



ASHTOR

Association of Spanish-speaking Seniors of the GTA

Hispanic Development Council

UNA MIRADA PROPIA

Current Conditions in the Community of Seniors of the GTA
November 16, 2009

Focus Groups
August and September
Toronto 2009

Facilitator: Rodrigo Briones
Methodology: Duberlis Ramos
Comment and Notes: Cinthya Narvaez

First Forum of Spanish-Speaking Seniors
"Participation and Community Leadership

November 16, 2009
Northern District Library (ND) 40 Orchard View Blvd - Toronto, ON M4R
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Introduction

Our organization ASHTOR dates back to the year 2002, when in the month of November of same year the first conference of Hispanic seniors was held with great participation of our community. At the conference, the audience recommended the creation of an entity representing the sector and special attention to the problem of housing.

When in the year 2003 ASHTOR was established, the organization had few means to develop its activities. However, with the support of the Hispanic development Council, ASHTOR was able to find a location where they could develop some organizational tasks.

Already in 2005 Ashton receives the first of five grants from the Federal Government through the program "New Horizons for Seniors" which, year after year has been supporting our efforts to organize the community of older adults. The first grant was an information project and mass education, which was followed by other projects that consistently and step by step each year developed our internal capacity and allowed us to increase our profile within the government and community.

In addition to the support already mentioned, ASHTOR has received two grants from the "Ontario Trillium Foundation for a research project on our area and another project which is already in progress, to develop leadership and aptitudes in the area of recreation in the northwest part of Toronto.

Furthermore, the organization LHNIN of the Government of Ontario has given us financial support for three symposia in the area of cancer, diabetes and Alzheimer's. We have recently applied for two grants to "New Horizons" to incorporate our seniors to the cyber-age; to replace equipment and renovate the headquarters, and LHIN to improve access and efficiency to the services offered to Hispanics seniors in the central area of our city.

In the year 2009, "New Horizons" approved our proposal to develop the leadership and Community involvement program, which is considered vital to advocate for the rights of our seniors and to otherwise mitigate the isolation, poverty and the critical housing situation Hispanic seniors are experiencing.

Here we are to add voices and to initiate an action plan that allows us, with transparent clarity, take action to discuss and outline future activities and consequently, be better prepared to face this "tsunami" that is coming in the next 10 years.

We will finish this journey to develop a map or a path for further action as well as a group of leaders whose level of interest and dedication will help us find the direction towards a more healthy and dignified living standards for the Hispanic population, its elderly and their families.

In preparation for this event, Ashton and the HRC conducted a series of consultations under the form of focus groups, which allowed us to take the pulse of the health of our community and provide participants of the First Forum of Spanish-speaking seniors a perspective of what we had achieved. The development of such work was possible by taking into account the investigations undertaken and the views of those who, as recipients or providers are an interested part of the development of this sector. We offer information on the methodology and results.

Alejandro Morales, Program Committee - ASHTOR

Methodology Presentation

The condition of elderly Hispanics in Canada is without any doubt a matter of concern and interest from many perspectives, among them the defense of the rights of the community, public policy matters, and of course the evolution of this very important group in the short, medium and long term.

The basis of this work, as expressed during the forum on older Latino-Hispanic, aims to provide participants with a perspective of the reality of the situation at the present time, as well as to provide an instrument for consultation to define an agenda for the work ASHTOR and the community will carry out in the future. The information has been formally studied at different historic intervals, and has been compared with the information obtained from focus groups during the last three months, as an up-to-day.

When we refer to concerns and interests from the seniors' perspective, it is understood that we have a general notion about the existence of some problems in the areas of housing and health, for example. We also suggest some specificity regarding what could be the elements that shape such problematic situations, such as, concern about the minimum salary or the pains and aches of cardiovascular disease, for example. On the other hand, as we have paradoxically made progress in research and knowledge, each day we realize that we still do not have all the tools that would enable us to ensure a complete conceptualization of the situation of older Hispanics in Toronto Canada. It is here then, that as a simple response to this situation, we've designed a straightforward and practical tool to define the basic questions which, are based on a series of focal groups and include a series of twelve key variables. This response was presented for discussion to the community of older adults around the city. So, in principle, we established a representative geographical dispersion with the purpose of updating information and the previous sampling of responses and comments provided by the participants regarding the current reality of the situation and those twelve issues that have arisen.

