that they are aware of the restrictions on eligibility for government transfer payments.

- The federal government should use ports of entry and the media (mainstream and ethno-specific) to make senior-specific information available to immigrant seniors and their families.
- At the time of application for sponsorship, family members should be encouraged to access appropriate and relevant information on services available to seniors in Canada and their communities.
- Agencies serving seniors should encourage family members to access information about the social, emotional and health needs of older adults. Such information will increase families' knowledge and sensitivity to their senior relatives' special needs.
- Initial settlement information should be organized and prioritized in order of importance and usefulness to newcomer seniors. Information provided could include government programs for seniors, health, housing, language programs, peer support programs, and neighbourhood community programs for newcomer seniors.
- Information should be available in different languages at different access points, such as doctors' offices, ethnic food stores and settlement and community agencies serving this older newcomer population.
- To encourage a focus on seniors as newcomers, agencies in Ontario that serve newcomer seniors should form networks to share, coordinate and update information.

Recommendation 2: Social and Community Services

- Service programming should be flexible in terms of hours of service and location of service to provide maximum access to seniors who depend on their working relatives to transport them to services.
- Recreational programs, peer support programs, friendly visiting and telephone support lines geared to newcomer seniors should be sensitive to the language needs of

newcomer seniors. The creation of such program in both ethno-specific and mainstream agencies would enhance senior newcomers' social adjustment and decrease their social isolation.

- All service providers responsible for delivering services to seniors should be alerted to the possibility of elder abuse and should be trained to identify abusive situations and make referrals to the appropriate agencies.
- Community-based agencies should be encouraged to involve newcomer seniors in volunteer activities in order to take advantage or their many skills, including their cultural expertise.
- Educational and support programs about aging for adult children of the newcomer seniors should be offered from agencies already offering these services to the mainstream population.
- Service providers should explore the possibilities of other creative venues for language training such as, video or audiotapes in specific languages, computer-based and/or media (television)-based language training.
- Service providers in community agencies should explore ways to assist senior newcomers with their housing and financial problems.

Recommendation 3: Co-ordination and Referral

- Co-ordination of services should be improved. Given the large number of existing services available to seniors, the importance of co-ordination of services cannot be over emphasized.
- ISAP-funded settlement agencies should be encouraged to organize geographicallybased referral networks for newcomer seniors so that seniors can use the networks to navigate the social service and health care systems. Considering the health and

mobility issues unique to seniors, agencies should design a simple system of referrals that encompass the major needs of newcomer seniors.

Recommendation 4: Outreach

• Outreach is a fundamental requirement in assisting newcomer seniors to access information and services. Service provides should explore innovative methods to reach out to this largely invisible and difficult-to-reach population. Places of worship, ethnic cultural associations, ethnic shopping areas, ethnic media and health care providers' offices are possible outreach venues.

9. **BIBLIOGRAPHY**

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Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Abbotsford Seniors' Centre (613) 230-5730		 Information Referral Advocacy 		 Health promotion Services Home Support Services 	 Recreational program Educational program Seniors' Outreach Services 	 Breakfast & noon meals at cost for members. Paid Worker services – housecleaning, sitter & escort Services, snow shovelling, grass cutting, minor household repairs. Volunteer services – friendly visiting, transportation (medical appointments) & telephone assurance.
Advocacy Centre for Elder Abuse (416)598-2656						Advocacy for Elder Abuse
Alzheimer Society of Ottawa-Carlton (613) 523-4004				 Family support counselling Family support groups 		Wandering Person Registry: telephone link program, workshops for families, speakers' bureau, public meetings, newsletter, Alzheimer Info Line, resource centre, portable libraries and Alzheimer Web Site. (www.alzheimerottawa.org)
Arthritis Society (613) 723-6574 Press 23				PhysiotherapyOccupational therapySocial work service		 Cost of drugs Assistive devices Splints & special footwear are not covered.
Canadian African Women's Organization (613)736-5976		Referral	• ESL • LINC • Literacy	Counselling		 HIV/Health Information Conflict Resolution
Canadian Diabetes Association (613) 521-1902				 Monthly information Sessions Numerous information pamphlets. 	Resource-video library	 Promotes health through research, education Service & advocacy. Sells diabetes related supplies.
Canadian Hearing Society (613) 521-0509						
Canadian Housing & Mortgage (613) 748-5134						

Agencies	Settlement		Language Training Programs	Senior Sp	becific Programs	Other
	ISAP	Non-ISAP	_ ~	Health	Community	
Canadian Mental Health Association (613) 737-7791		Information Referral		Referral to self-help groups		 To promote mental health, to support a high standard of services and supports for people with mental health problems. Case management, outreach services, daily living support services & newsletter production. Housing Registry – refer mentally ill
Canadian National Institute for the Blind (613) 563-9238						clients to housing opportunities.
Canadian Psoriasis Foundation (613) 728-4000						 Educational literature distributed to libraries, schools, hospitals & clinics. Quarterly newsletter.
Cards Creations (613) 729-7926						Adaptive wear for women & men with special needs. Clothes made on premises.
Catholic Family Service of Ottawa- Carlton (613) 233-8478				Elder Abuse		
Catholic Immigration Centre (613)232-9634	X		LINC			 Reception House where new immigrants & refugees can stay on a short term basis. HOST program Pastoral & sponsorship program Cultural profiles
Centre de jour Guigues (613) 241-4070			Referral	 Health Promotion Day care program for frail seniors 		* This centre is for French speaking seniors.
Centre de Jour Seraphin Marion d'Orleans Centre culturel d'Orleans (613) 830-7611			Referral	 Health & fitness classes Workshops	 Monthyly community lunches Art courses Crafts Choir 	* This centre is for French speaking seniors who are 55 and over.
Churchchill Seniors' Recreation Cr. (613) 798-8927				 Fitness classes Foot care service run by VON 	 Social & recreational programs for 55+ years Day trips, Drop-ins, Bowling, billiards 	• Some senior activities are offered in conjunction with the Churchill Club (small membership fee).

Agencies	Settlement Language Senior Specific Programs Training		pecific Programs	Other		
	ISAP	Non-ISAP	1 °	Health	Community	
City of Nepean Seniors Recreation Cr. (613) 727-6657					Recreational programs	
City of Ottawa Senior Centre (613) 244-5300 Ext. 4112					Recreational program	* This program is sponsored by Department of Community Services
Community Information Centre of Ottawa (613) 241-4636						
Community Legal Services (613) 241-7008						
Cultural Centre - 50+ (613) 562-5800 ext. 3456			Language Classes		 Drama Lectures on varied topics, art, opera 	*This centre is located at the University of Ottawa
Cumberland Home Support (613) 835-3526				 Meals on Wheels Luncheon Program Foot Care Clinics 		TransportationTelephone AssuranceFriendly Visiting
FAFO – Regionale d'Ottawa-Carleton						Regional committee to regroup francophone senior citizens' clubs. 262 chemin Montreal, P.O. box 79116 Vanier K1L 6C0
Family Service Centre of Ottawa- Carlton (613) 725-3601				Elder Abuse		
Gloucester Home Suppport Program (613) 741-6025		InformationReferral		Meals on Wheels		 Transportation to appointments Friendly Visiting Telephone Assurance Grocery bus shopping Monthly meetings for caregivers "You and your aging parent" Workshop
Gloucester Senior Adults' Centre (613) 749-1974				 Blood pressure & foot care clinics Exercises classes Tai chi 	 Painting, line dancing, crafts, shuffleboard, bingo, card games, carpet bowling, darts 	 Lunch is served daily with a sit down dinner Thursday at noon

Agencies	Settlement		Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
The Good Companions Seniors' Centre (613) 236-0428 Good Companions Home Support Services (613) 237-6879				 Home Support Service Health Service Footcare and Health Clinics 	 Social, recreational & educational activities. Social Service 	 Special programs with transportation provided for disabled seniors Daily meals Friendly Visiting/Telechat Telephone Assurance Program Reasonable rates for Home Help such as cleaning, seasonal yard work, minor home repairs Transportation/escort
Goulboum, Kanata & West Carleton (Community Resource Cr. Of) (613) 591-3686		InformationReferral		 Meals on Wheels (hot or frozen) 	 Van outings Diners' Club (includes Transportation, meal & social activity) 	 Transportation & escort service Friendly visiting Home Maintenance Income Tax Assistance
<u>Grocery Buses:</u> C/o Gloucester Home Support Program (613) 741-6025 c/o Good Companions Home Support Services (613) 237-6879		Information Links to Community & Health Services				 Bi-monthly bus for grocery shopping for seniors in North Gloucester and North-East Ottawa, east of St. Laurent Blvd. * This service is sponsored by Cayen's Your Independent Grocer.
<u>Grocery Bus:</u> C/o Good Companions Home Support (613)237-6879		 Information Links to community & health Services 				 Alternate weekly bus for grocery shopping for Hartman's Centretown. *Sponsored by Hartman's Your Independent Grocer
<u>Grocery Bus</u> : North-East Ottawa C/o Good Companions Home Support Services (613) 237-6879						Alternate weekly escorted grocery shopping for seniors living in North- East Ottawa, west of St. Laurent Blvd. Including Lindenlea, Manor Park, New Edinburgh, Overbrooke Forbes, Rockcliffe & Vanier. *Sponsored by Loblaws.
<u>Grocery Bus</u> : Olde Forge Community Resource Cr. (613) 829-9777						 Weekly seniors shuttle service for seniors living in apartment buildings in Britannia. *Sponsored by Loeb Lincoln Heights.

Agencies		Settlement	Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	-	Health	Community	
Grocery Bus: Ottawa West Community Support (613) 728-6016						 Two grocery shopping b uses bi- weekly. Monthly personal shopping trip.
Heart & Stroke Foundation of Canada (613) 569-4361						• To further the study, prevention & reduction of disability & death from heart disease & stroke through research, education & the promotion of healthy lifestyles.
Heron Road Seniors' Centre (613)247-4802					Over 40 recreational programs	 Multiservice centre: Dance studio, weight room, seniors' lounge, library, gymnasium, amphitheatre & classrooms.
Housing Help (613) 563-4532						
Italo-Canadian Senior Citizens Group (613) 233-9398						 Friendly visiting to homes & hospitals. *Centre for Italian speaking seniors.
Jewish Family Services of Ottawa- Carleton (613)722-2225	X	 Immigrant Resettlement Program A Russian resource drop-in cr. Translation Advocacy Housing 	LINC	 Peer support group for Russian speaking Seniors. 	 Information & Referral. Kosher Meals on Wheels Wheels to Meals – provide isolated seniors with meals in social setting. Volunteer transportation for seniors. Friendly Visiting. In-home assessment by social workers. Teleshalom: telephone reassurance program. Leisure Activities. 	 Support for separated & divorced individuals. Abuse and family violence. Emergency Financial Aid Jewish Family Life Education: On-going support program for clients within a Jewish context. Provides shoppers with transportation for groceries and/or kosher meat.
JoAnne's Fashions for Senior Women (613) 725-9093						Adaptive clothing for special needs for senior women sizes 4 to 24.
Kanata Seniors'Centre (613) 592-4291 ext. 248				Health program	 Social & recreational Programs Opportunities for seniors To volunteer 	Other programs & services offered at the Centre by City of Kanata, Kanata Library & the Resource Centre of Kanata, West Carleton & Goulboum.

Agencies	Settlement Language Senior Specific Programs Training		pecific Programs	Other		
	ISAP	Non-ISAP	Programs	Health	Community	
Kidney Foundation (613) 724-9953		InformationReferral		 Camps with dialysis facilities Patient education days, peer support 	Social events for patients	 Promotes national research, public education & organ donor awareness & providing prevention programs.
Kiwanian Alex Dayton Seniors Activities Centre (613) 728-5341				Exercise classes	 Dance classes, card & table games, shuffleboard, carpet bowling, five-pin bowling, socials, computer classes & Internet access Trips 	
Lawyer Referral Service 1-800-268-8326						
Lebanese & Arab Social Services Agency of Ottawa- Carlton (613) 236-0003 Legal Aid Ontario	X				Senior Integration Program	 Women's Support Services Community Development
(613) 238-7931 L'Eta d'Oro of Villa Marconi						 Golden Age Program for seniors of Itatian origin.
(613) 727-6201 Le Patro d'Ottawa (613) 789-7733						* This centre is for Francophones, 50 years and up.
Lung Association (613) 230-4200				Asthma Education Centre which offers services in English, French & Spanish.		 Education programs & materials on emphysema, chronic bronchitis, chronic obstructive lung disease, tobacco & Asthma.
Ministry of Community & Social Services (613) 234-1188						 Financial assistance to seniors who have not lived in Canada for 10 years & who do not qualify for the Old Age Security pension. Eligibility determination includes examination of income, assets & living arrangements.
Multiple Sclerosis Society of Canada (613) 728-1583						Raise funds for research & provide services for people with Multiple Sclerosis, including financial assistance for aids & personal service.

Agencies	Settlement		Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Nepean Seniors' Home Support (613) 829-1133		 Information Referral 		 Meals on Wheels Foot Care Clinic 	Interest Workshops	 Home maintenance, home help In-home Respite Care, Transportation to medical appointments, Van to Grocery Shopping, Telephone Assurance, Friendly Visiting, 55 Alive Drivers' Course, Telechat, Income Tax assistance, Minor repairs.
Nepean Seniors' Recreation Centre (613) 727-6657				Chair exercise	Recreational programs including games, shuffleboard, carpet bowling, curling & socials	
Odawa Native Friendship Centre (613) 722-3811		• Referral		Life Long Care Program – Aboriginal people with limited mobility related to physical disabilities.	Medical transportation	 Friendly visiting, security checks, adult day program, congregate dining. *Centre for Aboriginal people.
Olde Forge Community Resources Cr. (613) 829-9777				Foot care Luncheons	 Educational Workshops Friendly visiting Telephone assurance Transportation to medical appointments. 	 Homemaking Home repairs & maintenance, Weekly grocery bus.
Ontario March of Dimes (613) 225-3912					 Public Education Community Development 	Personal support services including financial aid for prosthetics, orthotics & other necessities.
Ontario Rental Housing Tribunal 1-888-332-3234						Resolves disputes between landlords & tenants about rights & responsibilities under the Tenant Protection Act, including rent increases, evictions and privacy issues.
Ottawa-Carleton Community Care Access Centre (613) 745-5525						 Accepts applications for short term care or long term care facility such as nursing home & home for the aged.

Agencies	Settlement		Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Ottawa-Carleton Immigrant Services Organization (613)725-0202	X	Immigrant Women's Program – Assist with Integration Through Workshops & Group Activities	Language Training Program ESL	 Polish Senior Peer Support Group Mental Health Community Support Service - case management of individual with Psychiatric illness - multilingual Service. Cross-cultural Education Program 		 Lawyer from legal aid to assist newcomers. Multicultural Liaison Program Inter Amicos – refugee sponsorship program. Volunteers to assist newcomers
Ottawa Carleton Social Housing Registry (613)526-2088						• A centralized applications centre and waiting list for subsidized housing in Ottawa-Carleton.
Ottawa Chinese Community Service Cr. (613) 232-2877	X		ESL			 Outreach & Escort Program Drop-in centre Support services for people with mental illness
Ottawa Stroke Association (613) 820-0864						 Self-help group for stroke patients & their families. Monthly meeting - 2nd Thursday.
Ottawa West Community Support (613)728-6016				 Meals on Wheels Luncheon Club Foot care. 	• Day Support program from Monday to Thursday.	 Transportation to medical appointments, friendly visiting, TAP (Telephone Assurance Program), grocery & personal shopping bus. Paid workers for cleaning, minor repairs, indoor & outdoor seasonal work, home help. <u>Homemaking & Respite Care</u> <u>Program</u>: \$12.00-\$13.95/hour Trained homemakers available 24 hours a day, seven days a week for in-home care for elderly, adults with disabilities, palliative care a& caregiver relief. Services include meal preparation, house cleaning, help with personal care.

