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Dolores Luber

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CO-PRESIDENTS’ MESSAGE

Dear Senior Line Reader,

Gyda and I are writing this message at the beginning of the Jewish New Year and the new fiscal year of Jewish Seniors Alliance of Greater Vancouver. We are fully aware of the Covid-19 virus. It is raging and interrupting lives. Mental health challenges confront our world in a myriad of ways, including drug addiction, loneliness, anxiety and depression. Now is the time that we, who are blessed with the advantages that are beyond the reach of so many, to feel the pain and empathize with the desperation of those less fortunate.

ADAPTING TO THE NEW REALITY

The current conditions have necessitated new modes of action! The dedicated staff and committed Board Members have faced the challenges posed by the impact of the pandemic and responded in a cohesive, united front by innovating and adapting to the new reality.

We recently held our first online Annual General Meeting that was well-attended and well-received by the participants. In as much as this was our first attempt at this new format, it was, in consequence of that fact, the most successful AGM in our history.

One of the major adjustments we were forced to make is in the way in which we deliver our emotional support services to our clients—in order to alleviate the pain and emptiness due to the loneliness and isolation exacerbated by the impact of the pandemic on all aspects of their lives.

Covid-19 will not stop your JSA from continuing its good work in support of our senior population.

What, in pre-pandemic times, were weekly one-hour visits to our clients had to necessarily be substituted by two or often more hourly phone calls per week. This represents a drastic change in how our well-trained volunteers perform in giving emotional support. Important signs and messages displayed by gestures, posture and other various body language signs are no longer available tools to help our volunteers evaluate and assess particular circumstances that clients may be trying to express. What to do? Well, our Senior Peer Support Services Trainer and Supervisor, Grace Hann, rose to the occasion and designed a course that facilitated the transition from personal visits to multiple phone calls in order to continue, in an uninterrupted manner, the emotional support that our clients have come to count on and expect. This was no easy task and involves ongoing training and volunteer support sessions with groups of our volunteers that take place every three weeks. While a great many other organizations and agencies have been stymied by this insidious pandemic and their services have ground to a halt; we, through the efforts of our entire team, have managed to keep our operation going at full speed.

CONTINUATION OF OUTREACH PROGRAMS

In addition, our popular Outreach programs had to adapt to a new venue and required changes in the programs we typically offer. So, by virtue of the imagination and innovation skills of our vibrant Program Committee, we will present a Virtual Empowerment Series session partnered by our partner agency, Kehila Society, and our Virtual Fall Symposium featuring Dr. James McCormack who will address how well treatments prevent Covid-19 and other ailments. Covid-19 will not stop your JSA from continuing its good work in support of our senior population.

Another pillar of our seniors support activity is the advocating we do on behalf of seniors’ needs and seniors’ organizations. The JSA responds to concerns with the government, public, agencies, and funding groups. Here are some of the issues we are continuing to address:

Continued on page 6...
After working for months on the various articles which I write for this magazine, I was finally ready to compose my Editor’s Message. On that day, I learned that Ruth Bader Ginsberg, the American scholar and jurist, the Supreme Court justice of over 20 years, had died at the age of 87. I knew then what I would be saying to my readers. In 2019, Dahlia Lithwick, writing in The Atlantic wrote: “Today, more than ever, women starved for models of female influence, authenticity, dignity and voice hold up an octogenarian justice as the embodiment of hope for an empowered future.” Another comment I heard on the television was, “she broke down barriers and built bridges.” Ruth Bader was born into a modest, immigrant Jewish family. Unable to attend college after high school due to financial distress, she eventually earned a scholarship to Cornell. The rest is history—“the very top of the legal world” (so said her loving and supportive husband in his last words to her). She is a role model for all us, for our children and grandchildren. Her discipline, scholarship, and determination fought on an unfair playing field. She worked without stop, intrepid, with superb critical thinking skills on the issue of discrimination. In her words, “Discrimination hurts everybody.” In her life’s work and in her passing, she has something to give each one of us, that is, we must utilize the qualities and resources which we have for the betterment of family, friends and society.

BEWARE OF DOOMSCROLLING, ESPECIALLY IN COMBINATION WITH THE ANNIVERSARY EFFECT

My birthday is on July 22nd. During the first week of July, I started to feel ill-at-ease. I would not be seeing my son and his family from Oakville, Ontario. We usually get together every year for my birthday, either in Oakville or in Vancouver. My infrequent visits with my son and his family who live in White Rock took place in a dog park—no touching. They did not wish to visit in my home or go to a restaurant. My son and his wife who live in Oregon were not allowed to cross the border. Even if they came as Canadians, they would have had to quarantine for two-weeks. I was out-of-sorts. I was imagining worst-case-scenarios—being alone, having Alzheimer’s. I felt sad, lonely and isolated. I thought of moving to Oakville, I even searched online for a house to buy. I was anxious and depressed. I continued working out with my trainers, stronger than ever. I continued with my Hebrew lessons. I went to the off-leash dog park every day. By the beginning of August, I had recovered my equilibrium. I concentrated on producing the next issue of Senior Line magazine. I got organized, I set a date for the editorial committee meeting. I was back to normal. What had happened?

I had fallen victim to “Doomscrolling” in combination with the “Anniversary Effect.”

The “Anniversary Effect”, is a collection of disturbing feelings, thoughts or memories that occur on or around a date that marks a significant event. You could be feeling sad, irritable, anxious, emotionally shutdown, or unable to sleep, and a quick glance at the calendar will help you to connect this emotional state to an event. It might be the birthday of a loved-one you have lost, the due date of a miscarried baby, or the day an assault or accident happened. As that date nears, bad memories start to resurface, and you will realise that you are experiencing the annual echo of a trauma. In my case, I was mourning what is usually a happy, joy-filled event.

Continued on page 6...
LETTERS TO THE EDITOR...
Write to Dolores at: editor@jsalliance.org

A Letter to Grace Hann:
I just wanted to send you an e-mail to say how much I appreciate your involvement with my client last week and how critically important the JSA Peer Support Program is to my caseload clients in the community. As the Geriatric Psychiatry Outreach Nurse at PHC (GPOT) my clients have benefited tremendously from your amazing volunteers.

Even before the COVID-19 pandemic ramifications, the Peer Support Program has been instrumental in maintaining the stability and well-being of my geriatric community clients’ mental health. I find a lot of the senior community supportive services are focused primarily on providing home care and clinic services, i.e. physio, occupational therapy, grocery delivery but not many emotionally supportive services.

In the last 20 years of being a geriatric psychiatric nurse, I have witnessed how the mind and body are closely connected. When the isolated older individual is lonely and suffering from anxiety and depression, they often experience increased physical discomfort and pain. Likewise, when older adults at home are suffering from chronic pain or a debilitating illness, they are at higher risk of depression, anxiety and overall emotional distress. I can’t thank you enough for the work you do in training these amazing volunteers. I know that if one of my clients in the community is struggling with a mental health condition or is living through bereavement, I always feel grateful to be able to refer to the JSA Peer Support Program. I believe our two programs share a wonderful synergy together. Many Thanks.

Buffy Bindley RPN
Geriatric Psychiatry Outreach Team Nurse Clinician
Elder Care Clinic at SPH/MSJ
bbindley@providencehealth.bc.ca

We wish you a Happy New Year and a year ahead filled with good health and peace.

Thank you for referencing your article which articulated so well the vulnerabilities we share to some degree at this time (Depression Insidious, The Jewish Independent).

The July issue of Senior Line was also quite informative. The pull-out emergency notes in the centre of the magazine is a brilliant idea for collecting relevant data in one place.

I was able to download a PDF of The Betrothed and began reading chapters 31-37 as recommended (not enough time to work through the whole book). The other books and movies reviews were succinct and provided a useful guide in selecting future reading or viewing. Well done.

Rudy and Dona
Oakville, ON

Hope all is well with you and yours. I picked up a Senior Line while in Omnitsky’s the other day. Liked your articles as well as others in the edition.

Lee Wolfe

I am holding the Senior Line July issue in my hands, finally allowing myself to touch it after three days letting the mail rest to air it out. I am now looking at the cover(s) front and back with automobiles in them both —inviting me to travel anywhere within these covers as you look at them. Genius of a set-up! Looking forward to spending part of the afternoon indulging in the pleasures of where this enticing issue will take me. Thank you everyone. Toddah Rabbah for the effort you put into making this Senior Line the superb issue that it is. It and you are an endless bounty upon which we draw.

Binny Goldman

I moved recently to a different apartment in my building. Well, movers aren’t allowed in the building yet. So, I moved everything myself using a small dolly and one cart. I made 57 elevator trips. Needless to say, I was exhausted, but happy to be in a larger apartment. I did save money though, not using movers.

Avrom Osipov

Editor’s note: Dear Avrom, Covid-19 has challenged us to be creative and flexible. Congratulations!

I picked up a Senior Line while in Omnitsky’s the other day. Liked your articles as well as others in the edition.

Lee Wolfe

Thank you for your magazine Senior Line. I want you to know how much I enjoy reading it. I often find magazines superficial, but yours is never that. I enjoyed the poem Pandemic Poem by Lynn Ungar. I really like her writing. I think she has written other poetry about the pandemic - you might want to investigate this. Thank you for your great magazine.

Susan Billingsley

Editor’s note: Here is Lynn Ungar’s website with many more poems:
http://www.lynnungar.com/poems/
Dear Friends,

On July 23rd, I became 92 years old. It was a time of reflection and of happiness, for the long healthy life that has been given to me. It was also a time to reflect on what I have accomplished so far, and my special relationship to those who give, our donors. Our Rabbis tell us that helping to bury a friend is the greatest mitzvah (good deed), to perform. Why? Because a dead person can never repay you or say thank you. We have an individual in our community that, for the last five years, has given JSA a large sum of money as a donation. We don’t know who that person is, but we thank him/her from the bottom of our hearts, for understanding the specific work that we are doing in the community and for being a donor to our cause. JSA honored this mysterious donor at our AGM in September. JSA usually honours three individual seniors in our community who are nominated by the organizations they work for, giving time of themselves to help our seniors’ community.

About ten years ago, JSA faced an adverse situation. We found ourselves in great need of $10K without which we could not meet our payroll. I don’t know why it happened, but it did. I as President, together with my two Vice Presidents, Marilyn Berger and Ken Levitt, went to see a large organization, and asked for financial help to meet our needs. They listened in silence, they started bargaining whether $5K would do, and then this person got off his comfortable chair and pointing his finger at me said, “Serge, you have to build a budget and you have to make sure you meet that budget no matter what.”

I got quite angry, red in the face, and said to this person, “maybe you can look in the face of those old seniors that have trouble from being isolated, lonely, abused, and marginalized. Maybe you can accept those eyes, what they tell you, and think about meeting the budget. I cannot.” That individual will never understand what a donor is all about.

What a generous role to be a donor.

I look in the eyes of these people every day! I will go down on my knees and beg if I have to. I will get this money that is needed to help these people. I got the money. I begged for it and we are still doing wonderful things in this community, through our Outreach, our Advocacy and our Peer Support programs. Our wonderful Board made up of seniors, give timeless volunteer hours to guide and help our organization in their task of helping the community of elders in the Lower Mainland. Our many volunteers who are in the field after being properly trained, are giving their time, their hearts and souls, to support those that need help. What a generous role to be a donor.