The details of this work which were presented to all participants derived from the perspective of the matters reviewed, which included 12 areas related to real issues. The selection was made in relation to topics that for the most part, had been the focus of several researches, and whose juxtaposition with the current reality allowed us to provide clear answers about the evolution of problems and its sub-themes during the last ten years or so.

The themes selected corresponded to the areas chosen by the team as being the most important ones, which was made as a result of the review of the literature. Furthermore, each focus group opened the possibility of inductively refine the selection or introduction of news themes that would enrich our work.

The basis of the information and the issues presented above, came primarily from studies of older Latino-Hispanic, Hispanic Development Council, 1994, 1995, ASHTOR 2007, the Alternative Planning Group 2009, and data obtained from Statistics Canada. The information that was presented through proposals and historical claims and about specific matters was put to discussion on the differences or similarities with the current situation. To illustrate the discussion, we raised the issue of the housing situation and the elderly in the nineties. If the situation "was such" then, what would the group's opinion be on the issue of housing today?

It would be pertinent to mention at this point that within the parameters of this study there are also other issues such as, the diversity of national and cultural origins and equity, besides the differences in power that exist in a community as diverse as ours.

It is also noted the participation of club members and others such as, "Personal Support Workers, community workers, and journalists who have contributed important information for the construction of this report. This is significant as it not only improves the reliability of the conclusions presented in this report, but also complements the other part of this work, which is the use of an inductive methodology that has allowed us to make technical improvements with every group consultation during the final collection of qualitative data in terms of variables and / or specific issues regarding its prevalence, priority or urgency.

The participating focus groups had no trouble understanding this simple methodology and overall participation was very active. Indeed, of the 101 participants, the level of intervention was excellent. Over ninety percent of them expressed ideas and opinions about each of the twelve areas of discussion. The work was divided into six focus groups, which were selected from different geographical areas of the city. This was central to getting a sample number representative of each geographical group and the specific differences that characterize each of them.

In short, the information provided here has been carefully collected and presented to ensure the participants at the forum would have in front of them the information that comes from the community and largely reflects the actual history of its participants and their own interpretation of the status of the Latino/Hispanic elderly in the Toronto area. In essence, this report is the raw materials from an informed and documented discussion, which, from a social research perspective can without a doubt be improved in the future. However, in the meantime it gives us a clear and simple basis of the current position.