Agencies	S	ettlement	Language Training	Senior S	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
PARA TRANSPO (613) 244-1289						Door-to-door service for persons unable to walk to or board regular transit service. Service is available for registered clients daily from 6:30 a.m. to 12:00 midnight.
Parkinson's Society of Ottawa-Carlton (613) 722-9238						 Provides support & information to assist people with Parkinsons, their families, & support for Parkinsons Clinic & Research at the Ottawa Hospital.
Prostate Cancer Association of Ottawa-Carlton (613) 798-5555 ext. 8236						 Provides support & enhance communication opportunities between patients/families and to serve as an information source on prostate cancer.
RA Seniors Club (613) 733-5100						 Day Centre - Open to retired persons age 55 and over.
Regional Government of Ottawa-Carleton Health & Social Support Services to seniors (613) 560-6000						• Regionally funded program that provides financial support for medical & special needs to seniors not covered by other programs: home support services, residential care services, walkers, hearing aids, glasses, dental services. Eligibility is based on a financial needs test and there may be a deductible (user pay portion).
Senior Citizens Recreation Clubs (613) 234-8044						Recreational programs offered by Recreation department of local municipalities. Contact Senior Citizens Council of Ottawa-Carlton
Senior Citizens Council of Ottawa-Carleton (613)234-8044		InformationReferral			 Production of Senior Directory, monthly newsletter & June Calendar of Events for Senior Citizen Month Monthly meetings 	 55-ALIVE Mature Driver Refresher Program Letter Carriers Alert reassurance program Income Tax Clinics Operation Snow-Go Program Seniors can volunteer here.

Agencies	Settlement Language Senior Specific Programs Training		pecific Programs	Other		
	ISAP	Non-ISAP	Program	Health	Community	_
Seniors Council of Kanata (613) 592-8953						 To offer a voice for seniors To inform them of current issues To increase the visibility of seniors in Kanata
Service d'entraide Communautaire pour Les personnes ainees francophones (613) 241-1266				Respite care Telephone assurance Program	 Transportation & escort to medical appointments Friendly visiting Grocery bus 	 Home Support Services for elderly francophones Home help Home Maintenance
Somali Centre for Youth, Women, Community Development (613) 233-6578		 Settlement Integration Referral Counselling 				
Somali Cr. For Family Services (613) 526-2075		SettlementIntegration			 Senior Services Volunteers visit seniors at their homes 	Counselling, Women's Issues,Community Capacity Building
Somali Women Support & Info. Line of Ottawa- Carlton (613) 722-7033		 Providing information Referral Translation Counselling Cultural Interpretation 				 Outreach Advocacy Helping clients with housing, school or medical appointments, problems with the police.
South East Ottawa Centre For a Healthy Community (613) 737-5115		 Information Referral Advocacy 		 Foot care Health Services Health Promotion Counselling Clothing Depot Bereavement support Caregiver support 	Workshops	Transportation & escort to medical appointments, friendly visiting, respite care, telechat, home maintenance, homemaking, snow removal, newsletter, income tax preparation.
Special Shoppers'Bus, OC Transpo (613) 741-4390						Operates on Fridays except public holidays.
Township of Osgoode Home Support Program (613) 821-1101		InformationReferral		Foot careMeals on Wheels	Diners' club	Transportation, shopping bus, friendly visiting, telephone assurance, income tax prepartion.

Agencies	Settlement		Language Senior Specific Programs			Other
	ISAP	NON-ISAP	Training Programs	Health	Community	
Township of Rideau Senior Citizens' Service Centre, Inc. (613) 692-4697		 Information Referral 		 Foot Care Clinic Hearing Aid Clinic Day surgery Meal on Wheels (hot or frozen) 	 Social activities Diners' program 	Friendly Visiting, telephone assurance (TAP), transportation to medical appointments, shopping services, home help, home maintenance, sitting service, income tax assistance, convalescnet equipment retals.
United Ostomy Support Group, Ottawa, Inc. (613) 722-7944						 Provide moral support & rehabilitation, both pre and post operatively, for patients undergoing ostomy surgery so that they may resume a normal & active life.
Vanier Community Service Centre (613) 744-2892		Referral		Crisis InterventionLong Term Counselling		
VHA Health & Home Support (613) 238-8420				 Professional nursing care 		Personal care, meal preparation, home maintenance, respite care, Staff with specialty training in Alzheimers, palliative, mental health, disabled & family care.
						User fees. Government subsidy & United Way funding.
Vietnamese- Canadian Centre (613) 230-8282						Providing a centre where Vietnamese can meet to share information, read Vietnamese magazines/newspaper
Yet Keen Day Centre (613) 232-6695		 Information Referral Translation Interpretation 		 Health promotion & education Escort to medical appointments 	Recreational programs: Dancing, fitness, exercises, singing.	 Grocery shopping, clothing service, hot lunch served twice a week. * Day Centre for Chinese.
YMCA/YWCA Of Ottawa-Carlton (613) 788-5000					Recreational programs	
(1) Carlingwood Y Centre (613)729-7131					Recreational programs	
(2) Nepean Y Centre (613)727-5070					Recreational programs	
(3) Palladium Y Cr. (613)599-0280					Recreational programs	

Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	1
Advocacy Centre for the Elderly (416) 598-2656				Advocacy for elder abuse, mental health & competency	Community legal education	Community Legal ClinicLegal informationAdvocacy
Afghan Association of Ontario (416)744-9289	Х				Taped community event line (416) 744-8015	
Afghan Women's Counselling & Integration Community Support Org. (416) 588-3585	X		Heritage Language Classes LINC Classes	Health workshopsCrisis Intervention	Senior program	
Alliance of Seniors to protect Canada's Social Programs (416) 635-8819		InformationReferral			 Educate seniors about social programs. 	
Alzheimer Society for Metro Toronto (416) 322-6560				Telephone counsellingFamily support groupsPublic education	National Alzheimer Wandering Registry.Resource Centre.	
Anne Johnston Health Station (416) 486-8666				 Adult day care for persons with Alzheimer disease & other seniors Dental services Foot care Nutrition Health education Home health care 		* This community health centre with focus on seniors with spinal cord related disabilities.
Arab Community Centre of Toronto (416) 231-7746	X			Counselling of victims of family violence.	Social & cultural activities.	Legal services.
Arthritis Society Ontario Division (416) 967-1414				 Support groups Public education Aquatics program Self Management program. Multilingual eduation pamphlets. 		

Agencies	Settlement		Language Training	Senior Sp	becific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	
Association of Jewish Seniors (416) 635-2860 Ext. 458					 Coordinates social & political action activities Cultural programs 	* Umbrella organization for 19 Jewish seniors groups.
Baycrest Centre for Geriatric Care (416) 785-2500				 Geriatric Clinics Day Care Services Arthritis Education & Exercise Program Osteoporosis POWER Program Geriatric Psychiatry Community Services Baycrest Hearing Aid Services Parksinson's Early Intervention Program Memory & Aging Workshop Complex Continuing Care Program 		
Bernard Betel Centre for Creative Living (416) 225-2112				 Care Program La'Briyut Wellness centre – check blood pressure, hearing Nutrition & family counselling, health promotion, promotes awareness of elder abuse Support group of victims of elder abuse Meals on wheels. Respite care. 	 Recreational, cultural, educational & religious programs Drop-in Sunday 11-5. Library Congregate dining Friendly visiting Dial-a-Friend (telephone security check) Transportation program 	Income tax clinic.
Birchmount Bluffs Neighbourhood Centre (416) 396-4310				 Health & fitness Drop-in Information & referral 	 Social & recreation activities Outreach program 	
Birkdale Community Centre, Senior Citizens Recreation Cr. (416) 396-4052				Drop in Centre	 Recreation, social & education programs Trips, special events Congregate dining 	

Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	
Bloor Information & Life Skills Centre (416) 531-4613	X			Crisis management for assaulted women	Access centre for Toronto Social Housing Connection	
Bloor Jewish Community Centre (416) 924-6211					Seniors clubRecreational activities	
Bob Rumball Centre for the Deaf (416) 449-9651			LINC program	Caregiver relief Deafness, impaired hearing services	 Recreation Supportive housing 	
Canadian Cancer Society (416) 440-3330				 <u>Cancer Connection</u> – Telephone peer support program <u>Reach to Recovery</u> – Mastectomy & lumpectomy patients. <u>Smokers' Helpline</u> – <u>Man to Man</u> – prostate cancer peer support group. <u>Side by Side</u> – women's group. 		
Canadian Diabetes Association (416) 363-3373				 Information & literature on health care & nutrition Support groups 	 Library with pamphlets in various languages Videos 	Various chapters in different parts of Toronto
Canadian Hearing Society (416) 964-9595			American Sign Language Classes	 Counselling Hearing Help Classes 	 Ontario Interpreter Services professional ASL interpreters for medical, legal, business, employment, social & government agencies Resource Library 	Pathology – hearing tests, sells & repairs hearing aids
Canadian Mental Health Association (416) 789-7957		InformationReferral		 Educational Work- shops Multicultural Women's Wellness Programs 		Multicultural Women's Wellness Programs conducted in different languages.
Canadian National Institute for the Blind (416) 486-2500		InformationReferral		 Counselling. Rehabilitation Teaching – learning to adjust lifestyle to a visual impairment. 	 Library with materials in braille & on audiocassette tapes, talking book machines. Recreational services. 	Central (1929 Bayview Ave.), East (1200 Markham Rd.) & West (720 Spadina Ave.) offices.

Agencies		Settlement	Training		pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	
Canadian Pensioners Concerned, Ontario Division (416) 368-5222						Advocates on issues of concern to seniors such as pensions, health care & housing through briefs & representation to various levels of government.
Canadian Red Cross Society (416) 480-2500		Assistance to immigrants		 First Aid training. Meals on Wheels Good Food Box distribution. 	Community development & Outreach.	 Homemaking & caregiver relief for individuals Emergency food & clothing Transportation to medical appointments & grocery shopping
Canadian Tamil Women's Community Services (416) 289-2099				 Family counselling Wife assault & domestic violence support & counselling 		
Canadian Ukrainian Immigrant Aid Services (416) 767-4595	X		LINC Programs			
Carefirst Seniors & Community Services Assoc. (Richmond Hill) (905) 771-3700		 Referral Escort to medical appointments 		 Meals on Wheels Adult Day Service Wellness & Health Education Caregiver Support 	 Seniors Caring for Seniors Outreach program Drop-in Centre for seniors Friendly visiting 	Home support servicesSupportive housing
Carefirst Seniors & Community Services Assoc. (North Toronto) (416)502-2323		 Referral Escort to medical appointments 		 Meals on Wheels Adult Day Service. Wellness & Health Education Caregiver Support Friendly visiting Seniors self help groups 	 Seniors Caring for Seniors Outreach program Drop-in Centre for seniors Supportive housing services 	Home support services
Carefirst Seniors & Community Services Association (South Toronto) (416) 585-2013		 Referral Escort to medical appointments 		 Adult Day Service Wellness & Health Education Caregiver support Friendly visiting Seniors self help groups 	 Seniors Outreach program Drop-in Centre for seniors Supportive housing services 	Home Support services

Agencies	Settlement		Language Training	Senior S	pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	
Canada's Assoc. For the Fify-Plus (CARP) (416) 363-8748						 Advocacy Group benefits on products & services. Magazine.
Catholic Cross Cultural Services (Peel) (905) 457-7740	X					
Catholic Cross Cultural Services (Scarborough) (416)757-7010	X					
Catholic Cross Cultural Services (Toronto) (416) 324-8225	X					
Catholic Family Services of Toronto (Emmanuel Cr.) (416) 921-1163				Counselling	Caregiver Support	
Central & Northern Etobicoke Home Support Services (CANES) (416) 743-3892				 Respite Care Caregiver support Case Management Information & referral 	Friendly visitingCongregate diningRecreationSecurity checks	Home help, homemaking (personal care, shopping, meal preparation), snow removal, home maintenance, supportive housing.
Central Eglinton Community Centre (416) 392-0511				Foot care.	 Congregate dining Social & recreation activities Day trips 	 Legal clinic Financial planning clinic Income tax clinic
Central Neighbourhood House, Home Support Program (416) 966-8595				 Escort to medical appointments Respite care Case management 	 Friendly visiting 	Home health careHome making
Centre for Information & Community Services of Ontario (CICS) (416) 292-7510	x		LINC & ESL Programs	 Life skills workshops Family life education Individual & family counselling Social & mutual support groups. 	Social & recreational activities	 Toronto office – 598-2022 Language & Training Centre – (416) 299-8118 *This centre is for Chinese seniors.

Agencies	Settlement		Language Training Program		ecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Centre Francophone Du Toronto Metropolitan (416) 203-1220		X			 Cultural activities 	 Multiservice francophone centre Directory of Francophone services Assistance in finding subsidized housing
Centre Medico-social Communautaire (416) 922-2672				 Francophone Community Health Centre: Crisis intervention, counselling 	Community outreach	 Access centre for Social Housing Connections French medical interpreter service Satellite clinic at Fairview Mall Drive
Centre for Spanish Speaking Peoples (416) 292-7510	X		LINC ESL Spanish Classes	 Crisis counselling for Victims of domestic violence. AIDS Support Program 	Community Legal Clinic	
Centres D'Accueil Heritage (416) 365-3350 x231				Services in French for seniors		
Chinese Seniors Health & Recreation Assoc (416) 593-6642			ESL Program.	Health promotion	 Social, cultural & recreational programs 	
Circle of Care (416) 635-2860				 Counselling Foot care Escort to appointments Respite care Caregiver support Case management Meals on Wheels Specialized workers for persons with Alzheimer disease or mental health problems. Older Woman abuse Program Palliative care 	 Friendly visiting Intergenerational programs Transportation Security checks 	 Home help, homemaking, home health care. Specially trained volunteers for persons with cognitive impairments, mental health disorders or terminal illness.
Community Care East York (416) 422-2026				 Adult Day Program. Wellness Programs. Social Work Services. 	 Community Care Senior Centre O'Connor House – senior group home Supportive Housing 	 Home Support Services Respite care Home maintenance – odd jobs & handyperson Friendly visiting

	Settlement			Senior Sp	ecific Programs	
	ISAP	NON-ISAP		Health	Community	
Community Information Fairview (416) 493-0752		Information Referral				Income Tax Clinic Legal Clinic
Community Information Cr. of Metro Toronto Toronto (416) 397-4636		Information Referral				Publication – Directory of Community Services in Toronto
Community Outreach Programs in Addiction (COPA) (416) 516-2982				 Drug & alcohol counselling Case management. Telephone consultation 	OutreachRegular home visits	
l	ISAP	Non-ISAP		Health	Community	
Concerned Friends of Ontario Citizens in Care Facilities (416) 489-0146				 Complaints Crisis Intervention Patient rights Retirement homes Long term care facilities 		
COSTI-IIAS Immigrant Services (416) 658-1600	X		LINC & ESL Programs	Counselling	 Recreation, fitness, education & cultural activities for seniors. 	
COTA: Comprehensive Rehabilitation & Mental Health Services (416) 785-8797				<u>Psychogeriatric</u> <u>Services:</u> Rehabilitation & case Management for seniors with mental health /emotional problem.		
Culturelink (416)588-6288	×	HOST program	English Conversa- tion Circle ESL Program.			
DCVS Services For seniors (416)243-0127		Information Referral		Supervised adult day Programs including caring for seniors with Alzheimer Disease Caregiver Support Groups	 Friendly Visiting Respite Care including overnight respite program caring centre Adult afternoon/evening program 	

