Including Immigrant and Refugee Seniors in Public Policy

A discussion paper for the Calgary Immigrant Seniors “Speak Out” Forum
April 2, 2009

Prepared by Ethel Luhtanen, BA, MES
Project Co-ordinator Sybil C. Braganza, MSW, RSW
# Table of contents

ACKNOWLEDGEMENTS

<table>
<thead>
<tr>
<th>Acknowledgements</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORUM ADVISORY COMMITTEE</td>
<td>2</td>
</tr>
<tr>
<td>IMMIGRANT AND REFUGEE SENIORS ADVISORY COMMITTEE</td>
<td>2</td>
</tr>
<tr>
<td>PROJECT FUNDER</td>
<td>2</td>
</tr>
</tbody>
</table>

EXECUTIVE SUMMARY

| Executive Summary                          | 3 |

INTRODUCTION

<table>
<thead>
<tr>
<th>Introduction</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives of the project</td>
<td>5</td>
</tr>
<tr>
<td>Project beliefs</td>
<td>6</td>
</tr>
<tr>
<td>What is positive aging?</td>
<td>7</td>
</tr>
</tbody>
</table>

CULTURAL DIVERSITY AND PUBLIC POLICY

| Cultural Diversity and Public Policy       | 9 |
# Calgary’s Immigrant Seniors

Contribution of immigrant and refugee seniors to Calgary

# Scan of Key Issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>General issues</td>
<td>15</td>
</tr>
<tr>
<td>Language barriers</td>
<td>15</td>
</tr>
<tr>
<td>Income and economic security</td>
<td>16</td>
</tr>
<tr>
<td>Employment</td>
<td>16</td>
</tr>
<tr>
<td>Housing and retirement homes</td>
<td>16</td>
</tr>
<tr>
<td>Transportation</td>
<td>17</td>
</tr>
<tr>
<td>Social isolation</td>
<td>17</td>
</tr>
<tr>
<td>Health</td>
<td>17</td>
</tr>
<tr>
<td>Mental health and depression</td>
<td>17</td>
</tr>
<tr>
<td>Lack of access to community support services</td>
<td>18</td>
</tr>
<tr>
<td>Caregiving</td>
<td>18</td>
</tr>
<tr>
<td>Elder abuse</td>
<td>18</td>
</tr>
<tr>
<td>Safety and security</td>
<td>19</td>
</tr>
</tbody>
</table>

# Opportunities in the Current Policy Environment

# Working Toward an Immigrant Seniors’ Public Policy Framework

Immigrant seniors as a policy concern

# Recommended Next Steps

# Appendix 1 – The Policy-Making Process

# References

Resources, policy groups and research institutes
ACKNOWLEDGEMENTS

FORUM ADVISORY COMMITTEE

Sybil Braganza, City of Calgary, Seniors Services Division
Barb Biggs, Osteoporosis Canada, Alberta Chapter
Lili Bunce, United Way of Calgary and Area
Liza Chan, Calgary Chinese Elderly Citizens’ Association
Phyllis Luk, Faculty of Social Work, University of Calgary
Matthew MacPherson, Pro Bono Student, Faculty of Law, University of Calgary
Rob Manning, Practicum Student, Faculty of Social Work, University of Calgary
Lynn Podgurny, Kerby Centre
Svetlana Shklarov, Jewish Family Service Calgary
Ayda Tehrani, Kerby Centre
Linda Thomson, Volunteer, Filipino Community
Lori Villebrun, United Way of Calgary and Area
Ethel Luhtanen, Consultant, Speak Out Forum

IMMIGRANT AND REFUGEE SENIORS ADVISORY COMMITTEE

Henry Au-Yeung
Joe Cho
Harjit Kaur
Abdul Makalai
Lydia M. Siapno
Pepe Siapno
Amalia Tauber

PROJECT FUNDER

New Horizons for Seniors Program
EXECUTIVE SUMMARY

This discussion paper was written to provide some background information for the Calgary Immigrant and Refugee Seniors “Speak Out” Forum to be held on April 2, 2009.

The Forum was organized because it has become increasingly clear that the unique needs of immigrant and refugee seniors are generally absent from the dialogue at policy tables, from the policy positions taken by advocacy groups and from studies conducted by most non-governmental organizations (NGOs) in this country. It is recognized that seniors are not a homogeneous group, but only a few organizations and academics have registered their concerns about the well-being of immigrant and refugee seniors.

It is known that immigrant seniors are a rapidly growing segment of Calgary’s population. The immigrant population as a whole grew at a rate of 27.7 per cent between 2001 and 2006, in comparison with a 12.4 per cent increase among the Canadian-born population (Te Linde and Cook, September 2008). This growth rate will bring with it a significant increase in the population of seniors who are sponsored under the family reunification program to support their families.

It is also a well-known fact that immigrant seniors make a significant economic and social contribution to their families and communities and, in turn, to society as a whole. They provide childcare and housekeeping assistance to support their families who are working hard to lead productive lives in a new country; they volunteer in their own ethnocultural groups; and they actively try to learn English as a second language in order to participate in seniors’ activities and to understand the cultural norms of their new homeland.

In order to stand on their own two feet and contribute economically to their households, some are employed in occupations requiring lower credentials than they acquired in their own countries.

“We have a choice as a society: either to buy into the myths that seniors will drain the health and pension systems, for example, or to take advantage of the reality that seniors can contribute to society.” (Judy Cutler, CARP in Carstairs and Keon, March 2007)

Yet several studies have demonstrated that immigrant seniors are confronting a number of barriers to settlement and integration, even while they are contributing. The foremost of these is the fact that they have no voice in policy planning. In addition, language barriers cut across all of the issues confronted by immigrant seniors in that those barriers impede access to information and community support services and prevent full participation in society.