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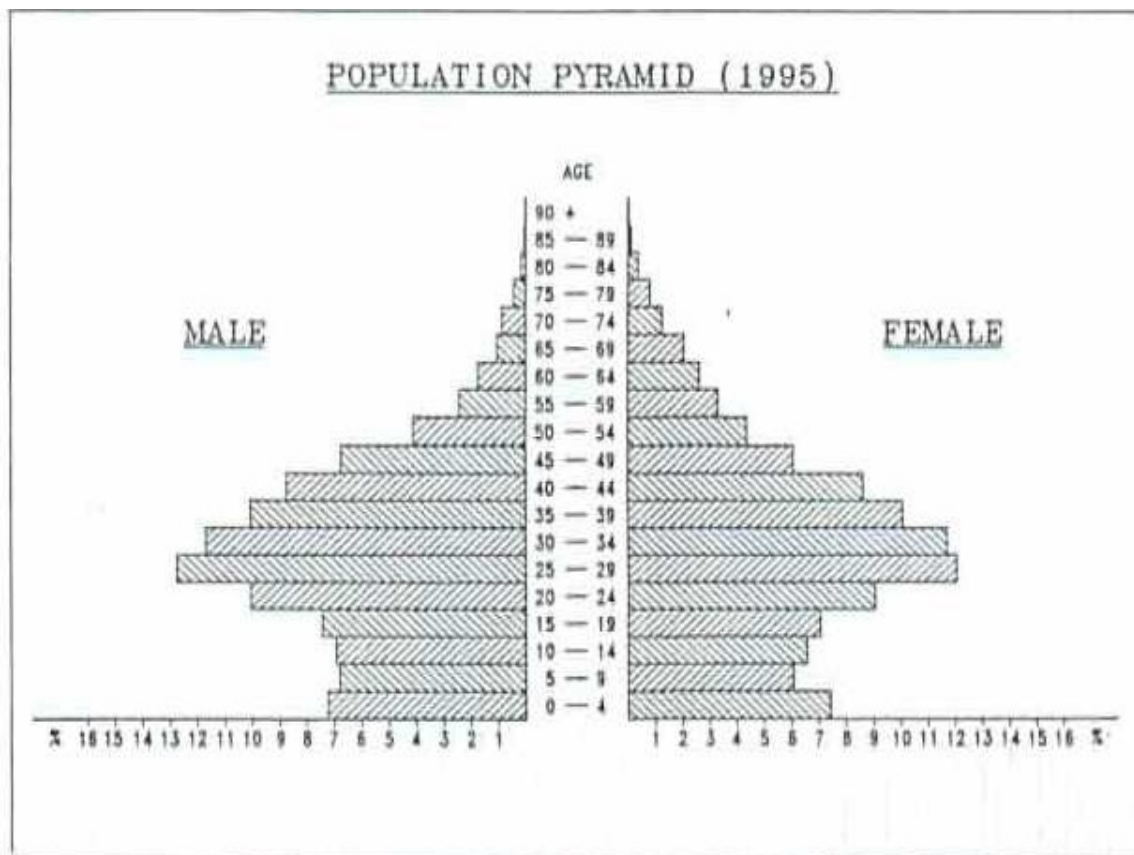
Post-Script. While we have captured a number of notions about the elderly Latino-Hispanic in Toronto regarding their individual and collective condition, it is also clear that from a broad social research perspective, there is still an enormous amount of work to do. Interestingly, the "scan" or survey presented here has provided us with a purpose to continue such work in the areas of adaptation and culture, physical and mental wellness, as an example. This will compliment our long-term vision about the processes of adaptation and needs of the Hispanic-Latino elderly. This would seem particularly important especially, as it concerns eighty year old persons, which in itself still is an area largely unknown. Indeed, because the Spanish speaking population is a relatively new and rapidly evolving phenomenon, working with the same statistics and demographics we had from the beginning represents a major challenge for us.

Brief reference to the demographic profile of Elderly Hispanics in the region of Toronto, Ontario

One of the most complete studies about the demographic profile of the Latino community was produced by the research group “Somos” (We Are) in 1995 as part of a study intended to provide an economic boost to the Latin American community in Ontario.

At that time “Somos ”concluded that 8.8% of the Hispanic community in what it is the city of Toronto were elderly. In absolute numerical terms this 9.869 meant that people were older than 55 years. Moreover, in relation to gender 10.76% of the female population and 7.04% of men were older than 55 years.

Pyramid of the Hispanic population 1995 “ Somos”



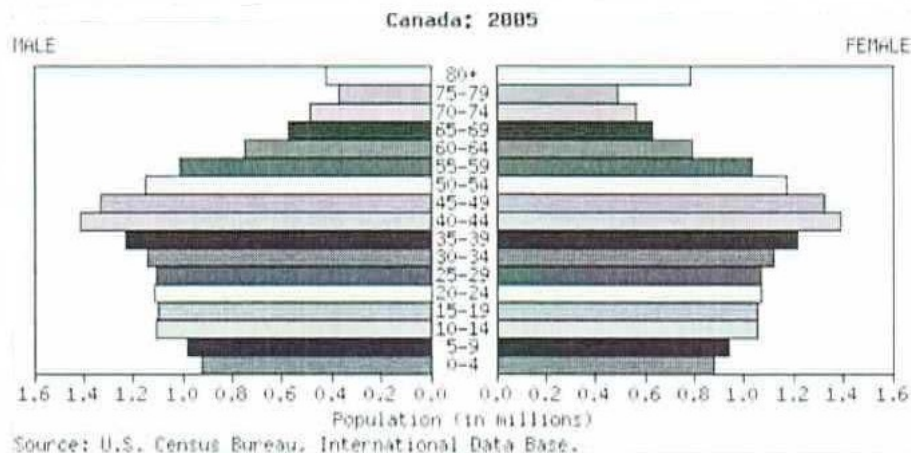
Hispanic Population by gender and age talking 1995, “Somos”

