



COMING of AGE

A Publication of the Saskatoon Council on Aging



Spotlight on Seniors

It wasn't easy finding a seat at the nail clinic, one of many events at the 2007 Spotlight on Seniors on October 3. Nearly 1,000 people attended Spotlight, which featured entertainment, exhibits and workshops throughout the day.

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President's Message

By Katherine Ash
President, Saskatoon Council on Aging

I hope everyone's holiday season was enjoyable. While it's natural to look forward right after the New Year, I'd like to look back a little and report on some of what's been happening in recent months at the Saskatoon Council on Aging.

Fall 2007 activities were kicked off with a Steak Night, which was well attended, a lot of fun and also a financial success. This event was followed quickly by our biggest event of the year: Spotlight on Seniors, in the spacious, new TCU addition. More than 900 people enjoyed the entertaining and informative displays and presentations, and the event was a success for us.

Our Caregiver Forum in October, on the theme of Health Care Directives, sparked discussion on the challenges and issues caregivers may face in the future.

Thanks to a Population Health grant, we now have a Communications Manager, Dale Worobec. Dale has taken over editing duties for *Coming of Age* from Jenni Morton, and he is also responsible for our new column in the *Saskatoon Sun*, called Prime of Life. Dale's work will help us meet the challenges of a growing population of seniors in and around Saskatoon, by promoting the SCOA and seniors issues.

Related to this, our advocacy committee will be working to provide meaningful input for both public discourse and decision-making on issues related to aging.

Sometimes, even positive changes are bittersweet – while gaining one staff member, we also bid a fond

farewell to our talented publication editor, Jenni Mortin. Jenni, who edited *Coming of Age* for more than 16 years, is planning many travel adventures in her retirement. On November 5, we held a tea to say Bon Voyage to Jenni. We wish her well, and thank her for contributing so much to the SCOA during her years here.

Also in November, I attended the first National Seniors Assembly. This group is still working to determine the best direction to take to represent seniors, but has decided to schedule its next meeting to coincide with the annual conference and meeting of the Canadian Association of Gerontology. It is hoped this will bring a 'consumer's perspective' to this research gathering. The energy throughout the working sessions of the National Seniors Assembly was high, so expect to hear more from us in the future.

Elliot Paus-Jenssen and I were invited to the Federal-Territorial Working Forum on Elder Abuse in Vancouver. Elliot was a presenter for the Advocacy session. This forum is part of the federal government's focus on abuse and poverty among seniors. The newly-formed National Seniors Council was a partner in these discussions. The National Seniors Council was set up to provide advice to government on the seniors issues it identifies as important.

So, the Saskatoon Council on Aging had a busy autumn and overall, a productive 2007. I look forward to more of the same in 2008, and would like to personally wish you all the best for the New Year.

Coming of Age

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Visit the Council online at www.scoa.ca

The hidden face of elder abuse

By Fr. Mark Miller, PhD

Over the years in my work as an ethicist within the Saskatoon Health Region and across Saskatchewan, I have spent a good deal of time with home health care providers.

Too often, I hear of Saskatchewan seniors who suffer physical, psychological, or financial abuse and neglect.

Most of us assume that parents and grandparents will find support and proper care in their senior years, especially when they are carrying the burdens of frailty, physical ailments or even cognitive impairment.

Yet at times, some seniors live in fear of their own children. They are yelled at, occasionally “imprisoned” in their own home (or bedroom), lack proper hygiene or clothing, and may be undernourished and cowed.

Indeed, in one situation where there were no children, an 80-year-old lost his wife. In his loneliness and diminishing ability to look after himself, he hired a woman to cook and clean.

Within a month she lived in the house; after another month they married; and soon she had total control of his finances and was in Hawaii to “rest up.” Home care workers providing assistance were horrified to see him restricted to one room. When they suggested he “do something,” he replied: “It’s o.k. I don’t want her to get mad at me.”

Later, I heard of a husband whose wife had a serious, chronic illness.

Home care provided top-notch service but became suspicious of bruises on her legs. She claimed to have fallen out of bed but later admitted that her husband hit her and yelled at her. “He just doesn’t understand my being so ill and helpless.”

Financial abuse is another common way in which seniors are victimized. We have all heard of scams aimed at seniors. What we do not hear is how often family

*Home care workers were
horrified to see him
restricted to one room.*

members steal from parents or control bank accounts for their own purposes – sometimes through power of attorney which legally permits the control of finances and assets.