Research shows that immigrant and refugee seniors are confronting issues related to income and economic security, employment, housing, transportation, health, mental health and depression, caregiving, social isolation, elder abuse and safety.

It is hoped that participants at the Forum will develop a better understanding of these issues and begin an open dialogue amongst one another to ensure the inclusion of immigrant and refugee seniors’ needs on the public policy agenda.
Immigrant and refugee seniors are falling between the cracks and their settlement needs are being overlooked when it comes to the public policy agenda. This is impacting their lifestyles, their health and their ability to become integrated and contribute to society.

A number of studies conducted by different immigrant serving agencies in Calgary over the past five years reveal a consistent pattern of problems linked to the planning and delivery of programs for immigrant and refugee seniors. The lack of sustainable funding has meant that many services must be cancelled by an agency once a funding cycle is complete. Another agency may then apply for a similar project, resulting in both duplication and gaps in services as well as confusion amongst the immigrant seniors themselves. It has become evident that the ability of agencies to effectively plan and deliver sustainable programs for this group of clients is being hampered by both policy barriers (related to access) and inconsistent, sporadic funding. This results in services that cannot and do not meet the needs of immigrant seniors because of ineffective implementation and a lack of accountability from the larger systems.

With this in mind, an application was made by the Seniors Services Division, City of Calgary, to the New Horizons for Seniors Program for funding to organize a Forum entitled Calgary Immigrant and Refugee Seniors “Speak Out”. The intent of the Forum is to begin to build awareness of the unique needs and issues of immigrant seniors, and to dialogue and share information in order to begin the process of including immigrant and refugee seniors on the public policy agenda.

Once the funding was secured, representatives from a number of immigrant senior-serving agencies and practitioners in Calgary were brought together to discuss the project and to form a project advisory committee to organize and oversee the event. A researcher was recruited to draft a paper that would provide some background information for the Forum. Most importantly, an Immigrant Seniors Advisory Committee, consisting of opinion leaders representing the larger ethnocultural groups in Calgary, was formed to provide input to the planning and agenda of the event.
This project provides an opportunity to begin to inform policy developers about a population segment that is currently being neglected in the public policy dialogue.

It is also an opportunity to educate both immigrant seniors and immigrant senior-serving agencies on the nature of public policy development.

This discussion paper reflects neither a process of policy analysis nor is it a policy brief. It simply highlights some of the issues requiring additional research and dialogue, and it provides a rationale for making an effort to include immigrant and refugee seniors on the public policy agenda.

The intent is that it will serve three main purposes. It will:

1. Function as a background document for the upcoming Forum.
2. Provide pertinent information for developing an understanding of the unique challenges faced by immigrant seniors.
3. Be a resource for continuing the process of ensuring that the issues of immigrant and refugee seniors are included in the policy development process.

Objectives of the project

The objectives of the immigrant and refugee seniors' policy planning process that will be initiated with the Forum are outlined below. It is envisioned that the process will continue long after the Forum itself.

Short-term objectives:

➤ To create awareness amongst policy makers regarding the value of immigrant seniors to family, community and Canadian society.

➤ To create awareness that within the seniors' demographic there are issues and barriers that are unique to immigrant seniors.

➤ To create awareness that many existing policies have gaps that do not address the diverse needs of immigrant and refugee seniors, and that greater public support is required.

➤ To create awareness that there is a need for culturally competent service delivery to immigrant and refugee seniors, driven by policies that show a commitment to fairness, respect and equality as well as by demographic realities.
To begin an open dialogue among immigrant and refugee seniors, service providers and policy makers to ensure the inclusion of immigrant and refugee seniors needs on the seniors’ policy agenda.

To develop an agenda for future research and action.

Medium-term objectives:

To develop a mechanism and strategy for working on the issues identified during the forum.

To clarify the specific policies which produce barriers to well-being and the specific policy areas which are priorities for Calgary’s immigrant and refugee seniors.

To begin a collaborative process with governments to build policies which are inclusive of immigrant and refugee seniors.

Long-term objective:

To build ongoing mechanisms with government departments and non-governmental organizations (NGOs) for including immigrant and refugee seniors in the policy development process.

Project beliefs

The following beliefs have guided the planning of the Forum:

Immigrant and refugee seniors have a diversity of needs, many of which cannot be assumed to be met by the adult children and families who have sponsored them.

Public policy should be inclusive of immigrant and refugee seniors, and program priorities should take their unique needs into account.

Immigrant seniors should have access to community support programs that promote positive aging and economic security.

Immigrant and refugee seniors value independence and autonomy.

Immigrant and refugee seniors have “a right to comfort of culture in old age.” (Bartlett et al, 2006)

Immigrant and refugee seniors are a resource (existing and potential) to society, and there is value added in supporting their settlement and integration.
Opinion leaders in Calgary’s ethnic communities care about their elderly and are willing to work with governments and non-governmental organizations (NGOs) to promote positive aging and integration.

There is a need to engage immigrant and refugee seniors in the policy development process and to listen to their stories and their ideas for changes that would be helpful to them.

Political representatives and senior civil servants are open to discussing the challenges faced by Calgary’s immigrant and refugee seniors, as well as the barriers that are negatively impacting their livelihoods and lifestyles. They are also open to exploring means by which to be more inclusive in policy development.

The ability to communicate in the language of one’s place of residence is fundamental to positive aging and community participation.

Positive aging is a concept that should be at the heart of any framework within which policy discussions related to the integration of immigrant and refugee seniors are held.

What is positive aging?

