Elder Abuse in South Asian Communities



Report on the Focus Groups

"Building a Safe Community for South Asian Seniors Seniors Strategize for Change" - Project

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Acknowledgements

Building a Safe Community for South Asian Seniors is a Pan Canadian project funded by ESDC and being implemented by Social Services Network. This project sets out to develop a community development strategy that can replicated across the country. The primary goal of this project is to root this community development strategy in the four regions of Ontario – York, Toronto, Peel and London, where local sectors, provincial governmental and non-governmental organizations, along with South Asian individuals, family caregivers, agencies and faith groups will be given the tools, activities and guidance on how to integrate strategies to combat elder abuse in South Asian communities in their overall practice and programs.

The Social Services Network (SSN) gratefully acknowledge the project team, lead local partners, project reference group, students and volunteers for their commitment and contribution in designing, organizing and implementing the primary research in each of the four local community sites and towards the completion of this research report. Our lead local partners include:

Punjabi Community Health Services – Peel Region Muslim Resources Centre – London South Asian Legal Clinic of Ontario – Toronto

The project team was also involved in establishing and getting the feedback on project objectives, approach and work conducted to-date with our Project Reference Group which includes;

- COSTI
- Family Services of Peel
- CHATS Community & Home Assistance to Seniors
- Advocacy Resource Centre for the Elderly
- Tesoc Multicultural Settlement Services
- Family Service Toronto
- Addiction Services For York Region
- Ontario Network for the Prevention of Elder Abuse,
- Ontario Council of Agencies Serving Immigrants
- Regional Geriatric Program of Toronto
- Toronto Police Service-Divisional Policing Support Unit
- York Regional Police Community
- Middlefield Seniors Wellness Club
- Senior Tamils Society of Peel
- Vasantham A Tamil Seniors Wellness Centre

This research report was made possible through the support, guidance and direction offered by Project Director Doris Rajan, SSN coordinator Arthi Jayapaul, SSN staff, community mobilizers and evaluation consultant Jason Newberry.

We feel that this /model for addressing the issue of elder abuse in South Asian communities can be replicated in other provinces and cities in Canada where large populations of South Asian people reside , i.e. Vancouver, Edmonton and Winnipeg.

Sincerely,

Naíla Butt

Dr. Naila Butt Executive Director Social Services Network

The report has been prepared by:

Executive Summary

Elder abuse in South Asian families is of a growing concern that has become apparent to the Social Services Network (SSN) from both their direct work with

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seniors and families, and through a collaborative cross-sectoral Ontario-wide conference project on Family Violence in the South Asian population which SSN leads.

This report presents the results of 22 focus groups where we spoke to just under 200 health and social service providers and South Asian seniors representing the diverse linguistic and cultural communities. These discussion groups were conducted as part of SSN's Ontario wide initiative entitled <u>Building a Safe Community for South Asian Seniors</u>, where project partners; Muslim Resource Centre for Social Support and Integration (MRCSSI) - London, Punjabi Community Health Services - Peel and the South Asian Legal Clinic of Ontario (SALCO)-Toronto along with SSN - with the aim to engage and empower South Asian seniors, relevant mainstream sectors, South Asian specific groups, their neighbourhoods and their families to build the capacity of their local community to develop and employ strategies that will address the specific forms of violence in South Asian seniors' lives.

In addition to the local service provider focus group, SSN conducted a broader survey of seniors-serving organizations in Ontario (with additional out-of-province representation) to understand common experiences, challenges, and needs of the South Asian families in relation elder abuse and family conflict. The findings of the survey are provided in a separate report in Appendix A.

The ultimate goal of speaking to key stakeholders through this research is to identify solutions, many of which this project sets out to act upon.

While we spoke with South Asian seniors, representing distinct cultural and linguistic communities, in four separate regions of the province, there was minimal variation in the findings. The seniors were asked to describe the kinds of challenges and/or problems that they experience inside and outside of the home.

In interpreting these findings it is important to acknowledge that the root causes are complex and cannot be simply equated to mean spirited behavior levied against vulnerable seniors. For example family dynamics are influenced by multiple factors and stressors in the home, i.e. financial challenges for their adult children as immigrants who find it difficult to find a job and have to work 2-3 low paying jobs in an attempt to support their extended family.

The main problems that the seniors expressed as occurring inside their homes were;

- Exploitation and control;
- Emotional abuse, neglect and/or negative treatment by their family members;
- Financial abuse;

- Lack of money;
- Dependency on their adult children; and
- Poor mental and physical health.

There were also a number of challenges experienced outside of their home which result in further abuse and/or a lack of services and supports that would help prevent or better respond to the abuse in their lives. These include:

- Services and supports not linguistically and culturally sensitive and responsive;
- Racism and discrimination;
- Lack of understanding of how systems operate in Canada
- Difficulty in getting around;
- Lack of affordable and appropriate housing;
- Lack of job opportunities;
- Financial fraud; and
- Discriminatory policies and legislation.

The following outlines the key barriers that seniors experience to reaching out for help and/or reporting abuse:

- Do not want to bring shame or problems to the family;
- Not knowing English;
- Fear of deportation, intensified abuse and fear of repercussions in their community or with family back home, also keeps older adults from seeking help;
- Lack of knowledge of Canadian systems and culture;
- Dependency on their adult children for housing, food and other necessities;
- Insensitive and discriminatory practices of health and other mainstream services;
- Transportation issues;
- Controlled by their adult children -seniors may be kept from socializing or leaving their homes;
- Silencing of women older women are expected to be content with having no say; and
- No alternative housing options.

The research also explored the challenges through a health and social services perspective. We also spoke to service providers representing key sectors involved with this issue including, South Asian seniors service providers, generic seniors services, police involved in elder abuse, mainstream elder abuse organizations and health care providers. In both the focus group and the survey, service providers identified a number of challenges. The stigma, fear, and shame that prevents families from naming problems of conflict and reaching out to get help. Seniors may not leave abusive situations because they either have no alternative housing options or they do not

want to leave their partner or family. It is often challenging for many providers to effectively access South Asian families, due to cultural and language barriers. Other challenges identified were:

- Front line workers in mainstream agencies do not recognize that a South Asian senior may be experiencing abuse;
- Hospitals are used as means to get "rid" of seniors by their adult children;
- For police; Seniors won't talk to them, difficult to determine abuse with so
 many living in one home and challenges when investigating deaths due to
 language issues and there is not enough South Asian officers;
- Challenges in using family members to translate;
- Policies and systems can have a detrimental effect on seniors, for example seniors not being eligible for Old Age Security for 10 years, seniors not applying for Ontario Disability Support Program for fear of reprisal on their sponsor or not applying for Long Term Care, also for fear of their adult children as their sponsors, being penalized.

Recommendations - Recommendations fell into three areas:

1) Develop specific program for South Asian Seniors and their Families including

- ✓ Information and educational Sessions where seniors can learn about the dominant culture and how systems operate, what constitutes elder abuse and their rights and entitlements;
- ✓ Seniors helping Seniors' groups;
- ✓ More South Asian Day Programs ;
- ✓ Family Support Groups focused on building healthy relationships between family members;
- ✓ Counselling Individual and family;
- Develop a Volunteer Roster- for home visits, to drive seniors to appointments and take them to events and activities;
- ✓ Community Inclusion Activities Include excursions specifically for South Asian seniors, encourage seniors to volunteer at places of worship and in other places in their community, and activities that will help them learn about other cultures and places in their neighbourhood;
- Practical Skill Development Activities, i.e. language specific driving lessons for seniors and how to manage your finances;
- ✓ Resource Development Develop culturally and linguistically sensitive resources for South Asian seniors. South Asian agencies should also assist mainstream organizations to develop culturally relevant and accessible resources about their services;

- ✓ Programs in Schools Work with school boards to develop programs for children and grandparents that can be delivered in schools where there is a large South Asian student population; *and*
- ✓ Crisis Hotline for South Asian Seniors..

2) Program Development for the Broader Community

- ✓ Information and Educational Sessions for Mainstream Services: learn about South Asian people, the stresses experienced by South Asian seniors, the particular nature and signs of elder abuse experienced by, promising practices and more effective outreach strategies, referral to agencies serving South Asian and being introduced to an organizational safety audit process;
- ✓ Public Education Campaign targeted to the non-South Asian community to assist them in learning more about South Asian people and combat stereotypes; and
- ✓ Programs to Combat Elder Abuse in Places of Worship Leadership needs to be nurtured in faith communities to support seniors issues and work towards the prevention of elder abuse.

3) Policy and Funding Reforms - Reforms need to occur in the area of income supports and the programs that provincial, territorial and municipal governments provide.

- ✓ Funding to support South Asian specific social service agencies;
- ✓ Increase access to employment for immigrants;
- ✓ Increased access to income supports;
- ✓ More affordable housing options and South Asian specific housing options;
- ✓ Subsidized daycare for their Adult Children;
- ✓ Government support for Family Caregivers;
- ✓ Extended coverage for Personal Support Workers; and
- ✓ Develop transportation services for seniors.

I Project Overview

1. Background

Why is the Social Services Network doing this project?

Elder abuse in South Asian families is of a growing concern that has become apparent to the Social Services Network (SSN) from both their direct work with seniors and families, and through a collaborative cross-sectoral Ontario-wide conference project on Family Violence in the South Asian population which SSN leads.

The South Asian population is growing rapidly and South Asians continued to remain one of the largest visible minority groups in Ontario. Since 2006 the South Asian population of over 800,000 accounted for over 30% of all visible minorities in the province and in places like Markham Ontario, the visible minority population is actually in the majority constituting 65.4% of the total Markham population, with the Chinese population making up 52% of this, followed by the South Asian population at 26%.

The population of Canada is also ageing, for example in York Region alone there is an estimated 400% increase in seniors projected by 2026 (66,295 in 2001 to 263,000 by 2026).¹ Also the majority of York Region's seniors (73%) live in Markham and the majority of South Asian people in York Region also live in Markham. ² While there is no specific statistics on the rate of elder abuse in South Asian communities, in cities that have a sustantial senior and South Asian population, we can infer that elder abuse is occuring at a rate proportional to that of

² The Town Of Markham. Statistics & Demographics <u>http://www.markham.ca/Markham/Departments/EDO/Stats.htm</u>.

¹ United Way York Region. <u>www.unitedwayyorkregion.com/community-challenges/</u>.

the mainstream population, (i.e. 4 to 10 per cent of older adults will experience one or more forms of abuse in their senior years)³.

While to-date there is little concrete quantitative data that outlines the extent of elder abuse in South Asian communities, the results of the conference workshops indicate that elder abuse is a prevalent issue that has been silenced in South Asian homes.

The following report presents the results of a more in-depth research initiative which enabled SSN and their partners to talk to more South Asian seniors in four communities (Peel, York, Toronto and London, Ontario) in order to delve deeper into the issues related to elder abuse in South Asian families that have been identified. The ultimate goal is to identify solutions, many of which this project aims to act upon.

³ Please see E. Podnieks, National Survey on Abuse of the Elderly in Canada. *Journal of Elder Abuse and Neglect* (1992).

2. Research Design

What is the Purpose of this Research?

Overall Goal of the Research:

To identify the key barriers, challenges and effective ways to prevent and respond to the violence that is being experienced by South Asian seniors.

More specifically research objectives include:

- 1. Identify the nature and different forms of violence that South Asian seniors are experiencing in their lives.
- 2. Identify the key barriers and challenges in addressing the violence being experienced by this group.
- 3. Identify ways to prevent and respond to the violence being experienced by South Asian seniors in the areas of:
 - Effective measures to reach men, grandchildren, daughter-in-laws and other members in South Asian families and communities;
 - Information needs of South Asian seniors and their families;
 - Services and supports that can assist South Asian seniors and their families; and
 - ✓ Information needs of relevant health and social service providers.

The findings from this research will assist in the development of resources and a local level community development strategy, supported by tools and resources, to address this issue in four pilot communities in Ontario.



What specific information do we want to obtain?

Given these research objectives, information for this project is being sought in the following five information areas:

- 1. *Information on the nature and different forms of violence* that South Asian seniors are experiencing in their lives.
- 2. *Information about the key barriers and challenges* in addressing the violence being experienced by these South Asian seniors.
- 3. *Information about the type of information and support that South Asian seniors and their families need* in order to assist in the prevention and response to violence being experienced by South Asian seniors.
- 4. *Information on the services and community supports that may be effective* in the prevention and response to violence against South Asian seniors.
- 5. *Information about the type of information that key sectors need* in order to assist in the prevention and response to violence being experienced by South Asian seniors.

Focus Groups

What are focus groups?

Focus groups refer to small groupings of individuals that are pulled together to attain information regarding a specific topic. They are used to obtain open-ended, less structured responses - i.e. qualitative and exploratory in nature. By qualitative, it is meant that information is assigned to broad categories or levels or themes, as opposed to precise quantitative or numeric measurement.