It is frightening to see how trusting seniors can be and how vulnerable they often are.

And how varied the causes of abuse and neglect can be: Physical abuse may arise from caregiver exhaustion; emotional abuse may stem from ignorance (a son yelled at his mother, who has Alzheimer’s: “You’re just not trying;”) or maliciousness (“Stay in your room and do not make any noise or else you won’t get supper.”) Financial abuse is a total breach of trust.

I have long puzzled over these

issues and suspect I have glimpsed only the tip of the iceberg. There’s much to learn about the abuse and neglect of seniors: how it happens, why it’s not reported, and the role of factors like gender, dependency and disability.

But I do believe awareness is the first step towards addressing this enormous issue: knowledge helps seniors retain control over their lives, reducing the risk of abuse.

Seniors need to know their rights. Seniors and caregivers, in both home and institutional settings, need to know about prevention and intervention strategies. And community resources need to be in place to support these strategies.

In Saskatoon, the Council on Aging is working to address the major questions relating to the abuse of older persons.

But if the older adult is in immediate danger, call the local police, RCMP, or tribal police.

If you want to talk to a community agency about an older adult you suspect is being abused, call Crisis Intervention Services in Saskatoon at 933-6200.

You can also call the Health Information Line (1-877-800-0002), where a mental health nurse can talk to you about your concerns.

Father Mark Miller is an ethicist within the Saskatoon Health Region working out of St. Paul’s Hospital.

CAREGIVER FORUM A PLACE FOR INFORMATION, COMMUNITY

For caregivers, a day off isn't easy to find—the demands of caregiving, and other life and career demands, mean time is often scarce.

Yet, twice each year, in a project operated through the Saskatoon Council on Aging, caregivers have the chance to gather for support and to meet with others who face similar demands. They hear presentations, participate in group discussions, relieve stress through exercise and music therapy, and enjoy a day off. It's a popular event, with 65-70 people often in attendance.

The next forum is scheduled for May (exact date TBD). For more information, call 652-4411 or visit <http://caregive.sasktelwebsite.net/>.



Senior speaks out about preventing falls

By Shannon Boklaschuk

Dora Smythe's body hasn't been the same since she fell at her home three years ago.

Now the senior is speaking out about preventing falls and is raising awareness about mobility issues.

"My fall resulted in total loss of independence, a few weeks spent in the hospital and five months in rehabilitation at (Parkridge Centre), leaving me with permanent injuries – not to say how much I cost Saskatoon Health Region," Dora (not her real name) said.

Dora, who uses a wheelchair, was part of a group of seniors who gathered at Ilarion Residence on Louise Street to talk about falls and how they affect older adults. The event included information from nurse practitioner Lynda Smallwood, with Primary Health Centre South East, and a demonstrated fall with M.D. Ambulance responding.

Dora is concerned about crossing streets where there's a lot of traffic, uncontrolled crosswalks and no

ramp curbs off the sidewalk. That forces her to travel the street alongside vehicles.

"There has to be an understanding that even with mobility aids, our mobility is greatly restricted."

At the Ilarion Residence event, information was provided to seniors about personal risk factors associated with falling, such as climbing on furniture to reach something, taking more than four prescription medications daily, wearing shoes or slippers that are loose and fit poorly and doing very little physical activity. Tips were provided about fall-proofing homes, with suggestions such as installing a non-slip mat and grab bar in the bath area, using a sturdy step stool to reach shelves in the kitchen and keeping halls and stairways well-lit.

"All of us get older every day, and it sneaks up on you – the changes in your vision or the changes in your balance,"

Smallwood said.

According to Health Canada, about 30 per cent of community-dwelling Canadian seniors experience at least one fall each year, with falls accounting for 90 per cent of all hip fractures. The injuries usually result in hospitalization for several days.

Falls are also responsible for 40 per cent of admissions to nursing homes, and fall-related injuries to people 65 and older cost the Canadian health-care system more than \$3 billion annually.

Smallwood recommends seniors become more aware of their surroundings and ensure their homes are free of safety hazards. Citizens should also keep their sidewalks cleared, she said.

"The community as a whole is responsible for keeping the environment safe. We're not going to change the fact that we live in Saskatchewan, and we're going to have icy sidewalks."

Shannon Boklaschuk is the Corporate & Public Affairs Assistant, Saskatoon Health Region.

