



BULLETIN

**SECTION DE L'EST: L'ASSOCIATION DES
TRAVAILLEUSES ET TRAVAILLEURS SOCIAUX DE L'ONTARIO**

Spring/Printemps
2008 (Vol. 34 No. 1)
Social Work and Seniors

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decision by the provincial association to reduce branch allocations, including eastern branch, by \$5.00 per member in 2008.

At the board level in eastern branch, we struggle with the ongoing dilemma of declining revenue and increasing expenditures. While we ended the 2007 budget year with a small surplus due in large measure to the watchful eye of our treasurer, we cannot expect the same positive result in 2008 and subsequent years without drawing on our very limited reserves.

To give you some idea of the challenge ahead, the remainder of this report is a copy of a letter which was sent on behalf of the board of eastern branch to the president of OASW. It was written in response to the reduction in branch allocations. It profiles our concern about the way in which the decision was made. It recognizes the difficulty the provincial association is facing. It highlights, as we see it, some of the strengths of our branch. And it makes two recommendations.

(See page 2 for the letter, sent
January 17, 2008.)

EASTERN BRANCH NEWS

EASTERN BRANCH BOARD OF DIRECTORS 2007-2008 REPORT

There was good news and bad news for Eastern Branch in the past year. The good news is that we have had a committed and active group of members involved in the board and committees. The bad news is the

LE CONSEIL D'ADMINISTRATION , SECTION DE L'EST, RAPPORT 2007-2008

L'année dernière a été porteuse de bonnes et de mauvaises nouvelles. La bonne nouvelle est que nous avons bénéficié de l'engagement des membres du Conseil et des Comités. La mauvaise nouvelle est que l'Association provinciale a décidé de réduire les allocations des Sections de \$5.00 par membre pour l'année 2008.

Bulletin

The Official Publication of the Branch

Le Bulletin est publié trois fois par année : Fall/Winter/ Automne/Hiver, Spring/Printemps, et Summer/Été. The Publication Committee welcomes submissions that examine public health and social issues, discuss local, regional or provincial issues in social work/social welfare, or which share social work information of interest to social workers or the social service public.

Toutes contributions seront considérées pour publication; les articles sur des questions relatives au travail social/ bien-être social, tant sur le plan local, régional ou provincial ainsi que des renseignements d'intérêt public ou professionnel. **All articles require a précis!**

Submissions may be e-mailed to the address below. They must be in an IBM-compatible word processing format.

Subscription Price: Members and Non-members \$12. Single issues: \$4.

Classified ads/Annonces : Cost/coût : Full page \$90. Half page \$60. Quarter page \$30. Deadline /date limite : le 17 octobre, le 17 février et le 17 mai.

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reacheb@magma.ca

THE *BULLETIN* FOR SUMMER 2008

“SOCIAL WORK IN THE ENVIRONMENT”

Deadline for submissions: May 17, 2008.
Your news, articles and ideas for this issue are welcomed.

Le Conseil d'administration doit lutter continuellement contre une réduction des allocations et l'augmentation des dépenses. Nous avons terminé l'année 2007 avec un léger surplus, résultant de la bonne gestion du Trésorier. Nous ne pouvons pas nous attendre au même résultat en 2008 et pour les années suivantes sans puiser dans nos maigres réserves.

Afin de vous aider à comprendre les défis auxquels nous faisons face, le reste du rapport présente une copie de la lettre envoyée au nom de la Section de l'Est au président de l'ATTSO. Écrite en réponse à l'annonce que notre Section subirait une réduction d'allocations, cette lettre fait état de notre préoccupation face à la façon selon laquelle la décision a été prise. On reconnaît les difficultés auxquelles est confrontée l'Association. On a bien souligné aussi les points forts de notre Section. Deux recommandations en découlent.

(Voici la lettre du 17 janvier 2008.)

“Dear Dan:

I write you on behalf of the board of OASW Eastern Branch to comment on the proposed 2008 budget and to make two recommendations.

The board of Eastern Branch understands, to some degree, the financial challenge facing OASW. It is also appreciative of the very difficult task which the provincial board had to address during its fall meetings. At the same time, we are concerned, on a practical level, about the decision to reduce branch allocations by \$5.00 per member. It is a measure that, in our judgment, is likely to be counter-productive, at least in this part of the province. Also, at a strategic level, because the professional association is at a crossroads, we think that there is a need for more substantive engagement in planning organizational change than has been proposed.

Our concerns regarding the budget proposal are both procedural and substantive in nature. At a procedural level, it is regrettable that so little was done to involve the branches at an earlier stage of the budgetary process. If that had been done, it might have been possible to extend the range of options which were considered. It seems that a decision was made for the branches rather than with them.

Secondly, we wonder, with respect to procedure, why so little was done to communicate with the general membership since individual members, in the end, will decide to accept, or reject, the proposed changes. Given the scale of fee increases being proposed and a likely decline in branch activities, it will be difficult for some of the more active members in the province, other than those who may join the association for insurance purposes, to see the value of ongoing affiliation.

With respect to substantive issues, there are essentially three concerns on our part. The first is related to a statement in the provincial budget overview that members are not engaged at the branch level. This is simply not true with respect to Eastern Branch. On an annual basis, 25% to 30% of our members participate in activities of the branch. Furthermore, since it is not necessarily the same individuals who attend events each year, the percentage on a triennial basis is higher. In addition, members of Eastern Branch in the past ten years have raised over \$60,000 in bursaries and scholarships for social work students. Fund raising of that scale would not be possible without the engagement of branch members.

As a corollary to the above, it is stated in the provincial overview that the survey of members confirms that members are not engaged at the branch level. That certainly is not our reading of the survey. When we compare the percentage of members who read regularly or occasionally branch newsletters (81.6%, Q12) and the percentage

of members who regularly or occasionally make use of the provincial website (87.5%, Q4), the difference is not very great. Furthermore, it is likely that some of the members who do use the website are likely to do so in order to access branch information.

To make a second comparison, 51.9% of branch members regularly or occasionally attend branch workshops and events (Q4) whereas only 29.4% regularly or occasionally participate in the bi-annual provincial conference (Q4). We appreciate that Q12 separates attendance at events from attendance at workshops but even with that distinction, branch participation is 33.7% and 37.8% respectively, still higher than the conference. Also, it is noteworthy, in our judgement, that 14.1% of branch members regularly or occasionally participate on branch boards and committees. We doubt that the percentage would be as high at the provincial level. Furthermore, most of the local activities involve the strategic goals of advancing the profile of the profession and the reach of branch activities goes beyond the local.

A second substantive concern is that the \$5.00 per capita cut to branches and the increased fees do not seem to be a one-off activity to pay down the extraordinary debt caused by the high consultation costs associated with Bill 171. In addition, there is an implicit assumption that the provincial association will continue to hire an expensive government relations consultant on retainer in order to deal with challenges associated with the establishment of the College of Psychotherapists and Mental Health Therapists.

It seems to us that the rationale for such a commitment is fuzzy. Why is it necessary for OASW to take the lead around the role of social workers with respect to the new college? Is this not an area where the Ontario College of Social Workers and Social Service Workers should take the lead and

OASW provide support? Alternatively, if OASW must hire a highly paid consultant for a couple of years, because of concerns about the future viability of the association, does it not make sense to sell 410 Jarvis and use some of the proceeds of the sale to ease the financial burden on individual members and branches? The building will not have much utility if the association falls apart.

Our third substantive concern relates to the structure of OASW and ongoing funding of branches. Part of the rationale for the funding of a government relations consultant is that OASW can no longer effectively advocate for social workers and lobby government the way it did in the past. If that is the case, it would be useful, in our judgement, to re-assess the organizational and administrative structure of OASW, not simply the role and utility of the branches. Furthermore, it seems odd to us to be concerned, on the one hand, about the future loyalty and perceived value of OASW to members while, at the same time, undermining the capacity of branches, particularly active branches, to promote the professional association in their own region.

The board of Eastern Branch, therefore, would like to make two suggestions. The first is that the provincial board establish a task force to (i) assess the current organizational and administrative structure of the provincial association as well as the branches and (ii) compare the efficiency of the current structure with a well developed set of alternatives on a cost-benefit and strategic basis. The second is to consider the development of a branch funding formula which differentiates between active and inactive branches.

Thank you for your consideration of these proposals. We look forward to ongoing consultation as we face the challenges ahead.