Agencies		Settlement	Language	Senior Sp	ecific Programs	Other
	ISAP	NON-ISAP	Training Program	Health	Community	
Dixon Hall (416) 863-0499				Health educationPodiatrist clinic	Social, recreation & fitness programs	 Home Support Services: van shopping, list shopping. Escort to medical appointments.
Dixie Bloor Neighbourhood Centre (905) 629-1873	Х					
Don Mills Foundation for Senior Citizens (416) 447-7244				 Adult Day Centre Alzheimer Day Centre. 	 Overland club – social & recreation programs 	 <u>EP Taylor Place Community Services</u>: Meals on Wheels, respite care, friendly visiting. <u>EP Taylor Place Senior Adult Centre</u>: social & recreation programs, health counselling, chiropodist, financial & legal clinics, income tax assistance.
Downsview Services to Seniors (416) 398-5510				 Day Programs including stroke survivors day program. Provides home support to seniors who have caregivers living outside of Toronto. 	 Social, recreation & education programs. <u>Satellite program</u> in Toronto Housing Company building. <u>Senior's day program</u> for persons with dementia in Branson Place. 	 <u>Home Support Services</u> – Respite care for persons with Alzheimer Disease & monthly Alzheimer caregiver support group. Homemaking, Meals on Wheels. Friendly visiting Caregiver hotline, telephone security check Client intervention & assistance.
East York Access Centre for Community Services (416) 423-3559				 In-home health & social services Placement in Long Term Care Facility Crisis Placements 	 Information & Referral Coodination of services for Acquired brain injuries patients 	Short Term Placements (respite or vacation care)
East York Meals on Wheels (416) 424-3322				Vegetarian, Chinese & South Asian meals available • Foot care clinic • Information & referral	Telephone security check	
Eastview Neighbourhood Community Centre (416) 392-1750				Escort serviceDrop-in centres	 Recreation Friendly visiting Senior choir Trips 	Income tax clinicShopping

Agencies	Tra		Language Training Program	Senior Sp	Other	
	ISAP	Non-ISAP		Health	Community	
Elderly Vietnamese Assoc. Toronto (416) 588-8532		 Translation Interpretation Information. 		Counselling.Drop in Centres.	 Social & recreation Programs Visits to homes & hospitals 	Quarterly magazine
Etobicoke Community Care Access Centre (416) 626-2222				 Care for persons with Alzheimer disease Case management. Information & referral Home health care Respite care 		Home supportHomemaking
Ethopian Associaton in Toronto Inc. (416) 694-1522	X		LINC Program.	 Counselling assaulted women Psychiatric crisis counselling 		
Extendicare Canada (416) 470-4000				 Short term respite care Nursing homes 		
Eye Contact (416) 398-2590 (416) 930-7409 – for Crisis.				 Eye services. In-home services. Emergency service available. 		
Fairfield Seniors Centre (416) 534-8829				 Fitness programs Peer support Information & referral. Foot care Health information workshops & support groups 	 Social, recreation & education programs Congregate dining 	 Income tax clinic Retirement workshops
Family Services Association of Toronto (416) 595-9618				 Counselling Elder abuse Health education Caregiver support 	 Recreation program Illahee Lodge – summer health promotion program in Cobourg 	
Family Service Association in Trusteeship for Dejinta Beesha (416) 586-9777	X					

Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	NON-ISAP	Program	Health	Community	
Finnish Social Counselling Service of Toronto (416) 928-5994				 Delivery of ethnospecific meals, music cassettes, medical dictionaries Multilingual translation & interpretation 	 Friendly visiting In-person & telephone Security checks 	 Home help, shopping Workshops on power of attorney forms
Flemingdon Health Centre (416) 429-4991				 Nutrition counselling Individual & family counselling 	Outreach program.	
Flemingdon Neighbourhood Services (416) 424-2900		X		Counselling for abused women		Income tax clinic
Four Villages Community Health Centre (416) 604-3361				 Foot care, shoe, eye, & hearing clinics Geriatric Care Health & nutrition Education 		
George S. Syme Seniors Centre of York (416) 766-0388				 Drop-in centres Geriatric care Bereavement counselling Foot care 	 Congregate dining Recreation program 	 Income tax clinics Legal information Snow removal
Good Neighbours Club (416) 366-5377				 Escort services Case management. Drop-in centres Counselling 	 Friendly visiting Recreation program Transportation 	 Emergency clothing Shower & laundry facilities *This club is for men 50 years & over.
Grandparents Raising Grandchildren (416) 469-5471						
Greek Community of Metro. Toronto Social Services Centre (416)469-1155		 Information Referral Translation Orientation Assists in housing 		 Pre-retirement counselling Family & individual counselling Assists in pension application 	 Home support service – Friendly visiting Telephone security check 	
Harriet Tubman Community Org. (416) 496-2044	X					

Agencies	S	settlement	Language Training Programs	Senior Sp	ecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Home Care Denture Service 1-888-427-6453				 Full denture service in patient's home, long term care facilities, nursing homes & hospitals Dentures & emergency services 		
Hospital Special Needs Inc. (416) 391-2937					Group transportation for recreation outings	* Transportation for seniors with physical disabilities in long term care facilities, disability centres or hospitals.
Humber Community Seniors Services (416) 249-7936				 Meals on wheels Adult Day Program 	 Recreation program Security checks Shopping services Transportation 	 Home maintenance including grass cutting, painting, minor repairs Books on wheels
Humber River Regional Hospital (416) 249-8111				Geriatric care Impaired hearing		
Immigrant Women's Health Centre (416) 323-9986				 Health education Workshops in factories followed by visit by mobile unit 		 Distributes Immigrant Women's Health Handbook
India Rainbow Community Services of Peel (905) 275-2369	X					
INAS Canada (Toronto) (416) 240-1844						 Assisting in the completion of application for Canadian & Italian pensions
INCA Canada (416) 781-0712						 Information & assistance to pensioners regarding financial programs with Italy, Belgium, France, Germany & Canada.
INTERCEDE for the Rights of Domestic Workers, Caregivers & Newscomers (416) 483-4554	X			Support groups	Off-site outreach meetingsLeadership workshopsRecreation activities	

Agencies		Settlement Language Senior Specific Programs Training Programs		Other		
	ISAP	Non-ISAP	-	Health	Community	
Isington Centre – Etobicoke Senior Citizens (416) 231-3431				Foot care	 Social & recreation programs Trips Congregate dining 	Legal ClinicsIncome Tax Clinic
Jamaican Canadian Association (416)746-5772	Х			Programs for Abused & Assaulted Women including seniors.	 Social & recreation programs. 	
Jewish Immigrant Aid Services of Canada (416) 630-6481	X		• ESL Classes			
John Gibson House Supportive Housing Program (416) 537-3477					Supportive housing	* Older adults and seniors with special needs including psychiatric disabilities, who require 24 hours access to a combination of supportive housing services.
Kababayan Community Service Centre (416) 532-3888	X			 Women's support groups Support groups for abused women 	Recreation for seniors	
Korean Canadian Women's Association (416) 340-1234		X		 Counselling for assaulted women & family counselling Support groups Cultural interpretation 		
Korean Senior Citizens Society of Toronto (416) 532-8077		X	ESL classes.	Drop-in Centre	 Social, recreation & education programs 	
Lakeshore Area Multi-Services Project (LAMP) (416) 252-6471 Ext. 282	x			 Health promotion program Community health clinic Satellite Program – Among Friends Community mental health centre 	 LAMP Ask! Community Information Centre – Legal & Income Tax clinics Information & referral 	

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community]
Latino-Canadian Community Association of Scarborough (416) 496-2824		X				
Latvian Canadian Cultural Centre (416) 759-4900					Social & recreation programs	
Lawrence Heights Community Health Centre (416) 787-1661				 Foot care Geriatric care Health education Nutrition <u>No Ontario Health</u> <u>Insurance required</u> 		
Link Community Information & Referral Service (416) 395-5591				Information & referral		Income tax clinicHome maintenanceSnow removal
Loyola Arrupe Centre for Seniors (416) 766-7977				Foot care	 Social, spiritual & recreation programs Congregate dining - Transportation available 	Seniors apartments
Malton Neighbourhood Services (905) 677-6270	х					
Meals Here & There (416) 466-0587				Meals on WheelsCase Management.	Congregate diningFriendly visiting	
Meals on Wheels & More (416) 225-6041				Case Management.Meals on Wheels	Friendly visitingCongregate dining	Home maintenance
Medvisit (416) 631-3000				 Home health care House calls by doctors in non-emergency situations (response time average 2 hours) 		
Mennonite New Life Centre (416) 699-4527	X		LINC	Mutual aid groups – bereavement, anger management, women issues		

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
MIDAYNTA Association of Somali Service Agencies (416) 544-1992	X			Family violenceCounselling		
Mid-Toronto Community Services (416) 962-9449				 Case Management. Meals on wheels Adult day program Including persons with Alzheimer Respite care 	 Telephone security check Transportation to appointments 	Homemaking
Mobile Haircare Services (416) 498-5998				In-home services for hair care		
Momiji Health Care Society (416) 261-6683				Drop-in centres	Recreation program	 Supportive housing Seniors apartments * This centre is for Japanese speaking seniors
Momiji Health Care Society (Castleview- Wychwood Towers) (416) 531-7574				Meals on wheels	Friendly visitingTransportation	*This centre is for Japanese speaking seniors.
Multiple Sclerosis Society (Scarborough) (416) 289-1200				 Short term supportive counselling Public education Support groups 	Recreation programs Resource Library	Loan of assistive devices, subsidies for equipment, home cleaning if eligible
Mount Sinai Hospital (416) 596-4200				 Dental, eye, foot care, arthritis services Nutrition Home health care Palliative care – home visits by physicians 		
Multicultural Alliance for Seniors & Aging (MASA) (416) 785-2500 ext. 2645				Information & referral	Advocacy	*This agency is an umbrella organization of 40 member agencies. Its role is to advocate for seniors and to conduct research & policy analysis.
Multilingual Community Interpreter Services (416) 426-7051						Cultural interpreter services for non- English speaking persons – application through user organizations.

Agencies		Settlement	Language Training Programs	Senior Specific Programs		Other
	ISAP	Non-ISAP		Health	Community	
Multiple Sclerosis Society (Toronto) (416) 922-6065				 Short term supportive counselling Public Education Support groups 	Recreation programs Resource Library	Loan of assistive devices.Subsidies of equipment.
Native Canadian Centre of Toronto (416) 964-9087				 Senior's food bank 	 Aboriginal seniors outreach Community lunches Monday to Friday 	This centre is for the Aboriginal seniors.
Neighbourhood Centre (416) 698-1626				Information & referral		Home maintenance Income tax clinic Completion of forms
Neighbourhood Information Post (416) 924-2543		×		Information & referralCase Management.	Outreach program	Housing support services
Neighbourlink Downtown Toronto (416) 921-7214					 Friendly visiting Shopping services Transportation to medical & other appointments 	Completion of formsHome maintenance
Neighbourlink North York (416) 221-8283				Referral	 Friendly visiting Transportation to appointments 	Completion of forms
New Horizon Day Centre (416) 256-1892				Drop-in centres	Congregate diningRecreation program	
North York Community Care Access Centre (416) 222-2241				 Case management. Information & referral Respite care Supportive care for 60 days including persons with Alzheimer disease Health assessment Home health care 		 Homemaking Placement in Long Term Care facilities
North York Community House (416) 784-0920			LINK Program		Social, recreation & education programs	
North York General Hospital (416) 756-6000				 Seniors' Health Centre Long Term care Facility 		

Agencies		Training Programs		pecific Programs	Other	
	ISAP	Non-ISAP		Health	Community	
North York Seniors Centre (416) 733-4111				 Foot care Osteoporosis support group Adult Day Program Respite care Caregiver support 	 Recreation, social & cultural programs Library Day & Overnight Trips Friendly visiting Transportation to appointments 	 Financial counselling Legal advice Income Tax Clinic Homemaking
Northwood Neighbourhood Services (416) 748-0788	х		ESL Classes.			
Ontario Association of Non-Profit Homes & Services for Seniors (905) 851-8821						 Coordination & communication among organizations providing on-site or outreach services to seniors Public awareness Advocacy
Ontario Ministry of Community & Social Services. Ontario Disability Support Program (416)325-5666				Assistive devices	 Financial assistance Financial programs 	Home support
Ontario Ministry of Finance. Income Tax Related Programs Branch 1-800-263-7965					 Financial assistance Income supplements 	
Ontario Ministry of Health & Long Term Care (416) 314-5518				Health educationPublic health		
Ontario Ministry of Health & Long Term Care Assistive Devices Program (416) 327-8804				 Assists in paying for necessary equipment & services Annual grants to diabetic seniors for needles & syringes 		

Agencies		Settlement	Language Training Programs		pecific Programs	Other
	ISAP	Non-ISAP	-	Health	Community	
Ontario Ministry of Health & Long Term Care Drug Program Branch (416) 327-8109				 Seniors 65 years & over is eligible for Ontario Drug Benefit Program – certain restrictions applied. 		
Ontario Network for the Prevention of Elder Abuse (416) 978-1716				 Prevention of Elder Abuse & Neglect Education of professionals & lay persons Information sharing 	Resource materials	This network is affiliated with the University of Toronto Institute for Human Development Life Course and Aging
Osteoporosis Society of Canada (416) 696-2663				InformationPublic EducationSupport groups	 Literature Walking tapes & exercise videos for small fee Speakers are available 	
Parkdale Community Information Centre (416) 393-7689				 Information & referral 		Income tax clinicHousing assistance
Parkdale Golden Age Foundation (416) 536-6077				 Respite care Escort to appointments Telephone security check 	 Friendly visiting Congregate dining Social, recreation & Education programs 	 Home help including meal preparation, shopping Homemaking including personal care
Parkdale Intercultural Association (416) 536-4420		X	LINC Program			
Parkinson Foundation of Canada (416) 366-0099				 Information Exercise & social groups for patients & partners 		
Patronato ACLI (416) 633-1920						 Financial programs Assists with problems concerning pensions including pensions from European countries
Pine Tree Senior Centre (416) 283-9822				Drop-in centre	 Congregate dining. Social, education & recreation program. Transportation available. 	