Saskatoon health region offers volunteer opportunities

It's the largest team of volunteers in Saskatoon—more than 3,100 volunteers and caregivers working in hospitals, long-term care facilities and in the community, making a difference in the lives of patients, residents and clients.

Yet, the needs are great and there are always opportunities to make a difference as a volunteer within the Saskatoon Health Region:

- If you like to drive—Deliver Meals on Wheels or take a client to a medical appointment.
- If you like to work in a health-care setting—Be an ambassador in a hospital, help with recreation

therapy programs in a long term facility, or help staff with a program for patients and residents.

- If you like to shop—Help a client with shopping for groceries or clothing.
- If you like to socialize—Make someone's day brighter by visiting with them, playing cards or writing a letter with them.

Experience the personal satisfaction, make new friends, develop new skills and make a difference. Volunteer today.

To find out more, please call 655-2026, or visit the Saskatoon Health Region's web site at www.saskatoonhealthregion.ca, or send email to: volunteerservices@saskatoonhealthregion.ca.

Free Crescent shuttle bus

The Crescent Shuttle is a free service connecting the Downtown, Riversdale and Broadway business districts. It replaces the old Flag-a-Ride service. No tickets or reservations—just catch the white bus at transit stops displaying the Crescent Shuttle sign. Tuesday-Friday from 9:50 am-2:45 pm, and Saturday from 8:50 am-1:50 pm. Call or visit Saskatoon Transit, City Hall or the Partnership for a full schedule.

Being *in motion* is good for your mental health

By Janet Barnes

We often think of being healthy as just our physical health, and neglect other important areas like our mental health. Unfortunately, it is our mental health that is often affected in winter when we spend a lot of time indoors, have less contact with other people, are exposed to less sunlight and are generally less active.

The great news is that you can improve your mental health during these long winter months by being physically active. Physical activity can improve your mental health because:

- Physical activity is often done with others, thereby increasing your social activity and interaction
- Connections to people in your community can improve as you increase your participation in groups

- As little as 10- 15 minutes of exercise every day can improve your mood and give you a feeling of wellbeing that lasts several hours
- It helps to reduce symptoms of depression
- It helps to manage and protect against stress and anxiety
- It can help you think better
- it helps improve self confidence
- It helps you sleep better
- Being in better shape improves the efficiency of the cardiovascular system (heart and lungs) so that when you get stressed or feel anxious, your body responds better.

Try some simple activities such as walking with a friend at your local mall, playing with your grandchildren, being active outside during daylight hours or being close to a window while being active indoors. Or better still, build

the activity into your lifestyle – remember, it only takes 30 minutes per day to experience the health benefits of physical activity!

For more information on becoming *in motion*, contact the *in motion* DOIT line (655-3648) or visit the *in motion* website to access the Older Adult Physical Activity and Healthy Eating Resource Guide for suggestions on physical activity opportunities available within Saskatoon. A copy of this guide is also available through the Resource Library at the Saskatoon Council on Aging. Remember to schedule time within your day to value yourself – both your body and your mind – and become physically active. **Get *in motion!* Do It for Life!**

Janet Barnes is Senior Recreation Therapist, Older Adult Community, *in motion*.



Will you move, and why?

By Bubs Coleman

To move or not to move—that is a major question many people face as they age.

Only you can choose the right answer. But choosing can be fun, interesting and challenging—unless the decision must be made for health reasons. Then, the choices may involve long-term care, a personal care home, or nursing assistance in your own home.

But assuming the choice is yours, here are some ideas to consider as you decide whether to move or stay put.

Should you move?

Here, the essential question is why. Consider the following:

- Have recent physical changes impacted your lifestyle? Are you still able to deal with your lawn and garden? Are stairs a prob-



lem? Is your bathroom easily accessible? Are you still driving to appointments, and to shop?

- Do you crave a simpler lifestyle, or want a different location?

- Are finances a worry?

- Have your personal circumstances changed? With the death of a partner, many people don't

want to be alone.

- Are you feeling pressure from family and friends?

Should you stay put?

- Can you adapt your housing to new circumstances?

- Can you afford the services that staying put might entail?

- How important is your neighborhood?

- Do you have pets?

Most importantly, be careful about making this major decision alone, or in haste. Your lawyer, bank manager, a business associate, or your minister will be able to offer neutral advice.

You could also consult family members, although with this approach emotions may intrude.

