

**MULTICULTURAL CHANGE: A NEEDS ASSESSMENT OF ETHNIC MINORITY
ELDERLY LIVING IN A HOME FOR THE AGED
IN METROPOLITAN TORONTO**

**A Practicum presented to the
Faculty of Graduate Studies
University of Manitoba**

**In Partial Fulfillment of the
Requirement for the Degree
Master of Social Work**

by:

Lucia Furgiuele

June, 1989



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LUCIA FURGIUELE

A practicum submitted to the Faculty of Graduate Studies
of the University of Manitoba in partial fulfillment of the
requirements of the degree of

MASTER OF SOCIAL WORK

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I. INTRODUCTION

The issue of whether mainstream¹ health and social service organizations are serving members of ethnic minority² groups has been gaining attention in the past ten years, especially in large urban areas where there has been high immigration. Often, members of ethnic minorities are not adequately served by mainstream organizations. One reason may be that in some cities, demographics have changed faster than the organization's ability to develop services. Another factor may be that the help seeking behaviors of ethnic minorities may be different from those of groups presently served by the existing organizations. Another factor

¹ The definition of mainstream will be the one used by R. Doyle and L. Visano in Access to Health and Social Services for Members of Diverse Cultural and Racial Groups (Toronto: Social Planning Council of Metropolitan Toronto, 1987), Vol. 1, P.8:

"Mainstream refers to those organizations that offer services to everyone in the community who meets general eligibility criteria, not based on membership in a particular cultural or racial group."

² The definition of ethnic minority will be the one used by B. Thomas in Multiculturalism at Work (Toronto: YWCA of Metropolitan Toronto, 1987), p.5: Ethnic minority refers to the "non-dominant or less powerful cultural identities in Canada. While people with non-dominant ethnicities are numerically in the minority in many parts of Canada, they are not numerically in the minority in Toronto." Dominant culture groups refer to "the more powerful cultural grouping in Canada. In most parts of the country, composed of white, English-speaking, middle to upper income, Christian Canadians." For the purposes of this study, the student has chosen to include non-Canadian born immigrants from Scotland, Ireland and England as being of the dominant culture in Canada.

may be a lack of financial resources to hire bilingual or multi-lingual staff or a lack of mandate that ensures services to ethnic minority clients. Coupled with these factors may be the influences of systemic discrimination that exists in society, and the challenges it poses for organizations wishing to develop and expand services for ethnic minority clients. Literature supports the existence of these service delivery issues (e.g., Kallen, 1982; Ijaz, 1983; Henry and Tator, 1985), as well as documentation of methods for organizations to begin to address the special needs of their ethno-cultural clientele, or enhance present service delivery. Some of the research has been directed at increasing workers' knowledge of ethnic minority groups and the examination of worker attitudes and helping styles (Thomas and Novogrodsky, 1985; Biocchi and Radcliffe, 1983).

Other studies indicate that in addition to such approaches, organizations need to examine and evaluate their service delivery practices, policies and ideology as they relate to ethnic minority clients. Organizations which are committed to enhancing service delivery must be prepared to develop and expand programs to reflect the cultural diversity of the communities they serve. Research provides models to assist mainstream organizations to address the service needs of ethnic minority clients. Thomas, (1987); and Doyle and Visano, (1987), recommend comprehensive multi-phase strategies, including the following: (1) conducting a survey designed to address the met and unmet needs of ethnic minority clients,

(2) conducting surveys designed to determine the training needs of staff, vis-a-vis ethnic minority clients, (3) conducting an examination of the representation of staff, management, Board and volunteer members, and (4) conducting an examination of the existing policy and service delivery ideologies vis-a-vis the needs of the multi-cultural community.

The student's own experience in working in mainstream organizations provided some insight into the lack of initiatives and services for ethnic-minority client groups. Further discussion of the student's interest in developing a practicum with T-D Acres will be provided in Chapter 11.

The practicum - A Needs Assessment of Ethnic Elderly at True Davidson Acres -recognized the necessity for mainstream organizations to plan and implement programs designed to meet the needs of ethnic minority clients. The practicum contained two components related to services to ethnic minority clients. One was to establish communication with the ethnic minority residents concerning their met and unmet needs within a long-term care institutional setting. The second component was identification of ways to translate these needs into programs or services. The practicum occurred under the auspices of the Municipality of Metropolitan Toronto in one of its Homes for the Aged, True Davidson Acres (T-D Acres) in the Borough of East York.

The needs assessment utilized a modified Community Oriented Needs Assessment design (Neuber, 1981) and incorporated data collected from demographic and other statistics, as well as surveys of T-D Acres residents. The findings of the needs assessment will assist the Municipality of Metropolitan Toronto to better understand the needs of the ethnic minority elderly residents living in one of its Homes for the Aged. The findings will also contribute to building cultural insight and knowledge among staff. Furthermore, the Metro Toronto Homes for the Aged Advisory Board expressed interest in the survey for consideration of replicating the study in other Homes and for policy development.

Chapter 11 of the practicum report contains a discussion of the purpose and objectives of the study and a discussion of True Davidson Acres. Chapter III provides a review of the literature related to (1) the development of services to ethnic minority clients, and the emergence of multicultural change in mainstream organizations; (2) the service needs of ethnic elderly as articulated in published material; (3) evaluation research at the planning, conceptualization and design level; and (4) the actual needs assessment conducted by the investigator.

Chapter IV will provide an outline of the methodology, activities, and observations of the four phases of the practicum, namely, Orientation and Evaluability, Pre-assessment; Assessment; and Practicum Report phases.

Chapter V will provide a discussion of the survey results and recommendations.

II. PURPOSE OF STUDY

The Municipality of Metropolitan Toronto is comprised of the six area municipalities of York, Etobicoke, North York, Scarborough, Toronto and East York. The total population of Metropolitan Toronto exceeds 2.2 million people. It is estimated that nearly seventy per cent. of the population in Toronto is from an ethnic origin other than British. According to statistics Canada, 1986 census findings, the population of non-British origin has more than tripled in the last fifty years. These statistics indicate that Toronto's cultural make-up has experienced radical change. Social and health organizations accustomed to providing services in English only, or to the dominant cultural group, must begin to examine their present service delivery in light of the needs of a much more culturally diverse client group.

As Doyle and Visano (1987) reported, the majority of the mainstream organizations in Toronto find themselves unprepared for or unwilling to address the changes that are required to become more responsive to ethnic minority groups. Shortly after their report was published, the Access Action Committee, a group of individuals and organizations concerned with access for minority groups to community services, met

with the Municipality of Metropolitan Toronto's Community Services and Housing Committee to discuss the findings in the report. The following recommendations, directed specifically to the Corporation of Metropolitan Toronto, were included in Doyle and Visano's report:

1. that the corporation consider the development of a multicultural policy to ensure that mainstream organizations adequately meet the needs of members of diverse cultural and racial groups; and
2. that the corporation consider the development of a funding strategy to implement a multicultural policy.³

Metropolitan Toronto operates seven Homes for the Aged, with approximately 2,400 beds in total, at an annual operating cost of 11.7 million dollars (Metro Homes for the Aged, 1987). Each home has an Advisory Committee, and a Divisional Advisory Committee on Homes for the Aged provides leadership to all the homes.

The Community Services Department of the Municipality of Metropolitan Toronto targetted one of its Homes for the Aged for an assessment of the

³ Correspondence, The Municipality of Metropolitan Toronto, October 6, 1987.

service needs of ethnic minority clients. Some questions identified regarding services to ethnic elderly persons included: (a) What are the special needs of seniors of various ethnic backgrounds that currently are not being adequately addressed in Metro Homes for the Aged? (b) Are the residents being served in Metro Homes for the Aged representative of the diverse ethno-cultural composition of Metropolitan Toronto? (c) How can accessibility to Metro Homes for the Aged be improved for an ethnically diverse population?

True Davidson Acres was chosen for study for three reasons. Firstly, a request for cross-cultural training for all levels of service staff was made by the Social Work Department. Staff representing a variety of disciplines and departments had indicated that they were experiencing some difficulties in developing services for the ethnic minority residents. Some staff cited a need to learn more about the specific traditions and cultures of the residents, and requested assistance in developing resource and interpreter services. Secondly, T-D Acres Administrator, George Humble expressed his interest and commitment to enhancing services for the ethnic-minority residents. Thirdly, the student's own interest and experience in working in mainstream organizations alerted her to the needs for organizations to become more responsive and accessible to, and representative of the ethnic minority communities in Toronto.

It is recognized that multicultural change for mainstream organizations must be multi-year, multi-level processes, and that all levels of the organization must be prepared to address accessibility and responsiveness. But often, organizations wishing to develop training programs make the decisions with insufficient data. Both the multicultural change and the evaluation research literature caution organizations to make decisions based on data associated with issues identified by consumers or target consumers. Communication with these groups is so vital, in fact, that without it, program planning is often incomplete or loses momentum throughout the change process. A needs assessment is a logical starting point.

The student approached City Hall's Community Services Department, Policy and Planning Division to enquire about the possibility of developing a practicum related to multicultural change. The Policy and Planning Division had identified accessibility/multicultural change as a priority issue for 1988 and agreed to negotiate a practicum. True Davidson Acres was in a planning process but had little data regarding its ethnic minority residents. A proposal was developed based on conducting a needs assessment of the ethnic minority residents with a view to enhancing service delivery and affecting policy and program changes.

Learning Goals and Objectives

The service goals of the practicum were twofold:

1. To better document the service needs of the ethnic minority elderly residents of T-D Acres for the purpose of enhancing services to this target group.
2. To assist T-D Acres begin to more effectively address the service needs of ethno-cultural residents.

Objectives

Three objectives were identified by the student:

1. To compare the ethnic composition of T-D residents with that of the general population (65 years of age and over) of the Municipality of Metropolitan Toronto and the Borough of East York.
2. To determine the specific social needs of the ethnic minority residents of T-D Acres and to identify ways of enhancing the system of service delivery based on the needs identified. The basic methodology included:

- (a) interviewing all able ethnic minority elderly in T-D Acres;
- (b) interviewing all able dominant culture elderly in T-D Acres;
- (c) developing a research instrument for undertaking a needs assessment; and
- (d) conducting face-to-face interviews with the sample group to assess the need.

Needs assessed encompassed areas of daily living and functioning associated with living in a Home for the Aged. In addition to demographic information, areas of inquiry included:

- intake and assessment procedures;
 - friends and family support;
 - awareness of services at T-D Acres;
 - communications with staff and residents;
 - health care;
 - nutrition;
 - general life satisfaction
3. To provide a report that contains both an analysis of the findings of the needs assessment and recommendations for enhanced service delivery to an ethnically diverse clientele.

Learning Goals

The student's learning goals included the following:

1. To undertake a review of existing studies and reports that focus on ethnicity and aging.
2. To become familiar with theory and application of needs assessment literature, through the application of a needs assessment of the ethnic minority elderly residents in T-D Acres.
3. To become familiar with and utilize demographic and other statistics related to the ethnic minority elderly.
4. To develop a profile of the needs of the ethnic minority elderly residents based on survey questionnaires, statistics and literature.
5. To develop a needs assessment instrument that will elicit better information about and understanding of the needs of residents.
6. To develop skill in the recruiting and training of interviewers for face-to-face interviews with ethnic minority elderly residents.

True Davidson Acres

True Davidson Acres opened on June 21, 1973. It is located in the Borough of East York, which proportionally has the largest elderly population of any area municipality within Metropolitan Toronto. Applications are made through the Central Intake and Registry Office of the Metro Homes for the Aged Division at City Hall. Applications are then sent to the admissions committee of the specific homes. The admissions committee is responsible for the approval of applications to the home, the satellite home program and other ancillary programs such as Day Care and Vacation Care.

True Davidson Acres provides in-home care for people with a wide range of physical and cognitive functioning abilities, ranging from residential (level 1) to heavy extended and psychogeriatric care (level 2). It provides a number of service departments for staff, including Medical, Nursing, Activation (recreational and social activities), Nutrition and Dietary and Chaplaincy Departments. Each Home has a Board of Directors

An analysis of the social needs of the ethnic elderly residents living in T-D Acres, was undertaken, utilizing the following forms of intervention:

1. an analysis of the demographic data of residents available from T-D Acres, East York Policy and Planning Department, City of Toronto

statistics, and the Ethno-Cultural Data Base, Province of Ontario;
and

2. face-to-face interviews with all ethnic minority residents and dominant cultural residents who were (a) well enough to participate and (b) wanted to participate

Residents who would be asked to participate in the Needs Assessment were drawn from a June, 1988 resident listing from T-D Acres. These included all dominant culture residents as well as ethnic minority residents. Although no key informants were surveyed in any formal sense, all T-D Acres service and management department heads were briefed about the nature and scope of the practicum. As well, managers from the Nursing, Activation, Social Work and Chaplaincy departments as well as the Administrator were involved in the planning of the practicum. Outside key informants included Charles Smith, Race Relations Development Officer, with the Municipality of Metropolitan Toronto Multicultural and Race Relations Department and Maria Ariganello, Community Development Officer with the Ministry of Culture and Citizenship, Province of Ontario.

Interviewers for the face-to-face Needs Assessment were recruited by the student from a variety of ethno-specific and other community agencies. Interviewers with helping and/or community experience, some with second

language and gerontology skills were recruited and trained. The interviewers were paid by the City of Toronto.

The student was on site at T-D Acres from June 10, 1988 to October 31, 1988. Information gathering and research activities were conducted at T-D Acres, with the approval of George Humble, Administrator and Lyn Carpenter, Practicum Advisor.

III. REVIEW OF THE LITERATURE

Sources of immigration have changed in Canada in the last twenty years. As Thomas (1987) and Amin (1987) have both documented, between 1965-69, the main sources of immigration continued to be from Europe, including England (70%). Other immigration sources were Africa and the Middle East (2%); Asia and the Pacific (12%); Latin America and the Caribbean (16%). By 1979 the major sources were from Europe (35%); Africa and the Middle East (31%) and Latin America and the Caribbean (29%) (Thomas, 1987; Amin, 1987). The main reason for the shift resulted from the 1967 decision to institute the point system in the immigration policy which removed restrictions on immigrant entry based on ethnic and racial characteristics. Prior to 1967, quota systems were still in effect which restricted the number of immigrants who were from visible minorities.

In Metropolitan Toronto, it is estimated that nearly 70% of the population is from an ethnic origin other than British. The population of non-British origin has more than tripled in the last fifty years. These figures indicate a need for mainstream organizations to examine their present service delivery system vis-a-vis the ability to adequately serve ethno-cultural clients of diverse backgrounds. The term systemic discrimination refers to the inequalities that are rooted in systems and policies of a society as a whole. It poses many challenges to organizations wishing to enhance service delivery, because systemic discrimination succeeds in excluding substantial numbers of persons from ethnic minorities from participating in organizations. Furthermore, it can also impose a particular culture and value system on a community by the dominant culture (Green, 1982; Kallen, 1982).

One important aspect associated with systemic discrimination, is that it prevents minority and ethno-cultural groups from accessing services, opportunities, resources and expertise that the majority of people may require at one time or another in their life (Samuda and Tinglin, 1987; Frideres, 1982). For ethnic minority clients requiring service from a mainstream organization, the ability to receive assistance that is culturally appropriate proves to be only one of many challenges. In addition, ethnic minority clients must first be aware of the services provided. They must also be in a position to access them. Language difficulties and differences in cultural behaviours have deterred many

ethno-cultural clients from initiating contact with mainstream organizations.

From a historical view point, the growth of ethno-specific agencies can be traced to basic settlement necessities; that is, the need for new immigrants to obtain information, services and help in their own language and through culturally appropriate interventions to adapt to a new country. What has developed throughout the years is a two tier service delivery system which has gradually witnessed ethno-specific agencies often duplicating the services offered in the mainstream organizations and serving not only the recently arrived immigrant.

The development of services to ethno-cultural clients in Toronto, both by the ethno-specific and the mainstream organization, is worthy of examination for five reasons:

1. It provides a perspective on how the present separate service delivery system for ethnic minorities began.
2. It allows for some understanding of how access to mainstream organizations has been effectively restricted to ethno-cultural clients because of a wide variety of cultural, political and social issues.

3. It demonstrates the complexity of multicultural change and illustrates the challenges faced by the mainstream organizations.
4. It highlights the urgency of the need for mainstream organizations to begin the multicultural change process by way of a systematic, well conceived planning processes.
5. It provides a framework for the T-D Acres survey. A review of the historical context of multicultural responsiveness provides insight into the models available and strategies developed by other mainstream organizations.

Services to Ethnic-Minority Clients in Toronto⁴

Settlement Houses and Ethno-Specific Agencies

Ethno-specific agencies have their roots in settlement houses that began in large industrialized cities across North America at the turn of this century. Amin (1982) has chronicled how immigration and social policies

⁴ Some of the literature reviewed in this section is adapted from previous research submitted to Professor Brad McKenzie, University of Manitoba, entitled Multicultural Change in Mainstream Organizations, April 18, 1988.

have affected the growth of ethno-specific services in his study, A Preliminary History of Settlement Work in Ontario 1900 - Present.

Amin states that the first period, 1900 - 1949, witnessed the arrival of tens of thousands of British and American immigrants. The first immigrants came to populate Canada as recruited immigrants. Later, as a result of the First World War, immigrants were permitted to come to Canada to flee political and economic upheavals.

'Canadianization' services were provided by churches, volunteers attached to the YM-YWCA's and the early settlement houses. World War II increased the need for services to immigrants as refugees from European Countries arrived. Existing services were inadequate and it was during the period of 1950-1969 that a number of immigrant aid or ethno-specific agencies developed in Toronto, including Italian Immigrant Aid and Jewish Immigrant Aid Services (p.12).

Settlement work from 1970 to the present saw the creation of the Ontario Welcome House, demonstrating support and responsibility by the Ontario Government for the provision of services to newcomers. The arrival of the Vietnamese Boat People was important because sponsorship of the refugees by ordinary Canadians marked a shift in community attitudes. Many small communities and towns that had seen little previous immigration provided sponsorships. Exposure to and awareness of other

cultures had significant impact on these communities and as a result, new immigrant aid agencies were born (p.20).

While ethno-specific agencies do fill an enormous need for the immigrant who is settling into a new city, these agencies often end up duplicating services offered by mainstream agencies, as the needs of newcomers change. The existence of ethno-specific agencies which have developed interventions and programs beyond settlement work (for example, family and children's services) attest to the truth in the fact that access to the institutions with a longer history and expertise remains difficult for the ethnic minority client.

Ethno-specific agencies provide services in numerous languages, offer culturally sensitive and appropriate interventions and act as activists and intermediaries between the mainstream agency and the ethnic minority client. In short, these organizations have much expertise and insight to offer the mainstream organization considering multicultural change.

The Mainstream Organization and Ethnic Minority Clients

As more visible minorities have settled in Toronto, community relations have become strained. In 1976, as a result of a growing number of incidents involving violence toward Southeast Asians, and the increased media coverage of the incidents, the Council of Metropolitan Toronto

formed a Task Force on Human Relations. Walter Pitman was named as chair and his mandate included an investigation of the incidents. Pitman was to determine (a) if racism was involved in these incidents and if it was increasing in Toronto and (b) to provide recommendations to Metro Council for methods of dealing with the issues of racism and race relations. Pitman's report, Now is Not Too Late (1977), contained data that confirmed the existence of racism, both in the isolated incidents that precipitated the study, and in institutions in Metropolitan Toronto. Forty-one recommendations were made that were aimed at improving race relations in Metropolitan Toronto. In particular, the education, legal, health, law enforcement and media institutions were named as societal organizations requiring policy and structural changes.

In a special report, Metropolitan Toronto Police: At the Crossroads, (Toronto Star, December 30, 1987), Nomi Morris assessed how the police force is facing the challenge of change, and reviewed the police force's record on recruitment of minorities and race relations. An improvement in these areas had begun with recommendations made fifteen years earlier in a series of government reports and later, by the Pitman report. Morris reported that despite recommendations for more women and minorities on the force, the Metropolitan Police Force remained essentially a white, male, Anglo-Saxon organization. Visible minorities account for 3.6% of the police force, and they are included in the Ethnic Squad, created in

1973. The Ethnic Squad is comprised of a total of 28 ethnic minority members in a force of 5,000 members.

In an effort to analyze the effects of a predominantly white police force on the ethnic community, the Toronto Star conducted a survey entitled, "Are Police Prejudiced?" Morris cited that at least forty per cent. of Blacks and East Indians feel that Metro Police are prejudiced against them.

