

# FIRST READING

Volume 10, Number 3

Edmonton Social Planning Council

July 1992



## GOLDEN YEARS?



### INSIDE:

Seniors' Bill of Rights pg 2

Immigrating elders pg 4

Looking ahead pg 8

Program cuts pg 10

Supporting caregivers pg 14

And more ...



First Reading is published six times a year by the Edmonton Social Planning Council. The Council is an independent, not-for-profit organization, whose activities include social research, policy analysis, and advocacy.

We welcome new members, or the opinions and suggestions of our current members. All membership requests or magazine contributions can be forwarded to:

Edmonton Social Planning Council  
#41, 9912-106 Street  
Edmonton, Alberta  
T5K 1C5  
(403) 423-2031

We reserve the right to edit all contributions.

Managing editor: Jonathan Murphy  
Editor: Sheila Kushniruk  
Contributors: Ken McKie, Wanda Cree, Mary Engelmann, Lise Mills, Raul Echeverria, Anna De Luca, June Sheppard, Jonathan Murphy, Pratima Rao and Sheila Kushniruk.

Opinions expressed are those of the contributors and do not necessarily reflect the opinions or policies of the Edmonton Social Planning Council.

Contents may be reprinted or broadcast without permission of the Council, providing full credit is given and a copy of the publication or broadcast forwarded to the Council.

Please report any address changes to our office.



# Writing Rights

...what prospects for a seniors' bill of rights?

By Sheila Kushniruk

Irene would love to see a seniors' bill of rights introduced at the hospital where her husband has been for over two years. Maybe then she could ensure he is treated with the dignity and respect he has earned in his 83 years. Now he must wait for hours before staff find time to put him on a toilet and that is often too late. He is given drugs which Irene feels are unnecessary and his diet is often the same thing day after day. Staff holler at him and rush him through routines.

With Alzheimer's disease and Parkinson's disease Irene's husband can't speak up when something goes wrong. Irene is his legal guardian. She has been through various grievance processes and is finding things have improved somewhat in the last few months. The changes aren't happening overnight. She is told it is a long-term care facility and they don't get funding for the care she is requesting. Her requests include three things. The first is a right to a varied and healthy diet; the second is a right to be placed on the toilet three or four times during the day and third - the right to some regular exercise.

As it is now, he is taken for exercise twice a week with the recreational therapist which Irene thinks is wonderful, but she wishes they would help him to get up from his wheelchair at least once a day and move around a bit. He is only put on the toilet after hours of sitting in his wheelchair and having gas pains. His diet only includes two or three vegetables. Irene said he loves all

vegetables and is still able to digest them if he was given a chance. Irene counted eight days in a row where he was given potato soup and her meal card selections for him were disregarded. He is rarely given any water to drink and he is given laxatives everyday. He is also on an arthritis medication, as well as medicine for Parkinson's disease (which is like a tranquilizer) and sleeping pills at night when he won't or can't go to sleep. She said he is often dopey and was constantly agitated for the better part of a year before they would look at changing his medication for Parkinson's disease.

*"People know things are wrong, but they don't stand up and say anything. It's time we stand up for each other."*

Irene said she hates to keep watching and monitoring his care, but she knows from experience his care becomes less reliable when she doesn't speak up on his behalf. "Sometimes you wear out from asking about something and say 'What's the use,'" said Irene. "People know things are wrong, but they don't stand up and say anything. It's time we stand up for each other."

The hospital where Irene's husband is staying has no bill of rights pertaining to the care of seniors. In fact only a handful of

places in Edmonton do. St. Joseph's Auxiliary Hospital just passed a resident's rights and responsibilities statement through their board with hopes of educating their staff during the summer and putting the rights into place in the fall. Joyce Johnson is the director of residential care services at St. Joseph's and she played a part in researching the idea and providing the committee with enough information to draft one up. There were no seniors or family representatives on the committee, it was made up of people from the hospital board. The rights were drawn up to empower residents. Joyce said it will give people an idea of what they can expect and what they can ask for. If there's a problem it also gives the person a way to challenge the institution. "This is not something you just want on paper," said Johnson.

Implementing the rights may require some staffing changes, such as having more help available past 9 p.m. in case a resident would like to stay up. It also means a major educational campaign to make staff aware of new policies regarding the use of restraint and allowing patients to take the risks they choose such as refusing medications or eating what they like rather than what is recommended by their physicians. Providing the patient is mentally competent, their decisions would take precedence over family, friends, physicians or staff as long as the decisions aren't against the law or against the rules and regulations of the hospital.

The rights include things such as privacy when they meet with their spouse (including common-law); the right to outdoor activity in safe areas unless the set-

ting makes it impossible; the right to privacy when getting treatment and when having personal care given and the right to a dignified death and to have members of his/her family present twenty-four hours per day.

The Capital Care Group in Edmonton also has a list of rights and responsibilities in place and have had for over two years. Other hospitals

declaration was intended as a statement of vision with the understanding a number of its principles may not be attainable in many nations for years. It is to add **life** to the years that have been added to life and includes topics such as independence, participation, care, self-fulfilment and dignity. The principles allow the older person to live at



Listening to the concerns of seniors was the focus of the Inner City Seniors Conference put on June 3-5 by ESPC and Operation Friendship. Photo by Alison MacDonald.

such as the Good Samaritan Auxiliary Hospital use the Charter of Resident's/Patient's Rights from the Consumer's Association of Canada. The Consumer's Charter includes the right to be informed, respected, to participate in decision making affecting his or her health and the right to equal access to health care.

Ontario has a legislated bill of rights for nursing home residents which was put into effect in 1987. The International Federation on Aging also passed a declaration on the rights and responsibilities of older persons which was put in place and became the base for a United Nations principles for older persons passed in 1991. The

home as long as possible, and then to be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment. They should be able to enjoy human rights and fundamental freedoms including full respect for their dignity, beliefs, needs and privacy and the right to make decisions about their care and the quality of life.

While documenting rights and responsibilities seems like a good idea to some, there is opposition to it. Al Pierog is the vice president of community services

with Catholic Social Services in Edmonton. Part of his work involves investigating allegations of elder abuse through the Elderly Adult Resource Centre. He believes the creation of a bill of rights masks over the problems which necessitated the bill in the first place. "A bill of rights won't change anything. It may reaffirm society's obligation we have to others, but that's a given and we shouldn't have to do that....It's much more effective, beneficial and healthy to deal with what prompted the problem in the first place."

Al would rather find ways of empowering residents to get quicker and more direct action through a better way of resolving complaints which is satisfactory to staff as well. "It's my job to make people responsible, because when you're responsible you're empowered."

He fears drafting a bill of rights for seniors would soon after be followed by a staff bill of rights and on and on. He feels staff should recognize a complaint isn't a personal attack and people need to be able to renegotiate a service. Family and clients should also be responsible and have certain obligations for care. "Let's not always make someone else responsible... We have some obligations to look after ourselves. The system can't look after everyone. We can't all be totally irresponsible."