This method of "hearing" from the community is commonly used in social research to obtain feedback from key stakeholders or "consumers" or "potential consumers" of services, programs and those affected by policy, in the development and design phases of our work.

Focus groups will yield the most pertinent information for this research, because it will allow for a more in-depth inquiry with all key stakeholders, particularly members of the South Asian communities.

Lead organizations- Social Services Network (York), Muslim Resource Centre (London), Punjabi Community Health Services (Peel) and South Asian Legal Clinic of Ontario (SALCO) (Toronto) - were selected to deliver focus groups in their region: with key sectors⁴ (seniors services, justice, health, violence against women and immigrant settlement) and the top South Asian linguistic/cultural communities living in their region.⁵

The South Asian population is diverse and thus we needed to create a variety of language specific focus groups that will increase participation and allow for maximum feedback from each of the top South Asian linguistic/cultural groups.

Respondents: Who do we need to speak to get this information?

We will need a wide range of perspectives and vantage points in gathering the information that we are seeking. We need to speak to those directly affected by the project, i.e. South Asian seniors. People are the experts of their own needs and usually know what will work best for them. The research process will give seniors the opportunity to articulate those needs and ideas to this project, where SSN will then be charged to translate that information into action.

We will also need to speak to service providers, front line workers and management in the key sectors of senior's services, healthcare, social services, justice and education.

With this in mind the diagram on the following page outlines the focus group schematic.

⁴ The sector workshop was conducted by SSN project staff

⁵ We recognized that some of these regions may not have strong representation of all six South Asian linguistic communities, thus adjustments to target key South Asian groups in each community, was made.

Language Specific - South Asian Seniors Focus Groups in York, Toronto, Peel and London*



*While the aim was to hold one focus group in each of these cultural-linguistic communities per region - groups were only held with the top South Asian communities in each region.

The table to follow outlines the actual number and type of community groups that occurred.

Community Focus Groups

Punjab Community Health Services - PCHS

Language	No: of groups	Participants	Group Lead by
Hindi	1	8	Punjab Community Health Services
Gujarati	1	6	Social Services Network
Urdu	1	10	Punjab Community Health Services
Tamil	1	7	Social Services Network
Punjabi	2	8, 11	Punjab Community Health Services

South Asian Legal Clinic of Ontario - SALCO

Language	No: of groups	Participants	Group Lead by
Hindi	1	5	South Asian Legal Clinic of Ontario
Tamil	1	11	South Asian Legal Clinic of Ontario
Kanada	1	6	South Asian Legal Clinic of Ontario
English	1	6	South Asian Legal Clinic of Ontario
Bangali	1	10	South Asian Legal Clinic of Ontario
Urdu	1	6	South Asian Legal Clinic of Ontario

Social Services Network - SSN

Language	No: of groups	Participants	Group Lead by
Hindi	1	10	Social Services Network
Gujarati	2	10, 10	Social Services Network
Urdu	1	5	Social Services Network
Tamil	1	10	Social Services Network
Punjabi	1	11	Social Services Network
Farsi	1	10	Social Services Network

Muslim Resource Centre - MRC

Language	No: of groups	Participants	Group Lead by
Hindi, Gujarati, Urdu (Mixed group)	1	5	Muslim Resource Centre
Hindi, Gujarati, Urdu (Mixed group)	1	2	Muslim Resource Centre
Hindi, Gujarati, Urdu (Mixed group)	1	6	Muslim Resource Centre
TOTAL	22 groups	173 participants	

II. The Context: South Asian Families in Canada

1. Who are South Asian Immigrants?

South Asian people are one of the most culturally and linguistically diverse populations in Canada. Most South Asian people in Canada are immigrants or descendants of immigrants from the countries of India, Pakistan, Bangladesh and Sri Lanka. South Asians in Canada also come from East and South Africa, Guyana, Trinidad and Tobago, Fiji and Mauritius. Others come from Britain, the US and Europe.

There are many South Asian languages spoken here in Canada including Urdu, Hindi Guajarati, Tamil and Punjabi. According to Stats Canada there are 75 South Asian languages spoken in Canada and 29% of all South Asian people speak Punjabi. It is the most spoken and most read language of the Canadian South Asian population. In the Greater Toronto Area (GTA) the estimated number of members of the Punjabi Community is 200,000 and growing. ⁶

The last 20+ years have witnessed a rapid growth of the Tamil population in Canada, with fewer than 2,000 Tamil speaking people in 1983 and currently an estimated total Tamil population ranging from between 250,000 to 400,000. It is the largest visible minority population groups within the Greater Toronto Area (GTA). ⁷ Canadian Tamils constitute the largest Sri Lankan Tamil population outside of Sri Lanka with the vast majority living in the GTA. ⁸ The civil war in Sri Lanka which began in 1983 resulted in a significant increase of Tamil migration to Canada. Tamil people have largely come as refugees fleeing this conflict. Whether they have recently arrived in Canada or have been here for decades, Tamil people still carry

⁶ Sify News. <u>http://www.sify.com/news/punjabi-set-to-become-canadas-4th-top-language-news-national-jegmBqfaegb.html</u>.

⁷ Sri Lankan Tamil diaspora - Wikipedia <u>http://en.wikipedia.org/wiki/Sri Lankan Tamil diaspora</u> ⁸ Tamil Canadian – Tamils True Voice <u>http://www.tamilcanadian.com/canada/</u>.

the memories and pain around with them-particularly seniors. Tamil people in Canada have experienced much personal loss of loved ones, torture, displacement and multiple relocations, horrible conditions in refugee camps, and loss of property and their livelihood. ⁹

There are also a variety of faiths that the diverse South Asian cultures bring with them including; Hinduism, Islam, Sikhism, Christianity, Buddhism, Theravada Buddhism and Jainism.

2. The Extended Family Living Arrangement

There is a notion in South Asian culture that when you have children they will look after you as you age. In their home countries this expectation is supported, however due to the fact that immigrants experience multiple barriers to inclusion such as systemic racism in employment, education and other settlement stresses, that custom is not easily translated to the Canadian context.

Past research has determined ¹⁰ that South Asian newcomers are struggling with pronounced economic challenges as they attempt to secure employment, pay the rent, and buy groceries. It is evident that homes are overcrowded and families are experiencing new stresses within the family home related to the new need for more than one breadwinner here in Canada and the changing roles of women and seniors.

⁹Tamil Canadian – Wikipedia <u>http://en.wikipedia.org/wiki/Tamil_Canadian</u>.

<u>Aid, conflict and migration: the Canada Sri Lanka connection</u>. Department of Geography, <u>Simon</u> <u>Fraser University</u>. Jennifer Hyndman (2000). <u>http://web.mit.edu/cis/www/migration/seminars/Discussion Hyndman.pdf#search='Sri%20Lanka</u> %20Tamil%20migration'.

Sriskandarajah, Dhananjayan (2005). <u>"Diaspora politics"</u>. <u>Springer US</u>. <u>http://www.springerlink.com/content/x2543gl118672348/</u>.

¹⁰ Flemingdon Health Centre & the Social Service Network: <u>South Asian Diabetes Prevention</u> <u>Program Research Report</u>. Toronto. April 2009.

¹¹Most seniors will live with their male adult children and his family. If there is a conflict, the son often will take his parent's side against his wife and children. Often seniors will remain passive and quiet to avoid conflict. Children will be the most affected by this conflict in the home and they will think that this is the way it should be, thus the cycle of abuse is perpetuated.

SSN has noted in past consultations that not many seniors live with their daughters, but generally the ones that live with their daughters are happier. The grandchildren tend to be closer to their maternal grandparents in these situations. The reason for this was explained as follows:

Since the mother is the one who is rearing the child, the child is more affected by how the mother feels and acts towards the grandparents. So if it is her parents, the child sees the respect for the seniors. This bond starts early. It makes sense that the situation is reversed for the son's parents. If the mother is the daughter-in-law they may not see respect given to their grandparents and/or see their mother being treated poorly by both their father and their grandparents. Therefore the grandchildren may resent and dislike their paternal grandparents.¹²

Seniors may also not be treated properly by their daughter-in-laws because the daughter-in-law may resent having to care for and pay for her husband's parents, particularly because life is so difficult here in Canada for many newcomers.

¹¹ This section cites findings from <u>The Impact of Family Violence: A South Asian Perspective –</u> <u>Conference Report.</u> Written by D. Rajan for the Social Services Network . Toronto: 2011. ISBN 979-0-9878222-0-8, pages 66-75

¹² <u>The Impact of Family Violence: A South Asian Perspective – Conference Report.</u> Written by D. Rajan for the Social Services Network . Toronto: 2011. ISBN 979-0-9878222-0-8, page 71.

III. Focus Group Results

South Asian Seniors

Problems Seniors Face

As indicated, we spoke with over 170 South Asian seniors, representing distinct cultural and linguistic communities, in the four regions of this project. Surprisingly there was minimal variation in the findings cross the six South Asian linguistic and cultural groups. The seniors were asked to describe the kinds of challenges and/or problems that they experience inside and outside of the home.

In this project we use an expansive definition of abuse, therefore forms of abuse include; verbal/emotional, financial, sexual, physical, neglect, racism, ableism, destruction of property and abuse by the system. The following outlines their responses.

As discussed in the earlier chapter South Asian seniors are usually living with their adult children, and in most cases, their son's family. Problems that occur usually take place between the seniors and their son and/or daughter-in-law or grandchildren.

Problems experienced by seniors within their families are complex and cannot be simply equated to mean spirited behaviour levied against vulnerable seniors.

Family dynamics are influenced by multiple factors and stressors in the home, i.e. financial challenges for their adult children as immigrants who find it difficult to find a job. Many adult children have to work 2-3 low paying jobs in an attempt to support their extended family - including their children, parents and sometimes siblings - only to still be in a situation of poverty. Yet, as mentioned earlier, there is the expectation that parents will live with their adult children when they arrive in Canada.

Parents and grandparents alike also struggle with the difference in how children, especially teenagers behave in Canada often a sharp contrast to more traditional cultural modes of behaviour.

Problems have to be understood in the context of these relationships colliding in an often hostile outside environment. In addition, as in any family, conflict occurs in relationships and as a result of living closely together.

The quotes to follow provide a snapshot of this complexity highlighting some aspects of the specific nature of conflict in these relationships.

At home, the seniors feel that to avoid situations where arguments or fights occur they would rather just stay quiet. They feel when they speak out about certain things, this causes a strain with the daughter-in-laws. They don't want to upset their children so they don't say anything.

It's also not considered good if outsiders find out that there are issues at home, people will talk. For example one scenario is that of a mother in law living with the son and daughter in law. She stays in her room in the morning and only comes down when the daughter in law and her son and the grandkids have finished breakfast.

They have issues with their daughter-in-laws, some of the women shared that they feel that the daughter in law separates their son from them, and also sometime bring misunderstanding between the siblings.

Children cook food which is least liked by the parents.

Daughter-in-laws cook for themselves and the grandkids and for the parents. They leave for work and leave all the dirty dishes for the old parents to wash.

Grandkids don't give us the opportunity to watch any TV shows. If we ask them, they start screaming and our son and daughter-in-law get mad at us.

When we go to parks, our children say that you go to park for gossiping and backbiting against us.

Grandparents don't accept the ways in which the grand children are brought up, they don't accept dating or children talking and chatting with their girl or boyfriends. Grandparent's expectation is that the grandchildren should be raised in their own culture.

Seniors would like their children and grandchildren to eat traditional food instead they prefer to eat junk / fast food. When seniors try to teach grandchildren the culture and tradition they feel unappreciated. Generally seniors feel that they are being used as babysitters and cooks, almost like servants.

Also they shared that the grandchildren think that their grandparents are uneducated and know nothing about the Canadian education and system.

Inside the Home

In order of the frequency shared, this section outlines the main problems that the seniors expressed as occurring in their homes;

- Exploitation and control;
- Emotional abuse, neglect and/or negative treatment by their family members;
- Financial abuse;
- Lack of money;
- Dependency on their adult children; and
- Poor mental and physical health.

It must be noted the problems expressed are interrelated and have a negative cumulative effect on the seniors that we spoke to.

When reading the results from these focus groups, particularly the quotes - it is important to remember that these groups occurred in various South Asian languages and that the South Asian facilitators have translated the seniors' responses to English. The quotes that follow therefore may be the facilitators summary of what has been said or an attempt to do a direct English translation of what has been said by a senior.

Exploitation & Control

Many seniors felt taken advantage of, as they are expected to babysit their grandchildren with little acknowledgement or appreciation for this task. They often expressed that they feel exploited because their well being didn't seem to matter to their adult children.