While I was working for JSA, I met many people that I asked to help our organization. I have asked the donor to look at the work that we are doing and then donate accordingly. I can tell you about two of our largest donors that I met, who escorted me to the door and when I thanked them for their money, they said to me clearly “It’s just money, we have it, and we give it. Now, it is up to you to do the hard work.” What a wonderful relationship that develops during the years between those donors who give the money and our volunteers.

We have been blessed with such people in our community and I assure you that all organizations that are helping people in this community, have the same feelings and admiration for these donors.

Someday, I will meet my maker and He most likely will ask me “I gave you life, what did you do with it?” I will stand up, keep my head high and probably say “Thank you for my life, I can tell you that I helped my community and my fellow man.”

Can you say that much?

Serge Haber
President Emeritus

Serge Haber is the founder and President Emeritus of Jewish Seniors Alliance. His vision, his determination and his continuing commitment are crucial to the development of the organization and its services.
ADAPTING TO THE NEW REALITIES OF COVID-19

...Continued from Page 2.

a. Soliciting the Federal Minister of Seniors for financial support to aid senior retirees who have been hard hit by the economic downturn, the rising prices and the additional expenses resulting from the Covid-19 pandemic.

b. Staying involved with webinars and public forums in sharing information and education that focus on issues that are impacting seniors during the pandemic.

c. Supporting the BC Poverty Reduction Coalition towards the goal of reducing poverty in BC through a variety of funding, educational and specifically directed programs.

d. Focusing on demanding action to alleviate the abhorrent conditions prevalent in many of our long-term care facilities and press for immediate action to be taken on this urgent matter.

Let us not forget to shower well-deserved kudos onto the editor-in-chief and staff of our formidable Senior Line Magazine that comes to your home chock full of informative, innovative and cultural articles.

Remember, your support allows us to make a meaningful difference in the lives of seniors depending on us. If

Gyda Chud’s lifelong passion is her career in Early Childhood Education which she teaches at Langara and VCC. She serves on the Boards of numerous organizations including JSA and President of the Peretz Centre which her parents helped establish in 1945.

Larry Shapiro studied accounting and worked at major firms as well as with the Federal government. In 1977, he studied real estate and opened his own business. Since moving from Montreal to Vancouver, Larry has been an active member of the JSA Board.

MAKING A DIFFERENCE IN YOUR WORLD

...Continued from Page 3.

but, this year, it was not happening. I was grieving for what used to be!

ENTER DOOMSCROLLING OR DOOMSURFING

Right now, people are living at a time with no easy solutions, a moment with a lot of conflicting “facts” in a rapidly changing landscape. That means there is a high demand on cognitive processing to make sense of this. There is no overarching narrative that helps us. A global pandemic together with civil unrest intensifies the problem. In a situation like that, we engage in immediate survival-oriented behaviours. We’re in fight-or-flight mode.

Ever since the Covid-19 pandemic left a great many people locked down in their homes in early March, the morning and evening ritual has become the endless scroll through social media in a desperate search for clarity. This habit has become known as Doomsurfing or Doomsscrolling. As humans we have a natural tendency to pay more attention to negative news. This can lead to long-term negative effects on mental health such as anxiety and depression.

Readers, we must be vigilant concerning the Anniversary Effect

and Doomsscrolling. By maintaining awareness of our moods and thought processes, by limiting the exposure to “bad news,” by sharing with family and friends the challenges which we all face, we can not only survive this pandemic but also thrive in spite of it, by helping others, by reaching out in small ways to facilitate a healthy lifestyle, and by nurturing that which is healthy and good. Our saving graces will be connection, reflection, and change.

Dolores Luber MS is a retired psychotherapist and family counsellor. She taught psychology for many years, and loves to learn. Researching, writing and organizing JSA’s Senior Line magazine is her passion.
Rita Propp has been the Administrative Assistant at Jewish Seniors Alliance since the spring of 2010. Rita’s is the friendly voice you hear on the phone when you call. She is always ready with information and, if need be, she will call you back to fill you in. Her duties vary and include reception, help with accounting and assisting the Coordinator with any number of administrative tasks. Rita keeps track of registration for programs and helps out on the day of events. She coordinates the mailing of Senior Line magazine, as well as pickup and delivery to various institutions by JSA members.

When Rita’s children were at Talmud Torah she worked there as a volunteer. Subsequently she was employed for many years by the Jewish Federation of Greater Vancouver. Rita has an interesting history. She was born in the Philippines, where her parents lived for ten years, after escaping from Germany in 1939. She grew up in the United States and moved to Canada in 1972, after meeting and marrying a Canadian, Dan Propp. They have two children. As most of our supporters know Rita’s daughter is the JSA graphic designer and webmaster, Jenn Propp.

It is always a pleasant experience to work with Rita, sitting with her at a registration desk at a Spring Forum, Fall Symposium or Empowerment event. No matter what the pressures and the mix-ups, Rita stays calm and collected. She is a gem!

On behalf of Jewish Seniors Alliance I am delighted to welcome Margot Beauchamp to the team. She has over 35 years experience working in senior management positions for diverse non-profit social services organizations. Aside from her MA in social work and other academic achievements Margot holds a BC Teacher’s certificate and is a certified surveyor for Commission of Accreditation of Rehabilitation Facilities (CARF). When asked what talents she brings with her to the position she described herself as a resourceful team builder who values environments that encourages collaboration, engagement and respect. Margot aims high both professionally and personally. She is a multifaceted woman with a vast bank of knowledge and experiences. Her personal hobbies are her interest in bird-watching and astronomy. JSA has quite a few staff members and volunteers who have performed volunteer work abroad, but Margot is likely the first one who volunteered her services in Cambodia. Margot, we are looking forward to work with you and are excited to have you join the JSA team.
The Jewish Seniors Alliance of Greater Vancouver held its Annual General Meeting on September 10th via Zoom. Because of the pandemic, we were unable to have our usual format—in spite of these obstacles, we succeeded in dealing with our ongoing activities and resolutions for our future.

Gyda Chud, Co-President of JSA, focused her remarks on the hard work of the volunteers of our Peer Support Program, who have been putting in extra time contacting their clients by phone several times per week. She thanked Grace Hann and Charles Leibovitch for their support of the volunteers during these demanding times. Gyda also thanked the rest of the staff, Liz Azeroual, Executive Administrator, Jenn Propp, Graphic Designer and Webmaster, and Wendy Lo, Bookkeeper. She mentioned two new staff members, Margot Beauchamp, Quality Assurance Liaison, and Rochelle Garfinkel, Donor Relations and Philanthropy. Gyda asked for a minute of silence to remember the member/supporters who passed away over the last year.

JSA’s Co-President Larry Shapiro called the meeting to order. JSA’s Financial Statements were presented by Treasurer Alan Marchant in a clear and precise manner. Larry Shapiro commented on the harmony of working with his co-chair, Gyda Chud, and also with the Board Members of JSA. He emphasized the importance of the Peer Support Program. Larry urged everyone to stay in touch and to read Senior Line magazine.

Tony DuMoulin, who is in charge of Governance Issues, then presented a special resolution for a change to the constitution. This involved removing the word “Jewish” in the section saying that we work with Jewish seniors. Since we interact with all seniors, this description is misleading. He reiterated that the name of the organization, Jewish Seniors Alliance, remains the same. The resolution was approved by 82%.

Next Tony proposed a special resolution to change a number of the by-laws such as—all donors automatically become members; meetings may be held electronically; officers to be elected by the Board; and an extended term for members. These changes were approved by 88%.

Ken Levitt, chair of the Nominations Committee, thanked Larry Meyer and Pam Ottem, who are retiring, for their years of work on behalf of JSA. He moved that the number of Directors on the Board be changed from 20 to 21. This was passed by 97%. Ken read out the nominations for the upcoming Board and these were passed by acclamation. Next came the reports of the various committee chairpersons. These reports are available on the JSA website. Briefly, the Committee Chairs are as follows:

Rita Roling, Peer Support Services. Rita is taking over from Pam Ottem. They are presently handling 100 clients and would like to increase the service. Lyle Pullan, Membership, stated that we have 517 members and 102 life members.
Lyle believes that many become new members as a result of reading the Senior Line magazine. Serge Haber reported on fundraising. We have hired Rochelle Garfinkel, for Donor Relations and Philanthropy. We have a contract with Vancouver Coastal Health for $70,000 annually to stabilize the organization. Shanie Levin reported for the Program Committee. The committee is planning a Fall Symposium in November and an Empowerment event in October to be held via Zoom. Dolores Luber, Editor of Senior Line magazine, thanked Jenn Propp for her graphic design and collaboration, and the members of the Editorial Committee for their efforts.

Tony DuMoulin spoke on behalf of the Advocacy Committee. They have established collaboration with COSCO, anti-poverty groups, and they have approached the Provincial Government regarding making the high dosage flu shot free for all seniors. They want to pressure the government for improvements in long term care homes; increase in pensions and free lifeline pendants for poor seniors.

After a short video showing the work of the Peer Support Program, Serge Haber thanked an anonymous donor. Serge explained that five years ago, we were contacted by a lawyer about a $25,000 donation from a donor who wished to remain anonymous, which JSA continues to receive annually. Larry then thanked everyone for zooming in and adjourned the meeting.

Jewish Seniors Alliance Snider Foundation Empowerment Series 2020-21

#1: Music in the Afternoon

Written by Shanie Levin

Jewish Seniors Alliance Snider Foundation Empowerment Series and Kehila Society of Richmond presented the first of the 2020-21 Empowerment programs on October 19th, 2020. Because of the pandemic the event took place on Zoom.

Last year’s theme, Be Inspired was carried forward for this year’s season. Fifty participants tuned in for a concert entitled Music in the Afternoon. The event featured pianist, Lester Soo and soprano, Maria Cristina Fantini. Lester is a native Vancouverite, an accomplished musician who has taught, adjudicated, accompanied and performed in the world of music for many years.

Maria’s biography states that she is a dramatic soprano, at home in both classical and popular styles. In addition to singing opera, Maria teaches and has established her own vocal studio.

Toby Rubin, Coordinator of Kehila Society, welcomed everyone and introduced Lester and Maria.

Gyda Chud, Co-President of JSA, spoke about JSA and recalled that Lester and Maria had performed in a joint program in the past. Lester and Maria were at Lester’s home, where he was able to make use of his grand piano. We were wonderfully entertained by a number of old favorites starting from the 1930’s, like Unforgettable, When I Fall in Love, and Besa Mamucho. These were followed by works by Cole Porter and Irving Berlin, K.D. Lang’s version of Hallelujah by Leonard Cohen and Tonight, Tonight, from West Side Story. They then switched to a jazz genre, with Misty. Lester played a solo of Over the Rainbow, by Harold Arlen. They ended with an aria by Puccini, Oh Sweet Father.

It was a wonderful concert, the only problem being that they were unable to hear the applause because the live audience was muted for the performance. Hopefully, the appreciation will be evident in the evaluation form that was projected on the screen.

Toby Rubin thanked the performers and mentioned that more information about Lester Soo and Maria Cristina Fantini is available on their websites.

Shanie Levin, is an executive board member of JSA and on the editorial board of Senior Line magazine.
Portrait of an Artist

Carly Belzberg

Written by Tamara Frankel
Passion, joy and playfulness – art plays all of these roles for Carly Belzberg. Her art takes a variety of forms, including the art of painting, the art of music and the art of writing. For Carly, these different art forms all serve as a mirror that reflects aspects of her identity. But who she is keeps changing, just as the world around her is in a constant state of flux.

Carly’s art reflects this perpetual state of change. Her recent exhibit at the Zack Gallery at the JCC was titled *The Spirit of Cloud, The Spirit of River*. As the title suggests, the exhibit expressed the freedom and boundless evolution that comes with change.