Glenn Drover, President
OASW Eastern Branch"

BRANCH REPRESENTATIVE TO OASW

OASW BOARD MEETING FEBRUARY 2-4 2008

Neither wind, nor rain, nor sleet and snow will keep social workers from getting together! Members gathered from across the province (despite a raging blizzard) to convene as a board.

Our meeting began on Friday evening with branch affairs. Joan Mackenzie Davies provided us with a discussion paper to guide a conversation concerning our current board structure.

The Theme of National Social Work Week is "Social Workers Advocating for Human Rights in a Diverse Community". This is intended to build on the theme of the National Social Work Conference 2008, and to stimulate discussion about human rights and issues related to accessing services.

OASW's Public Relations Advisory Task Group continues to focus on ways to increase the profile of social workers and the profession to enter emerging/changing fields sectors of practice. Representation includes the Deans and Directors of the Ontario Schools of Social Work, Family Services of Ontario, Children's Mental Health Ontario, gerontology, and hospital social work.

OASW's government relations advisory committee is implementing a strategy to raise the profile of the profession and to build closer working relationships within key government ministries. The board met with Peter Regenstreif of Policy Concepts. He confirmed that our success regarding Bill 171 was the result of an active campaign on two fronts – grassroots advocacy on behalf of individual branches, and key supporters at Queens Park. OASW has experienced a significant increase in access to both the minister of health and long-term care, and the minister of community and social services.

(Continued on page 6.)

TREASURER'S REPORT

FINANCIAL STATEMENT 2007

Over the past year, your board of directors has been very diligent in monitoring all expenses and examining items with unduly high increases. We have ended the year with a small surplus. Fees received from OASW were up this year by about \$400 (due to an increase in membership). Despite some increased costs in individual services, we have been able to bring our overall expenses down by almost \$5000 over 2006 expenses.

Concern over the fact that the allocations to branches in 2008 will be down by \$5 per member has led us to look even further for savings. The Publications Committee has been able to find ways to reduce some of the costs for publishing the *Bulletin*. As well, we have cancelled our contract for web site services. Information on branch activities and publications is now being provided on our branch's page of www.oasw.org.

Your board will continue to monitor all expenses carefully and will make every effort to meet the financial challenges in the year ahead without reducing services to our members.

Income	Jan-Dec 2007
Administration	520.03
Program	1,185.00
Membership	14,309.58
Total Income	16,014.61
Expenses	
Administration	8,386.38
Bulletin	4,603.20
Program	2,258.41
Membership	5.70
Social Justice Cttee	135.99
Total Expenses	15,389.68
Net Income	624.93

Margaret Nelson
Treasurer

RAPPORT FINANCIER 2007

Au cours de la dernière année, les membres du Conseil ont bien surveillé les dépenses, notamment celles reflétant une hausse importante des coûts. Nous avons donc un léger surplus en fin d'année. L'allocation reçue de l'ATTSO a augmenté d'environ 400 \$, grâce à un accroissement du nombre de membres. En dépit des coûts plus élevés de certains services, nous avons pu réduire nos dépenses de presque \$5000 de plus qu'au cours de l'exercice financier de 2006.

La réduction de \$5.00 par membre dans notre allocation de l'ATTSO en 2008 nous force à chercher d'autres façons de faire des économies. Le comité de publication a réussi à réduire les coûts pour la publication du *Bulletin*. Comme nous avons aussi annulé notre contrat de services pour le site web. Nous publierons information au sujet des activités et des publications de notre Section sur le site www.oasw.org.

Votre Conseil poursuivra sa surveillance étroite des dépenses et fera tout dans son pouvoir pour répondre à ses obligations financières sans réduire ses services aux membres.

Revenu	Jan-Déc 2007
Administration	520,03
Program	1,185,00
Membership	14 309,58
Total	16 014,61
Dépenses	
Administration	8 386,38
Bulletin	4 603,20
Program	2 258 41
Membership	5,70
Justice sociale	135,99
Total	15 389,68
Revenu Net	624,93

Margaret Nelson
Trésorière

**OASW BOARD MEETING
FEBRUARY 2-4 2008**

(Continued from page 4)

OASW is actively seeking the inclusion of social workers in the next round of funding for the Allied Health Professional Development Fund (AHPDF). This fund is part of the province's health human resources strategy through HealthForce Ontario under MOHLTC. AHPDF provides financial support (approximately \$1,500 annually) to allied health professionals who have their application to participate in professional development approved.

OASW remains an active participant on the management committee of the bridging to employment program for internationally educated social work professionals.

OASW's Children and Youth Advisory Group is in the latter stages of developing a work plan based on a comprehensive examination of the government policy directions across this sector, the public policy issues impacting on children and families and the emerging practice trends.

Ann-Marie O'Brien
Branch Representative to OASW

NEW MEMBERS

Eastern Branch welcomes new members

Cherill Johnston, Robert Chatwin, Sharon Hinbest, Andrew Sherwood, Margaret Anderson, Suzanne Ogden, Josianne Chartrand, Christina Hymers, Iva Horvat, Namakau Akatama, Julie Edwards, Sophie Caron, Shelly Sarjeant, and Francine Fitzsimmons.

Welcome back to Ena Hartop, Stanley W. Pope, Alba Feliz Rodriguez, and Michele Riopelle.

BURSARIES

This year's winners of Carleton University's *Swithun Bowers Memorial Bursary (MSW)* and

the *Edith Moore Bursary (BSW)*, will be announced at our Spring Gala in April.

The Branch is pleased to be a partner with the University of Ottawa's School of Social Work in the awarding of the *Roland Lecomte Scholarship*. This year's recipient will also be named at our Gala.

All winners will be acknowledged in the Summer Issue of the *Bulletin*.

FINANCIAL STATUS:

As of December 31, 2007, the Endowment for the **Edith Moore Bursary** is valued at \$30,194.18.

The Endowment value for the **Swithun Bowers Memorial Scholarship** as of December 31, 2007 is \$35,318.17.

The figure for the **Roland Lecomte Scholarship** Endowment was not available at press time. It will appear in the Summer issue of the *Bulletin*.

The **Brian MacIntosh Memorial Bursary Fund** announced the Spring 2007 issue of the *Bulletin* is currently valued \$26,171.10.

Please contact us at reacheb@magma.ca for information on how you can make a tax-free donation to these worthwhile awards.

COMMITTEES

SOCIAL JUSTICE COMMITTEE

One of the major activities for the Social Justice Committee continues to be working with People for a Better Ottawa to monitor and respond to actions of the new Ottawa City Council. We have seen some positive changes in the budget process as a result of this work. We would like to thank branch members who responded to our "Call for Action" in June, 2007. Never doubt that your contribution counts.

One of the Committee's goals is to get our views out to the public. While local media have

been unresponsive in recent years, we were gratified when a letter on child poverty written for our Committee by Helen Saravanamuttoo, was published in the Ottawa Citizen during National Social Work Week 2007. In July, the Ottawa Citizen mentioned our presentation to Council on the 2007-2010 Draft City Strategic Directions.

One of our new initiatives concerns increased street drug use by children and youth in our community. We have been granted membership in Crime Prevention Ottawa's Forum, and expect this to provide opportunities both to bring issues to the attention of CPO and to benefit from their expertise and research resources.

Our recent collaboration with students from the Carleton University School of Journalism has resulted in a comprehensive report that the students presented to Eastern Branch board in December. The goal of the project was to provide us with suggestions on how to improve communications between the Social Justice Committee and Eastern Branch members regarding our advocacy initiatives. We are excited about putting the recommendations of this Report into action.

We have already set up a new e-mail account to facilitate communication between our Committee and our members. Any member who would like engage with us in one of the initiatives described above, or who would like to bring an issue to our attention, is welcome to contact us at socialjustice.oasweb@gmail.com. You are also welcome to attend our meetings at any time.

I would like to express appreciation, on behalf of Eastern Branch, to the members who have actively contributed to the work of the Social Justice Committee over the past year. Your support and efforts are greatly appreciated. Thank you, Carol-Anne Pease, Ginette Clark, Helen Saravanamuttoo, Lynn Sherwood and Reuel Amdur.

Margaret Nelson, Chair

PUBLICATION COMMITTEE

In 2007 the Publications Committee published three issues of the *Bulletin*.

Spring 2007: "Social Work and team Work"

Summer 2007: "Local health Integration Networks (LHINs)"

Fall/Winter 2007: "Student Perspectives on Social Work "

In a new departure for us, the articles for the Fall/Winter issue were all submitted by social work students. As the next generation of social work practitioners, they provided us with their unique views on the profession.