They indicated that they were expected to do housework and cook. These tasks on a daily basis are often difficult for them to conduct as they age. Our children keep our PR (Permanent Residence) card or Citizenship card or Health card. How can we leave if they have all our identity documents? They have control of our lives, the power has shifted. Back home we had respected, we had power, we were respected for our age and our wisdom. In this county we are not respected. We are looked down upon and we are demeaned.

We take care of the grandchildren for the whole day while our children are at work. But when they come back from work, they say that you didn't do any work for the whole day - just kept sitting at home.

Our children ask us to get the driver's license. We don't get the license because otherwise they would assign us more tasks such as taking the grandchildren to the sports classes, getting the groceries etc.

I drop off my grandkids to the school and pick them up in the afternoon; cook for the entire family; clean dishes and do laundry. My life is miserable.

Sometimes seniors would like to go out to learn English but they are expected to stay at home and mind the grandchildren instead.

We heard examples of ways that the seniors were controlled by their adult children who they live with. This control could be exercise through fear, threats, withholding of information and/or relaying false information and not allowing nor supporting their parents to get involved in activities outside of the home. The following quotes offer insight into the nature of this form of abuse.

In one case the male seniors' passport was taken, wife's immigration papers were torn.

In some cases, seniors were not allowed to mingle with guests, "they were ordered to stay in their room" until the guests were gone. 75% of seniors don't know who to call for help.

I met a couple at temple whose children only take them outside to go to the temple. They do not even know their own home telephone number. The couple's children will not allow the couple to go outside for enjoyment.

I know a friend of mine she is 70 who was sponsored here and she is not able to leave the home. She wants to work but she is told that she is not allowed that she won't do any good and to just stay at home.

I have seen seniors who are forced into staying home and have suffered a lot of verbal abuse. I have heard of some cases where kids have taken away their passports or threatened to have their own parents deported.

Sponsorship is a huge factor. The government had these rules; I think that you are not allowed to leave the sponsor for 10 years. This makes seniors very vulnerable. The children threaten then that they have to stay with them for 10 years. When the seniors want to go outside to walk, go to the movies or go to yoga or other programs they are told that they cannot. How can they?

Emotional Abuse, Neglect and/or Negative Treatment from Family Members

In this section we will examine the negative treatment that seniors were experiencing from both their adult children and their grandchildren. Different forms of abuse and torture from kids and even grandkids (or their husband/wife). Basically whoever is the breadwinner is in control and that's usually not the senior.

Negative treatment from adult children included verbal and emotional abuse, withholding of food, money and even clothing, forcing seniors to find a job, not allowing seniors to participate in household decisions and neglecting their health needs. The daughter-in-law then started asking her mother-in-law to go out and work. The mother-in-law did odd jobs in the hotel, restaurant etc. One fine day, the father entered into his son's room without knocking or seeking permission. The son got mad at this and insulted his father telling him that he could not enter his room without seeking permission. The father felt very humiliated and insulted.

Another issue seniors are facing is their adult children talk about them in front of them like they are not there. Just because the expressions are not there on their faces, it doesn't mean they don't understand. They are aware of what's being said about them. That's a form of abuse.

Grandchildren can be verbally and emotionally abusive, which was demonstrated by their lack of respect for their elders - something that would likely not occur as much in their home countries.

Seniors are verbally abused, many times in front of the grandchildren and eventually the grandchildren started to treat them the same as their parents did.

I know a senior in my neighbourhood, who had recently come from India. Once he shared with me that my grandchildren use some words like 'stupid' and 'idiot' to address me, what I don't understand what they mean. Then I explained him what do these words mean. One day, I was sitting with that neighbour outside of my house and his grandkids were playing outside the house. I called the grandkids and asked them if they use words like 'stupid' and 'idiot' for their grandfather and they committed that they did.

Grandkids don't give us the opportunity to watch any TV shows. If we ask them, they start screaming and our son and daughter-in-law get mad at us.

We also heard some cases where the abuse was more extreme, where seniors were forced to stay inside the home, denied basic comforts and even food.

One of my friends (senior) told me that her children (son & daughter-in-law) lock both the parents in the house, while they go out for work. They feel like prisoners in their own house.

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One of my friends' daughter-in-law locks the kitchen pantry and fridge before she leaves for work, even knowing the fact that her mother-in-law and fatherin-law would be home.

One of my friends (senior) told me that her daughter-in-law measures the milk (kept in the fridge) before she leaves for work, so that they (both the parents) don't use any milk.

When the children leave for work, they turn off the heat and close the ducts, so that energy bills are saved.

In one of the case they had fixed cameras in the home to monitor the activities of the seniors at home.

One of my friends' (senior) daughter-in-law turned off the water supply for washer before leaving for work. My friend could not use the washing machine and had to hand wash all the clothes.

One of my friends (senior) told me that she is not allowed to use the washroom on the first level of the house. her daughter-in law tells her that she makes the washroom dirty. My friend has to go the second level to use the washroom. It's difficult for her because she is an arthritis patient.

It was clear that seniors were not valued and as they articulated it, they felt this was due to the fact that they did not bring in any income and thus are rendered powerless.

When the seniors (who have adult children) work and bring money in the home, they are being respected by their children. But as they grow older, and are not able to work and bring money to the family; they are discarded by their older children.

Financial Abuse

Many seniors that we spoke with explained how their adult children took their Old Age Security or other pension cheques that they may receive, away from them. Some seniors may receive pensions from countries that they have previously lived and worked in.

The practice of using seniors pension cheques however cannot be viewed a purely malicious in nature, because of the reality that immigrant families struggle to make enough money to support their often large extended families. As has been said before, most seniors are brought here as nannies most seniors don't even understand the language so the kids keep abusing them." "Many seniors don't even know how much pension they receive." Most kids take away their parents pension as soon as it comes in their accounts. Parents are only provided few dollars for their pocket money and in some cases even that is not available.

Therefore when we are examining the issue of financial abuse and South Asian seniors, we need to understand this on a continuum - where at one end seniors may willingly and happily contribute to the household income understanding how hard life is for their children, some may be more reluctant to do so, others not given a choice at all, to those who are outright being manipulated and exploited financially by their adult children.

We recently had a case in our community of two children who forged fake documents from their father and took out a second mortgage on the father's home without his knowledge. He is now going to lose the house because they did not make the loan payments. They are also trying to push him into a home. They have taken a lot of financial advantage of him.

The group expressed frustration with the financial issues. They mentioned that the children often take their money including pensions, property in home countries and financial assets and use it for their own purposes. Additionally, the kids will charge them rent and sometimes even ration their food.

My son convinced me to get the Power of Attorney in his name and then months later got all my property and my house in his name. And now I am living all by myself in the seniors' building. One senior couple was forced to give the safety deposit box key and bank account information which resulted in losing all their money, jewelry and property.

Lack of Money

Seniors felt frustrated that they had little or no access to money - even basic spending money. They felt completely dependent on their children financially, even in cases as we just heard, where they are receiving pensions yet do not have access to this money.

Seniors may have given up everything financially to come to Canada not foreseeing the potential conflicts that can occur. When I was coming back to Canada from my visit to India at the airport I saw so many elder people still coming to Canada... It's so cold but they are still coming here. I know a case that as soon as parents come here after selling all their properties in Delhi, they didn't feel like living here but now they are stuck here to face the abuse from the kids.

The seniors sell off all of their property back home and give everything to their children, so that they are able to come and live with their (older) children in Canada. When they come to Canada, their children mistreat them. They can't even go back to India as they don't have any money left with them.

Dependency on Adult Children

Seniors felt very dependent on their adult children and/or grandchildren. This relates to their lack of understanding of Canadian society and how to access the things they need that will contribute to their independence.

Life is often busy within their household with childcare responsibilities coupled with their adult children's hectic life. Many South Asian seniors are not familiar with this society and they lack opportunities to acquaint themselves with opportunities. The younger generation does not have enough time to help us adjust to this society. We have no opportunity to work and are very isolated. The pressures of everyday life often does not allow for much time for seniors to learn about and become better integrated and more independent in their new country.

Seniors have to depend on their children and grandchildren, even for making phone calls. There are such seniors who can't even make phone calls. Since the children are busy, they don't find time to make calls for their parents. As a result, the seniors are not able to talk to their friends and are left isolated.

In my house it's always the frustration from not being able to go to the doctor by myself, not being able to do a lot of things because I can't get around on my own. I always have to rely on my children, who are very busy and the restriction ends up leading to fights and violence. Things are said and that sometimes escalates into physical violence too...for some people.

I cannot go to my children to get any type of support as they already stated that I am a burden. I would like to be able to go to the temple every week but this is cumbersome to my family.

When we are living with our children, we depend so much on them for all our needs. We can't share our thoughts and have to go with their decisions.

Neglect and Poor Mental & Physical Health

The exploitation and control, emotional abuse, negative treatment and financial exploitation have a cumulative effect on the South Asian seniors we spoke to, leading to neglect, loneliness and depression. Throughout all the focus groups we heard about this incredible loneliness, isolation and sadness that seniors were experiencing. Seniors are feeling lonely when the children are at work and the grandchildren are at school. When the children return from work, seniors want to talk but because the children are tired the seniors are deprived of communication with their children. They are feeling sad and depressed.

For multiple reasons including, the neglect and abuse that we heard about from their family members, seniors not wanting to be burdensome, the stresses of working and everyday life for the adult children, or their profound dependency on their adult children- seniors' are experiencing poor mental and physical health. Seniors are neglecting their health because they don't want to put any burden especially financial burden on their children. So, they hide their health issues from their children, and suffer in silence.

She also needs to take care of her three grandchildren. She cannot relax - I feel that she is depressed because there are no opportunities in this country.

For the Sri Lankan Tamil seniors, the vast majority come as refugees of war, thus often experiencing Post Traumatic Stress Disorder.

Mental health is important for every person and it really affects the seniors group the most. I know many people who are very ill and distraught about the multiple friends they have lost to the war and how isolates they are in this country.

I want to see a psychiatrist. My doctor knows I have mental health problems. I am not well. I know this, my friends know this, the group is aware of this - but my children refuse to take me to the psychiatrist because of the stigma that is associated with is type of medical services. I feel ashamed stating this but it is something I see in our community. This needs to change but I don't know if it really will.

Outside of the Home

Seniors that we spoke to were isolated and spent most of their time inside of their homes. As we heard, this often related to the control and exploitation that seniors were experiencing making it difficult for them to be more independent and engage in activities outside of the home.

There are also many challenges external to home life that South Asian seniors experience that result in further abuse and/or a lack of services and supports that would help prevent or better respond to the abuse in their lives. The key problems faced outside of the home include;

- Services and supports not linguistically and culturally sensitive and responsive;
- Racism and discrimination;
- Lack of understanding of how systems operate in Canada
- Problems with transportation i.e. difficulty in getting around;
- Lack of affordable and appropriate housing;
- Lack of job opportunities;
- Financial fraud; and
- Discriminatory policies and legislation.

Services and Supports not Linguistically and Culturally Sensitive and Responsive

The vast majority of the issues seniors spoke about related to poor health_services. Whether it was long waits in hospitals or doctor's offices or the poor treatment they received from health care practitioners - seniors felt that they did not receive service in a way that was respectful and/or was sensitive to their needs. Most of the problems related to language and a lack of sensitivity or understanding of who they were as people or individuals. I think proper access to health care is a major issue for South Asian seniors. If they have a language barrier they will have difficulty expressing themselves at the doctors. There are also some cultural issues that might hold seniors back from accessing services. I know that sometimes senior women have trouble going to male health care professionals because some cultural issues around speaking to men about private issues. Some of the problems that they experienced are challenges that many seniors and/or people from all backgrounds experience, having to do more so with the larger systemic problems with the health care system. For example long waits and lack of access to a family doctor. However, the results seem to suggest that seniors felt objectified as "South Asian seniors", where their individual needs were not being valued related to both their age and their race/ethnicity.

The following quotes show the particular ways in which services and supports are not being sensitive and responsive to South Asian seniors' needs:

Language:

If the family doctor is a Punjabi speaking doctor, then its fine, otherwise it's very difficult to make our problems understood to the doctor.

Language is a big problem - can't speak English.

Seniors feel that they are treated nicely at doctors and hospitals only if they understand the language.

Another issue senior's face outside the home is jargon. My doctor speaks Bengali but I still don't understand what she's saying because she doesn't explain in clear language.

Ineffective and/or poor treatment by health care practitioners

I had the experience of going to St. Michael's hospital. I feel that the staff at the hospital pays more attention to the white clients.

My family doctor gives me appointment in the morning and she doesn't show up, until late afternoon. Sometimes I have to wait at her clinic for 4-5 hours. This is a usual routine for her. Seniors face a lot of health problems. I feel that doctors and nurses are often rude and condescending to seniors and there is a language barrier for many seniors trying to access health services. At my doctor's office I once saw a senior who could not speak English, get yelled at by the receptionist, so the abuse they face is not only coming from home but also in the public. The non- South Asian (white) seniors are treated more respectfully at the hospitals and we are ignored.