Agencies		Settlement Language Senior Specific Program Training Programs		-	Other	
	ISAP	Non-ISAP		Health	Community	
POINT (People & Organizations in North Toronto) (416) 487-2390				 Respite care Information & referral 		Completion of forms
Polish Immigration & Community Services (416) 233-0055						
Polycultural Immigrant & Community Services Etobicoke South (416) 233-0055	X		LINC			
Polycultural Immigrant & Community Services (Scarborough South) (416) 261-4901	X		LINC program.			
Polycultural Immigrant & Community Services (Toronto West) (416) 533-9471	X		LINC Program.			
Providence Centre (416) 759-9321				 Adult day care including persons with Alzheimer disease Caregiver support Foot care Respite care Arthritis clinic Seating clinic 	 Social & recreation programs Transportation 	
Regent Park community Health Centre (416) 364-2261				Foot care, dental care, community health education, diet & nutrition.	 Family visiting 	* This centre has services for Chinese, Vietnamese and people from East Africa.
Regional Geriatric Program of Metropolitan Toronto (416) 480-6026				Sunnybrook & Women's College Health Sciences <u>Centre:</u> Psycho- geriatric & Alzheimer clinics		• Foot care van

Agencies	Settlement		Language Training Programs	Senior Sp	ecific Programs	Other
	ISAP	Non-ISAP	Ŭ	Health	Community	
Rexdale Women's Centre (416) 745-0062	x		LINC program.	Ethnocultural Seniors <u>Advocacy Project</u> : works towards full participation of ethnocultural seniors to access preventive health services & recreational activities		
Riverdale Hospital (416) 461-8251				 Chronic care dialysis Neurological care Orthopaedic & medical rehabilitation HIC/AIDS care Palliative care Day treatment program 		
Riverdale Immigrant Women's Cr. (416) 465-6021	X		LINC Program.	Counselling for assaulted women. Family violence education. <u>Alternative Medicine</u> Clinic.		 Shepherd Ave. Location: (416) 293-0228 Bloor St. Location: (416) 927-0527 Danforth Ave. Location: (416) 421-0929
Scadding Court Community Centre (416) 392-0335	Х		ESL classes.	<u></u>	Recreation & fitness.	
Scarborough Community Care Access Centre (416) 750-2444				 In-home health & social services Placement in Long Term care facilities Crisis & short term placements 	 Information & referral assistance including friendly visiting, meals on wheels, volunteer transportation & security check 	
Scarborough Hospital, General Division (416) 438-2911				 Arthritis & foot care, assistive devices, nutrition & health education. <u>Lifeline Program</u> – 24 hour emergency program. 		 After hours clinic. (416) 439-3424. Scarborough Palliative at Home Care Team (PACT) (416) 431-8171.
Scarborough Hospital, Grace Division (416) 495-2400				Adult day careFoot care		

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Scarborough Support Services (416) 750-9885				 In-home adult day care, assistive devices, respite care, Meals on wheels Security checks 	 Congregate dining Friendly visiting Recreation Transportation & escort services 	 Homemaking, home maintenance Supportive housing Snow removal
Scott Mission Senior Service (416) 532-2202				Meals on wheelsSecurity checksFoot clinic	 Friendly visiting Intergenerational programs Shopping & transportation Pet therapy Recreation program 	 Homemaking, home maintenance Food bank Clothing
Second Mile Club (416) 597-0841 (East Toronto & High Park Branch)				Foot clinic available at the High Park Branch & Rotary Lanughlen/China- town Branch.		
Second Mile Club 192 Carlton St. (416) 922-5819				Adult day program at 192 Carlton St. including foot care and meals.		* Services for Cantonese & Mandarin speaking seniors.
Second Mile (416) 481-4416 (Sheldrake Branch)					Social, education & recreation programs	* Services for Cantonese & Mandarin speaking seniors.
Selectacare (416) 225-8900				 Escort service Respite care Case management Security checks In-home services 	Friendly visitingHomemakingHome maintenanceTransportation	
Self Help Resource Centre of Greater Toronto (416) 487-4355				 Caregiver Support Information & referral 		
Senior Adult Services in the Annex Toronto (416) 923-8909				Adult Day program	 Friendly visiting Telephone Security check. Social, recreation & education programs Congregate dining 	 Income tax clinic Weekly recreation for Spanish speaking seniors

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
Senior Link	ISAP	Non-ISAP		Health Wellness centre 	Community Social, recreation & 	
(416) 691-7407				 Weiness centre Stroke recovery club Adult day programs for persons with Alzheimer Disease Adult day program Respite Care Personal health care 	education programs. • Congregate dining. • Escort to medical appointments • Friendly visiting • Shopping service	 Home support services such as homemaking, snow removal Home help Supportive housing
Senior Tamils' Centre (416) 496-2897					Friendly visitingInformation & referralRecreation program	*This association is a community & social service organization.
Seniors Central Housing Registry (416) 392-6111						Application for Senior's rental Apartments
Senior Peer Helping Centre (416) 239-7252				Trained senior volunteers provide individual support to other seniors	 Referral to other agencies when required 	
Seniors Repair Service (416) 752-3866						Home maintenance for East York, North York, Scarborough & other areas if volunteer available.
Social Planning Council, Ajax Pickering (905) 686-6270	X					
Society of Sharing: Inner-city Volunteers (416) 413-0380				 Escort services Respite care Security checks Support services Medication reminders Information & referral 	 Friendly visiting Recreation Shopping escort 	Large print cook book
Somali Canadian Association of Etobicoke (416) 742-4601		X				
Somali Canadian Community Association in Ontario (416) 248-4131		Interpretation Translation		Supportive counselling	Cultural & social activities	

Agencies		Settlement	Language Training Programs		ecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Somali Immigrant Aid Organization Toronto (416) 243-1988		X	LINC Program	 Health & nutrition information Food bank Escort services Housing referral 		 Legal information Anti-racism program
Somali Islamic Society of Canada (416) 745-2888		X		Individual & family counselling		Islamic lectures.
South Asian Family Support Services (416) 431-4847	X		LINC Program	 Individual & family Counselling for assaulted women Nutrition & health awareness programs. 	 Friendly visiting Social & recreation activities Community health education Outreach 	
South Asian Women's Centre (416) 537-2276	X		• ESL Classes	 Counselling for assaulted women. Educational workshops including race relations, family violence. 	Social & recreation activities.	* This centre is for people from South Asia.
South East Asian Services Centre (416)362-1375		X	LINC Program	 Individual & family counselling for assaulted women Family violence prevention workshops. 		 *This centre is for people from South East Asia.
South East Asian Services Centre (Gerard LINC and Senior Drop-in) (416) 466-8842			LINC Program		 Recreation & social programs. 	*This centre is for people from South East Asia.
SPRINT (Senior Peoples' Resources in North Toronto) (416) 481-6411				 Adult Day Care Including seniors with dementia Respite care including Persons with Alzheimer Disease Foot care clinic Meals on wheels. Security check. Alzheimer caregiver support group Peer support group for seniors 	 Transportation & escort to shopping, social activities & appointments Community dining in various locations Friendly visiting 	 Homemaking & home maintenance Supportive housing

Agencies	Settlement		Language Training Programs	Senior Sp	ecific Programs	Other
	ISAP	Non-ISAP	J	Health	Community	
St. Christopher House – Older Adult Centre (416)532-4828				 Client & Family services Caregiver Support Drop in centres Elder Abuse Prevention & Peer Support Project. Alzheimer Day Program 	 Home Support Services Supportive Housing 	Settlement services is also available in the same premises
St. Clair O'Connor Community (416) 757-8757				Alzheimer Day Program Elderly Persons Centre	Seniors ApartmentsNursing Home	
St. Clair West Services for Seniors (416) 787-2114			• ESL Program.	 Meals on wheels Adult day programs Respite care. Case management. 	 Shopping, transportation, friendly visiting Recreation program Congregate dining 	Home maintenance
St. Elizabeth Health Centre (416) 498-8600				 Foot care Meals on wheels Home health care Psychogeriatric care 	Transportation	 Home maintenance Homemaking DriveABLE – health assessment for drivers.
St. John's Rehabilitation Hospital (416) 226-6780				 Senior home safety program Specialized inpatient programs Chiropody & chiropractic clinics 	 Outpatient & outreach programs 	
St. Joseph's Health Centre (416) 530-6000				 Dental & eye care Home health care Psychogeriatric care Lifeline program Emergency response 	Community Osteoporosis Program with Education (COPE)	
St. Matthews Bracondale House (416) 656-2669					<u>Seniors Community Centre</u> – congregate dining, recreation & social programs.	 Seniors apartments – subsidies available.
St. Michael's Hospital (416) 360-4000				 Chiropody Clinic Arthritis care Rheumatology care Neurology care Orthopedics care 		

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	J	Health	Community	
St. Paul's L'amoreaux Senior Centre (416) 493-3333				 Health education & promotion Health & wellness clinic Meals on wheels Escort services Blood pressure clinic Foot care clinic Day care program 	 Friendly visiting, respite care, shopping, social, education & recreation programs Transportation by car, van & wheelchair Accessible van 	 Seniors apartments – subsidies available Homemaking, home maintenance <u>People Link Programs</u> – encourages participation & integration of diverse cultural groups
St. Stephen's Community House (416) 929-3281		X	• LINC • ESL	Adult day program	Social, recreation & education programs	
Storefront Humber (416) 259-4207				 Adult day care Respite care Foot care clinic Security checks Case management Crisis Intervention 	 Friendly visiting Transportation & shopping services Congregate dining 	 Homemaking & home maintenance Supportive housing
Student Assistance in North Toronto for Seniors (SAINTS) (416) 481-6284						 Home maintenance, snow removal & shopping services
Tamil Eelam Society of Canada (416) 463-7647	Х		• LINC • ESL			
Thorncliffe Park Neighbourhood Services (416) 421-3054	X		LINC program.	 Counselling for victims of family violence Support groups for survivors of domestic violence. 		
Toronto. City of Retirement & Lodging Home Complaint Hotline (416) 338-0001						 Snow removal – (416) 338-0338
Toronto Chinese Community Services Assoc. (416) 977-5345	X		LINC Classes. ESL Classes.	 Counselling Senior support group 	 Recreation Library Workshops & Seminars 	

Agencies	Settlement		Language Training Programs	Senior Sp	pecific Programs	Other	
	ISAP	Non-ISAP		Health	Community		
Toronto. Community & Neighbourhood Services (1) Home for the Aged Division. (416) 392-8906				 Adult day care Special care unit for persons with Alzheimer disease Respite care 		 Long term care facilities – listing of long term care facilities Supportive housing 	
(2) Homemakers & Nurses Services (416) 392-8545						Homemaking	
(3) Public Health (416) 397-4777				 Health education & promotion Nutrition Foot care & dental care 			
Toronto. Community & Neighbourhood Services (4) Social Services Division (416) 392-8623				 Assistive devices Dental services 		Financial assistance	
Toronto Community Care Access Centre (416) 506-9888				 In-home health & social services for seniors with physical, psychiatric or disabilities Respite care including persons with Alzheimer Disease Short stay – vacation care & crisis placements Case Management. 		• Homemaking	
Toronto East General & Orthopaedic Hospital (416) 461-8272				 Dental, eye & arthritis services Foot care Nutrition Health assessment 			
Toronto Finnish Canadian Seniors Centre (416) 425-4134				Respite Care	 Congregate dining Fitness & acquatics programs Social, recreation & cultural activities Library 	 Life lease & rental apartments Long Term Care facilities * This centre is for the Finnish community 	

Agencies	Settlement		Language Training Programs	Senior Specific Programs		Other
	ISAP	Non-ISAP		Health	Community	7
Toronto Housing Company (416) 392-6000						Senior apartmentsSupportive housing
Toronto Human Society (416) 392-2273				Pet therapy		 Caring companions – discounted pet adoptions for seniors 55 years and over
Toronto Intergenerational Partnership (416) 531-8447					 Friendly visiting by youths to seniors' in nursing homes or hospitals Seniors to volunteer in schools 	 <u>Seniors Assistance Home</u> <u>Maintenance Program</u> (SAHM) Home maintenance, snow removal, shopping services (48 hours notice required)
Toronto Rehabilitation Institute (416) 597-3422 Hillcrest Centre				 Musculoskeletal Rehabilitation Program <u>Out patient Services</u>: Occupational therapy, physio-therapy & heated therapy pool for persons with rheumatoid arthritis 		
Toronto Rehabilitation Institute (416) 597-3422 Lyndhurst Centre				 Spinal Cord Rehabilitation Program Outpatient fitness Centre Charles Robson Clinic Urological services 		
Toronto Rehabilitation Institute (416) 597-3422 Queen Elizabeth Centre				 Complex Continuing Care Program – long term care & palliative care Respite Care Chiropody Clinic Augmentative & Alternative Communication Clinic (ACC clinic)- Assistive Devices 		

Agencies			Language Training Programs	Senior Specif	Other	
	ISAP	Non-ISAP		Health	Community	
Toronto Rehabilitation Institute (416) 597-3422 Rumsey Centre				 <u>General Rehabilitation</u> <u>Outpatient Service</u> – Neurological & musculoskeletal programs. Pain management & maintenance Cardiac Rehab & Prevention Program 	,	
Toronto Rehabilitation Institute (416) 597-3422 416-59-REHAB University Centre				 Health assessments Psychogeriatric care Dental services Caregiver support Geriatric Rehabilitation Program Geriatric Day Hospital Neuro Rehabilitation Program Prevention & Rehab Of Osteoporosis 		
Toronto Social Housing Connections (416) 392-6111 Toronto Transit Commission (416) 393-4636 TTY 481-2523 Wheel-Trans (416) 393-4111 TTY 303-4555						Seniors apartments Transportation
TTY 393-4555 Trillium Health Centre (416) 259-6671 Queensway Site				 Foot care & eye Cr. Nutrition Diabetes education & Lipid program Stress testing Cardiac diagnostic services 		

Agencies	s Settlement		Language Training Programs	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Trillium Health Centre (416) 259-2573 Queensway Site McCall Centre for Continuing Care				 Adult day care Counselling Respite care Geriatric outpatient Program 		
Ukrainian Canadian Social Services Toronto (416) 763-4982		X		Support groups for abused women	 Recreation program Friendly visiting Home or institutional visits by staff to assess needs 	 Monthly legal clinic *This centre is for people with Ukrainian background
United Senior Citizens of Ontario (416) 252-2021						 Advocacy Publishes The Voice – monthly magazine
University Health Network Toronto General Hospital (416) 340-4800				 Chiropody & cardiac clinics Nutrition Geriatric Psychiatry Service Prostate Centre Tropical Disease unit Immunodeficiency clinic 		
University Health Network Sheppard centre Self Care Dialysis Unit (416) 223-2013				Self care Dialysis Unit		

Agencies	Settlement		Language Training Programs	Senior Sp	Other	
	ISAP	Non-ISAP	Ŭ	Health	Community	
University Health Network Toronto Western Hospital (416) 603-5800				 <u>Outpatient services</u> – Cardiac & pulmonary wellness, chiropody, nutrition, eye clinic, geriatric day care, low vision clinic, orthopedic clinics, pain manage- ment, rehabilitation, stress testing, stroke <u>Community Arthritis</u> <u>Management program</u>. Palliative care <u>Memory Clinic</u> includes Alzheimer Disease Senior Wellness Clinic 		 Interpretation Services: (416) 603-6400 professional interpreters for Chinese (Cantonese, Mandarin), Italian, Portuguese, Spanish Vietnamese. Interpreters can be arranged for other languages.
University Health Network Diabetes Education (416) 603-5897				 Diabetes education – 3 day program Interdisciplinary team – individual & group follow up 		
University Health Network Princess Margaret Hospital (416) 946-2000				 <u>Outpatient services</u> – Cancer treatment, Prostate Cancer Centre, Nutrition counselling, cancer coping skills program including prosthetics & wig boutique <u>Ontario Breast</u> Screening Program 		
University Settlement Recreation Cr. (416) 598-3444		X	ESL Classes		Recreation & social programs	
University of Toronto, Dental Clinic. (416) 979-4927				Dental servicesDentures		