The Committee sincerely thanks everyone who contributed articles and ideas to the *Bulletin* this past year.

Members are encouraged to submit their articles for publication in the *Bulletin* on subjects of concern to their communities, and to the social work profession.

Members are cordially invited to join the Committee. Contact us at our e-mail address at reacheb@magma.ca, or call Committee Chair Graeme Roderick at (613) 226-7081 for more information.

Publication Committee

AWARDS

SEVENTH ANNUAL GULLEN AWARD PRESENTED

This year's winners of the Joan Gullen Award for Excellence in the Print Media were announced by Glen Drover, President of the Eastern Branch of the Ontario Association of Social Workers.

The recipients are Susan Sherring of the Ottawa Sun for her 4-part series on Autism, and Steven Newman of the Renfrew Mercury for his

two-part series on addiction, "Trials and Tribulations of Life Under Repair" and "No Physician Involvement in the County".

The awards were presented at an event held at the Royal Ottawa Hospital on March 6 celebrating Social Work Week.

The Gullen award is given annually in recognition of local print media excellence in in-depth reporting or published exploration of a social problem or an issue of social justice, social welfare or social policy. It consists of a citation, and a monetary prize to be donated to a local charity of the recipient's choice.

Journalists, the public, and professionals working in fields related to social concerns, social welfare or social policy are encouraged to inquire about this annual award by contacting:

The Gullen Award,
OASW - Eastern Branch
323 Chapel St., 3rd Floor,
Ottawa, ON K1N 7Z2

Phone: (613) 238-8406

E-mail: reacheb@magma.ca

If you would like to donate...

To find out how you can make a tax- deductible donation to the endowment fund for this worthwhile award, please contact the Foundation by phone at (613) 236-1616, or by e-mail at info@cfo-fco.ca.

**LE SEPTIÈME PRIX ANNUEL GULLEN
ÉTAIT PRÉSENTÉ**

Cette année, les gagnants du prix Joan Gullen pour l'excellence d'un reportage journalistique furent annoncés par Glenn Drover, président de l'ATTSO, Section de l'Est.

Les récipiendaires sont Susan Sherring du Ottawa Sun pour sa série de 4 articles sur l'autisme, et Steven Newman du Renfrew

Mercury pour ses deux articles sur la dépendance, intitulés «Trials and Tribulations of Life Under Repair » et «No Physician Involvement in the County».

La présentation des prix s'est déroulée au Centre hospitalier Royal Ottawa le 6 mars, lors d'un évènement marquant la semaine du service social.

Décerné annuellement, le prix Gullen reconnaît l'excellence d'un reportage ou d'un article publié dans un journal local et portant sur un problème social ou une question de justice sociale, de bien-être ou de politique sociale. Il comprend une citation et une somme d'argent destinée à un organisme de bienfaisance choisi par le récipiendaire.

On invite les personnes intéressées, journalistes, membres de la communauté ou professionnels œuvrant dans des domaines reliés aux questions sociales, au bien-être ou à la politique sociale, à se renseigner au sujet de ce prix en s'adressant à :

Le Prix Gullen
L'ATTSO -- Section de l'Est
323 rue Chapel, 3^{ème} étage
Ottawa, ON K1N 7Z2

Téléphone : (613) 238-8406

Courriel : reacheb@magma.ca

Comment faire un don...

Des renseignements sur les possibilités de contributions déductibles d'impôt aux fonds de ce prix peuvent être obtenus de la Fondation, par téléphone au (613) 236-1616, ou par courriel à info@cfo-fco.ca.

"If wrinkles must be written upon our brows, let them not be written upon the heart. The spirit should never grow old."

-- John Kenneth Galbraith

**SOCIAL WORKERS AND SENIORS:
POSITIONING SOCIAL WORK FOR THE
2010s**

Until now, the most recent issue of our Branch *Bulletin* dedicated to Seniors was Winter 1998, and prior to that, Winter 1992. In the editorial in the latter issue, it was noted that OASW had recently stated that, 'social work is a necessary or primary service in the reformed long term care and senior support services'. Indeed, 'social workers are ideally suited to provide input into planning, and implementing strategies that would provide the essential components of an effective community care and support system'. The editorial concluded by observing that such generalizations were insufficient. 'We must be able to say *how* social work could contribute to the government fulfilling its principles and plans for community and institutional care'. In the 1998 issue, it was suggested that the '*how*' question had yet to be adequately addressed (p.5).

Using OASW's publications and documents posted on its website, and the past three years of e-bulletins as well as hard copy of the past seven years of the *Newsmagazine* to review recent developments, it would appear that our profession has yet to emerge as a 'necessary or primary service' for seniors. Where developments are evident is in social work education.

The 2000 study, *In Critical Demand: Social Work in Canada* placed Geriatric Services at the top of the list of growth areas for the profession (p. 206). The report stated that Educational programs ought to become more aligned with the changing needs of employers, the complex requirements of clients, and specialized areas. Has it happened? Without a baseline, it's hard to be certain.

The 2007/2008 Directory of Schools listed on the CASSW web site (<http://www.cassw-access.ca>) was used to establish hyperlinks to 61 accredited BSW/MSW programs. Course Descriptions were surveyed. Seventy Five percent of programs offered at least one course related to seniors. Among those that did not, forty percent were BSW programs. What is exciting is that three BSW programs and two MSW programs offer a specialty in this area of practice. Two 'specialized' BSW and one MSW programs are offered in French. One of the former programs is local. As was envisaged in the Spring 2007 issue of our *Bulletin*, a few schools offer courses that are taken across disciplines.

These findings may be of interest to CASSW, who was a partner spearheading the 2000 study. They are encouraged for highlight "specialty" programs on their websites. Their attention is also drawn to the (American) Council on Social work Education's 2007 study on the infusion of geriatric content into BSW and MSW programs. It found that students were being exposed at the theory and policy content level, but the challenge remains to provide students with practice knowledge and skills. Our review by 'course title' suggests a similar observation could be made in Canada, particularly schools that offer only one or two elective courses. Using the methodology already established by the Council, CASSW is encouraged to conduct a similar study of Canadian Schools.

Another priority identified by *In Critical Demand* was ongoing mandatory professional development (p. 207). The Institute for Geriatric Social Work (IGSW) offers 34 on-line courses. A review of Eastern Branch's SWAG Agendas of monthly meetings and "Follow-Up Notes" sent through group e-mail, provides a remarkable history of continuing education initiatives and sustained networking opportunities afforded local geriatric social workers. That group also provides representation to the provincial

Aging Issues Committee. SWAG's organizing committee is to be saluted.

Beyond the reach of this editorial is data that could tell the reader the number of Eastern Ontario social workers employed in the service of older persons and in what settings. How many are members? Our profession must invest in this type of longitudinal research, and make it readily accessible. As a point of reference, IGSW's *Bulletin* (2005) stated that 25% of American social workers work with older persons.

Contributors to this issue have sought to present a snapshot of the current local challenges and opportunities. As with so many other themes explored by this journal, the interval between explorations is frequently long. In the coming decade, our Association's engaging web site could become a vehicle to help overcome such shortcomings. Articles found in any of our branches' newsletters and posted to the Association's site, could regularly be identified. Should the interval between explorations of a particular theme (i.e. seniors) by our informative *Newsmagazine* become too long, why not ask a branch to explore the topic for its publication, which when posted on the provincial site, can be promoted, if not indexed?

If we hope to convince others that our profession is at the forefront of developments in a particular field (i.e. gerontology), or that our profession actively does research about the efficiency of our interventions, our publications **must** be up-to-date. For example, our *Guidelines for Social Work with Elderly Persons* is ten years old, our *Policy Statement on Aging* is eight years old, and our *Elder Abuse Handbook* is fifteen years old. An overarching challenge of the coming decade will be marketing our Association as the definitive Voice of Social Work in Ontario.

Publication Committee

THE GRAYING OF SOCIAL WORK -- LE SERVICE SOCIAL PREND DE L'ÂGE

par Roland Lecomte

Précis : *La revue "Social Work Today" a récemment rapporté que soixante-quinze pourcent des travailleurs sociaux finissent par travailler avec des personnes âgées même si celles-ci et ceux-ci n'en avaient jamais eu l'intention. La majorité des praticiens en travail social n'ont pas reçu une formation orientée vers la population des personnes âgées, mais le besoin de ces habiletés se montre de plus en plus pressant.*

The increasing number of elderly is a given and our professionals will be called upon to meet the needs that will inevitably arise and to offer innovative solutions -- are we ready to meet the challenge?