More recently two Toronto area policemen have been charged with manslaughter in unrelated killings involving black men. At a conference on multi-cultural policing held in North York on January 20, 1989, Ontario Solicitor General Joan Smith was a keynote speaker. Highlights from the conference were reported in The Globe and Mail, January 21, 1989. In an article Change Recruitment Methods, Police Urged, Timothy Appleby reported on Smith's call for improved recruitment procedures and better cross-cultural training for 29 municipal police forces and the Ontario Provincial Police. A third goal identified was to foster better relations between the police and ethnic minority groups especially visible minority groups. Smith referred to a survey conducted in January, 1989 showing that in Metro Toronto, only 37 per cent. of those surveyed believed their police were doing a good job in their dealings with ethnic minorities.

Evaluation suggests that mainstream agencies providing social and health services have not fared any better. In a three volume report , Access to Health and Social Services for Members of Diverse Cultural and Racial Groups (1987), authors Doyle and Visano reported on their attempt to determine if 135 mainstream health and social agencies in Metropolitan Toronto provided service to ethnic minority groups. Their findings indicated that there were serious service delivery gaps such as: (1) the majority of organizations did not believe that service to minorities was a priority; (2) many organizations could not participate in the survey because no records were kept that would indicate the ethno-cultural background of clients; and (3) others cited lack of policies, resources, or mandate as explanation of their inability to serve ethnic minority clients. Representatives from ethnic minority groups spoke of their lack of knowledge of community resources, feeling out of place in some organizations and not welcome in others.

It would be unfair to conclude, however, that nothing has been accomplished in Toronto in the area of multicultural change. Indeed, a number of educational, health and social organizations have initiated studies, programs and departments to enhance service delivery to ethnic minorities.

The federal and provincial governments have adopted multicultural policies. The province of Ontario, in a number of Ministries, makes funds

available to multicultural programs and has a race relations policy. A number of internal evaluations and studies have been conducted. The Ministry of Community and Social Services, for example, has undergone a survey of its agencies regarding their multicultural responsiveness and produced recommendations for change. The City of Toronto has had a Mayor's Committee on Community and Race Relations since the mid 1970's. In addition, both governments have initiated major accessibility studies of all services and agencies receiving their funding.

The Toronto Board of Education implemented a Race Relations department in 1979, as did each of the neighbouring suburban Boards. The Toronto Board of Education made 119 recommendations to address racism in all areas of its organization, for example, staffing, recruitment, curriculum development, staff development, community relations, Board representation, and staff-student relations.

A Race Relations Advisory Committee was hired in 1979 to ensure that the recommendations were implemented and in 1985, the Toronto Board of Education secured the services of a consulting firm to provide a formative evaluation. The findings confirmed that well over two-thirds of the 119 recommendations were not implemented. The consultants found that while there was recognition of the need for a race relations program, "the lack of monitoring, evaluation and accountability, contributed to Senior Board staff not exercising their responsibility in ensuring the

implementing of the 119 recommendations". (Hitner Starr Associates, 1985, p. 109). Obviously, one person could not affect the kind of change process envisioned six years earlier. The consultants recommended that an impact assessment be conducted to fully evaluate the Race Relations program and to identify future goals and activities. Multicultural change in a city whose values and power lie in the restricted circles of a predominantly white, Anglo-Saxon elite remains a challenging and complex issue.

Social service accessibility, like accessibility to any kind of institution, must speak to the existing social and class system of society in general. Various studies have been made by all levels of government and in a number of organizations. The YWCA of Toronto, for example, is an agency which embarked on a three-year change process that was designed to address every aspect of the organization: Board and Staff representation, its philosophy, service delivery, communication and outreach strategies and internal racial conflict. The agency had become involved in immigrant services in the late 1800's by providing housing to young women from Great Britain in search of employment. Throughout its history, the YWCA became involved with settlement services and later developed separate programs for specific ethnic groups (Giovannini, 1985).

Thomas (1987) identified some of the components of the three year process.

1. A systematic, step-by-step plan was designed, based on initial staff and target group needs identification and internal and external political pressure for multicultural change.
2. An emphasis on multicultural training among all staff, employing a variety of methods, resources and a mixture of mandatory and optional training workshops, ensured maximum staff participation and sustained support.
3. Changes in program and service delivery, based on client and target group's needs, provided a shift from ethno-specific programming to more integrated services.

Similarly, the Metropolitan Toronto Children's Aid Society's (Metro C.A.S.) experience in multicultural change was a process that spanned several years, and one which remains controversial and on-going. As Toronto's demographics changed over a 30-year period, so did the clientele served by the Metro C.A.S. This meant service problems for the predominantly white, Canadian-born front-line staff. Problems included difficulty in communication with clients whose first language was not English; the interpretation of child welfare legislation to a new public to which the act may be seen as culturally insensitive; and the lack of understanding of child rearing practices of other cultures (Dacosta and Barr, 1982).

The racial tensions and incidents that occurred in 1976 and 1977 throughout Toronto were obviously a concern to the Metro C.A.S. In 1977, a group of front-line social workers submitted a report to the C.A.S. Board of Directors requesting assistance with developing programs to serve the growing needs of ethnic minority families. As a result, the Metro C.A.S. targetted five ethnic minority groups deserving particular attention: Native people, Southeast Asian, Chinese, Greek and West Indian. A Task Force on Multicultural Programs was struck in 1978. One result of the Task Force was the development of two ethno-specific programs for East and West Indian youth (Dacosta and Barr, 1982, p.7).

But internal conflicts persisted and by 1979, the C.A.S. turned to a consulting firm to assist with an assessment of how the C.A.S. system responded to racial and cultural issues and the state of its multicultural practices and services. In 1981 the Metro C.A.S. received the report, spent another year interviewing key internal and external informants representing ethnic minority communities, and, in 1982, completed a working document for strategies for multicultural change.

The Task Force recognized that as a major social service organization in Toronto, a variety of measures were required in order to move its approach in the direction of integrated services. The Task Force recommended changes in each of the following areas: Policy Making,

Data Collection and Planning, Delivery of Services, Training, Personnel and Hiring Practices and Public Relations.

It is evident that a number of planning and intervention strategies are required by mainstream organizations to address the complex issues related to multicultural change. Medeiros (1987) described the efforts of the United Way of Greater Toronto to address multicultural change with six of its member agencies. The two year Social Services Multiculturalism Project began in January 1986, and involved the Canadian National Institute for the Blind (CNIB); Huntley Youth Services/Big Sister Association; Ontario March of Dimes; United Way of Greater Toronto; West Scarborough Neighbourhood Community Centre; and Woodgreen Community Centre. Each agency established a Multicultural Committee, comprised of board members and volunteers, as well as staff from different levels of the agency.

Medeiros asserts that the Multicultural Outreach Project's model, which included a comprehensive multicultural analysis for each agency, is one which ought to be considered for any organization considering multicultural change. Key components of the model require the agency to (1) gather information on ethnic minority representation within the agency; (2) examine the agency's communication strategies used; (3) analyse programs/methods of service; and (4) develop data on demographics and needs of ethnic minority constituencies.

Thomas (1987) states that any model or strategy employed by the mainstream organization must be based on factual information provided by the consumers or intended target group(s). A needs assessment is a necessary first step because it establishes communication between the organization and the target group, and because it provides data on which to base planning.

Doyle and Visano (1987) concur that multiphase, multi-level change strategies are required to effect meaningful multicultural change. They also support systematic information gathering with ethnic minority communities and recommend needs assessments and surveys as key planning approaches.

Rees (1987) acknowledges that ethnic minorities may under-use services because of a lack of awareness of the agency or resources. He also states, however, that a long history of exclusion and discrimination, an incompatible service delivery system, difficulties with language and a lack of sensitivity by the organization also pose barriers for many ethnic minority groups. Rees asserts that the organization's discussion of service delivery interventions, accessibility and any new initiatives would be incomplete or misinformed without the input of the consumers or target groups. He states that responsible program planning is dependent on informed decisions, and that many organizations flounder or lose

momentum during change processes because of a lack of familiarity with the needs of the target population.

True Davidson Acres, while serious and committed to multicultural change, nonetheless had no data on which to base program planning. As the literature suggests, the change process can be complex. T-D Acres must be familiar with the intended target group(s) and their needs in order to make informed decisions.

Evaluation Research

The evaluation and applied research literature supports the need for effective and informed program planning. Rossi and Freeman (1985) state that good intentions or impressions of need are inadequate and that many social programs have been poorly conceived. As a result, implementation of any program or policy may be problematic, insufficient or inappropriate due to lack of information. The authors describe the purposes of evaluations and their scope as being multifaceted. Evaluations may be undertaken (1) for management and administrative purposes, (2) to assess the appropriateness of program changes, (3) to identify means of improvement, or (4) for planning and policy purposes. The scope of the evaluation is dependent on the purpose(s) for which it is to be conducted. Rossi and Freeman outline three classes of evaluation: Program Conceptualization and Design, Monitoring and Accountability of

Program Implementation and Assessment of Program Utility. Evaluation at the Program Conceptualization and Design level encompasses planning components and needs identification.

Epstein and Tripodi (1977) define planning as the process by which society addresses social problems. Based on an idea for a program, or an impression of need, the administrator requires valid and reliable information regarding the following:

- (1) the potential target population, its characteristics and its needs;
- (2) existing programs to meet these needs, as well as the location of existing resources that could enhance the operation of a new program;
- (3) specific intervention strategies, technologies, or services that are known to be relatively effective and efficient in meeting needs of the target population; and
- (4) the skills of agency staff.

The authors stress that such information is needed throughout the life of a program, so that program planning sets the groundwork for monitoring and evaluation.

Rossi et al. (1979) agree that evaluation at the planning stage provides crucial information about a perceived problem and its scope. The authors

state that at this level, evaluation research activities are intended to provide information that will assist with program design based on informed knowledge of the dimensions and scope of the problem. The authors refer to these activities as formative research.

One of the ultimate goals of any evaluation is to ensure that the facts and recommendations provided by the evaluation are indeed used by the decision-makers. The lack of utilization of evaluation research, however, has plagued many researchers.

Patton (1978) maintains that:

"Utilization occurs when there is an immediate, concrete, and observable effect on specific decisions and program activities resulting directly from evaluation research findings"⁵

But Patton's survey of forty American federal decision makers and evaluators demonstrated a poor record of use of evaluations. He stresses the importance of the work that must be done prior to the evaluation with the decision makers. Two concepts are described as the basis for Utilization-Focused Evaluation. One is that relevant decision makers and

⁵ Patton, M.Q., Utilization-Focused Evaluation, Beverly Hills: Sage Publications, 1978, P.8

information users must be identified and organized. Secondly, the evaluator must work with the decision makers to make all other decisions about the evaluation, including its focus, design, methods and dissemination.

Patton expands on these two components and outlines a model which strives to ensure that all participants share the responsibility for shaping and implementing the evaluations. The following model describes the partnership between the evaluator and the stakeholders, with regards to the design of the evaluation:

1. Identification and organization of relevant decision-making and information users.
2. The relevant evaluation questions are identified and focussed.
3. Evaluation methods are selected that generate useful information for identified and organized decision makers and information users.
4. Decision makers and information users participate with evaluators in data analysis and data interpretation.
5. Evaluators and decision makers negotiate and co-operate in dissemination efforts.

Patton states:

"Utilization-focussed evaluation brings together evaluators, decision makers, and information users in an active-reactive-adaptive process where all participants share responsibility for creatively shaping and rigorously implementing an evaluation that is both useful and of high quality"⁶

Heeding Patton's assertion that much of the groundwork for utilization-focused evaluations begins before any evaluation is initiated, this practicum began with what Rutman (1980, 1984) calls an evaluability assessment. Since a number of stakeholders, decision makers and planners were involved with the T-D Acres survey, an evaluability assessment was indicated to determine the objectives of the diverse group of stakeholders. This was to ensure clarity regarding the important issues of interests and goals; commitment, involvement and active participation; access to documents; an agreement to proceed and disseminate the information.

Needs Assessment

Two important factors were considered in determining an appropriate evaluation design. Firstly, the Homes for the Aged Division of the

⁶ Ibid, p. 289

Metropolitan Community Services Department is involved in a planning process. Because of changing cultural demographics, the Division is questioning its present ability to serve ethno-cultural elderly and recognizes the importance of determining ways the individual Homes for the Aged can enhance service delivery to its residents and plan outreach programs for ethnic minority elderly persons in the community. Secondly, the Division at present has no database containing information on the characteristics and service needs of its ethnic minority elderly residents on which to base any program changes or planning.

It was decided that a needs assessment would be provided the identification and evaluation of the particular needs of some ethnic minority elderly in True Davidson Acres. It would assist True Davidson Acres administrators, planners and funders with information needed to enhance service delivery to the target population. It also would provide information from the ethnic elderly residents as to whether present services are adequate.

McKillip (1987) defines need as a value judgement that a target group has a problem that can be solved. He states that there are four aspects associated with a definition of need.

- (1) Need involves values. An outside person observing the need may differ from the person actually experiencing the need.

- (2) A need is experienced by a particular group of people in a certain set of circumstances.
- (3) A problem is an inadequate outcome that violates expectations.
- (4) Recognition of a need involves a judgement that a solution exists for the problem.

McKillip also outlines five steps of need analysis:

1. Identify the users and uses of the need analysis;
2. Describe the target population and the service environment;
3. Identify the needs;
4. Assess the importance of the needs; and
5. Communicate the results.

In Needs Assessment: The State of the Art (United Way of Greater America, 1982), eight questions are offered as guidelines to assist the evaluator in designing a Needs Assessment model: (1) Who is in need? (2) What is needed? (3) Where are the services? (4) How much of each

service is needed? (5) Is the problem one of access and distribution? (6) What is not needed? (7) What will it cost and (8) How can it be funded? T-D Acres and Metro staff and funders required answers to all of these questions and were prepared to develop an appropriate needs assessment.

There are a number of models available for the Needs Assessment evaluator. The United Way of Greater America, for example, proposes two categories for use in a Needs Assessment design. The first is use of primary data (derived from going directly to individuals or selected groups and asking them about needs and problems). The second category employs use of secondary or tertiary data (including census tracts, service statistics and social indicators).

The Community Oriented Needs Assessment (CONA) model (Neuber, 1981) stresses the importance of establishing communication between consumers and the service providers through the use of face-to-face interviews. Because T-D Acres had no profile of the social needs of the various ethnic elderly residents, the CONA model's stress on communication with consumers was viewed by the student as a positive feature. The stakeholders agreed to use some of the components of the CONA model.

The model is designed to utilize information collected from three sources; demographic/statistical records; designated key informants; and individual

interviews with consumers. Because of time restrictions, only a few key informants were formally surveyed, and a modified CONA model was developed. It is recognized, however, that information from key informants is a vital component of the model, and that T-D Acres should consider conducting a small key informant survey in the future. The practicum examined data collected from two sources: demographic/statistical information and a sample of T-D Acres residents.

(1) Demographic and Statistical Information

- (a) Examination of T-D Acres records to determine a profile of present residents
- (b) After examination of records, decisions by T-D Acres staff, Advisor and the Student was made as to sampling procedures.
- (c) Examine the needs data identified by other planning systems (for example, ethno-specific agencies and the Social Planning Council).

2. Interviews with Ethnic Elderly Residents Currently Living in T-D Acres

A social needs assessment was conducted with a sampling of all able and willing ethnic residents and all able and willing dominant culture residents.

Survey Design and Research Instrument

Babbie (1986) states that there are a number of issues surrounding survey research in general. One issue is that respondents may have difficulty with disclosure of potentially sensitive information. Surveys can also be biased in their line of questioning or design, or too superficial to elicit meaningful responses. The elderly residents at T-D Acres posed some further challenges with regards to the survey's concept and design. For example, some of the ethnic elderly did not speak English. Many of the elderly were frail and had visual, speech and/or hearing impairments. Some of the elderly could not read or write. Epstein and Tripodi's (1977) six principles of questionnaire construction were particularly useful in developing a survey questionnaire that would be sensitive to these challenges. The principles deal with ensuring that the purpose, format, choice of questions and wording are clear, free from bias and appropriate to the target group. The authors stress the importance of providing information about the questionnaire to the participants and of conducting

pre-tests to clarify ambiguity and eliminate biased or unnecessary questions.

Following Epstein and Tripodi's advice, great care was exercised in designing an appropriate survey questionnaire. Several community survey questionnaires were consulted for format, content and wording. Discussions with stakeholders, residents and Advisors provided further examination of the purpose of the questionnaire and any possible issues. Epstein and Tripodi also caution the evaluator to carefully debate whether the questionnaire should be self-administered. In light of the fact that many T-D Acres residents posed a number of language and health challenges, it was imperative that the questionnaire be conducted face-to-face and, in some cases, with the assistance of interpreters. The two pre-tests, conducted with ethnic minority residents, alerted the student to a myriad of issues related to use of jargon, clarity of the questions and cultural appropriateness of certain concepts.

The format of the questionnaire included a combination of open and close-ended questions, use of Likert, matrixes and nominal scales. Attention was given to the length of the questionnaire. Despite revisions, however, many interviewers and residents complained that it was far too long.

The residents' physical frailty was also of concern. Gibson and Aitkenhead (1983) examined the advantages and disadvantages associated

with interviewing older people. Their observations were based on a large-scale survey which they conducted on 1,051 people aged 60 and over, in Sydney, Australia. The authors anticipated problems related to the physical and mental health status of the elderly, respondent fatigue, the acceptability of particular questions and the suitability of certain formats. Gibson and Aitkenhead found that generally, physical and mental frailty and respondent fatigue did not pose too many interviewing difficulties. And while elderly respondents were somewhat reluctant to answer some questions (for example, about income), they were not reluctant to answer potentially emotional or threatening topics. The authors found that the main advantages were those associated with high levels of co-operation and interest and few limitations on time available to respondents to complete the interview.

Based on informal meetings with T-D Acres residents, it was likely that they would also be co-operative and would have time available to answer questions. Their health and stamina, however, remained a possible problem. Because of this possibility, interviewers were instructed to offer the respondents the option of completing the survey in more than one interview and in a variety of settings (including resident's room, the cafeteria or lounge).

Ethnicity and Aging

Much of the literature on ethnicity and aging is tailored to the American context, emphasizing race instead of ethnicity. Some recent Canadian work, for example, Driedger and Chappell's work (1987), urge more research on relevant Canadian issues of ethnicity, particularly as related to the experiences of the white ethnic minority elderly.

A number of issues concerning ethnicity and aging have been identified in both the American and Canadian literature. The questions of concern to the student and T-D Acres stakeholders were related to long-term care. An assumption often made by social and health workers is that ethnic minority elderly are more likely to be looked after by their family rather than be institutionalized. A second question involves the circumstances regarding institutionalization. For example, are ethnic minority elderly more likely to be institutionalized prematurely than are dominant culture elderly?

Other issues of specific relevance to the T-D Acres needs assessment are related to the ethnic minority's general awareness and use of community services. For example for many elderly members of ethnic minority groups, difficulties with language and the inability to express their personal feelings with staff whom they perceive to be in authority positions, build barriers that prevent them from accessing available health

and social services. Underutilization of these services is often the result (Ujimoto, 1987; Begin, 1982). T-D Acres staff was interested in examining whether their ethnic minority residents were aware and making use of services available to them. They were also interested in determining what, if any, barriers existed that would prevent their participation.

In addition to culture and language, there may be other factors to consider when addressing the issues of service delivery to the ethnic minority elderly. Many writers assert that the history of prejudice, poverty and/or discrimination experienced by ethnic elderly when they were young results in further disadvantages in their old age (Ujimoto, 1987; MacLean and Bonar, 1983, 1985).