Whether a facility operates with a bill of rights or not, seniors expect a level of care. If the level is not met the facility should have some system of dealing with complaints. A bill of rights would at the least make seniors feel as if their concerns are important and will be addressed.

# Immigrant seniors face many obstacles

By Raul Echeverria

Zoila Mathus came to Edmonton from El Salvador five years ago. She came to join a son and a daughter already living here. Having worked all her adult life as a nurse she realized at 64 years of age she could not hope to continue her profession in Canada. Zoila does not speak much English and she lives on \$412 a month from social assistance. Her attempts to learn English have left her frustrated as the class goes too quickly and the lessons

maker all her life. After 15 years of janitorial work she injured her leg while vacuuming on the job and has been applying and fighting for some compensation for years. Her income is \$427 a month from a federal disability pension with no monies from Workers Compensation or Assured Income for the Severely Handicapped. She is unable to work again. Anita is happy here even though she speaks little English and has never been able to get English as a second language



Anita Caamano and Zoila Mathus are two members of a group of immigrant seniors who gather regularly with the help of Raul Echeverria (centre). Photo by Sheila Kushniruk.

are geared to immigrants who will be entering the labor force.

Anita Caamano has been in Edmonton 18 years. She came from Chile in 1975 and found a part time job within three days of her arrival, working as a janitor. The earnings would help supplement her family's income. It was her first job after being a home-

training.

Zoila and Anita are just two of an increasing immigrant seniors population.

In 1989-1990 1,950 senior immigrants arrived to our province. The massive immigration of Latin American, Korean or Southeast Asian people to our city started

in 1975 due to political upheaval and poverty in many countries. The exact numbers in Edmonton have not been documented, but many are seniors.

Most immigrant seniors come to join family members. These immigrants enter Canada under the family class, or assisted relative class. Others come as refugees from situations of war, persecution and violence.

The organization of immigrant seniors has been very difficult due to cultural differences; lack of knowledge of English; changes in family roles, structure, or values; lack of community resources and lack of experience in proposal development. In Edmonton no research has been carried out to establish the extent of need among immigrant seniors of different origin.

Problems with communication, employment, health and loneliness are identified as obstacles encountered by seniors of different cultural background.

First generation immigrant

seniors find it very difficult to access programs designed for mainstream seniors and even have difficulty with some of the multicultural programs due to their lack of English and lack of understanding of the new environment. The design of ethnocentric programs for seniors could be developed to attend to the needs of first generation immigrant seniors.

I conducted a survey for Catholic Social Services this year and put 22 questions to immigrant seniors from Latin America, Korea and Southeast Asia. One hundred and twenty seven seniors participated and through it I found: only eight respondents (6.3 per cent) have some post secondary education (26 per cent of Alberta's seniors have some post secondary education); 38 per cent of respondents reported receiving social assistance (two per cent of Alberta seniors receive social assistance); older women outnumber older men in the immigrant sample; 16 per cent of respondents reported always feeling lonely, while 73 per cent reported feeling lonely sometimes; English levels presented a huge problem as 92 per cent reported they speak

little English with eight per cent reporting to have some English; and their number of friends had dropped significantly when they came to Canada. It is important to add many immigrant seniors are on social assistance because they're not eligible for the full pension programs.

It can be concluded immigrant seniors experience similar problems to those encountered by Alberta's senior population. The immigrant seniors' difficulties though, are compounded by their new arrival status. Most of these seniors came to Canada after 50 years of age which makes it hard for them to find work. Consequently, they are unemployed or underemployed. Their work situation makes it difficult to secure good retirement benefits. In addition to economic problems, they face language difficulties and cultural differences which creates extra pressure in their lives.

The existing senior services in our city, with the input of the new immigrant senior associations, should work together to establish services which can foster the integration of the newer communities. Bilingual workers should be recruited to help the senior immigrants to learn English and ways of integrating in the new environment. Even if many studies have been done in gerontology of the Canadian mainstream, more research should be done into the minority aging population.

*Raul Echeverria is a facilitator with Primavera Latin American Seniors Association.*



*Many immigrant seniors took part in the June 7 celebrations at Borden Park put on by the Primavera Latin American Seniors Association. Photo by Sheila Kushniruk.*

# It's time to empower our elder newcomers

By Anna DeLuca

Immigrant seniors have many needs in common with other seniors' groups, but their need to learn English makes them unique. Because they don't know English, they are almost certain to be isolated from the community in which they live, from their neighbors and from the society at large. They become dependent on their families for very basic functions such as personal shopping, getting a prescription filled, banking, filling out forms, going to the doctor, and making appointments, to name only a few. Language is also crucial for all other activities; for achieving a level of independence, for leading satisfying lives, for making friends, for overcoming fears such as those of leaving the house, joining a group, participating in an exercise or crafts class. Those who do not know how to use the transportation system are even further hindered from leading independent and satisfying lives. Unless they have the opportunity to learn some English there is little hope they will be able to go out and contribute.

They need to be involved in something meaningful. Immigrant seniors have skills and experiences which are not being used because they are not familiar with the soci-

ety and its institutions and therefore the opportunities for volunteer work do not arise for them. In addition, most volunteer work requires a good knowledge of English which again bars them from participating at a level which would help them to feel useful. Therefore, we have a vast potential of energy, skills and experiences which is going to waste because we do not know how to help the people channel it.

The need to re-establish their

participating member of a community to being a nobody in a new place. Not only do they lose recognition from others but at times they are faced with being looked at with suspicion, or indifference from their neighbors or people on the street. At times, they're faced with perplexed looks and disdain. Consequently, their world shrinks to include only their families and the few friends they make within their



With little or no English, immigrant seniors have a limited social life. Photo by Sheila Kushniruk.

self-esteem is also vital if they are to lead healthy lives. Most have suffered tremendous losses. If you stop and think for one moment about this scenario - you are 55 years old (or 60 or 65) and you move to a country which has a different language, culture and political system. A person's identity is made up of his family, his work, his accomplishments, his communities, all of these are swept away and all of a sudden, he becomes a nameless person stripped of social and financial status, culture, friends and history. An immigrant senior often goes from being a

own ethnic community.

Immigrant seniors need opportunities for social interaction. It is the desire to talk to people outside of their families and their ethnic communities; it's about expanding their world. It's about the

need to share common concerns and experiences with people in their own age group; it's about doing something such as cooking a meal together with others, going for a walk, participating in an enjoyable activity such as exercising, dancing, or playing bridge. It is the need to feel connected to a larger whole.

*Anna DeLuca is the co-ordinator and instructor for a senior's English program at Edmonton Immigrant Services Association.*

# Single senior women: freedom vs. isolation

By Lise Mills

"I feel like I'm begging for my own money" Margaret says through tears after speaking with her son on the phone. She tells me she's having her usual morning cry. Margaret, a 66 year old widow, has given her son power of attorney over her finances and now feels like a beggar whenever she asks for her money. She feels as if she has no financial control because he pays her rent, buys her food and gives her a weekly allowance.