The newsmagazine *Social Work Today* reported recently that "Seventy-five percent of social workers end up working with older adults, even though they might not have thought that they would. Regardless of practice setting, they are likely to encounter older adults." The group aged 80 and older is now the fastest growing segment in the Canadian population, and the older adult population will surge even more in the future as the first of the Baby Boomers just turned 60. The current generation which is in their 80s were not social service users until they really had difficulties or were literally on death's door. As the Baby Boomers come along, they will use services differently and will expect very different things from our profession. They are going to be online and looking up all the evidence-based interventions, before they walk in our doors. Today's 80-year-old senior has probably never seen a social worker and doesn't want to see one, where somebody who is turning 60 now may be on his or her third social worker. Are we prepared to face up to this reality? The majority of social work practitioners have not received specific training for working with older adults, but the need for those skills is increasing.

Les auteurs d'un récent ouvrage sur les années dites "fragiles" se posent la question: « Qu'est-

ce que la vie quand on a atteint le cap des 80 ans ? ». Hier, il passait pour le terme absolu de la vie ; aujourd'hui, les personnes qui ont franchi ce cap composent la classe d'âge qui a la plus forte croissance démographique; demain, une majorité toujours plus ample des générations successives s'installera durablement dans cette nouvelle étape de vie. Les auteurs s'inquiètent du très peu de recherches et de connaissances disponibles sur ce groupe. La question de la formation des intervenants des milieux gérontologiques est complètement absente de ces réflexions. Il semble paradoxal que la formation des intervenants soit laissée dans l'ombre et ne fasse pas l'objet d'une attention particulière. Il existe bien quelques programmes généraux de formation professionnelle au niveau collégial. Il est surprenant de constater qu'aucun cours obligatoire sur la problématique du vieillissement contemporain soit exigé dans la formation professionnelle universitaire des travailleurs sociaux tant au 1^{er} cycle qu'au 2^{ème} cycle dans les programmes de service social de notre région. Des diplômées en service social peuvent donc se retrouver sur le marché du travail sans aucune notion en gérontologie.

Are we witnessing a lack of vision, even a certain type of institutional ageism, in our own universities and Schools of Social Work which tend to ignore and even deny these demographic imperatives? In most Social Work curriculum, for instance, aging content is often tacked on in a human behavior course, briefly introduced in so-called "generic" intervention courses, and more often than not in the context of a discussion of death and dying. Formal education in gerontological social work is almost non-existent in our province. It is often argued that courses are not offered because most students and practitioners are not particularly interested in the study of aging or in working with older adults or that there are only a few jobs in that field. While there is some truth to this, one can recall a similar resistance in some schools when gender, class and race were introduced as part of the core curriculum. There is a social reality which we can no longer ignore...Aging of the population is a central phenomenon of our century! Social Work practice is graying...Let's face it!

La révolution de la longévité est inévitable et notre profession devra relever les défis qui s'imposent et offrir des solutions innovantes. Comment gérer le changement de plus d'un demi-siècle de pratiques cloisonnées et de priorités axées sur les pathologies de la vieillesse plutôt que de s'interroger sur le déploiement et sur l'organisation de la vie dans le grand âge, ce pays du grand âge que, sauf accident, nous irons un jour habiter ? Le service social prend de l'âge...Sommes-nous prêts ?

Roland Lecomte est le Président du Conseil sur le vieillissement/President of the Council on Aging of Ottawa.

**SWAG: A FAIRY TALE COME TRUE
FOR SOCIAL WORKERS
by Beverlee McIntosh**

Précis : *Les travailleuses sociales qui accordent de l'importance au savoir et au réseautage comme parties intégrantes de leur spécialité en tant que professionnels, pourront constater que SWAG, acronyme d'un regroupement de membres de notre profession dédié aux questions et problèmes de gérontologie, est devenu, grâce à son travail, un véritable conte de fée.*

Once upon a time when there was no email and few people had telephone answering machines, there lived a small group of Ottawa social workers who were practicing in a new field called "Gerontology". These social workers felt isolated and out of the communication loop as programs for seniors support were being developed, policies were being drafted and the whole world of services for the elderly was burgeoning. Seeking solutions, these social workers turned to their professional association (OASW) and asked for help to create a network which would empower social workers who were working in seniors' programs in disparate health and social agencies. OASW granted their wish and 'Social Work in Aging and Gerontology' [SWAG] was born.

“Since 1988, SWAG has become a venue for our profession to share developing resources and best practice directives. “

Appropriately, the group first met at a senior's centre, *Good Companions*. The meetings began with a 30 minute opportunity to network, talk about advocacy initiatives and service changes which impacted seniors and social workers working in elder care, and followed with interesting speakers who spoke directly to the concerns and educational needs of the social workers

At the monthly meetings, Federal Government policy analysts addressed the problems of opening purse strings for senior focused services; Philosophers talked about ethical issues in aging; Physicians talked about Geriatric medicine and Lawyers addressed competency, and elder abuse issues. Social Workers in this network also shared their own expertise as guest speakers. They presented on topics of aging and addictions; ethics in end of life care; caregiver burden assessments and interventions and scores of other topics derived from our direct practice and research endeavors over the years. This format has continued to this day: networking followed by informative talks.

The Fairy godmothers of SWAG were six enthusiastic social workers from a wide variety of work places who 'volunteered' to contribute their expertise for a few years on the SWAG steering committee. They brainstormed and pulled strings each month to arrange for interesting speakers who could speak directly to the concerns and educational needs of social workers in this specialized field of practice.

Since 1988, SWAG has become a venue for our profession to share developing resources and best practice directives. Over the years technology had made the SWAG network stronger and more effective. In the early days OASW covered the cost of Xerox and postage for minutes to be sent out to the network. Now, a simple click of the e-mail distribution list swiftly sends minutes and relevant announcements to the SWAG network. Over time, the SWAG

network has grown to over 100 people who receive the minutes and notices.

SWAG is a fairy tale come true for social workers who recognize that knowledge and networking are an integral contribution to our professional expertise. Ottawa area social workers are connected to OASW Aging Issues Committee through a SWAG representative (Amanda Masterson since 2005). We are strong; we are energized; we are well informed -- and as long as there are social workers interested in direct practice, policy and research in Gerontology, SWAG will live happily ever after under the professional banner of OASW Eastern Branch.

If you wish to add your name to the SWAG distribution list, send an email to bmcintosh@ottawahospital.on.ca. Meetings are hosted at *Colonel By Retirement Home* (September to May). Those working in the field of social services for the elderly are welcome.

The hard-working social workers on the SWAG Steering Committee for 2007-2008 are:

Barbara Burns, Council on Aging and many other organizations
Bonnie Schroeder, VON Canada Project Manager, Public Affairs and Community Engagement
Amanda Masterson, Geriatric Psychiatry Community Services of Ottawa
Joanne Dyson, Alzheimer Society of Ottawa and Renfrew County
Carmelina Cimaglia, Royal Ottawa Mental Health Centre, Geriatric Psychiatry
Beverlee McIntosh, The Ottawa Hospital, Rehabilitation Centre

ON HEALTHY AGING? AT 84

by Helen Levine

Précis: *Je suis fière de mes 84 ans en même temps qu'un peu étonnée. Une forte volonté de vivre me manque. Cependant, pendant mon vivant je désire avoir une bonne qualité de vie et je lutte pour y arriver. La famille, les amis(es) et le féminisme qui font partie de mon être, sont absolument essentiels. A 84 ans, je*

*porte avec fierté les cicatrices de mes luttes.
Quelle satisfaction à savoir que mon âge soit un
insigne de distinction et non de dénégation.
Vivre la vieillesse a des aspects qui fascinent et
d'autres qui font peur.*

In this short piece, there is little concern with labels, assessing and treating, pathologies or professionalism. It is no accident. I think that the best of social work has to do with refusing the “us and them” splits, working with people individually or in groups as we struggle with crises in our lives, knowing that the struggles are both political and personal, and helping people discover talents and potential that can lead to changes.

Implied, of course, is that the source and solution to most of our troubles resides mainly in changing life circumstances and relationships and not in labelling pathologies and offering bio-chemical, pharmaceutical and other trendy alternatives. Understanding and accounting for context is crucial in helping.

