IMMIGRANT SENIORS
SERVICE USE AND NEEDS

Needs Assessment Survey Report
Toronto 2007

Survey Conducted for:
Seniors Connecting Seniors Project
St Stephen’s Community House

Survey Conducted by
Access Alliance Multicultural Health and Community Services
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1. Executive Summary

St Stephen’s Community House provides a variety of services for immigrant seniors. This needs assessment survey of immigrant seniors was carried out as part of the Seniors Connecting Seniors project of St. Stephen’s Community House. The survey was conducted in partnership with the Research Department of Access Alliance Multicultural Health and Community Services.

The survey was collaboratively designed by Access Alliance with input from ‘senior ambassadors’ from St Stephen’s Community House. The survey comprised of 25 close-ended questions and one open ended question. The survey targeted Chinese, Korean and Portuguese communities (reflective of three main client communities at St Stephen’s Community House) and was translated into Korean, Portuguese, Mandarin and Cantonese. The survey was administered by ‘senior ambassadors’ from St. Stephen’s Community House who were asked to survey seniors from their community who are clients of St. Stephen’s Community House services as well as those that have never used its services. Access Alliance analyzed the survey data (using Excel and SPSS software), and prepared this report.

A total of 190 surveys were collected, 59 (31%) in Chinese, 82 (43.2%) in Korean, and 49 (25.8%) in Portuguese. Of this, 67.5% of respondents were women. About half of respondents (48.4%) were clients of St. Stephen’s. The average age of the respondents was 72 years. In the survey, 40% of respondents indicated that they live alone. The percentage of female seniors living alone is almost double that of male seniors (48.5% vs 25%).

Findings from this needs assessment survey indicate that service use and service needs for immigrant seniors vary significantly by ethnicity and length of stay in Canada and to some extent by gender. While a wider, random-sampled survey is required to establish the generalizability of these findings, the results from this survey provide an important snapshot of the service use and needs of immigrant seniors.

Almost all Portuguese respondents (97.8%) have lived in Canada for more than 20 years and thus appear to have lower service utilization as well as lower service need compared to Chinese and Korean group. Most tend to live downtown and travel less than 30 minutes to get to services. The most common service that Portuguese seniors use is financial services (32.7%). In terms of service needs, exercise programs and drop-in service were ranked high by Portuguese seniors along with language services.

In contrast, only 42% of Chinese respondents and 36% of Korean respondents have been in Canada for 20 years or more. About 16% of Chinese and Korean seniors indicated that they arrived less than 5 years ago. A larger percentage of Korean respondents appear to be living alone (48.8% compared to 40.3% for Portuguese seniors and 28.8% for Chinese seniors). Many Korean seniors tend to live further from downtown and about 25% travel more than 1 hour to get to services (compared to 13.6% for Chinese group and 2% for Portuguese group). While service use among Korean seniors is currently low, the demand for services appears to very high among this group. The top three service needs that Korean seniors listed include interpretation/translation services (62%), Drop in (56.1%), and arts program (54.9%). Korean respondents indicated that the key barriers to accessing services were that programs not offered in preferred language (58.5%) and lack of knowledge about service availability (48.4%).
Responses from Chinese group indicate that Chinese seniors are active users of services (only 8% indicated that they are not using services). Chinese seniors appear to be utilizing a wide range of services including arts program (49.2%), language service (39%), counseling (32.2%) and exercise program (31%). Computer training appears to be a key area of unmet service need for Chinese seniors.

There appears to be no significant gender differences in terms of service use, except for arts programs in which 36.3% of female seniors indicated that they use arts services compared to only 16.4% senior male. Gender differences were more pronounced in terms of service needs. A greater percentage of women want arts programs (39.5% vs 29.5%), nutrition services (9.7% vs 1.2%), drop-in services (36.3% vs 21.3%) and translation services (37.1% vs 26.2%). A larger percentage of female immigrant seniors appear to be living alone compared to male immigrant seniors (48.5% compared to 25%). Also, female immigrant seniors are more likely to take public transportation compared to their male counterparts (71% vs 50.8%).

Survey results indicate that, in general, the main barriers to accessing services were lack of knowledge about the availability of programs and the lack of programs in respondents’ preferred language. The main challenge to service access and utilization at St. Stephen’s is limited space; Korean seniors are particularly concerned about limited space at St Stephen’s and also stressed the need for including lunch.

Some survey respondents had weak social support networks and are at greater risk of isolation. However, St. Stephen’s Community House provides a valuable space for connecting seniors with each other, and strengthening social networks. The majority of clients (85.9%) agreed that the main benefit to using services at St. Stephen’s is building a network of friends. Similarly, most clients had heard of St. Stephen’s through their friends and relatives (58.7%). Service access and utilization for immigrant seniors can be enhanced through more proactive outreach strategies (including peer based outreach programs like the Seniors Connecting Seniors program and making information about services available more widely) and making services more reflective of varying needs that different immigrant senior groups have.
2. BACKGROUND

The Seniors Ambassadors program is a volunteer outreach program run by St. Stephen’s Community House. The program has about 15 volunteers who are St. Stephen’s Ambassadors, and participate in outreach activities to other seniors in their communities. Chinese, Korean and Portuguese seniors are involved in this program.

This needs assessment survey was conducted in 2007 as part of the Seniors Connecting Seniors program. St Stephen’s Community House partnered with the research department at Access Alliance to design and conduct this needs assessment survey with its current as well as potential immigrant senior clients from Chinese, Korean and Portuguese community. Following two half-day training in survey methods, ‘senior ambassadors’ collected 190 surveys over the summer of 2007. This report summarizes the key findings from this survey. Through wider, random-sampled study is required to establish the generalizability of the findings, the results from this survey provide valuable insights about service access, use and needs of immigrant seniors.