POPULATION BY AGE AND GENDER (1995)			
(PERCENTAGE)			
AGE GROUP	TOTAL	MALE	FEMALE
	100.00	100.00	100.00
0 - 4	7.36	7.28	7.44
5 - 9	6.49	6.88	6.04
10 - 14	6.78	6.97	6.56
15 - 19	7.26	7.42	7.07
20 - 24	9.66	10.08	9.18
25 - 29	12.44	12.77	12.06
30 - 34	11.72	11.70	11.72
35 - 39	10.04	10.03	10.04
40 - 44	8.78	8.84	8.69
45 - 49	6.47	6.80	6.10
50 - 54	4.23	4.15	4.31
55 - 59	2.85	2.47	3.28
60 - 64	2.26	1.88	2.68
65 - 69	1.65	1.19	2.15
70 - 74	1.01	0.80	1.24
75 - 79	0.59	0.37	0.82
80 - 84	0.29	0.20	0.39
85 - 89	0.13	0.09	0.16
90 - +	0.04	0.04	0.04

According to the 2006 census, in Toronto there were 12.900 adults over 55 years of age of Latin American origin, and this number corresponds to the 73,67% of the population of Ontario under the same category. With respect to gender, although it is certain we do not have the exact numbers, the census data between 1995 and 2005 indicates that the percentage of 80 years old males has increased since the year 2000 reducing the feminine superiority in the 55 years old category by one and two percentage points. We thus assumed the hypothesis that the situation for the Hispanic community entails the same characteristics that the general population.

2005 general population pyramid of Canada, Statistics Canada
 Canada Population Pyramid for 2005

Age and sex distribution for the year 2005:



Elderly Hispanics in Toronto 2005

2006 Census of Hispanic Seniors living in Toronto			
Ethnic Origin	Age 55 - 64	Age 65 -74	Age 74 +
Original from Central/South America	405	120	35
Argentinian	355	200	16
Brazilian	0	0	10
Chilean	55	35	165
Colombian	1080	345	85
Cuban	740	300	35
Dominican	35	0	35
Ecuadorian	1390	385	250
Guatemalan	350	50	75
Honduran	65	10	15
Paraguayan	35	20	0
Puerto Rican	315	15	85
Salvadorian	200	105	35
Venezuelan	125	45	10
Other Latin American	10	0	0
Other Hispanic	475	165	130
Porto Rican	10	0	0
Uruguayan	715	300	170
Venezuelan	295	105	120
Venezuelan	170	75	45
Total, Central or South American	595	230	145
Other	290	110	65
Hispanic	275	65	10
Total	7985	2680	1536
Total	12201		
Percent of Seniors from Toronto in all of Ontario	70.64%		

(Note: Statistics Canada indicates a total number of seniors of 12,900 for the same set of information).

Finally, we should consider the fact that Statistics Canada has produced an additional report in relation to the 2006 census which "corrected" shows a total Spanish speaking population in Canada of 730,000 people. According to this "fix" our calculations indicate that Toronto's older population of Spanish-speaking would exceed 25,000.

The details of this matter must be explored in the near future.

References

Smith-Castillo, Maria A. La Tercera Edad: Needs Assessment of the Spanish Speaking Seniors in Metropolitan Toronto. Hispanic Development Council, 1994. (Report) Somos. Alternative Planning Group. Citizenship Matters: Re-examining Income (In) Security of Immigrant Seniors, Wellesley Institute, 2009. (Report)



Results and Observations

1. Residence and Age in Canada from speaking Hispanic Elderly

- The community of Hispanic-speaking older adults has lived in Canada for more than 12 years. In short we can say that the older adult community is no longer a newcomer community.
- In some areas of the city, there is a stratum of newcomers, with an average of 5-8 years.
- Today the average age of seniors is more than seventy years old.

2. Gender and Commonalities of the Hispanic-speaking Elderly

- There is agreement that the majority of seniors are women.
- Most participants reported that definitely there are more women than men.
- Women show a more social attitude than men, especially, in clubs or at senior's meetings.
- It was confirmed that the life expectancy of women is higher than that of men.

3. Family relationships and support networks

- Family as a source of support, has lost its value, and is no longer considered the main source of help, especially, in the emotional and financial areas.
- Our seniors today find great support in clubs or at senior's meetings.
- Senior's groups play an emotional and social role similar to the support provided by the family.

4. Housing and Welfare

- Inadequate housing is a big problem for the community of the Hispanic community of older adults.
- The cost of housing, limited space and lack of security in government housing have put at risk the quality of life of older adults.