A study conducted by Havens and Chappell (1983) deals with the issue of the existence of a 'triple jeopardy', or disadvantages experienced in life because of age, sex and ethnicity. The original data from the analysis were part of the Aging in Manitoba Study (Manitoba Department of Health and Social Development, 1985), a field survey of the unmet needs of 4,805 elderly Manitobans.

The study measured the level of need in nine areas: psycho-social functioning, household maintenance, economic well being, accessibility to resources and availability of resources. Havens and Chappell found triple

jeopardy confirmed for elderly women of Polish, Russian and Ukranian descent with regards to the mental functioning category. Also, Havens and Chappell found triple jeopardy confirmed at the objective level, but not perceived at the subjective level. In addition, Havens and Chappell reported that for each ethnic group studied, most elderly persons had unmet need in each need area. Furthermore, the highest unmet need area in all ethnic groups was the need for accessibility to resources (p. 121).

Gelfand (1982) addresses some particular service issues for ethnic elderly persons. He states that a number of considerations must be made prior to the development of programs. First, is that any discussion of aging and ethnicity is broad and complex. He states that first generation immigrants, for example, may have maintained values and traditions from their country of birth. On the other hand, some immigrants may reject certain aspects of their culture and develop changes in values and attitudes. Gelfand also cautions that first generation immigrants may have very different needs than third or fourth generation ethnic minorities.

Gelfand describes factors that need to be taken into account in the planning of programs and services for ethnic minority elderly, including:

- (1) Lack of knowledge on the part of ethnic minority aged people about other cultures

- (2) Lack of knowledge of available services
- (3) Lack of utilization of available services
- (4) Strong preferences to maintain ethnic minority cultures.

Gelfand also found that while studies regarding the attitudes of ethnic minority groups toward caring for elderly relatives have demonstrated strong agreement that elderly relatives should be cared for by family members, he cautions that a number of factors may influence changes in attitudes. For example, he cites chronic illness and families where both husband and wife working as situations which would alter many dynamics. In fact, such circumstances were evident in the circumstances surrounding institutionalization of many T-D Acres residents including the dominant culture residents.

Markides and Mindel (1987) also question whether or not ethnic minority groups do in fact prefer to take care of their own elderly. The authors state that this assumption has led to many organizations and institutions not developing services for these target groups.

MacLean and Bonar (1983, 1985) reported on the difficulties experienced by elderly ethnic minority persons when they are institutionalized in facilities that have been accustomed to serving members from the dominant culture group. MacLean and Bonar stated that the elderly ethnic minority person faced three difficulties upon entering a

mainstream institution: loss of family, loss of culture and loss of community. In addition, those ethnic minority elderly who do not speak English or speak with an accent are unable to communicate their feelings and are often met with lack of understanding by staff. As Driedger and Chappell (1987) suggest, the insensitivity of staff may not necessarily stem from prejudice, but from the lack of knowledge about a culture, the needs of some ethnic groups and an insensitivity to cultural nuances. Unfortunately, these circumstances can produce results that are as harmful as overt prejudice and discrimination.

Driedger and Chappell recommend a number of measures to deal with the mainstream institution's lack of knowledge or insensitivity to the needs of ethnic minority elderly persons, including training for staff, communication with ethnic elderly persons regarding their needs and the consideration that institutions develop culturally sensitive programs.

Increasingly, social and health organizations are beginning to consider and plan programs designed to address their organization's ability to serve ethnic minority groups. A number of models exist which address multicultural change. A needs assessment provides a logical starting point. Communication with the intended consumers around their service delivery needs is a major positive feature of many needs assessment models. The needs assessment of ethnic minority residents at T-D Acres recognizes the importance of establishing communication with the

residents. It also demonstrates a confidence that multicultural change begins with this vital step.

IV. METHODOLOGY

PHASE ONE: EVALUABILITY AND ORIENTATION

The first task that required attention during the early stages of the practicum was to negotiate the terms of agreement and reference regarding the nature and scope of the project. Discussions were held in May and June 1988 with Joann Christensen, Policy Co-ordinator; Lynn Morrow, Policy Co-ordinator; and Lyn Carpenter, Project Officer, concerning the proposal for the needs assessment and leadership of the project. After further discussion with Caryl Arundel, Director of the Policy and Planning Division, Community Services Department and some revisions to the proposal, an agreement was reached for the student to proceed with the practicum.

Phase One contained two distinct areas of activity: Evaluability/Orientation/Information Gathering; and Preliminary development of the Survey Instrument.

Evaluability/Orientation/Information Gathering

After an initial meeting with George Humble, Administrator of T-D Acres, Lyn Carpenter and the Acting Supervisor of the Social Work Department, Monika Samu, an office was arranged on-site. A number of meetings were scheduled early in June regarding the practicum. First, the proposal was to be presented at the Metro Toronto Homes for the Aged Advisory Committee. Since there was no quorum, the proposal discussion was postponed. Second, a Steering Committee was struck by George Humble and the Student and included Joann Christensen, Policy Co-ordinator; Margaret Carruthers, Program Supervisor, Community and Social Services, Province of Ontario, Julie Overs, Board Member T-D Acres, Norma Fieldhouse, Board Member T-D Acres and Lyn Carpenter, Project Officer. The Steering Committee was to provide insight, expertise and experience in the field of gerontology, ethnicity, and/or research techniques. It also assured some commitment for and involvement in, the practicum by some of the stakeholders.

Orientation also included participation in several departmental meetings, including the T-D Acres management meetings, Social Work and Nursing departmental meetings. In addition to these, individual meetings took place with the Directors of Activation and Chaplaincy. The purpose of the student's involvement with the meetings was to explain the practicum and to enlist support and assistance. Meetings were also held individually

with the social workers, nursing supervisors and activationists assigned to each of the floors. During the individual meetings, the T-D Acres resident list was analysed in terms of any health restrictions that would prohibit the resident from participating.

A meeting with the Residents Council was also scheduled in order to introduce the student and the nature of the needs assessment. The Residents' Council members approved the study.

The student also submitted the Proposal to the Metro Toronto Homes for the Aged Research Committee for approval. Dr. Goldlist, chair of the Research Committee approved the proposal. The student also sought and was granted permission from the Ontario Human Rights Commission to investigate the ethnicity of residents living at T-D Acres.

A number of organizations were contacted in order to secure up-to-date statistics on the ethnic composition of Toronto and East York residents and any information on studies pertaining to ethnicity and aging. Greg Daly, Policy and Planning Analyst with East York City Hall provided 1986 STATS Canada information regarding the ethnic composition of the general population of East York as well as the ethnic composition of the population over the age of 65. STATS Canada had no published 1986 statistics pertaining to the ethnic composition of Metro Toronto residents. The Ethno-Cultural Data Base at the Province of Ontario provided some

general statistics regarding immigration patterns to Ontario. Lyn Carpenter secured 1986 STATS Canada compilation of the ethnic composition of Metro Toronto.

The student also met with Charles Smith, Race and Multicultural Relations at City Hall, regarding recent studies conducted by his department, and to share information. Margaret Carruthers, at the student's request, provided the Provincial Government's Multicultural Survey results. The report dealt with a survey of all Ontario funded agencies and their services to ethnic minority clients. In the search for any information on Ethnicity and Aging, two organizations were contacted, The Ontario Senior's Advisory Committee and the Senior's Department at the Province of Ontario. While representatives from both expressed a keen interest in the area, both stated a lack of Canadian documentation on the subject.

Preliminary Development of the Questionnaire

Preparations for the questionnaire began in the proposal phase, as the student provided an outline of possible needs to be assessed. In subsequent meetings with T-D Acres staff and the Administrator, the goals and objectives of the needs assessment were discussed and analysed. Other discussions relating to the role and mandate of departments; activities and interventions provided; and forms and documentation

utilized, assisted the student with developing areas of enquiry for the questionnaire.

A meeting with an outreach worker in the Social Work Department, provided some information about the assessment responsibilities of the Social Work staff. One tool used by the Social Workers is a test to determine cognitive functioning. Discussion of the administering of the Folstein test in English or French only raised some further questions for the student. For example, is the test culturally appropriate? Would it be appropriate translated into other languages? Further discussions determined that T-D Acres brochures and forms are provided in English only. Also non English-Speaking applicants must generally rely on a family member to interpret during intake/assessment interviews. This is because most T-D Acres Social workers are not bilingual and do not have a systematic approach to using interpreters from within City Hall or from a roster of volunteers.

Reference materials during the preliminary development of the survey instrument found to be particularly useful were:

- Enjoying Research? A 'How -To' Manual on Needs Assessment,
Ministry of Tourism and Recreation, Province of Ontario, 1982

- Needs Assessment A Model for Community Planning, Keith A. Neuber and Associates, Beverly Hills: Sage Publications, 1981
- Research Techniques for Program Planning, Monitoring and Evaluating, New York: Columbia University

PHASE TWO: PRE-ASSESSMENT

The Pre-Assessment Phase contained aspects of the Practicum that overlapped with Phases One and Three. The major areas of particular importance to the Pre-Assessment Phase were, Outreach Strategies with Residents; Sampling Procedures; Revision of the Questionnaire; and Pre-Testing of the Questionnaire.

Outreach Strategies with Residents

An important step in conducting the survey was in providing information to the residents about the nature of the needs assessment, and the identity of the student, and to ask the residents to consider participating in the survey. In early July, a letter of introduction (See Appendix I) was written to all residents, explaining general aspects of the survey. The letter was not translated into other languages because of lack of time and resources. However, bilingual interviewers provided explanations of the contents of the letter in person.

Dominant culture, as well as ethnic minority residents would be asked to participate. With the assistance of two T-D Acres Activationists, the letters were hand-delivered and personal introductions were made with all potential participants. This was particularly useful for at least three reasons. First, it established face-to-face contact with residents allowing for any clarifications or questions. It also allowed the student and the resident to become acquainted with one another. Second, it alerted the student to residents' special needs (for example, who would need an interpreter or who was hearing impaired). Third, it allowed for some immediate "reaction" to the survey (for example, who was interested in participating). The same letter of introduction was printed in The Walrus, the T-D Acres Newsletter, and was read during the daily morning public address announcement schedule. The face-to-face introductions with the ethnic minority residents indicated that most could speak English. Ten out of 23 could not speak English and would require interpreters.

Sampling

After the introductions, it became apparent that some of the original information provided by the Social Workers and Head Nurses regarding the ability of the residents to participate would require revision up until the last days of the survey. For example, some of the residents who were rated as alert and able, became ill or were hospitalized. Others were clearly not mentally alert enough to participate.

It was decided that the listing of able and alert residents would comprise the sample group. Since 55-60% of T-D Acres residents are cognitively impaired, these residents would not be included in the sample. The first listing of the sample group represented 100 out of 194 residents from the dominant culture group, and 29 out of 46 of the ethnic minority group. The planned sampling procedure was to randomly select a number and then choose every second name until one half of the 100 dominant culture residents had been selected. All able ethnic residents would comprise the ethnic minority sample group. A further discussion of the changes in the sampling procedure will be discussed in Phase III: The Needs Assessment.

Revision of the Questionnaire

At least five drafts of the questionnaire were made. Each attempt resulted in more streamlined and straight-forward questions. Consultations with the Steering Committee and City Hall policy and planning staff provided some assistance with wording and order of questions. During this time, the issue of a Proxy Questionnaire, to be completed by family members of cognitively impaired residents, was discussed. It was decided that due to time restrictions, a Proxy Survey would not be conducted. Another issue discussed was the appropriateness of allowing residents to ask a family member or friend to observe or participate in the Questionnaire. It was felt that, particularly for ethnic minority residents who could not speak English, a choice to invite a family

member to the interview could help them feel more comfortable. Two ethnic minority residents chose this option. Also, a consent form was drawn up by the student, and was attached to each interview schedule. The consent form briefly outlined the purpose of the study; the voluntary nature of participation; the resident's right to ask a significant other to attend the interview; and the confidentiality of the responses. The consent form also identified the student (See Appendix II).

Pre-Testing of the Questionnaire

Two pre-tests with four ethnic minority residents were conducted, to test for reliability and face validity. A number of important issues emerged.

1. Because of the target group's age and health, difficulty with the English language and/or health impairments (such as hearing or vision loss), the interview would require at least one hour. Residents would be offered the opportunity to complete the survey in two or more sittings, if they became fatigued.
2. Many concepts were alien to the respondents. For example, "ethnic identity", "service delivery", and "intake procedure" would require clarification.

3. Many questions were redundant, cumbersome or inappropriate. For example, questions regarding income level prior to entering T-D Acres were felt to be inappropriate by some residents.
4. Some questions sparked sad feelings or other incidents that required much discussion and illustration. A wealth of anecdotal information assisted the student develop a keener perspective of the scope of the project and an appreciation of the residents.
5. Some of the residents were quite isolated and viewed the interview as a gesture of friendship. Others required extra time to become acquainted with the questions and to focus on the concepts.

The pre-tests were invaluable. They helped provide information that assisted the student with streamlining the questions and addressing cultural appropriateness. Topics for discussion for the interviewer training sessions also emerged as a result of the pre-tests.

PHASE THREE: THE NEEDS ASSESSMENT

The Needs Assessment required a series of tasks to be undertaken, many beginning in late June. The major tasks were Interviewer Recruitment and Training; Lead in Announcements for Residents; The Survey; and Emergent Sampling Issues.

Interviewer Recruitment and Training

In early July, negotiations were made with Joann Christensen, regarding payment for any interviewers to be recruited. Approval was granted and the rate of pay was established.

After introductions were made with the residents, it became evident that ten persons could not speak English. On July 18, a memo was sent to all service department managers and to the Administrator requesting interviewers for the survey. Staff with Italian, Greek, Chinese, Japanese, Portuguese, Czechoslovakian and Estonian language skills were required. On the same day the memo was released a Steering Committee meeting was held. At that meeting, the Administrator expressed an opinion that the majority of interviewers be recruited from outside the Home. Since the area of questioning could be regarded as sensitive (for example, rating nursing and medical care) he felt that some of the residents would feel uneasy about disclosing information to a staff member. It was unanimously approved that recruitment of interviewers would be done outside of T-D Acres. Six T-D Acres staff members from the Social Work and Activation Departments (some with second language skills) had expressed an interest in interviewing. It was decided by the Steering Committee that they could be involved in the survey, but assigned to residents who were not on their caseloads. Eleven interviewers, including the student and a resident's family member, were recruited from the

community. The interviewers were recruited on the basis that they held second language skills, experience in working with seniors and/or in social services. The following agencies were contacted and provided interviewers:

The Japanese Momiji Society at Castleview-Wychwood Towers

Woodgreen Community Centre

Canadian National Institute for the Blind

Columbus Centre - Villa Colombo

Czechoslovakian Social Services

Estonian Nursing Home

West Scarborough Neighbourhood Community Centre

A two hour interviewer training program was designed by the student (See Appendix IV). The major areas discussed were:

1. the nature of the project
2. review of the questionnaire
3. protocol
4. role play
5. questions
6. distribution of resident lists

During the two week survey, the student remained on site to provide clarification, advice and support for the interviewers. A number of noteworthy incidents occurred with a few of the interviewers that required the students intervention. For example, one interviewer, although experienced with active and well seniors, became upset at seeing "so many old, frail people just sitting here" and saw them as being sad and desperate. Another interviewer stated he could not go on with the interviews, feeling a profound sense of identification with some of the more isolated residents who could not speak English. He stated he saw himself in the residents. For all of the interviewers, the interviewing process was an exhausting and challenging experience.

The Lead In

Because many of the residents expressed hearing, vision and memory loss, it was imperative to ensure that reminders of the survey were organized as close to the designated survey weeks as possible. One week prior to the survey, a daily announcement was made on the public address system, reminding residents that interviewers would be asking them to participate in the needs assessment. Three weeks prior to the survey, a weekly announcement was placed in the The Walrus, the resident newspaper. Wherever and whenever possible, the student provided face-to-face reminders with staff and residents. For the ten residents who spoke no English, they would receive a full explanation and introduction by

bilingual interviewers during the two week survey. Wherever possible, family members, staff interpreters or friends were enlisted to provide information before the two week survey.

Finalization of the Interview Schedule

Right up until a week before the survey was conducted, revisions were made to the questionnaire (See Appendix III). The final interview schedule addresses the following:

- 1) Demographic data
- 2) Intake/Assessment Procedures
- 3) Friends and Family Support
- 4) Awareness of Services at T-D Acres
- 5) Communications with Staff and Residents
- 6) Health Care
- 7) Nutrition
- 8) General Life Satisfaction

The Survey

The survey was intended to last two weeks, from August 8 to August 19. It was extended by one week (to August 28, 1988). As interviewers began the survey, meeting and arranging times with residents, it became necessary to add or delete names from the original sample list. This was due to residents' poor health, disinterest, or changes in status (for example, moving to another institution, death).

All able and well persons living in T-D Acres were asked to participate in the survey. Of 100 healthy dominant culture residents, 47 agreed to participate. 21 refused, and 31 were not healthy enough (physically ill or cognitively impaired) at the time of the survey. One death occurred during the time of the survey. Of the 46 ethnic minority residents, 23 agreed to participate. One resident refused to participate and 21 were not healthy enough (physically ill or cognitively impaired) at the time of the survey. One resident was in hospital.

It was decided that all residents who received an 'unsure' rating by the T-D Acres staff would be asked to participate. This was done to ensure that any extenuating circumstances, such as recovery from illness, effects of medication or alertness could be taken into consideration regarding their ability to answer questions and recall information.

On the whole, residents were co-operative but unsure of whether the report would make a difference in their life. Many residents expressed frustration with the summer heat and requested interviewers to return during cooler days. It is noteworthy that an unusually long heat wave marked the summer of 1988 commencing in June and lasting well into late August. For many residents, the lack of air conditioning in T-D Acres was an immediate and enormous problem. It is no wonder that one resident asked an interviewer to "come back on Christmas day, when it's snowing."

PHASE FOUR: THE PRACTICUM REPORT

Phase Four, the completion of the Practicum report, contained four components. They were Compilation and Analysis of the Survey Data; Completion of the Literature Review; Presentation of Survey Findings to T-D Acres Steering Committee and other Stakeholders; and Presentation of the Report to the University of Manitoba Advisory Committee.

Compilation and Analysis of the Survey Data

Originally scheduled to be completed by September 9, 1988 compilation and analysis of the survey data did not begin until late November. The computer analysts assigned to the T-D Acres project were otherwise occupied with a number of departmental projects. These were to receive priority and it was not possible to input the T-D Acres survey data until

the other projects were completed. This regrettably caused a delay in the completion of the practicum report by several months.

Completion of the Literature Review

The literature review began at the stage of the development of the practicum proposal, submitted to the Community Services Department of Metro City Hall in April, 1988. The student's interest was in issues related to the multicultural change processes in mainstream organizations. Throughout refinement of the proposal, further discussions with stakeholders, and during the entire practicum, the literature consulted by the student was analyzed and documented. Some of the literature, for example community manuals on the construction of questionnaires, was not necessarily analysed formally for the Literature Review in Chapter Four but was referred to in other appropriate sections and is documented in the bibliography.

The literature reviewed in Chapter Three consisted of the sources which the student found particularly useful in the context of the practicum at True Davidson Acres. The literature review provides examination of multicultural change in mainstream organizations. It also reviews the challenges faced by some mainstream organizations that have attempted multicultural change, for example the Toronto Board of Education and the Y.W.C.A. The evaluation research and needs assessment literature helped

the student focus on some of the more practical issues of beginning a change process; that is, communication with the intended target group, the ethnic minority residents living at T-D Acres. Finally, research was conducted into ethnicity and aging, as a means of developing some insight into the residents of T-D Acres and questions associated with the practicum.

Presentation of Survey Findings to T-D Acres Steering Committee and other Stakeholders

Meetings with Steering Committee members were regularly scheduled throughout the practicum. The meetings were scheduled to provide updates on the numerous components of the practicum, for example, survey design or volunteer recruitment. Furthermore, as the survey began and information became available from the residents, the student kept the Steering Committee members abreast of any trends or other noteworthy issues.

