

Many eyes on elder abuse

Following public consultations* last Fall on the condition of Quebec's seniors, the government is devoting more attention and monies to address the serious problem of elder abuse. One project now under way involves development of an informative kit of "tools" that will help anyone involved with seniors to recognize abuse and to initiate remedial action. A grant from the Seniors Ministry has brought together the Quebec Association for the Defense of Retired Persons and the Quebec Network against Elderly Abuse (RQCAA) to carry it out.

"We're casting a wide net to assemble the most up-to-date information and best practices from here and elsewhere," says **Hélène Wavroch**, RQCAA executive director. "These data will be distilled by a 10-member committee of geriatric experts into a plan of action covering every region of the province. Our tools will be usable by everyone dealing with the elderly – CLSCs, neighbours, social workers, lawyers, police, bankers, friends.

"Our approach is different," says Wavroch, "because it will pull everyone together in a concerted approach. Today, various interveners might be involved with the issue, but it is, by and large, a patchwork effort and many seniors fall between the cracks. We're aiming for a continuum of attention, so that when a senior wants to make a report, there will be support at every step."

It is estimated that at least 450,000 Quebec seniors are subjected to some form of physical, psychological or financial abuse every year. "It's hard to get seniors to talk about it," says Wavroch. "Even when they understand what's happening, they fear both the social stigma and reprisals. By helping others to help them, we hope to change that."

Seniors Minister **Marguerite Blais**, meanwhile, has assembled an inter-ministerial committee that is mandated to integrate protection of seniors into all aspects of government policy. (*The report is available at: www.mfa.gouv.qc.ca.aines .)

811 the number to call

A single number, 811, is now in service province-wide for Info-Santé, Quebec's health information call-in network. This change comes as part of a major overhaul of the system to improve its efficiency. Part of its mandate now is to extend the network's reach to anglophones, long under-users of this important healthcare service.

With funding from Health Canada, the Community Health and Social Services Network (CHSSN) contributed to the translation and preparation of healthcare material and training of Info-Santé responders to operate in English. A mini-network of four regional call centres is now staffed with English-speaking nurses, in Montreal, l'Estrie, Laval and the Outaouais. Any time that another region is not able to respond to an English-speaking caller within a reasonable delay, the call will be transferred into this network.

Info-Santé operates 24/7, handling over two million calls a year. Cost of its recent overhaul topped \$18.4 million. Info-Social, a complementary service that will answer inquiries about social services, is scheduled to start in April 2009.

Shawbridge moving to West Island

The correctional facility originally known as Shawbridge will be closing down to relocate on the West Island. The 100-year-old institution operated by Batshaw Youth and Family Centres in Prévost in the Laurentians will be housed on two sites, a new residence in Beaconsfield and a renovated Batshaw building in Dorval.

The \$30 million project will take a few years to complete. Expansion of the Dorval building, which entails the addition of two 12-person residential units, should start within the next two years. Construction of the new building in Beaconsfield, which will contain recreational facilities, classrooms and nine residential units for 108 youths, will not begin for at least four years.

Respite for families coming

Long bereft of respite services because of their particular needs, anglophone families caring for intellectually disabled and autistic children with severe behavioural problems will soon be given some relief. The Taylor-Birks Foundation is currently raising funds to build a specially designed home for these children in Beaconsfield. The Montreal West Readaptation Centre will be providing the necessary professional services.

“There’s a major need for this kind of facility,” says **Ron Creary**, secretary of the Foundation. “We know of about 50 families that have been going through very difficult times because they cannot use existing respite services. This has repercussions on the quality of life of the parents, of the siblings, of the family as a whole. If nothing is done to support these parents they could well reach the stage of having to place their troubled child in a substitute family arrangement, or worse.” For further information: 1 819 847 4794.

Chronic pain research advancing

The Constance Lethbridge Rehabilitation Centre (CLRC) is participating in some innovative new research being done on chronic pain. Two internationally recognized McGill researchers will be using specially constructed facilities at the CLRC to carry out studies with its clients. When it opens in July, this will be the first multidisciplinary chronic pain rehabilitation research laboratory in Quebec.