Moving

Obviously, moving is more complicated than staying put and the options, particularly in Saskatoon, are many. Briefly, they may be defined as public or private.

Options

Public options may be income assisted or subsidized. Some options for low- and middle-income seniors are available through the Saskatchewan Housing Corporation. These include Social Housing for Seniors, Life Lease Housing for Seniors, and Affordable Housing for Seniors. Seniors in some of these facilities are also eligible for support through Saskatchewan Assisted Living Services (SALS). More information is available from the Saskatoon Housing Authority, at 668-2700, or from Saskatchewan Housing Corporation, at 1-800-667-7567.

Private options mean residents are wholly responsible for expenses incurred. Accommodation and services will vary widely.

The options range from non-profit housing complexes, to assisted living facilities, to townhouses, condos and apartments.



Staying put

Those deciding to stay put can access a number of resources:

- Home Adaptations for Seniors Independence—Financial assistance for low-income seniors to adapt their homes for easier and safer performance of daily activities.

- Residential Rehabilitation Assistance Program—Financial assistance for low-income seniors for necessary home repairs.

For the two programs listed above, contact the Saskatchewan Housing Corporation at 1-800-667-7567.

Home care is another option, and provides support for people who may otherwise be in hospital or a long-term care facility. Need must be assessed. Contact the Saskatoon Health Region (CPAS) at 655-4346.

Finally, private agencies provide a variety of services to seniors. Call the Saskatoon Council on Aging, at 652-2255, for more information.

In addition to a lengthy career in journalism and working in the public service, Bubs Coleman was appointed to the National Advisory Council on Aging in 1999, and subsequently twice re-appointed.

Hearing aids go high tech

Sleek new devices improve on quality, comfort

By Ron & Jody Villeneuve

The average home computer now has more computing power than the first space ship that orbited the earth.

Hearing aids have also benefited from technology's forward march. Hearing aids even a few years old may still work, but manufacturers have made numerous improvements using technology that just wasn't available in the past. With the newest advances in science and technology, hearing aid makers are able to fit much more into smaller packages.

The result is a definite improvement in quality. One example is the squealing, or feedback, that was once a common problem in hearing aids. Today, that has been greatly reduced and one manufacturer, Starkey, claims to have virtually eliminated feedback in its devices. Feedback may not be entirely gone, but we have found it is now eliminated about 95 per

cent of the time.

Background noise used to be another common complaint, but most manufacturers now offer hearing aids that use directional microphones. A directional microphone can make speech easier to understand in noisy environments. Background noise is not completely eliminated, but is reduced to the point where meaningful conversation can still be had. Directional microphones help you focus on what is being said in front of you, while reducing ambient noise.

Today's top of-the-line hearing aids also come with new features to enhance comfort. For example, Starkey's top models incorporate wind reduction technology – especially important in windy Saskatchewan. Using the wind reduction feature, your hearing aid will automatically reduce the noise to enhance your comfort level. Another feature that can improve comfort is mechanical noise reduction. Whether you are using a blender, vacuum cleaner, table saw or power drill, your hearing aid will recognize

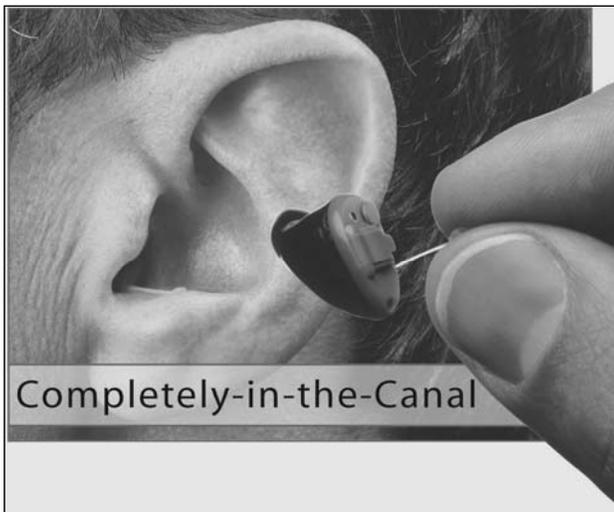
the mechanical noise and automatically reduce the discomfort of these loud sounds.



But perhaps the greatest improvement to hearing aids is the new ability to fine tune and adjust more settings than ever before, which allows each device to be tailored to its user's individual needs. Every individual – and their lifestyle – is different, and today's hearing aids can be configured to ensure the user is getting the most from their device.