There was one case reported where a very old men was being neglected at the doctor's office. The pay phone was not working, so he asked the receptionist numerous times to call his home for a ride back and he was totally ignored by the receptionist for a long time. There was no family member there with him to assist.

An issue that was repeatedly identified was that doctors were too quick and would only hear one health concern per visit. This was particularly problematic to many of the seniors we spoke to:

Our family physicians ask us to share just one health problem/concern at one visit. We usually have 2-3 health concerns at a single point of time and it is very difficult for us to make numerous visits to the doctor's clinic.

It's difficult when doctors tell us that we can only ask one problem during a single visit to the doctor, because then we have come again to tell about other problems that we have.

There are a variety of challenges and issues that may occur in the context of a doctor's appointment. We heard in the previous section that adult children were either unable or unwilling to take their parents to see their doctors or as in some cases, seniors did not want to burden their children with this request. However we also heard that in some situations having your son or daughter present at a doctor's visit is not always preferable either. Also while we heard that language was a barrier to communicating and receiving effective care, in some instances having a doctor from the same linguistic and cultural background is not always the best option either:

When I go to the doctor's office my son or daughter comes with me. I feel like I cannot freely speak about my problems. I now go to a Tamil doctor but I hate going there as the wait times are significantly high and I do not feel like I am being heard. I feel like I do not get the proper care. Furthermore there is internal racism within our community. I do not think the Tamil doctor that we have, who is prominent in the Tamil community can help me the way that I would like (him or her) to.

A few seniors also spoke about their lack of access to dental services which were a critical need, yet due to expense they could not access.

Other problems with services

Lack of social programs or poor treatment in social services

Seniors really wanted to have more things of interest to do and places where they could go. In particular, they were interested in more physical activities like yoga and exercise.

There is really no place for seniors to congregate and have social interactions. Even the places that can arrange a space for them do not have funds to take them anywhere or have any kind of activity. The seniors end up travelling really long distances to just sit in a room with people and then go back home.

Also I am taking LINC classes. In the LINC class the teacher states that she does not like Sri Lankans especially Sri Lankans from Jaffna. I feel hurt and I feel displaced in these situations and I don't know who to turn to for support.

Poor treatment by the police

The following quote indicated a situation that has happened to more than one couple who had participated in this focus group.

We (me and my wife) lost our Permanent Residence(PR) cards and we went to the police station to file our complaint. The police officer refused to write our complaint and told us that all South Asians are like that - they just sell their PR cards and then come to us. After that, I wrote a letter to the police chief sharing my experience. It took several weeks before the police officer apologized for her mistake. The thing is, many seniors really don't do the necessary follow up. It was a very sad experience for us.

Shopping and Banking

As with all seniors, conducting basic errands like grocery shopping and banking can be taxing. With South Asian senior there is the additional problem of discriminatory treatment by customer service personnel.

Confusion, or forgetfulness at banks and financial institutions creates discomfort, and aggravating situations when we are unable to withdraw money and have to rely on our children to attend to such matters, making us feel like total dependants.

It is difficult to wait at the cash counters in the grocery stores, malls, or other government offices. There should be separate counters to serve seniors.

Seniors have no resources to go shopping. Often they don't feel confident and feel stressed by the long lines at the bank and grocery store and like they will be rushed-especially if it takes more time due to language barrier.

Racism and discrimination

Seniors shared many examples of the racism and discrimination that they experienced not only from service providers, but the general public. Whether in their apartment building, in malls or outside in public places - seniors are feeling racist treatment. Racism is a huge factor for Tamils seniors- I was playing bingo and I won yet no one in the room clapped for me or cheered for me, but then for a white person who won bingo the entire group clapped and cheered.

People don't look at us with respect because we are old and also because of our colour.

People make fun of our South Asian ways of dressing.

Security personnel at the malls mistreat us.

The non- South Asian seniors (in the building) have a discriminatory attitude towards us. They don't mix up with us even if we invite them to our gettogethers in the evenings.
Lack of Understanding of How Systems Operate in Canada

Canadian culture differs greatly from many South Asian countries. At later stages of life, it is even more difficult to grasp these differences in order to be able to integrate into mainstream society. They don't know where to go to get the things that they need and they often assume that there are similarities in how systems operate in their original countries, with that of Canada. For Every office has its own rules and regulations and a person has to ask every time. Some people don't bother to help nor offer to give help. Seniors are often ignored, and people are often rude because we are slower. We need more interpreters – both language and cultural, because sometimes even when we speak English there is confusion.

example they will go to the hospital emergency departments before contacting a doctor or use a Walk-in Clinic, because in their countries these services would cost, while hospitals are free of charge.

Seniors found it particularly difficult to understand the things that are required of them in order to receive their entitlements. For example they find it difficult to fill out government forms that are required for health coverage or immigration papers, etc.

The following quotes are useful in highlighting these issues:

The culture and systems here are very different from that back home - it takes so much time to adjust.

I think the language barrier is a big problem. A lot of people can't make appointments, phone calls, etc. to even access services.

Some seniors often have language problems; even if they speak and understand English they may have an accent and have difficulty being understood by others. It takes a very long time to adjust to this society when you come as a senior.

Newcomer seniors are unaware of what type of help or facilities are available and where and how to get these things...so we suffer in silence. I faced lots of problems when I visited the office of Service Canada. They didn't provide me with the translator (as I can't speak and understand English). I was asked to bring along somebody with me, who communicate in English on my behalf, despite of the fact that there was South Asian staff available in the office.

Lack of awareness of medical rights, consent, and complaints leaves them completely vulnerable and exposed to the health system, for example mistreatment, and misdiagnosis.

Same problem with the drug/pharmacy system. Most seniors don't know their rights and how to deal with complaints if there is a serious adverse reaction.

Problems with Transportation - Difficulty Getting Around

Access to transportation is a prominent problem South Asian seniors face. Getting out of the house for seniors programs, religious events, shopping or to visit their doctor is dependent on the availability and accessibility of transportation. Seniors found public transit difficult due to cost, physical inaccessibility, travelling in the winter, fear of not knowing how to get around and the fear of the non-South Asian public.

The following quotes shed light on the nature and specific problems seniors are experiencing in the area of transportation.

Transportation is a big challenge for us - we can't go outside and join the recreational programs or the seniors clubs. During winters, it even becomes worse.

Transportation is a big problem. They have to depend on their children to go anywhere - doctor, friend etc.

I think taking public transportation is a big problem for seniors. In the suburbs transit is not as good. Also, it is very difficult for people, let alone seniors, to figure out bus schedules, routes, etc... I once tried to figure a route to Toronto on the internet and found it very hard (small print and confusing schedules). Not being able to navigate the transit makes seniors isolated. I think that seniors face the same racism that we face and sometimes more when they cannot speak English. I think it is hard for seniors to navigate transit. Routes are confusing and schedules are not accessible.

It's very difficult for us to go the doctors during winters - because of the extremely cold weather. It's hard to travel in the public transit.

The priority seats in the bus are never vacant. These seats are occupied by the young people who never get up even if the seniors are standing in front of them. Even the bus drivers never ask them to vacate the priority seats for the seniors.

Sometimes, the drivers don't stop the bus when we are waiting at the bus stop.

I think public transit is hard for South Asian seniors. It is difficult to get around and understand how transit works. Sometimes the drivers are very rude and do not have the patience for seniors. There seems to be a general lack of respect for seniors today.

Transit was seen as very problematic in the city. There is no snow removal in many areas, often not even in seniors' homes, making it very difficult for them to move around and increasing the risk of falls.

Lack of affordable and appropriate housing

If seniors are experiencing abuse in the home there is nowhere for them to go, particular since the majority of the seniors we spoke to would not have the financial means to leave. In addition seniors who were independent lived in low income housing residences where safety and maintenance are compromised.

There are no security personnel available in our building. There have been instances of purse snatching with the senior women in our building. We complained to the building "in-charge" so many times, but of no use.

The elevator in our building was out of order for almost one week. It was difficult for seniors like me who live on the 4th floor of the building to go downstairs using staircase. I am a heart patient and I was kind of stuck in my apartment. We complained to the maintenance department, but it took so many days for the elevator to get repaired. Ideally South Asian seniors would be able to have nursing homes that would be specifically designed for their linguistic and cultural groups.

Access to appropriate, safe and affordable long term care facilities is also a problem for all seniors. Further the majority of these mainstream nursing homes are not equipped to serve South Asian seniors and in this rare example where a South Asian specific home existed, it is clear that the facility does not meet proper standards.

Nursing homes are a huge problem. I cannot eat the type of food that I am used to eating. I have to eat bland soup, jello pudding etc. I need to have a rice curry and my own comfort food.

There are Tamil group homes in Toronto, one was closed down recently. The main problem is that our children will drop us at this group home and not realize that there are not enough personal workers and that some of these alleged "PSW" (Personal Support Workers) are not licensed and we are to live in these atrocious conditions.

Lack of job opportunities

As we have heard, one of the biggest problems is that seniors have limited if any, access to income or money. Some of the seniors that we spoke to, particularly the younger seniors wanted to be able to work, yet language, their age and the fact that their foreign credentials were not recognized, all works against them in finding employment.

Financial fraud

Financial fraud against seniors is a problem that has been identified. As the Ontario Senior's Secretariat explains:

Fraud is the number one crime against older Canadians. Though people of all ages can be victims of fraud, older people get targeted more than others. Some of the reasons are that they are often home during the day to answer the door or phone, they can be more trusting and they may not have family or friends close by to ask for a second opinion. For South Asian seniors the problem is intensified due to increased vulnerability because of language and cultural naivety.

In one case, due to lack of English language skills they became the target of fraud and scam e.g. - one senior was lead to believe that the water tank was needed to be replaced. He was made to sign, unknowingly and to pay \$30 per month! Later-on when he refused to pay, he was told that it will cost \$400 to break the contract.

The South Asian facilitators who conducted the focus groups indicated that they have heard of many cases where seniors fall prey to fraud through telemarketing

Discriminatory policies and legislation

Seniors talked about the fact that the amount of care-giving support that is covered by the government is very limited. Specific government agencies and type of services that were referred to as lacking were; Community Care Access Centres and Personal Support Workers. When parents land in the country they do not have OHIP (Ontario Health Insurance Plan) for first 3 months. If they land in winter months then they are without medical help for those 3 months. There should be a better way dealing with OHIP.

Provincial and Federal government policies that were viewed as potentially having a negative effect on seniors include:

The **Immigration Sponsorship** policy can have a negative effect on seniors who are in abusive situations. Parental sponsorship requires the sponsor - in most cases the adult child - to sign a 10 year undertaking which denotes that they will take care of their parents financially for 10 years from the date they land in Canada. This means that if a sponsored parent tries to collect Ontario Disability or social assistance, the sponsor would be responsible to pay back that amount for the 10-year undertaking period.

Further, seniors are not eligible to receive **Old Age Security** (OAS) until they have lived in Canada for 10 years, which is a long time should they be in an unsafe situation. In Ontario, if you are not eligible for OAS you can apply for **Ontario Disability Support Program (ODSP)** benefits if you are 65 or over and are lowincome -even if you do not have a disability. Again, seniors would be hesitant to take advantage of this opportunity for fear of its detrimental effect on their adult children/sponsor. As a result, seniors in abusive situations often do not seek government financial assistance because they do not want their children to have to pay that money back. This leaves them without any option but to stay in the abusive situation as they do not have the resources to become independent and leave.

In addition, it is not uncommon to hear that sponsors have threatened the sponsored relative with deportation. While sponsor do not have the power to do this, there is a common misconception among seniors that their children could have them deported if they cause any trouble.¹³

The implication of the sponsorship policy is problematic because, as we have heard, seniors have little to no income, contributing to their dependency and isolation. This also places an additional burden on families to have to support their parents on their own and as we know immigrant families are struggling to find employment and are often poor themselves.

The situation is made even worse for older newcomers with a disability. If the newcomer with a disability is a sponsored immigrant, they are expected to be supported by their sponsors and are not eligible to receive the Ontario government support for people with disabilities - ODSP.¹⁴ The way the process and the law works discourages sponsored immigrants with disabilities to be independent and frowns upon the sponsoring person for failing to support their family member with a disability and in fact will penalize them financially.

If a sponsored newcomer with a disability is receiving ODSP and lives in their sponsor's home, the government frames this negatively:

¹³ This section on the Sponsorship policy was developed with the support of the South Asian Legal Clinic of Ontario (SALCO), one of four lead partners in this Elder Abuse project.

¹⁴ This section quotes from <u>Training Modules for a Workshop for Immigrant Settlement Workers</u>. Written by Doris Rajan for Ontario Council of Agencies Serving Immigrants (OCASI) & Ethno-Racial People with Disabilities Coalition of Ontario (ERDCO), 2012.