I do hold dear, to this very day, some basic ideas and values from social work. They may sound insignificant, but they are not. They have to do with ways of working at a micro level that I think have relevance at a macro level, i.e., respect for and identification with the oppressed; listening authentically; partializing (this comes from functional social work); weaving together past and present; confronting supportively; the importance of structure. Sorry, no space for elaboration—please use your imagination!

I remain eternally grateful to the contemporary woman’s movement for having provided me with a feminist analysis and common ground with other women to help us redefine all aspects of women’s lives in a patriarchal society defined and controlled by men.

Now to healthy (?) aging. I claim my 84 years with pride and surprise. I do not have a strong will to live. But while alive, I want quality of life and fight for it.

Family, friends, and feminism are at the core of my existence. Friendships have always been hugely important to me. There have been losses at this age and earlier, and they are very hard. Now I have older and younger friends which are a marvellous mix.

One of the reasons I may have survived to 84 is because in later years I found the freedom and energy to pursue an interesting life apart from the family. Unlike most women of my age, I am financially independent from my own paid work, from social benefits, and from modest inheritance.

I wear my battle scars proudly. It is a joy to see my age as a mark of distinction, not as a reason for denial.

I belong to a Crones group that has survived for more than 25 years. (We dumped our original name “Positive Aging Group.” It was too boring.) We come together to talk about women and aging. We share our lives, our interests, our worries and our health issues.

I thrive on my feminist envisioning group, my feminist book group, and my feminist writing group. In my feminist groups, we “check-in” at every opportunity. We share—reciprocally – what is really going on in our lives. Evil thoughts, hidden fears, marvellous moments. It is how we make meaningful, personal-political connections and come to care about one another more deeply than we ever imagined was possible.

*“The experience of old age
can be fascinating as well as
scary.”*

There have been good times, painful times, and hellish times. So I am often caught by surprise that the past few years have been so fulfilling. I sometimes say to family or friends that I finally learned how to live my life just when I am about to croak.

For me, this means learning about the complexities and contradictions of life, about joining the personal and political, about the world of ideas, and about meaningful

connections and rich conversation. It's about having discovered fun and laughter unexpectedly in my old age.

Some of my pleasure has to do with an overall absence of guilt or insecurity when I screw up or make mistakes. I am at peace on this score—I simply acknowledge and try not to repeat. As I look back with the gift of perspective, I have regrets but they are not heart breaking. They are balanced by feelings of satisfaction with other parts of my life.

"I sometimes say to family or friends that I finally learned how to live my life just when I am about to croak."

As an old woman I dress as I wish. Pants and flat shoes are my uniform. I am comfortable, if not fashionable. Thanks again to the woman's movement.

I was 82 when my friend Oonagh Berry and I authored our first and only published book entitled "between Friends – a year in letters." A thrilling and scary experience. One of the high points of my 80's.

Now to be more concrete and practical aspects of health aging:

1. Exercise – all kinds. I wouldn't have any mobility or sleep or comfort without it.
2. Diet and supplements--- serious stuff. Without these, I would be sick and miserable.
3. I grab an arm when walking. My balance is poor. I have no pride regarding autonomy in this area.
4. A collection of well established resources: regular massage; regular visit to chiropractor; regular visit to chiropractor; GP for annual check and when all hell breaks loose; geriatric psychiatrist – young enough to be my granddaughter, whom I see "as needed."

I realize that the above alternative resources are costly and for some, they are out of the question. I hope this will change as our close to disastrous health care system improves.

Prevention is key and health care alternatives are key to prevention.

I know that everything could change for me tomorrow. A stroke, a heart attack, a major loss, could shift me from healthy aging to desperation.

I don't wish by writing about healthy aging to somehow diminish the huge numbers of people, old and young, who struggle with chronic health conditions and chronic pain.

The experience of old age can be fascinating as well as scary. I have learned to convert some of my toughest episodes related to age into stories I may someday write about.

As I look back, some of my hardest times have made my life later on seem interesting and colourful. I like that.

So here's to healthy aging! And in time, a good death.

Helen taught at the Carleton University School of Social Work during a turbulent period in the 1970s and 80s when the School was undergoing a major shift in its focus. She was influential in incorporating a feminist analysis into the curriculum as part of a structural approach. Although it has been over 20 years since she was on faculty, her influence continues to be felt. Helen is the recipient of the 1993 Bessie Touzel Award.

**SENIORS AND SOCIAL WORK:
A GLAMOROUS OPPORTUNITY**
by Bernard Bouchard

Précis : *C'est sans doute surprenant d'employer les termes « service social », « aînés » et « glamour » dans la même phrase. Je les utilise pour souligner l'importance pour les travailleurs sociaux d'entreprendre une carrière dans le service aux personnes âgées, leurs familles et leurs communautés. L'augmentation de la population des aînés et les facteurs les rendant vulnérables doivent inciter le service social à assumer un*

leadership face à la priorité devant leur être accordée dans notre société.

It is a bit of a misnomer to use the words “Social Work”, “Seniors” and “Glamorous” in the same sentence. I use it to highlight the growth, importance and social need for social workers to consider a career in serving seniors, their families and their communities. The aging population and increased fragility and vulnerability make seniors and social work perfect dance partners.

“It is universally understood across North America that one of the most significant demographic changes that will occur over the next 30 years is that of population aging. Over the next 25 years, the aging of the Canadian population will increase dramatically. By 2026, the proportion of the Canadian population over the age of 65 will grow from 13% to 21%.”¹

With this demographic shift, the need for social workers to provide services to seniors has increased but not, I believe, proportionally to other professions. We are currently witnessing extreme shortages of Registered Nurses and Physicians in Ontario. Why is that the case in those professions and not in social work?

Part of our challenge is, and has always been, defining social work services to our marketplace and to other professionals. Social workers continue to provide valuable services to seniors in advocacy, resources planning, counseling and community development. In response to lack of professional opportunities, some social workers have broadened their scope of practice and have encroached on other professional activities such as administration, marketing and human resources.

“Aging baby boomers will not accept a broken health care system.... All governments will be forced to invest more resources and look for new

¹ See Merrickville District Community Health Centre Needs Assessment Report 2006.

ways to deliver effective services to seniors and their families.”

Nevertheless the demand for social workers helping seniors will continue to grow at a time when health care rationalization and economic pressures increase. The introduction of Local Health Integration Network in Ontario (LHINs) is a statement, I believe, on the need for improved leadership and organization governance. This chaotic time will provide us with opportunities to examine how the health care **system** is working. No profession is better suited to talk about system issues, challenges and opportunities than social work. Policy choices that tinker at the edges, or that are simply reactive to the pressures and “crisis du jour”, or protect the status quo will not work or be supported by our graying population. Seniors and their families expect and deserve more. Unlike our parents whose expectations were somewhat modest, one click on the Internet will prepare the new consumer to expect and demand more.

Aging baby boomers will not accept a broken health care system. We see examples of this with government’s obsession with waiting times for knee and hip replacements, or Alternative Level of Care seniors who remain in hospital waiting for placement at \$800 per day. All governments will be forced to invest more resources and look for new ways to deliver effective services to seniors and their families. Recent examples of this trend have included “Aging at Home Programs” and 20,000 new long term care beds. Alternative levels of care and support program for seniors will continue to be given serious consideration.

Social Work’s time is coming in this new governance age. It is clear to me that the new age leaders will be social workers. An aging population has made working with seniors and their families a societal priority, and in my view not a moment too soon. Let’s all embrace this glamorous opportunity.

Bernard Bouchard is President of Resident Care Group Limited. For more information, please visit their web site at www.residentcaregroup.com.

**L'ADAPTATION SOCIALE DES
HOMMES ET DES FEMMES
FRANCOPHONES DANS UN FOYER
DE SOIN AUX PERSONNES ÂGÉES**
par Marie-Andrée LeBreton

Précis: *This research sought to better understand the transition from home to residence for francophone seniors as well as the factors influencing the subsequent adaptation of men and women to this milieu. Where women's move into a residence is influenced by health and loneliness, men are more likely to make this transition following the death of their spouse. The adaptation is more difficult when there is a lack of support, of flexibility in the residence's schedule and of access to differentiated activities for men and women. Adaptation is facilitated for men with the proximity and support of their children and for women, of their friends.*

Depuis quelques années, l'augmentation du nombre de personnes âgées, le désengagement de l'état et le manque de disponibilité des familles accroissent la demande dans les services d'hébergement et les foyers. À cause de multiples facteurs qui peuvent influencer leur adaptation, il n'est pas facile pour les aînés de faire la transition dans ces nouveaux milieux de vie. Certains facteurs semblent influencer différemment l'expérience des hommes et les femmes qui s'y retrouvent.