Carly’s very colorful abstract paintings are divided into series, and true to her fun-loving nature, she assigns them amusing names: *Architect of Wonder*, *Fly-by-Light*, and *Ride it Like You’re Flying*. Each series of paintings Carly creates serves as a snapshot of herself at the time of their creation.

Carly Belzberg grew up in Vancouver. She left the city to pursue extensive studies in art and art-related subjects. She gained a BFA in studio art from Concordia University in Montreal. She then attended Drexel University in Philadelphia, where she received an MA in Art Psychotherapy.

On her return to Vancouver, she obtained a Bachelor in Education Curriculum and Instruction from Simon Fraser University. Carly worked as an art therapist in psychiatric hospitals and nursing homes in Philadelphia, Baltimore and Winnipeg. In her extensive work with patients suffering from dementia, she found that art served as a powerful tool to help people uncover long-forgotten memories, and to bring forward aspects of themselves that they might not have been in touch with for some time. Carly is interested in the potential for growth in the second half of one’s life and the effects that engaging in the arts has for one’s overall wellbeing.

In addition to being a prolific visual artist with her own body of work, Carly teaches memoir writing and art, and also works in private practice as a counselor. She is interested in people’s stories and helps them find ways to express themselves. She finds that while stories are linear and sequential, an image can provide a condensed story. By helping people work in both of these forms, she gives them a new language and opens a door to a new kind of freedom.

Carly volunteers as a Friendly Visitor for the Jewish Senior Alliance. She offers a series of talks to other volunteers to help them show their clients how to write their life stories. She believes in helping people find their authentic voice and in enabling them to make sense of their lives and the lessons they have learned. To her, an unexamined life is not worth living.

“A deeper, or maybe truer self starts to unfold as I give myself permission to explore, experience and play. I am often surprised by beauty and delight as I work with an image and help it come to a state of ripeness or completion.” Carly Belzberg thrives on the excitement of taking risks and not knowing precisely how things will turn out. Her art is whimsical and joyful, bringing pleasure to everyone who views her beautiful images.

She can be reached at:
info@carlybelzberg.com;
www.carlybelzberg.com;
https://www.instagram.com/carlybelzbergart/

Tamara Frankel is a member of the Board of Jewish Seniors Alliance and of the Editorial Committee of Senior Line Magazine. She is also a Board member of the Jewish Community Centre.
CURL UP WITH A GOOD BOOK

Written by Dolores Luber

To my readers, do you have a favourite book? Write a couple of paragraphs about it and send it to me (editor@jsalliance.org). Share the pleasure and the excitement of a good book.

THE BRAIN THAT CHANGES ITSELF:
STORIES OF PERSONAL TRIUMPH FROM THE FRONTIERS OF BRAIN SCIENCE

Written by Norman Doidge, M.D.

Do you believe you can think yourself well, changing the very structure of your brain over time through rigorous training? Norman Doidge does! And so do I, after reading this book. I wavered between scepticism and a growing feeling of wonder. Chapter by chapter, I jumped constantly between the two feelings.

Neuroplasticity is a brand new science—the brain is capable of significant self-repair and healing. According to the results of extensive research, much of the healing—for conditions that range from Parkinson’s disease, to autism, to stroke, to traumatic head injury—can be stimulated by conscious habits of thought and action, by teaching the brain to rewire itself.

I sometimes struggled with the complexity of the scientific research, but, I persevered, slowly, chapter by chapter. I was rewarded for my persistence with the understanding that the brain is malleable, capable and vulnerable. I strengthened my efforts in physical fitness which is extremely helpful in nourishing and providing fuel (i.e. blood) to the brain. I studied my Hebrew texts with renewed vigour; learning a new language is one of the ways to stimulate, at a high level, the synapses of the brain. I am a convert, and you will be too! Available at the Waldman Jewish Public Library, JCC.

DRESSED FOR A DANCE IN THE SNOW:
WOMEN’S VOICES FROM THE GULAG

Written by Monika Zgustova
Translated from the Spanish by Julie Jones.

Read these oral histories of women imprisoned by the Soviets in the Gulag or elsewhere, often startling in their lack of self-pity. Here are eyewitness accounts by female prisoners of Stalin’s forced labour camps. Barcelona-based writer and translator Zgustova offers oral histories of nine women, eight sent to the Gulag and one to a horrific psychiatric prison. The best-known is Irina Emelyanova, exiled to Siberia with her mother, Olga Ivinskaya, who was the intimate companion of Boris Pasternak and inspired Lara in Doctor Zhivago. Her vivid account reveals less about the camps than about the novelist who rejected the Nobel Prize under pressure from the Soviets (he feared reprisals against her mother if he accepted).

Actor Valentina Iyevleva is tragically representative of others: After her father was executed as an “enemy of the people,” she ended up in a Siberian camp where women, even if pregnant, worked as loggers in deep snow, “often up to our waists or higher,” in temperatures as low as 50 below zero, on starvation rations. Small acts of friendship or kindness could determine who survived the brutal conditions. Born in the gulag, Galya Safonova still has the books prisoners made for her from hand-sewn scraps, including a version of Little Red Riding Hood: “They are my greatest treasure.”

The most startling accounts come from women who say matter-of-factly—with no apparent self-pity—that their suffering had benefits. “If I had to live my life over, I would not want to avoid that experience,” says Susanna Pechuro, who did more than five years’ time for anti-Stalinist activity. The bitter experience helped after her release: “A person can turn into a monster in the camps, but if you come out of a camp and you don’t become an ogre, you know that nothing in life can hurt you. You are armored.”

This rare collection shows the terrible cost of that armour (www.kirkusreviews.com). Available at the Waldman Jewish Public Library, JCC.
According to Philologos in *Mosaic*, Israeli politicians have in recent decades become obsessed with calling each other *poodels*. Have I piqued your curiosity? This statement is strange, but true! Puzzled, I wanted to know the reason for this situation!

It all started when Benjamin Netanyahu, before his arraignment in a Jerusalem court on May 24, 2020, on charges of bribery and breach of public trust, said “I’m no poodel. I stand here today as prime minister with his head held high.” Poodle owners may have been indignant, but to tell the truth, there are not many of these in Israel, where the loan word *poodel* is more often used for people than for dogs. REALLY!

This is not just an Israeli usage. To be somebody’s “poodle” or “pet poodle” can be a derogatory expression for being someone’s lackey, or stooge in English too, as it can also be in French, in which *être la caniche de quelqu’un* has much the same meaning. Although poodles were originally bred for hunting purposes as retrievers of water fowl (“poodle” derives from the German verb *pudeln*, “to splash about,” which is related to English “puddle”). Poodles were also, as far back as the 18th century, miniaturized to be lap dogs, the laps they cuddled on being invariably those of women. Standard-sized poodles, too, have often been manicured, pedicured, coiffed, and beribboned. By the late 19th-century, one finds terms like “poodleish” and “poodledom” being used in England to describe men, or the condition of men, who are henpecked and reduced to servility.

In Israel—the year was 1990, *poodel* in its all-too-human sense entered the vocabulary of most Israelis. The accused was Peres’s junior political ally Yossi Beilin, soon to be a chief architect of the Oslo Accords. The charge of poodleishness came from Yitzhak Rabin, Peres’s arch-rival for leadership of the Labor party. Peres was himself labeled “[Ariel] Sharon’s poodel” in signs held by demonstrators outside his home in 2006.

Indeed, as far back as 2001, the poodling of Israel had gotten so bad that the Knesset Committee on Ethics, included “poodle” in a list of words and phrases that it banned from debates on the Knesset floor.

There you have it! I am indeed offended by the misuse of this word and the defamation of the breed. *Full disclosure, I am the proud owner of a gorgeous, brilliant, silver Standard Poodle named Kesem. Greater Vancouver is full of poodles, Standard and miniature; white, black, silver, ginger and parti-coloured. We love these handsome, intelligent, lively, athletic, sensitive, opinionated creatures. The Standards are in the majority here, they weigh between 40 - 60 lbs. These are not lapdogs; these dogs are not pushovers. Although Kesem, my Standard, will try to somehow wiggle into any lap, notwithstanding that his long legs and tail hang over the edge.

"I always wanted to be somebody, but now I realize I should have been more specific."
- Lily Tomlin

"My therapist told me the way to achieve true inner peace is to finish what I start. So far I’ve finished two bags of M&Ms and a chocolate cake. I feel better already."
~ Dave Barry
The silver lining of the pandemic has been for me to have the time to explore Netflix and the other streaming opportunities. We seniors are an eclectic bunch and we have at our fingertips the most comprehensive collection of movies, documentaries, reality shows and television series. Just go to Browse in Netflix and scroll down. Or do a Search for Drama, Crime, Humour, Israeli, or Russian, whatever—it will immediately show you all the movies available in the genre or in the language you ask for. In general, to find a movie or television series, go to Google or Bing Search and ask “Where can I watch _____?” You can rent or buy almost anything! Movies come and go, check out their locations online. My exuberance is reflected in all the five-star ratings. I loved these movies.

**MR. JONES**
2019

Mr. Jones is a historically informed drama about a Welsh journalist, a courageous truth-seeker who travels to 1933 Ukraine, then in the grip of a catastrophic famine. Agnieszka Holland, the director, bears witness to Stalin’s evil. It is based on a real Welsh journalist, who is the unassuming hero of this grim movie. In Ukraine, the world is barren and the grain—‘Stalin’s gold’, is gone. More than anything, Mr. Jones is an argument for witnessing and remembrance. No one has come to Ukraine’s rescue, despite the attempts of those, like Jones, who tried to expose the facts about the Soviet Union. The truth was something few wanted to hear. Well-worth every moment. Available at Telus On Demand, Google Play.

**FIRST THEY KILLED MY FATHER**
2017

First They Killed My Father is a superb film by director Angelina Jolie, about a national tragedy told through the eyes and mind of a child. Adapted by Jolie and co-writer Loung Ung from Ung’s memoir about her family’s experiences after the Khmer Rouge took over Cambodia. Every image and feeling are anchored to the point-of-view of Ung, who was five when the Khmer Rouge captured Phnom Penh and seven when she made it out, her young mind stained by memories of hunger, brutality and sudden death. This is a survival story about a suddenly powerless family doing whatever it takes to get through the day. The young actress who plays Loung is superb. The drama is real, uncompromising. Watch it and be amazed. Available on Netflix.

**LEGEND**
2015

Legend is an honest-to-goodness gangster film, a biopic of Ronnie and Reggie Kray. The actor, Tom Hardy, plays both Ronnie and Reggie in a tour-de-force performance. Playing both the infamously savage Cockney crime lords, Tom Hardy elevates and complicates the otherwise straightforward terrain of Legend, in which the writer Brian Helgeland gives London’s East End gangland a slightly touristic candy-coating of Swinging 60s glamor. This is an incident-packed script which offers little insight into what made either of these contrasting psychopaths tick, or finally explode. In the meantime, there is ample room for this remarkable dual characterization to breathe and bellow. It is so delightfully witty and gorgeous, so fast and furious, we can just enjoy the ride. Available on Amazon Prime Video.