Plans for dissemination of the findings to T-D Acres residents were also made. George Humble, Administrator of T-D Acres will arrange a meeting with residents and the findings will be discussed. Consideration must be given to providing interpreters for non-English speaking residents. In addition, the Metro Home for the Aged Advisory Committee expressed interest in the survey and requested a report of the findings.

Presentation of the Report to University of Manitoba Advisory
Committee

The presentation of the practicum report to the University of Manitoba Advisory Committee was not scheduled until Spring of 1989 due to the delays encountered with the survey data input and the time taken to write and revise this practicum report.

V SURVEY RESULTS AND RECOMMENDATIONS

The needs assessment examined seven areas related to living in a long-term Home for the Aged, namely, Intake/Assessment Procedures; Friends and Family Support; Awareness and Use of Services; Communication with Staff; Health Care; Nutrition; and General Life Satisfaction. In addition, some demographic data was collected with the purpose of determining some characteristics of the ethnic minority and dominant culture residents. Highlights of the results of the survey will be discussed. Charts will be utilized wherever possible. Recommendations, based on discussions and analysis of the survey results with Steering Committee members, will follow each area examined.

I. Demographic Information

A) Number of Respondents

| | <u>No.</u> |
|----------------------------|------------|
| Ethnic Minority Residents | 23 |
| Dominant Culture Residents | 47 |
| Total | <u>70</u> |

Percentages listed throughout this section will reflect these totals.

- B) The average age of sixty-four respondents who completed the question pertaining to age, was 84.
- C) Over ninety-two per cent of the interviews took one hour or more.
- D) While all respondents were offered the choice of allowing a significant other to be present during the interview, only six chose to do so. Of these six, four were ethnic minority residents.
- E) Country of Origin of Respondents

| Born | Number | Percent |
|-----------------|--------|---------|
| England | 8 | 11.6 |
| Ireland | 1 | 1.4 |
| Scotland | 6 | 8.7 |
| Italy | 4 | 5.8 |
| Poland | 1 | 1.4 |
| Yugoslavia | 2 | 2.9 |
| Czechoslovakian | 2 | 2.9 |
| Latvia | 1 | 1.4 |
| Holland | 1 | 1.4 |
| Romania | 1 | 1.4 |
| Portugal | 1 | 1.4 |
| China | 1 | 1.4 |

| Born | Number | Percent |
|-------------|---------------|----------------|
| Canada | 34 | 49.3 |
| Finland | 1 | 1.4 |
| Jamaica | 2 | 2.9 |
| Armenia | 1 | 1.4 |
| Madagascar | 1 | 1.4 |
| Estonia | 1 | 1.4 |
| Japan | 1 | 1.4 |

No single ethnic minority group is most predominant at True Davidson Acres. Instead, ethnic minority residents are fragmented amongst more than eighteen cultural groups. Ten out of twenty-three ethnic minority residents do not speak English.

The fact that there is a wide variety of ethnic minority groups represented in small numbers posed some challenges when designing culturally appropriate interview questions. While two pre-tests were conducted with residents from some ethnic minority groups and were altered according to their comments and reactions, the alterations were not adequately sensitive for all the other ethnic minority groups represented at True Davidson Acres. For example, while questions regarding family support were acceptable to the Italian, Czechoslovakian and Portuguese residents, it was an issue of great conflict for the Chinese and Japanese residents. These residents expressed feelings of grave shame at being placed in a Home for the Aged by their family and refused to answer any subsequent questions.

Another challenge lies in any program development proposal simply because the numbers of residents in each ethnic minority group is small. In most cases there are only one or two people who comprise the ethnic minority group. The recruitment of ethno-specific staff to carry out programs, or develop activities to meet the needs of a particular group, will be fraught with questions about justification of allocated time and resources to relatively few residents. In light of this challenge, wherever possible, recommendations were developed to utilize existing community agencies as supports to True Davidson Acres.

Some general findings that were noteworthy concern the question of how persons from different cultures view institutionalization. Some of the literature on aging (Gelfand, 1982; Markides and Mindel, 1987) questions whether ethnic minority groups are less inclined to living in institutionalized long-term care facilities than are dominant culture groups. Indeed, this was an assumption often put forth by key informants and various staff associated with the survey. In fact, over fifty per cent of the dominant culture residents stated they had little or no choice in their decision to move to a Home for the Aged. Their anecdotal information was no different than the ethnic minority residents. Many spoke with great sadness and frustration about their reluctance to give up their home and independence. A few spoke with fierceness about not knowing about other options, about being uninformed at the time of decision making. While the dominant culture residents had a higher

likelihood to have some say in their decision to move to a Home for the Aged than the ethnic minority residents, attitudes about institutionalization remain the same. They would not accept it if they were not forced by circumstance or ill health to do so.

II. Intake and Assessment

Three major areas were examined in the Intake and Assessment section: (1) motivation for moving to T-D Acres; (2) perceived Choice in moving to T-D Acres, and (3) language/cultural issues associated with Intake and Assessment.

1. Motivation

Table 1. Reasons for Moving to T-D Acres

| Reason for Move | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Planned Move | 0 | (0%) | 5 | (10.6%) |
| 2. Need of Company | 0 | (0%) | 2 | (4.3%) |
| 3. Comfort and Security | 2 | (8.7%) | 7 | (14.9%) |
| 4. Medical Care | 10 | (43.5%) | 18 | (38.3%) |
| 5. Advice of Others | 3 | (13.0%) | 7 | (14.9%) |
| 6. Do Not Recall | 0 | (0%) | 1 | (2.1%) |
| 7. Other | 4 | (17.4%) | 5 | (10.6%) |
| 8. Did Not Answer Question | 4 | (17.4%) | 2 | (4.3%) |

No ethnic minority residents stated that their move to T-D Acres was a planned move as part of retirement, including a need for company.

Fifty-two per cent. of ethnic minority residents stated that their move to T-D Acres was as a result of their need for comfort and security or nursing, physical and/or medical care.

Ten per cent. of dominant culture residents stated that their move to T-D Acres was a planned move as part of retirement including a need for company. Similarly, fifty-two per cent. stated that their move to T-D Acres was a result of their need for comfort and security and/or nursing, physical and medical care.

2. Perceived Choice

Table 2. Person who Made the First Contact for Application to T-D Acres

| First Contact | Ethnic Minority | | Dominant Culture | |
|----------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Self Referral | 1 | (4.3%) | 6 | (12.8%) |
| 2. Family Member | 9 | (39.1%) | 16 | (34.0%) |
| 3. Doctor | 2 | (8.7%) | 7 | (14.9%) |
| 4. Community Worker | 2 | (8.7%) | 7 | (14.9%) |
| 5. Don't Recall | 4 | (17.4%) | 3 | (6.4%) |
| 6. Other | 2 | (8.7%) | 5 | (10.6%) |
| 7. Did Not Answer Question | 3 | (13.0%) | 3 | (6.4%) |

Over fifty-six per cent. of all ethnic minority residents stated that they did not initiate contact with T-D Acres. Over sixty-three per cent. of all dominant culture residents stated they did not initiate contact with T-D Acres.

Table 3. Was enough choice given in your decision to move to T-D Acres?

| Choice | Ethnic Minority | | Dominant Culture | |
|----------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. A Lot of Choice | 2 | (8.7%) | 11 | (23.4%) |
| 2. Some Choice | 4 | (17.4%) | 5 | (10.6%) |
| 3. Not Enough Choice | 2 | (8.7%) | 5 | (10.6%) |
| 4. No Choice at All | 7 | (30.4%) | 19 | (40.4%) |
| 5. Did Not Answer Question | 8 | (34.8%) | 7 | (14.9%) |

The responses indicate that the dominant culture groups are more likely to have a lot or some choice in the decision to move to T-D Acres. Twenty-six per cent. of the ethnic minority residents stated they had a lot/some choice in their decision, compared to thirty-four per cent. of the dominant culture groups.

It is important to note, however, that a high percentage of both groups indicated a lack of choice in their decision. Thirty-nine per cent. of the ethnic minority residents stated they had not enough or no choice at all in their decision to move to T-D Acres. Over fifty per cent. of the dominant culture group stated they had not enough or no choice at all.

The anecdotal information provided by residents shed some light on these figures. Fifty-four residents expanded on their feelings regarding their choice in decision-making. Twenty-seven residents stated they were placed with no say in the matter. They stated that they did not realize that the placement would be permanent, or that the move was forced upon them by family members or doctors. Fifteen residents stated that their decision to move was based solely on the fact that they could no longer manage their own care, due to medical or nursing needs. Twelve persons stated that their decision to move was their own choice.

3. Language Issues

Two questions concerning language issues were asked, related to print material and assessment interviews.

Table 4. Should printed material be provided in the language understood by the applicant?

| Answers | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 18 | (78.2%) | 31 | (66.0%) |
| 2. No | 2 | (8.7%) | 4 | (8.5%) |
| 3. Don't Know | 0 | (0%) | 7 | (14.9%) |
| 4. Did Not Answer question | 3 | (13.0%) | 5 | (10.6%) |

In total, over seventy-five per cent. of all residents state that printed material pertaining to Metro Homes for the Aged (for example, brochures, applications) be provided in the language best understood by the applicant. A similar response was received from both groups who were not in favour. Eight per cent. of all residents did not think printed material should be provided in the languages understood by the applicant.

Table 5. Should interviews be provided in the language understood by the applicant?

| Answers | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 18 | (78.2%) | 36 | (76.5%) |
| 2. No | 0 | (0%) | 4 | (8.5%) |
| 3. Don't Know | 2 | (8.7%) | 2 | (4.2%) |
| 4. Did Not Answer Question | 3 | (13.0%) | 5 | (10.6%) |

There was a similarity in the responses among both groups. No ethnic minority residents were opposed to use of appropriate language in interviews. Eight per cent. of dominant culture groups stated they were opposed. In total, over seventy-five per cent. of all residents stated that interviews (intake interviews, assessments, Foltstein Tests) should be conducted in the language understood by the applicant.

Discussion

The questions regarding the Intake and Assessment procedure were designed to determine how residents viewed the process and their involvement in it. The student was alerted to some possible resident concerns during the two pre-tests. Firstly, all four residents, representing ethnic minorities, had difficulty understanding the words 'intake' or 'assessment'. Secondly, after the words were re-defined or explained the residents stated they were not involved in any such process. Similar sentiments were expressed by a number of T-D Acres residents from the ethnic minority and dominant culture groups. Some residents provided detailed descriptions of applications being made without their knowledge during a hospitalization or illness. Some stated that they would never have chosen to live in an institution unless they were forced to do so by extreme circumstances.

One of the major findings of the T-D Acres needs assessment concerned the attitude of residents toward living in a long-term care facility. Both dominant culture and ethnic minority groups stated that their decision to move to T-D Acres was based primarily on nursing/medical needs. Many recall a time of confusion, lack of information and crisis. These findings

are evidenced in the responses to the questions dealing with perceived choice and amount of choice involved with their decision. While the dominant culture groups stated they had a higher degree of choice, both groups indicated that decisions were primarily made by others.

The questions that dealt with language issues were developed to determine how residents feel about being able to read intake information and participate in assessments in the language with which they are most comfortable. While these questions were specifically geared to the ethnic minority residents and their possible needs, both groups were asked to respond to the questions. As indicated by the statistics over seventy-five per cent. of all residents were in favour of print material and interviews provided in the language understood by the applicant. Although no ethnic minority residents were opposed to use of appropriate language in interviews, eight per cent. of dominant culture residents were opposed. A possible explanation to the difference in attitude may be attributed to a lack of understanding of the question or the concept. It could also be an indication of some dominant culture residents' viewpoint that English is

the language of Canada and that all newcomers should learn to communicate in English.⁷

It is important to note that the issue of pamphlets and other intake material sparked a number of comments from dominant culture residents who stated they did not recall receiving any print material or applications related to T-D Acres. While it is likely that some residents may have been upset or in crisis at the time of their assessments and therefore may have forgotten any material, the issue of lack of information emerged several times throughout the survey. So much so, in fact, that the entire intake and assessment procedure deserves further study.

⁷ Assimilation theories, prominent in Canada since early settlement years, demanded that newcomers renounce their culture, language and values in favour of the beliefs and language of Anglo-Canadians. After World War I, melting pot theories emerged, recommending a merging of settled communities with newcomers in order to create a blended, new Canadian type. The theories of multiculturalism, pluralism or cultural pluralism developed with Canada's third wave of immigration, occurring after World War II. The theories encourage the preservation of the immigrant's culture, values and language while living in a Canadian society. Multiculturalism gained prominence in the 1960's and 1970's as well-established ethnic groups sought to obtain official recognition within a country which proclaims two official languages and two official groups (English and French). The multicultural policy of 1971 was an assertion that Canada is a multicultural country (Palmer, 1984). However, Mallea (1984) found that the English language continues to exert considerable assimilative power among all groups. A number of T-D Acres residents, from both dominant culture and ethnic minority groups referred to English as being the language of Canada.

Intake/Assessment Recommendations

The following recommendations and those throughout this chapter are based on analysis of the survey data and discussions with Steering Committee members and residents.

1. T-D Acres examine intervention strategies at the intake/assessment stage to determine whether applicants are given suitable time, choice, information regarding long-term placement or alternatives.
2. T-D Acres examine, in consultation with appropriate ethno-cultural specialists, the cultural appropriateness of their intervention at the intake/assessment stage.
3. T-D Acres examine the cultural appropriateness of brochures, applications, testing utilized by Metro Homes for the Aged.
4. T-D Acres in conjunction with the entire Metro Homes for the Aged Division, develop multi-lingual, culturally appropriate print material for use with applicants and residents.

5. T-D Acres, in conjunction with the entire Metro Homes for the Aged Division, to develop cultural interpreter training program for staff and/or volunteers for the development of a multilingual worker resource for use in intake/assessment and on-going intervention with residents.

6. T-D Acres, in conjunction with the entire Metro Homes for the Aged Division, explore the feasibility of creating a position whose responsibilities would include co-ordinating services for ethnic minority applicants, residents and their families. Since an earlier request from the Social Work Department concerning intercultural training for staff and volunteers was made, the position would also include responsibility to co-ordinate training programs in consultation with the Staff Development Co-ordinators for the Homes for the Aged Division.

III. Friends and Family Support

All residents were asked questions pertaining to their family and social supports.

Table 6. With how many people do you have close relationships?

| Number of Persons | Ethnic Minority | | Dominant Culture | |
|----------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. 0 | 1 | (4.3%) | 3 | (6.3%) |
| 2. 1-3 | 11 | (47.8%) | 15 | (31.9%) |
| 3. 4-5 | 3 | (13.0%) | 11 | (23.4%) |
| 4. More than 5 | 4 | (17.4%) | 16 | (34.0%) |
| 5. Did not answer question | 4 | (17.4%) | 2 | (4.2%) |

In total, over eighty per cent. of all residents have at least one person with whom they have a close relationship. However, more dominant cultural residents have more close relationships than do the ethnic minority residents.

Table 7. Do you have anyone besides staff to call for help?

| Answers | Ethnic Minority | | Dominant Culture | |
|----------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 16 | (69.5%) | 41 | (87.2%) |
| 2. No | 3 | (13.0%) | 2 | (4.2%) |
| 3. Did Not Answer Question | 4 | (17.3%) | 4 | (8.5%) |

Seventy-eight per cent. of all residents stated they had someone besides staff to call for help. The percentage of dominant culture residents who said they had someone besides staff to call for help was over eight-seven per cent. This figure reinforces the findings from the previous question related to numbers of the relationships. That is, dominant culture

residents have a greater likelihood to have more contacts with persons outside T-D Acres.

Table 8. Do you ever feel isolated or lonely?

| Answers | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 11 | (47.8%) | 15 | (31.9%) |
| 2. No | 5 | (21.7%) | 24 | (51.0%) |
| 3. Did Not Answer Question | 7 | (30.4%) | 8 | (17.0%) |

In general, ethnic minority residents are more likely to feel isolated or lonely than the dominant culture groups. Forty-seven per cent. of ethnic minority residents stated they feel isolated or lonely at times, compared to thirty-one per cent. of the dominant culture residents. Thirty per cent. of the ethnic minority residents did not answer the question, somewhat qualifying the overall results.

Discussion

"I feel that I am a cat sitting on a fence and the backyard is full of dogs."⁸

⁸ Quote from an ethnic minority resident

The questions pertaining to friends and family support were designed to determine the degree of support and the incidence of isolation felt by the residents. The statistics indicate that over eighty per cent. of all residents have at least one person with whom they have a close relationship. Some of the literature on aging suggests that most elderly people are not isolated from their family or friends.

However, it is not known which ethnic groups have more ties with families and friends (Driedger and Chappell, 1987). Furthermore, most of the studies related to friends and family support of ethnic elderly are confined to those ethnic elderly living in the community. Whether ethnic minority elderly maintain close relationships with family and friends once inside a long-term care facility remains a complex question.

The statistics concerning the question of whether residents feel isolated or lonely indicate that forty-seven per cent. of ethnic minority residents feel isolated or lonely. Thirty-one per cent. of dominant culture residents stated they feel isolated or lonely. A few insights into these high statistics emerged from a review of the intake and assessment procedures. A number of residents expressed strong feelings of a lack of involvement in the intake process; some residents spoke of being forced to move by a family member or doctor. In light of such conflicts in families, some of the residents spoke of a break or severance from their family. Almost all of the ethnic minority residents expressed a sense of loss of

their family and connection with their community. Maclean and Bonar (1983; 1985) reported that ethnic minority elderly experienced a loss of family, culture and community when they entered a mainstream institution. Not being able to communicate in one's own language on a day-to-day basis surely contributes to the alienation expressed by some of the ethnic minority residents. It is also likely that a perceived loss of status or honour can affect feelings of self esteem and interaction with friends. For example, six ethnic minority residents from Chinese, Japanese, Italian and Greek backgrounds, related a sense of shame or despair at having been placed in an institution and that they would not wish their friends to discover their situation.

It is also important to note that most residents relied on one or two close family members or friends for friendship and contact. For ethnic minority residents, this contact was usually a son or daughter who often acted as an interpreter or intervener. In one extreme situation, an ethnic elderly married couple, with no living relatives, had not had a visitor from the outside in three years. The interviewer, a gentleman with appropriate language and cultural skills spent approximately three hours establishing a point of focus and connection for the survey questionnaire. Much of the time, he reported, was spent in developing rapport and trust.

As for the possibility of developing friends once a person moves into T-D Acres, the prospect looks grim. Residents experience a number of

challenges, for example, hearing and visual impairments, lack of mobility, frailty. For the ethnic minority resident who does not speak English, the challenge is an even greater one.

Recommendation

7. The Activation Department, in conjunction with the Social Work (and other) department(s), continue to recruit volunteers from diverse ethnic backgrounds to provide friendly visiting to ethnic minority residents.

Awareness and Use of Services

Six programs were surveyed to determine if residents were aware of their availability and if residents have made use of them. The program areas examined were Medical/Nursing Services; Dietary Services; Massage Therapy; Social work; Chaplaincy and Activation.

In general, all residents expressed a higher incidence of awareness of services than of actual use. The dominant culture residents rated higher percentages of awareness of services in all areas, than did the ethnic minority residents. The following charts do not include the category 'Did Not Answer Question' —therefore the figures do not add up to one hundred per cent. Some residents expressed a lack of interest in the subject and

an unfamiliarity with programs. The residents found this section exceptionally long and tedious.

A. Medical/Nursing Services

Table 9. Awareness and Use of Medical Referrals

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|-------------|---------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 16 (69.5%) | 2 (8.7%) | 13 (56.5%) | 5 (21.7%) |
| Dominant Culture | 41 (87.2%) | 2 (4.2%) | 30 (63.8%) | 13 (27.6%) |

Table 10. Awareness and Use of Dental Clinic

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|--------------|---------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 11 (47.8%) | 5 (21.7%) | 6 (26.0%) | 10 (43.4%) |
| Dominant Culture | 33 (70.2%) | 9 (19.1%) | 18 (38.2%) | 24 (51.0%) |

Table 11. Awareness and Use of Specialist Services*

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|---------------|--------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 7 (30.4%) | 10 (43.4%) | 5 (21.7%) | 12 (52.1%) |
| Dominant Culture | 20 (42.5%) | 18 (38.2%) | 8 (17.0%) | 30 (63.8%) |

* Specialist services may include psychiatry, gerontology, podiatry, etc.