Positive aging involves more than just maintaining good health for as long as possible. It is a concept that is relatively recent in literature related to ‘mainstream’ seniors; however, it is absent from any dialogue related to immigrant and refugee seniors.

Positive aging is a far-reaching concept. It is in everyone’s interest that seniors be encouraged and supported to remain self-reliant and able to contribute to family and community well-being. For seniors to maintain their independence, they must have affordable and accessible housing and support services that meet their needs. To take advantage of available services and to participate in their community, they need accessible transportation. A stable and secure income in retirement is also essential. Healthy lifestyle choices and appropriate preventive health and social support services throughout life also enable people to age in a healthy and productive way.
The province of Nova Scotia has developed the following inter-related guiding principles for promoting the overall well-being of seniors and the contributions they make. These principles are indicators of positive aging and should form the basis of strategic thinking with respect to policy development for all seniors (including immigrant and refugee seniors) as we work on resolving the issues confronting them.

➤ **Dignity** – being treated with respect regardless of one’s situation, and having a sense of self-esteem.

➤ **Independence/self-determination** – being in control of one’s life, being able to do as much for oneself as possible and making one’s own choices.

➤ **Participation** – being integrated into society, getting involved, staying active, taking part in the community, being consulted and having one’s views considered.

➤ **Fairness** – having one’s real needs, in all their diversity, considered equal to those of other people regardless of age, gender, racial or ethnic background, disability, economic or other status (e.g. sexual orientation).

➤ **Safety and security** – having adequate income as one ages and having access to a safe and supportive living environment, including freedom from fear and exploitation.

➤ **Self-fulfillment** – being able to pursue opportunities for the full development of one’s potential with access to the educational, cultural, spiritual and recreational resources of society.

➤ **Recognition** – achieving intergenerational recognition and respect for the contributions of older persons.

(Source: Nova Scotia Task force on Aging, October 2004)

**Immigrant and refugee seniors**

Most recent immigrant seniors have arrived in Calgary under the Family Class category of Citizenship and Immigration Canada, which reunites families in Canadian homes. The sponsor must promise to support the senior for 10 years from the date he/she becomes a permanent resident.

Those who came early in their lives and have grown old here will have arrived under any of the other categories of immigration: Skilled Worker Class, Business Class or under Canada’s Refugee System.

**GLOSSARY OF TERMS**
The growing cultural diversity of Calgary and the challenges it raises provide the context as well as the rationale for this project.

As a result of cultural diversity, the planning and implementation of a range of new services is required to address the needs of new ethnocultural groups in the city, including the elderly. Therefore, achieving cultural competence in understanding diverse cultures and the impact of culture on the effectiveness of services is also becoming a requirement.

“The increasing importance of immigration to Canada's population growth is a significant factor that is already influencing the composition of the senior population … between 1996 and 2001, the total population grew by four per cent, while the visible minority population rose by 25 per cent... The impacts are already being seen in Canada’s senior population...The immigrant population is also older on average than the Canadian population as a whole. Almost 19 per cent of the immigrant population in Canada is over 65, and this number is much higher than the national average of 12.2 per cent.” (Carstairs and Keon, March 2007)

Calgary as a city embraces diversity and is working to promote inclusiveness in its social services.

“An inclusive city is one in which all citizens have opportunities to participate in the life of the community, regardless of income, age, culture or ability. An inclusive city also ensures that people have access to the supports that they require.” (Te Linde and Cook, September 2008)

Australia is a country that has done considerable research on its aging population, including its growing immigrant elderly population and the policies and programs required to respond to their needs. It can be considered a model for policy development in the area of seniors.

Through its refugee protection system, Canada offers safe haven to persons with a well-founded fear of persecution, as well as to those at risk of torture or cruel and unusual treatment or punishment. Some seniors will have arrived as refugees.

It should be noted that the phrase ‘immigrant seniors’ always encompasses ‘refugee seniors’, even when used on its own in this paper.

Collaboration

“The goal/intent of collaboration is not – primarily – to improve quality and/or efficiency of services. The majority of collaborations are about supporting innovation and leveraging services and resources to improve client outcomes – particularly for clients/communities that are currently underserved, not well served or are falling through the cracks.” (Graham, 2007)
It is important to include the following excerpts from an Australian study (Bartlett et al, 2006) in this paper, because of the support that they provide for the case for inclusiveness in seniors’ policy development in Calgary and for their insight into the interrelationships between the key issues confronting immigrant seniors:

➤ Because of dramatic improvements in human longevity over the past 50 years, it is predicted that the elderly population across the world will surpass that of children aged 0-4 by 2050 for the first time in human history.

➤ Increasing globalization brings forth cultural interactions of people from all around the world. Reciprocal understanding of the cultural differences is challenging but highly crucial in policy and program development and implementation concerning the well-being of any country’s citizens, let alone the well-being of older people from CALD (Culturally and Linguistically Diverse) backgrounds.

➤ The dilemma...is that two indisputable facts confront us. First, the vast majority of instances of national, regional and global instability can be traced to conflicts involving perceived cultural and racial diversity. Second, the greatest resource for ensuring the survival and growth of the human race is cultural diversity...thus, we are faced with a paradox: A single characteristic of human life – cultural diversity – looms as both the principal source of local, regional and global tension and the principal resource for the survival and growth of the human species.

➤ It is incumbent on governments at all levels to nurture cultural diversity which, in turn, requires governments to respond to the needs of people from culturally diverse backgrounds and, more importantly, older people from such backgrounds who may lack the necessary resources and, thus, are likely to be more vulnerable.

➤ The circumstances of people at the time of their migration largely determine the psycho-social well-being and economic status in the host country.

➤ Information on the age of immigrants at the time of arrival is crucial for the development of fiscal and social policy aimed at looking after the migrant populations in their old age.