Margaret is temporarily staying at the YWCA since she was evicted from her seniors complex both because of drinking and because people complained of the smell outside of her room. Now she is desperate to find a permanent place to live. While her son wants to find a place for her in a nursing home or seniors lodge she fears that would lead to a loss of independence. Instead she wants to find a bachelor suite. She is hoping to get an apartment at the new residences being built for Operation Friendship but they won't be ready for occupancy for at least another month. Margaret just wants to have a permanent home where she can surround herself with familiar things and begin to feel comfortable and happy again.

Margaret wasn't always an alcoholic nor did she routinely have morning cries, both came about after the death of her husband in 1979. Like many other senior widows she was unprepared for his death both financially and emotionally. Because he had been the main breadwinner and was solely responsible for the household economics Margaret soon found herself selling their home and moving into a small apartment in order to survive. Then things went from bad to worse. Because she was only 53 when he died she could not collect her widows pension until she turned 55. Until that time she survived on income from the sale

of the house, his Canada Pension benefits and for the last few months before her 55th birthday she had to rely on social assistance.

Margaret also found herself in emotional crisis. Previous to his death her entire social life revolved around her husband, their friends and their neighborhood. When he died their friends "disappeared" and because she had been "too embarrassed" to admit financial difficulties to her neighborhood friends she purposefully



*Forty per cent of unattached senior women live below the poverty line. Photo by Sheila Kushniruk.*

stayed out of touch with them. Then she began to drink to numb the pain which arose from her husband's death and her consequent growing isolation and loneliness. After a time her three grown children, who were her only social connection, became frustrated with her drinking habit and their visits became less and less frequent.

Currently Margaret sees or hears from her son daily and although she often feels as if he treats her like a child she is grateful that he is helping her. Now all Margaret really wants is to find a home and be able to make it through the day without crying.

Not all senior women share the same feelings and difficulties that Margaret does. In fact Alice exists at the opposite end of the spectrum in most all respects.

Alice is 69 and has recently retired from the workforce where she was employed for over 45 years. She never experienced the same financial difficulties that Margaret did since she had her own income and managed her own finances. She was able to plan for her retirement and save enough money that when added with her Canada Pension and old age security incomes has enabled her to live comfortably for the past 12 years in an apartment complex. Alice's financial stability also gives her the freedom to travel and pursue hobbies.

Because Alice was never married she has built up a strong network of friendships over the years and has been able to avoid the feelings of isolation and loneliness that Margaret feels. Socially she is very involved with

other seniors and spends most of her free time volunteering for her church group and a seniors organization. For the most part Alice is a happy, contented woman and her only concern is her income won't keep up with the rising cost of living.

Margaret and Alice are somewhat representative of the country's population of senior women. Four out of 10 unattached senior women live below the poverty line in Canada. Many outlive their spouses and find themselves ill-prepared for their time alone. Even though the majority of senior unattached women live comfortably there is a desperate need for the other 40 per cent to be treated with more respect and consideration.

# A look into the future for Alberta seniors

By Ken McKie

Seniors are concerned about the same things that bother everyone else: the weather; taxes; meeting the rent; what to cook for supper; will the country really hold together. There are some concerns that are more specific to older citizens: how to use technology to make life better; elder abuse and neglect; recreation and leisure opportunities; continuing to live independently; employment as an older worker. However, the major concerns of seniors are housing, health, and finances.

Before examining these major concerns, it is useful to review the relationship older citizens have as part of the total population.

There are going to be more and more senior citizens. Seniors will be well educated, active, and healthy. To an extent, seniors will be better off financially, as a group, but there will still be many seniors with few resources during retirement. The increasing number of contract, or low-paying and/or part time jobs with no benefits (no pension) will adversely affect many when they retire.

Seniors will spend more time in retirement because they will live longer. It also means there will be more people of advanced age who will require a variety of health and residential services.

Seniors will have a greater impact on the decisions made about themselves and about society as a whole.

Seniors will not overwhelm



*Seniors today face a number of challenges. Photo by Sheila Kushniruk.*

the health and social service programs as asserted by selfish, insensitive persons who would like to stop our caring about each other. As well, despite efforts by detractors to paint a different picture, seniors are not greedy or unrealistic but they are concerned for themselves, for other seniors, and especially for those who will become seniors in the future.

Just living longer is not enough. There must be an acceptable quality to that life. Maintaining independence is one of the major goals for seniors. All programs serving seniors must have that as their primary thrust. The term 'aging in-place' has been coined to define the idea that seniors should be maintained in their own homes as long as possible.

There is a myth that an adequate supply of housing suitable for seniors exists. Reference has already been made to the myth that all seniors are well-to-do. The current trend towards condominium units for seniors results in an acute shortage of rental units for

purchase. Without a well planned, government sponsored program for subsidized low-income housing, many seniors will be forced into unacceptable substandard accommodations, if they can find anything at all. Older single or divorced women, particularly, will be vulnerable.

A series of housing options needs to be in place to accommodate the eventual decline in the senior's ability to maintain independent living. Home sharing, foster homes, boarding homes, group homes, and apartments with a variety of support services are all needed. Co-operatives for seniors could be another alternative. These are all cost effective living arrangements.

Seniors lodges and extended care facilities are available for those who require more assistance with daily living, but changes in regulations and operational procedures are required. For instance,

low and middle income seniors. As well, some seniors do not wish to tie up their money in a condominium or do not have the resources for such a



married couples should be kept together rather than separated when they require different levels of support.

There will always be a need for institutional facilities carefully planned to ensure these are available as the proportion of older people in the population increases. Long term care facilities will need to be flexible to be able to serve those who continue to have some degree of independence and those who require total care. Maintaining quality of life for the clients suggests the need for recreational and social programs. As well, there should be more single occupancy rooms with double rooms available for couples who wish to stay together, and in those cases, the flexibility of service in the institution would be vital so the needs of each spouse could be accommodated in one place.

These comments just touch the surface of the problems facing seniors in the area of housing.

As previously noted, the increasing proportion of well-educated seniors will result in healthier and longer surviving older people. Preventative measures - accessible health services, adequate income, affordable housing that pay attention to the quality of life of people of all ages, make for healthier older people.

In recognition, the emphasis in seniors organizations is being changed from 'health' services to 'well being'. Unfortunately, projections suggest there will continue to be many seniors —single mothers, for example—who will have low incomes through their retirement years.

Dismantling the health and social programs, as some harsh,

uncaring people are eager to do, will jeopardize not only the quality of life but the very lives of low income seniors.

Researchers' findings conclude the increased aging population will be financially 'manageable'. Those who cry, 'We can no longer afford to support programs for seniors', are either unaware of reality or, for their own unscrupulous purposes are lying to the Canadian public. Other advanced societies have already shown that support for an aging population can be handled successfully.

However, the recent cutting of programs for seniors and the emphasis on them as 'costly services' has many seniors worried effective health care will cease to exist. This fear is also fed by the current attacks on the universality of programs.

The principles of the present medicare system must be maintained. Reductions in costs must be achieved by improving the efficiency of the system. Seniors recognize users must be responsible in their use of the system, as must medical personnel; but that must never be translated into simply reducing the service available.