Two points are noteworthy with regards to Medical/Nursing Services. One is that given that a high percentage of all residents stated that their move to T-D Acres was precipitated by medical/nursing needs, their awareness of medical and dental services was high. For example, 69.5% of the ethnic minority residents, and 87.2% of the dominant culture residents were aware of the availability of a medical doctor. Second, in each service area, the dominant culture residents are more aware and make more use of the services than do the ethnic minority residents.

Discussion

As reported previously, over fifty-two per cent. of dominant culture and ethnic minority residents stated that their decision to move to T-D Acres was based on medical/nursing needs and for comfort and security. The statistics indicated that both groups reported a higher awareness level in the medical/nursing category than in almost all the other service

categories. (The exception, as will be noted, was in the awareness level among dominant culture residents regarding religious services). However, the dominant culture residents rated a higher level of awareness and use than did the ethnic minority residents.

Some of the literature related to utilization of services by ethnic minorities sheds light on the findings. As Rees (1987) stated, a long history of exclusion, difficulties with language and a lack of sensitivity by professionals may pose barriers for ethnic minority groups. A number of writers have documented the use of alternative health philosophies among ethnic groups, including using folk healers, organic folk medicine and family networks (Guttman, 1979; Kim, 1983). Underutilization of medical and nursing services by the ethnic minority residents may be directly related to a difference in cultural orientation toward the concept of health care.

During the survey at T-D Acres, a number of residents from both groups made comments about such differences. For example, an Italian woman's main complaint of her health care was that she was not permitted to take her nightly drink of 'magnese', a type of carbonated mineral water that she said settled her down before bedtime. Her packets of magnese tablets had been removed from her by staff. The resident stated she felt this was unfair, that the tablets were not medication, and that she much preferred

her 'natural drink' to alternative medical prescriptions offered to her to aid her problem of constipation.

A Ukranian gentlemen went to great lengths to assure the interviewer he had avoided doctors all his life. He recalled that the period of time before Medicare was instituted in Canada was one in which poor people just made do with their own traditional methods of health care. Doctors were visited in extreme emergencies and hospitals were places where people died.

The one exception in the figures related to medical and nursing services, was the higher rate of utilization of specialist services by ethnic minority residents. A possible explanation of the findings may be that referrals to specialist services are generally initiated by a medical or nursing staff member and not necessarily by the ethnic minority residents.

Table 12. Awareness and Use of Massage Therapy Services

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|---------------|---------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 9 (39.1%) | 8 (34.7%) | 2 (8.6%) | 15 (65.2%) |
| Dominant Culture | 22 (46.8%) | 17 (36.1%) | 10 (21.2%) | 29 (61.7%) |

Residents may elect to use services of community massage therapists at their own expense. Generally, only residents who employed a massage therapist prior to moving to T-D Acres would utilize one while living at the Home. Because of the cost associated with massage therapy services, it remains a little used service.

C. Social Work Services

The Social Work Department provides psycho-social assessments for persons applying to T-D Acres. In addition, a test to determine mental functioning is conducted, utilizing the Foltstein Test. Social workers generally rely on the applicant's family members to provide interpreting services if the applicant does not speak English.

Family and individual counselling is provided for applicants and residents who demonstrate a need. Group counselling, including Alzheimer support groups are also offered to family caregivers.

Table 13. Awareness and Use of Individual and Family Counselling

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|---------------|--------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 8 (34.7%) | 9 (34.7%) | 3 (13.0%) | 14 (60.8%) |
| Dominant Culture | 22 (46.8%) | 21 (44.6%) | 6 (12.7%) | 37 (78.7%) |

Table 14. Awareness and Use of Group Counselling

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|---------------|--------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 2 (8.6%) | 15 (65.2%) | 2 (8.6%) | 15 (65.2%) |
| Dominant Culture | 23 (48.9%) | 20 (42.5%) | 5 (10.6%) | 38 (80.8%) |

Slightly less than thirty-five per cent. of ethnic minority residents stated they were aware of individual and family counselling services. Thirteen per cent. have made use of these services. In contrast, almost forty-seven per cent. of the dominant culture residents stated they were aware of social work services. Twelve per cent. have made use of the services.

Many residents did recall a social worker visiting them with information about T-D Acres. They did not recall using the Social Work Department once they moved to the Home. Another major difference in awareness of

services is evident with regards to Group Counselling. Only eight per cent. of ethnic minority residents stated they were aware and have used group counselling. Nearly fifty per cent. of the dominant culture residents stated they were aware of group counselling services. Only ten per cent. stated they used the service.

Discussion

One reason for the low awareness and use of services among ethnic minority residents may be due to the fact that all social work services are generally provided in English only. Furthermore, it is possible that present intervention strategies may be inappropriate for some of the ethnic minority applicants. For example, the Chinese and Japanese residents at T-D Acres stated to interviewers that placement in a Home for the Aged was considered shameful. They perceived that they had lost their honour and role of influence in the family. To allow a son or daughter to interpret or "speak for" the applicant could be viewed as reinforcement of the elderly person's loss of right to make his or her own decision. In fact, both the Japanese and Chinese residents insisted on outside interviewers rather than using family members as interpreters during the needs assessment survey.

The issue of privacy emerged in discussions with residents from both groups. Some dominant culture residents stated that any problems of

loneliness or worry must not be shared with staff members or any other professional because problems should be dealt with by families only. A few ethnic minority residents discussed their feeling of despair at being institutionalized but felt that they should not further add to their humiliation by admitting this to T-D Acres staff. It is extremely important to note, however, that interviewers reported very few instances where residents refused to speak about their feelings of loneliness, family relationships or causes of worry. There were two exceptions. One was the Japanese and Chinese residents who refused to answer the formal survey questions. However, they were willing to speak to the interviewers, in their own language, about their family and their unhappiness at being institutionalized. The other exception was the group of T-D Acres residents who did not want to participate in the survey and made it known from the outset. This would seem to indicate that with appropriate intervention strategies, perhaps more T-D Acres residents of both groups would make use of social work services. As Green (1982) noted, language is particularly important in pluralistic societies because it distinguishes one culture from another. Language is the device which people use to report their experiences. He stated that any approach to understanding cultural characteristics of a client must begin with the language the client uses to explain what is being experienced.

The ability to communicate in one's own language is just one of the issues which would have an impact on whether a person chooses to seek help.

Questions that need to be asked and examined further are how culturally sensitive are the existing social services and how can intervention strategies be developed for such a diverse group of residents? With the wealth of ethno-specific cultural, social and health agencies available in Metropolitan Toronto, a logical starting point would be consultation with the staff and volunteers of these agencies for their insight, expertise and collaboration.

Social Work Department Recommendation

8. That the Social Work Department examine the feasibility of enlisting assistance of ethno-specific workers from community agencies to (a) assist in developing appropriate intervention protocols for residents from ethnic minority groups; and (b) develop programs in conjunction with existing ones in the community for ethnic minority residents. For example, a community ethno-specific nursing home may conduct weekly counselling groups and T-D Acres residents could be invited to attend sessions. It would also seem that more outreach to residents is indicated. Normalization of feelings of shame, isolation might be an intervention strategy which social workers could use.

D. Chaplaincy

The Chaplaincy Department provides individual pastoral counselling as well as weekly and monthly inter-faith services. Referrals to community churches and religious organizations can also be made by the Chaplain, wherever appropriate.

Table 15. Awareness and Use of Religious Services

| | <u>AWARE</u> | | <u>USE</u> | |
|------------------|---------------|--------------|---------------|---------------|
| | Yes | No | Yes | No |
| Ethnic Minority | 14 (60.8%) | 4 (17.3%) | 11 (47.8%) | 7 (30.4%) |
| Dominant Culture | 43 (91.4%) | 1 (2.1%) | 26 (55.3%) | 18 (38.2%) |

Sixty per cent. of ethnic minority residents stated they were aware of the weekly and monthly chapel services at T-D Acres. Forty-seven per cent. have attended services. Over ninety per cent. of the dominant culture residents stated they were aware of the religious services. Over fifty-five per cent. have attended the services. The Services are provided in English only and include inter-faith as well as denominational services.

Discussion

Churchgoing for both groups appears to be meaningful. Driedger and Chappell (1987) noted that according to the Census of population tracts of 1980, ninety-five per cent. of ethnic elderly state a religious affiliation, and that most Canadian elderly do have religious affiliations. Residents at T-D Acres stated that staff, volunteers and family members assist them to attend the services. Reminders both in print and on the public address system also appear to have an impact on awareness and attendance. The services in English-only did not deter participation entirely among ethnic minority residents. Their participation could be enhanced however, with visits to appropriate churches where the services would be conducted in their language.

Chaplaincy Recommendation

9. Most Canadian elderly report a religious affiliation and T-D Acres residents certainly indicated how important churchgoing is for them. It is recommended that chaplaincy consider expanding the provision of referrals to community churches for ethnic minority residents who wish to attend a church providing services in their language and arrange accompaniment. Alternately, a community pastor or priest can be invited to visit the ethnic minority residents in cases where the resident has poor mobility.

E. Activation

The Activation Department oversees numerous activities in the Home ranging from Crafts to Sing-Alongs. The residents were asked to indicate whether they were aware and made use of over one hundred activities.

The Activation tables that follow provides the responses given by the residents concerning six activation programs. The first four programs listed on the chart are reflective of the other programs in two ways. One, they demonstrate that there is a high difference between the dominant culture and ethnic minority respondents in their awareness and use services. Two, use of activities for both groups is markedly lower than their awareness of activities. The last two activities, namely (5) concerts and entertainment and (6) Ice Cream Socials demonstrate a higher rate of use for both groups.

Table 16. Ethnic Minority Groups: Awareness and Use of Social Activities

| | Ethnic Minority | | | |
|----------------------------|-----------------|-------------|--------------|--------------|
| | AWARE | | USE | |
| | Yes | No | Yes | No |
| 1. Crafts | 10 (43.4) | 6 (26.0) | 5 (21.7) | 11 (47.8) |
| 2. Library | 10 (43.4) | 5 (21.7) | 3 (13.0) | 12 (52.1) |
| 3. Exercise Class | 8 (34.7) | 5 (21.7) | 3 (13.0) | 10 (43.4) |
| 4. Resident's Council | 6 (26.0) | 8 (34.7) | 1 (4.3) | 13 (56.5) |
| 5. Concerts, Entertainment | 9 (39.1) | 6 (26.0) | 7 (30.4) | 8 (34.7) |
| 6. Ice Cream Socials | 10 (43.4) | 6 (26.0) | 10 (43.4) | 6 (26.0) |

Table 17. Dominant Culture Groups: Awareness and Use of Social Activities

| | Dominant Culture | | | |
|----------------------------|------------------|--------------|--------------|--------------|
| | AWARE | | USE | |
| | Yes | No | Yes | No |
| 1. Crafts | 41 (87.2) | 3 (6.3) | 16 (34.0) | 28 (59.5) |
| 2. Library | 42 (89.3) | 2 (4.2) | 18 (38.2) | 26 (55.3) |
| 3. Exercise Class | 34 (72.3) | 9 (19.1) | 13 (27.6) | 30 (63.8) |
| 4. Resident's Council | 32 (68.0) | 11 (23.4) | 16 (34.0) | 27 (57.4) |
| 5. Concerts, Entertainment | 41 (87.2) | 1 (2.1) | 33 (70.2) | 9 (19.1) |
| 6. Ice Cream Socials | 42 (89.3) | 2 (4.2) | 35 (74.4) | 9 (19.1) |

Discussion

Craft, library book lending and Exercise Classes appear to be visible programs in T-D Acres. Both resident groups, however, are more aware of Crafts and the Library than they are of the exercise classes. This may be due, in part, to a sense of familiarity with the activities associated with libraries and crafts.

The exercise class has a lower awareness rate for both groups. Because of the frailty of sixty to seventy per cent. of the residents, it is not surprising that such an activity would be appealing to a select portion of the population, that is, those who are healthy enough to participate. Also, the average age of the residents is 84, indicating that they grew up at the turn of the century. As McPherson and Kozlick (1980) stated, many of the elderly now living in North America were born elsewhere, come from rural backgrounds and grew up in a climate that placed value on work and few vacations. It is entirely likely, then, that leisure in general, and exercise classes specifically, are foreign concepts to many T-D Acres residents.

For the ethnic minority residents, a likely issue influencing their awareness and use of services may be the cultural appropriateness of the activities and the fact that they are provided in English only. Library services, for example, are directly related to language. Multilingual

books may be an option for those who do not read English. The dominant culture group as well has a lower use of library services. Some issues may be the lack availability of taped books or large print books for those with visual impairment.

The Residents' Council is comprised of residents of T-D Acres. As is evident in the responses, the ethnic minority residents are neither very familiar with the Council nor have they made use of it. Twenty-six per cent. of ethnic minority residents stated they were aware of the Residents' Council. Four per cent. have been involved with it. One interpretation of this result is that the Resident's Council membership is comprised of dominant culture group members who speak English only. Furthermore, many dominant culture residents noted that the membership consisted of well-to-do residents and that many residents from lower socio-economic backgrounds would feel out of place with the Council members. Participatory democracy may not be an idea which is familiar to many ethnic minorities, especially those from Eastern Block or patriarchal societies.

The Concerts and Ice Cream Socials appear to be familiar and slightly more well-used activities by both resident groups. It is likely that these two activities are successful because they require little physical exertion and are usually well supervised with volunteers, assistants and staff. However, there is a discrepancy between awareness and use levels

between dominant culture and ethnic minority residents. A possible explanation may be that the concerts and entertainment provided are not as familiar, interesting or culturally appropriate for the ethnic minority residents.

All Residents were asked to list reasons for not participating in activities. The following table was provided and residents could choose more than one response.

Table 18. Reason for not Participating in Activities

| | Reasons | No. Checked |
|----|-------------------------------------|-------------|
| 1. | No Need | 17 |
| 2. | Poor Health | 19 |
| 3. | Unaware of Services | 11 |
| 4. | Services Not in Own Language | 5 |
| 5. | Don't Care About Activities Offered | 23 |
| 6. | Don't Fit In | 10 |
| 7. | No Assistance to Attend | 4 |

The most frequently cited response related to general inappropriateness of services, that is not caring about activities. Language barriers were an issue for five residents. Other frequently cited responses included poor health; no need; and a lack of awareness of services.

Many residents reported to interviewers that they often forget about dates or times of activities. All residents were asked to state what would be the best way to provide information. The following table indicates

that the majority of residents would prefer to receive information face-to-face. Residents could choose more than one response.

Table 19. Best Way to Provide Information

| Method | <u>No. Checked</u> |
|--------------------------------------------------|--------------------|
| 1. Information Person on Regular Basis | 33 |
| 2. Inform In Person before Moving In | 16 |
| 3. Give Pamphlets on a Regular Basis | 12 |
| 4. Give Pamphlets Before Moving In | 11 |
| 5. Combination | 16 |
| 6. Would Require Information in Another Language | 13 |

Many residents are hearing and/or visually impaired. A number of residents expressed frustration at not being able to read notices or hear the public address system announcements. Face-to-face reminders would ensure that information is appropriately received, as long as it is given in the preferred language.

All residents were asked if they would be interested in participating in culturally-oriented activities. The following chart indicates that for the ethnic minority residents, there is a need for culturally appropriate activities.

Table 20. Would you Participate in Culturally-Oriented Activities*

| Answer | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 13 | (56.5%) | 10 | (21.2%) |
| 2. No | 3 | (13.0%) | 21 | (44.6%) |
| 3. Don't Know | 4 | (17.3%) | 10 | (21.2%) |
| 4. Did Not Answer Question | 3 | (13.0%) | 6 | (12.7%) |

*Residents were informed that culturally-oriented activities meant multicultural as well as culturally-specific ones.

Activation Department Recommendations

10. The Activation Department design and conduct a small survey of ethnic minority residents regarding their interests and needs.
11. The Activation Department develop outreach strategies with community agencies and organizations which provide recreational activities in languages other than English. Hooking up residents with appropriate programs in the community may ensure contact with cultural organizations for the ethnic minority residents.
12. The Residents' Council examine its multicultural responsiveness and representation, with a view to providing outreach to and inclusion of ethnic minority residents in Council affairs.

13. Some of the dominant culture residents expressed their opinion that the Residents' Council was only comprised by residents from high socio-economic backgrounds, and therefore not open to the "average" T-D Acres resident. In light of this, the Residents' Council develop a forum, whereby information regarding its purpose, mandate and membership criteria be provided for all residents. Outreach to dominant culture residents with a view to increasing their participation in Council Affairs.

F. Health Care

All residents were asked to rate their level of medical and nursing care.

Table 21. Ratings of Level of medical and nursing care.

| Answer | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Excellent | 3 | (13.0%) | 9 | (19.1%) |
| 2. Good | 9 | (39.1) | 20 | (42.5%) |
| 3. Fair | 6 | (26.0%) | 10 | (21.2%) |
| 4. Poor | 0 | (0) | 1 | (2.1%) |
| 5. Did Not Answer Question | 5 | (21.7%) | 7 | (14.8%) |

The majority of all residents rate medical/nursing care as excellent or good. Fifty-two per cent. of the ethnic minority residents rated their

care as excellent or good. Sixty-one per cent. of the dominant culture residents rated their care as excellent or good.

Discussion

Since a high percentage of residents stated that they moved to T-D Acres because of a need for medical/nursing care, their responses to this question may have been influenced by the precipitating motivator for their move. They may view T-D Acres more as a health care institution rather than a retirement home. Furthermore, in comparing the level of nursing/medical care they received while living at home to that of T-D Acres, residents may find a tremendous improvement at T-D Acres.

For those who rated their medical and nursing care as fair or poor, some comments were made regarding nursing staff taking too long to respond to calls. Another issue was the high number of part-time, evening and replacement nurses who did not seem to know the residents as well as the dayshift nurses.

Another concern raised by a few residents was the growing number of cognitively impaired residents. Some residents who had been at T-D Acres for over ten years, stated they had witnessed a big change in the numbers of residents around them who were mentally alert. This caused some anxiety among residents who felt their own mental functioning

would soon be affected by the influence of, for example, the Alzheimer's Disease residents. Some residents reported that residents often wandered in and out of rooms, generally causing confusion and panic among all concerned.

G. Communication with Staff

All residents were asked to indicate whether they feel they communicate adequately with staff.

Table 22. Do you Communicate Adequately with Staff?*

| Answer | Ethnic Minority | | Dominant Culture | |
|-------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 13 | (56.5%) | 38 | (80.8%) |
| 2. No | 6 | (26.0%) | 4 | (8.5%) |
| 3. Did Not Answer | 4 | (17.3%) | 5 | (10.6%) |

*'Adequately' was defined as a subjective appraisal of being able to get along, ask for assistance and generally communicate needs with staff.

The majority of all residents feel they communicate adequately with staff at T-D Acres. Fifty-six per cent. of the ethnic minority residents, and eighty per cent. of the dominant culture residents felt they communicate adequately with residents. Cultural and language barriers may be an issue for the ethnic minority residents many of whom stated they relied on a son or daughter or other interpreter to ask questions on their behalf.

H. Nutrition

All residents were asked several questions pertaining to their nutrition and choice in meals at T-D Acres.

Table 23. Rating of Level of Satisfaction With Food

| Answer | Ethnic Minority | | Dominant Culture | |
|----------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Excellent | 1 | (4.3%) | 6 | (12.7%) |
| 2. Good | 4 | (17.3%) | 17 | (36.1%) |
| 3. Indifferent | 5 | (21.7%) | 7 | (14.8%) |
| 4. Fair | 4 | (17.3%) | 8 | (17.0%) |
| 5. Poor | 4 | (17.3%) | 4 | (8.5%) |
| 6. Not Rated | 5 | (21.7%) | 5 | (10.6%) |

Fifty-six per cent. of the ethnic minority residents gave an indifferent or fair/poor rating to their food at T-D Acres, compared to twenty-one per cent. who felt the food is excellent/good. Twice as many ethnic minority residents as dominant culture residents chose not to rate the food at all. Dominant culture residents appear to be more satisfied with their food. Thirty-nine per cent. of the dominant culture residents gave an indifferent or fair/poor rating to their food at T-D Acres compared to over forty-eight per cent. who gave an excellent/good rating.