3. METHODOLOGY

This study was a product of a unique collaboration between St Stephen’s Community House and the research department of Access Alliance. Access Alliance designed the survey with close input from staff and senior ambassadors from Stephen’s Community House. Access Alliance delivered two half-day trainings for the senior ambassadors that would be involved in helping design and conduct the survey: first training focused on survey design and the second one on survey administration. Following the training on survey design on the first training, senior ambassadors were asked to provide feedback on the issues to be covered in the survey as well as input on ways to frame the survey questions. In addition to making demographic, service use and service needs questions more reflective of their communities, senior ambassadors highlighted the need to cover key issues in the survey including issues around isolated seniors, distance and transportation issues for current program participants, and outreach strategies that would reach a broad cross-section of seniors from Korean, Chinese and Portuguese communities.

Based on this input, Access Alliance research staff then developed a 26-question survey (25 close ended and 1 open ended question). The survey was translated into Cantonese, Mandarin, Korean and Portuguese. The second half of the training focused on survey administration; during the training senior ambassadors did mock survey data collection with the translated surveys. The surveys were further fine tuned based on the input from this second day of training. The senior ambassadors then went out into their communities and administered the survey with clients and non-clients of St Stephen’s Community House. A total of 190 surveys were collected over the summer of 2007. The data was entered into Excel as well as SPSS for analysis. Access Alliance staff analyzed the data and prepared this report.
4. FINDINGS AND DISCUSSION

4.1 Demographic Profile

Of the 190 survey respondents, 59 (31%) were Chinese, 82 (43.2%) Korean, and 49 (25.8%) were Portuguese. About half of respondents (48.4%) were clients of St. Stephen’s. Women made up the majority (65.3%) of survey respondents.

Age

The average age of survey respondents was 72 years. Most respondents were between 65 and 80, but there were 22 respondents (12%) who were under 65 (the youngest respondent was 55), and 33 respondents (18%) who were over 80 years old.
Figure 3. Place of residence of respondents.

Place of Residence
The majority of respondents reside in core region of downtown Toronto with 38.4% residing within 10 minute walking distance from St Stephen’s Community House (in M5T, M5G, M6H and M6J postal code area). A cluster of respondents (about 15) reside in M4P and M2N postal code area. The rest of the respondents are spread all across Toronto with a few respondents living as far as Steeles in the North and Mississauga area to the West.

Length of time in Canada
Length of time in Canada is an important demographic indicator for service provision since the type of settlement support needed can vary significantly based on how long seniors have been in Canada. A little over half of survey respondents (52.6%) have been in Canada for more than 20 years. There was considerable variation in the length of residence in Canada for the three communities who participated in this study. Almost all Portuguese survey respondents (97.8%) have been in Canada for more than 20 years. However, only 36.6% of Korean and 42.4% of Chinese respondents have lived in Canada for more than 20 years.
The majority of St Stephen’s Community House clients (70.1%) have been in Canada for 15 years or longer. Approximately 10% of the respondents (8 Chinese and 12 Korean) arrived in Canada less than 2 years ago. Interestingly, 35% of these are already using services at St Stephen’s indicating that St Stephen’s is able to reach very recently arrived immigrant seniors.

**Income**

About 75% of the survey respondents (n=142) stated that they receive income from the Canada Pension Plan (CPP) and 21% report receiving some income from Guaranteed Income Supplements. It is interesting to note that while only 11.5% of survey respondents were under 65, a quarter (25%) of respondents did not receive CPP. This might be accounted for in the fact that many respondents are not eligible for CPP because they have arrived in Canada when they were over 55.
Only 20% of respondents (n=38) receive financial support from their children. About 4% of respondents receive a pension from another country, 4% are employed, and smaller numbers receive OSDP and income from investments.

**Number of people in household**

One of the key findings from this study is that 40.5% of survey respondents indicated that they live alone. The percentage of female seniors living alone is almost double that of male seniors (48.5% vs 25%). Further, 39.5% indicated that they live with one other person. This finding highlights that a large percentage of seniors (clients or potential clients of St Stephen's) are either living alone or with only one other person and are thus at risk of facing social isolation and all the social and health implications associated with being isolated and not having stable social support. Particular attention needs to be paid to the large number of female seniors living alone.

![Figure 6. Number of People in Household](image)

Interestingly, Chinese survey respondents were less likely to be living alone, with only 28.8% reporting that they live on their own; 35.7% of Chinese seniors reported that they have 3 or more people in their household. Korean survey respondents were most likely to be living by themselves, with 48.8% living alone, and Portuguese survey respondents were similar to the average for the whole survey.
4.2 Current Service Utilization
Almost 75% of survey respondents indicate that they currently use some form of community services. Rates of usage of community services differed among the 3 communities. Of respondents who filled out the Chinese survey, only 5 (8.5%) did not use community services. However, for Korean and Portuguese respondents, 27 (32.9%) and 17 (32.7%) respectively did not use community services. These numbers probably reflect the reach of the Ambassadors who recruited survey participants, and whether they were able to reach isolated seniors and non-service users.

Kinds of current service usage
Survey respondents use a wide range of services from community organizations. The category with the highest score was arts programming such as interest classes, singing, dancing and cooking, which 29.5% of respondents currently use. Exercise programs (such as fitness, tai chi and yoga) ranked second with 21.6% using such service. Other services that respondents use include: language programs (15.8%); support with finances (14.7%); counseling services (12.6%); translation and interpretation services (9.5%); computer and internet training (6.8%); and drop-in program (5.8%). Homecare, personal care and nutrition programs were used less than 5%.