**OFFICIAL SECRETS**
2019

Official Secrets is a movie which describes how a British intelligence officer turned whistle-blower tried to stop the 2003 invasion of Iraq. Based on a true story, Kathrine Gun (Keira Knightley), tries to stop a war after she intercepts an email disclosing a secret plan of the U.S. government. There is a race to the rescue by Katherine’s lawyers, and particularly Ralph Fiennes as Ben Emmerson and lots of bureaucratic villainy. Katherine has courage, personal problems and righteous indignation, but it is Ben who represents the audience-friendly idea that right must triumph over might. Available on Amazon Prime Video.
**CHERNOBYL**

*2019*

*Chernobyl* is an extra-ordinary 5-part fictionalized version of the disaster, relating the events prior, during and after the explosion of one of the reactors at the Chernobyl power plant in Russia in 1997—the worst nuclear accident in history. The material culture of the Soviet Union is reproduced with an accuracy that has never before been seen in Western television or film. Clothes, objects, and light itself seem to come straight out of 1980’s Ukraine, Belarus, and Moscow. The series sheds light on the bizarre workings of Soviet hierarchies, and its utter disregard for human life. The makers of the series have used the outlines of a disaster movie. There are a few terrible men who bring the disaster about, and a few brave and all-knowing ones, who ultimately save Europe from becoming uninhabitable and who tell the world the truth. Notwithstanding the characters and events which have been created by the director, I was in awe of this series and totally immersed in it. Available on Crave, Amazon Prime Video, On Demand.

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**DIAGNOSIS**

*2019*

*Diagnosis* is a seven-part medical mystery series presided over by Dr. Lisa Sanders, the Yale University School of Medicine clinician. Dr. Sanders writes about her difficult-to-diagnose cases in the *New York Times*. Medical professionals and patients from all over the world respond with possible answers to the problem. *Diagnosis* is an emotional, nonfictional drama that highlights the complexities of medical science, the flaws in the American health-care system, and the promise of both modern medicine and technology’s capacity to connect patients with other people around the globe who recognize symptoms that may seem rarer than they actually are. The series appeals to the logical, scientific parts of the brain, but it also goes straight for the heartstrings. Available on Netflix.

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**DAUGHTERS OF DESTINY**

*2017*

*Daughters of Destiny* is a four-part documentary which is a celebration of a pioneering school, Shanti Bhavan, for the children of Dalits (formerly called “Untouchables”), members of the lowest group in the oppressive caste system that still shapes Indian society. Much of it takes place in classrooms and dormitories. But it’s at its best when it leaves the school grounds and follows the children home, into a harsh and unchanging world whose realities seem hopelessly at odds with the ideals of the school. *Daughters of Destiny* succeeds because the writer and director Vanessa Roth got so close to, and spent so much time with, her subjects, five girls at a coeducational school, who are extraordinarily charismatic and open. She makes the point that the combination of caste and gender discrimination is particularly odious. We also see family strife, hopelessness and promise unfulfilled. All Shanti Bhavan graduates give back 20 to 50 percent of their salary to their families, communities, and other children in need. Available on Netflix.

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**STATELESS**

*2020*

*Stateless* is a 6-part television series which takes us inside the Barton immigration detention centre in Australia. It is an exposé of the counter-productivity of the refugee system, or the gross use of force in maintaining it. Countless nations have made their borders harsh instead of welcoming, creating institutions that dehumanize people looking for sanctuary. Directed by Emma Freeman and Jocelyn Moorhouse, this miniseries concerns the captives but especially their captors. It’s successfully immersive with its filmmaking, and love for a good close-up often trapping a viewer inside the sweaty environs of its fictional Australian refugee camp. The stories are far-fetched, but, overall, I watched with interest and sympathy as the characters negotiate within this labyrinth. Available on Netflix.
Clint Eastwood, age 90, is an American film actor, director, producer and composer. His career has spanned more than 60 years. He is continuously productive as an actor and as a director. His latest movie as director is Richard Jewell (2019)—an exceptional character study based on the true story of the security guard who was falsely accused of being the bomber at the Olympic stadium in Atlanta, Georgia, 1996. Cathy Bates, who plays his mother, won the Oscar for Best Supporting Actress in the film. In Clint Eastwood’s filmography, there are 64 movies and television series listed as Acting Roles, beginning in 1955. As Director or Producer, there are 43 films, beginning in 1971. Eastwood has received multiple awards and nominations for his work in the films Unforgiven, Mystic River, and Million Dollar Baby, among others. I was so intrigued by this huge amount of talent and creativity that I decided to review and watch as many of his directorial films as possible. I remember vividly the following movies: Million Dollar Baby (2004), Sully (2016), The Bridges of Madison County (1995), and American Sniper (2014). All excellent films, five star rating!

FOR THIS COLUMN, I WATCHED:

Midnight in the Garden of Good and Evil (1997) is a celebration of Savannah, Georgia—its gracious settings, colourful eccentrics, outrageous gossip, chatty anecdotes and layer upon layer of local history. We are hooked by the charm and beauty of this place. There is a villain and a murder—so very charming and alluring! Utterly delightful.

Space Cowboys (2000) is an implausible action adventure with a geriatric payload (Clint Eastwood, James Garner, Donald Sutherland and Tommy Lee Jones), all old buddies from the NASA space program. We have a problem! An old spaceship has to be repaired, they are the only ones who know how to do it. Go along for the ride, funny, sweet and entertaining.

Mystic River (2003) is a somber tale of friendship, tragedy and loyalty. Dave Boyle, Jimmy Markum and Sean Devine play hockey on a Boston street. A dark sedan pulls up and then drives away with Dave in the back. Dave’s abduction is an act of inexplicable evil, and this story of guilt, grief and vengeance grows out of it like a mass of dark weeds. The acting by Sean Penn, Tim Robbins and Kevin Bacon is intense, the plot complex and enthralling. See it and be deeply moved!

J. Edgar (2011) is a character study of a famous man, played by Leonardo DiCaprio, which lays bare J. Edgar Hoover’s humanity. It portrays a 20th-century titan who, with secrets and bullets, a will to power and the self-promotional skills of a true star, built a citadel of information in which he burrowed deep. The film efficiently condenses history, packing Hoover’s nearly 50 years with the FBI into 2 hours 17 minutes. The film is superb, hypnotic and soul-searching.

The 15:17 to Paris (2018) is an unusual film in that it stars the actual three Americans, Alek Skarlatos, Spencer Stone and Anthony Sadler, who had thwarted a terrorist brandishing an AK-47 on a crowded train to Paris. Eastwood recounts that “the attacker Ayoub El-Khazzani had between 250 and 300 rounds of ammunition, pistols and knives. He could’ve killed 300 people, easy.” The film follows the trio through life leading up to and including their stopping of the 2015 Thalys train attack. I enjoyed the relationship between the three childhood friends traveling around Europe together and the scenes on the same French train line of the fateful attack—realistic and terrifying.

It was an absolute pleasure to watch these movies by the director, Clint Eastwood. His works reveal a depth for understanding human nature and a gift for telling a tale.
CROSSWORD PUZZLE
https://crosswordhobbyist.com/147859/Jewish-Knowledge
For Solution See Page 34

JEWISH KNOWLEDGE

ACROSS
2 Booth
5 Donating money to causes
6 Very religious Jews
7 Evil man associated with Purim
9 Males sometimes wear these
10 The word blessing in Hebrew
14 Prophet
16 Belief in one God
18 Food that is ritually fit to eat
20 Famous scientist
21 You count this
25 Father of the multitude
26 Bible
27 "Snack on" in Yiddish
29 Jewish State
30 He had a boat
33 Get your sandwiches here
34 Moses’ sister
36 Spoken by older Jews
37 Entirety of Hebrew Bible
38 Good luck
39 Circle dance

DOWN
1 Scribe
2 Rams Horn
3 Means Kaddish
4 We do not pray to these
7 His was 3-cornered
8 Jewish “Halloween”
11 Cannot eat this animal
12 People of the ______
13 Religion
15 Who you are
17 Good deeds
19 She who is princess
22 Potato pancakes
23 2nd King of Israel
24 Prophet
28 Meal on Pesach
31 Essential prayers
32 Moses’ brother
34 Ritual bath
35 ______ of David
36 “Day” in Hebrew

HUMOUR!
Walking is a wonderful activity for everyone, whether in tranquil solitude or in the company of our favourite two or four-footed walking companions — be it at a vigorous pace or a rambling stroll. It is good for the mind, body and spirit. Since March of this year, walking is the only real exercise many of us are able to take in safety from the Coronavirus.

**Local walks in Vancouver**

Those of us who live in or near Vancouver are blessed with some of the greatest urban walks anywhere in the world. Some of the best known and most popular in the city itself include these gems: **Stanley Park**, including both the world class seawall and the wooded paths in the forest; the busy seawall walks along **Coal Harbour** and around **False Creek**; the stunningly beautiful and for the most part peaceful (but watch for speeding cyclists) trails throughout the **Pacific Spirit Park** near UBC; the beach paths of **Kitsilano, Jericho, Locarno and Spanish Banks**; the new **Arbutus Greenway**, and the **Richmond dykes**. All of these are easy to reach at multiple access points. All are near public transit, most have firm, level surfaces, suitable for anyone with balance issues, and welcoming for walkers, wheelchairs and scooters. Most have benches for a rest along the way. They are all suitable for walks of any length. The paths vary in terms of dog friendliness and leashing, and in terms of separation from cyclists, but all are clear of cars.

**Trails and walks further afield**

I have enjoyed each of these familiar walks many times and over many decades. But this year, I have discovered, or rediscovered, some wonderful walks a bit farther afield. Here I offer a brief description of a few of my favourite new finds.
FRASER RIVER TRAIL, RIVER DISTRICT, VANCOUVER, SOUTH OF SE MARINE DRIVE

This walk is best reached by car. At its western end, the trail begins a short distance east of Argyle Street, which extends south off Marine Drive down to East Kent Street. The east end, where the new River District neighbourhood is still being built, can be reached from Boundary Road. I like to access the trail at the south end of Kerr Street, more or less in the middle. There I can head west to the end of the trail, where the earliest part of this riverside neighbourhood is located, and back, about 6000 steps. The path hugs the northern shore of the working Fraser River as it winds its way west. The path is wide, level and surprisingly uncrowded. **Bonus:** you can finish your walk with some food and drink at Romers on Kerr Street, steps off the path.

WEST VANCOURER SEAWALK FROM AMBLESIDE TO DUNDARAVE

This is a beautiful and easy walk. The entire walk is wide, flat and paved, with many benches and look-outs. There is public transit and parking near the entire length of the walk, from Ambleside to Dundarave. The path is dog free and bicycle free, filled with the wonderful smell of the sea, with stunning views in both directions. The view walking west is of Point Grey, Point Atkinson and the open Salish Sea, while heading east, you see Stanley Park, the Lions Gate Bridge, and when it is clear enough, Mount Baker. **Another bonus:** the Beach House, a great seaside restaurant at the Dundarave end.

DEER LAKE PARK IN BURNABY

You can drive east on Canada Way to Sperling, turn right, go south one and a half blocks to the Deer Lake parking lot at the eastern end of the lake. The shortest route around the lake is about 5000 steps, but you can make your walk longer on other trails. This walk is generally level and easy, with frequent changes of scene. The best lake views, including the highrises of Metrotown in the distance, are at the northern and eastern sides, but the wooden walkways through the wetlands are a highlight for me, as well as the open, green meadows to the west. This is a quiet, contemplative bit of nature where you can escape from the busy city, especially if you like birds.