“This research will focus on the connections between pain, mind and movement in patients with chronic pain,” explains **Ghislaine Prata**, CLRC executive director. “The ultimate goal is to identify effective treatments that we can incorporate into our clinical practices. Plans are also under way for us to collaborate with the Montreal General Hospital chronic pain clinic, and other McGill partners, in establishing a centre of expertise for chronic pain management. This is another important initiative that will eventually benefit all chronic pain patients.”

Mission getting two new pavilions

The Old Brewery Mission (OBM) is involved in establishing new permanent housing for previously homeless men and women. It collaborated with the Douglas Hospital in opening a group home for released male patients in April. And it will soon be opening an apartment residence for women who have gone through the OBM’s transition program.

“The OBM is committed to moving people out of homelessness and reintegrating them back into society,” says **Mathew Pearce**, executive director. “Our transition program is designed to help them reach a level of independence so that they can live in what we now call ‘supported autonomy’. Ideally, those that can will eventually get back into the job market and move on to totally independent living.”

The nine-room men’s group home, called Maison Claude Laramée, is located in Verdun. It is owned and funded by the Douglas, which maintains the residents’ psychological and medical treatment programs. The OBM oversees their daily living and provides counselling for their social integration.

The women’s 29-apartment complex, to be named Pavillon Lise Watier, is in the Hochelaga-Maisonneuve district. It will be owned and supervised by the OBM, with operating expenses provided by a personal grant from Madame Watier. It is scheduled to open within the year.

Public health a priority

A conference organized by the Community Health and Social Services Network (CHSSN) in late March broke new ground in government/community relations. Senior officials of provincial and regional Public Health divisions met with representatives of English-speaking community networks from across the province to discuss cooperation between the two sectors. The CHSSN’s goal is to have anglophones play a role in developing future public health strategy so as to ensure quality health care in their communities.

Finding foster families a challenge

Batshaw Youth and Family Services currently oversees a network of 331 foster families that care for 482 anglophone children. Most of these homes are designated for long-term placement, but there are also families that provide only emergency, short-term care. There is a pressing need for more of both.

“The most common situation that we have to address is not abuse, but neglect,” explains **Leigh Johnston**, director of Child and Family Services. “So our first response is to work with signalled families to try to keep their children at home. Removing them from their families is the last resort.

“We’re glad to have these wonderful families willing to help,” says Johnston. “But we still have a major problem finding homes for babies. And we particularly need foster families from different ethnic communities; it’s so important for those children to be proud of who they are.” For further information: 514 932 7161, ext. 1141.

Meals-on-Wheels running low

More clients, fewer volunteers, less money. The numbers are not adding up for Meals-on-Wheels programs around the city. In fact, the situation is reaching precarious proportions.

“We do indeed have problems,” says **Marjorie Northrup**, coordinator of Volunteer Food Services at the Volunteer Bureau of Montreal. “The number of people requesting meals is continuously rising, many of our aging clients are developing severe cognitive problems, and we’re running out of volunteers. Of those still with us, their average age is now well over 70.

“And providing two meals a week is not enough anymore,” Northrup adds. “Many people now need five meals. For that we need more government support, and a much bigger bank of volunteers. We’re looking to find more creative ways to recruit them.” For further information: 514 842 3351.

Talk about getting together

Two key meetings were held recently that could lead to improved healthcare services to English-speaking Montrealers. This move was in response to recent studies showing that service barriers do exist and that the quality and continuum of services to anglophones vary across the region. The meetings were convened by a new task force, sponsored by the Community Health and Social Services Network, to encourage dialogue on the issue.

The first brought together several CSSS director generals to sound out their opinions. “They were receptive to the idea,” says Fatiha Gatre Guemiri, Montreal Task Force coordinator. “However, they did point out that Montreal received proportionately much less funding than other regions, so adequate staffing to provide more services was problematic.”