Survey results indicate that there are interesting variations in service use based on ethnicity and length of stay in Canada. For example, none of the Portuguese respondents, the majority of whom have been in Canada for over 20 years, indicated that they use language or arts programs and only 2% said they use computer services. In contrast, 39% of the Chinese respondents mentioned that they use language programs. Interestingly, only a small percentage (8.5%) of the Korean group said they use language services. In terms of arts program, 49.2% and 32.9% of the Chinese and Korean seniors respectively mentioned that they use arts program. On the other hand 32.7% of Portuguese seniors surveyed use financial services while only 20.3% of Chinese use this service; none of the Korean respondents indicated that they use financial
services. None of the Korean seniors surveyed use counseling services either, compared to 32.2% of the Chinese seniors. Only 10.4% of the Portuguese use counseling service.

Survey results suggest that, in general, language and computer training are rarely used by those who have been in the country for over 20 years (8% and 2%, respectively). On the other hand, nutritional services, homecare support, and personal support services are only used by those who have lived in Canada for more than 10 years.

There appears to be no significant gender differences in terms of service use, except for arts programs in which 36.3% of female seniors indicated that they use arts services compared to only 16.4% senior male.

**Frequency of service usage**
Most respondents who use community services are frequent users. 31% of survey respondents use community services 1-3 times per week. About 10% use community services more than 4 times per week; this number probably includes respondents who are enrolled in LINC classes and attend the same program every day. And 15.2% of respondents attend community programs 1-3 times per month.

**4.3 Service Needs**
This needs assessment survey produced interesting findings about service needs among immigrant seniors. Some valuable insights can be drawn about unmet needs by comparing current service utilization and service needs. First, while over 25% stated that they are currently not using any services, only 7% mentioned that they have no
service need. This implies that a large percentage of seniors who are currently not using any services have unmet service needs. In all categories, service need is higher than service utilization which suggests that service delivery could be increased in each of the categories.

Arts programming ranked highest both in terms of service utilization (29.5%) and service needs (37.9%). This suggests that the need for arts programs for immigrant seniors is being met in large part, but could be further enhanced. Similar conclusion can be drawn for exercise, language programs, and support with finances as these programs ranked second, third, and fourth in terms of service utilization (21.6%, 15.8% and 14.8% respectively) and the need for these three services was roughly 10% higher.

The most striking difference in terms of service use and service needs appears to be in drop-in programs and translation services and computer/internet training. While only 5.8% mentioned that they are using drop-in service, 31.6% reported that they needed this service (a six fold difference). Along the same line, 33.2% of respondents stated that they require interpretation/translation services while only 9.5% mentioned that they were using such services. Over 20% of respondents indicated that they need computer/internet training program while only 6.8% are currently using this service. These findings suggest that there is a pressing need for agencies service immigrant seniors to substantially increase these three services.

One area that deserves closer attention is counseling services. The fact that one fifth of the respondents mentioned that they need counseling services (compared to only 12% using such service) suggests mental health issues are of concern of immigrant seniors and may not be adequately addressed. There is also possibility that respondents under-reported the utilization and need for counseling services because of
the stigma associated with talking about mental health issues and counseling services. Compared to other groups, Chinese seniors ranked counseling services higher in terms of use (32.2%) as well as need (27.1%). A more in-depth qualitative study is required to better understand mental health issues that immigrant seniors face.

Significant variations were observed in terms of service needs (and service use) based on ethnicity, gender and length of time in Canada. Careful consideration of these variations can contribute to increasing access and utilization of services.

While almost 35% of Korean seniors respondents (similar to Portuguese respondents) indicated that they are currently not using any services, all Korean respondents ticked off at least one service need. This indicates that there is a high percentage of unmet service need in the Korean group. Korean seniors expressed a strong need for interpretation services, drop-in program and arts services. For example, 62.2% of Korean seniors surveyed indicated that they needed interpretation services compared to 20% for Chinese respondents. It is interesting to note that although the percentage of Chinese respondents who are recent immigrants was similar to that for Korean respondents, the need for interpretation services was 3 times higher for Korean seniors. Only 1 Portuguese respondent checked off the need for interpretation services. In terms of drop-in programs, 56.1% of Korean seniors surveyed indicated that need this service (compared to 20.4% of Chinese and 6.8% of Portuguese seniors respondents). Similarly, 54.9% of Korean seniors indicated that they needed art service program (compared to 31.9% of the Chinese, and only 8.2% of the Portuguese).

Only about 8% of Chinese respondents indicated that they are currently not using any service. Computer training and exercise programs were ranked higher by Chinese seniors in terms of service need than the other two groups. 39% of Chinese seniors surveyed indicated that they need exercise service program (compared to 25.6% of Korean and 20.4% of Portuguese seniors). Similarly, computer training program is needed by 30.5% Chinese and 19.5% of Korean seniors respectively but only by 10.2% of the Portuguese group.

Since most of Portuguese respondents have been in Canada for 20 years or longer, their need for services appears to much lower than the other two groups; the service needs for Portuguese seniors also appear to be quite different than the other two groups. About 35% of Portuguese respondents reported that they are currently not using any services while roughly 19% did not put any response in terms of service needs. Interestingly, while only 1 Portuguese respondent (2%) noted the need for interpretation/translation services, 20.4% of Portuguese respondents indicated that they require language services (compared to 19.5% and 18.6% percent for Korean and Chinese respectively). This suggests that Portuguese seniors (even those who have been here for more than 20 years) are more likely than Chinese or Korean seniors to take English (or French) language classes rather than use interpretation services.