All residents were asked if there should be more cultural variety in the meals at T-D Acres.

Table 24. Do you want more cultural variety in your meals?

| Answer | Ethnic Minority | | Dominant Culture | |
|----------------------------|--------------------|-----------|---------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Yes | 14 | (60.8%) | 15 | (31.9%) |
| 2. No | 3 | (13.0%) | 19 | (40.4%) |
| 3. Don't Know | 1 | (4.3%) | 10 | (21.2%) |
| 4. Did Not Answer Question | 5 | (21.7%) | 3 | (6.3%) |

The ethnic minority residents appear to be in favour of increasing the cultural variety in their meals. Over sixty per cent. stated there should be more cultural variety in meals, compared to thirty-one per cent. of the dominant culture residents.

All residents were also asked what would be the best way to encourage more cultural choices in their meals.

Table 25. What is the Best Way to Encourage More Cultural Choices in Your Meals?

| Method | Ethnic Minority | | Dominant Culture | |
|----------------------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Not Applicable | 1 | (4.3%) | 7 | (12.7%) |
| 2. Increase Cultural Choices, On-Going | 13 | (56.5%) | 8 | (17.0%) |
| 3. Special Events | 0 | (0.0%) | 6 | (12.7%) |
| 4. Same Food/Other Spices | 1 | (4.3%) | 0 | (0.0%) |
| 5. Other | 0 | (0.0%) | 2 | (4.2%) |
| 6. Did Not Answer Question | 9 | (34.7%) | 24 | (51.0%) |

It appears that the ethnic minority residents favour an integrated approach to the provision of cultural choices in their meal plans. Over fifty-six per cent. stated that cultural choices should be increased, on an on-going basis, compared to none who preferred special event meals. In contrast, over fifty per cent. of the dominant culture group chose not to answer the question. Over twelve per cent. stated the question of increasing cultural choices was not applicable to them.

Discussion

"The food is okay but I miss my own Ukranian spices and tastes. I used to own my own deli and I would make the best Kolbassa and cabbage rolls! People from all over Toronto came on Friday nights and stocked up for

the weekend!"⁹ "The food is okay but once in awhile I go out with one of the activationists for a nice glass of wine and a thick, juicy steak and all the fixings. It keeps me going for a few weeks!"¹⁰

Judging from the early line-ups outside the dining rooms and in the halls, meal times at T-D Acres are eagerly anticipated events. In fact, interviewers had difficulty scheduling appointments even one hour before designated meal times, because residents felt that they did not want to jeopardize their punctuality. Mealtimes are assured social interactions. Residents are seated at group tables in brightly lit and decorated dining rooms. Menus are printed on a board outside of the room. Often, birthdays are celebrated with singing and special cakes. But on the whole, residents were unenthusiastic about the food. Ethnic minority residents indicated a stronger preference for more cultural variety in their meals than did the dominant culture groups. This is likely due to the fact that the meals provided at T-D Acres, in concept and content, are more familiar to the dominant culture groups. For example, while espresso coffee is not offered in the early afternoon, 'afternoon tea' is. Ice cream socials and barbecues are offered regularly, 'Dim Sum' is never available, nor is a 'fruit festival'.

9 Quote from an ethnic minority resident

10 Quote from a dominant culture resident

The ethnic minority residents also favour an integrated, on-going approach to increasing cultural variety. That is, being provided with familiar foods and spices regularly. But many ethnic minority residents were cautious about this preference, stating that in all likelihood, food prepared at T-D Acres with exotic or unusual spices might not be as good as what they cooked at home or what would be available in delicatessens or restaurants in the city. For 'real' food, advised one resident, you have to go to the places that know how to make it. Some activists take the time to accompany residents to shops and restaurants as special outings. One dominant culture resident in particular looked forward to his outing for a steak dinner and pronounced the activity as "one of the best" available at T-D Acres. Perhaps such outings, one-to-one with staff or with volunteers or families, could be expanded and offered to more residents.

Nutrition Recommendations

14. True Davidson Acres Dietary staff consult with residents regarding meal choices that would be culturally appropriate.
15. Dietary staff examine feasibility of providing on-going culturally appropriate meal choices.
16. True Davidson Acres develop alternative meal activities with community ethno-specific agencies and organizations. For example,

ethnic minority residents could be invited to appropriate ethno-specific cultural centre or Home for the Aged for a culturally appropriate meal. Alternately, neighbourhood delicatessens/restaurants could provide meals to residents, either on an on-going basis, or as a special treat for residents. Family and friends of residents could also participate in the activities as well.

Overall Satisfaction with T-D Acres

All residents were asked to rate their overall satisfaction with their life at T-D Acres.

Table 26. Overall satisfaction with T-D Acres

| Method | Ethnic Minority | | Dominant Culture | |
|----------------------------|-----------------|-----------|------------------|-----------|
| | No. | Per Cent. | No. | Per Cent. |
| 1. Excellent | 1 | 4.3% | 8 | 17.0% |
| 2. Good | 6 | 26.0% | 16 | 34.0% |
| 3. Fair | 11 | 47.8% | 11 | 23.4% |
| 4. Poor | 3 | 13.0% | 4 | 8.5% |
| 5. Did not answer question | 2 | 8.7% | 8 | 17.0% |

In general, dominant culture residents are more satisfied with their life at T-D Acres. Thirty per cent. of ethnic minority residents rated their level of satisfaction at Excellent or Good. Over sixty per cent. rated their level of satisfaction of Fair or Poor. In contrast, over fifty per cent. of

the dominant culture residents rated an Excellent or Good level of satisfaction. Thirty-one per cent. gave a Fair or Poor rating.

Discussion

In reviewing the responses to the questions asked in the other sections, an accumulative level of dissatisfaction must figure prominently in the fair and poor ratings of the ethnic minority residents. For the ethnic minority residents, an inability to speak or read English, an unfamiliarity with services, food and institutionalization must impact on their day-to-day functioning. Many experience isolation and loneliness. In some extreme cases, visits from the outside are rare or non-existent. Coupled with the feeling of having experienced little or no choice in their decision to move to T-D Acres, many ethnic minority residents would experience a profound lack of continuity and control over their lives and destinies.

VI CONCLUSIONS AND EVALUATION

The Municipality of Metropolitan Toronto includes six municipalities and has a population that exceeds 2.2 million people. The ethno-cultural composition of Toronto's population is extremely diverse. Statistics indicate that nearly 70% of the population is from an ethnic origin other than British.

True Davidson Acres is one of seven Homes for the Aged operated by the Municipality of Metropolitan Toronto. As an institution serving seniors in a multicultural city it has recognized the need to evaluate its services to the ethnic minority residents. True Davidson Acres has undertaken a multicultural change process. In an effort to begin to develop or enhance programs, a data base was required. T-D Acres agreed that communication with the ethnic minority residents was an important first step. A needs assessment, utilizing the following forms of intervention was completed: (1) an analyses of existing demographic data (2) face-to-face interviews with all able and willing ethnic minority and dominant culture residents. The areas examined were Intake and Assessment Procedures; Friends and Family Support; Awareness and Use of Services; Communication with Staff; Health Care; Nutrition; and General Life Satisfaction.

Results

The survey results indicate that a number of issues face both dominant culture and ethnic minority residents. An important finding was the lack of perceived choice for both groups in their decision to move to T-D Acres. The anecdotal information suggests that many residents were not aware of other available alternatives to long-term institutional care. Others felt they were placed with no say in the matter, or that family circumstances dictated their move to a Home for the Aged.

Over seventy-five per cent. of all residents stated that print material should be provided in languages other than English. Over seventy-five per cent. of all residents felt that intake interviews should be conducted in the language best understood by the applicant. Language and cultural issues are clearly an issue for most ethnic minority residents.

In general, ethnic minority residents state they have fewer friends or family outside of T-D Acres. They are also more likely to feel isolated or lonely than the dominant culture residents.

All residents expressed a higher rate of awareness of T-D Acres services than their actual use of them. The dominant culture residents, however, rated higher response rates of awareness of services than did the ethnic minority residents. Ethnic minority residents are also less likely to feel they communicate adequately with staff. Language and cultural barriers appear to be major factors in this lack of participation.

The ethnic minority residents were less satisfied with the meals provided. They also favoured increasing cultural variety in meal plans.

Ethnic minority residents rated a lower level of general satisfaction with their life at T-D Acres, than did dominant culture groups. Their overall lack of participation and satisfaction with a number of areas are likely

contributors to their general lack of satisfaction with their life in T-D Acres.

Recommendations

The recommendations were developed after analysis of the survey responses and data, and discussions with stakeholders. Because there is a wide variety of ethnic minority groups represented in small numbers, the recommendations acknowledge the difficulties associated with creating programs for relatively few residents. The recommendations focussed on three areas:

1. The development of outreach strategies with existing ethno-specific programs and agencies in the community;
2. Interdepartmental co-ordination of recreational, social work and dietary services to ethnic minority applicants, residents and their families; and
3. Examination of current intervention, service activities and communication strategies (including use of print material; appropriateness of recreational activities) with a view to developing culturally appropriate materials, services and interventions.

The recommendations are based on a few assumptions related to multicultural change in Metropolitan Toronto. Firstly, is the recognition that Toronto provides a wealth of expertise among ethno-specific agencies and organizations. T-D Acres should further develop its relationship with workers affiliated with these agencies as a means of strengthening community ties and of utilizing their expertise to assist with program development. Secondly, multicultural change requires commitment and participation from all levels of an organization. The tasks and challenges are not meant to be shouldered by a single department or even T-D Acres alone. The recommendations suggest participation and action among staff, volunteers and administrators of T-D Acres; the community; as well as the Metro Homes for the Aged Division.

It is urged that a committee be struck to begin implementation of the recommendations. Committee members should be comprised of representatives from T-D Acres staff, administrators, volunteers, board members and both ethnic minority and dominant culture residents. In addition, a representative from the Metro Homes for the Aged Division administration staff and key informants from the community should also be members of the committee. Assistance from the person hired as Community Development Officer Multicultural programs within the Policy and Planning Division should also be sought as soon as possible.

Dissemination

The T-D Acres needs assessment has generated much interest among residents, Advisory Board members and other key stakeholders. The T-D Acres administrator, George Humble, remained positive and encouraging throughout the practicum, as did his staff and Steering Committee members. T-D Acres is poised for multicultural change and accepts the challenges associated with conducting a needs assessment of its ethnic minority residents.

Discussion of dissemination occurred throughout the practicum with Steering Committee members. T-D Acres is willing to report the findings to residents and Advisory Board members. In addition, the Metro Homes for the Aged Advisory Committee has requested a presentation of the survey findings, since the needs assessment may impact on other Metro Homes for the Aged. For example, other Metro Homes for the Aged facilities with more ethnic minority representation (or different representation) may want to replicate the needs assessment for their own program development.

The needs assessment certainly sparked discussion and debate among staff, interviewers, residents and steering committee members. Most were thoughtful, open to new learning and genuinely concerned about the well-being of all residents. There is no doubt that the needs assessment

was also an intervention tool. Interviewers often acted as advocates on behalf of residents who had immediate or long standing concerns about their care or other issues. Some interviewers offered to volunteer with the residents and some long-term relationships were formed.

T-D Acres has demonstrated its commitment to enhancing its service delivery to ethnic minority residents. Implementation of the recommendations will remain the ultimate test of its good intentions. It will require participation and support from the residents, staff, funders and the community. It will also require co-ordination, timing and vision. It is imperative that T-D Acres does not lose its momentum. To paraphrase Walter Pitman, now is still not too late.

Evaluation of the Practicum

Evaluation of the practicum was conducted by using a Levels of Outcome Scale, based on the Indicators of Success chart in the Practicum Proposal (Appendix VI). Levels of outcome were to receive ratings of Very Satisfactory; Satisfactory; and Not Satisfactory. The purpose of the Levels of Outcome Scale was to examine the extent to which each objective was met. The Actual Time Frame-Practicum Activities chart (Appendix VI) outlines the actual time involved with each of the activities.

The Levels of Outcome Scale was a good evaluation tool for the student. It provided a tentative time frame; allowed for some consideration of possible tasks and activities prior to the commencing of the project; and was a valuable method of incorporating an evaluation component into the T-D Acres needs assessment practicum.

The evaluation tool, however, neither adequately demonstrates the scope of the practicum nor does it evaluate the skills required to accomplish each of the tasks or activities. An evaluation tool should incorporate some time projections. But deadlines should not be seen as the only indicator of success. For example, the student was unable to complete the surveys by the designated date in the Levels of Outcome Scale. However, the reasons for postponing the dates of the Survey demonstrate flexibility, judgement and negotiation skills. Furthermore, the decision was made in consultation with the stakeholders and received their support. The student has provided a discussion of these issues throughout the activity ratings.

Another issue is that the stakeholders should have a role in designing the evaluation tool or portions of it. Because the student developed the evaluation tool prior to meeting the stakeholders their interests were not incorporated. This would surely be an important factor for the evaluator to consider.

It is also recognized that the practicum required understanding and skill in a number of areas, including evaluation design, organizational systems and communication. For this reason, the student completed the Utilization Enhancement Checklist (Braskamp and Brown, 1980). The checklist of fifty items (Appendix VII) focuses on self-analysis, communication and other areas related to the process involved in designing and conducting an evaluation. Comments following each of the five sections provides a general self-evaluation.

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APPENDICES

APPENDIX I

Dear True Davidson Resident:

My name is Lucia Furgiuele and I am a social work student completing my master's degree from the University of Manitoba. As part of my studies, I am conducting a survey of residents living at True Davidson Acres. I am particularly interested in the needs of the ethnic elderly residents. The purpose of the survey is to (1) determine what the needs of residents are, and (2) develop programs to meet the identified needs.

Participation in the survey is entirely voluntary. I am asking you to consider participating in the survey. It will be a questionnaire, conducted in person. It will be confidential, and you would not be obligated to answer any question which you feel is inappropriate. The interviews will take place in the first two weeks of August, 1988.

If you would like a family member or friend to be present during the interview, that would be great! If you have any questions, please feel free to call me or drop by my office. I am on the fifth, Room 509. My telephone number is 690-3111, Extension 35. If you wish, you can ask your activationist, nurse, family member or friend to arrange a visit with me. A definite date for the interviews will be schedule soon, and I will inform you of the times. A report of the findings of the survey will be made to all residents' at a general meeting. The report will likely be completed by November, 1988. Thank you and see you soon.

Lucia Furgiuele

APPENDIX II

TRUE DAVIDSON ACRES

**NEEDS ASSESSMENT
ETHNIC RESIDENTS**

Consent Form

I acknowledge that I have willingly participated in the Needs Assessment of Ethnic Elderly

I have been informed of my right not to answer any question (s) asked by the interviewer. I understand that it is my free choice whether or not I participate in this study.

I have been informed of my right to request the presence of a family member or friend during the survey.

I understand that the results of this survey will be used in planning for programs for residents in True Davidson Acres.

I permit Lucia Furguele to use the information I have provided, with the understanding that she will take all necessary precautions to ensure my anonymity.

Signature of Respondent

Witness:

Date

APPENDIX III

TRUE DAVIDSON ACRES

**NEEDS ASSESSMENT
ETHNIC RESIDENTS**

August, 1988

Introduction

Hello, my name is _____ . I am here to conduct a survey of residents pertaining to their service needs at T-D Acres.

The purpose of the study is to increase T-D Acres' knowledge of the needs of residents, particularly those of ethnic minority backgrounds, and to develop and enhance programs to meet identified needs.

The interview will involve questions about how you came to T-D Acres, your participation in activities, your health and other related matters.

The interviewer is confidential and your answers will not be seen by anyone other than researchers.

TRUE DAVIDSON ACRES

NEEDS ASSESSMENT
ETHNIC RESIDENTS

FACE SHEET

1. Sex of Respondent
1. Male _____ 2. Female _____
2. Respondent's Year and Month of Birth: _____
3. Interviewer's Name: _____
4. Date of Interview: _____
5. Length of Interview: _____
6. Person(s) Interviewed:
 1. Respondent alone
 2. Respondent in presence of significant other
 3. Respondent in presence of other
7. Was a language other than English:
 1. Used partly by Interviewer?
 2. Used totally by Interviewer?
 3. Used with Interpreter?
 4. Desirable but not used?
 5. English used appropriately?
8. Respondent's Comprehension of Questions:
 1. Very satisfactory
 2. Satisfactory
 3. Unsatisfactory
 4. Very unsatisfactory

SURVEY QUESTIONNAIRE

1. What is your marital status? _____
 1. Single
 2. Married
 3. Widowed
 4. Divorced/Separated

2. If married, widowed, separated or divorced, how long? _____
 1. from 3-5 years
 2. from 12-36 months
 3. from 6-12 months
 4. less than 6 months
 5. single

3. Where were you born? _____
 1. England
 2. Ireland
 3. Scotland
 4. Italy
 5. West Indies
 6. Poland
 7. Greece
 8. Yuyoslavia
 9. Czechoslovakian
 10. Latvia
 11. Holland
 12. Hungary
 13. Romania
 14. Portugal
 15. Chinese
 16. Canada
 17. Other (specify): _____

4. If born outside of Canada,
when did you come to Canada? _____

1. 1976 - present
2. 1960 - 1975
3. 1940 - 1959
4. 1920 - 1939
5. 1890 - 1919
6. 1889 or earlier
7. Born in Canada

5. What is your cultural identity? _____

1. British
2. French Canadian
3. Italian
4. West Indian
5. Polish
6. Greek
7. Yugoslavian
8. Czechoslovakian
9. Latvian
10. Dutch
11. Hungarian
12. Romanian
14. Portuguese
15. Chinese
16. English Canadian
17. Other (specify): _____

6. What language do you speak most often? _____

1. English
2. French
3. Italian
4. Polish
5. Greek
6. Yugoslavian
7. Czechoslovakian
8. Latvian
9. Dutch
10. Hungarian
11. Romanian
12. Portuguese
13. Chinese
14. Other (specify): _____

7. What is your preferred language (or the language you feel most comfortable with)? _____
- | | |
|--------------------|----------------------------|
| 1. English | 8. Latvian |
| 2. French | 9. Dutch |
| 3. Italian | 10. Hungarian |
| 4. Polish | 11. Romanian |
| 5. Greek | 12. Portuguese |
| 6. Yugoslavian | 13. Chinese |
| 7. Czechoslovakian | 14. Other (specify): _____ |
8. How many grades did you complete in school? _____
- | |
|-----------------------------|
| 1. 0 years |
| 2. grade 8 or less |
| 3. 8 - 10 |
| 4. 11 - 13 |
| 5. community college |
| 6. some university |
| 7. university graduate |
| 8. post university graduate |

A) INTAKE/ASSESSMENT

Now I am going to ask you about how you came to live at T-D Acres.

9. How long have you been living in T-D Acres?
- | |
|-----------------------------------------|
| 1. Six months or less |
| 2. Over six months but less than a year |
| 3. One year to three years |
| 4. Four to five years |
| 5. Over five years |
10. Where did you live before you moved to T-D Acres?
- | |
|------------------------------------------------|
| 1. In the immediate neighbourhood of T-D Acres |
| 2. In the Borough of East York |
| 3. In Scarborough |
| 4. In North York |
| 5. In Etobicoke |
| 6. In Toronto |
| 7. In Mississauga |
| 8. Outside Toronto (please specify): _____ |

11. Why did you move to T-D Acres?
 1. Planned move as part of retirement
 2. Felt need of company
 3. Less comfort, security or ability to manage at previous residence
 4. Require nursing/physical/medical assistance
 5. On advice of Doctor, family member or other
 6. Don't recall
 7. Other (please specify): _____

12. Who made the first contact for your application to come and live at T-D Acres?
 1. Self referral
 2. Family member
 3. Doctor
 4. Social worker or other community service worker (e.g. PHN, Homemaker)
 5. Don't recall
 6. Other (please specify): _____

13. (a) Do you feel you were given enough of a choice in your decision to move to T-D Acres?
 1. Yes, a lot of choice
 2. Yes, some choice
 3. Enough choice
 4. Not enough choice
 4. No choice at all

(b) Why have you given this answer?