The ongoing care of seniors following active treatment in hospital or at home is of major concern. Home care is less costly than hospital or institutional care. It is often more effective in promoting healing and in maintaining the health status of the senior. Home

care offers a better quality of life for the recipient.

Community home care services may be simple assistance with household maintenance and chores, yard work and snow removal. Home care may require greater continuing assistance from family or friends. It is critical that respite from the continual pressure and responsibility of being a caregiver is available.

In order to be truly effective and efficient, home care services must be available to a wide range of situations and must be an integral part of the discharge process from



*Seniors deserve to live an acceptable quality of life. Photo by Sheila Kushniruk.*

active treatment of all seniors.

Economic security is a sense of well being whereby an individual is relatively certain he/she can satisfy basic needs and wants, both present and future. The key to economic security in our society is income maintenance.

**Continued on page 18...**

# Program cuts create challenges, opportunities



By  
**Jonathan  
Murphy**

Barely a week goes by without a media story of another program cut. Sometimes the dollars involved are huge, like Michael Wilson's clawback tax on family allowances and old age security. Other times, it's the \$250 reduction in the Bon Accord Golden Age club's budget for the local tourist booth.

It certainly seems unfair. After all, our social programs were supposed to be a sacred trust. And it's hard to justify penny-pinching while the Province can drop \$566 million of our money on a cellular telephone fantasy.

Yet program costs have risen dramatically in all "safety net" programs. Between 1974 and 1991, inflation raised prices by 216 per cent. At the same time, federal government expenditures on social assistance rose by 473 per cent. The unemployment insurance program in 1991/92 cost \$17.2 billion for an increase of 590 per cent, while old age security costs rose 449 per cent for a total of \$18.9 billion.

Even with a tax revenue boost

of 372 per cent in 17 years, almost twice the rate of inflation, Canada's budget deficit has grown continuously over those years. The cost of servicing the debt now totals over one quarter of federal government expenditures, more than the program costs of social assistance, old age security, the Canada Pension Plan, veterans benefits, and family allowance **added together**.

Massive deficits paint governments into a corner. They have three



*Cuts to social programs are part of the government's plans to manage the deficit. Photo by Jonathan Murphy.*

options which are all basically unattractive:

- Printing money, which undermines the national currency, increases inflation, and impoverishes the elderly and others on fixed incomes.

- Increasing taxes, which deflates

the economy, causes a drain of skilled labor, and reduces the incentive to work.

- Reducing social expenditures, which often causes further impoverishment of the poor.

While any strategy ultimately has a recessionary impact, many governments choose reduction in social expenditures as part of their deficit management strategies. In the past, some programs have been immune from cuts, partly because of the strength of the client constituency. Not any more. Even seniors' programs are under fire.

That even unpopular governments have been able to restructure social expenditures should warn the human service sector that we cannot continue demanding funding for our existing program structure as a God-given right. We need to know what are the objectives of our social programs, what delivery mechanisms will be most cost-effective, and how we can measure program outcomes. In particular, we need to be realistic about the costs and merits of universal social programs.

There's no doubt universal delivery of social programs has advantages. Programs are viewed as an entitlement rather than a hand-out to the poor, so program recipients are not stigmatized. In addition, support for the programs tend to be broadly based.

On the other hand, often only a small percentage of the popula-

tion needs a service. But, to gain public support for the proposed program, it must be delivered to all. Take-up is concentrated among the most articulate and informed, while the ones who really need the

sality as the cornerstone of most Canadian social policy. We do not have to build a space in a seniors' lodge for everyone, to make sure the poor senior has somewhere decent to live. Not all moms with newborn children need a

targetted services if they can see the benefits. Everyone who watched the Los Angeles riots should recognize the long term costs of abandoning an underclass. We need to remind the public, business, and government that human investment is economic investment.

The best way to convince the business community and labor is to involve them in our work. Social planning is a general social responsibility rather than our special area. Through co-operation and joint economic and social planning, we can assure the integration of Canadian social and economic objectives. If the present funding restraint leads to this collaboration, then it truly will be a cloud with a silver lining.

After all, no-one deserves welfare. On the other hand, everyone deserves to be a useful and productive member of society. Let's start looking at **building people's potentials** instead of just meeting more and more needs.



When a program is no longer offered to all citizens, it tends to lose support. Photo by Jonathan Murphy.

service have the least access. For example, homecare is available to all who need it, yet there is poor take-up in the inner city, despite the senior population there being in most obvious need. Resource transfer tends to occur **within** the middle class, and is not targetted towards those in need. In addition, huge programs spawn huge and inflexible administrative structures. These bureaucracies themselves become powerful interest groups dedicated to self-preservation.

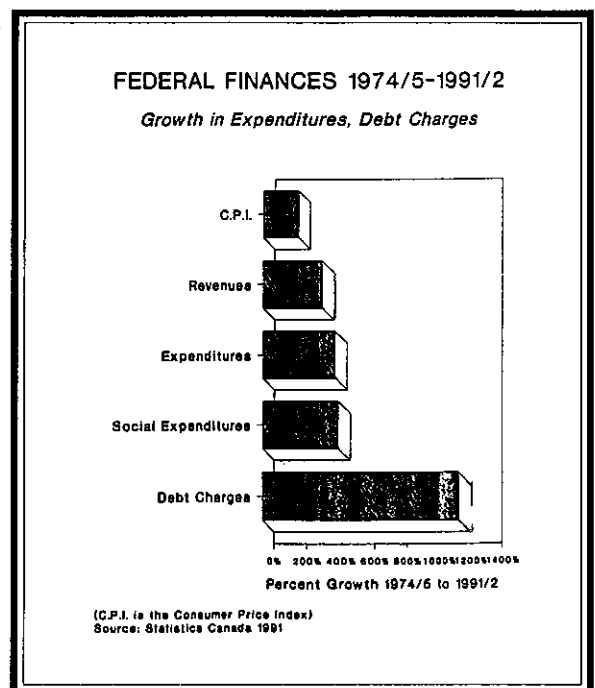
Despite the growth in expenditure on universal social programs, have social problems been eliminated or even reduced? Few would make such a claim.

Equity is replacing univer-

home visit from a nurse, but those in the inner city with low birth weight children might need a whole range of nursing and other supports.

There are big dangers in moving from universality to equity. Services geared only to the disadvantaged could easily become inferior, or be delivered in a condescending and manipulative fashion. Some programs which are needed by all (e.g. medicare) need to maintain universal access. Support erodes when programs are not universal.

However, I believe people will support effective



# Will the 'Seniors Boom' lead to an 'Economic Bust'?

By Pratima Rao

Since the mid-'70s, the costs of most federal government programs have increased. Of these increases, one of the greatest is in the area of seniors' pension programs. For example, in the 17 years between 1974 and 1991, while estimated federal government expenditures have increased by 206 per cent and 297 per cent respectively in the areas of health care and education, during that same period, federal expenditures under the Canada Pension Plan (CPP) and Old Age Security (OAS) have increased by 757 per cent and 449 per cent respectively.