Service needs also varied substantially by gender. A greater percentage of women want arts programs (39.5% vs 29.5%), nutrition services (9.7% vs 1.2%), drop-in services (36.3% vs 21.3%) and translation services (37.1% vs 26.2%).

Using the “other” category, respondents wrote in various other specific service needs. Language specific services were the most important area that respondents wrote in;
six respondents wrote that they wanted programs in their own languages. Four Korean respondents wrote that they needed dance programs; others said ping pong, friendly visiting services, and medical escort. Several respondents were not interested in community services and wrote their reasons for not being interested, including family commitments and only being interested in going to church.

4.4 Travel time
The survey asked seniors about their travel-time to community services. Among those who use services, more than half of the respondents (56.1%) travel less than 30 minutes to get to services. However, there were some notable differences among the three groups. Almost all of the Portuguese respondents (94.2%) who use services travel less than 30 minutes to get to services with almost half of them traveling less than 10 minutes. It appears that Korean seniors travel longer distance to get to services, almost one fourth of them traveling more than one hour to get to services.

<table>
<thead>
<tr>
<th>Travel Time</th>
<th>% of total survey</th>
<th>% Chinese</th>
<th>% Korean</th>
<th>% Portuguese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 10 minutes</td>
<td>13.2%</td>
<td>13.6%</td>
<td>1.2%</td>
<td>32.7%</td>
</tr>
<tr>
<td>10-30 minutes</td>
<td>37.4%</td>
<td>37.3%</td>
<td>40.2%</td>
<td>32.7%</td>
</tr>
<tr>
<td>30 to 60 minutes</td>
<td>24.2%</td>
<td>30.5%</td>
<td>32.9%</td>
<td>2.0%</td>
</tr>
<tr>
<td>1-2 hours</td>
<td>13.2%</td>
<td>11.9%</td>
<td>20.7%</td>
<td>2.0%</td>
</tr>
<tr>
<td>2 hours or more</td>
<td>2.1%</td>
<td>1.7%</td>
<td>3.7%</td>
<td>--</td>
</tr>
<tr>
<td>Don’t use community services or no answer</td>
<td>10.0%</td>
<td>3.4%</td>
<td>1.2%</td>
<td>32.7%</td>
</tr>
</tbody>
</table>

Reasons for traveling long distances
Because St. Stephen’s staff members were aware that some clients are traveling long distances to receive services at the downtown location, the survey asked respondents for their reasons. This was only aimed at respondents who were traveling over 30 minutes to get to St. Stephen’s.

On average, the most common reasons for traveling a long distance to attend programs are the lack of knowledge of closer programs and programs that are language-specific. These 2 issues were, by far, the top reasons for Korean clients with almost 70% citing that they travel far to get to programs that are offered in their preferred language. However, respondents on the Chinese-language survey identified friends as the number one reason for traveling far distances to attend programs, while the Portuguese respondents said that there were no closer programs to home.
Mode of Transportation
More Chinese respondents walked (37.3%) compared to the Korean and Portuguese groups (8.5%, 8.2%, respectively). Also, 36.7% of the Portuguese drive themselves while none of the Chinese and only 1 of the Korean respondents drive themselves. Men are more likely to drive themselves (21.3% vs 4.8%) or walk (23% vs 15.3%). Women are more likely to take public transportation (71% vs 50.8%). Curiously, those who live alone are less likely to drive themselves to the services (2.6% vs 17.3%) when compared to those who live with one other person.

4.5 Barriers to using current services
An important question in the survey was about barriers that seniors face in accessing services. The most common barrier reported by all groups was lack of knowledge about available services (34.2%). For Korean survey respondents, not having programs in their preferred language appear to be the biggest barrier to accessing services; 58.5% of Korean respondents indicated this as a barrier compared to 13.6% of Chinese respondents and 4.1% of Portuguese respondents.
While Korean and Chinese respondents appear to experience largely service-related barriers such as the language of programs, Portuguese respondents appear to experience personal barriers such as being unable to travel to programs and inadequate childcare for grandchildren, which prevents their access to programs.

About 13 respondents (6.8%) wrote in that health and mobility problems were the main barrier to their access of community services. Seven others said that they had no interest in accessing community services, and 3 respondents said that financial difficulties prevent them from access services.

4.6 Isolation and social support
Isolation is an issue that came up throughout the survey. Respondents talked about loneliness, the need for friends, and not having enough support. One indicator of social isolation is not having social support networks, which include family, friends and other individuals and institutions that people feel attached to.

Social support and social networks
The survey asked respondents who they would turn to if they need help with a non-emergency problem such as a health problem, family problem or personal problem.

As expected, most respondents (54.2%) said they would turn to a family member, followed by respondents who would turn to a spouse or partner (37.9%). That spouse ranked lower in this category is partly due to the fact that almost half of the seniors live alone.

Because this survey reached individuals who were already known to the senior ambassadors, there is a built-in bias since the respondents are probably not entirely
isolated. The survey most likely reached individuals who had some connection with community and family already.

The survey also asked how often individuals saw their friends and family in an average week. The combination of family and friends is a measure of an individual’s emotional and social support, and another indicator of isolation. On average, most respondents saw a family member or friend at least once per week. Portuguese respondents reported the highest frequency of interactions with family members or friends per week. Almost 60% of Portuguese respondents mentioned that they see friends and family 5 or more times a week compared to only 17.1% for Korean respondents.