➤ The problem of social isolation and the need for social interaction are more acute in the case of more recently migrated older people of CALD (Culturally and Linguistically Diverse) backgrounds...the main problems in their
Cultural diversity

Cultural diversity is a difficult concept to define. Generally, it refers to “the plurality and interaction of cultural expressions that coexist in the world and thus enrich the common heritage of humanity.” (Acheson and Maule, 2004). It includes differences in race, ethnicity, language, nationality or religion among various groups within a community, organization or nation. (A. M. Orlandi, in Ngo, 2008)

On the Canadian front, participants in a study asking NGOs what matters in aging, conducted by the Canadian Policy Research Network (Zagon, 2002), identified three themes:

- maximizing participation
- enhancing well-being
- respecting diversity

They agreed that each of the themes should be included in any comprehensive strategy proposed to address seniors’ issues. The core values they identified included choice, flexibility and autonomy.

A suggestion was made that diversity also be acknowledged as a core value, along with respect for the individual, regardless of background.

There was a consensus that government should take action to change attitudes towards seniors and aging, address the gender divide and promote respect for the diversity of the population, including aboriginal peoples and ethnic groups.

case are:

i) language difficulties;

ii) a higher degree of attachment to their own culture and language;

iii) complete absence of any of their familiar social networks, and a lost feeling that is common to that of ‘displaced persons’;

iv) lack of knowledge of the culture and societal behaviour and norms in the new country;

v) dependence on more immediate family for their social needs, but the family members may themselves be too busy establishing themselves in a new country and society; and

vi) the small size of communities of the same ethnicity and cultural background without adequate religious and cultural activities.

Social isolation coupled with having a CALD (Culturally and Linguistically Diverse) background is a double jeopardy for older people. Mental illness and social isolation feed back into each other, increasing the impact. Language deficiency is acknowledged as an important factor in social isolation.
“In Canada, two interesting demographic trends have been underway: an aging population and a population growth based upon immigration. These patterns combine to form a new group of aging immigrants that seems to have evaded notice. For the most part, gerontological research has failed to recognize ethnicity or culture as a relevant variable, and research on ethnicity has failed to recognize aging as a relevant variable.” (Durst, 2005)

“While the vast majority of immigrants continues to settle in Toronto, Vancouver or Montreal, Calgary’s immigrant population is increasing significantly. Between 2001 and 2006, the immigrant population in Calgary grew by 27.7 per cent, compared to a 12.4 per cent increase among the Canadian-born population. This was one of the fastest growth rates in the country.” (Statistics Canada, in Te Linde and Cook, September 2008). Along with this rapidly growing immigrant population comes a rapid growth in the population of seniors who arrive under the family reunification program to support their families.

For purposes of this project, seniors have been defined as those people 55 and over, the definition used by The City of Calgary.

The following excerpts from research done by The City of Calgary provide an understanding of the demographics of immigrant and refugee seniors in the city.

➤ Almost one in five Calgary seniors (16,000 people) were part of a visible minority group and, of these, 42 per cent were Chinese, 25.9 per cent were South Asian, 9.7 per cent Filipino, 6.1 per cent Southeast Asian, 3.5 per cent Black, 3.3 per cent Latin American, 2.7 per cent Japanese, 1.9 per cent Arab, 1.5 per cent Korean, 1.4 per cent West Asian and 1.1 per cent Multiple Visible Minority. (City of Calgary, 2008)

➤ Four in 10 Calgary seniors (35,995) were immigrants, most of whom immigrated to Canada more than five years ago. Approximately two per cent of seniors in Calgary (1,730) were recent immigrants, meaning that they moved to Canada within the past five years. (City of Calgary, 2008)

GLOSSARY OF TERMS

“Cultural diversity is now a mainstream issue…Culture is not a separate need but rather a framework within which care and support is provided…it belongs to every human being and not solely to people we view as ‘others’.” (Greg Mundy, CEO, Aged and Community Services, Australia, (2007))

Cultural competence
Cultural competence is “a transforming, comprehensive organizational approach to integrating cultural diversity into all aspects of an organization’s structure and functions. It encompasses behaviours, attitudes, policies and practices that honour and effectively respond to cultural diversity.” (Ngo, 2008)
The largest number of immigrants among Calgary seniors was born in either the United Kingdom or the People’s Republic of China. By comparison, recent immigrants were most likely to be born in either the People’s Republic of China or India (27.2 per cent and 20.5 per cent of recent senior immigrants, respectively). (City of Calgary, 2008)

The percentage of senior immigrants is expected to grow as new immigrants who arrive under the skilled worker category sponsor family members to join them. (City of Calgary, 2006)

There is great diversity in terms of language among Calgary seniors. Over one third (33,565) of seniors in Calgary had a non-English native language; one in five (18,120) did not speak English regularly at home; and 8.6 per cent (7,760) did not speak English at a conversational level. Additionally, those 75 years and older accounted for almost one quarter (22.5 per cent or 3,925) of all non-English speaking Calgarians over the age of five. (City of Calgary, 2008)

The following chart shows the top 10 countries of origin for all immigrant seniors in Calgary during the last census. (City of Calgary, 2008)