Much of the increase in all areas of government expenditure over the last 20 years can be attributed to inflation and population growth. But in addition to these two factors, the largest increase in expenditure on senior's programs can be attributed to the growing **proportion** of Canada's population who are seniors. In fact, over a 20 year period, from 1970 to 1990, based on post-censal estimates, the percentage of beneficiaries of Old Age Security (OAS) as a proportion of total population has steadily increased from eight per cent to almost 12 per cent. In terms of sheer number of recipients this is an increase of almost 85 per cent from 1,695,000 to 3,133,000.

Expenditure under the federal Guaranteed Income Supplement (GIS) program, a federal benefit first introduced in 1967 for low-income seniors, has also increased, but at a lesser rate than OAS even though both are fully

indexed with inflation. Although calculated for a shorter time period from the programs named above, in the eight years between 1981 and 1989 GIS expenditure went from \$2,242 million in 1981 to \$3,888 million in 1989. This is an increase of 73 per cent compared to an increase in OAS from \$6,141 million to \$11,804 million or 92 per cent during this same time period. The difference is attributed to the proportionately smaller number of Canadian seniors receiving income supplementation — an indication of increases in other sources of retirement income over recent years.

In Alberta, while there has been a 69 per cent increase in the number of OAS recipients between 1975 and 1991, the number of people receiving GIS benefits has increased by only 18 per cent. Also, as noted in the following table, the percent of OAS recipients who qualify for the **maximum** Guaranteed Income Supplement has gone down steadily, from 23 per cent in 1975 to six per cent in 1991.

This indicates an improvement

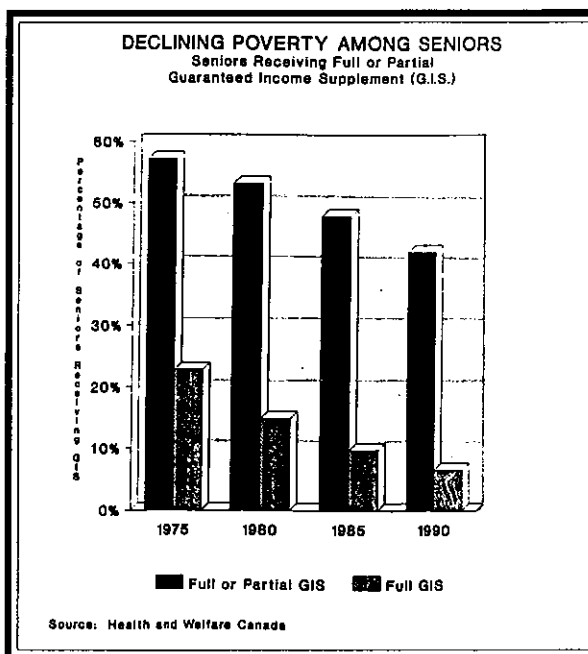
in the standard of living for many seniors, while a relatively small percentage continue to face economic deprivation.

The aging of Canada's population has, and will continue to have, important economic implications for the future, especially over the next 30 years. While the annual growth rate in the total population is expected to hover around the one per cent range for the next three decades, the estimated annual population growth in seniors age groups will be greater, ranging up to four per cent.

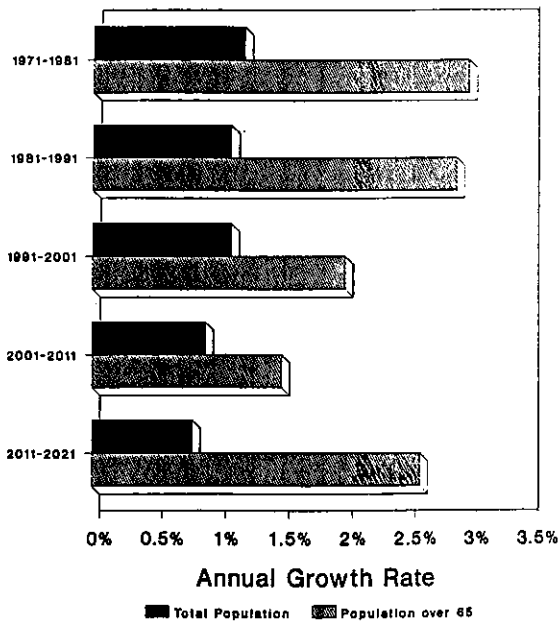
Being aware of the demographic realities facing Canada has influenced policy makers to start making economic adjustments now, instead of when it's too late. With appropriate restructuring of expenditures on seniors programs it is not inevitable that the "seniors boom" will produce economically catastrophic results. The cost of senior's programs such as OAS and CPP surely will rise with the growing

population of eligible seniors, but the governmental burden will partially be offset by the following factors:

- the existence of a "clawback tax" on OAS introduced in 1989 (it is imposed on the incomes of **wealthier** seniors (annual income of \$50,000+) and essentially has 'de-universalized' this previously universal program)
- the increasing reliance by seniors on alternative income sources such as private occupational pension



**POPULATION GROWTH**  
Seniors and Total Population 1971-2021



Source: Statistics Canada 1986

programs and personal retirements savings plans (RRSP's)

- the decreasing proportion of seniors who are considered low income and receive governmental income supplements (GIS and Alberta Assured Income Plan).

With respect to this third point, however, policy makers

must take great care not to "abandon an under-class." Those who will not have sufficient retirement income coming from employment or personal sources **must be adequately compensated** by government. This could be done by re-directing to poor seniors revenue collected from the "clawback tax" on OAS or by redistributing the administrative savings which could be generated from an elimination of the existing OAS and GIS programs and putting in their place a single fully-indexed federal pension program. Regardless of which measures we individually or collectively take to lessen the economic insecurity in our retirement years, we will require a good deal of realistic and disciplined joint economic and social planning.

## Voices From Within conference a success

The Edmonton Social Planning Council recently hosted the "Voices From Within" inner-city seniors conference which took place June 3-5. Over 100 people participated in the three day event. Although most of the participants were seniors living in the inner-cities of Edmonton and Calgary the conference attracted seniors from across Canada.

The goals of the conference were to give inner-city seniors a chance to meet others and to share in voicing their mutual concerns. Most seniors agreed they had to take action to improve many things but emphasized the need to address their economic, health, safety and housing concerns. A large number also believed more should be done to help seniors who suffer from depression, loneliness and isolation.

Seniors felt the speakers did a good job in addressing these important issues and felt motivated to take action. One senior said "They [the speakers] were all very good because they all suggested that we have the

power and the smarts to get on with organizing and lobbying for our rights."

The idea for the conference originated with a committee of inner-city seniors from Edmonton and Calgary who then approached the Edmonton Social Planning Council for help organizing. Staff from Operation Friendship and funds from New Horizons further allowed for a successful

conference.

Reactions by the seniors themselves assured the planning committee, and all those who helped in its undertaking, that it accomplished its goals. One senior said "Contact with others from this convention was enlightening...there is always someone worse off than one thinks they are." When asked what they learned from the conference another stated with great enthusiasm "A great deal! [I] was amazed at the number of really caring people that are doing more than talking about the sad conditions in our inner-cities."

Because of the success of the conference the planning committee will be organizing a national conference within the next three years. In the meantime regional conferences will be held and newsletters will be distributed in order to keep the seniors in contact and their voices alive.