Agencies	Settlement		Language Training Programs	Senior Sp	Other	
	ISAP	Non-ISAP		Health	Community	
VHA Home Healthcare (416) 489-2500				Home health care including nursing, attendant, respite care & foot care		Homemaking
Victim Services Program of Toronto (416) 808-7066				Elder abuse.Crisis intervention.Escort services.		
Victorian Order of Nurses (VON) (416) 499-2009				Foot careHome health careHealth educationNutrition.	 Friendly visiting 	Homemaking
Vietnamese Association of Toronto (416) 536-3611	x		• LINC • ESL	Support groups for seniors	 Outreach, home visits 	
Villa Colombo Community Services (416) 780-0407				 Information & referral Foot care Support group for caregivers of persons with Alzheimer Disease Adult day program Elder Persons Centre 		 Income tax clinic Forms completion Homemaking *This centre is for Italians who are over 55 years old
Villa Colombo Services to Seniors, Centro Anziani (416) 789-2113				<u>Community Programs:</u> Alzheimer Day Program Meals on Wheels – Italian style Emergency response System	 <u>Community Programs</u>: Congregate dining Transportation available 	 *This is a long term care facility for Italian seniors
Villa Community Services (416) 780-0407				 Adult day care Alzheimer disease Caregiver support Crisis intervention Foot Care 	Recreation program	 Supportive Housing Income tax clinics Completion of forms
Vision Institute of Canada (416) 224-2273				Eye servicesImpaired vision		

Agencies			Language Training Programs		ecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
Vita Community Living Services (416) 749-6234				Adult day care Including stroke & Alzheimer disease Respite care	Recreation program	
Volunteer Centre of Toronto (416) 961-6888						 Volunteering opportunities for seniors
Warden Woods Community Centre Seniors' Services (416) 694-1138				 Adult day care Caregiver support Case management. Foot care Health assessment Meals on Wheels Blood pressure & hearing clinics Security check Medication reminders 	 Congregate dining Friendly visiting Intergenerational programs- IRIE – group for West Indian seniors & their grandchildren Recreation programs Shopping services Transportation 	 Home maintenance Income tax clinics
West Hill Community Services (416) 284-5931				 Meals on wheels Respite care Telephone security checks Transportation & escort services Home care on site 	 Congregate dining Friendly visiting 	 Home maintenance Outdoor maintenance (snow shovelling, grasscutting)
West Park Health Care Centre (416) 243-3600				Adult day care including persons with Alzheimer Disease <u>Outpatient Services</u> : Audiology & Prosthetics clinics Orthotics & Augmentative and Alternative Communication Clinics Assistive devices Caregiver support Foot care Psychogeriatric care Respite care	Home visits	Long term care facilities

Agencies		Settlement Language Senior Specific Programs Training Programs		-	Other	
	ISAP	Non-ISAP		Health	Community	
West Scarborough Neighbourhood Community Cr. (4160 755-9215				Seniors drop-in centres	 Recreation program Congregate dining West Scarborough Seniors Club 	
West Toronto Support Services for Senior Citizens and the Disabled (416) 653-3535				 Adult day program including persons with Alzheimer disease Respite care Caregiver support Meals on Wheels Security checks 	Congregate diningFriendly visitingTransportation	Homemaking & home maintenance
Whitby Mental Health Centre Seniors Mental Health Program (905) 668-5881 1-800-263-2679				<u>Seniors Mental Health</u> <u>Program</u> : Day treatment centres, mental health & memory clinic	Community outreach	
Woodgreen Community Centre of Toronto (416) 462-3110	X			 Day program for persons with Alzheimer disease & other seniors Caregiver support Drop-in centres Security checks Information & referral Case management. Crisis Intervention 	 Recreation programs Congregate dining Shopping services Transportation 	 Available seniors housing Homemaking & home maintenance
Woodgreen Red Door Family Shelter. Red Door Abused Women's Shelter (416) 469-3457						Housing for Abused women
Working Women Community Centre (416)532-2824	X		• ESL program.	 Support group for assaulted women Support group Spanish speaking seniors 		Income tax clinic

Agencies		ettlement	Language Training Programs	g ns		Other
	ISAP	Non-ISAP		Health	Community	
Yee Hong Centre for Geriatric Care (416) 32-6333				 Adult day care including persons with Alzheimer disease Caregiver support Respite care Care management Health education Home health care 	 Recreation program Congregate dining Friendly visiting Escort & transportation 	 Home maintenance Long term care facilities Seniors apartments *This centre is for Chinese seniors.
YMCA of Greater Toronto (Korean Community Services) (416) 538-9412	x			Meals on wheels	 Cultural & recreation activities for Koreans Senior club for Koreans 	*This service is for Korean seniors.
Yonge Street Mission, Christian Community Centre (416) 929-9614				Drop-in Centres	 Recreation program Congregate dining & Transportation provided 	Food bank
York Community Care Access Centre (416) 780-1919				 In-home health & Social Services Health Assessments Home health care Home support Case Management. Short stay: Respite care including persons with Alzheimer disease Crisis placements. 		 Homemaking Long term care facilities
York Community Services (416) 653-5400				 Case Management. Counselling Foot care Multicultural health education Interpretation including escort to appointments 	Transportation	 Income tax clinics Completion of forms Snow removal

Agencies	S	Settlement		Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP		Health	Community	
York Fairbank Centre for Seniors (416) 394-2589				 Case Management. Counselling Drop-in Centres Foot care Health education 	 Congregate dining Social, education & recreation program 	 Home maintenance Snow removal Translation & Interpretation service available for Italian, Spanish & Portuguese
York West Senior Citizens Centre (416) 245-4395				 Arthritis clinic Foot care Impaired hearing Information & referral. 	 Recreation program Lunch & dinner programs 	Income tax clinics
Yorkminster Park Meals on Wheels (416) 482-0549				Meals on Wheels.		

Agencies	Settlement		Language Training	Senior Sp	ecific Programs	Other	
	ISAP	Non-ISAP	Program	Health	Community		
Alzheimer Society for Halton- Wentworth (905) 529-7030				 Elder Abuse Educational sessions for caregivers Family support groups Resource Centre. 	 Speakers available for community groups Wandering person registries. Visiting program in conjunction with VON 	Free public lecturesFamily counselling	
Ancaster, Dept. of Culture & Recreation (905) 648-4571					 Recreational program Ancaster Senior Achievement Centre Aquatic Centre 		
Amncaster Information Centre & Community Services (905) 648-6675		InformationReferral		Support service for seniors.Meals on WheelsProgram.	Community worker is available to link seniors up with local community & social services.	Income Tax Services.	
Ancaster Recreational Centre (905)648-3466				Foot clinic.	Recreational program		
Armenian Community Centre of Hamilton (905)662-3370			Heritage Language		 Services for immigrants Cultural Federation 		
Bereavement Network of Hamilton- Went-worth & Burlington (905) 574-5070				 Widow to widow YWCA 		Bereavement support group	
Canadian Diabetes Assoc. (905)528-3111				Diabetes Education through Literature, films & talks.	 Information booklets & Educational video tapes Are available for loan. 	 Used clothing is available. Syringes, monitors, test strips & cookbooks are available for sale. 	
Canadian Heart Foundation (Heart & Stroke Foundation of Ontario) (905) 574-4105				Eight educational meetings about heart & how it works, physical activity, nutrition & stress.			
Canadian Hungarian Senior Citizen Club (905)527-4843					Social activities include cards, bingo & billiards.		
Canadian Mental Health Association (905)521-0090				• Ensures the best possible care, treatment & rehabilitation of the mentally ill.			

Agencies	Settlement		Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	
Canadian National Institute for the Blind (950) 522-8555				 Counselling. Rehabilitation services teaching of braille & adaptive techniques. Orientation & Mobility service – assists individuals in understanding their changing vision. 	Library services: provides materials in braille, PrintBraille, audio & electronic text & descriptive videos.	 Technical Aids: Demonstrates & sells special devices to assist blind & visually impaired persons with daily living. Reginal Assessment Centre for the Assistive Devices Programs(ADP) provides assessments & training for high tech equipment required for home use & education. Transitional Training Centre (TTC) provides intensive training & rehabilitation programs in residential setting to blind persons. Deafblind Services: Provides information to deafblind persons.
Canadian Paraplegic Association (905) 383-0216						 Rehabilitation counselling services for issues in psychosocial adjustment, housing, finances, independent living & quality of life for adults with spinal cord injuries & mobility impairments.
Canadian Pensioners Concerned Inc. (416) 368-5222					To improve the quality of life for seniors who experience high property taxes, lack of affordable housing, inadequate income, support services	
Canadian Red Cross Society – Dundas Branch (905) 628-2552				 Home Healthcare Equipment Service. First Aid & CPR classes. 	"In Home Door Alarm Devices" – assist caregiver of Alzheimer Disease.	• LifeCall – emergency response system that provide subscriber with immediate medical assistance at a touch of a button.
Canadian Red Cross Society – Hamilton (905) 522-8485				 First Aid Meals on Wheels In-home Services Assistive Devices Hygiene Aids 		 Assists seniors who are not qualified for Disabled And Aged Regional Transit System in their transportation to appointments Home Care
Canadian Red Cross – Flam- borough (905) 689-0732				 Meals on Wheels First Aid & CPR 	 Friendly Visiting. LifeCall. Provides emergency food, shelter & registration in the event of a local disaster. 	 Assists seniors who are not qualified for Disabled And Aged Regional Transit System in their transportation to appointments

Agencies		Settlement	Language Senior Specific P Training		pecific Programs	Other
	ISAP	NON-ISAP	Programs	Health	Community	
Catholic Family Services of H-W (905)528-4740				Senior Peer Counselling	Sounding boards (group sessions) for seniors in Ontario housing complexes.	
Catholic Family Services – Seniors Case Manager (905) 527-3823				Reports of elder abuse are investigated & follow up services provided.	 Case Management for seniors: Coordination of Community Resources. Advocacy & Providing Information. 	
Circle of Friends For Newcomers (905)529-1840		Referral Escort services	EnglishClasses	 Health related educational workshops 	 Seniors Club Recreational & Social programs 	 Advocacy Community Development Volunteer s provide income tax clinics.
Coalition of Community Health & Support Services (905)529-0700				Planning & development of community-based health services.		Coalition of 33 community social & health services agencies for seniors living in Hamilton-Wentworth.
Community Care Access Centre (905)523-8600				Elder Abuse		Home CareHousing
Community Housing Access Network (905) 548-5417						Application for subsidized housing. Forms can be picked up at Housing Help Centre & Victoria Park Community Homes.
Community Information Service (905) 528-0104		InformationReferral		Referral to services for elder abuse & support services for seniors.	• Produces the Directory of Community Services (The Red Book) & Red Book Plus (disk).	 Information of community agencies that provide services for seniors.
Community Outreach Crisis Intervention Program (905)521-0090 ext. 240				Elder abuse		
Council Against Abuse of Older Persons				Elder Abuse Contact Seniors' Support Officers of Hamilton-Wentworth Police or Catholic Family Services – Seniors' Case Management.		

Agencies	Settlement		Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Disability Information Service Help Line (D.I.S.H.) (905)546-3475		InformationReferral		Services for people with disabilities located in Central Library.	One-stop access to community services & information.	
Disabled And Aged Regional Transit System (D.A.R.T.S.) (905) 529-1212					• Provides transportation for people with disabilities – apply to The Accessible Transportation Services office (905) 527-3711.	Connects seniors with organizations that provide transportation to and from doctors appointments & outings.
Distress Centre (905)525-8611				Elder abuse		
Doors of Friendship Community School (905) 545-6028					 Social, recreational & educational activities for seniors during day and two evenings weekly. 	
Dundas Community Service (905)627-5461		 Information Referral 		 Support services for Seniors & people with disabilities Counselling. Crisis Intervention. 	 Community Planning/ Development. Friendly visiting. Community education of Caregivers. 	 Income Tax Clinic. Legal Services. Transportation to medical appointments. Security checks or reassurance programs for seniors.
Eastmount 60 Club (905) 385-5022					 Recreational programs Senior Clubs 	
Estonian Seniors Club (905)527-0410					Social & recreational activities including chess & bridge clubs, trips & crafts.	*This club is for Estonian Seniors.
Family Services of Hamilton-Wentworth Inc. (905) 523-5640				Counselling for seniors	 Friendly visiting for seniors Telephone support for seniors 	 Bereavement, Separation and family counselling. Wife Abuse Services (905) 527-2002.
First Place Hamilton (905) 546-2800					 Recreational Activities – Day Program 	• Housing
First Place Seniors Community Centre (905) 525-9800				 Health & support programs. Foot clinic Vision support group 	 Cultural & recreational programs for seniors. Friendly visiting. 	DARTS transportation for shopping.

Agencies	Settlerr		Language Senior Specific Programs			Other
	ISAP	NON-ISAP	Training Programs	Health	Community	
Flamborough Information & Community Services (905)689-7880				Support services for seniors.		Home Care Income Tax Clinic
Four Corners Club of Westdale (905) 527-0333					 Senior activities include: Speakers, travelogues 	
Glanbrook Home Support Programme Inc. (905)692-3464		InformationReferral		 Support services for seniors. Foot Care Clinic. 		 Provides help to seniors, persons with disabilities to enable them to live independently in their homes. Escort to medical appointments, day care & grocery shopping.
Golden Mile Club (905) 383-2611					Recreational activities	
Grace Seniors Club (905) 527-0877					 Recreational programs Card games Bus trips 	
Grace Villa Seniors (905) 387-4812					 Recreational & Social programs Senior Clubs 	
Hamilton & Area Coalition of Tenants Association (905) 545-0442						 Assists in organizing tenants' association. Informs tenants about their rights. Workshops for tenants on housing related issues. Represents interests of tenants at all levels of government.
Hamilton and District Multi-Heritage Health Coalition (905) 529-1907				 Information on health tradition & needs of various cultural groups. Education of the public about ethnocultural health issues. Encourages communication & co-operation between modern & traditional health care providers. 		

Agencies	Settlement		Language Senio Training		Specific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	7
Hamilton Dante Centre for Italian Language & Culture Inc. (905) 527-3400		SettlementServices.InterpretationTranslation.	• Courses In Italian Language		Educational & cultural Events.	* This is an Italian language & culture centre.
Hamilton Latvian Seniors Club (905) 523-0621					Recreational programs	*This senior club is for the Latvian speaking community
Hamilton East Community Services Corp. (905)545-0133					Social service programs addressing the needs of seniors & families.	
Hamilton Mountain Legal & Community Services (905) 575-9590						 Provides legal information & advice on tenant rights, workers' compensation, CPP, Ontario Works, Employment Insurance, Disability Issues/Human rights, employment standards & Criminal Injuries Compensation Board.
Hamilton Library Bookmobile Services (905) 546-3477					Bookmobile service for seniors living in large complexes.	 Vision Aids and large or regular size print books available.
Hamilton Public Library Resource Centre For Disabled Persons (905) 546-3470						• Large print books, books on tape; information on disabilities such as books, newsletters & catalogues of aids for daily living. Adapted library catalogues to assist anyone who has limited vision.
Hamilton- Wentworth, Accessible Transportation Services (ATS) (905)527-3711						Taxi Scrip program provides subsidized rides for people with a disability by means of regular or accessible taxis.