Some Chinese-language survey respondents said that they never saw family or friends. Some of these respondents wrote that their families were living outside of Canada and they only saw them a few times per year. These individuals are at particular risk for social isolation, and community services provide a much more important social network anchor for these individuals.

Table 3. Number of times seniors see family and friends.

<table>
<thead>
<tr>
<th>Frequency of seeing friends or family</th>
<th>% of total survey</th>
<th>% Chinese</th>
<th>% Korean</th>
<th>% Portuguese</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 or more times per week</td>
<td>37.4%</td>
<td>47.5%</td>
<td>17.1%</td>
<td>59.2%</td>
</tr>
<tr>
<td>2-4 times per week</td>
<td>28.9%</td>
<td>13.6%</td>
<td>39.0%</td>
<td>30.6%</td>
</tr>
<tr>
<td>Once per week</td>
<td>28.4%</td>
<td>23.7%</td>
<td>42.7%</td>
<td>10.2%</td>
</tr>
<tr>
<td>Once per month</td>
<td>0.5%</td>
<td>1.7%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Never</td>
<td>2.6%</td>
<td>8.5%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>No answer</td>
<td>1.6%</td>
<td>5.1%</td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

*Strategies for reaching isolated seniors*

As per the request of staff from St Stephen’s, the survey asked respondents what the best ways were to reach isolated seniors. This question received a lot of responses indicating that seniors feel strongly about reaching out to isolated seniors.

Most respondents (58.4%) thought that language specific radio and newspapers would be a good strategy to reach a broader population. Using volunteers to do outreach was also ranked very high (50%). This suggests that peer based outreach programs like the Seniors Connecting Seniors program are seen as effective outreach strategies. Many respondents (46.3%) also thought that distributing language-specific flyers was a good strategy for reaching isolated seniors.
4.7 Pressing issues faced by seniors

The one open ended question on the survey asked respondents what they thought were the greatest issues faced by seniors in their communities. Of the 190 surveys collected, there were 187 responses (some people wrote about more than one issue). The high response rate to this question is indicative that immigrant seniors have a strong interest in discussing key issues that seniors face.

There were 4 main issues that consistently came up: language barriers and language-appropriate services; health issues and services; isolation and the need for social activities; and financial difficulties.

Language barriers and language-appropriate services

Language barriers and the need for language-appropriate services was the most mentioned set of issues. There were 80 comments about language, including language barriers, needing to learn English, interpretation services at visits to doctors and hospitals, and language-specific programs. Korean respondents wanted a larger variety of Korean programs delivered in that language. Some Portuguese respondents saw language barrier as leading to isolation and lack of social support.

Health issues and services

There were 40 comments about health issues faced by seniors. The most frequent health issue identified was the need for medical interpretation services for doctor and hospital visits, and the need for medical escorting services. Many respondents also talked about the need for accessible and affordable dental care for seniors. Many Korean respondents, in particular, wanted the dental office next door to St. Stephen’s to hire Korean speaking staff and be available for them. Other health issues identified
included individuals’ declining health, access to health care institutions, long wait times, and the need for increased physical activities.

**Isolation and social support**
Isolation and loneliness were issues that came up a great deal throughout this survey. The open-ended question reflected these concerns as well; there were 43 comments about loneliness, lack of social support and isolation from family. Most of the responses were specifically about social isolation and loneliness. One respondent said that the major issue concerning seniors is “family isolation and not caring for us because we are old and crazy people”. Other responses looked at isolation from a more positive perspective; for instance some respondents talked about preventing isolation by having good friends and networks in time of need.

**Financial difficulties**
There were 20 responses that discussed financial difficulties. Interestingly, more than half of these responses came from the Chinese respondents. Chinese seniors in particular were concerned about financial stability, employment issues, and credential recognition. One respondent captured the connections between these issues: “No secure income source because my children’s earning is not stable due to lack of Canadian working experience. I have to take care of my grandchildren. No quality of life.” Because seniors have to live in Canada for a number of years to receive an adequate Canadian government pension, this issue may be a higher priority for recently arrived seniors. This comment also suggests that seniors can be directly affected by the labor market difficulties that their children face. Portuguese respondents were also concerned about finances, and four respondents indicated that the money they receive in pension is largely inadequate.

**4.8 Profile of St. Stephen’s service users**
The final section of the survey was only for the 92 respondents who are current St. Stephen’s Community House service users. Respondents were asked about how they hear about St Stephen’s and what the benefits and challenges to using services at St. Stephen’s were.
More than half of respondents (58.5%) indicated that they heard about St Stephen’s Community House through a friend or relative. Another 36% said that they were told about St. Stephen’s by a current client of the agency. Only 3.3% heard about St. Stephen’s through language-specific radio and newspapers. This finding suggests that most of St Stephen’s clients heard about its services through their close connections (relatives and friends) and/or current clients. To this extent, peer based models of outreach and promotions may be the most effective way of making people aware of services. While, media based wide outreach ranked low, such wide promotion strategy may still be required to reach very isolated seniors who may not be connected to existing networks of other service users.

Challenges to using services at St. Stephen’s
The biggest challenge to using seniors services at St. Stephen’s was limited space (39.1%). The most dramatic result of this question was the large number of Korean respondents who wrote that they wanted lunch after their programs and that they wanted a larger space at St. Stephen’s for a variety of Korean programs. It seems that these are priority issues that St. Stephen’s Korean clients are very concerned about.