*Bernice Fisher visits with guest speaker Emery Barnes, an MLA from Vancouver's inner city. Photo by Alison MacDonald.*

# Give support to caregivers and independence to seniors

By Mary Engelmann and Wanda Cree

There has been much publicity about the increases in the numbers of elderly in the population and, with that recognition, a growing concern about the need to support the caregivers of frail older persons.

It should be remembered old age affects different people in different ways. The only thing older people have in common is their age. How a person ages depends on heredity, health, environment, lifestyle and attitude. Being old is not being ill. Being old does not necessarily mean that one needs a "caregiver." The majority of older people care for themselves and do not need any special assistance from others.

Most older people are fiercely independent and want to remain independent as long as possible and to the greatest degree possible. They are living in their own homes and managing on their incomes. For the most part they are contributing, active members of families and communities. Only about 20 per cent need assistance from family, friends or community services in order to manage their daily lives. Often rather than needing care, older people may need some help.

Whether caring for themselves or receiving some assistance to manage, older people like younger people, want to be in control of their own lives. They want to make their own decisions—to

have a feeling of autonomy. This sense of independence is most important for one's physical and mental/emotional well-being.

For those providing help to older people, the most important thing to keep in mind is older people do not want to be assisted in a patronizing way that makes them feel like dependent children—in a way that robs them of their ability to have choices and

such as a housekeeper arranged privately, and community agencies. Often the help comes from a number of these different sources. For example, the primary caregiver/helper may be an elderly spouse, with additional assistance provided by a community agency.

Planning and arranging for help for an older person usually, therefore, requires the cooperation

of a number of people. The older person should always be included in the planning in order to assure the plan set up meets as much as possible the needs which she has identified. The solution must be acceptable to her, otherwise it is not likely to be successful.

The older person often has a realistic idea of what kind of help she needs.

The plans made to provide help will depend on a number of things, such as the kind of help required, and how long it will be needed. Sometimes adaptations to the home can assist the older person to get along quite well with a small amount of assistance from a helper. Sometimes all that is required is the installation of an



*Aging should not mean a loss of independence. Many people assume seniors need to be taken care of and that is not the reality. Photo by Sheila Kushniruk.*

make decisions. Most older people in need of such assistance receive help from family members, from spouses and from adult children. It is not unusual for the primary caregiver or helper to be a spouse. In fact, this is the most common situation.

Other sources of help are other relatives, friends, neighbors, paid help

emergency response device which provides the older person with the security of knowing help will be available quickly if needed.

How help is provided will depend on whether the person remains in her home, moves into an apartment in the community, or moves into the home of someone who is going to provide help. This is usually an adult child, but it may

assisting the older person in obtaining government benefits for which she is eligible. Some seniors may only need companionship, social contacts and recreation. Frequent telephone calls to assure all is going well will likely be required.

If the decision is made by both the older person and the helper that they would like to live together, usually in the helper's home, this requires consid-

erable planning in advance and very good communication and understanding among all involved. Consideration must be given to what this will mean to others in the home, to their lifestyle if this is a family, and there must be assurance of privacy for the older person. Financial arrangements must also

be discussed, and agreements regarding this and other responsibilities arranged. It may be difficult to do this prior to making the move but, if done, it will save many hard feelings at a later date.

Providing help to the older person, whether in her home or in one's own home, can be physically and emotionally demanding. If the older person and the helper are related by marriage or otherwise, the change in the relationship may reactivate unresolved feelings and conflicts on the part of both. This can happen particularly in those situations where the caregiver is a spouse or an adult child.

It is most important for the helper to ensure the older person feels involved and in some way contributing—the older person is not made to feel she is a

burden. The older person herself must be understanding and realistic about her demands, and must contribute as much as possible to helping herself.

It is important for the helper to be realistic about her own needs, to maintain her health and, as much as possible, her lifestyle. She must try to remain involved in a few outside interests and to maintain contacts with other family members and friends. The helper cannot neglect her own needs or the needs of her family as this, in the end, may create more stress than she will be able to handle.

The primary helper may be employed, and providing assistance may create additional pressures for her. If possible she should discuss this with her employer and see how her care responsibilities can be accommodated without affecting her employment negatively.

Often, in these situations, periodic family conferences (attended by the older person needing the help are most beneficial. All family members together can discuss the situation and take part in the helping process. This can alleviate resentment on the part of the primary helper that she is being taken advantage of by others in the family. The primary helper must be honest about her needs and honest and direct in speaking about them with other family members.

There are other important people in the older person's life, for example, friends, neighbors, members of a church group and social and community clubs—organizations with which she has been affiliated. It is important also to try to involve them in helping, certainly at least in providing



*Seniors often find a lot of their support comes from their peers - such as at the Inner City Seniors Conference. Photo by Sheila Kushniruk.*

be a sibling, a grandchild, or another close relative or friend. The decision may be made to provide care or help to the older person in her own home. The person who takes on this helping role will find some changes in her own lifestyle.

Some of the types of assistance older people may need are help with housework, with yard work and snow shovelling, with cooking and household chores, with transportation to banks, medical appointments or to social activities. It may be necessary to assist with personal care (help with bathing, with dressing and so forth) and/or assisting with the administration of medications. The helping role often involves advocacy—

social and emotional support. This can lighten the demands on the primary helper, and assist the older person to maintain a variety of contacts in the community. Maintaining these contacts can improve her quality of life by helping her to continue to feel involved and able to maintain to a degree her familiar lifestyle.

There are services available to assist seniors. The most comprehensive of these is the Home Care/Community Long Term Care Program provided by the 27 health units in Alberta. This program can provide or arrange for home-delivered nursing and personal care services, as well as homemaking services. Often there are other services available. The staff of the program know what services are available and can assist in arranging for these also, if needed.

A staff member of the program can visit the older person and discuss the situation with her and the helper. She can help them assess their needs and, if assistance is needed, develop a plan for this assistance.

Sometimes services such as day programs are available. These can be most helpful for both the older person and the primary caregiver. Sometimes the primary caregiver needs an extended period of relief from the responsibility. If so, often arrangements can be made for the older person to move for a few days to a long term care facility, that is, a nursing home or auxiliary hospital.

It should be remembered there are private services and individuals who are willing to provide help on a paid basis. Often the staff member of Home Care or a Sen-

iors Information Service, if available, can provide information about these services. It can be well worth the expenditure of a few dollars to obtain this assistance. It may mean the older person can continue living in "assisted independence," and the primary caregiver can be relieved of some or much of the burden of care.

In a few instances, an older person has no one available to provide any assistance. Home Care will arrange for as much assistance as possible, but the older person and the staff member of the program may decide the best situation would be for the older person to move to a long term care facility.



*Caregivers have needs too. Support can come from many areas for both the senior and the caregivers. Photo by Sheila Kushniruk.*

In other instances the primary caregiver may not be able to meet all the demands for care without affecting her own mental and physical health or she may become ill and unable to continue. Home Care may not be able to provide all the assistance needed, and the older person and her family may lack the funds or may not be able to find private help, to assist. In these instances also a move to a facility would be necessary.