Agencies	Settlement		Language Training	Senior Sp	ecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Hamilton-Wentworth Community Care Access Centre (905)523-8600		 Information Referral 		 Health & support services. Information & help for moving to a long term care facility. 		 CCAC accessed services include: Visiting & shift Nursing Occupational Therapy Physiotherapy Speech Language Therapy Nutrition Counselling Personal support/Homemaking Case Management Placement Services Social Work.
Hamilton- Wentworth Regional Municipality/ City of Hamilton Helping Hands (905) 546-3057						Helping Hands provides support services for the elderly & disabled by providing home maintenance, heavy cleaning & lawn maintenance.
Hamilton- Wentworth Regional/ City of Hamilton Nutrition & Physical Activity Promotion (905) 546-3630		 Information is provided via telephone advice lines, community presentatio ns & mass media. 		Nutrition & active living advice is communicated on a regular basis through Hamilton Spectator, Brabant News & Today's Seniors.	 Community Food Advisor Program. 	Their staff support & encourage the development of policies, guidelines & regulations that promote sound nutritional practices, regular physical activity & the achievement of health weights.
Hamilton-Went-worth Regional Police (905) 546-3892					 Develop programs to address seniors' quality of life Liase with institutions on seniors' safety & security 	 Investigate incidents of abuse & neglect of seniors
Hamilton, City Dept. of Culture & Recreation (905) 546-2750					Cultural & recreational programs in community cnetres, Sackville Hill Seniors' Centre & other Seniors' Centres	
Hamilton Community Registry (905) 548-5417						Housing

Agencies	Settlement		Language Training	Senior	Specific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Heart & Stroke Foundation of Ontario 1-877-234-2220						
Housing Help Centre (905) 528-0221						Housing
Human Resources Development, Canada 800-277-9914						Income Tax Services
James Street Seniors (905) 387-9386					Recreational activities which include speakers, film, music & trips.	
Jewish Community Centre of Hamilton- Wentworth & Area (905) 648-0605					 Recreational & cultural programs. Friendly visiting 	*This is a Jewish community centre.
Jewish Social Services (905) 648-0605 x 325		 Information Referral Settlement Services. 	English as a second language	Home visiting		Theatre club, trips, bridge, Wednesday luncheon, choir, holiday celebration.
Kiwanis Recreation Cr (905)549-4023					Recreational program	
Macassa Lodge (905)546-2800					Recreational Activities – Day Program	
Main Hess Seniors Centre (905) 546-2541				 Foot Care clinic. Health & Nutrition Services. 	 Recreational program Information on aging for training professional & developing new approaches to aging programs. 	Income Tax Clinic.
Mall Walking Centre Mall (905)547-1629 Eastgate Square (905)561-2444 Limeridge Mall (905)387-4455						

Agencies	Settlement		Training		pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Meals on Wheels Ancaster (905)648-6675 Dundas (905) 628-0306 Glanbrook (905)692-3464 Hamilton & Stoney Creek (905)522-1022		NOFISA	Trograms		Community	
Waterdown & Flamborough (905) 689-0732						
Mountain Young At Heart (905) 387-3550					Recreational activities & card games	
Municipal Service Centre – Tax Department (905) 546-2489						Income Tax Services.
Mutual Ethnic Senior Club (905) 528-8485 x 222					Social & recreational programs including socials, dinners, movies, billiards, woodworking, sewing & boccie.	* This is a multicultural senior's club.
Oldie Goldies (905) 549-2882					Bowling for women.	
Ontario Ministry of Finance, Guaranteed Annual Income System (GAINS) 800-263-7965						 Provides additional financial assistance to eligible seniors who collect Old Age Security & the Federal Guaranteed Income Supplement.
Ontario Ministry of Municipal Affairs & Housing (905) 521-7399						 Administration & management of Federal-Provincial rent-geared-to – income housing units including senior housing.
Polonia Club (905) 544-5968					Banquets, Symphonic choir.	* This club is for Polish speaking people.

Agencies		Settlement	Language Training	Senior S	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Portuguese Information Cr. (905)528-2466		 Information Referral Orientation of newcomers Interpretation Translation 				The purpose of the Centre is to help integrate the Portuguese community with Canadian society.
Public Health Nurse (905)546-3630				Nutrition Tips		
Rainbow Senior Citizens (905) 385-3297					Social activities such as Card playing.	
Sackville Hill Seniors Recreation Cr. (905) 523-8600				 Foot Care clinic. Wellness Clinic. Blood Pressure Equipment located in facility. 	 Recreational program Educational workshops are held on a timely basis. 	Income Tax Clinic
Salvation Army Golden Agers Centre (905) 522-3681				Hot meal at noon	 Recreational activities – Exercise class, craft classes, billiards, shuffleboard, carpet bowling. 	
Senior Citizens Council for the City of Hamilton (905) 388-7055						 Seniors' concerns are made to the Department of Culture & Recreation, which in turn are forwarded to City Council for presentation during city council meetings.
Senior's Activat- Ion Maintainence Program(SAM) (905) 525-5632					Available at Main-Hess Seniors Centre, Roxborough Seniors Cr. & Notre Dame Centre.	 A day program which assists seniors & adults with diminished abilities to maintain their independence in the community.
Seniors Outreach Services Stoney Creek (905)664-4576		 Information Referral 		Support services for seniors.		 Transportation to appointments, shopping & recreational outings. Paid workers for snow removal, yard work, hairdressing & heavy housework & odd jobs.
Seniors to Seniors (905)572-6162				Support services for seniors		·
Settlement Integration Services Org. (905) 521-9917	X	 HOST Cultural Interpretati on Translation. 	LINC Assess- ment Centre			

Agencies	Ś	Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Program	Health	Community	1
Shalom Village Apartments: (905)528-5377 Nursing Home: (905)529-1613					Adult Day Program with supportive recreational & social activities & for caregiver relief. Lunch & transportation provided.	
Shopping by Bus (905)522-0053						 Volunteer service to assist seniors in grocery shopping.
St. Elizabeth Visiting Nurses Association (905) 540-8932						 Skilled home support including personal care, meal preparation, light housekeeping, palliative care with on-site staff.
St. Elizabeth Village Seniors Club (905) 389-5020						* senior club for residents of the village.
St. Joseph's Community Health Centre Health for Older Adults (905) 573-4818				Provides specialized geriatric medicine & psychiatry for older adults living in their homes or long-term care facility.	Outpatient, outreach & Day hospital services.	
St. Joseph's Community Health Centre Stay Well Program (905) 573-4844				 Group exercise for older adults with arthritis, diabetes, hypertension, coronary artery disease or chronic obstructive pulmonary disease. 		
St. Joseph's Immigrant Women's Centre (905) 529-5209		 Information Referral Orientation Interpretation 	ESL for seniors LINC for women	 Wife Abuse Counselling. Family Counselling Family Home visiting program. 		
St. Joseph's Villa (905) 627-3541				Respite care for 7 to 30 days.	 Recreational Activities - Day Program Shopping & bus trips. 	
St Matthews House Drop in Centre (905) 523-5546		InformationReferral		 Seniors' Home Support, Drop-in & foot care service. Counselling services 	 Recreational Program Senior Club 	Legal Aid & Income Tax Clinics.

Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
St. Matthews House Roxborough Parc East End Multi- Service Centre (905) 545-0565		 Information Referral 		 Clothing for women. Emergency food Assistance. Community Family Support Program Women Support Group 	 Recreational & cultural Groups in seniors' centre. Seniors Activation & Maintenance Program. Family Support Resource Centre. 	Family Support Resource Centre
St. Matthews House Roxborough Senior Centre (905) 545-9955		InformationReferral		 Monthly Foot Care Clinic Support services for seniors. 	 Recreational & educational programs Senior Activation & Maintenance Program Intergenerational activities 	
St. Nicholas Ukrainian Catholic Church Senior Club (905) 545-4404				Exercises	Bowling, tours, group social activities & cultural events	* This club is for Ukrainians.
St. Peter's Hospital (905) 549-6525				 Foot Care Clinic Falls Clinic – assesses seniors who have repeated falls & recommends measures for prevention of falls. Senior's Dental Clinic. 	 Recreational Activities – Day Program 	
Swansea Seniors (905) 387-5451					 Card games & Bingo Euchre. 	
Tele-Touch (905)522-9567		Referral		Support services for seniors & individuals with disabilities.	Have trained volunteers with various linguistic skills.	
Theatre Aquarius (905)522-7529					 Theatre & Arts Seniors participated in live theatre productions. 	
United Filipino Canadian Seniors Association (905) 544-3350					 Social activities such as crafts, films & outings. 	*This centre is for the seniors in the Filipino community.

Agencies		Settlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
United Senior Citizens of Ontario, Zone 14 (905) 308-8225		 Information Referral Completion of forms 			 Assists in forming new seniors' clubs. Keeps all clubs informed of other club's activities. 	
Upper James Seniors Club (905) 385-1523					Euchre is played bi-weekly.	
VHA Health & Home Support Support Services (905) 389-1970						 Home cleaning, homemaking & home support services provided by trained personnel.
Victim Services (905) 546-4904				Elder Abuse		
Victoria Park Community Homes (905)527-0221						Housing
Victoria Order of Nurses (VON) (905)523-7370					 Recreational Activities – Day Centre 	 Connects seniors with agencies that provide transportation to appointments & outings.
Victorian Order of Nurses Hamilton (905)529-0700				 Foot care in several clinics. 		 Personal care by nurses in homes, retirement homes, nursing homes or hospitals.
VON Hamilton- Wentworth Volunteer Visiting Program (905) 522-0053				Trained volunteers are matched to the patient to form a one-to-one relationship.	 Volunteer visiting, assitance with shopping, reading, outings, crafts, letter writing, music therapy & hairdressing. 	
VON Wheels to Meals Hamilton & Stoney Creek (905) 522-1022				, , , , , , , , , , , , , , , , , , ,	Administers a service for group dining at a community location. Meals include health promotion, educational opportunities & social activities.	
Visiting Homemakers Association (905)389-1970						Home Care
Wesley Urban Ministries Inc. (905) 528-8485					 Mutual Ethnic Seniors Club. Multicultural Neighbourhood Support Services. 	* This Centre has Italian & Portuguese speaking members.

Agencies	S	ettlement	Language Training	Senior Sp	pecific Programs	Other
	ISAP	Non-ISAP	Programs	Health	Community	
Widow to Widow YWCA (905) 529-7727						
YMCA of Hamilton (905) 317-4916					Recreational program	
YWCA of Hamilton (905) 522-9922				Foot care clinics	• Swimming, exercises, dance classes, yoga, tai chi & social activities such as bingo, cards & billiards.	
YWCA of Hamilton (905) 545-6866				Foot Care Clinic.		Income Tax Clinic.
YWCA of Hamilton MacNab Street Branch (905) 529-7727				Foot Care, Blood Pressure & Wellness Clinics, Social Support Services & Awareness Lectures.	Active Living programs such as fitness activities.	

QUESTIONS FOR KEY INFORMANTS:

- 1. Approximately how many newcomer seniors does your agency serve? By newcomer senior I mean a person over the age of 65 years who has resided in Canada for less than 5 years.
- 2. What are the main ethnic group(s) the seniors you serve belong?
- **3.** What (settlement/health/social/financial) services does your agency provide to newcomer seniors?
- 4. How do newcomer seniors find out about your services?
- 5. What are major needs or problems of the newcomer seniors who visit your agency/service?
- 6. What are the major barriers to providing services to newcomer seniors?
- 7. What do you feel are the special difficulties newcomer seniors encounter that are different from newcomers in other age groups?
- 8. What are the best and most effective ways of assisting newcomer seniors to settle in Canada?
- 9. Do you have any suggestions that may assist newcomer seniors who want to access support and information services but do not know how to access these services?
- 10. Can you identify any gaps in information and services, that would better assist newcomer senior in their initial settlement process?
- **11.** Do you have any additional comments based on your experience with newcomer seniors to assist them with their initial settlement needs?

FACULTY OF SOCIAL WORK

UNIVERSITY OF TORONTO

THE SETTLEMENT NEEDS OF NEWLY ARRIVED IMMIGRANT SENIORS IN ONTARIO

Newcomers Interview Schedule

January, 2001

Funded by Citizenship and Immigration Canada Ontario Administration of Settlement and Integration Services.

The Settlement Related Needs of Newly Arrived Immigrant Seniors in Ontario

FACE SHEET

Instructions to the interviewer:

□ For each question, please circle the NUMBER, which most accurately represents the respondent's response

For example:0No1Yes8Don't know

- □ Not applicable is only circled if the respondent is not eligible to answer the question
- □ If a respondent chooses to skip a question, please indicate that the question has been skipped and it was just not left out in error.
- □ When asked to "specify" or "describe", please print or write clearly in English, the verbatim answer given by the respondent.

Identification Number:			Interv	viewer (Code:
Date of Interview:		day	mon	th	year
Length of Interview:		mir	utes		
Language of interview:	<u> </u>				
Gender of Respondent:	1	Male	2	Femal	e
Physical Aid:	0 1 2 3 4	None Cane Walker Wheel chair Other (<i>specify</i>)
Location of Interview:	1 2 3	Toronto Hamilton Ottawa			
Source Country:	1 2 3	South Asia China Europe		4 5 6	Latin America Caribbean Africa

INTERVIEWER: INTRODUCE YOURSELF TO THE RESPONDENT

Hello (Mr/Mrs./Ms.) ______. My name is ______. I am from the Centre for Applied Social Research, Faculty of Social Work at the University of Toronto and we are conducting a study for Citizenship and Immigration Canada. The goal of this study is

- 1. to find out about the existing resources and services available to newly arrived seniors;
- to find out about any special difficulties newcomer seniors encounter with settling in Canada;
- 3. to discover how and where newcomers go for support and information to deal with their settlement needs; and
- 4. to identify gaps in information and services that newcomers feel would better assist them in settling in Canada.

This information will help the government to improve the delivery of settlement services to older newcomers in Ontario. I want to assure you that everything you say is confidential and your name will not be used anywhere. We are interested in general patterns and not in the way an individual answers.

I am going to talk to you about some general information about you, your health, your settlement experience in Canada, your current activities, your use of services, your views about the services, and your opinion about how services to newly arrived senior could be improved.

If there are any questions you would rather not answer, please do not feel obligated to answer them. Participation in this study will in no way affect the services you receive or your status in Canada. The interview will last approximately one hour. We really appreciate your help.

SECTION A: GENERAL INFORMATION

First, I would like to know a little about you.

- A1. What year were you born? ____ / ___ / ___ / ___ day/ mo/ yr Age: ____
- A2. How long have you been in Canada? _____ Enter number of years

A3. What is your current immigration status?

- 1 Landed Immigrants Family class (*i.e., sponsored by relative*) or
- 2 Landed Immigrants Economic class (*i.e., independent, business*)
- 3 Other: _____

A4. What is your present marital status?

1	Never married	3	Widowed
2	Married/Common Law	4	Separated/Divorced

A5. What is the highest level of education that you had completed?

- 0 No formal schooling
- 1 Some elementary or public school
- 2 Completed elementary or public school
- 3 Some high school
- 4 Completed high school
- 5 Some vocational or technical college
- 6 Vocational or technical college (other certificate)
- 7 Special diplomas (e.g. teaching, nursing)
- 8 Some university
- 9 Graduated university
- 88 Don't know/can't say

A6. What language do you usually speak at home?

A7. What is your present employment status?

- 1 Retired
- 2 Working full-time: a. What type of job? _____
- 3 Working part-time: b. What type of job?_____
 - c. How many hours per week? _____ (enter hours)
- 4 Looking for job
- 5 Not available to work but would like to work
- 6 Never worked in paid labour force (e.g. homemaker)
- 7 Other (specify):_____

A8. Ask only if currently married. **What is your spouse's present employment status?**

1 2	Retire Worki		ime: a.	What type of job?
3	Worki	ing part-	time: b.	What type of job?
4 5 6 7 9	Not a Never Other	worked	b to work in paid r:	How many hours per week? (<i>enter hours</i>) but would like to work labour force (e.g. homemaker) arried)
Do y	ou have	any chi	ildren?	
0 1	No Yes:	A9a.	How	many children do you have? enter number
		A9b.	Are al	l, some, or none of your children here in Canada?
			1	All children are living here in Canada
			2	Some are: A9c. What country/ies are the others living?