With all of the technological improvements, there has never been a better time to upgrade a hearing aid or to try one for the very first time.

Ron and Jody Villeneuve own Quality Hearing Centre in Saskatoon. Quality Hearing Centre offers a no-risk, 45-day trial period on all hearing aids, and is located at #5-1640 33rd Street West. They can be reached by telephone at (306) 651-1606.



Completely-in-the-Canal

What is it that you *do*, exactly?

People sometimes ask me: “What is it that you *do*, exactly? I know you’re retired and all, but what do you *do*?” Well, if you must know . . .

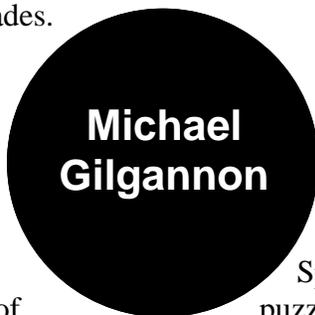
The Great Carpet Replacement Project in the basement of my house recently led to the unearthing of an important artifact of the early 1980s — one that your correspondent committed to with gusto at the time, but which had lain dormant, lo, these many years.

The icon in question is Rubik’s Cube, the nefarious puzzle with six colors and 43 quintillion wrong answers that landed under a jillion Christmas trees in 1982. When the craze fizzled after a year or so, it could be claimed that nobody got killed playing with a Cube, and that a few minds got expanded while experimenting first-hand with mathematical group theory. And one more thing: It was cheap.

While I got to be pretty good at cubing, women were never impressed. Worse, I never approached nerd-like speeds where it is routine for a Cube to go from a scrambled mess to a solved state in less than 30 sec-

onds. The world record, set last year, is 9.86 seconds.

Picking up Erno Rubik’s diabolical device again recently, I trusted my fingers to remember the ancient formulas, because my brain sure didn’t. Alas, a dead end after only one face was solved. Practice (and the internet) came to the rescue, and now I can add one more useless and revived pastime to a list that has gotten longer with the decades.



**Michael
Gilgannon**

Speak-
ing of puzzles,
something else that I do on occasion is buy stuff that has to be put together. (Don’t we all?)

“Some assembly required,” said the Sears catalogue of the futon/couch/bed thingy that we were thinking of buying for the marginal comfort of the occasional wayfarer at our house. In plainspeak, “some assembly required” means: “Set aside an afternoon because this thing is in a whole bunch of pieces and the directions are badly mis-

translated from French, and the drawings are done by the same guy who can etch the Lord’s Prayer on a grain of rice.”

First off, there was a slight mixup in the concept of left and right. What is the right side of a couch, anyway? Is to your right as you sit on it or as you stand looking at it? The printed directions and the markings on the parts couldn’t quite reach a consensus on this issue, so I guessed one way and of course was wrong.

Soon after it became clear that “some” assembly meant “a lot,” my wife cleared out, claiming the need to do Christmas shopping. (It was October.) That left me and the cats to puzzle out the futon fiasco. Before long, another hitch developed—a missing nut and bolt, remedied by a trip to the Co-op and a 10 minute wait in line for 12 cents worth of parts. Turns out the cats had the originals all along, because that’s what they were batting around the kitchen when I got back.

So those are two things that I do. Now it’s time for a nap.

Michael Gilgannon is a retired newspaper writer and editor, and lives in Saskatoon.

News & Upcoming Events

Art and photography classes

Basic Drawing - Jan. 18-March 28

10 weeks, \$110, register by Jan. 15.

Water Colour - Jan. 21-April 7

10 weeks, \$110, register by Jan. 16.

Photography - Feb. 5 - March 25

8 weeks, \$90, register by Jan. 28.

Beginner computer lessons

Take the mystery out of using a com-

puter. Call for further information.

Drop-in program for older adults

Third Wednesday of every month, from 1:00 p.m. to 3:00 p.m. at the SCOA Resource Centre. Upcoming programs: Valentine party (Feb. 20), Living with back pain (April 16). Free. Refreshments provided. Call for full schedule.

Free blood pressure clinic

First Tuesday of every month at the SCOA Resource Centre. Clinic hours from 9:00 a.m. to 3:00 p.m.

Call 652-2255 for more information on these and other programs. The Saskatoon Council on Aging is located at 301-506 25th Street East.