As much as possible, though, it is important to enlist all of the help possible from both private and community sources in order to ensure that older Albertans live as independently as possible.

Working with an older person and assisting her to continue to maintain a satisfying lifestyle can have a very positive effect. It can expand the relationship into a rewarding experience if careful planning is made to ensure both the older person and her helper are able to continue their individual interests as much as possible.

(Throughout the article the feminine pronoun was used to refer to the older person and to her helper, as the majority of seniors and helpers are female.)

*Wanda Cree and Mary Engelmann both work for the Seniors Advisory Council for Alberta. Wanda Cree is the Manager of Information Services and Mary Engelmann is the Advisor on Senior's Issues.*



# Weapons are not the answer



By  
**June  
Sheppard**

Women take a lot of kidding about the load they carry in their handbags but no matter how much is already being toted around, there always seems to be room for one item more!

That item, however, should not and must not be the one recently suggested by the National Firearms Association of Canada!

They have come up with the less-than-brilliant suggestion that Canadian women begin carrying guns and/or sharp knives in their purses for the purpose of fending off rapists.

They have it all figured out. Said gun should be a .38 calibre (whatever that means) and the knife must be lethally-sharp, not the kind you use to slice a peach, but the type with which you might just succeed in slicing a layer off the man attacking you or threatening to do so.

Rape has a long and ugly history. I believe it's safe to say that no other crime against them so affects women and girls in terms of the violation, not just physically, but in their deepest being. It has damaged untold lives, not just invaded bodies.

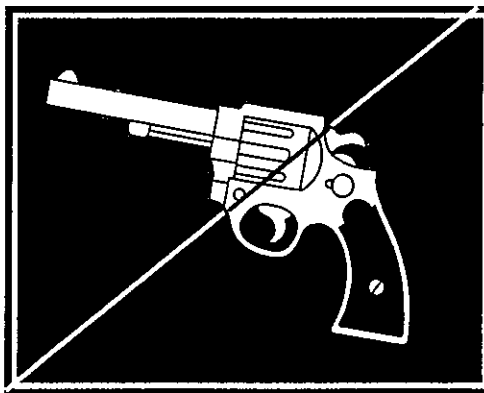
Some of its victims do fight back to recovery and manage to get on with their lives but there is always a hidden scar - the kind that

opens up unexpectedly and painfully. Some can speak of it - others never do or not for many years into the future. Others find themselves generalizing bitterly against all men - not a fair response but an understandable one.

The history of rape is filled with ignorance, myths and evasions about its motives, its driving force, its definition. A 'normal' masculine lust that gets a little out of control, it is not!

The terror of rape has never been stronger than today. A walk with a women friend in the evening is almost a lost pleasure. It's hard to enjoy a sunset or the twilight while always looking over your shoulder! Some pockets of enlightenment about rape have opened a bit. A few of the myths pertaining to "blame" for the victim are being challenged.

Even a few judges in courtrooms across the country where rape cases



were being heard have been publicly chastised for suggesting the 'victim' was actually the "perpetrator" - that the act itself was more an unfortunate "misdemeanor" than the wilful violation of another human being.

But the answer does not lie in a gun or knife in every women's handbag - weapons she must be trained to use to whatever end, or what is the

point?

Is this the society we would then feel safe and comfortable in? The United States has come close to making the gun its national symbol and each year the violence there increases. Teachers even report that children in the lower elementary grades are arriving at school with deadly weapons on their person.

The possibilities for misuse of that gun in a woman's purse are many. Panic may lead to killing someone unintentionally; in any wrestle for possession of the gun or knife, it is as likely that the potential victim would lose her life as it is the rapist; innocent youngsters could get in the way of weapons if the attack takes place in their home. It's not being melodramatic to foresee such tragedies.

Moreover, why should women carry something the majority of them abhor? They know it was manufactured for one purpose and that is to kill whether it's used that way or not.

This crime calls for a concerted effort by every aspect of society including - perhaps particularly - those men who are horrified at what the statistics show, but are too rarely heard on this subject!



**United Way**  
OF EDMONTON AND AREA

# Letter to the Editor

I read the article entitled "Putting Prostitutes in Their Place" by Jonathan Murphy in the May edition of First Reading and felt disappointed and angry by some of the comments. I wonder if it's not really the "long-time community activists" whom the author wished to put in their places. While the article attempts to bring out different experiences and perspectives, I found there was a bias against residents which limited the effectiveness of the reflection and analysis so needed for this situation.

Firstly, the way the author uses the term "activist" implies there is something wrong with caring about one's neighborhood and working to

create an environment for everyone who lives there which is as safe, healthy and enriching as possible. I have lived in McCauley for sixteen years. It is my home, not a place to be an activist!

I would describe McCauley as a mixed-income neighborhood, composed of people of all ages, of many different ethnic and racial backgrounds and of many different lifestyles. All the symptoms of chronic poverty are manifested in the neighborhood as are some of the results of sound, long-term community organizing and community building. There are excellent agencies and groups, many of which came into being because people living here saw a need and worked with others to provide decent housing,

community-based health care and other services. We also work as staff or volunteers, or donate money and goods to many of these agencies. We volunteer to produce a neighborhood newspaper, run a soccer program, organize neighborhood clean-ups and other events which bring people together, work on school and church committees, and with other groups. People who own small businesses, restaurants and shops play their part too, in enhancing the neighborhood. Some people live here because it's convenient, some because it's affordable, some just survive day to day. The neighborhood can be a home for all of these people. I do have

## Continued from page 9

Seniors have three basic sources of income: employer-sponsored pensions and savings plans, Registered Retirement Savings Plans, and personal investment income; Canada Pensions Plan; and income-support programs such as Old Age Security, Guaranteed Income Supplement, and Alberta Assured Income Plan.

Currently, the Alberta and federal governments are changing social programs. As a result, older people view their economic security to be at risk as income maintenance is threatened.

Although Statistics Canada indicates there has been a marked reduction in poverty among Canada's elderly in the past decade, it cannot be assumed that many older people are wealthy. In 1988, only 16 per cent of seniors completing income tax returns received more than \$30,000 per year. Further,

using Statistics Canada's own figures, over half the persons age 65 or more in Alberta were close to or under the poverty line. In 1991, 40 per cent of older Albertans received all or part of the Guaranteed Income Supplement.

Seniors should be assured the support will be maintained, where needed. Some apparent "wealth" of seniors is merely illusion. While a senior may own a mortgage-free home, his/her retirement income may not be sufficient to maintain the home, pay property taxes, and make repairs.

Although the following list of seniors in difficulties is true for the present, it has terrible implications for those who will become seniors in the future unless strong, wise, and immediate action is taken by the federal and provincial governments:

- Single people who are unemployed, on social assistance for extended periods, or work for long periods at low-paying jobs.
- Single parents, mostly

women, who work intermittently or at low paying jobs.

- Low-income earners, mostly women, who divorce or separate in mid-life or later.

- Low-income married couples.