Further a fairly new regulation (2004) outlines a policy whereby, when the sponsored person with a disability doesn't live with their sponsor, ODSP can recover funds from the sponsor.

We know that there are additional costs for caregivers of people with disabilities, often resulting in family caregivers not being able to work, further lessening their household income.

Lastly, the fact that newcomers are not eligible for the <u>Ontario Health Insurance</u> <u>Plan</u> until they have been here for 3 months, places seniors in a vulnerable position should they get sick during this initial period.

Barriers to Getting Help

The seniors we spoke to throughout all the diverse language focus groups in the four regions outlined the following obstacles that keep them from reaching out for help and/or reporting the abuse that they may be experiencing.

- *Regard for the family* Do not want to bring shame to the family and do not want to cause any problems.
- *Not knowing English* Seniors find it difficult to access services or to get help if they do not speak English.
- *Fear* Fear of deportation, intensified abuse and fear of repercussions in their community or with family back home, also keeps older adults from seeking help.
- Lack of knowledge of Canadian systems and culture: There is a lack of understanding of the dominant culture, laws, health and social service systems which can leave older South Asian adults feeling that they have no avenues to pursue to leave abusive situations.
- Dependency on their adult children for housing, food and other necessities, may keep older adults in unsafe situations.

- Insensitive and discriminatory practices of health and other mainstream services - We heard many examples of older adults who have negative experiences using mainstream services, thus they would be less likely to access these services due to mistrust and fear of bad treatment.
- No means to get around -Older adult's inability to drive or use transit means that it is very difficult for them to be independent and access services that would contribute to their well being, i.e. yoga and other recreational/fitness programs and supports that may help them get out of an abusive situation.
- **Controlled by their adult children** We heard in the previous section that some of the older adults we spoke to are kept from socializing or leaving their homes. We heard stories of people's passports and identification taken away from them, blocking their access to using the phone and closely monitoring who they speak to.
- *Silencing of women* We heard that for older women they are expected to let the men direct (whether that be their son or husband), and be content with having no say. We also heard that this is often reinforced by the religious community.
- No alternative housing Even if an older adult is able to overcome the above barriers and are able to leave an abusive situation, there is no place for them to go. With no money or other social supports in place, abuse seniors feel trapped in their living arrangement.

Things that would help

While we did hear many scenarios of abuse and barriers to seeking help, the seniors we spoke to were also very clear about what they, their families and the broader community need in order for them to live a safe and healthy life.

What Seniors Need

Increased knowledge about of Canadian dominant culture, their rights, laws and how the health and social service systems operate - This was often stated by the older adults that we spoke to as something that would empower and assist them in difficult situations.

More language and culture specific seniors programs and services - Older adults that we spoke to had many ideas of the type of services and programs that they needed or wanted, that would help them live a better life. These included:

- ✓ Opportunities for seniors to meet one another and talk about their issues;
- ✓ Educational sessions on understanding the Canadian system and learning about their rights and entitlements;
- ✓ Counseling programs;
- ✓ Seniors helping Seniors There should be opportunities where seniors can support each other. For example, seniors who have been in Canada longer and/or who are younger, could provide peer support;
- ✓ Hotline for South Asian older adults;
- ✓ Language-culture specific driving lessons;
- ✓ Excursions designed specifically for South Asian seniors;
- ✓ Information sessions on how to best manage their finances;
- ✓ Visits and activities from volunteers;
- ✓ Encourage seniors to volunteer at places of worship and other places in the community; and
- ✓ Learn more and interact with people from non-South Asian cultures who live in their neighbourhoods.

Family Support Groups - These sessions would involve building better relationships between adult children, grandchildren and the older adults in the home.

Topics to be covered include:

- ✓ Teaching grandchildren about their culture; and
- ✓ Information and education on elder abuse for other family members so that they understand that abuse is against the law and will not be tolerated;

More government support in the areas of housing, income, extend coverage for Personal Support Workers and dental coverage.

Leadership in their own communities and sensitivity in faith environments to the issues of concern to older adults. Seniors thought it would be useful to be able to approach religious leaders for help.

What Families Need

It is clear from this research and other relevant studies that have been conducted by SSN and others in the Greater Toronto Area¹⁵ that South Asian families are living very hard lives. This and other studies confirm that it is difficult for family members

¹⁵ Please see the following documents:

<u>Research Report: South Asian Diabetes Prevention Program. Written by D. Rajan.</u> Flemingdon Health Centre and the Social Service Network. Toronto: 2009.

Please see <u>The Impact of Family Violence: A South Asian Perspective – Conference Report.</u> Written by D. Rajan for the Social Services Network . Toronto: 2011. ISBN 979-0-9878222-0-8

¹⁵ <u>The Impact of Family Violence: A South Asian Perspective – Conference Report.</u> Written by D. Rajan for the Social Services Network . Toronto: 2012. ISBN 978-0-9878222-1-5

<u>Research Report</u>: Early in 2011 the Social Services Network was contracted by CHATS – Community & Home Assistance To Seniors to conduct focus groups with South Asian seniors in order to develop specific workshop modules in the area of health & wellness for South Asian seniors. One of the modules dealt with the issue of mental health. The findings of these focus groups illuminated some family stressors for seniors including exploitation in the home and seniors feeling of isolation, loneliness and not knowing where to go for help

to get jobs even though people were trying desperately to do so, that the high cost of daycare limits their ability to work, how rent eats up any social assistance that may be received, and how people are living in overcrowded spaces with sometimes up to 10 people living in one bedroom apartments.¹⁶

We know that seniors who were once the heads of families are now dependent on children and expected to maintain the home, cook, and look after their grandchildren, and youth are being forced to work in low income jobs to help support the family. Further when people do find work it is usually low paying and low status positions. These stressors contribute to tension in the home often making the most dependent the most vulnerable.

The seniors that we spoke to were clear about what their families needed in order to reduce the challenges they were experience in settling here in Canada. Ideas included:

Financial Security - Adult children need to have better access to employment, where their foreign credentials are recognize (if applicable) and there is less of an emphasis on Canadian experience. They need better paying, permanent, full-time jobs with benefits as opposed to part-time contractual work.

Housing - Affordable housing that can accommodate extended family living arrangements is also something that is needed.

Subsidized child care - Families need access to subsidized child care in order to lift the burden of babysitting for seniors and so their income isn't eaten up by high daycare costs.

More government support to assist family caregivers. Family members who have to care for their senior parents need more financial and other types of supports to

¹⁶ <u>Research Report: South Asian Diabetes Prevention Program. Written by D. Rajan.</u> Flemingdon Health Centre and the Social Service Network. Toronto: 2009.

assist them in their care-giving responsibilities for their parents. It was stated that there needed to be more access to Personal Support Workers to relieve adult children and better support older adults who need this service.

Family Support Group and Counseling - There was much discussion, cross all four regions about the need for intergenerational sharing and culturally and linguistically appropriate family counseling. These sessions would allow for each family member to talk about their needs, the challenges they face and learn about how they can better support one another.

What the broader community needs

Health and Social Services - Need to understand South Asian cultures and stresses - We heard that "cultural competency" is beyond learning about differences with minority cultures. It is imperative that the health and social services sectors understand the stresses South Asian families experience related to their premigration and settlement processes, as well as the specific family dynamics in the context of extended family living arrangements. This increased understanding needs to be translated into more effective practice, services and programs to be delivered to seniors. This includes conducting effective outreach and developing relevant and accessible resources and information.

Improve transportation services for seniors - This would increase South Asian seniors' independence and ability to access services.

Role for Schools in addressing the issue of elder abuse. Since many grandparents are responsible for bringing and picking up their grandchildren at their primary schools, it was felt that the school environment would be an appropriate and effective venue to hold some of these information sessions, family support groups and act as a bridge to learning about the mainstream Canadian culture. It was also felt that schools could help educate their grandchildren to respect their grandparents.

Improve the health care system - There needs to be many changes made in the way health care system that would improve access for South Asian seniors including, increased access to interpreters, anti-racism and cultural sensitivity training and the provision of transportation services.

Education for Police - Participants indicated hostility towards the police. It was felt that the police represented a threat rather than protection. A recommendation emerged that police need to "understand South Asian culture and community" in the areas of; where people come from, their language and faith, fears and repercussions and stigma.

Public Education - It was strongly expressed that there is a need for more public education for the broader community and for South Asian families.

Having people understand that South Asians are like other communities and value family and do not tolerate abuse.

It is important for the broader community to understand our culture. For example, families living in multiple generations in one house. It is important to understand our culture and how abuse is in our culture.

There was an idea of holding Community Fairs so that the mainstream community could learn about the communities and the issues faced.

More jobs for seniors and increased access to income support programs - Many of the seniors we spoke to wanted to work. Working would be beneficial for seniors in multiple ways, i.e. increase their financial and other forms of dependency on their adult children, decrease their isolation and loneliness, build their self esteem and help them integrate into Canadian society. There should be more opportunities for South Asian seniors to work in their new country.

Seniors' Residence and a Shelter for South Asian seniors - Many seniors that we spoke to like the idea of having a residence specifically for South Asian seniors. They wanted a place that understood the particular family dynamics that they were experiencing, would serve their food and respect their faith. Senior homes would allow them to be independent from their adult children and receive the care that they need. In cases of an emergency, seniors also wanted a shelter that would be specifically for South Asian seniors. This shelter would again, understand the particular manifestation and differential dynamics of elder abuse in South Asian communities.

2. Health & Social Services

1. Services South Asian Seniors Use

Like most seniors in Canada, South Asian seniors come in contact with the health care sector much more than any other service sector. This would include hospitals and doctor's offices. A project conducted by the Social Services Network and CHATS - Community & Home Assistance to Seniors¹⁷ emphasized the need to educate South Asian seniors on using Walk-In clinics to address the overuse of emergency departments in hospital. Therefore it is evident that South Asian seniors do not utilize Walk-In clinics that frequently.

Some South Asian seniors attend health and recreational programs at South Asian specific community agencies such as SSN and the Punjabi Community Health Services. Programs can include health and wellness seminars, yoga classes, card games, computer classes and other exercise programs.

South Asian seniors also interact with government agencies such as Service Ontario, Immigration Canada and other government departments responsible for assistance to seniors and immigrants. Seniors also interact with their local Community Care Access Centre which connects seniors and people with disabilities to the supports that they need in their local community, i.e. housekeeping and primary care.

South Asian seniors may also attend places of worship, meet in parks in the summer time or visit their local mall.

2. Who we talked to

The intention was to reach the key sectors that seniors interface with and those sectors that would be involved in violence prevention and response. Therefore we invited South Asian seniors service providers, generic seniors services, police

¹⁷ Early in 2011 the Social Services Network was contracted by CHATS – Community & Home Assistance To Seniors to conduct focus groups with South Asian seniors in order to develop specific workshop modules in the area of health & wellness for South Asian seniors.

involved in elder abuse, mainstream elder abuse organizations and health care providers.

The decision was made to hold one focus group with service providers for the Greater Toronto Area (GTA) since three of the partner communities are located in the GTA.

The focus group was held at the Advocacy Resource Centre for the Elderly in Toronto. Service providers who participated in this group included; representatives from two regional police service associations, Family Service organizations, South Asian specific social services and community services for seniors.

3. Challenges from the Perspective of Service Providers

The Service Providers that we spoke to identified a number of challenges that South Asian seniors live with and/or come up against, in the course of trying to use their services.

The Nature of Abuse for South Asian Seniors

The service providers, particularly those who were South Asian, identified and/or confirmed the same forms of abuse that the seniors themselves identified. They have noted that some of the South Asian clients that they come in contact with are often lonely, neglected, exploited and have experienced emotional and financial abuse from their adult children.

Challenges related to why seniors won't leave abusive situations

No place to go to leave abusive situations - Service providers, again particularly the South Asian workers, expressed the problem in supporting seniors who may be experiencing abuse because they feel they should leave, yet there are no housing options available for them.

Great to say leave..go.. Where do they go?

One couple was asked to leave the home.. they left with a suitcase in their hands and only found a basement with cockroaches there.

Those who work with South Asian seniors are trying to find options of where to "put the seniors". There are problems with Long Term Care and Retirement homes because they are not sensitive to the needs of South Asian seniors. We heard of one option - Pat's Place, which is a safe haven for seniors experiencing abuse that has fully furnished apartments. Yet there are few beds available and seniors have to be able to care for themselves. In addition, this is something available to all seniors and therefore the demand is high.

Do not want to leave their family - Service providers found that South Asian seniors who they know were experiencing abuse, wanted the abuse to stop but not if it meant that they would have to leave or cause problems to their family.

Couples do not want to be separated - In a few cases there were options for the older women, through women-specific services, to leave the abusive situation, yet the couples did not wish to be split up.