14. Were the first interviews conducted in the language with which you are most comfortable?
 1. Yes
 2. No

15. Was any of the information about T-D Acres or any of the Metro Homes for the Aged, (eg. application forms or brochures) provided in the language with which you are most comfortable?

1. Yes
2. No

16. Do you think any printed material regarding Metro Homes for the Aged should be provided to people in the language they understand most?

1. Yes
2. No
3. Don't know

17. Do you think the intake/assessment interviews for Metro Homes for the Aged should be conducted in the language the person understands best?

1. Yes
2. No
3. Don't know

18. Please list three positive features you remember about the intake/assessment procedure.

1. _____
2. _____
3. _____

19. Please list three problems you remember about the intake/assessment procedure.

1. _____
2. _____
3. _____

20. Please list any ideas you may have for improvement in the intake/assessment procedure.

1. _____
2. _____
3. _____

B) FRIENDS AND FAMILY SUPPORT

Now I am going to ask you about your family and friends.

21. With how many people do you have a close relationship?

1. 0
2. 1 - 3
3. 4 - 5
4. More than 5

22. Do most of your close friends or relations live close by?

1. Yes
2. No

23. How often do you have contact (for example, telephone calls, letters, visits, outings) with your friends or relations?

1. Less than once a month
2. Once a month
3. Twice a month
4. Three times a month
5. Four times a month
6. More than five times a month

24. (a) Do you have contact with your friends or relations as often as you wish?

1. Yes
2. No

(b) If not, why?

25. (a) Do you feel isolated or lonely?

- 1. Yes
- 2. No

(b) If you have been feeling lonely or isolated could you indicate reasons why?

1. Not Applicable

- 2. _____
- 3. _____
- 4. _____

26. Can you provide any suggestions as to how T-D Acres staff can help you feel less lonely or isolated?

- 1. _____
- 2. _____
- 3. _____

27. Other than staff at T-D Acres, is there anyone on whom you can call, if you need help?

- (a) 1. Yes
- 2. No

(b) If "yes", whom?

| | Yes | No |
|--------------------|-----|-----|
| 1. Spouse | () | () |
| 2. Sibling | () | () |
| 3. Daughter | () | () |
| 4. Son | () | () |
| 5. Grandchildren | () | () |
| 6. Other relatives | () | () |
| 7. Friend | () | () |
| 8. Neighbour | () | () |
| 9. Service agency | () | () |

C) AWARENESS OF SERVICES AT T-D ACRES

Now I am going to ask you about your awareness of services available to residents at T-D Acres.

28. Please indicate which of the following services (1) you are aware of, and (2) the ones you have used since you came to T-D Acres.

| <u>A.</u> <u>Medical and Nursing</u> | Aware | Use |
|------------------------------------------------------------------------------------------|-----------|-----------|
| | Yes No | Yes No |
| <hr/> | | |
| 1. Medical referral to Medical Director or Family M.D. | () () | () () |
| 2. Home Care (e.g. Physiotherapy, Occupational therapy, Speech therapy, Audiology) | () () | () () |
| 3. Massage Therapy | () () | () () |
| 4. Dental Clinic | () () | () () |
| 5. Dietary Referral | () () | () () |
| 6. Specialist Referrals (e.g. E-N-T; Dermatology; Psycho-geriatric, Psychiatry) | () () | () () |
| <u>B.</u> <u>Social Work</u> | Aware | Use |
| | Yes No | Yes No |
| <hr/> | | |
| 7. Individual and family counselling | () () | () () |
| 8. Group counselling | () () | () () |
| <u>C.</u> <u>Chaplaincy</u> | Aware | Use |
| | Yes No | Yes No |
| <hr/> | | |
| 9. Individual pastoral counselling with chaplain | () () | () () |
| 10. Religious service (e.g.: Interfaith service, denominational services) | () () | () () |
| 11. Referral to community pastoral resources, churches, volunteers or visitors | () () | () () |

| | Aware | | Use | |
|-------------------------------------------------|-------|-----|-----|-----|
| | Yes | No | Yes | No |
| <u>D. <u>Activation</u></u> | | | | |
| 12. Crafts i.e. knitting, handiwork, etc. | () | () | () | () |
| 13. Library Books (volunteers and East York) | () | () | () | () |
| 14. Group Discussions | () | () | () | () |
| 15. Cooking/baking groups | () | () | () | () |
| 16. Music/Dance Sessions | () | () | () | () |
| 17. Tutors Program | () | () | () | () |
| 18. Art class | () | () | () | () |
| 19. Resident Council | () | () | () | () |
| 20. Games | () | () | () | () |
| 21. Entertainment/Concerts | () | () | () | () |
| 22. Dances | () | () | () | () |
| 23. Outings | () | () | () | () |
| 24. Bowling | () | () | () | () |
| 25. Horticulture Group | () | () | () | () |
| 26. Video Movies | () | () | () | () |
| 27. Sing-along | () | () | () | () |
| 28. Bingo | () | () | () | () |
| 29. Card Games/Euchre | () | () | () | () |
| 30. Resident Vacations | () | () | () | () |
| 31. Walking/Ambulation program | () | () | () | () |
| 32. Exercise Group | () | () | () | () |

| | Aware | | Use | |
|--------------------------------|-------|-----|-----|-----|
| | Yes | No | Yes | No |
| 33. Pet Visitation | () | () | () | () |
| 34. Swimming Program | () | () | () | () |
| 35. Mini-Golf | () | () | () | () |
| 36. Travel Logs | () | () | () | () |
| 37. Carpet Bowling | () | () | () | () |
| 38. Woodworking | () | () | () | () |
| 39. History class | () | () | () | () |
| 40. Make-up Sessions | () | () | () | () |
| 41. Church Services | () | () | () | () |
| 42. Ice Cream Socials | () | () | () | () |
| 43. Morning Praise Group | () | () | () | () |
| 44. Ceramics | () | () | () | () |
| 45. Nature Walk | () | () | () | () |
| 46. Daily Bar | () | () | () | () |
| 47. Social Teas/Parties | () | () | () | () |
| 48. Bible Study | () | () | () | () |
| 49. One to One Visiting | () | () | () | () |
| 50. Singing Class | () | () | () | () |
| 51. Holiday Decorations Class | () | () | () | () |
| 52. Resident Work Pay Projects | () | () | () | () |
| 53. Leather Craft | () | () | () | () |

29. I have a list of reasons for not participating in activities. Will you tell me which ones are your reasons? Check as many as are appropriate for you.

1. No need ()
 2. Poor health ()
 3. Unaware of services/activities ()
 4. Activities/services not in own language ()
 5. Do not care much (or at all) about activities ()
 6. I don't fit in/feel out of place ()
 7. No assistance to attend ()
 8. Other (please specify): ()
-
-

30. Please indicate which would be the best way to provide information to you, regarding services and activities available.

1. Inform you in person, before you move in.
 2. Inform you in person, on a regular basis, after you move in.
 3. Give you pamphlets which you can read before you move in.
 4. Give you pamphlets which you can read on a regular basis after you move in.
 5. A combination of above.
 6. Other (please specify): _____
-
-

31. Would you require any information (in print or verbally) about services to be provided to you in a language other than English?

1. Yes
2. No

32. If you have not participated in activities very much, what would be the best way(s) to assure your participation?

1. Not Applicable
2. Review all the available services.
3. Provide a volunteer or assistant to attend the session with me.
4. Provide an interpreter to attend the session with me.
5. Provide separate services in other languages for those who do not speak English.
6. Other (please specify): _____

7. Don't want to participate. If not, why?

33. Please suggest any services/activities that would be of particular interest to you

1. _____
2. _____
3. _____

D) COMMUNICATION WITH STAFF AND RESIDENTS

Now I am going to ask you about your ability to communicate with staff and residents at T-D Acres.

34. Do you think you are able to communicate adequately with staff and residents?

- A)
 1. Yes
 2. No.

B) If not, why? _____

- C) If not, would more opportunity to participate in your own language be better for you?
1. Yes, very much
 2. Yes, somewhat
 3. Wouldn't make much difference
 4. No, would not make any difference at all.
 5. Already participate in my own language.
35. Are language or culturally- oriented activities available for residents in T-D Acres?
1. Yes
 2. No
 3. Don't Know
36. Would you be interested in any language or culturally-oriented activity?
1. Yes
 2. No
 3. Don't Know
37. How would you say residents who come from outside of Canada, are white, and do not speak English are treated?
1. With much respect
 2. With a fair amount of respect
 3. With mixed respect and disrespect
 4. With a fair amount of disrespect
 5. With much disrespect
 6. Don't Know
38. How would you say residents who come from outside of Canada, speak English, and look Black, Brown, oriental, etc., are treated?
1. With much respect
 2. With a fair amount of respect
 3. With mixed respect and disrespect
 4. With a fair amount of disrespect
 5. With much disrespect
 6. Don't Know

39. How would you say Canadian-born residents who speak English, and are white, are treated in T-D Acres?
1. With much respect
 2. With a fair amount of respect
 3. With mixed respect and disrespect
 4. With a fair amount of disrespect
 5. With much disrespect
 6. Don't Know
40. How would you say Canadian-born residents who speak English, and look black, brown, oriental, etc., are treated in T-D Acres?
1. With much respect
 2. With a fair amount of respect
 3. With mixed respect and disrespect
 4. With a fair amount of disrespect
 5. With much disrespect
 6. Don't Know
41. How many staff at T-D Acres do you think come from different parts of the world?
1. A great many
 2. A fair number
 3. Not very many/None
42. How many residents at T-D Acres do you think come from different parts of the world?
1. A great many
 2. A fair number
 3. Not very many/None
43. (a) Do you think T-D Acres should hire staff who speak a second language?
1. Yes
 2. No
 3. Don't know
- (b) Why? _____

44. (a) Do you think T-D Acres should hire staff who are immigrants?
1. Yes 2.No 3.Don't know
(b) Why? _____

45. (a) Do you think T-D Acres should hire staff who are from visible minorities?
1. Yes
2. No
3. Don't know
(b) Why? _____

46. (a) Do you think T-D Acres should encourage persons who do not speak English to live at T-D Acres?
1. Yes
2. No
3. Don't know
(b) Why? _____

47. (a) Do you think T-D Acres should encourage persons who are immigrants to live at T-D Acres?
1. Yes
2. No
3. Don't know
(b) Why? _____

48. (a) Do you think T-D Acres should encourage persons who are from visible minorities to live at T-D Acres?
1. Yes
2. No
3. Don't know

(b) Why? _____

E) HEALTH CARE

Now I am going to ask you questions about your health.

49. For your age, would you say, in general, your health is excellent; good; fair; or poor?

1. Excellent
2. Good
3. Fair
4. Poor

50. Since your admission to T-D Acres would you say that your health has improved or worsened?

1. Improved a lot
2. Improved somewhat
3. Remained the same
4. Deteriorated somewhat
5. Deteriorated a lot

51. (a) How would you rate the level of medical and nursing care you receive.

1. Excellent
2. Good
3. Fair
4. Poor

(b) Why have you answered this way?

52. Please list any suggestions you may have for improving your medical/nursing care.

1. _____
2. _____
3. _____

F) NUTRITION

Now I am going to ask you about your Nutrition

53. How would you rate the nutritional value of the meals you eat at T-D Acres.

1. Excellent Nutrition
2. Good Nutrition
3. Indifferent
4. Fair Nutrition
5. Poor Nutrition

54. How would you rate your satisfaction with the choice of foods?

1. Very Satisfactory
2. Satisfactory
3. Indifferent
4. Fair Nutrition
5. Poor Nutrition

55. Would more cultural variety provided in the meals at T-D Acres add to your increased happiness?

1. Yes
2. No
3. Don't know

57. If you answered "yes" to the above question, please indicate the best way to increase cultural choices in the meals.

1. Not Applicable
2. Increase cultural choices in the meals upon individual request
3. Increase cultural choices in the meals as special event for all residents
4. Increase cultural choices in the meals as part of regular meal planning at T-D Acres
5. Same food, but use different spices or ingredients
6. Other suggestions (please specify):

G) GENERAL SATISFACTION

Now I am going to ask you about your satisfaction with your life at T-D Acres.

57. How would you describe your over-all satisfaction with life in general at T-D Acres?

1. Excellent
2. Good
3. Fair
4. Poor

58. Please tell me what has been good about living at T-D Acres.

59. Please tell me what has been poor about living at T-D Acres?

60. Please list any ideas for improvements you may have regarding your life at T-D Acres.

61. Please feel free to add any other comments you wish.

Thank you very much for your assistance and co-operation.

APPENDIX IV

TRUE DAVIDSON ACRES

Ethnic Elderly Needs Assessment

Orientation of Interviewers

August 5, 1988

1. Introductions of Interviewers
2. Purpose of **Ethnic Elderly Needs Assessment**
3. Review of Questionnaire
Purpose and Probers
4. Protocol
5. Role Play
6. Questions
7. Distribution of resident lists
8. Wrap-up

Purpose of Study

The Municipality of Metropolitan Toronto comprises six municipalities, namely: York, Etobicoke, North York, Scarborough and Toronto, as well as the Borough of East York. The total population of Metro Toronto exceeds 2.2 million people. The ethno-cultural composition of Toronto's population is extremely diverse; nearly 70% of the population is from an ethnic origin other than British.

These statistics indicate that Toronto's cultural demographics have experienced radical change in the last twenty-five years. Social and health organizations, accustomed to providing services in English only, or to the dominant cultures, must begin to examine their present service delivery in light of the needs of ethno-cultural groups.

True Davidson Acres, a Metro Toronto Home for the Aged, has been targetted for an assessment of the service needs of the ethnic elderly residents.

The goals are two-fold:

1. To better document the service needs of the ethnic elderly residents of T-D Acres for the purpose of enhancing services to the ethnic elderly; and
2. To assist T-D Acres begin to more effectively address the service needs of ethno-cultural residents.

Questionnaire

The needs assessment comprises a face-to-face interview questionnaire, designed to examine eight areas:

1. Ethnicity and other demographic information
2. Involvement in the intake process
3. Friends and family support
4. Awareness and use of T-D Acres services
5. Communication with staff and residents
6. Health Care
7. Nutrition
8. General Life Satisfaction

1. Ethnicity and Other Demographic Information

Purpose: - to determine country of origin
- to determine ability to communicate in English
- to determine preferred language

Probers: #5 "What is your nationality?"
"What is your ethnic identity?"

2. Intake/Assessment Process

Purpose: - to determine the degree of perceived involvement in interviews during intake procedure

Probers: For any questions using words "intake" or "assessment", you may try to use an introductory or supplementary statement, for example, for #14, page 5:

"Do you remember the home visit conducted by a worker from T-D Acres?"

Or

"Do you remember those first interviews (or visits) made by a worker from T-D Acres?"

#15 "Were any of the application forms, brochures, pamphlets provided in your language?"

#16 "Do you think any of the application forms, brochures, pamphlets, regarding Metro Homes for the Aged, should be provided to people in the language they understand best?"

#18 "What were some good things about the home visits?"

3. Friends and Family Support

Purpose: - to determine degree/incidence of loneliness or isolation, particularly among ethnic elderly

4. Awareness and Use of Services at T-D Acres

Purpose: - to determine if residents are aware of available services, and whether there is any discrepancies for ethnic elderly
- to determine if residents, particularly ethnic elderly use services
- to determine reasons for not participating, particularly language or cultural barriers
- to determine means of increasing participation

Probers:

#32 "What would be the best way for you to join in?"
"How can we encourage you to join in?"

#33 "What kinds of things did you enjoy doing before you moved here?"
"Would you like to do that now?"

5. Communication with Staff and Residents

Purpose: - to determine degree of perceived day-to-day communication with staff and residents
- to determine degree of perceived differential treatment between ethnic elderly residents and dominant culture residents.

Probers:

#34 "Do you talk much with staff/residents? Do you feel you understand one another?"

6. Health Care

Purpose: - to determine the degree of perceived health and well-being
- to determine degree of satisfaction with medical and nursing care

7. Nutrition

Purpose: - to determine degree of satisfaction with meals
- to determine whether cultural choices in meals would enhance satisfaction

Probers:

#55 "Did you eat differently when you lived on your own? How?"

8. General Life Satisfaction

Purpose: - to determine general life satisfaction/happiness at T-D Acres

PROTOCOL

1. Phone or speak in person with head nurse, re, your visit to floor.
2. Introduce yourself to head nurse or nurse at nursing station upon your arrival to the floor.
3. Introduce yourself to resident. You may have to enlist help of nurse or adjutant if resident not in room.
4. Review purpose of study - make it brief!
e.g. I was wondering if I could talk to you about your life here at T-D Acres. The interview will take about an hour of your time. We hope to develop services for residents particularly those who have not been participating so much.
5. Assure confidentiality; ask if resident wishes significant other present.
6. Ask permission to interview.
7. If agreeable, arrange interview time with resident.
8. Try to conduct interview in quiet, private space, e.g.: resident's room.
9. On date of interview, review purpose of study, confidentiality.
10. Resident may answer question before choices are offered. Allow for this, as well as some supplementary information. Allow yourself at least one hour per interview.
11. Clarify responses if unsure.
12. Thank the resident and assure him/her that findings of the report will be made available to residents by December, 1988.
13. Ask resident to sign consent form; interviewer signs as witness.
14. Document any anecdotal information related to ethnicity, aging, problems, etc. on the back of the last page of questionnaire.

Remember

1. Most residents are older seniors.
2. Some are hearing or visually impaired. Speak loudly and clearly.
3. A handshake or touch on the arm would be nice. It establishes contact.
4. Sit at resident's best angle. Ask about their hearing, vision, etc. Establish eye contact if you can.
5. Be patient! The interview and the resident are important!

Appendix V

LEVELS OF OUTCOME SCALE

Phase One: Orientation

GOAL

1. Identify and meet key stakeholders

INDICATORS OF SUCCESS

Not Satisfactory

- unable to establish meetings with stakeholders
- unable to obtain agreement to proceed
- unable to establish meetings by June 30

Satisfactory

- able to identify and meet with:
 1. Metro staff advisors, planners/funders
 2. T-D Acres Administrator
 3. T-D Acres Board members - obtain agreement to proceed by June 30

Very Satisfactory

- able to establish agreement to proceed and endorsement obtained prior to June 30
-

GOAL

2. Meet with staff and resource people

INDICATORS OF SUCCESS

Not Satisfactory

- unable to establish meetings with staff and resources
- unable to enlist cooperation or information sharing from staff or resources

Satisfactory

- able to identify and meet with:
 1. T-D Acres Mgmt Staff
 2. T-D Acres Administrator
 3. Research staff

Very Satisfactory

- additional resources found, eg: community planners from other agencies; experts in ethnic-elderly field
-

GOAL

3. Attend briefings with Metro staff, Advisors, Administrator

INDICATORS OF SUCCESS

Not Satisfactory

- Advisors, Administrator resistant to practicum meetings, updates

Satisfactory

- Able to meet 3 x's with Advisor, Administrator for briefings

Very Satisfactory

- meets on an on-going basis with Metro staff, Advisor and Administrator
-

GOAL

4. Begin Literature Review

INDICATORS OF SUCCESS

Not Satisfactory

- unable to begin literature review by June 6

Satisfactory

- student able to identify topics for literature review
- able to access literature by June 6

Very Satisfactory

- student able to commence literature review prior to June 6

Phase Two: Pre-Assessment

GOAL

1. Define profile of T-D Acres

INDICATORS OF SUCCESS

Not Satisfactory

- unable to locate relevant brochures, records
- no access to records allowed

Satisfactory

- able to locate and access brochures, records, minutes after negotiation with stakeholders

Very Satisfactory

- able to access existing brochures, minutes, records with little or no resistance or negotiation

GOAL

2. Collect demographic data on ethnic-elderly population of T-D Acres

INDICATORS OF SUCCESS

Not Satisfactory

- unable to secure appropriate data; data not relevant
- data not collected by June 30

Satisfactory

- able to access data for T-D Acres catchment area
- able to make use of existing government statistics
- data collected by June 30

Very Satisfactory

- additional information secured -e.g. Health and Welfare

GOAL

3. Select ethnic-elderly group for Needs Assessment
Draw sample
Establish sampling procedure

INDICATORS OF SUCCESS

Not Satisfactory

- unable to arrive at agreement re: criteria for selection
- unable to select by July 15

Satisfactory

- able to arrive at agreement re: selection criteria for ethnic-elderly groups
- able to select ethnic-elderly by July 15

Very Satisfactory

- selection of ethnic-elderly group straight forward decision
- little negotiation required

GOAL

4. Review, analyze CONA, M.A.S. and other instruments; develop and design interview schedule

INDICATORS OF SUCCESS

Not Satisfactory

- unable to design suitable research instrument

Satisfactory

- able to tailor some aspects of existing instruments to reflect study of ethnic-elderly

Very Satisfactory

- able to review, analyze and extract some features of existing schedules
- able to make appropriate changes
- able to develop new features

GOAL

5. (a) Enlist assistance from stakeholders

(b) Pre-test research instrument

INDICATORS OF SUCCESS

Not Satisfactory

- no assistance or input from stakeholders, Advisors
- Pre-test not carried out.