- 3 None are: **A9d. What countriy/ies are the others living?**
- 9 Not applicable *(no children)*

A10. Other than yourself, how many people are living in your household?

_____ Number of people in the household

A9.

A10a. What is the age and gender of the other people in your household and what is their relationship to you?

	Relationship to you	Age	Gender
1 st Person			M F
2 nd Person			M F
3 rd Person			M F
4 th Person			M F
5 th Person			M F
6 th Person			M F
7 th Person			M F
8 th Person			M F
9 th Person			M F
10 th Person			M F

A11. I am going to ask you about your ability to speak, read and write English or French when you first immigrated to Canada?

How would you rate your ability to...

	None	Poor	Fair	Good	Excellent
A11a. Speak English	0	1	2	3	4
A11b. Read English	0	1	2	3	4
A11c. Write English	0	1	2	3	4
_	None	Poor	Fair	Good	Excellent
	0		-	-	
A11d. Speak French	0	1	2	3	4
Alld. Speak French Alle. Read French	0 0	1 1	2 2	3 3	4 4

SECTION B: EXPERIENCES PRIOR TO COMING TO CANADA

Now I would like to ask you some questions about your experiences *prior* to coming to Canada.

B1. In what country were you born? ______

B2. Did you move to Canada directly from _____? (Insert Country of Birth)

0 No 1 Yes

B2a. If "No": In which country were you living just before moving to Canada?

B2b. How long did you live in that country? _____ *Enter number of years*

B3. Just prior to coming to Canada, did you live alone or with your family?

1 lived alone 2 lived with your family

B3a. Who did you live with (their relationship to you and gender) and for how long?

	Relationship to you	Gender	Number of Years lived with
1 st Person		M F	
2 nd Person		M F	
3 rd Person		M F	
4 th Person		M F	
5 th Person		M F	
6 th Person		M F	
7 th Person		M F	
8 th Person		M F	
9 th Person		M F	
10 th Person		M F	

B4. Did you receive any help from agencies before coming to Canada?

- 0 No 1
 - Yes B4a. **What agencies/services?** (check all that apply)
 - a. Health services (e.g. homecare, meals on wheels, etc.)
 - b. Social services (e.g. seniors groups/programs, church groups, etc.) []

- c. Financial assistance (e.g. welfare, social assistance, etc.) []
- [] d. Other (specify)

B5. In thinking about your 'home' country, did you primarily live in a...

1 Rural or farming area.

[]

8 Don't know/Can't say

- Small town or village, or a
- 2
- 3 City?
- Other: _____ 4

What was your major occupation before you came to Canada? **B6**.

Ask only if currently married or widowed: What was the major occupation of your spouse **B7**. before you came to Canada?

Not applicable *(not married)* 99

B8. Thinking back, what would you say was your main reason for coming to Canada? (Do NOT read list) (Check only one)

- 1 Government sponsored refugee
- 2 Be with children in Canada
- 3 Be with other relatives/friends in Canada
- Better way of life or standard of living (economics), more comfortable retired life 4
- 5 To take care of someone in the family
 - B8a. Who do you care for? **B8b.** Number of people? _____ (enter number of people caring for)
 - B8c. What kinds of care do you give? _____
- 6 To be taken care of by my family
 - **B8d. Who takes care of you? B8e. Number of people?** _____ (enter number of people caring) B8f. What kinds of care do you receive?
- 7 To be closer to my family/family reunion
- 8 Better health care
- 9 War-related situation
- Political reasons (general) 10
- Other (specify) 11
- Other (*specify*) 12 Other (specify)
- 13
- 88 Don't know/can't say

B9 .	Who	o sponsored you	to come to Cana	da?	
	0 1 2	child spouse	pendent class)	4 5 6	grandchild other relative <i>(cousin, aunt, uncle)</i> friend
B10.		sibling you know anyo ada before com		7 n your spo	other <i>(specify)</i>
			0		
	0 1	No Yes B10a .	. Who?		
311.	1				
B11.	1	Yes B10a . you want to co		8	Don't know/can't say

B12. In your opinion, how much of a "choice" did you have over the decision to come to Canada? Would you say that you had...

- complete control over the decision, 1 8 don't know/can't say
- 2 a great deal of control,
- some control. 3

- not that much control, or 4
- 5 no control over the decision to come to Canada?

SECTION C: SETTLEMENT EXPERIENCE IN CANADA

The next questions I would like to ask you have to do with settlement in Canada.

C1. In general, what did you know about Canada prior to your coming here?

C2. Ask only if respondent knew anything about Canada. Where did you get most of your information about Canada before you arrived?

(1)											
(2)											
(3)											
Did y	ou receivo	e any he	elp (otł	ner th	nan info	ormatio	on) '	with th	ese nee	eds?	
0	No 1	Y	/es	C 4b .	What o	lid the	y do)?			
Did y	ou look fo	or more	inform	natio	n after	you ca	me	here?			
0	No	1	ľ	Yes							
C5a.	If yes: Di	d you fi	ind the	info	rmatio	n you v	vere	e lookiı	ng for?		
	0	No	1	1	Yes						
	C5b. Ple	ease exp	olain:								
	C5b. Ple	-									
C5c.	C5b. Ple Who or you can	where (did you	ı go t	to get i	nforma	atio				
C5c.	Who or you can [] a. 2 [] b. 0 [] c. 1 [] c. 1 [] d. 2 [] e. 0 [] f. 0	where on the to Ca Spouse Children Extende Friends Churche Commun Other "r Governi	did you mada? nd famil es or rel nity org mainstrument ag	y igiou aniza eam" gency	to get i ck all that s organ tions/g comm	nforma <i>at apply)</i> izations roups f unity greentative	ation S from roup	n that of the second se	c ould h thnic cc ganizatio	elp yo ommur ons	ou to set
	Who or you can [] a. 2 [] b. 0 [] b. 0 [] c. 1 [] c. 1 [] d. 2 [] d. 2 [] d. 2 [] d. 2 [] f. 0 [] f. 0 [] h. 0 [] h. 0 [] i. C ou have a a	where of the to Ca Spouse Children Extende Friends Churche Commun Other "1 Governi Other (<i>sp</i>	did you mada? n ed famil es or rel nity org mainstr ment ag ecify):	y igiou aniza eam" gency	to get i ck all that s organ tions/g comm	nforma at apply) izations roups f unity gr entative	atio From Toup	n that of the second se	c ould h thnic cc ganizatio	elp yo ommur ons	ou to set nity
Did y	Who or you can [] a. 2 [] b. 0 [] b. 0 [] c. 1 [] c. 1 [] d. 2 [] d. 2 [] d. 2 [] d. 2 [] f. 0 [] f. 0 [] h. 0 [] h. 0 [] i. C ou have a a	where one to Ca be to Ca Spouse Childrer Extende Friends Churche Commun Other "r Governi Other (<i>sp</i> ny diffi o ulties Ficulties	did you mada? n ed famil es or rel nity org mainstrument ag <i>ecify</i>): culties	y igiou aniza eam" gency	to get i ck all that s organ tions/g comm	nforma at apply) izations roups f unity gr entative	ation From Toup	n that of n your e os or or; nte nee(c ould h thnic cc ganizatio	elp yo ommur ons when	ou to set nity

C7. Was there anyone else in particular who helped you to deal with these needs?

0 No 1 Yes 8 Don't know/can't say

C7a. If "Yes": Who would that have been? (Check all that apply.)

[] a. Spouse
[] b. Children
[] c. Extended family
[] d. Friends
[] e. Churches or religious organizations
[] f. Community organizations/groups from your ethnic community
[] g. Other "mainstream" community groups or organizations
[] h. Government agency representative
[] i. Other (*specify*):

C8. Do you have a	No	Yes	If yes, C8a. Who helped you get these items?
a. health card	0	1	
b. bank account	0	1	
c. driver's licence	0	1	
d. social insurance card	0	1	

SECTION D: CURRENT ACTIVITIES AND SOCIAL SUPPORTS

Now I am going to ask you about things you do and people you meet.

D1. Thinking about a typical day, can you describe your daily activities or routine?

	None	Less than 1 hour	From 1 to 5 hours	From 6-10 hours	From 11 to 20 hours	More than 20 hours	Don't know
a. reading (ethno specific) newspapers or magazines	0	1	2	3	4	5	8
b. reading (mainstream/Canadian) newspapers or magazines	0	1	2	3	4	5	8
c. watching TV/listen to radio (ethno specific)	0	1	2	3	4	5	8
d. watching TV/listen to radio (mainstream/Canadian)	0	1	2	3	4	5	8
e. doing house work	0	1	2	3	4	5	8
f. doing yard work	0	1	2	3	4	5	8
g. providing child care to your grandchildren	0	1	2	3	4	5	8
h. providing child care to other children	0	1	2	3	4	5	8
i. visiting relatives or friends	0	1	2	3	4	5	8
j. go out shopping for groceries, clothes or other things you need	0	1	2	3	4	5	8
k. doing volunteer work for a group or organization	0	1	2	3	4	5	8
l. working for pay	0	1	2	3	4	5	8
m. other Specify	0	1	2	3	4	5	8

D2. Thinking about a typical week, how much time do you usually spend doing any of the following activities?

D3. How often do you attend any of the following (insert ethno-specific group) organizations in the past 12 months?

	Not at all	At least once a year	At least 3 or 4 times a year	At least once a month	At least once a week	Don't know
a. religious or church groups	0	1	2	3	4	8
b. recreational groups	0	1	2	3	4	8
c. cultural groups, such as literary or film	0	1	2	3	4	8
clubs						
d. community centres	0	1	2	3	4	8
e. senior groups/centre	0	1	2	3	4	8
f. social/religious gathering in people's	0	1	2	3	4	8
home						
g. political groups (such as parties, action groups)	0	1	2	3	4	8
h. attending ESL classes	0	1	2	3	4	8
i. go to bingo, card games or casino	0	1	2	3	4	8
j. other	0	1	2	3	4	8
Specify						

	Not at all	At least once a year	At least 3 or 4 times a year	At least once a month	At least once a week	Don't know
a. religious or church groups	0	1	2	3	4	8
b. recreational groups	0	1	2	3	4	8
c. cultural groups, such as literary or film	0	1	2	3	4	8
clubs						
d. community centres	0	1	2	3	4	8
e. senior groups/centre	0	1	2	3	4	8
f. social/religious gathering in people's	0	1	2	3	4	8
home						
g. political groups (such as parties, action	0	1	2	3	4	8
groups)						
h. attending ESL classes	0	1	2	3	4	8
i. go to bingo, card games or casino	0	1	2	3	4	8
j. other	0	1	2	3	4	8
Specify						

D4. How often do you attend any of the following mainstream or Canadian organizations in the past 12 months?

D5. In the past 12 months, how often did you have contact with ...

	Not at all	Once a year	A few times a year	2 or 3 times a month	At least once a week	Every day	Don't know
a. immediate family members in Canada	0	1	2	3	4	5	8
but not living with you							
b. immediate family members not in	0	1	2	3	4	5	8
Canada							
c. other relatives in Canada	0	1	2	3	4	5	8
d. other relatives not in Canada	0	1	2	3	4	5	8
e. friends in Canada	0	1	2	3	4	5	8
f. friends not in Canada	0	1	2	3	4	5	8
g. neighbours	0	1	2	3	4	5	8
h. other	0	1	2	3	4	5	8
Specify							

D6. Thinking about your family, friends, and neighbours currently living here in Canada. Would you say that you have a "strong", "average", "weak", or "no" support network to help you deal with most of your needs?

0	No network	8	Don't know/can't say
---	------------	---	----------------------

- 1 Weak network
- 2 Average network
- 3 Strong network

SECTION E: USE AND ACCESS OF SERVICES

Next, I'd like to ask you some questions about services that you may or may not have tried to use since you have been in Canada.

E1. I would like to ask you about a series of settlement services you may have used since you have been in Canada. E1a. If yes, how often have you used this service?

			service?			
Since you arrived in Canada have you used any	No	Yes	Once	1-2 times	3-4 times	5 or more times
a. reception services (services at the airport) when you arrived in Canada?	0	1	0	1	2	3
b. orientation services that gave general information about living in Canada?	0	1	0	1	2	3
c. translation services?	0	1	0	1	2	3
d. interpretation/escort services?	0	1	0	1	2	3
e. referral services to access community services?	0	1	0	1	2	3
f. settlement-counselling services?	0	1	0	1	2	3
g. HOST program services that match newcomers with volunteers?	0	1	0	1	2	3
h. LINC language training services?	0	1	0	1	2	3
i. Other settlement services	0	1	0	1	2	3

Specify:_____

E2. Ask only if respondent has not used settlement services Why have you not used any settlement services? (check all that apply)

[] not needed [] not culturally a	cceptable
[] did not know about these services (doesn't want to h	urt family)
[] language barrier [] other specify):_	
[] not comfortable about going for services	
[] lack of transportation	
[] afraid [] don't know/ca	n't sav

E3. Ask only if respondent has used at least one settlement service

In general, who, if anyone, helped you to find out about the settlement services you used? (*Check all that apply*) *Interviewer prompt:* Was there anyone else or any other organization who helped you to find out about services?)

- [] a. No one/found it myself
- [] b. Family members
- [] c. Friends
- [] d. Ethnic community (*in general*)
- [] e. Religious organization
- [] f. Community agency (*specify*): ______
- [] g. Government agency (specify): _____
- [] h. Library
- [] i. Visa office
- [] j. Mainstream media (newspapers, television, radio, public posting, etc.)
- [] k. Ethnic media (newspapers, television, radio, public posting, etc.)
- [] l. Reception Centre
- [] m. Other (*specify*): ______

E4. In general, how helpful did you find the settlement services you used? Would you say they were....

1 not at all helpful,

- 8 don't know/can't say
- 2 somewhat helpful, or
- 3 very helpful

E4a. What services were the most helpful?

E4b. What services were the least helpful?

E5. In general, how satisfied were you with the settlement services you received. Would you say that you were....

- 1 very dissatisfied,
- 2 dissatisfied,
- 3 satisfied, or
- 4 very satisfied

E5a. Please explain:

8 don't know/can't say

Now I would like to ask you other services you may have used since you have been in Canada.

			E6a. If y this serv	res, <mark>how of</mark> t r ice?	ten have y	ou used
Since you have arrived in Canada, have you used any	No	Yes	Once	1-2 times	3-4 times	5 or more times
a. housing services (e.g. information, assistance)?	0	1	0	2	3	4
b. senior services or programs?	0	1	0		3	4
c. legal assistance services?	0	1	0	2	3	4
d. financial assistance services?	0	1	0	2		4
e. other services?	0	1	0	2	3	4
Specify:						

E6. I would like to ask you about a series of other services you may have used since you have been in Canada.

E7. Ask only if respondent has not used any of the services listed above

Why have you not used any of these services? (check all that apply)

[] [] []	not needed did not know about these services language barrier	[]	not culturally acceptable (<i>doesn't want to hurt family</i>) other specify):
	not comfortable about going for services lack of transportation	LJ	outer speeny)
[]	afraid	[]	don't know/can't say

E8. Ask only if respondent has used at least one settlement service.