<table>
<thead>
<tr>
<th>Country</th>
<th>Number of immigrants</th>
<th>Per cent of immigrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Kingdom</td>
<td>5,655</td>
<td>15.7</td>
</tr>
<tr>
<td>People’s Republic of China</td>
<td>5,110</td>
<td>14.2</td>
</tr>
<tr>
<td>India</td>
<td>2,665</td>
<td>7.4</td>
</tr>
<tr>
<td>Germany</td>
<td>2,415</td>
<td>6.7</td>
</tr>
<tr>
<td>Philippines</td>
<td>1,560</td>
<td>4.3</td>
</tr>
<tr>
<td>Italy</td>
<td>1,545</td>
<td>4.3</td>
</tr>
<tr>
<td>Netherlands</td>
<td>1,510</td>
<td>4.2</td>
</tr>
<tr>
<td>United States of America</td>
<td>1,300</td>
<td>3.6</td>
</tr>
<tr>
<td>Vietnam</td>
<td>1,290</td>
<td>3.6</td>
</tr>
<tr>
<td>Poland</td>
<td>1,235</td>
<td>3.4</td>
</tr>
<tr>
<td>All other countries</td>
<td>11,710</td>
<td>32.5</td>
</tr>
<tr>
<td>Total</td>
<td>35,995</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Settlement

Settlement is conceived of as “a process or continuum of activities that a new immigrant or refugee passes through upon arrival in a new country.” (Sarah Wayland, 2006)

The Law Commission of Canada divides the settlement process into three phases:

- **Immediate** – with a need for essential and early services related to food, shelter, clothing, language instruction, etc.
- **Intermediate** – with a need for training and advanced language instruction related to employment and access to health care, housing, legal services, etc.
Contribution of immigrant and refugee seniors to Calgary

It is a well-known fact that immigrant seniors make a significant economic and social contribution to their families, their communities and to society as a whole. They provide childcare and housekeeping assistance to support their family’s efforts to lead productive lives in a new country. They volunteer in their own ethnocultural groups and community centres. They participate in social activities in an effort to get to know other Calgarians. As well, they actively try to learn English as a second language in order to better understand the cultural norms of their new homeland and to adopt new values during their integration process.

In order to stand on their own two feet and contribute economically to their households, senior immigrants are even working in occupations with low pay and below the credentials that they acquired in their own countries.
Both the literature and Calgary’s immigrant seniors have identified the following issues as barriers to settlement, integration and positive aging. Some of the issues are common to all seniors, but they are intensified in the case of immigrant seniors.

“Segments of the aging population are struggling with basic issues crucial to their well-being. Among them, immigrants from different cultures are particularly vulnerable...being old could be a disadvantage in a ‘youth-oriented’ society and...being old and being a member of an ethnic minority group may further jeopardize one’s well-being.” (Lai and Chau, Feb. 2007)

It is clear that the issues are interwoven, often impacting upon one another.

General issues

➤ Immigrant and refugee seniors have no voice in policy planning and development. They lack knowledge of Canada’s political system and the skills required to present their concerns to the appropriate government representatives. In addition, they are not well connected and they lack the power to have input to decision making.

➤ They lack access to information that would assist them in getting their needs met.

➤ The unique issues of immigrant seniors are often not recognized by mainstream service providers.

➤ There is a lack of cultural competence/sensitivity amongst service providers.

➤ Intergenerational issues can affect the traditional role of immigrant seniors in the family. Younger generations tend to subscribe to the values and beliefs of their new country, whereas older generations typically hold onto traditional values. This can create conflicts and have an impact on self-esteem, health, family relationships and quality of life.

Language barriers

➤ Lack of English language skills is the primary barrier to communication, access to information, access to social services and recreational opportunities and to community engagement and integration.

➤ Immigrant seniors have noted the difficulty of learning a new language at an advanced age, especially if they are illiterate in their first language.

➤ Immigrant seniors often lack the ability to communicate with the very grandchildren for whom they are responsible while their own adult children work.

➤ Most English as a Second Language (ESL) classes are geared to younger immigrants, and neither the vocabulary nor the teaching style is suited to seniors. There is a need for an ESL curriculum specifically designed for immigrant seniors and delivered at an appropriate time and central location in conjunction with an opportunity for socialization. This will serve two purposes: language training and the development of social connections.
Income and economic security

“Economic insecurity is most severe for immigrant seniors who have been in Canada for less than 10 years. In fact, the older the age at immigration, the more likely one will live in poverty since one’s chances of being able to access public income support programs for seniors depend upon length of residency in the country.” (Carstairs and Keon, March 2007).

Income security is a complex issue that is affected by factors such as age at immigration, ethno-racial status and country of origin. “Whereas income security is not a panacea for all their problems, it is definitely a necessary condition for successful settlement and integration into Canadian life.” (Alternative Planning Group, 2008). The above study makes the point that more research is required on the impact of the 10-year residency requirement on immigrant seniors resulting in a lack of access to Old Age Security benefits during this period.

Many immigrant and refugee seniors have no choice but to live with their families because they have no way of supporting themselves, even though they value their independence.

Despite the fact that many immigrant seniors are confronting issues related to economic insecurity, they are making an economic contribution to their families, communities and society as a whole. This contribution should be acknowledged and facilitated to the benefit of all members of society. “We have a choice as a society: Either to buy into the myths that seniors will drain the health and pension systems, for example, or to take advantage of the reality that seniors can contribute to society.” (Judy Cutler, CARP in Carstairs and Keon, March 2007)

Employment

Foreign credentials are not recognized, making it difficult to find work in one’s area of expertise.

Both ageism and discrimination are barriers to employment for all seniors, and more so for immigrant seniors.

In addition, opportunities for work are limited because of the lack of English language skills.

Housing and retirement homes

The options for immigrant seniors are limited. They cannot live in subsidized housing for 10 years because of the current sponsorship arrangement and, following that, the wait lists are long (up to two years).

Affordable and accessible housing for immigrant seniors is basically unavailable; cost is a factor in that rents are high.

There are currently few seniors’ retirement or nursing homes in Calgary geared to the needs of its ethnocultural groups. (The Chinese care centre Wing Kei is one example.)
Transportation

➤ Access to public transportation can be impeded by language barriers and lack of information.