TROUT LAKE IN EAST VANCOUVER

Situated in the middle of John Hendry Park on Victoria Drive at East 19th Avenue, Trout Lake is smaller and more urban than Deer Lake. The path around the lake is approximately 3300 steps. It is not paved but it is level and easy to manage. Bicycles have their own separate path, but there are lots of dogs and kids in strollers around. It is a busy, family park with views of the lake everywhere along the walk, lots of benches, and a grove of beautiful old weeping willows trees. At one end is a beach for dogs, and at the other end a beach for Canada geese. There is also an “old school” concession stand with coffee, hot chocolate, ice cream and the like. This walk has the feel of an earlier era.

**Tony DuMoulin** is a founder of the law firm of DuMoulin Boskovich, where he practised commercial and real estate law for 40 years. He has a long history of involvement in Jewish organizations and municipal projects. Tony is on the Executive Board of JSA.

**Health experts are recommending that we spend more time than ever outside this fall and winter, and, except for icy conditions, all these walks are suitable for wet and cold conditions. So for those of you who are able, get up from your easy chair, put on suitable footwear and clothing and GO WALKING, regardless of the weather.**
OUR RUNNERS UP:

“We don’t need a family therapist, Mary. That’s my business! What else have you got to offer us?”
- David Kirkpatrick

“Poppins? I asked for Popnik to look after the kids. Minnie Popnik! Not Mary Poppins!!!”
- Alex Kliner

1. “It’s bad luck to open your umbrella in the house!”
2. “I know you can fly, but they (the kids) only fly El Al.”
3. “I don’t believe you’re Mary Popinsky.”
- Edward Korbin

Thanks to everyone for your creative efforts!

CONGRATULATIONS TO OUR WINNER:
A L E X  K L I N E R

ENTER THE CARTOON CAPTION CONTEST!

Write a caption for the cartoon and send it to us by mail or email

Jewish Seniors Alliance
949 West 49th Avenue, Vancouver, BC  V5Z 2T1
Email: office@jsalliance.org

Be sure to include your name and address. The author of the winning caption will receive a JSA T-shirt and two Tribute Cards worth $18.00 each. We will publish the cartoon with your caption in the next Senior Line.

A bar was walked into by the passive voice.
An oxymoron walked into a bar, and the silence was deafening.
Hyperbole totally rips into this insane bar and absolutely destroys everything.
A non sequitur walks into a bar. In a strong wind, even turkeys can fly.
A synonym strolls into a tavern.
Papyrus and Comic Sans walk into a bar. The bartender says, "Get out, we don’t serve your type."
At the end of the day, a cliché walks into a bar - fresh as a daisy, cute as a button, and sharp as a tack.
A dyslexic walks into a bra.
A simile walks into a bar, as parched as a desert.
The Importance of Music to Seniors: A Personal Perspective

Written by Stan Shear

Music is the universal language of man, and when it is applied specifically to seniors, it assumes a special meaning. To many seniors, music represents the only way in which they are able to communicate. It expresses the way in which they are able to convey feelings and emotions towards others, and in turn evoke reactions. Many seniors in their advanced years are unable to display their reactions in words, but it is a fact that music remains the very last way in which communication is possible. Gentle, soothing music will certainly convey an entirely different reaction from harsh military music.

During my years entertaining seniors, I have experienced the gamut of reactions from seniors of all ages and ranges of emotions, from my musical presentations over a range of instruments and vocal styles, and as such am privileged to share these briefly with you. Furthermore, I have studied various papers on this topic by experts, whose opinions substantiate what I have experienced. The topic is interesting and far-reaching, and conveys a tremendous impact on the quality of life which elderly people experience, and which can make their lives both more meaningful and also extend their years – yes, a true statement.

The Power of Music

In the words of Diane Snyder Cowan, director of The Elisabeth Severance Prentiss Bereavement Center of Hospice of the Western Reserve in Cleveland, Ohio: “From lullabies to funeral songs, music is a part of our lives from the moment we enter the world until the moment we leave it.” “I’ve seen the power of music so many times in older adults,” she recalls. “It’s such a powerful tool and can be accessed so easily.” One well-known application of music therapy is helping people with advanced dementia communicate and engage with their surroundings.

Music can be used to help aging adults manage everything from chronic pain to symptoms of Alzheimer’s disease says Snyder Cowan.

Susan Crossley, a certified dementia practitioner and activities director at Bethany Village in Mechanicsburg, Pennsylvania, can attest to the progress she’s seen in the 50 residents who are part of Music and Memory Grant Program. Approximately 20 percent of the patients are in the late stages of Alzheimer’s.

“You see the tension releasing (as they listen to their iPods),” she says. “The foot tapping, the wrinkles in their foreheads fade away and you know the music is reaching them.”

Research shows that music is powerful medicine, with the ability to elevate mood, decrease anxiety, improve sleep quality and reduce pain.

From my experience, the following are the main points which make music the main media of communication relevant to seniors at residences where I’ve entertained in Vancouver.

- **Anticipation**
  Seniors look forward eagerly to listening to regular performances. At one home, for instance, where I used to entertain regularly before Covid-19 hit us, I would find them waiting for me. It doesn’t matter whether they had heard the pieces before. In the case of residences where I have not entertained previously, they give me a warm welcome and make it abundantly clear what my presence means to them.

- **Preference for Classical Piano Performances**
  This has been an interesting observation that wherever I have performed there is no doubt that the main preference amongst all seniors is for classical music.

- **Love of Old Favorites on Guitar**
  Aside from my classical performances, the next best choice is old favorites on guitar. Old jazz favorites like Baby Face, Put Your Arms Around Me Honey, and It Had to be You, help them relate to the days of their youth, and they love them.

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Dear Hannah,

Since March, I have been watching movies and television series on Netflix and on other sites. I am an 83-year-old man who loves all the medical and crime shows. I appreciate the variety of choices which includes movies, documentaries and reality television series. They have been a welcome distraction during the pandemic...but, my back is starting to bother me—a lot! What can I do to alleviate the lower back pain and still watch my shows? I did not have back problems before this.

- In Pain from Sitting and Watching the Screen

Dear In Pain from Sitting and Watching the Screen,

According to the American Chiropractic Association (ACA) back pain is the second most common reason for doctor’s office visits. The ACA states that poor posture is one of the major causes of back pain. That is, most cases of back pain are mechanical, which means that preventing or treating back pain at home may be a viable option. One of the most effective ways to avoid back pain altogether, especially as we age, is to keep our postural muscles strong and our spine supple, and continue to move in supported ways. All of this can be done with simple stretching. All of the exercises below should be done while sitting in a sturdy chair, such as a heavy dining room chair, preferable not an armchair. Bring the print-out to your physician to make sure that the exercises are safe for you.
I will describe briefly five recommended stretches; but please go to this website, read the full descriptions of the exercises and watch the demonstrations. Print it all out as a reference and as instruction:

https://www.healthline.com/health/back-pain/stretches-for-seniors#reach-back

1. Neck and Chest Stretch: Begin seated, feet flat on the floor, sitting up straight. Bring your hands to rest at the base of your skull, fingers intertwined, thumbs running by your ears and down your neck. Ease your head back into your hands, turning your face toward the ceiling. Inhale deeply. As you exhale, ease your left elbow so it’s pointing more toward the ground, your right elbow toward the ceiling. Take two deep breaths and repeat on the other side.

2. Seated Gentle Backbend: Seated, feet flat, bring your hands to your lower back, with your fingers facing down and thumbs wrapped around your hips toward your front body. Press your hands firmly into your hips/ lower back and inhale. As you exhale, gently arch your spine, leading with your head. Hold for five full, deep breaths. Go back to neutral starting position, and repeat three to five times.

3. Reach Back: Sit with spine straight, inhale deeply, and as you exhale, reach behind you and interlace your hands. Inhale deeply again, and feel your spine growing longer as you sit up taller. Roll your shoulders up and back, moving your shoulder blades down your back. Exhale, straighten your arms. After three deep breaths, release your clasp and return to neutral. Repeat three times.

4. Seated Cat-Cow: Feet flat, knees at a 90-degree angle, hands on your knees, fingers pointing in toward each other. Inhale, and as you exhale, press into your hands and arch your back using your entire spine. Your face toward the sky, pressing your butt out behind you. Inhale again, roll your shoulders forward and pull your bellybutton toward your spine, dropping your chin toward your chest and pushing toward your knees with your hands. During the next exhale, reverse the motion, pulling your chest through your arms and arching your spine again, pressing down into your legs, instead of toward your knees. Repeat three to five times.

5. Gentle Twist: Feet firm, knees at 90-degree angle. Edge forward a little on the seat. Inhale, press down into your seat, sit up straight, your spine lengthening, and lift your arms up overhead. Exhale, turn gently to your right, placing your left hand on the outside of your right knee. Stay in the twist and as you inhale, feel yourself sit up taller. As you exhale, twist just a little deeper. Take three to five deep breaths before releasing the twist and doing it on the other side.

**THE TAKEAWAY**

Not only will a few simple stretches help you treat back pain at home, but they can also help you avoid pain in the future. Our muscles become shorter and lose their elasticity as we age. Avoiding movement only exacerbates these issues, making our muscles weaker and often causing pain. By stretching our backs and chests and keeping our shoulder joints and the joints in our back moving, we can avoid pain, improve posture, range of motion, and maintain a higher quality of life. AND, you can continue to watch all your favourite shows.

Check with your physician before beginning the exercises or if the pain persists. Remember to go to the website and read the complete descriptions. https://www.healthline.com/health/back-pain/stretches-for-seniors#reach-back (Gretchen Stelter, 5 Gentle Back Pain Stretches for Seniors).

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**THE IMPORTANCE OF MUSIC TO SENIORS**

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- **NON-CRITICAL**

I have never experienced an ounce of criticism where I’ve entertained. The residents are totally non-judgemental and appreciate nothing more than that somebody is taking the trouble to give them pleasure. Notwithstanding, lunch takes precedence, and if you do not recognize this, they actually DO start getting irritated!

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Stan Shear grew up in South Africa where he gained his Doctor’s degree in Engineering and his Licentiate in Music, and was actively involved in both his professional field and in music. After he retired in 2004, teaching at Cape Town University on the slopes of Table Mountain, he and his wife Karon decided to follow their kids to beautiful Vancouver where they are happily settled today.
VOLUNTEERISM DURING COVID-19: SUPPORTING ONE ANOTHER WHILE APART
Written by Eireann O’Dea

Volunteering, that is, time and effort that is given freely to benefit other individuals, an organization, or cause without an expectation of remuneration, is a practice that benefits both individuals and society at large. For older adults looking to give back to their communities, utilize their skills and experience new challenges, volunteering can be an extremely rewarding practice.

In addition to providing an increased sense of purpose and structure to one’s life, which may be particularly important following role transitions such as retirement and widowhood, research has documented the numerous positive social, mental, and physical health effects of volunteering. These include increases in social network size and amount of social support; an increased sense of well-being and satisfaction with life, and decreased risk of mortality.

Volunteering also contributes to the strength of a community, that is, it promotes trust, reciprocity, and cooperation for mutual benefit among citizens, sometimes referred to as “social capital.” Compared to other age groups, older adults in Canada dedicate the greatest number hours to their volunteer roles. This fact points to the importance of volunteering in the lives of older adults, and how a volunteer role can often transcend the status of a simple pastime and contribute to one’s sense of personal identity.

CHALLENGING CHANGES FOR VOLUNTEERS WITH THE ONSET OF COVID-19 PANDEMIC

The onset of the COVID-19 pandemic has resulted in challenging circumstances for these volunteers: while communities and their populations are in great need of services and aid, the individuals who are most likely to answer this call have been instructed to stay indoors and limit their contact with others. As a result, the ways in which older adults and other are able to volunteer in their communities has changed.