In general, who, if anyone, helped you to find out about the services you used? (*Check all that apply) Interviewer prompt:* Was there anyone else or any other organization who helped you to find out about services?)

- [] a. No one/found it myself
- [] b. Family members
- [] c. Friends
- [] d. Ethnic community (*in general*)
- [] e. Religious organization
- [] f. Community agency (*specify*): _____
- g. Government agency (specify):
- [] h. Library
- [] i. Visa office
- [] j. Mainstream media (newspapers, television, radio, public posting, etc.)
- [] k. Ethnic media (newspapers, television, radio, public posting, etc.)
- [] l. Reception Centre
- [] m. Other (*specify*): ______

E9. In general, how helpful did you find these services you used? Would you say they were....

- 1 not at all helpful,
- 8 don't know/can't say

don't know/can't say

- 2 somewhat helpful, or
- 3 very helpful

E9a. What services were the most helpful?

E9b. What services were the least helpful?

E10. In general, how satisfied were you with these services you received. Would you say that you were....

8

- 1 very dissatisfied,
- 2 dissatisfied,
- 3 satisfied, or
- 4 very satisfied

E10a. Please explain:

E11. Are there any services you feel that you need, but cannot access?

0 No

1 Yes Ella. What services?_____

E11b. Why can you not access the service?

E12.	From your experiences as a newcomer to Canada, can you identify any gaps in
	INFORMATION that would have better assisted you in settling in Canada?

E13.	From your experiences as a newcomer to Canada, can you identify any gaps in SERVICES that would have better assisted you in settling in Canada?								
SECT		F• HF	ALTH S	STATUS					
	I'd lik				oout your he	alth and how you manage aro	und		
F1.		y would you d d you say it v		your state	of health? (Compared to other persons you	ır age,		
	1 2 3	Excellent Very good Good			4 5 8	Fair Poor Don't know/can't say			
F2.	Do y	ou have a far	nily doct	tor?					
	0	No	1	Yes					
F3.	with					u seen or talked on the teleph oout your physical, emotional (
a. Fam	nily doo	ctor or general	practitio	ner		How m	any times		
	-		-	geon, allerg	ist, foot doct	or, psychiatrist, etc.)			
		r care or advic orthodontist	e						

f. Other health care professional (Specify:_____)

Now I'd like to ask about certain chronic health conditions, which you might have. F4. We are interested in "long-term conditions" that have lasted or are expected to last 6 months or more. For each condition I will now list, please indicate whether or not you currently have it, and whether or not your are being treated.

	No	Yes, not receiving treatment	Yes, receiving treatment
a. arthritis or rheumatism (joints, back, orthopaedic)	0	1	2
b. heart disease, angina, heart trouble	0	1	2
c. high blood pressure	0	1	2
d. have had a stroke	0	1	2
e. cancer	0	1	2
f. mental health problems (nerve or emotional problems)	0	1	2
g. stomach trouble	0	1	2
h. kidney trouble (including bladder problems)	0	1	2
i. dental problems (teeth need care, dentures don't fit)	0	1	2
j. diabetes	0	1	2
k. bronchitis, emphysema, or asthma	0	1	2
l. foot trouble	0	1	2
m. skin trouble	0	1	2
n. Parkinson's disease	0	1	2
o. Alzheimer's disease or dementia	0	1	2
p. Other (Specify:)	0	1	2

F5. Have you received any home care services in the past 12 months?

0 No

Yes

1

What type of services have you received? F5a.

- Nursing care (e.g. dressing changes, VON) []
- Other health care services (e.g. physiotherapy, nutrition counseling) []
- [] Personal care (e.g. bathing, foot care)
- Housework (e.g. cleaning, laundry) []
- [] Meal preparation or delivery (e.g. Meals on Wheels)
- [] Shopping
- Respite care (e.g. caregiver relief program) 1 ſ
- [] Other (specify)_____

F6. In general, thinking about the health services you have received, how satisfied were you with the services. Would you say that you were....

- 3 0 never used 1 very dissatisfied 4
- 2 dissatisfied

- satisfied
- verv satisfied 8
 - don't know

F6a. **Please explain:**

SECTION G: OVERALL EXPERIENCE LIVING IN CANADA

Now I'd like to ask you a few questions about your overall experience living here in Canada.

G1. What method of transportation do you usually use?

- 1 walk
- 2 bus/subway
- 3 taxi
- 4 drive myself
- 5 someone drives **G1a. Who?**
- 6 handicap van/bus
- 7 other
- 8 don't know

G2. How much trouble do you usually have in getting around to appointments, shopping, or visiting? Would you say you usually have...

- 1 A great deal of trouble,
- 2 Some trouble from time to time,
- 3 Not much trouble, or
- 4 No trouble at all?
- 8 Don't know/can't say

G3. Does the weather affect your activities?

- 0 No
- 1 Yes G3a. Please explain: _____

G4. Some immigrants plan to stay in Canada permanently. Others want to go to other countries eventually, or want to return home sometime in the future. What are your plans in this respect?

- 1 Stay permanently in Canada 8 don't know/can't say
- 2 Go to another country
- 3 Return to homeland

G4a. Please explain

G5. To what extent do you feel 'lonely' living here? Would you say that you feel...

- 0 Not at all lonely
- 1 A little lonely,
- 2 Somewhat lonely,
- 3 Very lonely, or
- 4 Completely isolated ?

G6. In your view, what would be the best way to address the problem of senior newcomers from feeling 'lonely' living here?

(1) ______(2) _____

1 2 3 4	Strongly disagree Disagree Agree Strongly agree			8	Don't know/can't sa
G7a.	Please explain				
Do vo	u plan to seek Can	nadian ci	tizenship?		
Do yo 0 1	u plan to seek Can No Yes	nadian ci 8	-	can't sa	

(2) ______ (3) _____

G10. How satisfied are you with your decision to come to Canada? Would you say you are....

8

- 1 Very satisfied
- 2 Satisfied

Don't know/can't say

- 3 Not that satisfied. or
- 4 Not satisfied at all?

Just a few more questions.

- **G11**. Finally, I'd like you to think about your total household income (this includes income from all members of your household) for the past year here in Canada. I'm going to list some categories and I'd like for you to stop me when I get to the category that best describes your household income:
 - less than \$10,000 1 2 \$10,000 - 19,9993 \$20,000 - \$29,999 4 \$30,000 - \$39,999 5 \$40,000 - \$49,999 6 \$50,000 - \$74,999 7 \$75,000 - \$99,999 8 \$100,000 or more

Refused 77 88 Don't know

- **G12**. Thinking about your total household income, from which of the following sources did your household receive any income last month? (Read list and check all that apply.)
 - [] Wages and salaries
 - [] Income from self-employment
 - [] Help from family members or friends
 - [] Help from community or religious organizations
 - [] AAP income (i.e., Adjustment Assistance Program)
 - [] Social assistance/welfare
 - [] Employment or disability insurance
 - [] Child tax benefit
 - [] Saving/investment
 - Other: (specify: _____
 - [] Don't know
 - [] Refused

)

G13. Do you have your own personal source of income?

0 No

1

Yes **G13a. What are your personal sources of income?**

(Read list and check all that apply.)

- [] Wages and salaries
- [] Income from self-employment
- [] Saving
- [] Company/private pension
- [] Government pension from home country
- [] Investments
- [] Income from other sources (alimony, family inheritance, estate)
- [] Other: (specify:_____)
- G14. Do you make (or have you made) any financial contributions to your family or extended family?
 - 0 No 1 Yes G14a. What types of contributions have you made? (*Read list and check all that apply.*)

 []
 loans

 []
 down payment for house

 []
 daily/monthly expenses

 []
 Other: (specify:_____)
- G15. Can you think of any thing else that would be useful to tell other seniors about coming to Canada to live?

- G16. Thank you so much for taking the time to answer all of these questions. Do you have any questions I can answer for you or any comments about the survey?
 - 0 No
 - 1 Yes: (*specify*): _____

Once again, thank you for your time and help. Good-bye.

Interviewer notes/comments:

FACULTY OF SOCIAL WORK

UNIVERSITY OF TORONTO

RECRUITMENT NOTICE

The Centre for Applied Social Research, Faculty of Social Work, at the University of Toronto is conducting a study for Citizenship Immigration Canada, Ontario Administration of Settlement and Integration Services, about the settlement needs of newly arrived seniors in Ontario.

The goal of the research program is to examine the existing resources and services that are available to newly arrived seniors; to find out about any special difficulties newcomer seniors encounter within the settlement process; to discover how and where newcomer seniors go for support and information to deal with their settlement needs; and to identify any gaps in information and services that newcomer seniors feel would better assist them in their initial settlement processes. This information will help the government to improve the delivery of settlement services to older immigrants in Ontario.

If you are an older newcomer to Canada, interested in participating in this study, and meet the following criteria:

- □ 65 years of age or over
- □ have immigrated to Canada from one of the identified 6 regions
- have been in Canada for a minimum of one year and maximum of 5 years
- **Landed Immigrant or Canadian citizen**
- **u** in residence in Greater Toronto Area, Ottawa, and Hamilton

We are interested in newcomers from Africa, South Asia, Philippines, China/ Tai-Wan/Hong Kong, Caribbean, Latin America and Europe.

We have interviewers who speak different languages.

Please Contact: Hermione Rowan, Project Coordinator at (416) 946-8831

There will be a \$25 honorarium if you decide to participate

246 Bloor Street West, Toronto, Ontario, Canada M5S 1A1 tel 416/978-5720, fax 416/978-7072

FACULTY OF SOCIAL WORK

UNIVERSITY OF TORONTO

INFORMATION AND CONSENT FOR SENIORS For a Research Study Examining THE SETTLEMENT NEEDS OF NEWLY ARRIVED IMMIGRANT SENIORS IN ONTARIO

Dr. Lynn McDonald and Dr. Usha George Principal Investigators

(Note: these forms will be translated into the main languages of 6 study regions)

Thank you for taking time to assist in this research study carried out by Dr. Lynn McDonald and Dr. Usha George at the Centre for Applied Social Research, Faculty of Social Work, University of Toronto. We are seeking information about the experiences of older immigrants to Ontario. The research is funded by the federal government, through Citizenship and Immigration Canada, Ontario Administration of Settlement and Integration Services.

The goal of the research program is to find about the existing resources and services that are available to newly arrived seniors; to find out about any special difficulties newcomer seniors have settling in Canada; to discover how and where newcomer seniors go for support and information; and to find out about any gaps in information and services that newcomer seniors feel would better assist to settle in Canada. This information will help the government to improve the delivery of settlement services to older immigrants in Ontario. The information will appear in a final report and will be made available to you upon request.

As an older newcomer to Canada, you are being requested to take part in an interview, which will ask you about your settlement experiences. The interview will not be longer than two hours. You are free to withdraw from the interview at any time without any explanation. If you find any of the questions uncomfortable or difficult to answer, you may refuse to answer the questions and/or you may request that the interview be discontinued. If have any questions about the study, you can ask you can ask any questions about the study at any time. If you decide that you wish to withdraw from the study after the interview, your information will be removed from the study. There are no risks to you in participating in this study. If you feel you are in a situation where you need help or are being harmed we will assist you in getting help.

Since we are interested in only group responses, reporting the results will occur on a group level only. It will not be possible to identify your actual replies in any way. Only the principal investigators, Dr. Lynn McDonald and Dr. Usha George, and a small group of researchers under their direction, will see the information you give, which will be kept in a locked file at the Faculty of Social Work, University of Toronto. The original data will be destroyed 3 years after the completion of the project.

FACULTY OF SOCIAL WORK

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CONSENT FORM NEWCOMER SENIOR

I agree that the research study described above has been explained to me and any questions that I have asked have been answered to my satisfaction. I understand that the answers to the questions will be recorded and that I may withdraw from the study at any time. I also understand there are no personal benefits in joining the research study. However, my responses will be helpful in improving the access and types of settlement services available to all older immigrants in Ontario. The possible risks and discomforts have been explained to me. I have been assured that the information I give will be kept confidential and that any reports published will not disclose my personal identity.

I understand that participation in this study is completely voluntary and that my decision to participate will in no way influence any services that my family or I receive. I further understand that my decision either to participate or not to participate will not affect my or my family's immigration status in Canada. I further understand that I am free to withdraw my participation from the study without explanation.

Name

Witness

Date

If you have any questions or problems with the project or you want a copy of the final research report, please contact Dr. Usha George, Centre for Applied Social Research, Faculty of Social Work, University of Toronto, telephone (416) 978-3273

FACULTY OF SOCIAL WORK UNIVERSITY OF TORONTO INFORMATION AND CONSENT FOR KEY INFORMANTS For a Research Study Examining THE SETTLEMENT NEEDS OF NEWLY ARRIVED IMMIGRANT SENIORS IN ONTARIO Dr. Lynn McDonald and Dr. Usha George Principal Investigators

Thank you for taking time to assist in this research study carried out by Dr. Lynn McDonald and Dr. Usha George at the Centre for Applied Social Research, Faculty of Social Work, University of Toronto. We are seeking information about the experiences of older immigrants to Ontario. The research is funded by the federal government, through Citizenship and Immigration Canada, Ontario Administration of Settlement and Integration Services.

The goal of the research program is to examine the existing resources and services that are available to newly arrived seniors; to find out about any special difficulties newcomer seniors encounter within the settlement process; to discover how and where newcomer seniors go for support and information to deal with their settlement needs; and to identify any gaps in information and services that newcomer seniors feel would better assist them in their initial settlement processes. This information will help the government to improve the delivery of settlement services to older immigrants in Ontario. The information will appear in a final report and will be made available to you upon request.

As service provider to older newcomers in Canada, you are being requested to take part in a telephone interview, which will ask you about the services available to immigrant seniors; how they access the services and your suggestions for improving service delivery to this group. The interview will not be longer than one half hour. You are free to withdraw from the study at any time without any explanation. If you find any of the questions uncomfortable or difficult to answer, you may refuse to answer the questions and/or you may request that the interview be discontinued. If you decide that you wish to withdraw from the study after the interview, your information will be removed from the study. There are no anticipated or foreseeable risks or discomforts resulting from participating in this study.

Since we are interested in only group responses, reporting the results will occur on a group level only. It will not be possible to identify your actual replies in any way. Only the principal investigators, Dr. Lynn McDonald and Dr. Usha George, and a small group of researchers under their direction, will see the information you give, which will be kept in a locked file at the Faculty of Social Work, University of Toronto. The original data will be destroyed 3 years after the completion of the project.

UNIVERSITY OF TORONTO

FACULTY OF SOCIAL WORK

CONSENT FORM KEY INFORMANTS

I acknowledge that the research procedures described above have been explained to me and any questions that I have asked have been answered to my satisfaction. I understand that the answers to the questions will be recorded and that I may withdraw from the study at any time. I also understand there are no personal benefits to myself or my agency in joining the research study. However, my responses will be helpful in improving the access and types of settlement services available to all older immigrants in Ontario. The possible risks and discomforts have been explained to me. I have been assured that the information I give will be kept confidential and that any reports published will not disclose my personal identity.

I understand that participation in this study is completely voluntary and that my decision to either participate or not to participate will not affect my agency or myself in any way. I further understand that I am free to withdraw my participation from the study without explanation.

Name

Witness

Date

If you have any questions or problems with the project or you want a copy of the final research report, please contact Dr. Usha George, Centre for Applied Social Research, Faculty of Social Work, University of Toronto, telephone (416) 978-3273.