➤ Immigrant seniors of limited mobility must rely on Access Calgary and subject themselves to a rigorous application process (including a 15-page application form available only in English), a medical examination by a selected list of medical professionals and an interview which can only be conducted at one of six locations across the entire city. This process is then followed by a significant wait-time pending approval.

➤ Once approved, seniors can only use the Access Calgary service via a website or an automated calling system, which is available only in English. Customer service representatives are only available to assist with either of these systems between 8:30 a.m. and 4:30 p.m., Monday to Friday.

➤ Taxis in Calgary are costly, unreliable and even inaccessible during the day as a result of high demand.

Health

➤ It has been reported that the health of immigrant seniors declines after they spend time here due to the mental challenges and stress of resettlement.

➤ There is a lack of understanding by healthcare providers of the health issues that are specific to a cultural group (such as diabetes or heart disease).

➤ “Culturally-specific belief patterns about illness and health, attitudes about dependency and self-sufficiency, as well as language barriers, can impede or reduce access to health and long-term care, family support and community services. The Committee heard evidence about the difficulty that some care institutions can have in adapting to the different needs, illnesses and disabilities of immigrant seniors.” (Carstairs and Keon, March 2007)

➤ Many immigrant seniors use alternative medicines, some of which may react with pharmaceuticals, but they are reluctant to disclose their use.

➤ Pharmaceuticals are expensive and, as a result, out of reach for many immigrant seniors.

Social isolation

➤ Recent research on positive aging has shown that there is a relationship between social connectivity and longevity. Social isolation actually reduces one’s life span. (Buettner, 2008)

➤ Many immigrant seniors, particularly women, lack opportunities for socialization both within and outside their own communities because of household and childcare responsibilities.

➤ The lack of language skills and fear of the unknown make it difficult to venture out into the larger community and even into their own neighbourhoods.

Mental health and depression

➤ There is a stigma attached to mental health problems in many countries, so there is not only a lack of understanding of a service that is foreign to them but also a reluctance to seek help (at times when the stress of immigrating to a foreign land becomes too much to bear, for example.)

➤ Research has demonstrated that there is a correlation between depression and social isolation.
SCAN OF KEY ISSUES

Research has also shown that cultural values and beliefs, as well as cultural barriers related to access to health care, affect the mental health of immigrant seniors.

Many refugees suffer from post-traumatic stress syndrome because of their experiences, but specialized services are few.

**Lack of access to community support services**

- Space in existing long-term care facilities is limited.
- Both the lack of language skills and a preference for ethnic foods which are unavailable in existing facilities make living in a facility a difficult experience for many ethnic seniors.
- Many immigrant seniors are reluctant to have a stranger provide personal care services, especially in their homes.
- Culturally specific support services are generally inadequate. Only a few services are available, such as the Chopsticks on Wheels program for Chinese seniors. A program of this nature could benefit other cultures as well.
- There is often a lack of knowledge of disability support and, hence, a lack of access by immigrant seniors. The intersection of aging with disability is one that requires additional research to determine whether the two issues should have a common agenda or separate strategies.

- It is known that factors such as nutrition and fitness are related to positive aging and longevity, but immigrant seniors in Calgary lack access to educational programs because of the lack of language skills and translated materials. Many immigrant seniors have requested information on these topics.

**Caregiving**

- Family caregivers often suffer from burnout in their efforts to provide care to their senior family members while they themselves struggle to ‘make it’ in a new country.
- Caregivers external to an ethnocultural family often lack the cultural competence (and language skills) to deliver care in a culturally sensitive manner. One local model for training caregivers is the Caregiver Program for the Chinese Community, started by the Calgary Chinese Elderly Citizens’ Association (CCECA) and Calgary Family Services (CFS) in 2002. It is a program that trains Chinese-speaking caregivers to serve the community. Calgary Family Services has since trained other first-language caregivers as well, although it is reported that the training does not meet the current demand for caregiver services.

**Elder abuse**

- Elder abuse of immigrant seniors can be manifested in one or more of the following ways: physical, emotional, social and financial; sexual abuse, neglect or denial of civil rights.
- Elder abuse in immigrant families is typically a cultural taboo and is seen as shameful, so there is a reluctance to disclose that it is happening.
Although elder abuse can be found in all cultures, immigrant seniors (both male and female) may be particularly vulnerable when access to help and resources is restricted by language and economic barriers, as well as by a lack of knowledge and possible mistrust of the Canadian legal system. Recent studies on family violence against seniors and seniors as victims of crime (Statistics Canada, 2002 and Canadian Centre for Justice Statistics Profile Series, 2004 and 2005) do not recognize the special circumstances of immigrant and refugee seniors with respect to abuse.

Elder abuse can be a serious issue in refugee households, where trauma from previous experiences of terror and escape can exacerbate the stresses already felt by a family attempting to adapt to a new culture and lifestyle.

Safety and security

Immigrant seniors are concerned about safety in their homes as well as safety and security on the streets and in public places. They need information on matters such as safe banking, scams and telephone safety, safety devices, home security, road safety, signing of legal documents and contact numbers for emergency situations.

The above review of the issues confronting immigrant and refugee seniors does not add anything new to the discussion. Many studies have identified the issues and many studies are saying the same things about public policy being one of the barriers to integration of newcomers in Canada.

What is new, however, is the recognition that the barriers exist because a segment of the population is being omitted from the public policy dialogue altogether. Most recent studies and organizational initiatives have not considered the unique needs of immigrant and refugee seniors. A large and growing demographic is being left out in the way that gender was left out of policy discussions not that long ago.