5. Income

- Most of the revenue the elderly get comes from the Canadian Pension Plan (CPP).
- Older adults who have lived in Canada for less than eight (8) years receive income from their own work, from a community center or in some cases their own children.
- In sum, one could say that although the vast majority of seniors have minimum income, there are still very vulnerable sectors within the community, with a lesser or equal income than 5% (estimated).

6. Language

- Not having adequate English skills has become a major barrier for Hispanic seniors to access information on programs and services that are available to them.
- Lack of English courses designed for seniors, particularly for Spanish-speaking people impede motivation and interest in learning the language.

7. Health

- Older adults rated their health as generally good, although they tend to experience some discomfort and aches and pains attributed to age.
- In the statement that "17% of older adults is affected by symptoms of depression (ASHTOR, 2007)." at least half of the participants felt that this numbers are not representatives of the reality.

8. Culture

- Culture is an important issue that has become a dilemma for the older Hispanic adult. This dilemma is a source of conflict for the elderly, whose culture of origin is different than the culture in which he lives, in this case the Canadian culture.
- Although there are disagreements on how to express this topic, the elderly faces the need and the challenge of maintaining their culture while assimilating the Canadian environment around them.

9. Recreation

- There is need to publicize recreational programs and at the same time increase the number of programs. Recreation is important in promoting friendships and prevent isolation.
- Physical access to recreational programs is a problem (buses, TTC, distance, slip in winter).
- There is also the need to assess in this context, our own language and culture.

10. Sexuality

- Sexuality is expressed as a topic of interest among the Hispanic elderly however, there is still much resistance to discuss this issue more clearly.
- There is lack of information by experts in the field

References:

- Association of Spanish Speaking Seniors of the GTA. *Hispanic Seniors' Needs Assessment*, 2007 (Report).
- Citizenship Matters: Re-examining Income (In) Security of Immigrant Seniors, Alternative Planning Group, 2009 (Report).
- Public Health Agency of Canada. *Canadian Guidelines for Sexual Health Education*, 2003.
- Smith-Castillo, Maria. *La Tercera Edad: Needs Assessment of the Spanish Speaking Seniors in Metropolitan Toronto*. Hispanic Development Council, 1994. (Report)



Appendix

1. Lista de Grupos Focales

Focus Group	No. de participantes	Date
Black Creek Community Health Centre 2202 Jane St. Unit 5 Toronto, ON M3M 1A4	25	August 17, 2009
Latino Canadian Community Centre 3028 Lawrence Avenue East Scarborough, ON M1P 2V5, Canada	10	August 26, 009
Davenport-Perth Neighbourhood 1900 Davenport Road Toronto, Ontario M6N 1B7	36	September 3, 2009
SEDE ASHTOR 326 Adelaide St. We. Suite 201 Toronto, ON M5V 1R3	8	September 3, 2009
SEDE ASHTOR 326 Adelaide St. We. Suite 201 Toronto, ON M5V 1R3 (Personal Support Workers)	5	September 11, 2009
Rexdale Community Health Centre 8 Taber Road Etobicoke, ON M9W 3A4	15	September 15, 2009
Key Informants	2	
Number Of Participants	101	

2. Glossary

Elderly or Senior:

Anyone over 55 years of age has been considered elderly in this work.

There are various definitions of age that constitute an adult, however we have considered as seniors, people 55 years or older.

Isolation:

Refers to the act of being or feeling alone in the environment the older adult lives in.

Culture:

Culture can be understood as a set of habits, ways, beliefs and manifestations that are constantly changing, and which depend on location, time and life stage of each individual.

Gender:

Gender is a term that refers to all human characteristics perceived as the distinction between men and women.

Support networks:

It refers to all persons or programs and services available to any adult.

Health:

According to the World Health Organization, "health is a state of complete physical, mental and social well being. Health means not only the absence of disease, but also the ability of each person to conform to a life system in full harmony with the environment (World Health Organization, 1946)."

Sexuality:

According to the Canadian Public Health Agency, "sexuality is the core aspect of human beings that evolves through life and encompasses concepts of sex, gender identities, roles, sexual orientation, eroticism, pleasure, intimacy and reproduction.

Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors (Canadian Public Health Agency, 2003).

Vulnerability:

The term vulnerability is defined as the characteristics by which a person is susceptible of physically or psychologically being injured or harmed.