With the social distancing measures currently in place, many local organizations that typically provide volunteer opportunities for older adults have been forced to cease operations. While some volunteer organizations have been able to find new ways to operate and continue a portion of their services, for others this has not been possible. Community organizations that host volunteer activities for older adults, including neighbourhood houses, community centres, and seniors’ centres, among others, are currently closed.

Regular volunteers for large-scale summer events including folk and theatre festivals, community days, marathon races, and other events, will not be able to participate this year. Institutions that rely on the contributions of older adult volunteers, including hospitals, hospices, religious organizations, and non-profits have seen drops in volunteerism due to older adults staying home. Like so many other industries and services, the reliance of the volunteer sector on human connection and contact has been cause for great challenge during this time. Without the operation of certain physical spaces and the hosting of events, volunteerism, and with it, the social capital it produces, necessarily has to suffer.

VOLUNTEERISM RISES TO THE OCCASION BY ADAPTING THEIR SERVICES

However, this is simply not the case. With so many suddenly out of work, home-bound, socially isolated, and struggling financially, the pandemic experience has exposed the importance of volunteering and providing help to those in need. Many local organizations have risen to the occasion by adapting their services. Seniors’ centres have organized volunteer-based grocery deliveries for older adults and others who are homebound. Recreation centres have coordinated regular telephone-based check-ins with their members. Fundraising efforts have been initiated to support hospitals and their essential workers, food banks, hospices, and vulnerable older adults, women, and children.

We have all heard mention of acts of neighbourly kindness being performed by others, whether it is shopping for an elderly neighbour, participating in a driveway birthday party, or breaking out the noisemakers in support of first-line workers every evening at 7:00 p.m. Many of the individuals who have chosen to take on these new roles are older adults themselves, and organizations across Canada have had to turn down requests to volunteer because they do not have enough positions to fill. While we may be forced to maintain physical

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Hong Kong has always been a bustling city with neon lights, and a real sense of vibrancy! Growing up as a young boy left me with many choices for entertainment. For me, it was many games of ping pong and movies with friends! Life moved fast.

My dad was a high school teacher and to my advantage, I never felt micro-managed. However, it was an unspoken assumption that I would complete high school and go on to University. Hong Kong had at the time only two Universities, so, needless to say, it was a challenge to get into either! I followed my brother to Canada. While I was accepted at The University of McGill, I met first with my brother in Winnipeg and decided to enrol at the University of Manitoba. What a change in every way. I spent three years studying in Winnipeg but escaped the mosquitoes in summer by joining relatives in Boston and being employed in the restaurant business. I felt as if I was creating a base for my future.

From Winnipeg, I moved to Vancouver to attend U.B.C. where I completed my M.B.A. It was here that I felt as if I was returning home! I studied statistics and computer science.

Feeling an urge to expand my knowledge, I moved to Singapore where I lectured at the University. This proved to be an amazing year as it allowed me to reflect on my life and explore my options. During this period my parents immigrated to Canada.

As my life started to change and I became a parent, I accepted corporate jobs and tenure in Canada and Hong Kong and spent the next twenty plus years in senior management positions, managing thousands of employees and overseeing large acquisitions. It was during one of those acquisitions that it was expected of me to move to Denver to ensure the acquisition went smoothly. Business life was all consuming. The demands on my life were nerve-racking.

Finally, it was time to consider my retirement. Since my parents moved to Vancouver, it seemed a perfect choice for me to settle here. It was here that I decided I would like to connect and engage with the larger community and continue with volunteering which has always been a big part of my life. Three years ago, I saw an ad for Senior Peer Support Volunteering and I thought this would be a good fit as I had already spent a large part of my life listening to colleagues and being a mentor. I signed up and took the training. I have truly enjoyed each senior to whom I have been assigned. These seniors have different stories and very unique lives. Being a part of their lives has been very enriching as I also continue to learn.

Grace Hann is the trainer of volunteers of Senior Peer Support Services. She has been training volunteers and supporting seniors for over 20 years.

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VOLUNTEERISM DURING COVID-19

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separation, acts of kindness and support towards others have continued to thrive. Over the past few months, I have heard the question “Will things go back to how they used to be?” asked repeatedly.

In addition to increased awareness and measures regarding public health and safety, I hope that these acts of community support and volunteerism will leave a mark on society.

This crisis has brought awareness to the tremendous impact that volunteers make on our communities every day. And by following their examples during times of crisis, we can remain connected even while apart.

Eireann O’Dea is a PhD student in Gerontology at SFU. Her research interests are related to community engagement among older adults, ethno-gerontology, and environmental accessibility.
When Covid-19 raised its ugly head in Canada this past March, it went straight to Long Term Care (LTC) facilities. Covid-19 accounts for about 80% of seniors’ deaths from this virus. Of particular note were the provinces of Ontario and Quebec which suffered a disproportionate number of fatalities. The result of this pandemic caused a number of Canadians to suggest that the Federal Government should take over responsibility for all LTC in Canada. This suggestion was, in part, as a result of the Canadian Armed Forces devastating report on LTC in Ontario. Among its recommendations was the understatement that the LTC system needed a major overhaul.

To even consider transferring a provincial responsibility to the Feds is specious, without any merit and can be classified as a ‘knee jerk reaction’. Our main discussion will be how we can fix a system that is strained and overburdened.

When the division of powers and responsibilities were divided between the provinces and Ottawa, the provision of health services was given to the provinces.
The Federal Government gives the provinces transfer payments for certain mandated services including health care in recognition of the high cost of the services provided. For fiscal 2020-2021 Ottawa will transfer $5.65 billion.

**How Do We Fix a Problem That Is Long Overdue for Fixing?**

If you haven’t already read Dr. David Keselman’s article, *For Better or For Worse* in the July issue of *Senior Line*, please read or re-read it. The article has many recommendations for fixing the LTC system. Let us delineate what steps need to be done to make the LTC system better reflect the changing needs of seniors in LTC. Let us understand that seniors entering LTC require more complex care and are often cognitively and physically challenged. There are many things that can be done if there is the will and financial commitment by various level of government and by private supporters.

**Improving Long Term Care**

There is no magic bullet to improve LTC. Certainly, allowing Ottawa to take over is retrograde. When organizations who care for the elderly do not reinvent themselves as their clients require more complex care, they become prey to falling behind their sister agencies.

Reinvent means to redo or to makeover as new. What are other jurisdictions doing to reinvent how residential care for the elderly should be provided?

**What follows is a non-exhaustive delineation of what needs to take place as soon as possible and this includes lessons learned from Covid-19.**

1. Governments need to re-arrange their spending priorities for LTC and invest more funds to replace outdated facilities with a more home-like philosophy. LTC should move away from the hospital model with its shiny floors, long corridors and institutional ambiance. A number of local LTC facilities have initiated such changes and can be imitated.

2. Residents of LTC facilities should live in self-contained pods of up to 14 with dedicated staff that includes all services and care being provided by the same staff.

3. Require LTC facilities to have dedicated staff for Infection Control and Quality Assurance.

4. Advocate to our Ministry of Health and through our MLAs to ensure equipment and devices needed for the flu and Covid-19 are replaced and upgraded as needed.

5. Residents of LTC facilities who are able should pay more for their care and services (without the facility being penalized by the funding agency). In the USA residents are assessed by their assets, unlike Canada where we are assessed by the income from our assets.

6. Ensure LTC facilities are funded adequately and expect equal pay for nurses in LTC with those who work in Acute Care.

7. Ensure there is full compliance with the Covid-19 vaccine when it becomes available to specific groups: first responders, front line health care workers and vulnerable/ high risk older adults. This requirement also includes the influenza vaccine, especially the high dosage vaccine.

9. Codify best (prescribed) practices from the experiences of the current pandemic so there are provincial Ministry of Health mandatory requirements for all facilities. The standards must be higher than that of Accreditation Canada which is voluntary. Reporting on status of the prescribed best practices will be required on a periodic basis to the local health authority. The local health authority should have qualified inspectors to review non-compliant facilities and to ensure any shortcomings are remedied.

These are a few of the changes required for a long overdue makeover/reinvention of LTC. In my opinion, this is a Provincial responsibility and should never be part of the Federal government under any circumstances.

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Ken Levitt, MSW, is a former CEO of the Louis Brier Home and Hospital. He has an extensive background in corrections, child welfare, public assistance and services to seniors. Ken has served on the Board of JSA since 2011 and is a Past President.
Our Canadian Charter of Rights instructs us to establish the basic principles, the basic values and beliefs which hold us together as Canadians so that beyond our regional loyalties there is a way of life and a system of values which make us proud of the country that has given us such freedom and such immeasurable joy. Furthermore, the Charter clearly states that everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

One other article in our Charter of Rights and Freedoms that is particularly relevant to my thesis is article 15.1 that declares “Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability. What I wish to address and emphasize is the need for our Basic Values, Right to Security and Equal Benefits to be enshrined in law to protect and guarantee the highest standard of care to those members of our elder population that find themselves in a long term care facility.

TIME TO RESOLVE THE REPREHENSIBLE STATE OF OUR LONG-TERM CARE AND ASSISTED LIVING FACILITIES

We are all painfully aware of the numerous glaring shortfalls, the impact of which has been exposed and highlighted by the Covid-19 crisis. The time has arrived for all of us concerned to join together and support in any way we can, the formidable task of taking the appropriate action required to resolve the reprehensible state into which our long-term care and assisted living facilities have fallen, causing totally unnecessary suffering and deaths.

The Canadian Charter of Rights clearly states that everyone has the right to life, liberty and security.

Where do we begin the rebuilding of the facilities that are supposed to provide a safe, secure and healthy environment for our parents and loved ones? Instead, the situation has spawned a disproportionately large number of Covid-19 cases resulting in tragic mortalities often occurring in isolation away from family and loved ones. Where is the safe haven we seek and expect to accommodate and serve, in the best manner possible, for the most vulnerable of our citizens?

TIME TO RESOLVE THE REPREHENSIBLE STATE OF OUR LONG-TERM CARE AND ASSISTED LIVING FACILITIES

If we can all agree that the new level of care is needed, we now must devise the standard made available to all Canadians as an inalienable right, thus assuring the same high quality of care and support to all our citizens in the final stage of their lives. Who then should be charged with the enormously challenging task designing and establishing a National Strategy that will serve as a model for the world? The scope of this ambitious but mandatory complete re-invention and rebuilding of every aspect of what has evolved into a hodgepodge of elder care facilities will require political will and a tremendous amount of resources both monetary and intellectual. The only logical entity that can bring a project of this magnitude to fruition is our Federal Government.

IMPLEMENTATION OF A SENIORS CARE NATIONAL STRATEGY

The scope of this noble undertaking of establishing and implementing a Seniors Care National Strategy is daunting but we are obligated to establish a timeline and guidelines and set in motion the process that will guarantee and secure all Canadian seniors of the same high quality care and service when they require it.

There is enough current information available, thanks to the ravages of Covid-19 to identify the failings of the seniors care systems across the country. These failings encompass the aging and dysfunctional infrastructures, staffing problems and lack of preparedness for responding to communicable diseases including epidemics.

We must not allow history to repeat itself. The hard lessons learned from the current pandemic must teach us that the path we forge forward must address and greatly improve the future state of care and security of
our elders and diligently maintain the new National Strategy indefinitely.