This is the first time in Calgary that a co-ordinated effort to alleviate some of the policy barriers facing immigrant seniors has been attempted. Representatives of immigrant senior-serving agencies, together with individuals from other organizations in consultation with immigrant and refugee seniors themselves, are asking public policy developers to work with them. The task ahead is to determine mechanisms by which the needs of immigrant and refugee seniors can be included in the public policy development process, beginning in the earliest stages of knowledge exchange and issue identification.

Although research shows that visible minorities typically have lower incomes and poorer health and, therefore, are more vulnerable than other immigrants, all immigrant and refugee seniors experience many of the same challenges to integration and must be included in policy discussions.

However, the particular issues of priority to individual immigrant seniors vary with their personal circumstances, length of residency in Canada, English language skills, knowledge and education and the circumstances of immigration.

As the policy planning process evolves, it will be important to identify those issues which are currently the greatest barriers to settlement and integration to the majority of recently arrived immigrant and refugee seniors.
We live in a global society, and recent immigrants to Calgary are originating in countries that are themselves experiencing economic uncertainty, in addition to other forms of instability.

Right here in Canada, the policy environment at all levels of government has changed since the initiation of this project just over a year ago. There is now concern that the economic downturn will impact the funding of non-profit organizations, the very agencies that serve immigrant and refugee seniors.

As a result, the time is ripe for preparing a platform from which to launch a case for inclusiveness in social policy development.

We know from the statistics above that the number of immigrant seniors in the city is expected to grow. The change in immigration policy directed at facilitating the entry of skilled workers will further increase the number of immigrant seniors who will be sponsored by their families for re-unification purposes, as well as for child care and housekeeping assistance. The increased numbers alone will put pressure on both service providers and funders for new program development to meet growing service needs.

There are basically two problems related to existing policies for immigrant and refugee seniors:

1. There are a range of policy jurisdictions involved in caring about seniors (19 in Alberta alone, in addition to the National Seniors Council and a diversity of other Regional and Municipal agencies, according to a 2008 United Way of Calgary and Area Report). Collaboration between the policy jurisdictions to provide comprehensive support to immigrant and refugee seniors is currently lacking.

2. Immigrant and refugee seniors are disadvantaged by policy ‘mismatching’. Policies in areas of pension eligibility, geared to income housing, health care and other social policies, do not seem to be co-ordinated, leaving all seniors (particularly immigrant and refugee seniors) often in a confusing and difficult situation.
Since the current policy thrust with respect to immigration is integration, multicultural policy needs to be communicated to those translating it into action to make it understood, and it needs to be co-ordinated with other policies, such as health and immigration, through discussion with the affected parties (in this case, immigrant and refugee seniors). (Lock Kunz and Sykes, 2007)

At least two new government bodies are currently seeking input from seniors and senior serving organizations.

The National Seniors Council was created by the Federal Conservative Government in May 2008, to provide advice to the Minister of Human Resources and Social Development, the Minister of Health and the Secretary of State (for seniors) on “matters related to the health, well-being and quality of life of seniors,” both today and tomorrow. It is seeking input from “experts, seniors, organizations and groups that provide seniors programs and services, provincial/territorial advisory bodies on seniors and other relevant stakeholders and interested parties.” Immigrant and refugee seniors don’t appear to be on the radar at present, so this is one opportunity for a co-ordinated effort directed at increasing awareness of the specific issues confronting them.

Provincially, in May, 2008, Alberta Seniors and Community Supports established a Demographic Planning Commission to study Alberta’s aging population, with a focus on “exploring the shared roles that governments, communities, families and individuals should play in meeting the needs of future seniors (baby boomers).” However, the unique needs of immigrant and refugee seniors were not included in the Discussion Guide that formed the basis for the consultations that will have input to the new Aging Population Policy Framework. Neither are they noted in the final report of the Commission. Again, the Commission can be targeted as a focal point for raising the awareness of the challenges and barriers specific to aging immigrants and refugees.

In addition, Alberta Health and Wellness has abandoned its regional mode of operations and has adopted a more centralized approach to health services delivery through the new Alberta Health Services Board “to ensure the provincial health system is patient-focused and provides equitable access to all Albertans.” Although the needs of a growing aging population are acknowledged in its new Vision 2020 document, the unique needs of Alberta’s rapidly growing immigrant and refugee senior population are not. Again, they are not recognized in its new Continuing Care Strategy: Aging in the Right Place.
Alberta Health and Wellness and Alberta Seniors and Community Supports will be working collaboratively with the new Alberta Health Services Board to implement the strategy over a three-year period. There is a need for input to both Ministries to promote inclusiveness.

The newly formed Mental Health Commission of Canada, with its offices in Calgary, provides yet another opportunity. One of its mandates is to be a catalyst for the reform of mental health policies, and it is working on a national strategy to address mental illness. Given that mental illness is a problem experienced by immigrant and refugee seniors, their concerns should be included in the strategy.

These initiatives provide avenues for input on issues such as seniors’ support services, health, mental health and continuing care.
Many Canadian seniors’ advocacy groups, such as the Canadian Association of Retired Persons (CARP), cater to mainstream and well-off seniors and pre-seniors (baby boomers). They have resources and know how to leverage them. They are engaged in their communities and their voice is both solicited and heard. Issues relevant to their members, such as retirement, investments, pensions and insurance, dominate the dialogue.

Immigrant and refugee seniors, however, typically make large investments in their families through both actual financial donations and gifts and services such as childcare and housekeeping. Many also take care of members of their own community. They are contributing to their families and communities often at the expense of their own economic security and health.

Current sponsorship arrangements do not enable them to support themselves, making them dependent upon their sponsors, and the adult children typically sponsoring them sometimes discontinue their support, leaving their parents literally out in the cold.