Satisfactory

- able to enlist assistance from stakeholders
- pre-test undertaken, resulting in improvements to the finalized research instrument

Very Satisfactory

- obtain agreement from stakeholders to proceed prior to July 15
- pre-test completed by July 15

GOAL

6. Obtain agreement on instrument

INDICATORS OF SUCCESS

Not Satisfactory

- no agreement to proceed

Satisfactory

- able to finalize interview schedule by July 29

Very Satisfactory

- can finalize interview schedule and obtain agreement prior to July 29

GOAL

7. Determine date(s) for face-to-face interviews with ethnic-elderly

INDICATORS OF SUCCESS

Not Satisfactory

- unable to establish agreeable date(s) for interviews

Satisfactory

- able to establish agreeable date(s) for interviews
- dissentient, obstacles worked out
- dates established by July 29

Very Satisfactory

- obstacles encountered are successfully resolved through negotiation and problem solving skills
 - dates established prior to July 29
-

GOAL

8. Develop and submit plans for description of objectives to residents

INDICATORS OF SUCCESS

Not Satisfactory

- unable to obtain permission for plan
- unable to provide information in other languages

Satisfactory

- able to obtain permission to conduct information meetings with residents
- able to translate in other languages
- able to accomplish by July 29

Very Satisfactory

- student able to arrange meetings with residents prior to July 29

Phase Three: Needs Assessment

GOAL

1. Recruit and train bilingual interviewers for face-to-face interviews with ethnic-elderly groups

INDICATORS OF SUCCESS

Not Satisfactory

- difficulty recruiting bilingual interviewers
- little co-operation from stakeholders
- interviewers resign
- survey not completed by Aug. 15

Satisfactory

- bilingual interviewers recruited
- interviewers attend all training sessions
- little or no drop out rate
- survey completed by Aug. 15

Very Satisfactory

- budget allocated for hiring of interviewers
 - stakeholders co-operate/participate in training
 - interviews completed by Aug. 15 or earlier
-

GOAL

2. Conduct face-to-face survey

INDICATORS OF SUCCESS

Not Satisfactory

- surveys not completed by August 15
- response rates lower than expected

Satisfactory

- surveys completed within allocated time frame
- response rate acceptable

Very Satisfactory

- all of sample population
 - survey completed in less time than expected
-

Phase Four: Practicum Report Completion

GOAL

1. Compile results of needs assessment.

INDICATORS OF SUCCESS

Not Satisfactory

- analysis continued beyond September 9

Satisfactory

- analysis completed by September 9
- all data returned in allocated time frame
- analysis is appropriate

Very Satisfactory

- interviews completed earlier than expected
 - analysis completed earlier and at a more sophisticated level of analysis than expected
-

GOAL

2. Complete Literature Review

INDICATORS OF SUCCESS

Not Satisfactory

- not completed by September 30
- unable to access, utilize appropriate literature

Satisfactory

- completed by September 30
- use of appropriate theoretical literature

Very Satisfactory

- completed prior to September 30
 - use of tertiary and other related and appropriate literature
-

GOAL

3. Write Practicum Report

INDICATORS OF SUCCESS

Not Satisfactory

- not completed by October 30

Satisfactory

- draft completed and submitted to Chair by October 30

Very Satisfactory

- draft completed prior to October 30
-

GOAL

4. present Practicum Report to Advisors

INDICATORS OF SUCCESS

Not Satisfactory

- unable to present report by December 1

Satisfactory

- presented by December 1

Very Satisfactory

- present report earlier than December 1
-

GOAL

5. Present report to stakeholders

INDICATORS OF SUCCESS

Not Satisfactory

- unable to present report, due to incompleteness by December 1

Satisfactory

- report presented by December 1

Very Satisfactory

- report presented earlier than December 1

ACTUAL TIME FRAME - PRACTICUM ACTIVITIES

Appendix VI

Activity

| Phase I - | | | | | | |
|---------------------------------------------------------------------------------------|---------|---------|--------|---------|--------|---|
| Orientation/Evaluability | June.88 | July.88 | Aug.88 | Sept.88 | Oct.88 | |
| <hr/> | | | | | | |
| 1. Identify/meet key stakeholders; obtain agreement to proceed with needs assessment. | x | _____ | x | | | |
| 2. Meet with staff/resource persons. | x | _____ | x | | | |
| 3. Attend briefings with Metro staff and Advisory. | x | _____ | x | | | |
| 4. Begin literature review | x | | | | | |
| <hr/> | | | | | | |
| Phase II - Pre-Assessment | | | | | | |
| <hr/> | | | | | | |
| 1. Develop profile of T-D Acres. | x | _____ | x | | | |
| 2. Collect data on ethnic minority residents. | x | _____ | x | | | |
| 3. Select sample group | x | _____ | | | | x |
| 4. Examine survey instruments; develop questionnaire. | x | _____ | | | | x |
| 5. Enlist feedback from stakeholders; pre-test instrument | x | _____ | | | | x |
| 6. Obtain agreement to proceed with finalized instrument. | | | | | | x |
| 7. Determine date(s) for face-to-face interviews. | | | | | | x |
| 8. Develop plan for introducing survey to residents; obtain agreement/permission to | | | x | _____ | | x |

Activity

| Phase III The Needs Assessment | July.88 | Aug.88 | Sept.88 | Nov.88 | Dec.88 | Jan.89 | Feb.89 |
|-------------------------------------------|----------------|---------------|----------------|---------------|---------------|---------------|---------------|
| 1. Recruit and train interviewers | x _____ | x | | | | | |
| 2. Conduct survey | | x | ___ | x | | | |

Phase IV Practicum Report

| | | | | | | | |
|---------------------------------------------------|--|--|--|---|-------|---|----------|
| 1. Compile results of survey | | | | x | _____ | x | |
| 2. Complete literature review | | | | | | | |
| 3. Write practicum report | | | | | | | x |
| 4. Present Practicum report to Advisory Committee | | | | | | | April 89 |
| 5. Present Practicum report to other stakeholders | | | | | | | June 89 |

APPENDIX VII

UTILIZATION ENHANCEMENT CHECKLIST¹⁰

Directions: There are fifty items listed below which focus on self-analysis, understanding the organizational context, planning and evaluation, the evaluation process, and communication. You may wish to rephrase some of the items to fit your particular situation or to add items. The checklist served as a guideline as a self-examination after the needs assessment was completed. To serve these multiple purposes, all items are written in the present tense.

A. Determining the Evaluator's Role

1. Assess level of personal congruence with the programs's general goals and consider withdrawing if the incongruity may result in unnecessary conflicts.
2. Determine extent of personal commitment to the importance of conducting an evaluation of this program.
3. Analyze degree to which personal values and opinions about the program are publicly advocated by the evaluator.
4. Determine appropriate share of the responsibility for utilization.
5. Specify activities related to an educational role as well as a data-gathering, information-providing role.

¹⁰ From Brown, R., & Braskamp, L. Summary: Common themes and a checklist. In L. Braskam & R. Brown (Eds.), Utilization of Evaluative Information. San Francisco: Jossey-Bass, 1980.

6. Make sure that consulting skills are sufficient to meet the demands and complexities of the evaluation for the program.
7. Ensure that sufficient technical skills, time resources, and personnel are available to conduct a utilization-focused evaluation.
8. Establish congruence between personal role perception (data-gatherer, consultant, expert, recommender, change agent) and audience expectations.
9. Determine willingness to spend time with program staff in activities that are not directly related to the evaluation (for instance, informal lunches).
10. Establish a sense of credibility and trust with the program director, staff, and other audiences.

Comments

The student feels confident that the importance of the activities in Section A were understood and appreciated, and that most were accomplished. A few areas of weakness were noted, however, for example, number six advises that consulting skills should be sufficient to meet the demands and complexities of the evaluation for the program. The student relied on assistance from Lyn Carpenter and Joann Christensen regarding a number of situations. For example, they provided information and advice about the establishment of a steering committee, attendance and participation in meetings outside of T-D Acres and consultation with the external and internal staff.

B. Understanding the Organizational Context

1. Obtain and study the organizational chart.
2. Identify the names of key people within and outside the organization.
3. Identify the decision makers and potential users of evaluation information within and outside the organization.
4. Understand the policy-making process of the organization.
5. Determine which decisions and policies are made as a result of the evaluation.
6. Know when decisions are made.
7. Determine which staff and other users should be consulted as the evaluation is planned and conducted.
8. Determine whether the sponsor of the evaluation is committed to the evaluation activity and uses evaluative information.
9. Determine the information sources and channels within the organization.
10. Trace the path and impact of the previous evaluations in the same setting and determine how this affects this evaluation.

Comments

The student's on-site office at T-D Acres allowed for participation in staff meetings, and access to decision makers and other key personnel. Assistance in planning the evaluation was sought from all of the service departments, the steering committee and residents. The Administrator provided notification and invitation to key planning meetings and general staff meetings.

C. Planning the Evaluation

1. Make sure there is clear understanding of the evaluation role (that is, formative or summative).
2. Set up specific sessions in which the evaluation plan and its implementations are discussed with key persons.
3. Assess the implications of decisions based on the evaluation that affect personnel.
4. Assess the political implications of various evaluation findings.
5. Determine the likely sources of resistance to positive evaluation results.
6. Determine the likely sources of resistance to negative evaluation results.
7. Determine the freedom to provide evaluative information to various audiences.

8. Determine strategies for dealing with potential conflict and tension between program director/staff and evaluator.
9. Design an evaluation plan that will have technical credibility and provide needed information.
10. Establish a mutual problem-solving approach with the program personnel and decision makers.

Comments

Considerable time was spent in providing and exchanging information with key personnel regarding the needs assessment, the role and responsibilities of the student and the implications of the study. While the student did not have extensive experience in designing a survey instrument, Lyn Carpenter and other steering committee members provided the necessary advice required to design a needs assessment plan that would have technical credibility and provide needed information.

D. Conducting the Evaluation

1. Make sure that everyone understands the purpose of the evaluation.
2. Involve key personnel in determining the purposes, issues, and general evaluation strategies.
3. Involve representatives of potentially affected groups in making decisions about instrumentation and data sources.
4. Be accessible to program staff during the evaluation to learn of and share perspectives from which each is interpreting the information.

5. Collect data from multiple sources.
6. Make sure the data collection instruments and procedures are understandable and relevant.
7. Have informal as well as formal meetings with key persons.
8. Maintain a mutual problem-solving relationship with staff and administrators throughout the evaluation.
9. Collect information needed, but only that.
10. Adapt the evaluation plan to meet changing information needs.

Comments

The student feels that she demonstrated the most flexibility, judgement and creativity in the activities related to actually conducting the evaluation. Attention was given to involving key personnel from various departments to determine purposes, issues and strategies. During the needs assessment, the student was accessible to interviewers and was on-site on weekends as well. Informal as well as formal meetings were scheduled with interviewers to deal with emerging issues and to share perspectives of the information.

E. Communicating the Evaluation Information

1. Make periodic informal reports or presentations.
2. Ask program staff, especially those most affected, to assist in interpreting the findings.

3. Communicate major findings when available and considered appropriate; do not wait for the formal report deadlines.
4. Share rough drafts or preliminary thoughts with key persons before making a final presentation.
5. Write different reports for different audiences.
6. Make presentations understandable and easy to follow.
7. Link presentation to key issues and decisions.
8. Make sure that all audiences receive the evaluative information in sufficient time prior to key decision-making events.
9. Keep written reports brief.
10. Use several media (slides, charts) when making formal presentations.

Comments

The student provided periodic reports to the steering committee and other interested groups, for example, the Social Work Department, whenever major milestones were achieved. Rough drafts of various components of the practicum report were shared with Lyn Carpenter throughout the final phase of the practicum.

While great care was taken to involve T-D Acres staff in the evaluation design, the student neglected to involve program staff to assist in interpreting the findings. In retrospect, such an oversight excluded key personnel from participating in discussions that could effect their work.

Equally important, the student would have appreciated their insights regarding the data analysis, vis-a-vis their day-to-day involvement with residents.

The student will provide a summarized report to the Steering Committee and for the Metro Homes for the Aged Advisory Board.

APPENDIX VIII

**STUDENT EVALUATION RATINGS
PHASE ONE: ORIENTATION/EVALUABILITY**

1. Identify and Meet Key Stakeholders

Rating: Very Satisfactory

Beginning in May 1988, the student was able to establish meetings with a number of key stakeholders:

- 1) George Humble, Administrator T-D Acres
- 2) Joann Christensen, Community Services Department
- 3) Lyn Carpenter, Community Services Department
- 4) Monika Samu, Acting Social Work Department, Supervisor, T-D Acres

Each contributed valuable information, statistics and advice regarding the study. Agreement and endorsement to proceed was established prior to June 30, 1988.

2. Meet with Staff and Resource People

Rating: Very Satisfactory

The student identified and met with the following resource people:

- 1) T-D Acres Nursing, Activation, Chaplaincy and Social Work staff
- 2) Charles Smith, Multicultural and Race Relations, Metro Toronto

- 3) Greg Daly, Policy and Planning Analyst, East York, City Hall
- 4) Margaret Carruthers, Program Supervisor, Province of Ontario
- 5) Maria Ariganello, Community Development Officer, Province of Ontario

All the resource persons provided encouragement and support of the survey. Some provided ethno-cultural data, current bibliographies, and/or insights into the target group(s).

3. Attend Briefings with Metro staff, Advisory, Administrator

Rating: Very Satisfactory

The student was able to establish both formal and informal meetings on an on-going basis with key Metro staff, Lyn Carpenter and George Humble.

4. Begin Literature Review

Rating: Very Satisfactory

The student was able to begin literature review throughout some of the courses studied at the University of Manitoba, September/87 to April/88. Some of the literature on ethnicity and aging, for example, was compiled in the practicum proposal, May, 1988.

PHASE TWO: PRE-ASSESSMENT

1. Define Profile of T-D Acres

Rating: Very Satisfactory

The student was able to access print material, current assessment forms, listings of residents and other appropriate reports. The Administrator, management and front-line staff were co-operative in providing any information.

2. Collect Demographic Data on Ethnic Minority Elderly

Rating: Very Satisfactory

The Social Work Department compiles a listing of ethnic origin of all T-D residents. In meetings with nursing administrators and the social workers, other information regarding whether residents were visible minorities was provided.

3. Select Sample Group

Rating: Very Satisfactory

It was decided during the evaluability assessment process that all ethnic minority residents would be eligible to be included in the sample group, since there was no predominant ethnic minority group represented. Dominant culture as well as ethnic minority residents would be surveyed. After the student met the residents, it became apparent that the survey listing of the residents who were rated as alert and able, would require revision up until the last days of the survey.

4. Examine Existing Survey Instruments; Develop Questionnaire

Rating: Satisfactory

Beginning in May, 1988, the student began to review and analyze CONA, Manitoba Aging Study and other survey questionnaires. Some existing questionnaires provided appropriate questions or formatting ideas. At least five drafts of the survey instrument were made in consultation with the Steering Committee, City Hall Policy and Planning staff and particularly Lyn Carpenter. The student had limited experience in questionnaire design and recognizes the assistance provided by a number of people associated with the needs assessment.

5. Pre-test Instrument

Rating: Very Satisfactory

Since revisions were made to the questionnaire right up to the Survey dates, only one of the pre-tests was completed by July 15, 1988. However, it was decided that since a number of concepts and terminology had been changed a second pre-test was indicated. This second pre-test did not occur until early August, 1988.

6. Obtain Agreement to Proceed with Finalized Instrument

Rating: Very Satisfactory

All the Steering Committee members were involved throughout the survey design process. While a finalized survey was not completed until August (due to last minute wording revisions) the stakeholders

had voiced support and approval of the general survey, its content and areas of investigation.

7. Determine date(s) for Face-to-Face Interviews

Rating: Satisfactory

According to the student's time frame chart, dates for the survey were to have been determined by July 29, 1988. In fact, by July 29, tentative survey dates were scheduled to occur from August 1 - August 5, 1988. Because of last minute revisions to the questionnaire and the decision to conduct a second pre-test, all Steering Committee members agreed that postponement of the survey was required. The survey was postponed to August 8, 1988.

**8. Develop Plan for Introducing Survey to Residents; Obtain Agreement/
Permission to Participate**

Rating: Very Satisfactory

Through numerous informal meetings with residents, a letter of introduction of the survey and the student and a formal meeting with the Residents' Council, the student was able to achieve all the goals outlined in the proposal.

PHASE THREE - NEEDS ASSESSMENT

1. Recruit and Train Interviewers

Rating: Very Satisfactory

The recruitment and training of interviewers was a positive and dynamic process. Approval was granted by the Community Services Department to pay for interviewers. Decisions were made with stakeholders to recruit as many interviewers as possible from outside T-D Acres. Seven community agencies provided interviewers. The student developed training material and conducted the orientation. Bilingual interviewers were utilized where appropriate.

2. Conduct Face-to-Face Survey

Rating: Satisfactory

The surveys were not completed by August 15 due to a postponement and extension of the survey process. The survey was completed by August 28, 1988. The reason for the postponement was because of a decision to conduct a second pre-test. The extra week of surveys was to ensure that all able and willing residents would be asked to participate. These decisions were made together with stakeholders and were important to the success of the overall project. The survey process was organized orderly and well planned. The student had to demonstrate flexibility, judgement and creativity throughout the process to be able to address last minute changes or questions.

PHASE FOUR: PRACTICUM REPORT COMPLETION

1. Compile Results of Needs Assessment

Rating: Satisfactory

Due to the postponement of the survey by one week; the addition of one week to the survey; and the delay encountered with data input, the compilation of results was not completed by September. However, some of the changes, for example the postponement of the survey and the extension of the survey by one week, were supported by the Steering Committee and Advisors. Ultimately, the student feels that the analysis was complete and thorough.

2. Complete Literature Review

Rating: Very Satisfactory

The literature review began throughout the academic year at the University of Manitoba. The student feels confident that appropriate topics of literature were examined for her own learning purposes and for the scope of the project.

3. Write Practicum Report

Rating: Satisfactory

Due to the delay encountered with the data input, the practicum report was not completed by October 30. The student organized her work and had most of the practicum report completed by October 30. However, further delays with the write-up of the report, revisions and word processing were also encountered. The student's

on-site Advisor, Lyn Carpenter provided assistance in the numerous drafts of the reports throughout this period, particularly in the data analysis. Esther Blum also provided further insights and consultation regarding data interpretation and practicum report organization.

4. Present Practicum Report

Anticipated presentation April, 1989.

5. Present Practicum Report to Stakeholders

Anticipated presentation May, 1989.