Notre étude a examiné la perception des hommes et des femmes de l'adaptation et des facteurs qui l'influencent, en s'intéressant plus particulièrement aux aînés francophones résidant dans un foyer bilingue. Elle explore notamment le lien entre l'adaptation et trois aspects de la trajectoire de vie: les rôles et réseaux sociaux antérieurs, la transition au foyer, et le vécu dans celui-ci. Nous avons effectué huit entrevues semi-dirigées, auprès de 4 hommes et 4 femmes âgés francophones, dans une résidence de soins privée bilingue de l'est de l'Ontario.

Nos données témoignent de différences entre les hommes et les femmes aux niveaux de leurs rôles sociaux et de leurs réseaux de soutien

antérieurs. Les hommes ayant été longtemps sur le marché du travail se fiaient sur leur épouse et leur famille comme principal réseau de soutien, tandis que les femmes, pour qui le travail familial était central, s'adressaient surtout à leurs amies. Nos données suggèrent que cette différence a influencé l'adaptation des hommes et des femmes à la vie au foyer. À titre d'exemple, les femmes ont recours régulièrement à leurs amies à l'intérieur et à l'extérieur de la résidence pour du soutien, alors que les hommes se fient plutôt sur les visites de leurs enfants, plus ou moins disponibles.

La transition à la résidence est similaire pour les hommes et les femmes rencontrés. Ils se représentent les foyers de façon généralement positive et dans l'ensemble, se sont préparés par des visites et de courts séjours. Ils se distinguent toutefois par la raison qui les amène à entrer en résidence. Même si les deux sont motivés par des raisons de santé, les femmes y vont surtout pour éviter d'être un fardeau et pour réduire la solitude, tandis que chez les hommes, c'est surtout à la suite du décès de leur épouse. Nos données soutiennent les écrits qui affirment l'importance pour ces personnes d'être bien préparées, volontaires, et impliquées dans les démarches de préparation pour l'entrée au foyer, car celles qui ne l'ont pas été l'ont vécue difficilement.

Une fois hébergés au foyer, presque tous les aînés de notre échantillon se sont bien adaptés et ont trouvé la transition satisfaisante, permettant de briser la solitude, de procurer des soins et une sécurité, et d'éliminer certains stress de la vie quotidienne. Cependant, nos répondants indiquent que les activités offertes ne répondent pas nécessairement à leurs besoins et intérêts, en particulier pour des sorties et des activités variées. Les hommes aiment le billard, qui permet un peu de compétition, mais voudraient plus d'activités sportives. Les femmes voudraient une plus grande variété de jeux collectifs, même si elles peuvent continuer des activités antérieures avec des amies (thé, cartes), contrairement aux hommes dont la mobilité affaiblie réduit les options.

« *Les intervenants devraient reconnaître davantage les différents besoins des hommes et des femmes, afin d'éviter de tous les traiter de la même façon, ce qui nuira à leur adaptation.* »

La venue à ce nouveau milieu s'accompagne parfois de plusieurs pertes, telles que la santé, l'autonomie, le réseau de soutien et le contrôle des habitudes quotidiennes, qui peuvent affecter la qualité de vie. Nos résultats suggèrent que l'adaptation peut être plus difficile si le foyer manque de souplesse au niveau des horaires, et si l'aîné manque de préparation, de soutien, ou d'activités, ce qui s'ajoute aux diverses peurs que vivent déjà des résidants. Les facteurs qui semblent faciliter la transition et l'adaptation sont la proximité et le soutien des enfants (hommes) ou des amies (femmes); une décision volontaire et préparée; l'accès aux services extérieurs; peu de changement dans le réseau formel; certains services à la résidence; et l'accès à un moyen de transport pour les déplacements autonomes.

Les données de notre étude nous amènent à conclure que les intervenants et l'institution doivent tenter de répondre aux besoins physiques, émotionnels et sociaux des aînés à l'étape de transition, afin de maintenir ou promouvoir leur indépendance et leur autonomie le plus possible. Les intervenants devraient reconnaître davantage les différents besoins des hommes et des femmes, afin d'éviter de tous les traiter de la même façon, ce qui nuira à leur adaptation. En prenant connaissance des attentes et des besoins de l'aîné dès son arrivée, le foyer peut viser de créer, comme milieu de vie, une atmosphère de quartier. Il peut, par exemple, permettre aux résidants de décorer et meubler leur chambre, offrir les services habituels de la société à l'intérieur de la résidence (chapelle, caisse, dépanneur, salon de coiffure) ainsi que des activités diverses, adaptées selon les besoins des hommes et des femmes, afin de les maintenir actifs et intégrés au foyer.²

² Bibliographie disponible. Voir p. 18.

Marie-Andrée LeBreton a complété cette recherche dans le cadre de son mémoire de maîtrise sous la direction de Alice Home. Diplômée de l'École de Service social à l'Université d'Ottawa, elle vient de débiter comme travailleuse sociale à l'Hôpital d'Ottawa.

"Of all the self-fulfilling prophecies in our culture, the assumption that aging means decline and poor health is probably the deadliest."

-- Marilyn Ferguson

INTERVENIR AUPRÈS DES GENS ATTEINTS DE LA MALADIE D'ALZHEIMER : FACILITER LA COMMUNICATION

par
Louise-Hélène Bourdeau
et Sophie Caron

Précis: *It is estimated that close to one half million persons in Canada have Alzheimer's disease, which constitutes the most common form of dementia. The following article outlines some information on the nature of this disease and its impact, as well as suggestions to facilitate intervention and communication for social workers who deal more and more frequently with persons affected by this disease.*

La maladie d'Alzheimer, la forme la plus courante de démence, est caractérisée par une affection dégénérative primaire du cerveau, qui entraîne des symptômes allant des troubles du langage à l'affaiblissement de la mémoire (Geldmacher & Whitehouse (1996) dans Hill et al. 1996). En raison de divers facteurs démographiques tels que l'accroissement de l'espérance de vie et le vieillissement de la population, la proportion de personnes présentement atteintes et de celles qui le seront risque d'augmenter considérablement au cours des prochaines décennies. Ainsi, comme le souligne la Société d'Alzheimer d'Ottawa (2008), il est estimé que près d'un demi million (420 000) de Canadiens âgés de plus de 65 ans sont atteints de la maladie d'Alzheimer. Dans le même ordre d'idée, on estime que la proportion de personnes atteintes atteindra, en

2031, le nombre de 750 000 (Société Alzheimer du Canada, 2008). L'importante prévalence de la maladie justifie vraisemblablement la pertinence de cet article et son apport pour le domaine du travail social. En tant que travailleuses et travailleurs sociaux, nous devons répondre adéquatement aux besoins des personnes avec qui nous travaillons, ce qui nécessite une sensibilisation aux différentes retombées de cette maladie.

La maladie d'Alzheimer affecte généralement les capacités intellectuelles de la personne atteinte ce qui, en retour, affecte ses capacités de communication, tant sur le plan de la parole que de l'usage et de la compréhension des mots. Dans l'intervention, nous devons compenser pour les facultés affaiblies, mais aussi offrir et utiliser des stratégies pouvant favoriser le processus interactionnel. Certaines méthodes sont plus susceptibles de faciliter la communication avec les personnes atteintes et il importe que les professionnels œuvrant auprès d'elles et de leurs proches soient bien outillés pour utiliser et partager ces habiletés.

En premier lieu, la Société Alzheimer du Canada (2008) propose cinq façons d'agir qui aideront à établir une bonne communication avec la personne atteinte : une vision positive, la créativité, la compréhension, la patience et les bonnes techniques. L'intervenante s'assure de demeurer toujours consciente du fond intérieur de la personne qui, malgré les effets de la maladie, peut être atteint. L'intervenante doit aussi faire preuve de créativité dans l'expression de ses sentiments et de son message, tout en étant consciente de l'effet de la maladie sur les capacités langagières. Démontrer de la patience lorsqu'on travaille auprès de gens souffrant de la maladie d'Alzheimer devient essentiel puisque ses effets exigent une adaptation incroyable, que ce soit par l'écoute, l'attente ou la répétition. Finalement, la maîtrise de bonnes techniques peut aussi servir à communiquer plus efficacement et à surmonter les difficultés qui se présentent.