At the second meeting, representatives of 27 community resources from across the island shared their opinions. “It was a stimulating meeting,” says, Guemiri. “I was really pleased that several ethnic community groups participated. They’ve been feeling doubly isolated on healthcare issues.”

Common concerns raised at the community gathering included home care, funding, partnerships and interaction with the institutions. “Setting the context for a new regional dialogue was the theme of the meetings,” says Guemiri. “I think we succeeded. We’ll be taking this first effort to the next stage at a conference with both groups in the Fall.”

Diabetes project an example: What can be accomplished by public/community cooperation is illustrated by the diabetes awareness program introduced last Fall by the East-Island Network for English-language Services. It is funded by a grant from the Public Health Agency of Canada to Italian Canadian Community Services, a network partner. Aimed initially at seniors and students in East End Montreal, the program has been expanded to include seven rural communities across Quebec. Over 20 groups and institutions are involved in the project.

Foundation flourishing

The Foundation of Greater Montreal (FGM), launched in 2000, has become one of the 10 largest foundations in Canada. Seventeen new private funds and 17 new organizational endowment funds have been established over the past eight years, bringing the total assets managed by the FGM to \$87 million. Some 100 other donors have contributed to existing funds. This year, the FGM disbursed over \$2 million in grants to more than 100 community organizations.

“Cancer passport” introduced

The Ministry of Health and Social Services has introduced a new tool to assist cancer patients and their families to move through the healthcare system more easily. It is a document containing pertinent information relating to the diagnosis of the disease, courses of treatment, appointment scheduling and emergency numbers of care providers such as doctors, CLSCs and hospitals. This documentation will also be provided in English.

Residences have to be certified

Montreal’s Health and Social Services Agency has begun the process of certifying all seniors’ residences on the island. These dwellings must conform to government established norms not only for quality of services, but also for the physical environment and security they provide for residents. To date, 12 of Montreal’s 295 residences (with a total capacity for 24,296) have received their certification. The operation is scheduled for completion in February, 2009.

Report on children chilling

Canada ranks 22nd among 29 OECD nations in preventing childhood injuries and deaths; 27th in childhood obesity; 21st in childhood well being, including mental health. These and other startling facts are in Reaching for the Top: a Report by the Advisor on Healthy Children & Youth, available at www.hc-sc.gc.ca/hl-vs/pubs/child-enfant.

In brief

Sheila Goldbloom has been named a Knight of l’Ordre national du Québec.

Louise Jessop has been appointed director of Youth Protection at Batshaw Youth and Family Services.

Leigh Johnston has been appointed director of Child and Family Services at Batshaw Youth and Family Centes.

Michèle Thibodeau-DeGuire was awarded an honorary doctorate of letters by McGill University.

Centraide of Greater Montreal has named its annual award recipients: the Agnes C. Higgins Award, for outstanding initiative and creativity by a funded agency, went to Patro Le Provost; the Gilles Cousineau Award, for outstanding work by the director of a funded agency, to Sylvie Rochette of Regroupement des Magasins-Partage de l’Île de Montréal; the Antoinette Robidoux Award, for outstanding work by a funded agency volunteer, to Lucie Rondeau, OMPAC; the Antoinette Robidoux Award for a youth volunteer was won by Christian Girard, Scouts du Montréal Métropolitain.

The 2008-2009 Directory of Community Services of Greater Montreal is now available from the Information and Referral Centre of Greater Montreal. For information: 514 527 1375.

The East-Island Network for English-language Services is now headquartered at 8370, boul. Lacordaire, suite 306-2, Saint-Léonard, H1R 3Y6; phone: 514 955 8370, ext. 2217.

Volunteering and Mandatory Community Service, a provocative discussion paper, can be downloaded at http://volunteer.ca/volunteer/pdf/MCSDP_Implications_ENG.pdf.

The editor welcomes story ideas: 514 937 4309

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