We have a good example right here in BC of what damage provincial interference in seniors’ care is capable of inflicting. It is clear that policy decisions going back two decades have encouraged inflating profits in the private sector by replacing union staff which are paid union rates, with contract workers which has resulted in creating personnel shortages, declining working conditions and less access to public funded care.

Statistically, 67% of long-term care in BC is supplied by a combination of not-for-profit and for profit organizations while the remaining 33% is being supplied by provincial health authorities. Most direct care (approximately 2/3) is delivered by care aides who are the lowest paid workers. Operators are not monitored to ensure that they are providing the number of care hours they are being paid to deliver.

TWO OTHER PERTINENT FACTS OF NOTE:

1. In the year 2017-2018 (the last year for which data is available) while receiving the same level of public spending, contracted not-for-profit long-term care facility operators spent $10,000 more per resident than did for-profit providers.

2. The for-profit long-term care operators failed to deliver 207,000 funded direct care hours, while the not-for-profit long-term care facility operators exceeded direct care hour targets by delivering an additional 80,000 hours of direct care beyond what they were publicly funded to deliver.

Let us all join together in demanding that our Federal government give a new Seniors Care National Strategy the priority it deserves.

New tests show SonoMask able to Neutralize 99.34% Covid-19

New external tests conducted in the Internationally accredited ATCCR Laboratory show that Sonovia’s fabric, embedded with zinc oxide nano-particles, has a strong antiviral effect which successfully neutralizes 99.34% of COVID-19, even after 55 wash cycles. It is now available in Canada.

Israel start-up Sonovia Ltd. engineered a unique reusable mask with antiviral properties that lasts over a year. The company applied its anti-microbial technology, developed in 2013, to a line of reusable, dual-layered, face masks that destroys bacteria, fungi, and neutralizes COVID-19. Relative to its competitors, the SonoMask offers superior protection, reusability, and comfort. The SonoMask beats the N95 in 3 areas: functionality, longevity, and effectiveness.

• Adjustable sizes for men, women and children
• Effective even after 55 wash cycles
• Fabric allows for superior breathability

Proven to neutralize COVID-19

Sonovia’s SonoMask has undergone external laboratory tests, which successfully corroborated that its unique and permanent fabric impregnation of Zinc oxide nano-particles have a strong antiviral effect that successfully deactivates 99.34% of COVID-19 particles even after 55 wash cycles.

Using their patented cavitation process invented by Chemistry Nobel Prize Winner Sidney Altman, Sonovia has been able to utilize their years of research into creating the most effective virus prevention gear available on the market.

Sonovia’s ultrasound-based technology durably coats the individual textile fibres. This ensures the fabric to be reusable and washable. Moreover, Sonovia’s technology uses 50% less chemicals and 100% less chemicals binders than the current method of fabric finishing.

Special pricing available for Senior Line readers. Limited quantity available.

For more information contact
778-895-5258
sonoviamaskcanada@gmail.com
Althought I have lived in Canada for most of my adult life, I still keep in touch with some of my friends from the “old country.” When I spoke with Birgit a while back she wanted to know what I had done over the spring and summer, but that very ordinary question really threw me, and I went blank. The only thing that came to mind was that I was at home, walked the dog, baked and gained weight. Birgit said that was exactly what she had done; but, a few months later, she had lost her initiative and even getting out of bed had become a chore. Her situation is not unique; she may live 7,500 kilometers away and on a different continent but Birgit’s story is shared by thousands of elderly Canadians whose lives have been interrupted and likely changed forever by the Covid-19 pandemic.

Elders are vulnerable and at risk

People over the age of 60 have been classified by Health Canada as vulnerable to serious cases of Covid-19. As we age, we are more likely to have underlying chronic medical issues such as diabetes or other health problems that can compromise the immune system. That means that we have less resistance to fight off a debilitating virus. In Canada over 90 percent of the close to 9,300 (at the time of writing) Covid-19-related deaths are the elderly. Most of older adults will probably not contract the virus but that does not mean that they are not affected indirectly. In the Vancouver Sun (July 31, 2020) Gadermann and McAuliffe refer to an Angus Reid Institute survey that found that “50 per cent of Canadians felt their mental health had worsened during the pandemic, indicating high levels of worry and anxiety.” On top of that a 2020 Statistic Canada report Canadians rate their mental health as 35% lower than what was recorded in 2018. They added that the Corona virus is not distributed equally across the population but is more prominent amongst the socially isolated and marginalized. As a “vulnerable” population, Canada’s seniors fit into this classification.

Older adults are not a homogeneous group—they represent a range of socio-economic, cultural and religious backgrounds with different medical histories and cognitive abilities. There is truth in the old saying: you have to be tough to grow old as aging is not easy. Many elderly are socially isolated, financially disadvantaged and have declining health. Loneliness is often a reality for many who may lack close relationships with family, friends and community groups. Deborah Brauser, a medical journalist, writes that safety measurements like physical distancing are critical to combating the spread of Covid-19. At the same time she points out these measures come at a high cost for seniors’ mental health and general well-being. Side affects may be loneliness, anxiety, depression and declining cognition. Dr. Brent Forrester, Co-president of the American Association of Geriatric Psychiatry, concurs with Brauser: “social connectedness and engagement with other people are important to promote successful aging but that is being directly challenged by physical distancing.”

Special conditions in long-term care facilities

Social distancing has been and is particularly difficult for those who are no longer able to live independently. During the pandemic visitors have not been allowed in care homes and social distancing is strictly followed. Seating arrangements in common areas and dining rooms are six feet apart and recreational events have been cancelled. People with cognitive impairment may not understand why their loved ones have stopped visiting and why they can no longer sit close to their table mates.

There is truth in the old saying: you have to be tough to grow old as aging is not easy.

Most of the 9,300 Covid-19 related deaths in Canada are seniors in long-term care facilities. But, it is not only residents who are anxious, care home staff is also affected. It is difficult to see people you have cared for and grown fond of suffer. These are critical care and frontline workers who go to work every day knowing that no matter how much they give of themselves, they
cannot reverse the situation and bring back the times prior to the devastation caused by Covid-19.

**TRAINING THE CARE-GIVERS**

A Swedish pilot program MHFA (Mental Health First Aid) trains long-term care providers working in facilities where most residents have been diagnosed with dementia to understand mental health from a holistic point of view. Course materials include an introduction to anxiety and mood disorders, effective communication techniques, and mental health prevention strategies. Emphasis is also placed on self-care tools such as meditation, re-framing and mindfulness. The goal is for the long-term providers to feel comfortable when working with dementia residents and to recognize early non-verbal signs and symptoms of anxiety and depressive disorders. Confident and competent care givers have the ability to provide a nurturing environment which will reduce tension and stress.

**TREATMENT OF MENTAL HEALTH ISSUES SUCH AS ANXIETY AND DEPRESSION**

Research shows that a large part of the population will at one point in their lives experience a mental health crisis. Today the stigma associated with mental health has for the most part lost its grip. Those affected are now able to seek treatment without being afraid of social repercussions. Deteriorating mental health such as anxiety and depression may be difficult to detect in the elderly as symptoms are often dissimilar to those in younger people. More specifically, when seeing a physician, older adults may complain about headaches, gastric problems, insomnia and general feelings of listlessness but they may not mention their fearfulness, excessive crying, lack of appetite and absence of enjoyment. Unfortunately, concerns such as emotional health raised by seniors are often dismissed or minimized by both professional and familial caregivers.

Sporadic feelings of anxiety are a normal part of life. That said, frequent episodes of intense worry and fear about everyday situations can be crippling and interfere with all facets of life including relationships. Depression or severe sadness may result in total withdrawal which can be paralyzing and if untreated life threatening. When a person feels that constant worrying is getting out of control, the time has come to seek help from a mental health specialist. The Mayo Clinic recommends acting sooner rather than later as anxiety and sadness may not go away on their own but may get worse over time. It is especially crucial for those who have suicidal thoughts and behaviours to get immediate emergency treatment.

While the majority of older people may not be physically affected by Covid-19, current studies show a correlation between the pandemic and an increase in anxiety and depression. Still as with everything else there are opposing views. An interesting 2020 University of British Columbia study concludes that adults over the age of 60 showed less anxiety and depression than those between the ages of 18 and 59. “Our findings provide new evidence that older adults are emotionally resilient despite public discourse often portraying their vulnerability. We also found that younger adults are at a greater risk for loneliness and psychological distress during the pandemic. (Journal of Gerontology: Psychological Sciences, Patrick Klaiber.)” Klaiber questions if the short duration of the study (mid-March to mid-April 2020) is sufficient enough to arrive at the conclusion. It would be interesting to know how may subjects and how these were selected, and if those selected were socially isolated.

**HELP IS AVAILABLE TO SENIORS IN DISTRESS**

For those whose mental health is fragile, who are giving up hope that things will get better, there is help available. The first step is to make an appointment with a family physician to truthfully discuss the concerns. Anxiety or depression can be symptoms of underlying medical problems so the doctor may recommend a full medical exam. A July 31st Vancouver Sun article informs the reader that the BC Psychological Association has proposed a pilot project where a mental health professional shares office space with a medical doctor. Following a talk with the physician, patients have access to a psychologist or a registered clinical counsellor for a half hour consultation. There is no additional cost for the service as it is covered by MSP. Similar pilot studies in Ontario and by Vancouver Coastal Health have proven beneficial and shown significant reduction in anxiety and depression.
THE CHALLENGE OF PROSTATE CANCER TO PATIENTS AND THEIR FAMILIES

Written by Dr. John Oliffe

Prostate Cancer:
Some briefing notes

Prostate cancer continues to challenge many Canadian men and their families. Indeed, with the aging population, increasing male life expectancy and advances in screening we can reasonably expect that increasing numbers of men will be diagnosed with prostate cancer in the future. That said, for many men, prostate cancer emerges somewhat unexpectedly without symptoms. Living with prostate cancer (and/or its various treatments) is a long game that takes significant work and adjustment for most men and their families. Offered here are a few briefing notes about prostate cancer with the intent to orientate those at risk for prostate cancer as well as affirm the experiences and efforts of men who are living with prostate cancer.

The Prostate Specific Antigen (PSA) Test

The PSA blood test has been available for more than 30 years – and it provides a marker to indicate the potential for abnormalities and/or changes in the prostate gland. It is key to discuss the PSA with your family doctor and do some additional research in deciding if you want to be tested. To be clear, the PSA won’t provide you with a prostate cancer diagnosis, but an elevated level may indicate the need for additional tests to diagnose (or rule out) prostate cancer. These days there is less haste to act on a single elevated PSA level. Rather, we tend to watch PSA levels over time to monitor for patterns and changes that might indicate the need to move forward with diagnostic tests. For men who have been diagnosed and/or treated for prostate cancer the PSA offers some different longitudinal insights to indicate potential dormancy, progression and/or recurrence of the prostate cancer.

Being diagnosed with prostate cancer

Because most prostate cancers are in the lateral lobes of the gland they don’t always encroach on the urethra to invoke urinary symptoms (i.e., frequency, pain urinating, incomplete emptying of the bladder). Moreover, pain and reductions in physical function – symptoms that typically prompt men to see their doctor – rarely accompany prostate cancer. Instead, the story most often told is one of near or recently retired healthy men who, in routine check-ups, included a PSA test that eventuates to reveal prolonged elevated levels warranting a prostate gland biopsy. A biopsy returning a Gleason score (6-10) highlights the existence and severity of the prostate cancer. Of course, this incremental diagnosis is a shock, and many men suggest that when receiving the bad news from their doctor they hear very little beyond the word cancer.