<table>
<thead>
<tr>
<th>Table 5. Challenges to using St. Stephen’s services</th>
<th>% of current clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don’t know availability</td>
<td>8.7%</td>
</tr>
<tr>
<td>Can’t travel</td>
<td>6.5%</td>
</tr>
<tr>
<td>Programs not offered in preferred language</td>
<td>12.0%</td>
</tr>
<tr>
<td>Occupied with personal obligations</td>
<td>8.7%</td>
</tr>
</tbody>
</table>
While there are some immediate challenges that current clients are interested in addressing, it is worth noting that 7.6% of current clients wrote that there were no challenges to using services at St. Stephen’s, and 16.3% did not answer the question. Some clients face personal challenges which limit their access to programs at St. Stephen’s. 6.5% of current clients say that they have difficulty traveling to programs, and 8.7% are busy with other obligations and can’t often attend programs. In terms of service needs, 8.7% of clients don’t know what other programs are available, 12% say that the programs are not offered in their preferred language and 6.5% see program fees as a challenge. These issues are within the realm of St. Stephen’s to work on. However, the small number of responses on each of these items means that the responses might not reflective of all clients.

Benefits to using services at St. Stephen’s Community House
The biggest benefit to using services at St. Stephen’s was making more friends as was indicated by 85.9% of the respondents. About half of current clients said that they feel better about themselves as a result of using services at St. Stephen’s (54.4%) and that they learned new things (52.2%). Also, many respondents (33.7%) saw St. Stephen’s as a place to create social networks and receive support from their community.

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some programs charge a fee</td>
<td>6.5%</td>
</tr>
<tr>
<td>Limited space</td>
<td>39.1%</td>
</tr>
<tr>
<td>No lunch after programs</td>
<td>28.3%</td>
</tr>
<tr>
<td>Need a bigger space for Korean programs</td>
<td>7.6%</td>
</tr>
<tr>
<td>No answer</td>
<td>16.3%</td>
</tr>
<tr>
<td>No challenges to using services</td>
<td>7.6%</td>
</tr>
</tbody>
</table>

Figure 14. Benefits of using St Stephen’s services

Also, in comparing St Stephen’s clients with non-clients, it appears that St Stephen’s clients acquire a greater knowledge of available services. Almost half of seniors (43.3%) who do not use St Stephen’s services currently (compared to 25% St Stephen’s clients) reported that the main barrier for accessing services is lack of knowledge about service availability.
Almost all respondents could think of at least one benefit to using services at St. Stephen’s. Only 3.3% of respondents did not answer this question. Clients are strongly attached to programs at St. Stephen’s, and can point to many different benefits of using these services. One respondent wrote that he likes “being social with other people rather than being by myself in my apartment”. Another wrote that he “trusts the staff because I have known them for many years”.

5. CONCLUSION AND RECOMMENDATIONS
Results from this survey indicate that service use and service needs vary significantly based on ethnicity and length of time in Canada and to some extent based on gender. To this extent, the key challenge that St Stephen’s Community House and other agencies serving immigrant seniors faces is how to meet the diverse needs of different communities. Additional concern is how to adapt services to newly arrived populations while continuing to serve existing groups. Moreover, reaching isolated seniors (whether recently arrived or not) can be a major challenge. The key findings from this survey are summarized in Table 6 below.

Table 6. Key Findings Overall and by Ethnicity

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Overall</th>
<th>Chinese</th>
<th>Korean</th>
<th>Portuguese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living Alone</td>
<td>40.5% (48.5% female compared to 25% male)</td>
<td>28.8%</td>
<td>48.8%</td>
<td>40%</td>
</tr>
<tr>
<td>% Living in Canada 20 years or longer</td>
<td>54.6%</td>
<td>42%</td>
<td>36%</td>
<td>97.8%</td>
</tr>
<tr>
<td>% who came in the last 5 years</td>
<td>12.5%</td>
<td>17.5%</td>
<td>16.3%</td>
<td>0%</td>
</tr>
<tr>
<td>Services that was ranked highest in terms of current utilization</td>
<td>Arts program (29.5%) Exercise (21.6%) Language (15.8%)</td>
<td>Arts program (49.2%) Language (39%) Counseling (32.2%) Exercise (31%)</td>
<td>Arts program (32.9%) Exercise (18%)</td>
<td>Financial (32.7%) Exercise (14%)</td>
</tr>
<tr>
<td>Currently not using any services</td>
<td>25.8%</td>
<td>8%</td>
<td>32.7%</td>
<td>32.9%</td>
</tr>
<tr>
<td>Services that were ranked highest in terms of need</td>
<td>Arts program (37.9%) Interpretation (33.2%) Drop-in (31.6%) Exercise (28.4%) Support with finances (21.6%) Computer (20.5%) Language (20%)</td>
<td>Exercise programs (39%) Arts program (31.9%) Computer training program (30.5%) Counseling services (27.1%)</td>
<td>Interpretation (62%) Drop in (56.1%) Arts program (54.9%) Exercise program (25.6%)</td>
<td>Exercise (22.4%) Language services (20.4%) Drop-in (20.4%)</td>
</tr>
<tr>
<td>% that travel more than 1 hour to reach services</td>
<td>15.3% (average)</td>
<td>13.6%</td>
<td>24.4%</td>
<td>2%</td>
</tr>
<tr>
<td>Key reasons for traveling far for services</td>
<td>No such program closer to home (39.5%) Programs nearby not offered in appropriate language</td>
<td>Prefer programs that friends attend (49.2%)</td>
<td>Programs nearby not offered in appropriate language (69.5%) No such program closer to home</td>
<td>No such program closer to home (36.7%)</td>
</tr>
</tbody>
</table>
In general, arts programming ranked highest both in terms of service utilization (29.5%) and service needs (37.9%). Three areas of service that ranked high in terms of need but low in terms of current use are: drop-in programs, translation services and computer/internet training. Counseling services also deserves a closer attention since roughly 20% indicated the need for this. Considering the stigma and barriers associated with discussing mental health issues and counseling services, a more in-depth study is needed to understand the need for counseling services among seniors. A greater percentage of women want arts programs (39.5% vs 29.5%), nutrition services (9.7% vs 1.2%), drop-in services (36.3% vs 21.3%) and translation services (37.1% vs 26.2%).