Additional research to explore the needs of immigrant seniors is the key to arriving at creative solutions, but community dialogue must be a component of all studies. Immigrant seniors must have input to all decisions and policies, and programs must be inclusive and responsive to their voiced needs.

**Immigrant seniors as a policy concern**

The first step in the policy development process is to adopt the notion that immigrant and refugee seniors are a policy concern. The challenges can be overcome when the public, the service providers and the political leaders all realize that immigrant seniors must be on the public policy agenda and begin to work together to place them there.

It has been the intent of this paper to demonstrate that there is value added in bringing immigrant seniors to the table for inclusion in the dialogue.

It goes against common sense (given the projected growth of this demographic) and it violates the social justice principles of equality, justice and respect for diversity to deny immigrant seniors the opportunity for input and inclusion.
RECOMMENDED NEXT STEPS

Calgary’s immigrant and refugee seniors and immigrant seniors serving agencies have now begun to work together to reduce barriers to integration.

Some proposed next steps for continuing the process beyond the Forum are to:

➤ Review the Forum proceedings to identify issues of priority and any recommendations for action arising out of the Forum.

➤ Review the list of organizations concerned with cultural diversity, race relations and seniors to determine opportunities for partnering on new initiatives. There are also opportunities for partnering on national issues with organizations outside the immediate Calgary area. The Alternative Planning Group and the Immigrant Seniors Advocacy Network in Toronto, for example, have been working to advocate for better income security for immigrant seniors through their active support of Bill C-362, a private member’s bill to reduce the 10-year sponsorship period. They have solicited input from immigrant seniors and the organizations that serve them in Alberta.

➤ Proceed through the various stages of the policy-making cycle to advance the case for including the issues of immigrant and refugee seniors on the policy agenda (Appendix 1).

Many of the issues identified here are under provincial jurisdiction, and this is the best place to target issues such as health, continuing care and homecare, for example. It should be kept in mind that a collaborative approach to resolving issues has been recommended as the most effective.

As has already been pointed out, a co-ordinated strategy amongst municipal, provincial and federal governments to reduce policy barriers for immigrant and refugee seniors would yield the most effective and efficient long-term results for inclusiveness.

A clear commitment by all levels of government is required to encourage partnerships amongst communities and service providers, develop appropriate and adequate funding streams and establish clear policies, processes and protocols to move this forward.

The recently formed Calgary Connecting Seniors Cultural Council should play a pivotal role in defining and developing the strategy and assist as an expert advisory panel to oversee its planning and implementation.

Most importantly, however, what is required from the outset is a solid knowledge base with input from immigrant seniors themselves, and the political will to make a difference.
APPENDIX 1 –
THE POLICY-MAKING PROCESS

**Issue identification** – The prioritization and clarification of the key issues identified in this report and the selection of one or, at most, two for further study.

**Policy implementation** – Redistributing resources to implement the policy so that it can provide direction to changes in program delivery, for example.

**It is of primary importance to continue the dialogue with immigrant and refugee seniors themselves, to listen to their stories and solicit their input at this early stage of the process, as well as to work together with relevant non-governmental organizations (NGOs) and policy makers themselves.**

Policy analysis – Defining the policy options for the selected issue, the level of government to target and how to pursue the desired change.

Policy selection – Involving stakeholders (immigrant seniors, the agencies that serve them and funders) in the process of choosing a preferred policy option by analyzing the strengths, weaknesses, challenges and opportunities inherent in each.

Policy advocacy – Developing and implementing strategies to inform the appropriate level of government and to shape public perceptions to affect change. A change may or may not require legislation.

Policy adoption – A thorough understanding of the selected issue and the barriers faced by immigrant seniors in relation to it will be the basis of adoption of any policy. The relevant government body may be required to pass motions, have a vote or otherwise authorize the policy.

Policy evaluation – Monitoring the success of a policy related to specific outcomes. Evaluation is designed to measure the intended impact of a policy in resolving the specific issue. It is essential information for ongoing knowledge development in the relevant policy arenas.

Policy reformulation – The policy is revised as required to improve outcomes. The results of the evaluation, environmental changes, new information and changes in other policy areas all have input to the revision of existing policies.
REFERENCES


Chinese Canadian National Council, Toronto Chapter, on behalf of the Immigrant Seniors Advocacy Network (2008, May 8). Submission to the House of Commons Standing Committee on Human Resources, Social development and the status of persons with disabilities (HUMA) regarding Bill C-362, an act to amend the Old Age Security Act (residency requirement).


REFERENCES


REFERENCES


Resources, policy groups and research institutes

Alternative Planning Group (APG) http://www.cassa.on.ca/APG/

Calgary Chamber of Volunteer Organizations (CCVO) www.calgaryccvo.org

Canadian Association for the Fifty Plus (CARP) www.carp.ca

Canadian Council on Social Development (CCSD) www.ccsd.ca

Canadian Institutes of Health Research (CIHR) www.cihr-irsc.gc.ca

Canadian Policy Research Network (CPRN) www.cprn.org

Centre for Social Justice http://www.socialjustice.org/

Edmonton Seniors Coordinating Council (ESCC) http://www.seniorscouncil.net

Environment Canada. Taking action through public policy.
www.atl.gc.ec.ca/community/cap_taking_action_through_public_policy/capacity.html


National Seniors Council www.seniorscouncil.gc.ca

Public Health Agency of Canada (PHAC). Aging and Seniors.
www.phac-aspc.gc.ca/seniors-aines/nfa.cnv/infaguide9_e.htm

Public Policy Forum www.ppforum.ca


Wellesley Institute http://wellesleyinstitute.com/