Deciding on treatment

With a diagnosis of prostate cancer there are some important treatment-related decisions to be made. In low grade prostate cancers there may be an option for Active Surveillance wherein the cancer can be monitored via regular PSA tests and/or biopsies as a means to delaying treatment. Some men cope well with this option while others want to treat early with the intent of eradicating the prostate cancer while it is likely confined to the prostate gland. The treatment options are surgery (i.e., prostatectomy) or radiation therapy (i.e., external beam radiation, Brachytherapy) and most men research these options to work with their doctors in making a treatment decision. Both treatments have side effects including the potential for erectile dysfunction and urinary or bowel incontinence. It is very important for men to thoughtfully consider and fully understand their treatment preference, including potential side effects, rather than rush into a decision.

After treatment

It is key to anticipate that recovery from surgery or radiation therapy

Living with prostate cancer is a long game that takes significant work and adjustment. “
will take some time. Men who work should negotiate a graduated return to allow themselves time to successfully recover and transition back to their job. Urinary continence and erectile function similarly take time to re-establish, and again, it is important to be patient in exploring all the options to re-establish those functions and broader pre-treatment roles and relationships. Ideally, discussions about treatment effects and plans for mitigating risks and bolstering recovery should be made before treatment. A lot of partners also work very hard to assist men through their prostate cancer journeys — but a word of caution — they too need to self-care to avoid the fatigue that can accompany their care-giving efforts. It is also important to note that prostate cancer can escape the gland and spread to other parts of the body — and even when a man is deemed prostate cancer free there may be reoccurrence. With this comes additional treatment decisions (i.e., androgen deprivation therapy, chemotherapy) — and the potential for significant distress. Certainly, anxiety (excessive worry about the future) and depressive symptoms (ruminating on the past) are common challenges that can come together for men living with and/or in fear of prostate cancer recurrence.

It is fair to say that prostate cancer is defined by many challenges and transitions. However, there are positives in how most men successfully live with, rather than die of prostate cancer. In addition, the advances in primary and recurrence treatments have been enormous affording important gains for men and their families. Perhaps the final note here is to say — slow down to make informed decisions across the entire prostate cancer trajectory as a means to ensuring peace of mind and avoidance of decisional regret.

Dr. John Oliffe is a Professor and Tier 1 Canada Research Chair in Men’s Health Promotion at the School of Nursing, UBC. As founder and lead investigator of UBC’s Men’s Health Research Program, John’s work focuses on masculinities in the areas of male depression and suicide prevention, psychosocial prostate cancer care and smoking cessation amongst fathers.

COVID-19 AND ITS PSYCHO-SOCIAL EFFECTS ON OLDER ADULTS

...Continued from Page 31.

The BC Psychological Association also provides a free hotline referral service where local psychologists, their particular expertise and therapy methods are listed.

HELPFUL NUMBERS

• BC Psychological first aid hot-line: 604-730-0522 or 1-800-730-0522 (Monday-Friday, office hours only)
• Jewish Senior Alliance 604-732-1555
• Vancouver Crisis Centre 604-272-1811

Rita Roling worked in the social service field for over three decades. She is a firm believer in volunteerism and has for many years been actively involved with the Jewish Seniors Alliance. She is on the board of JSA and Past Vice President, and also a member of the editorial committee.
PANDEMIC AND TECHNOLOGY: VIRTUAL MEDICINE—TELEMEDICINE AND VIRTUAL CARE

Provincial governments across the country have greenlit telemedicine and virtual care. “We have been forced to adapt, but the results are promising,” said Dr. Tom Elliott, medical director at BC Diabetes in Vancouver, BC. “Physicians are allowed to bill their services at the same rates as they would for in-person visits. Many healthcare providers were slow out of the gates, but most of us are now running our practices at, or near, full steam.”

WHERE DOES ONE BEGIN?

HealthLink BC’s virtual physicians provide confidential health information and advice, HealthLink BC’s virtual physicians are doctors from across British Columbia. They can help you stay healthy get better, manage chronic conditions and seek further treatment, if needed.

HealthLink BC virtual physicians are available to 8-1-1 callers after assessment by one of our registered nurses. If the nurse determines that further medical assessment by a doctor would help you get the best advice on when and where you should seek care, they may refer you to your family doctor or nurse practitioner, a health provider in your community or one of our virtual physicians.

VIRTUAL PHYSICIAN BY PHONE

One of HealthLink BC’s medical office assistants will work with you to schedule a telephone consult with a physician. Before ending the call with 8-1-1, the assistant will find out what the best day and time is for the physician to call you and confirm your contact information. At the time of your appointment, the physician will call you directly. Choose a distraction-free, private location. Have a pen and paper ready to take notes. Ensure your device is charged.

VIRTUAL PHYSICIANS BY VIDEO, SET UP THE MEETING BEFORE YOUR VIDEO CONSULT

Similar procedure but now you need to install the Zoom app on your device.

From a PC or Mac click or tap the “Join From Your Browser” link to test your audio and video connection. From an iOS or Android device go to Google Play/App Store to download and install the Zoom app, then click or tap the “Join a Test Meeting” link to test your audio and video connection.

TO JOIN THE VIDEO CONSULT

Click on the Zoom Meeting link in the email. The doctor will call you at the scheduled consult time and provide a unique code to enter into Zoom. Entering this code will admit you to the consult. You may also hear from the medical office assistant to confirm you are ready. Click the “Join Audio” and “Start Video” icons. You will be placed in a virtual waiting room until the physician admits you into the video consult. In the video consult, to mute or unmute your microphone or to start or stop your video, click on the icons located in the bottom left corner of your screen.

NOTE: Is it an emergency? If you or someone in your care has chest pains, difficulty breathing, or severe bleeding, it could be a life-threatening emergency. Call 9-1-1 or the local emergency number immediately.

For more explicit instructions consult the website below:

HealthLink BC: Virtual Physicians at HealthLink BC
I LOST MY MOBILITY DURING COVID-19!

Written by Tamara Frankel

Since the outbreak of Covid-19 in mid-March, I stopped using my car, instead I walked between 10 and 12 kilometers daily. I walked everywhere in the city and discovered many new parks and sites I did not know. That was my way of dealing with the pandemic.

Until May 15th. That Friday I had Shabbat dinner at my son’s house. My son and my 9 year-old-grandson were about to walk me home when my grandson took out his skateboard. I decided to take it for a spin. After all, I was in tip-top shape. Moments later, I was flat on the driveway with a broken hip!

I have often wondered what I would do if I lost my mobility. Well, it happened. The next two weeks entailed much pain, surgery, a stay in two hospitals and lots of physiotherapy.

My daughter flew in to take care of me when I came home. I was completely dependent. I needed help with everything. I was lucky to have a big “bubble”—16 members of my family, as well as a few friends who came to my house. Others dropped off food and left it at the door.

Thanks to physiotherapy I was able to walk up the 14 stairs to my bedroom from day one, enabling me to sleep in my own bed, and within three weeks I no longer needed a walker.

Enter the next challenge. My original plan, prior to the pandemic, was to celebrate my grandson’s Bar Mitzvah in June at the remains of a 2,000-year-old synagogue in Tzippori, Israel (Following the Bar Kokhba revolt of 132-135, Tzippori became one of the Galilean centers where rabbinical families from Judea relocated). With the onslaught of the Coronavirus we needed a plan B. So instead of celebrating in a 2,000 year old synagogue we decided to celebrate in a 40 year old house in Vancouver; my house became the venue for the Bar Mitzvah.

It turned out that planning a Bar Mitzvah from the sofa was a welcome challenge. The Bar Mitzvah boy, his mom, my daughter Dana, and I went over the prayer book in an attempt to personalize it by adding poems by Israel’s poet laureate, the late Yehuda Amichai. We printed our own prayer booklet and emailed it to all the people who would be attending on Zoom.

We were lucky to get a Torah scroll on loan from Beth Israel synagogue. It took some planning to figure out how to construct a Bimah (podium), as well as comfortable seating for 18 people in the living room.

The Zoom Bar Mitzvah, while having its unique challenges, also revealed some delightful gifts: it enabled us to celebrate with friends and family far and wide, many of whom would not have been able to celebrate with us in person in Israel. Via Zoom, we were able to assign a musical video to Sebastian’s grandparents in Honolulu and a reading to his aunt in New York. Sebastian himself ended his Dvar Torah with a beautiful rendition of Israel’s national anthem Hatikvah on the piano—in the hope for a better future and a better world.

It is three and a half months since my injury. I am far from walking 12 kilometers but I can walk without a cane and am fully independent. I realize that losing my mobility did not kill me. I was lucky to find alternative occupations and interests and even luckier to have a big supportive family that helped me survive. No matter the changes in the world, or in my world, family will always be paramount.
Did You Know?

Jewish Seniors Alliance Peer Support Program provides services to over 200 seniors with varied needs, from diverse cultural backgrounds. Services are delivered in multiple languages by highly trained and motivated volunteers, who receive certification after 55 hours of training.

Seniors Stronger Together

Your support makes a meaningful difference in the lives of seniors

"In supporting other seniors, I am helping myself. My personal life has changed and benefitted tremendously. I have felt more fulfilled and engaged in my community. I have made many new friends through the volunteer program."

Peggy, Volunteer

"Connecting with other peers has been a true blessing in my life. It gives me a sense of purpose. My listening skills became a part of my life. Not only have I helped others but I have received many benefits for myself."

Audrey, Volunteer

JSA has initiated several supportive and distinct peer services offered to all seniors in the lower mainland, promoting self-empowerment, volunteerism and seniors helping seniors.

Peer support is a one-to-one service provided by specially trained volunteers who are supervised by professional staff.

JSA Peer Services include: Weekly Peer Support Sessions, Friendly Phone Calls, Home Visits, and Information Referrals. These services are provided free of charge.

We Need Your Help!

To continue this needed service PLEASE DONATE TODAY! Show your support, become a member/supporter of Jewish Seniors Alliance. Donate by phone at 604-732-1555, online at www.jsalliance.org/donate/, or fill in the form on the opposite page.
OUTREACH

JSA provides annual programs to empower, inform, and educate, which are designed to enhance and improve the quality of life for seniors, including our Spring Forum, Fall Symposium and Empowerment Series.

Three times a year the Senior Line Magazine will come to your door, chock full of informative, innovative, and cultural articles. Our website www.jsalliance.org is bursting with useful information, including an up-to-date calendar listing senior events, articles, videos and much more. Follow our Facebook Page for curated articles on topics about seniors.

ADVOCACY

Advocating for the needs of seniors and seniors’ organizations in the Lower Mainland, JSA responds to concerns with governments, public agencies and funding groups, including at this time:

- Urging the federal government to implement a national, universal pharmacare and dental insurance program for seniors.

- Participating in webinars and zoom meetings to share information that focuses on issues that seniors are facing due to the COVID-19 pandemic.

- Working with other groups to advocate for provincial government mandated higher staffing ratios in long term and assisted living facilities.

RETURN TO:
Jewish Seniors Alliance
949 W 49th Avenue, Vancouver, BC V5Z 2T1
Light one Candle

The Board of Directors and staff of Jewish Seniors Alliance wish you and your family a Happy Chanukah!

Help JSA celebrate Chanukah and Spread the Light
Be part of our second annual fundraiser.
Your contribution to JSA will provide support to seniors in need.

“Light one candle to bind us together with peace as the song in our heart!” ~ Peter Yarrow

Don’t let the light go out!

Spread the Light with Jewish Seniors Alliance: 604.732.1555 | office@jsalliance.org | www.jsalliance.org