Mainstream services do not identify elder abuse

It was felt that those front line workers in mainstream health or social services do not recognize that a senior may be experiencing abuse.

Social workers at the hospital just want to get them out. They don't see what is going on with the seniors. They need to recognize that this is a critical situation and that the senior needs to stay until they can get help.

Hospitals used as means to get "rid" of seniors

The service providers that we spoke to shared how hospitals are used as a means to "get rid" of a senior that a family does not want in their home. They noted that adult children take their senior parents to the hospital often as a way to release them of their care-giving duties.

We also heard that police are called by hospitals when abuse is identified, and some hospital workers fight to keep South Asian seniors admitted because of the fear of sending them back home.

Policies and systems can have a detrimental effect on seniors

Those working with South Asian seniors directly, (mostly South Asian service providers) confirmed that seniors are discouraged from being independent from their adult children due to policy restrictions. The same examples offered by the seniors were shared by the service providers:

- Seniors not being eligible for Old Age Security until they have been in Canada for 10 years;
- Not applying for Ontario Disability Support Program for fear of reprisal on their sponsor, usually their children; and
- Not applying for Long Term Care, again for fear of their adult children as their sponsors, being penalized.

Challenges for the police

Representatives from police services identified a number of challenges that they have experienced when interacting with South Asian seniors.

Seniors won't talk to them - Officers explained that it is hard to determine what the situation is when they arrive at a 911 call.

It is really difficult to determine that we have a victim and to get that victim to talk to us. Maybe it is religious reasons but the women are not allowed to talk to us. Or maybe it is the language.

They may suspect neglect but it is hard to determine this, especially with so many living in one home. One participant added that there could be 4-8 seniors living in one home.

I can't believe how many people are living in that house. Where do they sleep? Who is preparing the meals? It is hard to get people alone to ask those questions. *Investigating deaths -* Some time was spent discussing when police are called to a home when there is a death of a senior.

When there is a 911 call that is a sudden death, we observe where people are living. When someone has passed away in most cases you can understand what happened. But sometimes you ask - Were they given proper health care? Who's providing the care? Who in fact is responsible for that senior in the home? Their medication? We determine the cause of death at the direction of the Coroner. We interview all the parties that reside at the house. For the police it is really difficult ...we have to attend and we have to do an investigation. This might be their first interaction with the police also.

In this discussion, a South Asian worker explained that if you don't know the language it would be very difficult to engage with the family. She also expressed that it is very difficult to interview someone at such a difficult time given the shock of the death. This would be hard for anyone, but particularly difficult if you are not from that culture.

Not enough South Asian officers - It is clear that there are very few South Asian police officers. For example in all of York Region it was reported that there is only one Tamil officer, yet it is estimated that almost 400,000 Tamil refugees/immigrants live in the GTA, with a substantial population living in Markham in York Region. ¹⁸

We heard that in South Asian communities, policing is not considered a respected profession; hence young adults are not encouraged to choose this as a career.

¹⁸ Please see CHATS – Community & Home Assistance to Seniors, by Doris Rajan, Profile of the South Asian Communities in Markham and the City of Vaughan (2011).

Challenges in using family members to translate

An issue that was identified by the police officers, health care workers and other service providers was the problem of using family members as translators for the seniors. This was stated because the translator could very likely be the abuser.

4. What is Needed to Better Support South Asian Seniors?

Funding for agencies serving South Asian communities

We heard that South Asian specific organizations are best suited to provide the direct services needed to effectively support seniors and families in the prevention and more effective interventions related to the issue of elder abuse. The following quotes elaborate on this issue and demonstrate the types of services that South Asian agencies would be best to provide:

There needs to be core funding for South Asian organizations to provide the support that is needed. For example, Home Intervention Workers who could provide a casual way of visiting them, then they would open up.

We need case management for South Asian seniors - this would mean intake for seniors for life. That is, work directly with them.

This is beyond personal care and needs to be South Asian specific. It is important to have South Asian counsellors, when their emotions are damaged. There is a need to focus on their emotional state.

There needs to be more day programs, provided by South Asian agencies. Caregivers are burnt out keeping them at home.

Respite care - serve the needs of the growing demands of aging.

Other ideas were offered to address the issue of elder abuse more effectively:

- Engaging younger South Asians to work in Day Programs with seniors;
- Using South Asian media, i.e. TV, newspapers and radio to reach seniors and families regarding the issue of elder abuse. Including outlining what police can do to help them, and show a help line number;
- South Asian service providers deliver training and education to officers on the issue of elder abuse;
- Develop Volunteer Pools to assist in driving and seniors visits; and
- Support mainstream community services and resources to culturally and linguistically translate their materials into South Asian languages.

Mainstream services need to be able to identify the signs of elder abuse in South Asian communities

There was some discussion around the need for mainstream service providers, such as hospital staff, doctors and nurses, etc., to be able to recognize the signs of elder abuse when dealing with South Asian families. For example, if a family comes into a hospital emergency department with their senior parent saying that they fell, if staff are concerned they should use a translator not affiliated with the family to explain what happened. An objective member of the community would be able to ask clear questions and relay this back to the staff for them to determine if there is cause for concern.

Need a system that connects mainstream services with South Asian seniors and South Asian agencies

It was felt that mainstream services such as policing and family services, need to be better at communicating their services in a way that will reach, be relevant and understood by South Asian seniors. In addition, there needs to be more South Asian Mental Health caseworkers in Community Care Access Centres. Lastly it was felt that mainstream agencies need to be better connected to agencies serving South Asian seniors and/or immigrants in their community.

Training for Personal Support Workers (PSW) when working with South Asian seniors

Since Personal Support Workers interact with South Asian seniors, they need to receive sensitivity training on the issue of elder abuse in South Asian communities.

We have 200 Personal Support Workers and they are our eyes. They report back to the supervisors. We need more training for PSWs - they can help determine whether abuse is occurring.

Better transportation for seniors

Many of the South Asian service providers in the group felt that there needed to be more free transportation for seniors to help address the loneliness and dependency.

Transportation is a big issue. There is no community organization that is transporting seniors. We need volunteer drivers to take them to their appointments, etc. This would combat the isolation and people could escort them. Who is going to escort them?

It was noted that in Scarborough Ontario the Red Cross does provide this for a small fee.

Things the police can do

Promising practice in intervention - It was noted that police need to minimize the "shock value of police being " at a home. They need to build trust in the event that "down the road" the family may need them in cases of abuse. They should explain clearly what they are doing and why:

We may have to take pictures in cases of a death. We are obligated by law to complete a thorough investigation. There are policies and procedures that dictate specific situations. This needs to be explained to families. We have procedures for everything, including elder abuse procedures. Officers are brought in. In Toronto through the "Multilingual Community Interpreter Services" they have elder abuse cultural interpreters. We will bring in someone from MCIS.

Recruit more South Asian police officers - It was stated that there needs to be intentional outreach to recruit South Asian police officers representing diverse South Asian communities.

Engage with South Asian communities - The police participants shared their ideas on engaging with South Asian communities in their region. One officer outlined that when they are aware of South Asian events, they make a point of attending these. The idea of setting of booths where the police can share information in a non intimidating manner was also shared. They discussed placing calls to community and faith leaders to network and establish a connection.

Other ideas of engaging with South Asian people included:

Worship Tours - We take our recruits to the dominant communities' places of worship where they are given a synopsis of the importance of the religion. We have been doing this since 2004. We are engaging these leaders to really hit it home to the newcomers to have faith in Canadian police. Cultural- religious leaders they are our advocates.

In York Region we have online training - Citizens Academy -where you can come and learn about the police. You can make contacts and build relationships. We do this in different languages in the community.

Awareness workshops and information sessions - It was felt that awareness workshops were needed for both the police and the community on this issue. It was also stated that police need anti-racism training. While it was identified that South Asian service providers could provide training for officers, it was also felt that South Asian provider would benefit from in-service training that police have on elder abuse and neglect issues.

Better coordination between South Asian agencies and the police - It is important for South Asian community workers to feel free to contact the police, particularly the units dealing with elder abuse. When a South Asian service provider shared a story of how a couple were treated badly at a police station, an officer replied:

I would like to know that kind of information if someone is not treated nicely. If I witness this I contact the supervisor.

Develop resources that front-line officers can use when dealing with South Asian families - Resources needed, include;

- ✓ Resource list of South Asian services;
- ✓ Quick reference cards that outline different scenarios for front line officers;
- ✓ Online information.

IV. Recommendations & Conclusion

The results of the focus groups generated three key areas of recommendations; 1) programs that need to be developed for South Asian seniors and their families, 2) programs that are needed for the broader local community, and 3) specific reforms to governmental policies, programs and funding.

Program Development for South Asian Seniors & their Families

These programs ideally would be developed and delivered by South Asian agencies.

- 1. Information and Educational Sessions where seniors can learn about:
 - The dominant Canadian culture and how the health and social service systems operate; and
 - What constitutes elder abuse and their rights and entitlements
- 2. Seniors helping seniors' groups- Here younger or more established seniors can serve as mentors to newcomer seniors and/or those more at risk.
- **3. Day Programs** There needs to be more activities for South Asian seniors to participate in during the day. These would need to be develop around cultural interests and practises.
- **4. Family Support Groups** These groups would focus on building healthy relationships between family members in seniors' lives. A component of this would be to educate family members on elder abuse and the law. This would also include a family caregiver support group.
- 5. Individual and family counseling This needs to be grounded in cultural knowledge, be language specific and entrenched in an anti-oppression framework that includes an understanding of systemic barriers to inclusion experienced by immigrants. Counselling expertise in the area of Post Traumatic Stress Disorder is also important particularly working with Tamil refugees.

- **6. Volunteer Roster** for home visits, to drive seniors to appointments and take them to events and activities.
- **7. Community Inclusion Activities** Include excursions specifically for South Asian seniors, encourage seniors to volunteer at places of worship and in other places in their community, and activities that will help them learn about other cultures and places in their neighbourhood.
- **8. Practical Skill Development Activities** This would include language specific driving lessons for seniors and how to manage your finances.
- **9. Resource Development** Develop culturally and linguistically sensitive resources for South Asian seniors to help them be safe and included in their community, i.e. awareness workshops on what constitutes abuse, their rights and safety planning.

In addition South Asian agencies should assist mainstream organizations to develop culturally relevant and accessible resources about their services, and offer ideas on outreach to South Asian seniors.

- **10.Programs in Schools -** Work with school boards to develop programs for children and grandparents that can be delivered in schools who have a large South Asian student population.
- **11.Crisis Hotline for South Asian Seniors** This would be a 24 hour safety hotline with trained workers representing the top South Asian languages.

Program Development for the Broader Community

1. Information and Educational Sessions for Mainstream Services:

Community-based health and social service organizations would benefit from learning about:

- Who the population of South Asian people in their community are, in terms of their linguistic, faith and cultural diversity and the places they congregate;
- The stresses experienced by South Asian seniors and their families;
- Learning about the particular nature and signs of elder abuse experienced by these communities;
- Obtaining tips on promising practices and more effective outreach strategies;
- The agencies serving South Asian people in their community and the services they provide for referral; and
- Being introduced to a process where organizations can examine their workplace with the goal of increasing their accessibility to South Asian seniors.

It will be very important for front-line service providers from hospital emergency and other departments, community health clinics, schools, seniors' services, personal support workers and police services to attend such educational sessions.

There should be a section in the curriculum that provides sector-specific information.

2. Public Education Campaign - This campaign would be targeted to the non-South Asian community to assist them in learning more about South Asian people and combat stereotypes.

3. Programs to Combat Elder Abuse in Places of Worship - Leadership needs to be nurtured in faith communities to support seniors issues and work towards the prevention of elder abuse.

Policy and Funding Reforms

Reforms need to occur in the area of income supports and the programs that provincial, territorial and municipal governments provide.

Funding to support South Asian specific social service agencies - It is important that all services involved in the prevention and response of elder abuse be accessible and demonstrates inclusive practice to all citizens of a given community.

However funding and program priorities need to be shifted in recognition that mainstream social services do not have the expertise and thus have not been able to provide the level and quality of service needed to effectively support South Asian seniors. The findings highlight the importance for non-profit South Asian specific agencies to develop and deliver the type of specific programs to South Asian seniors as outlined above.

Increase Access to Employment for Immigrants - More government support to assist immigrants in finding medium to higher paying full time jobs with security that lessens the emphasis on Canadian experience in order to enable families to be better supported. In addition, a system for recognizing foreign credentials needs to be less time consuming and arduous. This should also include employment opportunities for South Asian seniors.

Increased Access to Income Supports - There are barriers to accessing various types of income supports for immigrant seniors. These specific barriers, federally, provincially and territorially, need to be examined with the goal of reforming eligibility in a manner that will increase access for South Asian and other immigrant seniors.