Une autre forme de communication qu'il ne faut guère négliger, est le langage non verbal. La personne souffrant de la maladie d'Alzheimer

peut réagir au toucher, aux gestes, au langage corporel, à l'expression du visage, au ton de la voix et peut même utiliser son intuition. Parmi les autres méthodes que l'on peut employer, la Société Alzheimer du Canada (2008) suggère de préparer le terrain avant une rencontre en éliminant toutes les distractions et en offrant un lieu d'échange calme et silencieux, qui permettra à la personne d'être plus attentive. On peut aussi se placer devant elle et lui toucher délicatement la main ou le bras de manière à maintenir son attention. Il est également indiqué de pointer les objets pour leur attribuer un sens, d'utiliser des mots simples et des phrases courtes et de transmettre un message à la fois, ce qui servira à faciliter la compréhension (Parenteau, 2000).

En guise de conclusion, nous devons garder à l'esprit que nous communiquons et entrons en relation non pas avec les symptômes de la maladie d'Alzheimer, mais bien avec une personne humaine qui mérite de pouvoir entendre, comprendre et répondre, peu importe le processus et les moyens entrepris pour y parvenir.

Louise-Hélène Bourdeau et Sophie Caron sont étudiantes en deuxième année du programme de Maîtrise en service social de l'Université d'Ottawa.

HIV AND AGING: IMPLICATIONS FOR SOCIAL WORK

by Charles Furlotte

Précis : *En tant que praticiens, souvent nous avons négligé de se renseigner sur la question de qui constitue la population des aînés aujourd'hui. Les perceptions de ce que l'on se définit comme personnes âgées affectent notre point de vue professionnel et renforcent les stéréotypes du vieillissement, ce qui mène à la discrimination, l'exclusion et la marginalisation de certains groupes qui font partie de la communauté des personnes âgées. Un de ces sous-groupes est celui des personnes âgées, victimes du VIH/Sida de l'Ontario.*

With the changing demographics of Canadian society, the aging population will increasingly be the focus of practice and research for many social workers. However, as practitioners, we often overlook exactly *who* is making up the current aging population.

]

Perceptions of what 'old age' looks like jades our professional view and enforces ageist stereotypes, leading to discrimination, exclusion, and marginalization of certain groups of older adults. One specific subgroup of seniors who experience this invisibility is the community of older people living with HIV/AIDS, the PHAs in Ontario.

In the early days of the epidemic, older people were not nearly as represented as they are now within the larger PHA community. The *Public Health Agency of Canada* (2004) has estimated that people over age 50 represent 12% of PHAs in Canada. This number has been predicted to grow in the coming years. The reason for the increased prevalence of older adults living with HIV/AIDS has been discussed at length. It has been suggested that older adults routinely engage in behaviors that present high risk for HIV transmission (e.g. unprotected sex, shared-injection drug use). Second, novel HIV treatments not yet developed at the beginning of the epidemic (e.g. HAART) are now allowing people to age into older adulthood with HIV/AIDS.

Research into this often invisible population has revealed several issues associated with HIV and aging. Misdiagnoses are often reported for older people who in fact present with HIV. In a decade-old study done by El-Sadr and Gettier (1995), retrospective blood testing of 257 hospital patients over age 60 who had recently passed away found that 5% of these older adults tested positive for HIV and had never been diagnosed or treated! In addition, testing among this age group is weak. This may be due to the lack of awareness and focus of conventional HIV testing initiatives. Finally, aging, associated with physical and cognitive declines in and of itself, is further complicated by HIV, and co-morbidity is high among older PHAs.

While medical and social research is speedily catching up with this near 'missed' community of seniors, there remains a gaping hole in literature. There is little research on the intersection of HIV and menopause, or HIV medications and other routinely used drugs. Therefore, specialists' knowledge of both HIV and aging are needed more than ever across professions.

The social work role in addressing this systemic failure in preparing for older clients living with HIV/AIDS is clear. First, workers can advocate for changing perceptions of aging to include seniors living with HIV. This is becoming easier, as the PHA community is already being mobilized, and public acknowledgement of HIV and aging is growing, at least stateside. The topic was the focus of a special hearing before the US senate committee on aging entitled *HIV Over Fifty: Exploring the New Threat*, chaired by US democratic presidential candidate Hillary Rodham Clinton.

Progressive Ontario social workers are poised to play a role in community organizing and development with and within this marginalized community. Using a strengths-based approach, social workers could utilize the combined power of the "gray" activism, and the well-mobilized and successful AIDS activism movements to solidify a visible position of older adults within the PHA community and vice-versa. Additionally, social workers in direct practice are particularly poised to provide psychosocial support and counseling to this group of people, and should prepare to work with older adults living with HIV in the future.

Finally, social workers are ideal social science researchers to work with this population, as they are able to collect information concerning the experiences and perceptions of this group in a respectful, ethical and strengths-based manner.

This brief primer to HIV and aging which addresses the health and social service experiences of older PHAs in Ottawa, is the focus on my MSW thesis. This type of social work research has been incredibly rewarding and challenging. Such research involves a

particularly stringent ethics review as to ensure the confidentiality and level of safety for our participants, enormous community and agency buy-in and participation, and creative attempts at dissemination. It has been a wonderful journey thus far.

Charles Furlotte earned an honors degree in psychology and aging at Mount Allison University in Sackville, New Brunswick, recently completed a field placement at the AIDS Committee of Ottawa, and will be graduating with an MSW from Carleton University this fall. He can be contacted at: crfritt@mta.ca.

SOCIAL WORK PRACTICE IN A PRIVATE CARE AGENCY

by Wendy Birkhan

Précis : *Les pourvoyeurs de soins « Homewatch » arrivent à intégrer l'approche travail social dans une agence privée vouée aux services de soin respectant les lignes directrices établies par « CSWSSW ». Nous offrons des services complets aux personnes âgées, aux adultes et aux enfants handicapés, y compris ceux de gestion de cas et de soutien aux familles. Nous travaillons avec les réseaux communautaires qui offrent des programmes de maintien à domicile.*

Integrating social work practice in a private care agency has been a fulfilling experience. In the summer of 2004, I joined Homewatch Caregivers, a private care agency with branches through out the world. Due to my experience as a social worker in a variety of non-profit agencies and my extensive knowledge of services in the city of Ottawa, I had the background needed for this position. Our goal is to address the needs of the people we serve and to compliment the existing publicly funded resources.

Generally, care agencies follow a medical based approach, however there are no government regulations. It was our decision that

Homewatch Caregivers would follow the guidelines established by The College of Social Workers and Social Service Workers for confidentiality, ethics, and legislated rules of practice. We have nurses on staff when a medical assessment or level of care is required. We also personally answer the telephone 24 hours a day. By using this comprehensive approach, we have maintained a high standard and reputation as a legitimate care provider.

Among our referral sources are other social workers, CCAC, retirement residences and long-term care facilities. Homewatch Caregivers provides comprehensive services to senior, adults, and children with disabilities, as both case managers but also as support services for their families. When necessary, counselling may be part of the services. Each client presents with issues and by considering what else is going on, we are able to address the cause in a more holistic manner. On a regular basis, we re-evaluate the identified issues to consider if we have met their needs, and identify any other. Quality control is essential.

At Homewatch Caregivers, we have a commitment to give back to the community. We sponsor programs and educational seminars at a variety of locations including the CCAC, the Regional Geriatric Assessment Program, retirement homes, telephone guidance, and will negotiate our costs when possible. We promote an exclusive program called *Pathways to Memory* that can address many of the issues facing people in early to mid-stage Alzheimer Disease and other related dementias. We have opened offices in other Ontario cities, and across Canada, and are working with them to follow our example. Our latest initiative is with the *Aging At Home* Project via the Champlain LHIN. Together with Jewish, Somali, Chinese Family Services and many other multi-lingual/cultural services in the region, we are creating programs for seniors in our community. Homewatch Caregivers will potentially assist with trained professionals who speak a variety of languages, training programs, safety alerts, and with day program staffing.

I love what I'm doing: helping people to retain their individualism; to remain at home longer or

avoiding placement in long term care, providing post operative assistance when no else is available, and meeting the needs of family caregivers. Being in the private sector we compliment the non-profit services that can be limited when meeting the needs of the community.