The increase in part time and contract work with no benefits, especially no pension, has important implications as people reach retirement. It should be noted RRSP's can be purchased only by those with some "disposable" income.

Old age itself is not the worry, it is the conditions affecting it currently and the uncertain prospects for the future which concern seniors.

*Ken McKie is the President of The Society for the Retired and Semi-Retired*

problems with our neighborhood being a marketplace for drug pushers and pimps and a playground for 'Johns.'

Many of the women and youth who are prostitutes are residents too. It's the business that is not welcome, not the persons. It is the spin-offs of the sex trade that make people feel desperate. It is the unreachable, unnameable men who are 'Johns' and pimps and drug pushers whom many fear and rage against. Unfortunately, people don't know how to reach these men other than through the women who are prostitutes. The women are the visible ones, and are most easily victimized by their pimps, customers and society at large. However, in this whole debate, I think it's important to remember they are not the only victims. The people who live in these neighborhoods are also victims. And it is not just a few community activists who are concerned about their homes and children. Prostitution was cited as the single most urgent issue facing McCauley by residents of all income groups, ages and ethnic backgrounds during recent public consultations on the Area Redevelopment Plan. The number of women and youth working the streets is on the increase as are the number of neighborhoods affected.

Jonathan Murphy speaks about an 'anti-prostitution movement.' Again I think this is a limiting label. One of the citizen's groups is called Communities for Controlled Prostitution and another is called Action Against Johns. This is not intended to be a war on hookers. These citizen groups are responses to a crisis, a crisis which he did not fully describe. This crisis has many faces and many victims. It has complex causes and no easy answers. McCauley residents have tried virtually every conceivable response over a period of years before moving to direct community action. There can be disagreements about strategies, but put-downs by all parties are not helpful. Existing economic conditions and legislation are forcing

prostitutes and residents into conflicting situations with few constructive ways to address the conflict.

While he points to the redevelopment of Boyle Street as one of the reasons for the explosion of street prostitution into McCauley and surrounding neighborhoods, he does not do justice to describing the reality of what this has meant. In South McCauley, it meant 4,000 car trips per day down a residential side street with houses on one side and a school on the other. It meant hassling of school children by 'Johns' and it meant the streets were less safe for all women. It's important to remember the concentration of street prostitution in McCauley did not start until 1988. One person who works with prostitutes said he



saw the area become a neighborhood again after the one way streets were introduced in 1991.

The charge was made "Maybe it is the community activists who are trying to change the neighborhood after their own image, not the prostitutes." I would like to ask Jonathan Murphy these questions: What image of neighborhood do you believe those you have labelled 'community activists' have? What is the image of a neighborhood for those who have to prostitute to survive? What is your image for inner city neighborhoods?

At this time in Edmonton's history, I see we can only benefit from collaborative reflection and action among agencies who work with prostitutes, prostitutes themselves, Edmonton Police, politicians, residents and social service/action agencies. It would be great if men who are 'Johns' and pimps could be involved too. Some of this is happening already. The Edmonton Social Planning Council has contributed to this by printing the May

issue of First Reading and by sponsoring the visit of Jane Runner from P.O.W.E.R. The debate could have been better served if residents had been allowed to speak for themselves without having their quotes edited and filtered. The ESPC, with a long history of serving marginalized groups, social agencies and local neighborhoods, could perform a major service by working with all concerned towards the best possible short term community solutions and long term societal responses.

*Kathleen Quinn has resided in McCauley for 16 years with her family.*

In response to Kathleen's letter:

Having worked and lived in the inner city for many years, I certainly recognize and appreciate the invaluable and selfless work of the many community activists in the area.

I also realize prostitution is aggravating and frightening to many people in the inner city. People have a right to live their lives in peace and without harassment from pimps, prostitutes or their clients.

On the other hand, prostitution has always been an integral part of the inner city. The sex trade is the result of many complex social factors which are not likely to go away soon. In the short term, the realistic solution to the problem of prostitution is to reach an accommodation between society as a whole, the inner city communities, and people involved in the sex trade. This accommodation cannot take place without effective communication between all parties.

We hope the visit to Edmonton of Jane Runner from Prostitutes and Other Women for Equal Rights was a first step towards a balanced and humane approach to the problem of street prostitution.

*Jonathan Murphy - Executive Director ESPC*

**TO:**

From: Edmonton Social Planning Council  
#41, 9912-106 St.  
Edmonton, Alberta  
T5K 1C5  
Phone: (403) 423-2031 (FAX 425-6244)

Canadian Publications Mail Sales Agreement No.59498

## ESPC Briefs:

**August 12 and 13 ESPC volunteers will be working at the Casino ABS at 7055 Argyll Road. Please come out and support the Council and have some fun. It is open from 11 a.m. to midnight.**

**Please take a minute to check your ESPC Membership Card to ensure your membership has not expired. We don't want to lose you! Your support helps us in our efforts to make our society a better place for everyone. You can do a good turn for someone by telling them about the Council and the work we do and together we can accomplish a great deal.**

**Welcome to our new summer staff: Pratima Rao who has previously worked with the Council as a Social Planner; Stephanos Habashi who is working on a racism study of Northeast Edmonton and Lise Mills who is a sociology student and will be attending the University of Alberta this fall. We also welcome Ivone Martins who will be working on contract to produce a child welfare manual.**

## Council Board elects new President

Heather Konrad has been elected President of the Board of the Edmonton Social Planning Council. Heather works as tax counsel for the Department of Justice. She began her legal career as a private practitioner of litigation and family law, working extensively with

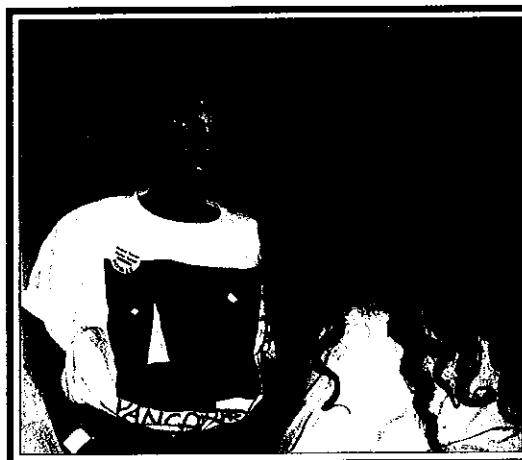


*Heather Konrad*

single mothers on social assistance.

As President, Heather hopes to raise the profile of the ESPC. She believes the Council should become more pro-active rather than reacting to government actions.

## POWER MESSAGE



*Jane Runner of POWER related tales of Winnipeg's struggle to have prostitutes treated fairly as well as keeping neighborhoods safe.*

Edmonton may be one step closer to ironing out some conflicts with prostitutes. ESPC brought Jane Runner of POWER (Prostitutes and Other Women for Equal Rights) to Edmonton from Winnipeg June 18-20 with help from the Clifford E. Lee Foundation. Jane spoke to prostitutes, service agencies and community groups about how POWER has helped all parties to communicate and respect each other's rights in Winnipeg's inner city. The Council hopes to keep the initiative going by making sure solutions to the issues raised by prostitutes involve all those affected.