Housing - There is a need for more affordable housing that will accommodate extended family living arrangements

Subsidized Daycare - This is needed to alleviate the exploitation some South Asian seniors experience with the responsibility of caring for their grandchildren.

Government Support for Family Caregivers - Families need access to regular respite services and outside care-giving support.

South Asian Seniors Housing - This would be supportive living from more independent senior's residences with individual apartments, to fully supported nursing home settings. In addition there needs to be an emergency shelter that would meet the needs of South Asian seniors in crisis.

Extended coverage for Personal Support Workers - The services that PSWs provide need to be expanded to support family caregivers and seniors.

Develop transportation services for seniors - Municipal and non-profit organizations need to develop more low or no cost transportation services that would be accessible, linguistically and culturally sensitive to South Asian seniors.

Conclusion

The results of this research clearly indicate that South Asian seniors are vulnerable to isolation and neglect. As we heard, most live with their adult children and many of the seniors we spoke to were experiencing exploitation - either financial or through the expectation of childcare and housework. There were multiple reasons for an increase of stress in the home, i.e. financial challenges for their adult children as immigrants who find it difficult to find a job, yet needing to support their own children and their parents.

The South Asian custom of living with your adult children as you age does not necessarily translate easily to the Canadian context. In their home countries this expectation is supported, however as immigrants families experience multiple barriers to inclusion such as systemic racism in employment, education and other settlement stresses, it is difficult to uphold this custom. Generational conflict results with tensions evident between the seniors and their sons, daughter-in-laws and grandchildren, which can lead to incidences of elder abuse.

The information resulting from this research will assist us in engaging and empowering South Asian seniors, relevant mainstream services, South Asian specific groups, their neighbourhoods and their families, to develop and implement strategies that will address the specific forms of violence in South Asian seniors' lives. This will involve developing programs directed to South Asian seniors and their families, as well as to mainstream services and the broader community.

Municipal, provincial and territorial governments have a role to play in the prevention of elder abuse in South Asian communities by examining, prioritizing and re-visiting specific governmental policies and funding programs in a way that can better support South Asian seniors and their families, many of whom are struggling for a place in Canadian society.

The strategy for mobilizing this knowledge into the hands of South Asian seniors and their families, front-line service providers, management and government and non-governmental policy makers, will provide both the relevant sectors and seniors themselves with the information and tools they will need to help prevent and better respond to elder abuse in South Asian communities.

We hope the voices of South Asian seniors has been heard clearly through this inquiry in a way that ultimately, with our support, will make them less vulnerable to abuse and give them the resources that they need to be safe, healthy and included in Canadian society.

APPENDICES

Issues of Elder Abuse in South Asian Communities – A Report on a Survey of Service Providers

APPENDIX A - Survey Questions

APPENDIX B - Number of organizations per town, city or region



Issues of Elder Abuse in South Asian Communities A Report on a Survey of Service Providers



Appendix to *Elder Abuse In South Asian Communities: Report on the Focus Groups* **"Building a Safe Community for South Asian Seniors" Project**

Introduction and Background

The Social Services Network (SSN) is a community based, charitable organization that provides a range of culturally and linguistically appropriate services to the South Asian community through a range of community development and outreach activities and by providing resources and education to community partners. SSN strives to inform, support and empower the community to live an independent and enriched life. One of SSN's primary areas of focus is to understand and respond to family conflict and violence in South Asian communities. Within this mandate, the SSN also concentrates on addressing and preventing elder abuse.

SSN contracted Taylor Newberry Consulting to provide evaluation support in relation to a range of their anti-violence initiatives and programs. As part of SSN's focus on elder abuse prevention, local service providers participated in several focus groups and other forums to identify common challenges issues facing South Asian seniors and their families, ongoing needs, barriers to getting help, and recommendations for services and supports. SSN wished to examine these same issues from the perspective of service providers across the Canada. A brief online a survey was developed to gather this information. The present report provides a summary of the findings.

Survey Method

Survey Development

In collaboration with SSN, Taylor Newberry Consulting designed the online survey (see Appendix A). The survey focused on the following areas:

- The priority populations of surveyed organizations.
- The extent to which organizations focus on family conflict and violence and, in particular, on elder abuse prevention and intervention.

- The extent to which organizations serve families of South Asian heritage, as identified through spoken language.
- The types of programs and interventions the organizations provide.
- The extent to which South Asian seniors participate in programs and services.
- Common types of abuse confronted by providers in their work among South Asian families.
- Current service and support gaps in providers' local systems.

Recruitment

Invitations to participate in the survey were sent by SSN to mainstream and ethnospecific agencies via email in mid-December 2013. Approximately 200 agencies were contacted and individuals were encouraged to share the invitation within their networks. Individuals were asked to complete the survey if they represented an organization that serves seniors, including seniors of South Asian descent, through community based programs and who had front line knowledge of the services.

Although the survey was sent out broadly through a range of provider networks, the resulting sample was somewhat low with 34 individuals participating. The respondents were also not representative of Canada as a whole, as the majority (82%) were from Ontario. It is difficult to pinpoint the challenges in gaining a greater breadth of respondents. One possible reason for the high response rate in Ontario is that SSN is well-known as an organization locally, and the direct acquaintance of SSN with other providers in Ontario may have translated into more local responses. Furthermore, the concentration of South Asian communities in Ontario is much higher than in many other parts of Canada. The survey may not have been seen as applicable to many invited organizations.

The number of organizations from each town, city, or region is presented in Appendix B.

Analysis

Both quantitative and qualitative analyses of survey data were conducted. Relative percentages of question responses were calculated from the data , and qualitative

responses of participants were reviewed for common trends and to provide context for the quantitative findings.

Summary of Findings

Populations Served

All of the organizations represented in the survey provide services that have at least a minor focus on the seniors and families. A majority of organizations provide services that have a major focus on seniors (87%) and families (84%). These results demonstrate that the responding organizations were appropriate to the survey and its aims. Table 1 below provides the response rates regarding service focus in relation to demographic groups.

Some individuals chose not to complete all sections of this survey question which resulted in a varying number of respondents for different populations. What we can surmise from this missing data is that respondents passed over those groups that their services did not serve. This means that the "no focus" category "men", "women", and "children" is underestimated by between about 30% to 40%.

TABLE 1- Population Focus of Services	No Focus	Minor Focus	Major Focus	Total n
Men	9%	13%	78%	23
Women	0%	0%	100%	22
Children	20%	40%	40%	20
Youth	11%	42%	47%	19
Seniors	0%	13%	87 %	31
Families	0%	16%	84%	24
Respondents were asked to estimate the proportion of people served that are of South Asian descent. A majority (62%) of the organizations polled reported that 25% or less of the people they serve are of South Asian descent¹⁹ (see Table 2). 24% of respondents reported that over half of the people they serve are of South Asian descent.

TABLE 1- % of people being served by organization who are of South Asian descent	0-25%	26-50%	51-75%	76-100%	Total n
% of respondents	62%	12%	9%	15%	32

The variation can be due to a number of factors. A small number may specifically arrange their services around the South Asian community, whereas a minority may operate in communities with significant South Asian populations and by default these groups are served. The majority who serve a much smaller complement of South Asian people may operate in communities with a smaller population; or may not have the linguistic and cultural capacity and experience to meet the required needs. We return to this point.

Despite a low proportion of South Asian clients accessing services, there is nonetheless a diversity in the cultural-linguistic groups using the services. Figure one provides the relative service access of the most common South Asian languages. For all languages, the majority of respondents reported that individuals access their services (these data, however, do not speak to the relative prevalence of each language).

¹⁹ South Asia is generally defined as the southern region of Asia comprised of Afghanistan, Bangladesh, Bhutan, India, Iran, Maldives, Nepal, Pakistan, and Sri Lanka.



Figure 1. Do people from the following cultural-linguistic groups access your services?

Services Addressing Family Violence and Conflict

Figure 3 presents the proportion of organizations providing services that address family violence and conflict. As shown, the majority of organizations address this issue in some capacity.



Some respondents said that addressing family conflict and violence were only a small part of their work because these issues became evident as a result of working with

specific populations of adults. They indicated that if the concern arose it would be addressed, but it was not a focus of targeted service delivery. For example:

We work with older adults with mental health issues and addictions. Not infrequently we come across elder abuse.

[We can address the issue] if the issue is violence against a vulnerable adult...with intellectual, physical or cognitive issues.

Other individuals stated that addressing family violence is a significant part of their work and specified the type of services offered:

We are a consultation or referral organization. We have counselors and outreach workers, etc.

We have several abuse prevention programs that serve different populations: victims, perpetrators, seniors, women and men.

We act for seniors in conflict with families; provide advice and representation in elder abuse scenarios within families .

Services Addressing Elder Abuse

Elder abuse represents a specific form of family conflict and violence and was an important focus of the current survey. The majority of organizations represented in the survey provide services that in some way address elder abuse (Figure 4), with 41% identifying it as a significant part of their work.



Figure 4. Does your organization provide services that are designed to address elder abuse? (n=34)

One individual, who reported that providing services designed to address elder abuse was a small part of their work, stated that:

We work with our community partners to provide linkages to support services. We sit on committees to share strategies to address elder abuse. Elder abuse intervention is integrated into the plan of care when it is an issue. We do not have staff specifically designated for elder abuse intervention.

This suggests that for many organizations, addressing elder abuse remains a specialization that must be addressed through strategic partnerships with other providers to intervene.

Other individuals indicated that addressing elder abuse is a significant part of their work and shared the following information. For example.

We have best practice guidelines on client centered care and therapeutic relationships and one on elder abuse.

Two of our programs' main roles are to work in preventing elder abuse as well as supporting seniors who are experiencing abuse.

Services and Programs Provided to Seniors

The following section provides an overview of the specific services provided to seniors by the organizations represented in the survey. Respondents were first asked if their organization provides any of the following:

- Peer support groups
- Settlement and immigration services
- Service system navigation and referral
- Legal support and education
- Health care services (screening clinics, primary care)
- Life and employment skills programs (e.g., financial, computers, etc.)
- Individual support (counseling, therapy, case management)
- Outreach and crisis response
- Mental health and wellness education
- Social recreation and exercise programs
- Other services

As can be seen in the Figure 5, there was variability in the proportion of respondents indicating that specific services are provided by their organization. However, on average, at least 50% of the organizations provide the listed services to seniors.



Of the organizations that provide the listed services, nearly all organization representatives indicated that at least some South Asian seniors participate (Figure 6). Many South Asian seniors appear to participate in social recreation and exercise programs and life and employment skills programs. Few services specifically target South Asian seniors but social

Figure 6. Do South Asian Seniors participate?



recreation and exercise programs and mental health and wellness education are among the services most targeted directly towards South Asian seniors. This has also been the experience SSN as well.

Respondents were also asked to rate the extent to which the various programs and services they provide address issues of elder abuse. Most of the organizations that provided particular services addressed elder abuse at least indirectly (Figure 7). Some organizations offering individual support and mental health and wellness education do not address elder abuse issues. Given the nature of elder abuse, these services may be key opportunities to provide education on this issue.

Figure 7. Is there a focus on elder abuse?



Forms and Perpetrators of Elder Abuse

Respondents were also asked how often various forms of elder abuse were apparent when working with South Asian families and seniors. The survey inquired about five forms of abuse.

- *Physical abuse* was defined as inflicting physical pain or injury, such as through shaking, punching, pushing, burning or physical restraint.
- *Emotional abuse* included belittling, demeaning, dismissing, verbal or non-verbal behaviour from family members resulting in psychological pain, anguish and distress.
- *Financial and exploitive abuse* included illegal taking, misuse or concealment of funds, property, or assets of a vulnerable elder.
- *Neglect* included deprivation of food, health care, hygiene, acceptable shelter, and protection.
- Loneliness and isolation were defined as activities including preventing social contact and meaningful supportive relationships, in and outside the home.

Few organizations represented in this survey reported did not report any of the listed forms of abuse (Figure 8), which is consistent with SSN's experience that all the identified forms of elder abuse are present (but in no way unique to) South Asian communities.

When individuals did indicate that they never or seldom see particular forms of abuse they generally represented organizations that do not provide services with a focus on elder abuse, or their service only indirectly addresses elder abuse. Most often, respondents reported seeing individuals experiencing loneliness and isolation and emotional abuse.



Figure 8. When working with South Asian families and seniors what main forms of elder abuse and conflict are apparent. Please rate how often these forms of abuse are apparent in your work

It should be noted that these proportions are imperfect and subjective reflections of prevalence. It could be, for example, that physical abuse is underestimated because it is far less likely to be reported; in contrast, loneliness and isolation represent struggles that are much more likely to be named in interactions with a wider range of providers.

Quite often, respondents reported that they were unsure of how common it was for a particular individual to be a perpetrator of abuse (Figure 9). The reason for this is

unclear, but it is likely because knowledge of perpetrators will tend to be limited to individualized contexts of treatment and intervention. Perpetrators varied considerably, with husbands, sons, daughters, and son-/daughter-in laws as common. Aside from family members, respondents listed other individuals who they have learned are the perpetrators of elder abuse including, paid care providers, friends, neighbors.