Wendy Birkhan is a social worker who worked in community services for almost ten years before being presented with an opportunity to apply her knowledge and skills to the private sector.

EDITOR'S NOTE:

We received an overwhelming response from contributors to this issue,

“Seniors and Social Work”

Thank you! We regret that because of space constraints in our hard copy issue, we were unable to print them all. This extended version of the **Bulletin** offers the full complement of articles for your review. We hope you enjoy.



BIBLIOGRAPHIES

Limited space prevents the **Bulletin** from publishing bibliographic references for each of the articles.

A copy of the bibliographies can be obtained by contacting us at reacheb@magma.ca, or by phone at 613 238-8406.

À cause des limites d'espace, il nous est impossible de publier les bibliographies des articles.

Toute personne intéressée à obtenir une bibliographie pour l'un ou l'autre des articles peut adresser sa demande à reacheb@magma.ca, ou par téléphone au 613 238-8406.

SPRING GALA AND AGM



REMINDER: The Branch Spring Gala and Annual General Meeting takes place on

Wednesday April 16, 2008
From 5:30 to 8:30 p.m. at a
NEW location at

Algonquin College-Salon D
1385 Woodroffe Avenue
Ottawa

This year's topic is:

*Social Workers supporting the
Canadian Forces*

Our speaker is Marianne Vincent, MSW, RSW, a Civilian Social Worker with National Defence.

Marianne received her BA in psychology and her MSW from the University of Ottawa. She worked at the Overbrook-Forbes Community Resources Center as a Crisis Intake Worker. In 2006 she moved to Petawawa to work as a civilian social worker for the Base Mental Health Services. She recently transferred back to Ottawa and works for the Operational Trauma and Stress Support Center.

Join us for an informative, enjoyable evening with friends and colleagues.

Space is limited – please send in your registration early!

SOCIAL WORK WEEK CELEBRATIONS

This year's Social Work Week theme was "Human Rights in a Diverse Community". It was a week full of celebrations. For example:

On March 5th Mike's Place at Carleton University saw, "Hatching That Dragon", an evening of stand-up comedy, folktales and personal stories on disability, identity and sexuality featuring multi talented performer Ian Shain, and blind (and determinedly independent!) storyteller Kim Kilpatrick.

March 6th saw Eastern Branch and the Royal Ottawa Hospital co-sponsoring an event featuring the presentation of the Joan Gullen Award for Excellence in the Print Media to two recipients. OASW President Dr. Dan Andreas spoke on the impact of Bill 171 (Creation of a new college for Psychotherapy) on social work in private practice, and on other agencies which require registered professionals for certain positions.

Also on March 6th, CHEO social workers cordially invited colleagues from all professions and students to join them in celebrating National Social Work week with an interactive panel discussion on,

"Same Sex Parenting: What Health Care professionals Should Know".

In honour of Social Work Week and its theme, CASW asked Social Workers to go on-line at www.casw-acts.ca to send an e-letter to the Prime Minister calling upon governments to uphold human rights at home and abroad.

CASW also invited Social Workers to show their support and appreciation by sending e-greeting cards to colleagues congratulating them on accomplishments, and encouraging them to continue working towards a better society.

Both the electronic lobbying letter and the e-greeting card will be available throughout the entire month of March.

On March 7th, signed post cards were presented to the constituency office of Premier Dalton McGuinty. The cards called on the Ontario government to upload costs of public health care (among others), so the city of Ottawa can better provide city services. The initiative was co-sponsored by the *City for All Women Initiative*, the *Coalition of Community Health and Resource Centres* and *People for a Better Ottawa*.

POSTMAN/AU FACTEUR:

If undelivered, please returned to/
Si non livré, prière de retourner à:
323 Chapel St. 3rd Floor
Ottawa, Ontario K1N 7Z2

Date of Mailing: March 18, 2008
(PM 4005379)

Distribution
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Nepean, Ontario
(613) 225-7634

Publishing/Publication

deborah013@sympatico.ca

NOMINATIONS 2008-2009

The election of new Board members will take place at the **Annual General Meeting** portion of our **Spring Gala** on April 16, 2008. Please submit your nominations to the Branch Office (see address above) **no later than April 1, 2008.**

NOMINATIONS 2008-2009

L'élection des nouveaux membres de Conseil de l'administration aura lieu à l'**Assemblée Générale Annuelle** à notre **Soirée gala du printemps** le 16 avril 2008. Prière de soumettre vos nominations au bureau de la Section (l'adresse se trouve en haut) **avant le 1 avril 2008.**

👆 Reminder:

**Spring Gala and
Annual General Meeting
Wednesday April 16, 2008
5:30 to 8:30 p.m. at
Algonquin College-Salon D
1385 Woodroffe Avenue
Ottawa**

👆 Notez!

**ATTSO Est Soirée-Gala et
Assemblée Générale
Mercredi le 16 avril 2008
17 h 30 à 20 h 30
à Algonquin College-Salon D
1385 av. Woodroffe
Ottawa**

📄 Your Bulletin is now on-line at
oasw.org/east

Visit our Web page for the extended version of our Summer Issue. Two New Stories!

- "HIV and Aging: Implications for Social Work"
- "Social Work Practice in a private care agency"

THE BULLETIN FOR SUMMER 2008**"SOCIAL WORK IN THE ENVIRONMENT"**

Deadline for submissions: May 17, 2008.
Your news, articles and ideas for this issue are welcomed.

**Spring Gala / Annual General Meeting (AGM)
Ontario Association of Social Workers (Eastern Branch)**

**Join us for a Spring Gala dinner/buffet celebrating the
72nd AGM of the OASW (Eastern Branch)**

**Wednesday, April 16, 2008, 5:30 - 8:30 p.m.
Algonquin College-Salon D
1385 Woodroffe Avenue
Ottawa, ON K2G 1V8**

Topic
Social Workers supporting the Canadian Forces

**Speaker: Marianne Vincent, MSW, RSW
Civilian Social Worker, National Defence**

Presentation of the Bessie Touzel Award

Free Parking in Lot #8 and Lot #9. Wheelchair accessible.
Limited attendance!! – maximum of 70.
Share your business cards and/or program brochures.
Remember your cheque book for the auction
in support of OASW-EB awards.

Please call us at (613) 238-8406 to confirm your attendance.

Please send a cheque for \$25.00 (\$15.00 for students/first year graduates)
to cover the cost of the dinner before April 11, 2008 to:

**OASW (Eastern Branch)
323 Chapel Street, 3rd Floor
Ottawa, Ontario K1N 7Z2**

.....
Name:

Place of Work:

Telephone:

1. If you are reserving for a group, please include the required amount.
2. The meal will accommodate vegetarian preferences.
3. Cash bar on premises.

**Soirée gala printanière / Assemblée générale annuelle (AGA)
Association des travailleuses et travailleurs sociaux
de l'Ontario (section de l'Est)**

**Soyez des nôtres pour une Soirée gala printanière avec buffet
soulignant la 72^{ème} AGA de notre section**

**Mercredi, 16 avril 2008 de 17h30 à 20h30
Collège Algonquin - Salon D
1385, avenue Woodroffe
Ottawa, ONT. K2G 1V8**

**🔗 Thème 🔗
*Les travailleurs sociaux, un soutien pour
les Forces canadiennes***

**Conférencière : Marianne Vincent, MSS, TSI
Travailleuse sociale civile, Défense nationale**

Présentation du prix Bessie-Touzel

Stationnement libre dans les zones 8 et 9.
L'entrée est accessible aux fauteuils roulants.
Participation limitée à 70 personnes.
Apportez vos cartes d'affaires et des dépliants de vos programmes.
N'oubliez pas votre chéquier afin de participer à la vente aux enchères au
profit des bourses d'études de l'ATTSO.

Veillez confirmer votre présence au numéro (613) 238-8406.

SVP faire parvenir votre chèque de 25,00 \$ (15,00 \$ pour les étudiants et les
personnes diplômées au cours de la dernière année) pour le buffet, avant le 11
avril à :

**l'ATTSO (section de l'Est)
323 rue Chapel, 3^{ième} étage
Ottawa (Ontario) K1N 7Z2**

Nom :

Employeur :

Téléphone :

1. Si vous réservez pour un groupe, SVP inclure le montant requis.
2. Des mets végétariens seront offerts.
3. Bar payant.