Survey results indicate that the Korean seniors at St. Stephen’s are newer to Canada. While their current service use is low, Korean seniors appear to have a strong interest in using more services. Korean respondents highlighted the need for interpretation services and/or services to be delivered in preferred language. Korean St Stephen’s clients are particularly concerned that St Stephen’s space is getting crowded and have made specific request for making lunch available during service. In contrast, Chinese seniors appear to be actively using a wide variety of services currently and intend to do so. Computer training appears to be an area of unmet service need for Chinese seniors. The Portuguese seniors are appear to well-settled in the downtown core. In general, this group of respondents did not express as great a need for services. Many Portuguese seniors did not know what programs were available, and expressed a lack of interest in using community services. For instance, when asked whether they would attend community services closer to their home, 40.8% said no (compared to 6.8% of Chinese respondents). Nonetheless, Portuguese seniors indicated that they require language programs and home and personal care service. While it may be difficult to meet the specific demands of each group, St Stephen’s Community House and other agencies serving immigrant seniors can increase service access and utilization by paying closer attention to how service needs and utilization can be affected by ethnicity, length of time in Canada, and gender.

Barriers to accessing services can be divided into 2 categories: structural barriers and personal challenges that individuals face. In the seniors population for this survey, personal barriers often include poor health and not having childcare for grandchildren. Systemic barriers that seniors face include lack of knowledge about available services, lack of language-specific services, and lack of space for programs.

Current clients overwhelmingly identified St. Stephen’s Community House as a valuable space for creating strong social networks among friends, which can lead to decreased isolation. Majority of clients noted that they heard about St Stephen’s through family, friends or current clients. This indicates that information about St
Stephen’s services is largely passed on through close networks of family, friends and clients. To this extent, peer based outreach programs such as the Seniors Connecting Seniors program appear to be an effective strategy for increasing knowledge about services and increasing access and utilization. At the same time, St. Stephen’s needs to take proactive steps to reach out to isolated individuals who may not be connected to strong social networks. Particular attention needs to be paid to the large number of female seniors living alone. There is an opportunity to do specific and targeted outreach to isolated individuals, through their friends and relatives, or through community-based, language-specific advertising.
Needs Assessment Survey
July 2007

Survey #: _____________

Collected by: ____________________  Date: __________________

Thank you for taking the time to do this survey. We are conducting a survey on behalf of St. Stephen’s Community House. The survey is about programs and services for seniors in our community.

Please note:
- Your name does not appear on the survey.
- Your answers are kept confidential.
- Whether you answer these questions will not affect your experience or the services you receive at St. Stephen’s.

The first set of questions is about services:

1. What community services are you currently using?
   - Language programs, such as English as a Second Language
   - Exercise and wellness programs, such as fitness, tai chi or yoga
   - Services for newcomers to Canada
   - Arts programming, such as singing and dancing
   - Computer and internet training
   - Nutrition programs such as cooking groups, Meals on Wheels, community gardens
   - Personal support, such as help with bathing or dressing
   - Homecare support, such as help with cleaning or laundry
   - Drop-in programs
   - Counseling services
   - Support with finances, such as filing out forms
   - Other __________________________

2. How often do you use a service from a community organization?
   - 4 times or more per week
   - 1-3 times per week
   - 1-3 times per month
   - Not at all
   - Other __________________________
3. What are some of the services that you need the most, but you are not currently receiving?
   - Language programs, such as English as a Second Language
   - Exercise and wellness programs, such as fitness, tai chi or yoga
   - Services for newcomers to Canada
   - Arts programming, such as singing and dancing
   - Computer and internet training
   - Nutrition programs such as cooking groups, Meals on Wheels, community gardens
   - Personal support, such as help with bathing or dressing
   - Homecare support, such as help with cleaning or laundry
   - Drop-in programs
   - Counseling services
   - Support with finances, such as filing out forms
   - Other ________________________________

4. What is the most important service that you need the most, but you are not currently receiving?
   - Language programs, such as English as a Second Language
   - Exercise and wellness programs, such as fitness, tai chi or yoga
   - Services for newcomers to Canada
   - Arts programming, such as singing and dancing
   - Computer and internet training
   - Nutrition programs such as cooking groups, Meals on Wheels, community gardens
   - Personal support, such as help with bathing or dressing
   - Homecare support, such as help with cleaning or laundry
   - Drop-in programs
   - Counseling services
   - Support with finances, such as filing out forms
   - Other ________________________________

5. How have you benefited from using community services?
   - You made more friends
   - You have more support from your community
   - You feel good about helping others
   - You feel better about yourself
   - You are more physically active and fit
6. On average, how many minutes do you travel from your home to access community services?
   - Under 10 minutes
   - 10-30 minutes
   - 30 minutes to 1 hour
   - 1-2 hours
   - Over 2 hours

7. What is your usual method of transportation?
   - Use public transit
   - Use WheelTrans
   - Drive yourself
   - Driven by friend or relative
   - Walk
   - Other_________________

8. If you are traveling more than 30 minutes to get to a community service, what are your reasons for not accessing services closer to your home?
   - You prefer programs that your friends attend
   - There are no programs like this closer to home
   - Other services are not offered in your preferred language
   - You moved away but choose to come to the same program
   - You like and trust staff
   - You have been involved in these programs for many years and don’t want to go to different programs