When asked to reflect on elder abuse in South Asian communities specifically, there were some distinctive issues that stood out for respondents. Some individuals noted that it is difficult to determine if abuse is taking place. This may be due to a variety of factors such as stigma and shame that prevents some South Asian older adults from disclosing abuse. For example:

It is difficult to address the issue as it is not known what occurs because of the "wall of silence" that happens outside of the South Asian community.

[South Asian families] are still not ready to bring up these issues, because of their family pride and many other reasons.

Within the South Asian community there may be additional cultural characteristics that lead specifically to isolation. One respondent who often found abuse to be apparent in their work had this to say:

Culturally, South Asians seniors are not coached to be self-sufficient. They think they are old and can't take care of themselves. They need to be educated and trained to be self-sufficient. Often they have never driven a car so mobility and isolation becomes an issue. Perceived language barriers prevent them from taking public transport. Coaching and training is required.

Another respondent shared this:

Seniors often get misused for babysitting purposes which restricts what they can do. It is harder to leave the house, and usually take transit, with a small child.

Some individuals may not be getting the appropriate care because of worries unique to the South Asian community. For example, one participant reported that they have seen families hiding health issues, such as Alzheimer's Disease, to protect arranged marriages that could be dissolved if they were exposed.

One service provider raised the point that many individuals in the South Asian community will not even consider certain actions or inactions abusive:

Emotional abuse, neglect, loneliness and isolation are not considered abuse in the South Asian communities.

This suggests that a proactive approach must be taken on educating South Asian seniors about forms of abuse.

Service Gaps

When considering the issue of elder abuse, respondents were asked to identify what they thought were the largest service gaps in supporting South Asian communities. A common opinion was that there is a deficiency of culturally and linguistically appropriate services.

Illustrating this concern, some respondents stated:

I think the services are not transcultural services.

Language barriers [are a problem]: most senior citizens do not speak proper English and as such cannot comfortably talk about their issues or ask for help.

[We need] access to interpretation services and visibility of main stream organizations within organizations servicing culturally-specific seniors.

[There are] not enough organizational representatives from the same cultures providing care and support.

This may suggest that a solution to closing this service gap would be to involve translators and other front line staff of similar cultural backgrounds within organizations serving the South Asian community. However, this may only be the first step in addressing this problem. As shown previously in this report, there is great diversity in the cultural and linguistic groups accessing services. Additionally, in some organizations that do have available translators, it may be difficult to make seniors aware of that service:

Not certain as we have not had a lot of calls from South Asian seniors BUT I will infer from that that either they don't know about our services or because we don't have staff that are South Asian, some seniors may not feel we would be able to respond or understand their needs – but I am guessing. So It would be interesting to know if South Asian seniors turn to services (of any type) for assistance and what they themselves want to see in a service for them to contact that service as we would then try to do something here to make our service a viable option. We now do have access to a translation/ interpretation service to assist us in communicating with seniors of different languages but seniors are probably not aware of that.

The above quotation illustrates that some organizations do have linguistically appropriate services but making seniors aware of the services available to them is a struggle. A number of respondents endorsed this view specifically referring to elder abuse: [A problem is] getting our information on abuse and neglect of vulnerable adults into these communities.

The biggest gap and support is awareness of elder abuse, what constitutes abuse, and where one can access support.

Getting knowledge about existing services to elders and them being able to reach/contact service providers. There seems to be a sense fear surrounding the idea of asking for help.

The above quotation also reveals another gap in service delivery. Despite knowing about the available services, some older adults may be afraid to seek help due to possible consequences. For example:

Stigma within community is a barrier; seniors don't want to be open about it. Seniors have no choice – they are very dependent on family who sponsored them.

It is trauma and shame. Seniors are afraid to talk to the community members due to shame in the society they live in. [They are] also afraid that they might get isolated due to the conflicts at home. Might face more problems by family members if they find out.

Some respondents also stated that lack of housing for older adults experiencing abuse is a major issue:

[We need] more access to affordable housing and emergency shelters for seniors.

[We need] housing if required to relocate

Promising Practices

Despite these problems in serving the South Asian community, organizations are pursuing a number of strategies to help address elder abuse. Many respondents felt that helping seniors build support networks was a good practice to implement. Some participants stated that establishing peer support groups are very beneficial for the South Asian community:

Peer group discussion work really well, taking excursions together as well. It is all a means to provide networking opportunities so they have friends in life.

[We should] build trusting relationships through social activities.

One participant thought that this could be accomplished informally by providing areas in which seniors could meet:

[We] need more senior homes and communal places so they can find food and people to talk to.

Respondents also indicated that it is important to provide education to increase awareness of elder abuse and the services and activities that available to older individuals. One participant shared the following thoughts on their best practices:

Empower seniors by giving them knowledge and increase awareness in the community about their rights, rules and regulations. Also we advocate for the seniors and refer them to the mainstream agencies who can provide the counseling to the family members/seniors. Make them understand about the norm, the generation gap and the lifestyle in Canada could be different then back home.

A few representatives also thought it was important for staff members of South Asian cultural background to be visible within organizations:

Having an organizational representative from the same culture provide care and support

Leadership from within the specific community [is a best practice].

Conclusion

The intent of this survey was to capture a broader national cross-section of social and community organizations that address issues of elder abuse within South Asian communities. Ultimately the sample was not national in scope, instead more narrowly representing organizations in the Greater Toronto Area and parts of southwestern Ontario. The findings further support the information that SSN has been strategically gathering in recent years, through community development initiatives, the Family Violence Conference, and their day to day work. Core findings include the following:

- Only a small number of organizations are focused on service South Asian communities specifically. Otherwise, there are a range of organizations that are at different stages in providing inclusive, accessible, and appropriate supports for South Asian families. Many organizations find it challenging to access communities, especially in relation to sensitive areas such as elder abuse. There are many barriers, including basic language barriers.
- Even fewer organizations are directly addressing the more specific issue of elder abuse in South Asian communities, although many organizations see that it is occurring and that it has many forms.
- For the system to be more integrated, mainstream organizations have to engage in strategic partnerships with other organizations who know how to access and appropriately serve these communities.
- Stigma, fear, and cultural differences are consistent barriers to identifying abuse as an issue and knowing how to access supports and services.
- South Asian seniors tend to participate the most in life and employment skills
 programs, peer support, social recreation and exercise, and health care services.
 Peer support is a key service that is most likely to more directly address issues of
 elder abuse. It is also an effective strategy to improve community participation
 and connections, and facilitate access to needed supports and services.

APPENDIX A - Survey Questions

1. Name

First Name: Last Name: Email: Name of Organization: Position/title at your organization: Town/City: Province:

2. What populations do your services focus on?

	No Focus	Minor Focus	Major Focus
Men	\bigcirc	\bigcirc	\bigcirc
Women	\bigcirc	\bigcirc	\bigcirc
Children	\bigcirc	\bigcirc	\bigcirc
Youth	\bigcirc	\bigcirc	\bigcirc
Seniors	\bigcirc	\bigcirc	\bigcirc
Families	\bigcirc	\bigcirc	\bigcirc

- 3. Does your organization address issues of domestic violence and conflict in families?
 - \bigcirc No we do not
 - ○Yes, but it is a relatively small part of our work
 - \bigcirc Yes, it is a significant part of our work

Do you have any additional comments to clarify your answer?

4. Does your organization provide services that are designed to address elder abuse?

 \bigcirc No, we do not

- Yes, but it is a relatively small part of our work
- Yes, it is a significant part of our work

Do you have any additional comments to clarify your answer?

- Please estimate the proportion of people your organization serves that are of South Asian ethnocultural background (South Asia is generally defined as the southern region of Asia comprised of Afghanistan, Bangladesh, Bhutan, India, Iran, Maldives, Nepal, Pakistan, and Sri Lanka). _____%
- 6. Do people from the following South Asian cultural-linguistic groups access your services?

	No or very rarely	Yes, occasionally	Yes	Unsure
Farsi	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Gujarati	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Hindi	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Pashto	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Punjabi	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Tamil	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Urdu	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Other (please specify)	0	0	0	\bigcirc

- 7. What services or supports does your organization provide to seniors?
 - a) Do you provide this service?

		o not provide is service	We do some of		a big part of at we do
Social recreation an exercise programs		0	\bigcirc		0
Mental health and wellness education		\bigcirc	\bigcirc		\bigcirc
Outreach and crisis		\bigcirc	\bigcirc		0
response Individual support (counseling, therap	•	0	\bigcirc		0
case management) Life and employme skills programs (e.g financial, compute	ent g.	0	0		0
etc.) Health care service (screening clinics,		0	0		0
primary care) Legal support and education		0	\bigcirc		0
Service system navigation and		\bigcirc	\bigcirc		\bigcirc
referral Settlement and immigration service	25	0	0		0
Peer support group Other services		\bigcirc	\bigcirc		\bigcirc
b) Do Sou	ith Asian senio N/A-do not provide	ors participate? No South Asian Seniors participate	Some South Asian seniors participate	Many South Asian seniors participate	Service specifically targets South Asian
Social recreation and exercise	0	0	0	0	seniors O
programs Mental health	0	0	0	0	0

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and wellness					
education Outreach and	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
crisis response Individual support	\bigcirc	\bigcirc	\bigcirc	0	0
(counseling, therapy, case management)	\sim				\sim
Life and employment skills programs	0	Û	0	0	\bigcirc
(e.g. financial, computers, etc.) Health care	\bigcirc	\bigcirc	0	0	\bigcirc
services (screening clinics, primary					
care) Legal support and education	\bigcirc	\bigcirc	0	0	\bigcirc
Service system	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
referral Settlement and immigration	\bigcirc	\bigcirc	0	0	\bigcirc
services Peer support	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
groups Other services	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc

c)	Is there a focus on el	der abuse?			
	N/A-do not	Service does	Service	Service	
	provide	not address	indirectly	directly	
		elder abuse	addresses	address	
		issues	elder abuse	elder abuse	

Social recreation and exercise programs	0	0	issues	issues
Mental health and wellness	0	\bigcirc	0	0
education Outreach and crisis response	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Individual support	0	\bigcirc	0	0
(counseling, therapy, case management)				
Life and employment skills programs	0	0	0	0
(e.g. financial, computers, etc.) Health care services (screening clinics, primary	0	0	0	0
care) Legal support and education	\bigcirc	\bigcirc	0	\bigcirc
Service system navigation and	0	\bigcirc	0	0
referral Settlement and immigration	0	0	0	0
services Peer support	\bigcirc	\bigcirc	\bigcirc	\bigcirc
groups Other services	\bigcirc	\bigcirc	0	\bigcirc

8. When working with South Asian families and seniors what main forms of elder abuse and conflict are apparent? Please rate how often these forms of abuse are apparent in your work:

your work.					
Dhusiaal ahusa	Never	Seldom	Sometimes	Often	Very Often
Physical abuse (inflicting physical pain or injury, such as through shaking, punching, pushing, burning or physical restraint)	0	O	Ú	0	Û
Emotional abuse (belittling, demeaning, dismissing verbal or non-verbal behavior from family members resulting in psychological pain, anguich and distroce)	0	0	0	0	0
anguish and distress) Neglect (including deprivation of food, health care, hygiene, acceptable shelter and protection)	0	0	0	0	0
Financial and exploitive abuse (including illegal taking, misuse, or concealment of funds, property, or assets of a vulnerable elder)	0	0	0	0	0
Loneliness and isolation (includes preventing social contact and meaningful supportive relationships, in and outside the home)	0	0	0	0	0

b) When thinking about elder abuse in South Asian communities are there any unique issues that stand out in your practice? Are the types of abuse different in any important ways?

9. Who are the most common perpetrators of elder abuse in your experience?						
	Not common	Common	Very Common	Unsure		
Sons	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Daughters	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Son-in-laws	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Daughter-in-laws	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Grandchildren	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Husbands	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Wives	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Other relatives	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
Other individuals	\bigcirc	\bigcirc	\bigcirc	\bigcirc		
(please specify)						

- 10. What do you think are the biggest service and support gaps in your local system when considering the issue of elder abuse among South Asian seniors?
- 11. Based on the experiences of your organization, what are some promising practices locally that you believe are useful in responding to the issue of elder abuse within South Asian Communities?

Town/City/Region	Number of Organizations
Brampton	1
Burnaby (BC)	1
Charlottetown (PEI)	1
Edmonton (AB)	1
London	1
Malton	1
Markham	2
Mississauga	1
Newmarket	4
Oshawa	1
Region of Peel	2
Richmond Hill	2
Scarborough	2
Toronto	10

APPENDIX B - Number of organizations per town, city or region