9. If the same services were offered closer to your home, would you go to these programs?
   - Yes
   - No
   - Maybe

10. What are some of the barriers that you face trying to access services?
    - You don’t know what is available
    - You are not able to travel to attend programs
    - Programs aren’t offered in a language that you prefer
    - There isn’t adequate childcare
    - Some programs charge a fee
    - Programs are too crowded
    - You don’t feel comfortable with staff
    - You don’t get along with other program participants so you don’t come to the program anymore

Now, there are some questions about seniors living in isolation

11. If you needed help with a major problem, such as a health problem, family problem or personal problem, who would be the first person you would turn to for help?
12. In an average week, how many times do you see your friends or family members?
- More than 5 times
- 2-4 times
- Once
- Never

13. How do you think community organizations can reach people who are isolated?
- Make flyers in the language that people understand
- Advertise through other places that isolated people might go, e.g. doctor’s office
- Advertise on the radio and in newspapers in the language that people understand
- Get volunteers to talk and listen to isolated people
- Reach people in the buildings where they live
- Offer free food, child care, and TTC tickets

14. What activities do you think would attract isolated seniors to community services?
- Language programs, such as English as a Second Language
- Exercise and wellness programs, such as fitness, tai chi or yoga
- Services for newcomers to Canada
- Arts programming, such as singing and dancing
- Computer and internet training
- Nutrition programs such as cooking groups, Meals on Wheels, community gardens
- Personal support, such as help with bathing or dressing
- Homecare support, such as help with cleaning or laundry
- Drop-in programs
- Counseling services
- Support with finances, such as filing out forms
- Other _______________________________

15. What do you think are some of the greatest needs or problems faced by people from your age group?
Now, there are some questions about yourself.

16. How old are you? ___________

17. What is your gender? ______________

18. What language do you speak at home?
   - Korean
   - Portuguese
   - Mandarin
   - Cantonese
   - Other _____________

19. How long have you been in Canada?
   - Under 1 year
   - 1 year
   - 2 years
   - 3-5 years
   - 5-10 years
   - 10-15 years
   - 15-20 years
   - Over 20 years
   - Was born here

20. What are the first 3 digits of your postal code? _______________
   OR
   What major intersection is closest to where you live? ________________

21. How many people live in your household?
   - 1 person (you live by yourself)
   - 2 people
   - 3 people
   - 4 people
   - 5 people
   - More than 5 people

22. Are you currently employed?
   - Yes
   - No

23. What was your total household income for the past year?
   - Under $5000
   - $5000-10,000
   - $10,000-20,000
   - $20,000-30,000
   - $30,000-50,000
   - Over $50,000

24. What are your sources of income? Check all that apply.
   - Canadian government pension, e.g. Old Age Security, Canada Pension Plan
☐ Pension from another country
☐ Guaranteed Income Supplement
☐ Employment
☐ Ontario Disability Support Program (ODSP)
☐ Income from investments, e.g. rental property, interest
☐ Financial support from children
☐ Other ____________________________________

25. What is your current relationship status?

☐ Married
☐ Domestic partnership/common law
☐ Living with a partner
☐ Living with a same sex partner
☐ Separated
☐ Divorced
☐ Widowed
☐ Never married
☐ Other ______________
This is the last section of the survey. We want to find out if you are familiar with St. Stephen’s Community House.

26. Do you use services provided by St. Stephen’s Community House?
   - Yes  [if yes, go to question 27]
   - No   [if no, go to question 31]

If yes:

27. How did you hear about St. Stephen’s?
   - From a friend or relative
   - From someone who is already a client
   - From another community organization
   - From media such as radio, T.V., newspapers, flyers

28. What services from St. Stephen’s do you use?
   - Language programs, such as English as a Second Language
   - Exercise and wellness programs, such as fitness, tai chi or yoga
   - Services for newcomers to Canada
   - Arts programming, such as singing and dancing
   - Computer and internet training
   - Nutrition programs such as cooking groups, Meals on Wheels, community gardens
   - Personal support, such as help with bathing or dressing
   - Homecare support, such as help with cleaning or laundry
   - Drop-in programs
   - Counseling services
   - Support with finances, such as filing out forms
   - Other _____________________________________

29. What are some of the challenges to using services at St. Stephen’s?
   - You don’t know what is available
   - You are not able to travel to attend programs
   - Programs aren’t offered in a language that you prefer
   - There isn’t adequate childcare
   - Some programs charge a fee
   - Programs are too crowded
   - You don’t feel comfortable with staff
   - You don’t get along with other program participants so you don’t come to the program anymore
30. What are some of the benefits to using services at St. Stephen’s?
   - [ ] You made more friends
   - [ ] You have more support from your community
   - [ ] You feel good about helping others
   - [ ] You feel better about yourself
   - [ ] You are more physically active and fit
   - [ ] You have learned new things

If no:

31. Have you heard of St. Stephen’s?
   - [ ] Yes
   - [ ] No

32. If you have heard of St. Stephens, what are some of the reasons why you haven’t been using services at St. Stephen’s?

________________________________________________________________
________________________________________________________________
________________________________________________________________
With great thanks to the St. Stephen’s Ambassadors

Access Alliance project staff: Sharmila Shewprasad, Yogendra Shakya, Christine Tyrell and Arti Mehta, and Christopher Stamler
St. Stephen’s project staff: Irene Tsang, Florbela Silva-Augello, Wendy Leung and Sun Ja Lee

December 2007